Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Open to Public Inspection

Dep	artment of	the Treasury	Go to www.irs.gov/Form990 for instructions and the latest info	•	- O	Inspection
A			endar year, or tax year beginning 10/1/2022 , and endi		0/2023	ı
В		applicable:	C Name of organization INTERNATIONAL RESCUE COMMITTEE, INC	D Employer		n number
	Address	change	Doing business as			
\Box	Name of		Number and street (or P.O. box if mail is not delivered to street address) Room/suite	13-5660870)	
\sqsubseteq	Name ch	ange	122 EAST 42ND STREET	E Telephone	e number	
Ш	Initial retu	ırn	City or town State ZIP code	212-551-30	00	
П	Final return	/terminated	New York NY 10168	212-001-00		
=			Foreign country name Foreign province/state/county Foreign postal coc			4 000 405 000
Ш	Amended	l return		G Gross rece	eipts \$	1,362,425,002
	Application	n pending	F Name and address of principal officer:	(a) Is this a group return f	or subordinates?	Yes X No
				(b) Are all subordinate		Yes No
_	Tax-exe	npt status:	X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527	If "No," attach a lis	st. See instruct	ions
J	Website		THE PERSON IS A PROPERTY OF TH	(c) Group exemption r	number	
<u> </u>		organization				f legal domicile: NY
				f formation: 1933	W State o	f legal domicile: NY
Ŀ	art I		mmary			
Ф	1	_	-	ernational Rescu	ie Committe	ee responds
Š			orld's worst humanitarian crises and helps people whose lives and livelihood	s are		
Ë		shattere	d by conflict and disaster to survive,recover,& gain control of their future.	.))		
Š	2	Check th	nis box if the organization discontinued its operations or disposed of	more than 25% of	of its net as	ssets.
Ğ	3	Number	of voting members of the governing body (Part VI, line 1a)		3	36
oō v	4	Number	of independent voting members of the governing body (Part VI, line 1b)		4	35
豊	5	Total nu	mber of individuals employed in calendar year 2022 (Part V, line 2a)		5	3,787
Activities & Governance	6	Total nu	mber of volunteers (estimate if necessary)		6	2,348
¥	7a	Total un	related business revenue from Part VIII, column (C), line 12		7a	0
	b	Net unre	elated business taxable income from Form 990-T, Part I, line 11		7b	0
				Prior Year		Current Year
<u>a</u>	8	Contribu	ıtions and grants (Part VIII, line 1h)	1,355,187	7,734	1,297,583,900
Revenue	9	Program	n service revenue (Part VIII, line 2g) . 🔈 . 👢 🧎	12,421	1,917	16,615,924
ě	10	Investm	ent income (Part VIII, column (A), lines 3, 4, and 7d)	3,844	1,324	5,087,902
œ	11	Other re	venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,444	4,653	21,981,138
	12	Total rev	enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,373,898	3,628	1,341,268,864
	13	Grants a	and similar amounts paid (Part IX, column (A), lines 1–3)	525,335	5,107	599,612,625
	14	Benefits	paid to or for members (Part IX, column (A), line 4)	0	0	
S	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	508,122	2,605	608,409,056
usc	16a	Professi	onal fundraising fees (Part IX, column (A), line 11e)	5,863	3,625	11,178,326
Expenses	. b	Total fur	ndraising expenses (Part IX, column (D), line 25) 69,038,809			
Û	17	Other ex	xpenses (Part IX, column (A), lines 11a–11d, 11f–24e)	230,839	9,362	209,561,694
	18	Total ex	penses. Add lines 13–17 (must equal Part IX, column (A), line 25) .	1,270,160	0,699	1,428,761,701
	19	Revenu	e less expenses. Subtract line 18 from line 12	103,737		-87,492,837
Net Assets or	<u>8</u>			Beginning of Current	Year	End of Year
sets	20		sets (Part X, line 16)	584,265	5,431	629,978,674
A A	21		bilities (Part X, line 26)	248,410		348,949,775
		Net asse	ets or fund balances. Subtract line 21 from line 20	335,855	5,165	281,028,899
	art II		nature Block			
			y, I declare that I have examined this return, including accompanying schedules and statements, an			
and	belief, it i	s true, corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of which pre	eparer has any knowl	edge.	
Si	gn	_				
	ere		ure of officer	Date	00/05/0	0004
		Martin	n Bratt Acting (CFO	06/05/2	2024
		15.	Type or print name and title	10-4-		DTIN
ь.	:	Prin	t/Type preparer's name Preparer's signature	Date C	heck if	PTIN
Pa		Tob	y R Kerslake		elf-employed	P01875806
	eparer	T	's name KPMG LLP	Firm's EIN	13-556520	•
US	se Only	<i>'</i>				
<u> </u>	4b = 15		s this return with the preparer shown above? See instructions	Phone no.	212-758-9	X Yes No
IVI	iv ine ih	งอ นเรตนร	a una return with the preparet Shown above? See Instructions			IAITES I INO

	90 (2022) INTERNATIONAL RESCUE COMMITTEE, INC	13-5660870	Page 2
Pai	Statement of Program Service Accomplishments		IV.
	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 International Rescue Committee responds to the world's worst humanitarian crises and		
	helps people whose lives and livelihoods are shattered by conflict and disaster, including		
	the climate crisis, 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	1	
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	Yes	X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program servi	ces, 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	5,
	the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 376,031,503 including grants of \$ 185,267,952) (Rev	enue \$2,134	4,429)
	In Africa, the IRC worked in 20 countries to respond to new and ongoing crises in the region. In		
	East Africa, including Ethiopia, Kenya, Somalia, Sudan, South Sudan and Uganda, the IRC provided		
	lifesaving aid in response to conflict and during periods of severe drought, and strengthened		
	education, health (including water & sanitation, nutrition, and sexual & reproductive health),		
	protection, and economic recovery and development systems throughout the region. In North and West		
	Africa, including Burkina Faso, Cote d Ivoire, Liberia, Libya, Mali, Niger, Nigeria, and Sierra		
	Leone, the IRC scaled up nutrition and community health programs and additionally implemented		
	programs to protect vulnerable populations, particularly women and children. The IRC in the		
	Central Africa region, in Burundi, Central African Republic, the DR Congo, Cameroon, Chad and		
	Tanzania, worked with local and national partners to help rebuild communities impacted by violence, and put in place rapid response mechanisms to provide lifesaving support to those in		
	need.		
4b	(Code:) (Expenses \$ 388,663,528 including grants of \$ 190,239,205) (Rev	enue \$ 2.149	9,236)
7.0	Through a network of 29 cities across the country, the IRCs Resettlement, Asylum, and Integration	Σ, 1-10	<u>5,200</u> .)
	(RAI) US Department ensures that refugees and other vulnerable immigrants have the resources and		
	tools they need to build new lives in America. RAI US serves over 50,000 individuals each year		
	through a diverse portfolio of programs aimed at five core outcomes: Health, Safety, Economic		
	Wallbeing Education and Power Staff and valunteers work together to recettle newly arrived		
	refugees facilitating food, abolton and other basis poods during the nivetal first months in the		
	US. To promote self-reliance over the long term, RAI US also offers English language classes,		
	vocational training, and job placement activities, as well as specialized services for asylees,		
	survivors of torture, human trafficking, and other forms of trauma. RAI US provides comprehensive		
	and supports a variety of programs designed to help new arrivals feel welcome and integrate into		
	their adopted communities.		
4c	(Code:) (Expenses \$ 155,526,940 including grants of \$ 62,993,925) (Rev	enue \$11,93	8,205)
	Health, Governance, Education, and Violence Prevention and Response. The IRC maintained units that		
	Conder Equality Diversity and Inclusion on well as analysing innevation and data informed		
	decision-making. Finally, the IRCs Emergency Response team, which continued to support Ukraine and Poland and increased support to local partners in Haiti, lent surge support and expertise to IRC		
	teams across the globe.		
	tourno dolloco trie globe.		

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

(Expenses \$ 331,053,714 including grants of \$ 161,111,543) (Revenue \$ 394,054)

4e Total program service expenses

1,251,275,685

Form 990 (2022) INTERNATIONAL RESCUE COMMITTEE, INC

Part IV Checklist of Required Schedules Part IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
2	complete Schedule A	2	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions		^	
3	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	-,-
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues.	-	- , ,	
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Χ
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			.,
7	"Yes," complete Schedule D, Part I	6		X
′	the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Χ
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		V	
10	negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	Χ	
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Χ	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
h	Schedule D, Part VI	11a	Χ	
D	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Χ
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets			
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	Х	
•	the organization's separate or consolidated inflated statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Χ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i>			
	Schedule D, Parts XI and XII	12a		Χ
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"	46.	\ \ \	
13	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13	Χ	Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If</i> "Yes," complete Schedule E	14a	Χ	^
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15	~	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15	Х	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17	Χ	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		.,	
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Χ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Χ
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Χ	

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		Yes	No
	22	Х	
	23	X	
	24a		X
	24b		
	24c 24d		
	24d		
	25a		X

Par	t IV Checklist of Required Schedules (continued)		Г.,	Т
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		ــــــ
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		┼
2 5a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part 1	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	23a		 ^
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			
20	persons? If "Yes," complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV.	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Χ
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Χ	<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		_
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes,"</i>	<u> </u>		Ť
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	1
b	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			Χ
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	V	
	10portable garring (garribing) winnings to priZE WILITES!	ו ווי	. ^	1

Form **990** (2022)

	990 (2022) INTERNATIONAL RESCUE COMMITTEE, INC 13-566	80870	Р	age
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u> </u>
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,		V	
L	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Х	
b	If "Yes," enter the name of the foreign country See Attached Statement See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
ou	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			Ť
-	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	0.10		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		Χ
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Χ
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Χ
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? .	7h	Х	_
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	-		
р 1	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
' a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1		
~	against amounts due or received from them.).			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	Х	
	If "Yes," see the instructions and file Form 4720, Schedule N.			
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
7	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			

that would result in the imposition of an excise tax under section 4951, 4952, or 4953?

If "Yes," complete Form 6069.

Part VI

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 36			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Χ
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		Χ
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Χ
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Χ
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		Χ
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Χ	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Χ	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Χ	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	Χ	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Χ	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Χ	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe on Schedule O how this was done	12c	Χ	
13	Did the organization have a written whistleblower policy?	13	Χ	
14	Did the organization have a written document retention and destruction policy?	14	Χ	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Χ	
b	Other officers or key employees of the organization	15b	Χ	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed See Attached Statement			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 5	01(c)		
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
4.0	X Own website			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest pol	ıcy,		
20	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	GETENET AYANO 212-551-0971 122 EAST 42ND STREET, NEW YORK, NY 10168			
	ILL LAUI TEND UTILLI. NEW TUNI. NT 1010			

Page 7

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization nor any	related organiz	ation compensated any	current office	er, director, or truste	e.

hours per week (list any hours for related organizations below dotted line) Note of the composition of the organization (W-2/ 1099-MISC/ 1099-MISC/ 1099-MISC) or related organizations of the organization of the organization of the organization (W-2/ 1099-MISC/ 1099-MISC) or related organizations of the organization of the organization (W-2/ 1099-MISC) or related organizations of the organization of the organization (W-2/ 1099-MISC) or related organizations of the organization of the organization of the organization (W-2/ 1099-MISC/ 1099-MISC) or related organizations of the organization of the or	(F) Estimated amount of other compensation from the organization and lated organizations
Name and title Average hours per week (list any hours for related organizations below dotted line) Average hours per week (list any hours for related organizations below dotted line)	Estimated amount of other compensation from the organization and
hours per week (list any hours for related organizations below dotted line) hours officer and a director/trustee) ompensation from the organization (W-2/ 1099-MISC/ 1099-MISC/ 1099-NEC) organizations below dotted line)	of other compensation from the organization and
per week (list any hours for related organizations below dotted line) per week (list any hours for related organizations below dotted line) per week (list any hours for related organizations below dotted line) relate organizations per week (list any hours for related organization (W-2/ 1099-MISC/ 1099-NEC) relate organizations per week (list any hours for related organization (W-2/ 1099-NEC) 1099-NEC) relate organizations per week (list any hours for related organization (W-2/ 1099-NEC) 1099-NEC)	compensation from the organization and
related organizations below dotted line) related organizations below dotted line)	organization and
related organizations below dotted line) related organizations below dotted line)	
	acco organizations
(1) David Miliband 37.50	
<u>Dir/CEO/Pres</u> 0.00 X X 1,193,570 0	60,158
(2) Madlin J. Sheerman 37.50	
Senior Vice President, Operations & Strategy 0.00 X 469,160 0	59,306
(3) Oscar Raposo 37.50	
CFO, SVP Finance, Treasurer 0.00 X 432,340 0	59,256
(4) Ciaran Donnelly 37.50	
SVP International Programs 0.00 X 407,363 0	63,459
(5) Madeleine Fackler 37.50	
Chief Information Officer 0.00 X 396,049 0	53,970
(6) Brian Johnson 37.50	
Chief HR Officer 0.00 X 372,309 0	58,170
(7) Zain Habboo 37.50	
Chief Mobilization & Marketing Officer 0.00 X 389,385 0	30,074
(8) Ourania Dionysiou 37.50	
Vice President IPP and GPPS 0.00 X 367,366 0	41,440
(9) Susan Ringler 37.50	
Chief Ethics and Compliance Officer 0.00 X 339,378 0	44,288
(10) Johannes Van De Weerd 37.50	
SVP Resettlement Asylum and Intergration 0.00 X 334,189 0	38,404
(11) Angela M. Freyre (from 09/12/2022) 37.50	
Senior Vice President and General Counsel 0.00 X 136,319 0	12,524
(12) George Biddle 1.00	
Director 0.00 X 0 0	0
(13) Susan Dentzer (until 03/2023) 1.00	
Director 0.00 X 0 0	0
(14) Timothy F. Geithner 1.00	
Co-Chair, Board of Directors 0.00 X X X 0 0	0

Form **990** (2022)

13-5660870

Part VII	Section A. Officers, Directors, Tru	ustees, Key Em	oloye	es,	and	iH b	ghes	t C	ompensated Em	ployees (contin	ued)		
	(A) Name and title Average hours per week Position (do not check more than one hours officer and a director/trustee) per week Position (do not check more than one hour, unless person is both an officer and a director/trustee) compensation compension from the from rel											(F) ated amo of other npensation	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		organizations (W-2/ 1099-MISC/ 1099-NEC)	orga	rom the nization an organizat	nd
(15) Maria H	ummer -Tuttle	1.00								7			
Director		0.00	Χ						0	0			0
(16) Steven Director	Klinsky	1.00 0.00	Х						0	0			0
	. Levine (until 03/2023)	1.00	^						0	• 0			
Director	. Lovino (antil co/LoLo)	0.00	Х						0	0			0
(18) Francois	s-Xavier de Mallmann	1.00											
Director		0.00	Χ						0	0			0
(19) Eduardo		1.00											
Chair, Board		0.00	Χ		Х				0	0			0
(20) Jillian M Director	luller	1.00 0.00	Х							0			0
(21) Michael	.I O Neill	1.00	^	4	F .	1			U	U			
Director	0. 0 140	0.00	X.						0	0			0
	ıleen M. Pike, Ph.D.	1.00	^				•						
Director		0.00	Х						0	0			0
(23) Omar S	aeed (until 03/2023)	1.00		ľ		1							
Director		0.00	X						0	0			0
	Saunders-Albin	1.00											_
Director	Coronago (until 02/2022)	0.00							0	0			0
Director	Sorensen (until 03/2023)	0.00							0	0			0
1b Subtota	1	0.60		<u> </u>	<u> </u>				4,837,428	0		521,	
c Total fr	om continuation sheets to Part VII, S	ection A							0	0		- ,	0
d Total (a	dd lines 1b and 1c)								4,837,428	0		521,	049
	mber of individuals (including but not li		ted a	abov	/e) v	vho	recei	vec	I more than \$100	,000 of			
reportat	ole compensation from the organization										1		346
• Distal												Yes	No
	organization list any former officer, dire se on line 1a? <i>If "Yes," complete Sche</i> o										3		Χ
	individual listed on line 1a, is the sum										j		$\hat{}$
_	initividual listed on line Ta, is the sum on its line sum of the s	•							•	'n			
•	al						•				4	Х	
	person listed on line 1a receive or acci									idual			
	ces rendered to the organization? If "Y										5		Х
	dependent Contractors	•											
	te this table for your five highest compe												
compen	sation from the organization. Report co	mpensation for t	he ca	alen	dar	yea	r end	ing		organization's			
	(A) Name and business add	ress							(B) Description of serv	vices ((C) Compen		
KPMG LLP		1 Dallas, TX 753	12					Fin	ancial Audit Ser		, , , , , , , , , , , , , , , , , , ,	729,	705
Lora Gordon (ve Oaklyn, NJ 0		,					nsulting			188,	
The Ringgold		eights Ave, Baltir			21	215			nsulting			183,	
Edge Work Co		et Somerville, M							nsulting			176,	
Ven Solutions	•	Ln Irving, TX 750							nsulting			168,	600
	mber of independent contractors (inclu	•	ed to	tho	se l	iste		ve)	who received				
more th	an \$100,000 of compensation from the	organization					10						

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	1a b c d e f	Federated campaigns				1	
	h	Total. Add lines 1a–1f	Business Code	1,297,583,900			
Program Service Revenue	2a b c d	US Agency for International Development The Foreign, Commonwealth & Developmen United Nations International Children's Emer World Bank and others	624200 624200 624200 624200	3,222,795 11,112,316 1,783,376 497,437	3,222,795 11,112,316 1,783,376 497,437	0 0 0 0	0 0 0 0
Pro	f	All other program service revenue		0	0	0	0
<u>.</u>	g 3	Total. Add lines 2a–2f	t, and	16,615,924			
	4 5 6a	other similar amounts)		4,046,368 0 0	0 0	0 0	4,046,368 0 0
	b c d 7a	Less: rental expenses . Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets Gear	(ii) Other	221,349	0	0	221,349
Revenue	b c	other than inventory . 7a 21,499,056 Less: cost or other basis and sales expenses . 7b 20,682,828 Gain or (loss) . 7c 816,228	0				
Other	d 8a	Net gain or (loss)	0	1,041,534	0	0	1,041,534
	b c 9a	Less: direct expenses	473,310	-473,310		0	-473,310
	b c 10a	Less: direct expenses	0	0	0	0	0
	b c	Less: cost of goods sold		0	0	0	0
Miscellaneous Revenue	b	FX gain Miscellaneous Fees Service agreement income All other revenue	Business Code 900099 900099 900099	18,781,322 982,959 1,010,581 1,458,237	0 0 0	0 0 0	18,781,322 982,959 1,010,581 1,458,237
Σ	<u>e</u>	Total. Add lines 11a–11d		22,233,099	40.51		07.22.
	12	Total revenue. See instructions		1.341.268.864	16.615.924	0	27.069.040

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501	(c)(4)	organizations must cor	nplete all columns.	. All other or	ganizations must con	nplete column (A	4).

Check if Schedule O contains a response or note to any line in this Part IX (B) (D) Do not include amounts reported on lines 6b, 7b, Program service Total expenses Management and Fundraising 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21. . . . 71,081,243 71.081.243 2 Grants and other assistance to domestic individuals. See Part IV. line 22 119,157,962 119,157,962 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 409,373,420 409,373,420 Benefits paid to or for members 5 Compensation of current officers, directors, 1,239,937 trustees, and key employees 2,375,712 3,931,525 315,876 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 512.331.886 419.037.221 26,437,049 66.857.616 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions). . . 19,133,789 14,138,639 3,316,667 1,678,483 Other employee benefits 9 56.740.229 50,941,407 3.147.389 2.651.433 10 16,271,627 12,086,858 2,817,244 1,367,525 11 Fees for services (nonemployees): а 47,053 1,977,439 1,475,558 454,828 b 1,816,727 732,657 1,082,903 С 1,167 d Professional fundraising services. See Part IV, line 17. . . . 11,178,326 11,178,326 е Investment management fees 110.000 110.000 f Other. (If line 11g amount exceeds 10% of line 25, column g 30,190,362 (A), amount, list line 11g expenses on Schedule O.). . . 18,036,791 9,397,513 2,756,058 12 Advertising and promotion 16.504.180 1.049.860 386.711 15.067.609 30,021,510 24,321,700 910,278 4,789,532 13 Office expenses 20,992,756 11,689,467 8,997,835 305,454 14 Information technology 15 0 32,095,128 31,100,729 757,019 237,380 16 17 54,895,683 49,801,374 4,121,549 972,760 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings. 7,081,881 4,870,029 1,697,157 19 514,695 20 Interest 30.108 30.108 Payments to affiliates . . . 21 n 22 Depreciation, depletion, and amortization. 1,731,171 1,451,744 231,703 47,724 23 2,808,147 2,509,313 199,230 99,604 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) Recruitment 870,619 438,174 417,990 14,455 а b Dues and Registration 773,549 397,676 285,705 90,168 С Subscriptions 967.797 463,066 305,034 199,697 d 6,694,637 5,850,752 577,125 266,760 All other expenses Total functional expenses. Add lines 1 through 24e 1.428.761.701 1.251.275.685 108.447.208 69.038.808 25 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)

13-5660870

Form 990 (2022)

Part X Balance Sheet

		Check if Schedule O contains a response o	r note to an	y line in this Part X .			
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing			210,873,480	1	169,236,530
	2	Savings and temporary cash investments		19,981,803	2	2,737,281	
	3	Pledges and grants receivable, net		[165,552,254	3	140,199,763
	4	Accounts receivable, net		[0	4	0
	5	Loans and other receivables from any current of	or former of	ficer, director,			
		trustee, key employee, creator or founder, subs	stantial con	tributor, or 35%			
		controlled entity or family member of any of the	se persons	3	_0	5	
	6	Loans and other receivables from other disquali	fied persons	s (as defined			
		under section 4958(f)(1)), and persons describe	d in section	4958(c)(3)(B)	0	6	
Assets	7	Notes and loans receivable, net		[4,565	7	4,565
Ś	8	Inventories for sale or use		[20,922,632	8	16,245,206
⋖	9	Prepaid expenses and deferred charges		[10,486,409	9	11,066,128
	10a	Land, buildings, and equipment: cost or					
		other basis. Complete Part VI of Schedule D	10a	30,047,929			
	b	Less: accumulated depreciation	10b	17,316,981	12,852,714	10c	12,730,948
	11	Investments—publicly traded securities			90,043,519	11	98,049,413
	12	Investments—other securities. See Part IV, line	e 11		37,285,356	12	34,231,099
	13	Investments—program-related. See Part IV, lin		0	13	0	
	14	Intangible assets	4,109,675	14	7,638,183		
	15	Other assets. See Part IV, line 11		12,153,024	15	137,839,558	
	16	Total assets. Add lines 1 through 15 (must equ	ual line 33)		584,265,431	16	629,978,674
	17	Accounts payable and accrued expenses			91,214,139	17	86,318,253
	18	Grants payable	[134,947,019	18	110,125,664	
	19	Deferred revenue	1,280,272	19	4,057,707		
	20	Tax-exempt bond liabilities	0	20			
	21	Escrow or custodial account liability. Complete	Part IV of S	Schedule D	0	21	
es	22	Loans and other payables to any current or for	mer officer,	director,			
Liabilities		trustee, key employee, creator or founder, sub-	tantial con	tributor, or 35%			
abi		controlled entity or family member of any of the	se persons	5	0	22	
\exists	23	Secured mortgages and notes payable to unre	lated third p	oarties	0	23	0
	24	Unsecured notes and loans payable to unrelate	ed third par	ties	0	24	0
	25	Other liabilities (including federal income tax, p	ayables to	related third			
		parties, and other liabilities not included on line					
		Part X of Schedule D			20,968,836	25	148,448,151
	26	Total liabilities. Add lines 17 through 25			248,410,266	26	348,949,775
S		Organizations that follow FASB ASC 958, ch	eck here	Х			
ĕ		and complete lines 27, 28, 32, and 33.		_			
<u>a</u>	27	Net assets without donor restrictions			53,936,701	27	98,372,919
Ä	28	Net assets with donor restrictions		[281,918,464	28	182,655,980
Ę		Organizations that do not follow FASB ASC		,,,,,,		,,,,,,,,	
Ţ		and complete lines 29 through 33.	,				
ō	29	Capital stock or trust principal, or current funds			0	29	
ets	30	Paid-in or capital surplus, or land, building, or e			0	30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated i			0	31	
ĭΑ	32	Total net assets or fund balances			335,855,165		281,028,899
ž	33	Total liabilities and net assets/fund balances .			584,265,431	33	629,978,674

Part	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				Χ
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,3	41,26	8,864
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,4	28,76	1,701
3	Revenue less expenses. Subtract line 2 from line 1	3	-	87,49	2,837
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3	35,85	5,165
5	Net unrealized gains (losses) on investments	5		14,954	4,941
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9		17,71	1,630
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2	81,02	8,899
Part		•			
	Check if Schedule O contains a response or note to any line in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
C	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on		20	 ^	
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
Vu	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		. За	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	• •	. 34	 ^`	
~	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		. 3b	l x	
	. The state of states, suprain my on contracto o and docume any stope taken to distory odori dudito.		. 50		Ĭ.

Form **990** (2022)

Continuation Sheet for Form 990

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Name of the Organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

Part VII Section A Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Compensated Employees										
(A)	(B)	(C) Position (check all that apply)				(D)	(E)	(F)		
Name and title	Average		- 	chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per	or la	Ins	읔	Ke)	en Hig	Fo	compensation	compensation from related	amount of
	week (list any	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the	organizations	other compensation
	hours for	ual to	ona		ploy	ee t cor	-	organization	(W-2/1099-MISC)	from the
	related	ruste	đ		ee	npe		(W-2/1099-MISC)		organization and related
	organizations below dotted	e	stee			nsa				organizations
	line)					ie d				· ·
(26) Sally Susman	1.00									
Co-Chair, Board of Directors	0.00	Х		Х				0	0	0
(27) Mona K. Sutphen	1.00							,		_
Director	0.00	Х						0	0	0
(28) Tony Tamer (until 06/2023)	1.00									
Director	0.00	Χ						0	0	0
(29) Dr. Merryl H. Tisch	1.00									
Director	0.00	Χ						0	0	0
(30) E. Eric Tokat (until 03/2023)	1.00									
Director	0.00	Χ	4	ŀ'	1			0	0	0
(31) P. Maureen White	1.00									
Director	0.00	X				•		0	0	0
(32) Cheryl Cohen Effron	1.00									
Director	0.00	X						0	0	0
(33) Udi Grofman	1.00	K								
Director	0.00	X						0	0	0
(34) Becca Heller	1.00									
Director	0.00	X						0	0	0
(35) Andrew Klaber	1.00									
Director	0.00	Χ						0	0	0
(36) Joshua L. Steiner	1.00									
Director	0.00	Χ						0	0	0
(37) Leah Joy Zell	1.00									
Director	0.00	Χ						0	0	0
(38) Masood Ahmed	1.00									
Director	0.00	Χ						0	0	0
(39) Dr. Titilola Banjoko	1.00									
Director	0.00							0	0	0
(40) Laurence D. Fink	1.00									
Director	0.00	_						0	0	0
(41) Uzodinma Iweala, M.D.	1.00									
Director	0.00	_						0	0	0
(42) Matthew M. Johnson	1.00									
Director	0.00	Х						0	0	0
(43) Prakash Melwani	1.00									
Director	0.00	Х						0	0	0
(44) Janet Napolitano	1.00									
Director	0.00	_	<u> </u>	_	_		1	0	0	0
(45) Kathrin Jungehülsing	1.00									
Director	0.00	_	<u> </u>	<u> </u>		<u> </u>	1	0	0	0
(46) Kerwin Charles	1.00									
Director	0.00	Χ						0	0	0

Continuation Sheet for Form 990

Page 2 of 2

Name of the Organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

INTERNATIONAL RESCUE									60870		
Part VII Section A Continuation of Officers, Directors, Trustees, Key Employees, and Highest											
Compensated Employees											
(A))	(B)			(C)			(D)	(E)	(F)
Name ar	nd title	Average	Posi	tion (chec	1	that ap		Reportable	Reportable	Estimated
		hours per	or Id	Ins	읓	Şe	en Hig	Б	compensation	compensation	amount of
		week (list any	ndividual t or director	titut	Officer	em	hes	Former	from the	from related organizations	other compensation
		hours for	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee	7	organization	(W-2/1099-MISC)	from the
		related	rust	Ę		/ee	npe		(W-2/1099-MISC)		organization
		organizations below dotted	ee	stee			insa				and related organizations
		line)					ted				
(47) Victoria Long Foley		1.00									
Director		0.00							0	0	0
(48) Kenneth R. French		1.00	,							, and the second	
Director		0.00	Х						0	0	0
(49) Viet Thanh Nguyen		1.00	,							, and the second	
Director		0.00	Х						0	0	0
(50) Abraham Verghese		1.00	,							, and the second	
Director		0.00	Х						0	0	0
(51) Clifford S. Asness		1.00	,							,	
Director		0.00	Х	4		1		•	0	0	0
(52) Christina Kirby (from	03/2023)	1.00									
Director		0.00							0	0	0
(53)											
(54)			X								
				b							
(55)											
(56)											
(57)											
(58)											
(59)											
(60)											
(61)											
	<u> </u>										
(62)											
(63)											
(64)	<u> </u>										
(0.5)				-		<u> </u>	-				
(65)											
(00)				<u> </u>	_	<u> </u>	<u> </u>	1			
(66)											
(67)				-	_	<u> </u>		-			
(67)											
				I							

SCHEDULE A (Form 990)

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

990 or Form 990-EZ.

Employer identification number Name of the organization INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 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 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college 9 or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross 10 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes 12 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. h 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. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C its supported organization(s) (see instructions). You must complete Part IV, Sections A. D. and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III е functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations f Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E) **Total**

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	764,828,594	785,978,272	924,498,780	1,355,187,734	1,297,583,900	5,128,077,280
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	704,020,004	700,070,272	324,430,700	1,000,107,704	1,237,000,000	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 5	Total. Add lines 1 through 3	764,828,594	785,978,272	924,498,780	1,355,187,734	1,297,583,900	5,128,077,280
6	Public support. Subtract line 5 from line 4						5,128,077,280
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	764,828,594	785,978,272	924,498,780	1,355,187,734	1,297,583,900	5,128,077,280
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	3,623,361	2,209,306	2,292,190	2,640,292	4,267,717	15,032,866
9	Net income from unrelated business activities, whether or not the business is regularly carried on	•	G				0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)					22,233,099	22,233,099
11	Total support. Add lines 7 through 10						5,165,343,245
12 13	Gross receipts from related activities, etc. (so First 5 years. If the Form 990 is for the organization, check this box and stop here	anization's first, sec		or fifth tax year as a			83,120,111
Sec	tion C. Computation of Public Su	pport Percenta	age			· · · · · · · · · · · · · · · · · · ·	
	Public support percentage for 2022 (line 6, c		-			14	99.28%
15 16a	Public support percentage from 2021 Sched 33 1/3% support test—2022. If the organization qualifies as	ation did not check	the box on line 13	s, and line 14 is 33	1/3% or more, che		99.70% X
b	33 1/3% support test—2021. If the organiz box and stop here. The organization qualifies			•			
17a	10%-facts-and-circumstances test—2022 10% or more, and if the organization meets to Part VI how the organization meets the facts organization.	the facts-and-circur -and-circumstance	mstances test, che s test. The organiz	ck this box and sto cation qualifies as a	pp here. Explain in publicly supported		
b	10%-facts-and-circumstances test—2021 15 is 10% or more, and if the organization m in Part VI how the organization meets the fac organization	eets the facts-and- cts-and-circumstan	circumstances tes ces test. The orga	t, check this box ar nization qualifies as	nd stop here . Expl s a publicly suppor	ain ted	
18	Private foundation. If the organization did instructions	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		

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

(Complete only if you checked the box on line 10 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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0				0
2	Gross receipts from admissions, merchandise	J	-				
	sold or services performed, or facilities						
	furnished in any activity that is related to the						0
3	organization's tax-exempt purpose						U
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the						
•	organization's benefit and either paid to						
	or expended on its behalf						0
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						0
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
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from						
<u> </u>	line 6.)						0
	ction B. Total Support	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	ndar year (or fiscal year beginning in) Amounts from line 6	(a) 2010	0	(6) 2020	0	(6) 2022	(i) rotai
	Gross income from interest, dividends,	0	0	0		0	0
IVa	payments received on securities loans, rents,	•					
	royalties, and income from similar sources						0
b	Unrelated business taxable income (less	A (
-	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on .						0
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	0	0	0	0	0	0
14	First 5 years. If the Form 990 is for the organization, should this box and some home.	•		•	(/ (/		Г
0	organization, check this box and stop here						
	ction C. Computation of Public Su		•	(5)		45	0.000/
15	Public support percentage for 2022 (line 8, c		-			15 16	0.00% 0.00%
	Public support percentage from 2021 Sched etion D. Computation of Investmen					10	0.00%
<u>3ec</u> 17	Investment income percentage for 2022 (line			olumn (f))		17	0.00%
18	Investment income percentage from 2021 Se		-			18	0.00%
	33 1/3% support tests—2022. If the organi						0.0070
	not more than 33 1/3%, check this box and s						
b	33 1/3% support tests—2021. If the organi	-			-		<u> </u>
	line 18 is not more than 33 1/3%, check this	box and stop here	. The organization	qualifies as a pub	licly supported org	anization	
20	Private foundation. If the organization did i	not check a box on	line 14, 19a, or 19	b, check this box a	and see instructions	S	

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. 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? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **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))? If "Yes," provide detail in **Part VI**.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- **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)? *If* "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		
IUD		

Part I	V Supporting Organizations (continued)			
•			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI .	11c		
Section	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers.			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	4		
2	Did the organization operate for the benefit of any supported organization other than the supported	1		
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Section	on C. Type II Supporting Organizations			
	on or type in outperting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	_		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have	2		
3	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ction	s).	
а	The organization satisfied the Activities Test. Complete line 2 below.		,	
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instruct	ions).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		163	NO
_	the supported organization(s) to which the organization was responsive? <i>If</i> "Yes," <i>then in Part VI identify</i>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		ı

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O					
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See					
instructions. All other Type III non-functionally integrated supporting organ	nizatio	ons must complete Sections	A through E.		
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1 Net short-term capital gain	1		· · · · · · · · · · · · · · · · · · ·		
2 Recoveries of prior-year distributions	2				
3 Other gross income (see instructions)	3				
4 Add lines 1 through 3.	4	0	0		
5 Depreciation and depletion	5				
6 Portion of operating expenses paid or incurred for production or collection of					
gross income or for management, conservation, or maintenance of property					
held for production of income (see instructions)	6				
7 Other expenses (see instructions)	7				
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	0	0		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
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	7			
d Total (add lines 1a, 1b, and 1c)	1d	0	0		
e Discount 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	0		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,					
see instructions).	4	0	0		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0		
6 Multiply line 5 by 0.035.	6	0	0		
7 Recoveries of prior-year distributions	7	0	0		
8 Minimum Asset Amount (add line 7 to line 6)	8	0	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 0.85 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 Distributable Amount. Subtract line 5 from line 4, unless subject to					
emergency temporary reduction (see instructions).	6		0		
7 Check here if the current year is the organization's first as a non-functionall	y inte	egrated Type III supporting of			
instructions).	-		•		

Part '	Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Section	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt			
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiza	ations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required—	provide details in Part V i	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	0
8	Distributions to attentive supported organizations to which the	he organization is respor	nsive	
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2022 from Section C, line 6		9	0
10	Line 8 amount divided by line 9 amount	1	10	0.000
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			0
2	Underdistributions, if any, for years prior to 2022			
	(reasonable cause required—explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2022			
a	From 2017			
b	From 2018			
<u>C</u>	From 2019			
d	From 2020			
<u>e</u>	From 2021			
f	Total of lines 3a through 3e	0		
<u>g</u>	Applied to underdistributions of prior years		0	
<u>h</u>	Applied to 2022 distributable amount	Α		0
<u>_</u> _	Carryover from 2017 not applied (see instructions)			
<u>i</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	0		
4	Distributions for 2022 from Section D, line 7: \$ 0			
<u>a</u>			0	
b	Applied to 2022 distributable amount			0
c	Tromandor. Cabract med la and 15 horn med 1.	0		
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.		0	
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain			
	in Part VI. See instructions.			0
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.	0		
8	Breakdown of line 7:			
<u>a</u>	Excess from 2018			
<u> </u>	Excess from 2019			
	Excess from 2020			
<u>d</u>	Excess from 2021			
е	Excess from 2022			

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

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2022

Employer identification number

13-5660870

Department of the Treasury

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Attach to Form 990 or Form 990-PF.

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

Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 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), 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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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 doesn't meet the filing requirements of Schedule B (Form 990).

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 (entering

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one

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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions

contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such

"N/A" in column (b) instead of the contributor name and address), II, and III.

Name of organization
INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number 13-5660870

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

I alt I	Contributors (see instructions). Ose duplicate copie	3 of Fart Fil additional Space 13 f	iccucu.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Department of Health & Human Services (HHS) 200 Independence Avenue SW Washington DC 20201 Foreign State or Province: Foreign Country:	\$254,614,800	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BUREAU FOR HUMANITARIAN ASSISTANCE (BHA) 1300 Pennsylvania Avenue, NW Washington DC 20523-1000 Foreign State or Province: Foreign Country:	\$ <u>137,825,160</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Bureau of Population Refugees & Migration (BPRM) 2201 C Street NW Washington DC 20520 Foreign State or Province: Foreign Country:	\$ <u>127,763,187</u>	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	European Union Humanitarian Department (ECHO) 200 Rule de la Loi B-1049 1000 Foreign State or Province: Brussels Foreign Country: Belgium	\$ 91,747,912	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	The Foreign, Commonwealth & Development Office(F King Charles Street SW1A 2AH Foreign State or Province: London Foreign Country: United Kingdom	\$31,294,719	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
66	UN High Commissioner on Refugees (UNHCR) Case Postale 2500 CH-1211 Foreign State or Province: Geneva Foreign Country: Switzerland	\$ 36,168,872	Person X Payroll

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

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Swedish International Development Cooperation Agen-Person 7 Valhallav gen 199 **Pavroll** Noncash 35,723,492 Foreign State or Province: Stockholm (Complete Part II for Foreign Country: Sweden noncash contributions.) (b) (d) (a) (c) Total contributions Type of contribution No. Name, address, and ZIP + 4 U.S. Agency for Int'l Development (USAID) Person 8 1300 Pennsylvania Ave, NW **Payroll** 29,210,607 Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncash contributions.) (b) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution German Federal Foreign Office (GFFO) Person 9 **Payroll** Werderscher Markt 1 Noncash 30,923,634 Foreign State or Province: Berlin (Complete Part II for Foreign Country: Germany noncash contributions.) (a) (b) (c) (d) **Total contributions** Name, address, and ZIP + 4 Type of contribution No. Person **Payroll** Noncash (Complete Part II for Foreign Country: noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution Person **Payroll** Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash Foreign State or Province: (Complete Part II for Foreign Country: noncash contributions.)

Name of organization

Employer identification number

INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received (See instructions.) Part I emergency supplies 3 275,561 9/30/2023 (a) No. (c) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I Fuel and parts 6 emergency supplies (a) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I

Name of org	panization IONAL RESCUE COMMITTEE, INC			Employer identification number 13-5660870			
Part III	Exclusively religious, charitable, etc., co	ontributions to	o organizations describe				
	(10) that total more than \$1,000 for the year		_				
	the following line entry. For organizations of			_			
	contributions of \$1,000 or less for the year	•		ctions.) \$0			
(a) No.	Use duplicate copies of Part III if additional	space is need	led.				
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I							
		(e) T	ransfer of gift				
	Transferee's name, address, and 2	ZIP + 4	Relationshi	ip of transferor to transferee			
	For. Prov. Country						
(a) No.							
from Part I	(b) Purpose of gift	(с) 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						
(-) N -	For. Prov. Country						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	(,, ,		,	., .			
		<u> </u>					
		/					
		(e) 1	ransfer of gift				
	Transferee's name, address, and 2	ZIP + 4	Relationshi	ip of transferor to transferee			
	For. Prov. Country						
(a) No.							
from Part I	(b) Purpose of gift	(с) Use of gift	(d) Description of how gift is held			
1 uit i	· ·						
		,					
		(e) 1	ransfer of gift				
	Transferon's name address and 3	71D ± 1	Polationahi	in of transforor to transforos			
	Transferee's name, address, and 2	-IF' ™ 4	Relationshi	ip of transferor to transferee			
	For. Prov. Country						

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

• 5	Section 501(c)(4), (5), or (6) or	rganizations: Complete Part III.			•
Nam	e of organization			Employ	er identification number
INT	ERNATIONAL RESCUE C				13-5660870
Pa	rt I-A Complete if t	the organization is exempt und	ler section 501	(c) or is a section 527	organization.
1	•	he organization's direct and indirect p	olitical campaign	activities in Part IV. See ins	structions for
	definition of "political cam	. •		A	
2		y expenditures. See instructions			
3		cal campaign activities. See instruction			
		he organization is exempt und			
1		excise tax incurred by the organizatio			
2		excise tax incurred by organization m		*	
3	•	ed a section 4955 tax, did it file Form	4720 for this year:	?	= =
4a					Yes No
	If "Yes," describe in Part		11 1		17. 17.
		the organization is exempt und			I(c)(3).
1	•	expended by the filing organization f		•	
_				\$	
2	Enter the amount of the fi	iling organization's funds contributed vities			
•				\$	
3		penditures. Add lines 1 and 2. Enter h			0
				\$	
4		n file Form 1120-POL for this year? . ses and employer identification numb			
5		ents. For each organization listed, en			
		ntributions received that were prompt			
	as a separate segregated	d fund or a political action committee	(PAC). If additiona	I space is needed, provide	information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(4) (136	a) / idailoso	(0) =	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly delivered to a separate
					political organization. If none, enter -0
					Hone, onter -o
(1)					
(')					
(2)					
` '					
(3)					
(4)					
					
(5)	•				
(6)					
(U)		i e	İ	İ	

INTERNATIONAL RESCUE COMMITTEE, INC Schedule C (Form 990) 2022 Page 2

	,					raye Z
Ρ	art II-A Complete if the organiz	ation is exempt	under section 5	01(c)(3) and filed	l Form 5768 (ele	ction
	under section 501(h)).					
Α	Check if the filing organization be name, address, EIN, exp	•	•		ted group member's	3
В	Check if the filing organization of	hecked box A and '	'limited control" prov	visions apply.		
	Limits on (The term "expenditure:	Lobbying Expendi s" means amounts			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence	e public opinion (gra	assroots lobbying).			0
b	Total lobbying expenditures to influence					0
С	Total lobbying expenditures (add lines	1a and 1b)			0	0
d	Other exempt purpose expenditures .					0
е	Total exempt purpose expenditures (ad	ld lines 1c and 1d) .			0	0
f	Lobbying nontaxable amount. Enter the	amount from the fo	ollowing table in bot	h		
_	columns.				0	0
	If the amount on line 1e, column (a) or (k	o) is: The lobbying	ng nontaxable amou	int is:		
	Not over \$500,000		amount on line 1e.			
	Over \$500,000 but not over \$1,000,000		us 15% of the excess			
	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess			
ŀ	Over \$1,500,000 but not over \$17,000,000		us 5% of the excess of	over \$1,500,000.		
,	Over \$17,000,000	\$1,000,000.			0	0
g	Grassroots nontaxable amount (enter 2	•			0	0
h	Subtract line 1g from line 1a. If zero or				0	0
!	Subtract line 1f from line 1c. If zero or le			otion file Form 470	·	0
J	If there is an amount other than zero or					Yes No
	section 4911 tax for this year?					res NO
	(O		g Period Under Sec	, ,	£ 41 £1 1	la al acce
	(Some organizations that made			-	of the five columns	below.
	Se	ee the separate ins	tructions for lines	2a through 2f.)		
	Lai	abying Evnanditur	oo Dutring 4 Voor A	vereging Beried		
	Loi	bying Expenditur	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a	Lobbying nontaxable amount	0	0	0	0	0
b	Lobbying ceiling amount					
	(150% of line 2a, column(e))					0
С	Total lobbying expenditures	0	0	0	0	0
d	Grassroots nontaxable amount	0	0	0	0	0
е	Grassroots ceiling amount (150% of line 2d, column (e))					0
£	Craceroote lobbying synerditure					

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 Page **3**

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	For	n 5768	3	
For a	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a	1)		(b)	
	ription of the lobbying activity.	Yes	No	Ar	mount	Ł
1	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:					
а	Volunteers?	•	Χ			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X				
С	Media advertisements?		Χ			
d	Mailings to members, legislators, or the public?		X			
е	Publications, or published or broadcast statements?		X			
f	Grants to other organizations for lobbying purposes?		Χ			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Χ			270	0,463
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X			
	Other activities?		Χ			0.400
J	Total. Add lines 1c through 1i		V		270	0,463
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Χ			
b	If "Yes," enter the amount of any tax incurred under section 4912					
C C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d Por	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	o)/5)	0	ootion		
Fail	501(c)(6).	C)(5),	01 5	BCHOH		
	50 I(C)(0).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	162	NO
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior ye			3		
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" (c)(5),	or s			3. is
	answered "Yes."	` '		·		•
1	Dues, assessments and similar amounts from members		1	·		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	.	2a			
b	Carryover from last year	.	2b			
С	Total	.	2c			0
3	$eq:Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues \ . \ .$		3			
4	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			l		
_	lobbying and political expenditures next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions		5			0
Part		!: () F		A 1:	4	
2 (Se	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group le instructions); and Part II-B, line 1. Also, complete this part for any additional information.	list); F	'art II-	A, lines	1 and	1
Part I	I-B Line 1g IRC tracks any time spent on lobbying by our Advocacy team in DC and members of HQ					
staff t	that may contact legislators or other officials. Time spent by staff was tracked on the					
speci	fic basis of meetings held and the topics of discussion in those meetings.					
						

Schedule C (Fo		Page 4
Part IV	Supplemental Information (continued)	
		•
	• C 1	

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

INTERNATIONAL RESCUE COMMITTEE, INC 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 1 Total number at end of year 2 Aggregate value of contributions to (during year) . . . Aggregate value of grants from (during year) 3 Aggregate value at end of year 4 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? . . . 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 Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after July 25, 2006, and not Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 9 balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: **b** Assets included in Form 990, Part X.

Part	Organizations Maintaining (Collections of A	rt, Histor	ical Trea	asures, or Ot	her Similar Asset	s (continue	ed)
3	Using the organization's acquisition, ac							-
	collection items (check all that apply):							
а	Public exhibition		d	Loan or	exchange progr	ram		
b	Scholarly research		e	Other				
С	Preservation for future generations	S						
4	Provide a description of the organization XIII.		explain h	ow they fu	rther the organi	zation's exempt purpo	ose in Part	
_		P 9				a		
5	During the year, did the organization seasets to be sold to raise funds rather						□ vaa I	- No
D-vi			eu as part	or the org	janization's cone	ection?	Yes	No
Part			n Form C	OO Dort	IV line O or r	enarted an emotion	t on Form	
	Complete if the organization a 990, Part X, line 21.	ilisweled res o	II FOIIII 8	190, Fait	iv, line 9, or i	eported an amoun	t on Follii	
1a	Is the organization an agent, trustee, c	ustodian or other in	termedian	, for contr	ibutions or othe	r accete not		
ıa	included on Form 990, Part X?				ibutions of othe	l assets flot	Yes	X No
b	If "Yes," explain the arrangement in Pa							χσ
	, 1	'		5			Amount	
С	Beginning balance					1c		0
d	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		0
2a	Did the organization include an amoun	t on Form 990, Par	t X, line 21	, for escre	ow or custodial	account liability?	Yes	X No
b	If "Yes," explain the arrangement in Pa	rt XIII. Check here	if the expla	anation ha	as been provide	d on Part XIII...]	
Part	V Endowment Funds.							
	Complete if the organization a	nswered "Yes" o			IV, line 10.			
		(a) Current year	(b) Pric		(c) Two years bad			
1a	Beginning of year balance	108,048,000	132	,216,000	112,649,0	000 114,144,00	0 115	5,947,000
b	Contributions		_					0
С	Net investment earnings, gains,	17.257.000	10	620,000	24.965.0	2 704 00		252 000
d	and losses	17,257,000	-10	,628,000	24,865,0	000 3,704,00	0 3	,253,000
e	Other expenditures for facilities						+	
·	and programs	5,622,000	5	,540,000	5,298,0	5,199,00	0 5	,056,000
f	Administrative expenses	7,, - ,		, ,	-,,	3,100,00		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
g	End of year balance	119,683,000	108	,048,000	132,216,0	000 112,649,00	0 114	,144,000
2	Provide the estimated percentage of the	e current year end	balance (l	ine 1g, co	lumn (a)) held a	IS:		
а	Board designated or quasi-endowment	44	4%					
b	Permanent endowment	46%						
С)%						
2-	The percentages on lines 2a, 2b, and 2			41	المماط ماسما مطاسما	intoned for the		
3a	Are there endowment funds not in the organization by:	possession of the o	rganizatio	n mai are	neid and admir	istered for the	Ye	es No
	(i) Unrelated organizations						3a(i)	X
	(ii) Related organizations						3a(ii)	X
b	If "Yes" on line 3a(ii), are the related or	ganizations listed a	s required	on Sche	dule R?		3b	
4	Describe in Part XIII the intended uses	of the organization	's endown	nent funds	S.			•
Part	VI Land, Buildings, and Equip	ment.						
	Complete if the organization a	nswered "Yes" o	n Form 9	90, Part	IV, line 11a. 9	See Form 990, Par	t X, line 10	
	Description of property	(a) Cost or ot		` '	or other basis	(c) Accumulated	(d) Book v	/alue
		(investm		(c	other)	depreciation		
1a	Land		0		0			0
b	Buildings	-	0		19 091 003	0 204 501		777 402
c d	Leasehold improvements		0		18,981,903 5,094,129	9,204,501 3,104,635		,777,402 ,989,494
e	Other	<u> </u>	0		5,094,129	5,007,845		964,052
	I. Add lines 1a through 1e. (Column (d) r		•	column (E			12	,730,948

Part VII	Investments—Other Securities.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 11b, See Form 990, Part X, line	1e

- J	,	
(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 Limited Partnership	25,331,099	F
(A) Direct Lending Fund	8,900,000	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.).	34,231,099	

Part VIII Investments—Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)	•	
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.).	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) Other assets	11,482,594
(2) ROU Lease Assets	126,356,964
(3)	
(4)	
(5)	
(6)	
_(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	137,839,558

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.

(3) Annuity Liabilities Related to Split Interest Agreements (4) Deferred rent obligations (5) Intercompany Payable to affiliates and subsidiaries (6)	ie
(3) Annuity Liabilities Related to Split Interest Agreements (4) Deferred rent obligations (5) Intercompany Payable to affiliates and subsidiaries (6) Annuity Liabilities Related to Split Interest Agreements (6) Annuity Liabilities Related to Split Interest Agreements (6) Annuity Liabilities Related to Split Interest Agreements (7) Annuity Liabilities Related to Split Interest Agreements (8) Annuity Liabilities Related to Split Interest Agreements (9) Annu	0
(4) Deferred rent obligations (5) Intercompany Payable to affiliates and subsidiaries 3,6	665,193
(5) Intercompany Payable to affiliates and subsidiaries 3,6	493,518
	44,229
(6) ROU Lease Liablity	640,103
	605,108
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 148,4	448,151

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

Par	Reconciliation of Revenue per Audited Financial Statement			turn.	
	Complete if the organization answered "Yes" on Form 990, Part			1	4 205 600 740
1	Total revenue, gains, and other support per audited financial statements			1	1,395,699,748
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	۔ ا	14054044		
a	Net unrealized gains (losses) on investments	2a	14,954,941		
b	Donated services and use of facilities	2b	1,091,752		
C	Recoveries of prior year grants		07.040.004		
d	Other (Describe in Part XIII.)		37,910,881		
е	Add lines 2a through 2d			2e	53,957,574
3	Subtract line 2e from line 1	i · ·		3	1,341,742,174
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)		-473,310		
С	Add lines 4a and 4b			4c	-473,310
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,341,268,864
Par	Reconciliation of Expenses per Audited Financial Statemen Complete if the organization answered "Yes" on Form 990, Part			Returi	n.
		_	; 12a.	I	4 404 500 004
1	Total expenses and losses per audited financial statements	`		1	1,481,592,934
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	I.	1 4 004 750		
a	Donated services and use of facilities	2a	1,091,752		
b	Prior year adjustments	2b			
C	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	51,739,481		
е	Add lines 2a through 2d			2e	52,831,233
3	Other losses . Other (Describe in Part XIII.) . Add lines 2a through 2d . Subtract line 2e from line 1 . Amounts included on Form 990, Part IX, line 25, but not on line 1:	i		3	1,428,761,701
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	investment expenses not included on Form 990, Part VIII, line 7b	48			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	1,428,761,701
	XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; \parallel				e 4; Part X, line
2; Pa	rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pr	ovide ar	ny additional informa	ation.	
Part I	V Line 2b Custodial accounts at IRC represent funds held on behalf of refugee				
	XX				
partic	ipants related to economic empowerment programs (Assets for Financial Indepe	endence			
Jeener					
(AFI)	and Individual Development Accounts (IDA)) in compliance with program require	ements			
77.7.17	and marriada. Development / toodante (1971)) in compilation with programmodum	OITIOTILO			
as sti	pulated by the donors. Funds will be released as refugees complete the progran	n			
40 011	paratisa by the delibro. I tallate will be instance as instance complete also program	<u>''</u>			
requi	rements.				
requi	icinents.				
Dart \	V Line 4 IRC board of directors has established a fund to provide for the long-ter	m			
Tait	V Line 4 into board of directors has established a fund to provide for the long-ter	<u>'''</u>			
finan	cial stability of IRC and to enhance its ability to respond to extraordinary				
IIIIaiii	sal stability of live and to equalitie its ability to respond to extraordinary				
omor	gency needs. The purpose of this fund is to provide a mechanism for the board o	of			
emei	gency needs. The purpose of this fund is to provide a medianism of the board to	UI			
direct	ors to set aside and invest certain funds. Accordingly, the board of directors has				
411.00	isto to ost astao and invost obtain taines. Accordingly, the board of difectors has	í			
desin	nated the Leo Cherne Emergency Fund, certain unrestricted bequests, extraord	inary			
uesiy	Taloa alo 200 onomo Emorgeney i una, certain unicomicteu bequests, extratoru	ui y			
aifte /	as determined by the board of directors), and portions of unrestricted surpluses	in			
giito (as determined by the board of directors), and portions of diffesticted sulpluses				
oper	ating funds for this purpose. IRC permanently restricted donor endowment and e	merann	2 V		
opera		mergen	~ <u>y</u>		
funda	further support the long term financial stability of the organization. Included in				
	ranna savavn ne ma en lilanda saviny vi HE Uluali/aliul. Hicluaeu III				

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
invested 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 The Internal Revenue Service has ruled that, pursuant to Section 501(c)(3)
of the Internal Revenue Code (the Code), IRC is generally exempt from federal income taxes
and is a publicly supported organization, as defined in Section 509(a)(1) of the Code. As
a not for profit organization, IRC is also exempt from state and local income taxes.
Accordingly, IRC is not subject to income taxes except to the extent it has taxable income
from activities that are not related to its exempt purposes. IRC utilizes a threshold of
more likely than not for recognition and derecognition of tax positions taken or expected
to be taken in a tax return. No provision for income taxes was required for fiscal year
2023 or 2022.
Part XI Line 2d The total includes subsidiary revenue of \$37,804,398 included in the
audited financial statement and change in value of splitting interest of \$106,483.
Part XI Line 4b The amount \$473,310 represents special event expenses.
Part XII Line 2d The total includes subsidiary expenses of \$51,266,171 included in the
audited consolidated financial statement and special event expenses of \$473,310.
Part XI Line 1 The financial statement revenue includes both operating revenue and
non-operating amounts.
Part XII Line 1 The financial statement expense includes both operating expense and
non-operating amounts.

SCHEDULE F (Form 990)

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.

Open to Public

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Form 990, Part IV, line 14b.

Department of the Treasury

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

Employer identification number INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

1	_	antees' eligibility	for the grants or	ds to substantiate the amount assistance, and the selection	on criteria used to	X Yes No
2	For grantmakers. Descoutside the United State		e organization's	procedures for monitoring th	e use of its grants and other as	ssistance
3	Activities per Region. (T	he following Par	t I, line 3 table ca	an be duplicated if additiona	l space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
(1)	Europe (Including Iceland and Greenland)	4	77	Program Services	Safety and Protection	897,147
(2)	Europe (Including Iceland and Greenland)			Grants to recipients		6,899,677
(3)	Central America and the Caribbean	3	487	Program Services	Economic Wellbeing, Health Safety, Power and Education	22,561,662
(4)	Central America and the Caribbean			Grants to recipients		16,368,759
(5)	Middle East and North Africa	6	2,240		Economic Wellbeing, Health Safety, Power and Education	79,577,545
(6)	Middle East and North Africa		*	Grants to recipients		57,303,763
(7)		20	7,682		Economic Wellbeing, Health Safety, Power and Education	193,500,860
(8)				Grants to recipients		182,530,643
(9)	East Asia and the Pacific	3	1,312	Program Services	Economic Wellbeing, Health Safety, Power and Education	30,015,584
(10)	East Asia and the Pacific			Grants to recipients		39,849,610
/4 4 \	South Asia		4,484	Program Services	Economic Wellbeing, Health Safety, Power and Education	24 452 024
(11)	South Asia		4,404	Grants to recipients	Caroty, Fower and Eddodtol	34,152,924
(12)						43,427,044
(13)						
(14)						
(15)						
(16)						
(17)						
	Subtotal	38	16,282			707,085,218
b	Total from continuation	_	_			0
c	sheets to Part I Totals (add lines 3a and 3b)	38	0 16,282			707,085,218

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.

Part IV,	line 15, for an	<u>y recipient who rece</u>	ived more than \$5,0	00. Part II can be	duplicated if addition	nal space is nee	ded.	
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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Sub-Saharan Africa	Economic Wellbeing		Bank Tranfer		_	
(1)				763,403				FMV
•		Sub-Saharan Africa	Economic Wellbeing	·	Bank Tranfer			
(2)			_	1,578,924				FMV
•		Sub-Saharan Africa	Economic Wellbeing		Bank Tranfer			
(3)				15,877				FMV
•		Sub-Saharan Africa	Economic Wellbeing		Bank Tranfer			
(4)			_	196,849				FMV
		Sub-Saharan Africa	Economic Wellbeing		Bank Tranfer)		
(5)				12,069,063				FMV
		Sub-Saharan Africa	Economic Wellbeing		Bank Tranfer			
(6)				508,587				FMV
		Sub-Saharan Africa	Economic Wellbeing		Bank Tranfer			
(7)				298,797				FMV
		Sub-Saharan Africa	Economic Wellbeing		Bank Tranfer			
(8)				153,312				FMV
		Sub-Saharan Africa	Economic Wellbeing		Bank Tranfer			
(9)			*	4,238,454				FMV
		Sub-Saharan Africa	Economic Wellbeing		Bank Tranfer			
(10)				26,631				FMV
		Sub-Saharan Africa	Economic Wellbeing		Bank Tranfer			
(11)				609,659				FMV
		Sub-Saharan Africa	Education		Bank Tranfer			
(12)				3,386,906				FMV
		Sub-Saharan Africa	Education		Bank Tranfer			
(13)				30,471				FMV
		Sub-Saharan Africa	Education		Bank Tranfer			
(14)		VI		1,422,980				FMV
		Sub-Saharan Africa	Education		Bank Tranfer			
(15)				1,910,518				FMV
		Sub-Saharan Africa	Education		Bank Tranfer			
(16)				22,734				FMV

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

line 16. Part III can be	duplicated if additional sp	ace 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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
CASH ASSISTANCE (1)	Central America and the Caribbean		5,266,485	Bank and Cash			
EDUCATION MATERIALS (2)	Central America and the Caribbean		13,021	Bank and Cash			
HEALTH CARE (3)	Central America and the Caribbean		297,411	Bank and Cash		/ , ,	
OTHER ASSISTANCE (4)	Central America and the Caribbean		113,183	Bank and Cash			
PROGRAM SUPPLIES & (5) MATERIAL	Central America and the Caribbean			Bank and Cash	16,353	PROGRAM SUPPLIES & MATERIAL	FMV
SERVICE CONTRACTS (6)	Central America and the Caribbean		268,210	Bank and Cash			
CASH ASSISTANCE (7)	East Asia and the Pacific		1,920,181	Bank and Cash			
EDUCATION MATERIALS (8)	East Asia and the Pacific		482,601	Bank and Cash			
HEALTH CARE (9)	East Asia and the Pacific	+ (4,702,329	Bank and Cash			
OTHER ASSISTANCE (10)	East Asia and the Pacific		320,377	Bank and Cash			
PROGRAM SUPPLIES & (11) MATERIAL	East Asia and the Pacific	11.		Bank and Cash	124.841	PROGRAM SUPPLIES & MATERIAL	FMV
SERVICE CONTRACTS (12)	East Asia and the Pacific)		Bank and Cash	,-		
OTHER ASSISTANCE (13)	Europe (Including Iceland and Greenland)		·	Bank and Cash			
PROGRAM SUPPLIES & (14) MATERIAL	Europe (Including Iceland and Greenland)			Bank and Cash			
SERVICE CONTRACTS (15)	Europe (Including Iceland and Greenland)		·	Bank and Cash			
CASH ASSISTANCE (16)	Middle East and North Africa		13,160,245	Bank and Cash			
EDUCATION MATERIALS (17)	Middle East and North Africa		44,567	Bank and Cash			
HEALTH CARE (18)	Middle East and North Africa			Bank and Cash			
(10)			۷۱ کا کا کا کا کا کا کا کا کا کا کا کا کا			I.	

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)	
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; don't file with Form 990)	
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)	
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)	
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)	
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; don't file with Form 990)	

13-5660870

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 I 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 I Line 3 Program services amounting to \$92,533,015 and grants to recipients amounting
\$62,993,925 related to multiple regions that managed through headquarters are not included
in the cost per region as costs applied across multiple locations.
Part I Line Column C The International Rescue Committee responds to the worlds worst
humanitarian crises and helps people whose lives and livelihoods are shattered by conflict
and disaster to survive, recover and gain control of their future. In 2023 in more than 41
countries and in 29 U.S. cities, our dedicated teams provide clean water, shelter,
healthcare, education and empowerment support to refugees and displaced people. In 2023
the IRC and our partners reached over 34.5 million people in countries affected by crisis.
As part of this work, IRC Supported 3,282 health facilities, provided 10,687,491
outpatient consultations, treated 265,134 children under 5 for severe acute malnutrition,
admitted 578,963 children and 142,394 pregnant and lactating women to nutrition programs,
built or rehabilitated water supplies serving 2,828,438 people, reached 1,645,941 people
with cash assistance, distributed \$79,142,851 in cash or vouchers, provided counseling to
45,077 women survivors of gender-based violence, supported 227,779 children in IRC safe
spaces and other protection programs, enrolled 1,589,208 children and youth in learning
programs and provided 492,927 individuals with livelihood support. In the United States
IRC enrolled 158 068 in resettlement, asylum and integration program. This includes safety

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.

and health, resettlement, and economic empowerment programs, as well as education and
youth services. IRC provided 42,839 people with legal assistance, served 66,516 people
through humanitarian reception programs and Resettled 12,461 people in the United States.
In Europe IRC served asylum seekers in 14 European countries hosted Resettlement, Asylum
and Integration (RAI) projects. IRC reported number of recipients based on overall program
outcome as stated above not per activity.
•.C
(7)

Part II Continu	uation of Gran	nts and Other Assis	stance to Organizat	tions or Entities	Outside the United	l States. (Schedul	e 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)		Sub-Saharan Africa	Education	475.05 9	Bank Tranfer			FMV
(17)		Sub-Saharan Africa	Education	475,958	Bank Tranfer			FIVIV
(18)				43,801	Zami mamo.			FMV
(19)		Sub-Saharan Africa	Health	542,320	Bank Tranfer	~\n\	.)	FMV
(20)		Sub-Saharan Africa	Health	17,287	Bank Tranfer			FMV
(21)		Sub-Saharan Africa	Health	8,998,482	Bank Tranfer			FMV
(22)		Sub-Saharan Africa	Health	87,266	Bank Tranfer			FMV
(23)		Sub-Saharan Africa	Health		Bank Tranfer			FMV
(24)		Sub-Saharan Africa	Health		Bank Tranfer			FMV
(25)		Sub-Saharan Africa	Health	553,107	Bank Tranfer			FMV
(26)		Sub-Saharan Africa	Health	51,504	Bank Tranfer			FMV
(27)		Sub-Saharan Africa	Health	23,439	Bank Tranfer			FMV
(28)		Sub-Saharan Africa	Health	590,983	Bank Tranfer			FMV
(29)			Health	2,972,387	Bank Tranfer			FMV
(30)		Sub-Saharan Africa	Health	201,857	Bank Tranfer			FMV
(31)		Sub-Saharan Africa	Health	4,043,424	Bank Tranfer			FMV
(32)		Sub-Saharan Africa	Health	53,077	Bank Tranfer			FMV
(33)		Sub-Saharan Africa	Health	535,656	Bank Tranfer			FMV
(34)		Sub-Saharan Africa	Health	2,676,751	Bank Tranfer			FMV
(35)		Sub-Saharan Africa	Health	504,543	Bank Tranfer			FMV

Part II	Contin	uation of Grai	nts and Other Assis	stance to Organiza	tions or Entities	Outside the United	States. (Schedul	e F (Form 990), Part II	l, line 1)
	Name of ganization	(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)
(2.2)			Sub-Saharan Africa	Health		Bank Tranfer			5.0 /
(36)			Sub-Saharan Africa	Health	1,440,566	Bank Tranfer	A .		FMV
(37)			Oub-Gariaran Airica	Ticaltii	965,188	Dank Haniei			FMV
			Sub-Saharan Africa	Health	,	Bank Tranfer			
(38)					877,349			•	FMV
(39)			Sub-Saharan Africa	Health	288,272	Bank Tranfer			FMV
(40)			Sub-Saharan Africa	Health	56,305	Bank Tranfer			FMV
(41)			Sub-Saharan Africa	Health	54,992	Bank Tranfer			FMV
(42)			Sub-Saharan Africa	Health		Bank Tranfer			FMV
(43)			Sub-Saharan Africa	Health	96,855	Bank Tranfer			FMV
(44)			Sub-Saharan Africa	Health		Bank Tranfer			FMV
(45)			Sub-Saharan Africa	Health		Bank Tranfer			FMV
(46)			Sub-Saharan Africa	Health	118,486	Bank Tranfer			FMV
(47)			Sub-Saharan Africa	Health		Bank Tranfer			FMV
(48)			Sub-Saharan Africa	Power	103,135	Bank Tranfer			FMV
(49)			Sub-Saharan Africa	Power	385,857	Bank Tranfer			FMV
(50)			Sub-Saharan Africa	Power	58,195	Bank Tranfer			FMV
(51)			Sub-Saharan Africa	Power		Bank Tranfer			FMV
(52)			Sub-Saharan Africa	Safety	,	Bank Tranfer			FMV
			Sub-Saharan Africa	Safety		Bank Tranfer			
(53)			Sub-Saharan Africa	Safety	724,520	Bank Tranfer			FMV
(54)					44,797				FMV

Part	Continu	uation of Grar	nts and Other Assi	stance to Organiza	tions or Entities	Outside the United	States. (Schedul	e F (Form 990), Part II	l, 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)
(5	5)		Sub-Saharan Africa	Safety	15,914	Bank Tranfer		4	FMV
			Sub-Saharan Africa	Safety		Bank Tranfer			
(50			Sub-Saharan Africa	Safety	19,361	Bank Tranfer	- 0		FMV
(5)			Sub-Saharan Africa	Safety	40,670 88,802	Bank Tranfer			FMV FMV
(59			Sub-Saharan Africa	Safety		Bank Tranfer			FMV
(60			Sub-Saharan Africa	Safety	80,335	Bank Tranfer			FMV
(6	1)		Sub-Saharan Africa	Safety	23,646				FMV
(62	2)		Sub-Saharan Africa	Safety	1,619,925				FMV
(63	3)		Sub-Saharan Africa	Safety	159,298	Bank Tranfer			FMV
(64	1)		Sub-Saharan Africa	Safety	63,118				FMV
(6	5)		Sub-Saharan Africa	Safety	61,574	Bank Tranfer			FMV
(60	5)		Sub-Saharan Africa	Safety	275,251	Bank Tranfer			FMV
(67	7)		Sub-Saharan Africa	Safety	322,219	Bank Tranfer			FMV
(68	3)		Sub-Saharan Africa	Safety	131,407	Bank Tranfer			FMV
(69	9)		Sub-Saharan Africa	Safety	1,308,400	Bank Tranfer			FMV
(70	0)		Sub-Saharan Africa	Safety	180,290	Bank Tranfer			FMV
(7	1)		South Asia	Economic Wellbeing	1,888,175	Bank Tranfer			FMV
(72	2)		South Asia	Economic Wellbeing	575,628	Bank Tranfer			FMV
(7:	3)		South Asia	Economic Wellbeing	146,699	Bank Tranfer			FMV

Part II Contin	uation of Gran	nts and Other Assis	stance to Organiza	tions or Entities	Outside the United	d States. (Schedul	e 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)
		South Asia	Economic Wellbeing		Bank Tranfer			
(74)		Cauth Asia		113,215		_	1	FMV
(75)		South Asia	Education	3,420,979	Bank Tranfer			FMV
(13)		South Asia	Education	3,420,979	Bank Tranfer		1	FIVIV
(76)				200,637				FMV
(77)		South Asia	Health		Bank Tranfer			FMV
(78)		South Asia	Health		Bank Tranfer			FMV
(79)		South Asia	Health		Bank Tranfer			FMV
(80)		South Asia	Health		Bank Tranfer			FMV
(81)		South Asia	Safety		Bank Tranfer			FMV
(82)		South Asia	Safety		Bank Tranfer			FMV
(83)		South Asia	Safety	327,767	Bank Tranfer			FMV
(84)		South Asia	Safety	1,139,838	Bank Tranfer			FMV
(85)		Middle East and North Africa	Economic Wellbeing		Bank Tranfer			FMV
(86)		Middle East and North Africa	Economic Wellbeing	1,897,337	Bank Tranfer			FMV
(87)		Middle East and North Africa	Economic Wellbeing	266,667	Bank Tranfer			FMV
(88)		Middle East and North Africa	Economic Wellbeing	178,538	Bank Tranfer			FMV
(89)	X	Middle East and North Africa	Economic Wellbeing	411,173	Bank Tranfer			FMV
(90)		Middle East and North Africa	Education	135,475	Bank Tranfer			FMV
(91)		Middle East and North Africa	Education	588,674	Bank Tranfer			FMV
(92)		Middle East and North Africa	Education	986,199	Bank Tranfer			FMV

Part II Con	ntinuation of Gran	nts and Other Assis	tance to Organizat	tions or Entities	Outside the United	d States. (Schedul	e 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	Education	820,873	Bank Tranfer			FMV
(33)		Middle East and North	Education	020,073	Bank Tranfer	1		I IVI V
(94)		Africa		1,347,940			1	FMV
(95)		Middle East and North Africa	Health	1,077,566	Bank Tranfer		.)	FMV
(96)		Middle East and North Africa	Health	2,202,180	Bank Tranfer			FMV
(97)		Middle East and North Africa		4,828,004				FMV
(98)		Middle East and North Africa		25,000				FMV
(99)		Middle East and North Africa		124,257				FMV
(100)		Middle East and North Africa	Safety	596,454	Bank Tranfer			FMV
(101)		Middle East and North Africa	Safety	1,239,029	Bank Tranfer			FMV
(102)		Middle East and North Africa	Safety	188,849	Bank Tranfer			FMV
(103)		Middle East and North Africa	Safety	2,291,506	Bank Tranfer			FMV
(104)		Middle East and North Africa		19,291	Bank Tranfer			FMV
(105)		Middle East and North Africa	Safety	1,109,106	Bank Tranfer			FMV
(106)		Middle East and North Africa	-	890,910				FMV
(107)		Middle East and North Africa	-	1,030,236				FMV
(108)		Middle East and North Africa	·	668,560	Bank Tranfer			FMV
(109)		Middle East and North Africa	Safety	137,076	Bank Tranfer			FMV
(110)		Europe (Including Iceland and	Education	361,953	Bank Tranfer			FMV
(111)		Europe (Including Iceland and	Health	452,486	Bank Tranfer			FMV

Part II Cont	inuation of Grar	nts and Other Assis	stance to Organiza	tions or Entities	Outside the United	d States. (Schedul	e 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)		Europe (Including Iceland and	Health	223,002	Bank Tranfer			FMV
(113)		Europe (Including Iceland and	Health	545,805	Bank Tranfer	11		FMV
(114)		Europe (Including Iceland and	Power	25,462	Bank Tranfer			FMV
(115)		Europe (Including Iceland and	Power	2,253,139	Bank Tranfer			FMV
(116)		Europe (Including Iceland and	Safety	147,292	Bank Tranfer			FMV
(117)		Europe (Including Iceland and	Safety	48,900	Bank Tranfer			FMV
(118)		Europe (Including Iceland and	Safety		Bank Tranfer			FMV
(119)		Europe (Including Iceland and	Safety	282,239	Bank Tranfer			FMV
(120)		Europe (Including Iceland and	Safety	840,723	Bank Tranfer			FMV
(121)		Europe (Including Iceland and	Safety	83,411	Bank Tranfer			FMV
(122)		Europe (Including Iceland and	Safety	, 250,167	Bank Tranfer			FMV
(123)		Europe (Including Iceland and	Safety	88,852				FMV
(124)		East Asia and the Pacific	Economic Wellbeing	16,070,977	Bank Tranfer			FMV
(125)		East Asia and the Pacific	Economic Wellbeing	93,119				FMV
(126)		East Asia and the Pacific	Education	98,729				FMV
(127)		East Asia and the Pacific	Health	75,888				FMV
(128)		East Asia and the Pacific	Health	284,724	Bank Tranfer			FMV
(129)		East Asia and the Pacific	Health	54,821	Bank Tranfer			FMV
(130)		East Asia and the Pacific	Health	2,577,521	Bank Tranfer			FMV

Part II Cont	inuation of Gran	nts and Other Assis	stance to Organizat	tions or Entities	Outside the United	States. (Schedul	e 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)		East Asia and the Pacific	Health	1,318,971	Bank Tranfer			FMV
(132)		East Asia and the Pacific	Health	2,095,943	Bank Tranfer			FMV
		East Asia and the Pacific	Power		Bank Tranfer	- 0		
(133)		East Asia and the Pacific	Safety	27,942 392,832	Bank Tranfer			FMV
(135)		East Asia and the Pacific	Safety	62,197	Bank Tranfer			FMV
(136)		East Asia and the Pacific	Safety	321,754	Bank Tranfer			FMV
(137)		East Asia and the Pacific	Safety	176,276				FMV
(138)		East Asia and the Pacific	Safety	2,247,766				FMV
(139)		East Asia and the Pacific	Safety	717,451	Bank Tranfer			FMV
(140)		East Asia and the Pacific	Safety	86,908	Bank Tranfer			FMV
(141)		the Caribbean	Economic Wellbeing	14,249	Bank Tranfer			FMV
(142)		the Caribbean	Economic Wellbeing	824,057	Bank Tranfer			FMV
(143)		Central America and the Caribbean		1,153,000				FMV
(144)		the Caribbean	Education	2,472,514	Bank Tranfer			FMV
(145)		Central America and the Caribbean	Education	28,660	Bank Tranfer			FMV
(146)		Central America and the Caribbean	Health	1,628,513				FMV
(147)		the Caribbean	Health	139,389	Bank Tranfer			FMV
(148)		the Caribbean	Health	32,471	Bank Tranfer			FMV
(149)		Central America and the Caribbean	Safety	832,883	Bank Tranfer			FMV

Part II	Continu	ation of Grar	nts and Other Assis	stance to Organiza	tions or Entities	Outside the United	d States. (Schedul	e F (Form 990), Part II	, line 1)
1 (a) Nam organiza	e of ation	(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)			Central America and the Caribbean	Safety	157,419	Bank Tranfer		4	FMV
(151)			Central America and the Caribbean	Safety	107,481	Bank Tranfer	11		FMV
(152)			Central America and the Caribbean	Safety	228,068	Bank Tranfer	~~	.)	FMV
(153)			Central America and the Caribbean	Safety	708,727	Bank Tranfer			FMV
(154)			Central America and the Caribbean	Safety	304,842	Bank Tranfer			FMV
(155)			Central America and the Caribbean	Safety	162,028	Bank Tranfer			FMV
(156)			Europe (Including Iceland and	Affilates		Bank Tranfer			
(157)			· · · · · · · · · · · · · · · · · · ·						
(158)									
(159)									
(160)									
(161)			A.1	(O)					
(162)									
(163)									
(164)									
(165)									
(166)									
(167)									
(168)									

Part	Continuation of Gran	nts and Other Assistance	to Individua	ls Outside the U	nited States. (So	hedule F (Fori	m 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)
(40)	OTHER ASSISTANCE	Middle East and North Africa			Bank and Cash		<u> </u>	
(19)	PROGRAM SUPPLIES &	Middle East and North Africa		2,101,446	Bank and Cash		PROGRAM SUPPLIES &	
(20)	MATERIAL			12,020,512		1,363,976	MATERIAL	FMV
(21)	SERVICE CONTRACTS	Middle East and North Africa		966,341	Bank and Cash			
(22)	CASH ASSISTANCE	South Asia			Bank and Cash			
(23)	EDUCATION MATERIALS	South Asia			Bank and Cash			
(24)	OTHER ASSISTANCE	South Asia			Bank and Cash			
	PROGRAM SUPPLIES & MATERIAL	South Asia			Bank and Cash		PROGRAM SUPPLIES & MATERIAL	FMV
(26)	SERVICE CONTRACTS	South Asia			Bank and Cash	·		
(27)	CASH ASSISTANCE	Sub-Saharan Africa		26,757,244	Bank and Cash			
(28)	EDUCATION MATERIALS	Sub-Saharan Africa		1,298,601	Bank and Cash			
(29)	HEALTH CARE	Sub-Saharan Africa		2,874,727	Bank and Cash			
(30)	OTHER ASSISTANCE	Sub-Saharan Africa		2,415,216	Bank and Cash			
(31)	PROGRAM SUPPLIES & MATERIAL	Sub-Saharan Africa		68,190,995	Bank and Cash	8,847,708	PROGRAM SUPPLIES & MATERIAL	FMV
(32)	SERVICE CONTRACTS	Sub-Saharan Africa		221,873,323	Bank and Cash			
(33)								
(34)		Ž						
(35)								
(36)								
(37)								

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection
Employer identification number

INTERNATIONAL RESCUE COMMITTEE,	INC				13-56	60870
Part I Fundraising Activities. Co	•	•		ered "Yes" on For	m 990, Part IV, li	ne 17.
Form 990-EZ filers are not						
1 Indicate whether the organization ra	ised funds throu			•	• • •	
a X Mail solicitations				of non-government o		
b X Internet and email solicitations		f X S	olicitation o	of government grant	s	
c Phone solicitations		g X S	pecial fund	Iraising events		
d X In-person solicitations						
2a Did the organization have a written of	or oral agreemer	nt with any	individual	(including officers, o	directors, trustees,	
or key employees listed in Form 990						X Yes No
b If "Yes," list the 10 highest paid indiv	iduals or entities	s (fundrais	ers) pursu	ant to agreements u	nder which the fund	Iraiser is to
be compensated at least \$5,000 by	the organization					
		(iii) Did fun	draiser have		(v) Amount paid to	(vi) Amount paid to
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	r control of	(iv) Gross receipts from activity	(or retained by) fundraiser listed in	(or retained by)
or entity (turidialser)	ļ	contrib	outions?	noin activity	col. (i)	organization
		Yes	No			
1 The Harrington Agency, LLC.	Direct mail					
212 S.Chester Rd. Swarthmore PA 19081	Consultant		X	0	1,583,081	0
2 M&R Strategic Services, Inc.	Digital					
,			X	0	5,646,372	0
3 New Canvassing Experience, Inc.	Digital				0.000.750	0
78 San Marcos St, Austin TX 78702 4 Green Planet Sales Company, Inc. dba	Fundraising		Х	0	2,206,758	0
1526 Berlin Rd Cherry Hill NJ 08003	Mail		Х	0	1,498,356	0
				0	1,490,330	0
Kemp House, 152 - 160 City Rd, London E	Constant		Х	0	65,207	0
6 Public Interest Communications, Inc	Fundraising •				,	
7700 Leesburg Pike Ste 416-S Falls Churc	mail		Х	0	158,061	0
7 Global Cloud, Ltd., DBA Donor Drive	Consulting					
30 West Third St., Cincinnati OH 45202		Ť	Х	0	18,641	0
8						
				0	0	0
9				0	0	0
10				0	0	<u> </u>
				0	0	0
	,		<u> </u>			
Total	<u></u>			0	11,176,476	0
3 List all states in which the organizati	on is registered	or license	d to solicit	contributions or has	been notified it is e	xempt from
registration or licensing.						
AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, I	L, KS, KY, LA, N	ИA, MD, M	IE, MI, MN	, MS, NC, ND, NH, I	NJ, NM, NY	
, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA	<u> 1, WI, WV</u>					
						

Schedule G (Form 990) 2022 INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 Page **2** Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported Part II 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. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) 3D Taste of California Dallas Event (event type) (event type) (total number) Revenue Gross receipts 137,957 3,448 2,885 144,290 Less: Contributions . . . 137,957 3,448 2,885 144,290 Gross income (line 1 minus 0 line 2) 0 0 0 Cash prizes Noncash prizes 0 Direct Expenses Rent/facility costs 6,405 414,042 420,447 Food and beverages . . . 0 0 Entertainment 0 52,863 Other direct expenses . . 52,863

	10								(73,3	
Pa	1 ^r	· · · · · · · · · · · · · · · · · · ·	ne organization answei	mn (red	d)), F	 Par	t IV, line 19, or ı	eporte	ed mo	ore th	473,3 han	310
Revenue		. ,	(a) Bingo	b	(b) Pull tabs/instant ingo/progressive bingo			(c) Other gaming		Total (
Rev	1	Gross revenue		1									0
ses	2	Cash prizes											0
:xpen	3	Noncash prizes							<u> </u>				0
Direct Expenses	4	Rent/facility costs							<u> </u>				0
۵	5	Other direct expenses			-				_	_	_		0
	6	Volunteer labor	Yes% No		Yes% No			Yes % No					
	7	Direct expense summary. Add	lines 2 through 5 in colu	mn (d)				(0)
	8	Net gaming income summary	. Subtract line 7 from line	1, co	olumn (d)								0
9		Enter the state(s) in which the or	ganization conducts gami	ng a	ctivities:								
	а	Is the organization licensed to co	-	eac	h of these states? .		 		. [Y		·	No
		Were any of the organization's ga		usp	ended, or terminated	du	ırinç	the tax year? .					No

Sched	ule G (Form 990) 2022 INTERNATIONAL RESCUE COMMITTEE, INC	13-5660870 Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	Yes No
13	Indicate the percentage of gaming activity conducted in:	
а	The organization's facility	13a %
b	An outside facility	13b %
14	Enter the name and address of the person who prepares the organization's gaming/special events books at records:	nd
	Name	
	Address	3
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ 0 and the	
	amount of gaming revenue retained by the third party \$0	
С	If "Yes," enter name and address of the third party:	
	Name	
	Address	
16	Gaming manager information:	
	Name	
	Gaming manager compensation \$0	
	Description of services provided	
	Director/officer Employee Independent contractor	
17	Mandatory distributions:	
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	
	retain the state gaming license?	Yes No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations of	
5 1	spent in the organization's own exempt activities during the tax year \$	0
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, column Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional	
	See instructions.	ii ii ii ii ii ii ii ii ii ii ii ii ii
Part l	Il Line 6 and 7 The information for line 7 (food and beverages) is combined into line	
	ent/facility costs) as most facilities generally provide the food and beverages which	
	ot usually not broken out separately by the vendors on invoices	
	Line 2b and Column VI IRC does not have a mechanism to calculate gross receipt	
	ed to each Fundraiser. Amount paid to professional fundraisers include current and	
future	e donors.	

SCHEDULE I (Form 990)

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

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization						Employer identi	fication number
INTERNATIONAL RESCUE COMM	NITTEE, INC					1	3-5660870
Part I General Information	on on Grants	and Assistance					
1 Does the organization mainta	ain records to su	bstantiate the amou	ınt of the grants or assi	stance, the grantees'	eligibility for the grants or	r assistance, and	
the selection criteria used to	award the grants	s or assistance?					. X Yes No
2 Describe in Part IV the organ	ization's proced	ures for monitoring	the use of grant funds i	in the United States.			
Part II Grants and Other	Assistance to	Domestic Orga	nizations and Dom	estic Governmen	ts. Complete if the org	anization answere	ed "Yes" on Form
990, Part IV, line 21	, for any recipi	ient that received	more than \$5,000. I	Part II can be dupli	cated if additional space	ce is needed.	
1 (a) Name and address of organization	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(g) Description of	(h) Purpose of grant
or government	(b) EIN	(if applicable)	grant	cash assistance	(book, FMV, appraisal, other)	noncash assistance	or assistance
(1) Catholic Charities Archdiocese of 3		, , ,			other)		Refugee Programs
202 West French Place San Antonio. 1	74-1109743	501(C)(3)	19,229,681				Trelugee Programs
(2) Church World Service, Inc.	74-1109743	301(0)(3)	19,229,001				Refugee Programs
475 Riverside Dr. STE 700 New York,	13-4080201	501(C)(3)	14,328,083				Trelagee i Tograms
(3) Refugee Services of Texas, Inc.	10-4000201	301(0)(3)	14,320,003				Refugee Programs
9330LBJ Freeway Dallas, TX 75254	75-1618251	501(C)(3)	468,657				Ttorageo i regianio
(4) Interfaith Refugee & Immigration S	70 1010201	001(0)(0)	100,001				Refugee Programs
19 South 2nd Avenue Highland Park, I	20-5012410	501(C)(3)	7,582,380				i totagee i tegrame
(5) Catholic Charities of Northeast Ka		30.(3)(3)	7,002,000				Refugee Programs
9720 West 87th Street Overland Park,	48-1181305	501(C)(3)	3,091,074				
(6) Catholic Charities of the Texas Pa		(- /(- /					Refugee Programs
2801 Duniven Circle Amarillo, TX 7910	75-0818147	501(C)(3)	2,215,085				
(7) The Independence Fund							Refugee Programs
8349 Arrowridge Blvd, Suite R Charlot	26-0322088	501(C)(3)	735,314				
(8) Catholic Charities of Southwest Ka							Refugee Programs
906 Central Ave Dodge City, KS 6780	48-0697602	501(C)(3)	2,787,772				
(9) Caritas of Austin							Refugee Programs
611 NECHES ST AUSTIN, TX 78701	74-1909670	501(C)(3)	2,190,762				
(10) Interfaith Action of Central Texas							Refugee Programs
2921 E. 17th St., Bldg., D, Ste. # 3 Bld	74-2509149	501(C)(3)	926,218				
(11) Lutheran Immigration and Refuged							Refugee Programs
700 Light Street Baltimore, MD 21230	13-2574854	501(C)(3)	240,915				
(12) API Chaya	•						Anti-Trafficking
P.O. Box 14047 Seattle, WA 98114	91-1674016	501(C)(3)	156,802				
2 Enter total number of section	501(c)(3) and g	overnment organiza	ations listed in the line	1 table			85

Enter total number of other organizations listed in the line 1 table .

Schedule I (Form 990) 2022

Part III Grants and Other Assistance to D Part III can be duplicated if additional		•	organization answe	ered "Yes" on Form 99	0, Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Economic Wellbeing					Clothing and household items
1		68,075,349	1,417,670		
Education Program		000.740	44.000		Supplies
2 Health programming		923,740	44,608	FMV	Health Supplies
3		1,182,107	24,475	FMV	Can Cappiles
Power					Supplies
4		779,694	69,505	FMV	
Safety 5		44,345,975	2,294,840	FMV	Clothing and household items
6		44,040,970	2,294,040)	
7					
Part IV Supplemental Information. Provide	e the information i	required in Part I. line	e 2: Part III. column	(b): and any other add	litional information.
Part I Line 1 IRC maintains records of all grants made	from the pre-award	/ due diligence phase v	which determines the s	election of the	
subgrantee, the signing of the grant agreement and th	roughout the activity	with the submission of	periodic financial and	programmatic	
eports as required per the grant agreement.					
Part I Line 2 IRC has detailed required procedures for	monitoring the use	of funds within the US in	ncluding but not limited	d to reviewing	
programmatic and financial reports, on-site monitoring	, visits, phones cont	acts as well as capacity	/ building as required		
Part III Line B Number of recipients is noted it total for	10			tle some	
12069 newly arrived refugees and provided services to					
numan trafficking and other immigrants.		- y	<u></u>		
9					

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

13-5660870

Part II Continuation of Grants a	,	sistance to Gove	ernments and Oi	ganizations in t	the United States	13-3000070	
(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) University of Denver							Refugee Programs
2601 E Colorado Ave Denver, CO 80208	84-0404231	501(C)(3)	160,987				
(14) Jewish Vocational Service of MetroWest							Refugee Programs
111 Prospect street East Orange, NJ 07017	22-1487229	501(C)(3)	449,535				
(15) Real Escape from the Sex Trade, REST						•	Refugee Programs
4215 Rainier Ave S, Suite B Seattle, WA 9811	45-3531020	501(C)(3)	167,525				
(16) A New Leaf							Refugee Programs
868 E University Dr Mesa, AZ 85203	86-0256667	501(C)(3)	15,421		A		
(17) Refugee and Immigrant Transitions							Refugee Programs
870 Market Street, Suite 718 San Francisco, C	94-3112099	501(C)(3)	72,000		\cup		
(18) Upwardly Global							Refugee Programs
505 8th Avenue Suite 1704 New York, NY 100	94-3346127	501(C)(3)	201,221				
(19) Catholic Charities, Diocese of Camden							Refugee Programs
1845 Haddon Ave Camden, NJ 08103	22-3759994	501(C)(3)	25,420				
(20) Weave Inc							Anti-Trafficking
2020 Hurley Way Sacramento, CA 95811	94-2493158	501(C)(3)	72,327				
(21) George Mason University		¥					Refugee Programs
4400 University Drive MS 1A3 Fairfax, VA 220	54-1603842	501(C)(3)	51,801				
(22) Survive and Thrive Advocacy Center, Inc							Refugee Programs
P. O. Box 13898 TALLAHASSEE, FL 32317	47-3189855	501(C)(3)	59,840				
(23) Access Inc.							Refugee Programs
111 Pine Street, San Francisco, CA 94111	95-2422704	501(C)(3)	42,431				
(24) Iowa Center for Economic Success							Refugee Programs
2210 Grand Ave Des Moines, IA 50312	20-1037604	501(C)(3)	43,750				
(25) Iowa's West Coast Initiative (IWCI)							Refugee Programs
1122 PIERCE ST Sioux City, IA 51105	87-3212695	501(C)(3)	62,500				
(26) Somali American Community Center							Refugee Programs
436 N Indian Creek Dr Ste D Clarkston, GA 30	26-4586095	501(C)(3)	50,000				
(27) GK FOLKS FOUNDATION							Refugee Programs
7009 W 7895 S West Jordan, UT 84081	46-5222358	501(C)(3)	54,062				
(28) Cache Refugee & Immigration Connection							Refugee Programs
P.O. Box 4413 LOGAN, UT 84323	47-1525678	501(C)(3)	33,186				
(29) Latin American Association							Refugee Programs
3565 Piedmnot Rd NE Bldg Ste 205 Atlanta, G	58-1237316	501(C)(3)	35,189				

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

Part II Continuation of Grants a	and Other Ass	sistance to Gove	ernments and Or	ganizations in t	he 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
(30) LagosPHX							Refugee Programs
800N Central avenue No. 1203 Phoenix, AZ 8	84-1805945	501(C)(3)	41,665				
(31) Holy Cross Ministries							Refugee Programs
860 E 4500 S Salt Lake City, UT 84107	87-0359324	501(C)(3)	21,629				
(32) Wind Youth Service INC						•	Anti-Trafficking
8001 Folsom Blvd, Sacramento, CA 95826	23-7348227	501(C)(3)	23,976		· · · · · · · · · · · · · · · · · · ·		
(33) Refugee Women's Network, Inc.							Refugee Programs
500 S Columbia Dr, Decatur, GA 30030	58-2369796	501(C)(3)	81,906		A		
(34) Drake University							Refugee Programs
2507 University Ave, Des Moines, IA 50311	42-0680460	501(C)(3)	60,000	• •	\cup		
(35) Karen Organization Of San Diego							Refugee Programs
5354 University Ave #1 San Diego, CA 92105	27-2917644	501(C)(3)	68,663				
(36) Sacramento LGBT Community Center							Anti-Trafficking
1015 20th St, Sacramento, CA 95811	94-2502229	501(C)(3)	15,093				
(37) Lutheran Services in Iowa, Inc.							Refugee Programs
3200 University of Iowa Des Moines, IA 50311	42-1254906	501(C)(3)	191,973				
(38) IRC Center for Economic Opportunity		·					Refugee Programs
122 East 42nd Street New York, NY 10168	45-3686069	501(C)(3)	386,754				
(39) VIDA Legal Assistance, Inc.							Refugee Programs
12955 Biscayne Blvd Ste 200 Miami, FL 3318	27-5325859	501(C)(3)	24,818				
(40) Musuma Ntumba dba Congolese Comm							Refugee Programs
722 Collins Hill Rd. Suite H-338 Lawrenceville	46-5413918	501(C)(3)	16,700				
(41) Somali American United Council of Arizo							Refugee Programs
3150 E. Indian School Rd Phoenix, AZ 85016	01-0876916	501(C)(3)	60,104				
(42) Union of Pan Asian Communities (UPAC							Refugee Programs
800 Silverado St, Ste 100 La Jolla, CA 92037	23-7279074	501(C)(3)	55,375				
(43) Afghan Community Cultural Center, Inc.							Refugee Programs
140 W Park Ave El Cajon, CA 92020	84-4928135	501(C)(3)	6,600				
(44) Catholic Charities of Central Texas							Refugee Programs
1625 Rutherford Ln, Austin, TX 78754	74-2928450	501(C)(3)	1,137,764				
(45) American Civic Association							Refugee Programs
131 Front Strt Binghamton, NY 13905	15-0539034	501(C)(3)	19,150				
(46) Americans for Immigrant Justice							Refugee Programs
6355 NW 36 St Ste 2201 Miami Springs, FL 3	65-0610872	501(C)(3)	225,000				

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

13-5660870

Part II Continuation of Grants	,	sistance to Gove	ernments and O	ganizations in t	the United States	13-5660870	
(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
(47) Boston College							Refugee Programs
140 Commonwealth Ave, Chestnut Hill,, MA 0	04-2103545	501(C)(3)	88,761		`		
(48) Bryte Slavic Baptist Church							Refugee Programs
1000 Sacramento Ave, West Sacramento, CA	23-7068792	501(C)(3)	10,000				
(49) Catholic Charities of the Archdiocese of							Refugee Programs
590 North 7th Street Newark, NJ 07107	22-2164120	501(C)(3)	7,665,225				
(50) Coalition Of Florida Farmworker Organiz	i i						Refugee Programs
778 West Palm Drive Florida City, FL 33034	59-2149950	501(C)(3)	41,975				
(51) Community Alliance With Family Farmer	i'						Refugee Programs
PO Box 363 Davis, CA 95617	94-2914745	501(C)(3)	11,400		<u> </u>		
(52) Denver Health and Hospital Authority							Refugee Programs
777 Bannock St Denver, CO 80204	84-1085196	501(C)(3)	9,419				5.
(53) East Bay Sanctuary Covenant							Refugee Programs
P.O. Box 4670 Berkeley, CA 94704	94-3249753	501(C)(3)	137,812				5.
(54) Harborview Medical Center							Refugee Programs
325 9th Ave Seattle, WA 98104	91-1631806	•	96,543				D (D
(55) Heartland Alliance International (HAI)		//->/->					Refugee Programs
208 S. LaSalle St, Ste 1300 Chicago, IL 60604	30-0739799	501(C)(3)	24,999				Defines December
(56) House of Ukraine (HoU)		504(0)(0)					Refugee Programs
2125 Park Blvd San Diego, CA 92101	33-0889641	501(C)(3)	6,000				Defines December
(57) Islamic Relief USA	05 445040	1 1 1 1 1 1 1 1 1 1	055.440				Refugee Programs
3655 Wheeler Ave Alexandria, VA 22304	95-4453134	501(C)(3)	255,413				Defines December
(58) Kids in Need of Defense	00.0707000	504(0)(0)	50.040				Refugee Programs
1201 L St. NW, Floor 2, Washington, DC 2000	26-2763038	501(C)(3)	58,348				Defere a December
(59) Las Cumbres Community Services	00.74.44000	F04(O)(0)	04.000				Refugee Programs
102 N. Coronado Ave. Espanola, NM 87532	23-7144268	501(C)(3)	24,999				Defuses Dresses
(60) Local First Arizona	00.4057054	F04(O)(0)	70.007				Refugee Programs
407 E. Roosevelt Street Phoenix, AZ 85004	26-1657951	501(C)(3)	79,097				Pofugoo Programa
(61) Managed Career Solutions	05 4000407		20.000				Refugee Programs
3333 Wilshire Blvd #405 Los Angeles, CA 900	95-4626137		32,000				Pofugoo Programa
(62) NorCal Resist	02 4002240	E04(C)(2)	6.005				Refugee Programs
PO Box 188331 SACRAMENTO, CA 95818	83-1003248	501(C)(3)	6,605				Refugee Programs
(63) Northwest Immigrant Rights Project	01 1202000	E01(C)(2)	140 450				Theragee Programs
615 2nd Avenue Suite 400 Seattle, WA 98104	91-1393082	501(C)(3)	142,153				

Name of the organization International Solution

Continuation of Grants and Other Assistance to Governments and Organizations in the United States (f) Method of valuation (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant (book, FMV, appraisal, or government (if applicable) grant cash assistance non-cash assistance or assistance other) Refugee Programs (64) Pacific Island Knowledge 2 Action Reso 47-4185069 501(C)(3) 47,104 230 S 500 W Suite 225 Salt Lake City, UT 841 Refugee Programs (65) Refugee and Immigrant Center for Educ 3,737,974 1305 N Flores St. San Antonio, TX 78212 74-2436920 501(C)(3) Refugee Programs (66) Refugee Assistance Partners (RAP) NJ 82-1634333 501(C)(3) 19.177 559 Park Ave Scotch Plains, NJ 07076 Refugee Programs (67) Revival Slavic Christian Center 47-0884169 501(C)(3) 19,962 5601 Hemlock St Sacramento, CA 95841 Refugee Programs (68) River City Food Bank P.O. box 160204 Sacramento, CA 95816 91-1851398 501(C)(3) 12,283 Refugee Programs (69) Rupani Foundation 30,546 8303 Southwest Fwy Ste 495 Houston, TX 770 26-0476701 501(C)(3) Refugee Programs (70) Safe Harbors Network 97,310 83-1617912 501(C)(3) 3295 Meade Ave San Diego, CA 92116 Refugee Programs (71) Society of Refugee Healthcare Providers 29 Deepwood Dr, Rochester, NY 14606 47-2210459 501(C)(3) 46,200 Refugee Programs (72) Spring of Life Family Church 5948 Pecan Ave. Orangevale, CA 95662 20-3644633 501(C)(3) 20.000 Refugee Programs (73) Talent Beyond Boundaries, Inc. 501(C)(3) 81-1936850 66,553 2000 MASSACHUSETTS AVENUE NORTHW Refugee Programs (74) The Trauma Resolution Center 501(C)(3 65-0617741 40.000 4343 W FLAGLER ST STE 503 Coral Gables Refugee Programs (75) Ukraine Immigration Task Force 1050 30th Street NW Washington, DC 20007 94-2126424 501(C)(3) 58,974 Refugee Programs (76) University of California, Davis 1850 Research Park Drive, Davis, CA 95618 46-4117124 38,212 501(C)(3) Refugee Programs (77) VECINA 84-2758709 33,542 2028 E Ben White Blvd #240-4899 Austin, tx 7 501(C)(3) Refugee Programs (78) English Skills Learning Center 650 E 4500 South Ste 220 Salt Lake City, UT 87-0467902 501(C)(3) 30,000 Refugee Programs (79) UNIVERSIDAD POPULAR 84-3537906 501(C)(3) 10,000 261 AUTUMN DR. SUITE 115 SAN MARCOS Refugee Programs (80) St. Ignatius of Loyola Catholic Church 76-2600987 501(C)(3) 10.000 408 S.Park Street El Paso, TX 79901

Name of the organization Employer identification number INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 Continuation of Grants and Other Assistance to Governments and Organizations in the United States (f) Method of valuation (a) Name and address of organization (c) IRC section (e) Amount of non-(g) Description of (h) Purpose of grant (b) EIN (d) Amount of cash (book, FMV, appraisal, (if applicable) cash assistance non-cash assistance or assistance or government grant other) Refugee Programs (81) Sacred Liberation/ Cas Carmelita 918 S. Stanton Street El Paso, TX 79901 85-1486541 501(C)(3) 10,000 Refugee Programs (82) Good Neighbor Settlement House 1254 E. Tyler Street Brownsville, TX 78520 74-1211654 501(C)(3) 10.000 Refugee Programs (83) Bishop Enrique San Pedro Ozanam Cen 656 N. Minnesota Ave. Brownsville, TX 78521 74-2740560 501(C)(3) 10.000 Refugee Programs (84) American Friends Service Committee 23-1352010 501(C)(3) 10,000 1501 Cherry Street Philadelphia, PA 19102 Refugee Programs (85) Galilee Center 10,000 P.O Box 308 Mecca, CA 92254 27-3133601 501(C)(3) Refugee Programs (86) Mary Mitchell Family and Youth Center 10,000 2007 Mapes Ave Bronx, NY 10460 13-3385032 501(C)(3) Refugee Programs (87) Iglesia Luterana Cristo Rey 1010 East Yandell Drive El Paso, TX 79902 74-2581929 501(C)(3) 10,000 (88) (89) (91) (94) (95) (96)

Name of the organization Employer identification number INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 Continuation of Grants and Other Assistance to Individuals in the United States (a) Type of grant or assistance (b) Number of (c) Amount of (d) Amount of (e) Method of valuation (book, (f) Description of non-cash assistance recipients cash grant FMV, appraisal, other) non-cash assistance 16 17 18 19 26

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

2022

Internal Revenue Service

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Part I Questions Regarding Compensation

Department of the Treasury

Employer identification number

13-5660870

	•		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	X Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
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	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
		_		
3	Indicate which, if any, of the following the 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.			
	X Compensation committee Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
4	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	Χ	
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:	_		
a b	The organization?	5a 5b		X
D	If "Yes" on line 5a or 5b, describe in Part III.	36		_^
	. (/)			
6	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: The organization?	6a		V
a b	Any related organization?	6b		X
-	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed	_	\ \ \	
8	payments not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
3	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2	and/or 1099-MISC and/or 10	099-NEC compensation		(/	_	_
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
David Miliband	(i)	818,952	150,000	224,618	32,025	28,133	1,253,728	0
1 Dir/CEO/Pres	(ii)	0	0	0	0	0	0	
Oscar Raposo	(i)	428,047	0	4,293	32,025	27,231	491,596	0
2 CFO, SVP Finance, Treasurer	(ii)	0	0	0	0	0	0	
Ciaran Donnelly	(i)	405,959	0	1,404	36,277	27,182	470,822	0
3 SVP International Programs	(ii)	0	0	0	0	0	0	
Johannes Van De Weerd	(i)	331,586	0	2,603	33,065	5,339	372,593	0
4 SVP Resettlement Asylum and Inter	(ii)	0	0	0	0	0	0	
Madlin J. Sheerman	(i)	463,690	0	5,470	32,025	27,281	528,466	0
5 Senior Vice President, Operations &	(ii)	0	0	• 0	0	0	0	
Zain Habboo	(i)	388,125	0	1,260	27,550	2,524	419,459	0
6 Chief Mobilization & Marketing Office	(ii)	0	0		0	0	0	
Madeleine Fackler	(i)	390,346	0	5,703	33,350	20,620	450,019	0
7 Chief Information Officer	(ii)	0	0	0	0	0	0	
Ourania Dionysiou	(i)	366,569	• 0	797	30,450	10,990	408,806	0
8 Vice President IPP and GPPS	(ii)	0	0		0	0	0	
Brian Johnson	(i)	366,915	0	5,394	30,450	27,720	430,479	0
9 Chief HR Officer	(ii)	0	0	0	0	0	0	
Susan Ringler	(i)	330,172	0	9,206	33,350	10,938	383,666	0
10 Chief Ethics and Compliance Officer	(ii)	0	0	0	0	0	0	
	(i)							
11	(ii)							
12	(i) (ii)							
13	(i) (ii)	J						
14	(i) (ii)							
15	(i) (ii)							
	(i)							
16	(ii)							

13-5660870

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 4b David Miliband participates in a supplemental non-qualified retirement plan. During the reporting period IRCs
457(f) contribution was of \$45,475. This amount is reported on Schedule J Part II, Column B (iii)
Part I Line 1a During the reporting period a taxable housing allowance of \$50,000 paid to David Miliband. The compensation
committee of the board of directors approved the allowance. This amount is reported in Schedule J, Part II, Column B(iii)
Part 1 Line 7 During the reporting period a bonus of \$150,000 paid to David Miliband. The compensation committee of the board of
directors approved the bonus. Angela M. Freyre received a bonus of \$20,000 during the reporting period. David Millband bonus
reported in Schedule J, Part II, Column B(ii)
Part I Line 1a IRC grossed up 457f plan payment and employee tax preparation payments of David Miliband. 457f plan total grossed
up amount was \$49,254 and tax preparation total grossed up amount was \$9,964.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

| Employer identification number | Employer identification number |

Inspection

INTE	RNATIONAL RESCUE COMMITTE	E, INC		13-56608	370				
Par	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				ermining	
1	Art—Works of art								
2	Art—Historical treasures								
3	Art—Fractional interests								
4	Books and publications								
5	Clothing and household								
	goods	Χ		3,808,136	FMV/I	Receip	ots		
6	Cars and other vehicles								
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	Χ	4	209,757	FMV/I	Receir	ots		
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archaeological artifacts								
25	Other (Fuel and Parts)	X		280,913					
26	Other (Emergency Supplies)	X		10,558,418	FMV/I	Receip	ots		
27	Other (IT supplies and suppl)	X		1,632,634	FMV/I	Receip	ots		
28	Other (
29	Number of Forms 8283 received by		•						
	which the organization completed	Form 8283,	Part V, Donee Acknowledg	ement	29				
								Yes	No
30a	During the year, did the organizati								
	28, that it must hold for at least 3 y			•					
	to be used for exempt purposes for		holding period?				30a		Х
b	If "Yes," describe the arrangement								
31	Does the organization have a gift a								
	contributions?						31	Χ	
32a	Does the organization hire or use	•	_						
	noncash contributions?						32a		Х
b	If "Yes," describe in Part II.								
33	If the organization didn't report an	amount in c	column (c) for a type of prop	erty for which column (a) is					
	checked, describe in Part II.								

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury Internal Revenue Service

Name of the organization

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

13-5660870

Form 990, Part III, Line 4d: Program Service Expenses: 147,445,162, Grants and allocations:
83,276,654, Revenue: 310,082 In Asia, the IRC responded to the health and protection needs of
internally displaced persons, refugees, and host communities across Afghanistan, Bangladesh,
Myanmar, Pakistan, Thailand, and Philippines. In Afghanistan, the IRC continues to respond to
the collapse of local economies. In Myanmar, the IRC supported hard-to-reach populations
through the delivery of health, livelihoods, and economic recovery programs, and in Thailand,
the IRC continued to provide reproductive health services to individuals and families residing
in camps. IRC has Resettlement Support Centers in Thailand and Malaysia as part of our
resettlement work. Pakistan made significant investments in its partnership team and has built
various partnerships, including to tackle issues of climate change, and is piloting the Nexus
approach in humanitarian response, recovery, and peace development.
Form 990, Part III, Line 4d: Program Service Expenses: 136,881,308, Grants and allocations:
54,566,454, Revenue: 0 In the Middle East, the IRC worked in Iraq, Jordan, Lebanon, Syria,
Yemen and Turkiye. Through local partnerships, the IRC delivered aid inside Syria and Turkiye,
and additionally supported Syrian refugees in Lebanon and Jordan. The IRC also delivered
programs in both Federal and the Kurdish Regions of Iraq and Yemen, and aided internally
displaced people in both countries. The IRC, along with the Sesame Workshop, implemented a
large-scale childhood development intervention called Ahlan Simsim aimed at improving early
reading, math, and social-emotional skills of children. It is the largest early childhood
intervention in the history of humanitarian response. Significant work is being done across
the region to enhance economic recovery and development and use of cash and voucher assistance
to support basic needs and early recovery.
Form 990, Part III, Line 4d: Program Service Expenses: 38,930,421, Grants and allocations:
16,368,759, Revenue: 83,972 In Latin America, Country programs have expanded their
programmatic and operational footprint in various locations and provided assistance to
vulnerable migrants and asylum seekers fleeing economic instability and violence in El

OMB No. 1545-0047

Open to Public

Inspection

Schedule O (Form 990) 2022

Name of the organization

Employer identification number

INTERNATIONAL RESCUE COMMITTEE, INC	13-5660870
Salvador, Honduras, Mexico, Venezuela, Peru, Ecuador, and Colombia. In collaboration with our	
US programs, we supported families at the US/Mexico border establishing a Women and Girls Sa	fe
Space alongside local partners. In response to the Venezuela crisis, the IRC in Colombia	
provided child protection and reproductive and primary health services to women and families	·
in need, working with partners in Peru and Ecuador to reach the growing need. Northern Central	
America (El Salvador, Honduras) increased emergency response readiness for climate	
change-induced natural disasters and influx of migrant. Mexico has shown success in adapting	
to changing political climates and increased migration and influenced key government)
stakeholders and strategic partners, building a reputation as an expert in the humanitarian	
sector.	
Form 990, Part III, Line 4d: Program Service Expenses: 7,796,823, Grants and allocations:	
6,899,676, Revenue: 0 In FY23, RAI Europe worked across Europe to assist refugees and asylu	m
seekers in camps and urban areas. In Moldova, Greece, Serbia. Italy, Germany, and with	
partners across Europe, the IRC supported governments and local organizations to implement	
migrant integration programs.	
Form 990, Part I, Line 5: IRC's global workforce is approximately 19,940 employees. The 3,979	
only represents staff on the NY Headquarters payroll covering HQ, US office locations and	
international expatriate employees. The remaining approximate 16,000 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 19,940 employees. The 3,979	
only represents staff on the NY Headquarters payroll covering HQ, US office locations and	
international expatriate employees. The remaining approximate 16,000 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	
the 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	

Schedule O (Form 990) 2022 Name of the organization Employer identification number INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 the Board of Directors prior to filing electronically or before the due date. Form 990, Part VI, Section B, Line 12c: Per IRCs Conflict of Interest Policies, anyone who is in a position to influence IRC policies and actions has a duty to disclose any potential conflict to IRCs General Counsel. IRCs Audit Committee will then review the facts, including whether IRC can obtain an alternative transaction that would not pose a conflict. The Audit Committee will decide whether the transaction is in IRCs best interest and whether it is fair and reasonable, and shall accordingly decide whether to allow the transaction to proceed. 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 IRC Board 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

Schedule O (Form 990) 2022	Page 2
Name of the organization	Employer identification number
INTERNATIONAL RESCUE COMMITTEE, INC	13-5660870
Form 990, Part XI, Line 9: In the Reconciliation of Net Assets, the amount on Line 9	
represents the change in value of split interest agreements \$106,483 and restatement of	
beginning of year net assets to remove wholly-owned subsidiaries of \$17,605,147	
<u>_</u>	
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. (7)	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

(b)

Primary activity

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

Humanitarian Aid

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

(c)

Legal domicile (state

or foreign country)

(d)

Total income

Open to Public Inspection

(f)

Direct controlling

entity

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

(a)

Name, address, and EIN (if applicable) of disregarded entity

Employer identification number 13-5660870

(e)

End-of-year assets

_(1)) •			
(2)			4				
(3)		+ .					
(4)							
(5)							
<u>(6)</u>							
Part II Identification of Related Tax-Exempt Organione or more related tax-exempt organizations of		the organization a	nswered "Yes" on	Form 990, Part	IV, line 34, beca	use it h	ad
(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	Section 5	g) 512(b)(13) rolled tity?
						Yes	No
(1) IRC Hellas	Humanitarian Aid				IDO I	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
Apollon Tower, Louizis Riankour 64 Athens 11523, Greece	Llumanitarian Aid	Greece			IRC Inc.	Х	
(2) IRC Deutschland gGmbh Wallstrasse 15 A Berlin 10179, Germany	Humanitarian Aid	Cormony			IRC Inc.	X	
(3) International Rescue Committee Sverige Insamlingsstiftelse	Humanitarian Aid	Germany			IRC IIIC.		
Magnus Ladulasgatan 3 Stockholm 11865, Sweden	- Indinamian / Na	Sweden			IRC Inc.	Х	
(4) IRC Korea Foundation	Humanitarian Aid					 	
364 Gangnamdae-ro No. 1403 Soul 06241, Korea, Democratic Peo		Korea, Republic o	f		IRC Inc.	Х	
(5) IRC Polska	Humanitarian Aid	•					
Przyokopowa 31, 3rd floor Warsaw 01-208, Poland		Poland			IRC Inc.	Х	

Guatemala

2da Calle 15 -68 Colonia La Guatemala City Guatemala

Х

IRC Inc

(6) IRC Guatemala

13-5660870	Pag
10 0000010	ı ug

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

Docadoo it flad of	le of filore related orga	I	i cated de d pe	i anoromp daring	I TO TAX YOUR.	ı			T					
(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	Dispropo allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		General or I managing		(k) Percentage ownership
				,			Yes	No		Yes	No			
(1)														
(2)														
(3)														
(4)						\								
(5)						9								
(6)														
(7)														

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. Part IV

(a) Name, address, and EIN of related organization	(b) Primary activity	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	enti	rolled ity?
<u>(1)</u>	*(0							Yes	No
(3)	5								
(4)									
(6)									
(7)									

13-5660870

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
1	During the tax year, did the organization engage in any of the following transactions with one	e or more related organ	izations listed in Parts	II–IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		Χ
b	Gift, grant, or capital contribution to related organization(s)						
С	Gift, grant, or capital contribution from related organization(s)			1	1c		Χ
d	Loans or loan guarantees to or for related organization(s)				1d		Χ
е	Loans or loan guarantees by related organization(s)				1e		Χ
f	Dividends from related organization(s)				1f		Х
g	Sale of assets to related organization(s)				1g		Χ
h	Purchase of assets from related organization(s)				1h		Χ
i	Exchange of assets with related organization(s)				1i		Χ
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Χ
-							
k	Lease of facilities, equipment, or other assets from related organization(s)	. • . • . • . •)		1k		Х
- 1	Performance of services or membership or fundraising solicitations for related organization(s		·		11		Х
m	Performance of services or membership or fundraising solicitations by related organization(s				1m		Χ
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).				1n	Χ	
o					10	Χ	
	3 1 1 7						
р	Reimbursement paid to related organization(s) for expenses				1р		Х
a q					1q		Χ
•							
r	Other transfer of cash or property to related organization(s)				1r	Х	
s	Other transfer of cash or property from related organization(s)				1s	Χ	
2	If the answer to any of the above is "Yes," see the instructions for information on who must of	complete this line, include	ding covered relationsh	ips and transaction	thresh	olds.	
	(a)	(b)	(c)	((d)		
	Name of related organization	Transaction type (a—s)	Amount involved	Method of determin	ng amou	ınt involv	ed
		type (a—s)					
				Cash			
1) IR	Hellas	b	3,714,168				
				Cash			
2) IR(Deutschland gGmbh	b	21,480,923				
				Cash			
3) Inte	rnational Rescue Committee Sverige Insamlingsstiftelse	r	3,957,396				
				Cash			
4) IR	Korea Foundation	r	3,757,591				
				Cash			
5) IR(Polska	r	1,193,641				
				Cash			
6) IR(Hellas	r	7,807,496				

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	or each entity taxed as	a partnership through v	vhich the organization o	conducted more than fi	ve percent of its activities	(measured by total assets
or gross revenue) that was not a re	alated organization Sc	a instructions regarding	evolusion for certain in	veetment nartnershins	•	

or gross revenue) that was not a related				ion ior	certair		inersnips.					
(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	Are all sec	e) partners ction (c)(3) zations?	(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)	Gene mana parti	ral or aging	(k) Percentage ownership
			sections 512-514)	Yes	No			Yes No	M	Yes	No	
<u>(1)</u>				res	NO			res No	7	162	NO	
(2)												
(3)												
							5)					
_(7)			· C									
_(8)												
(9)												
(10)												
(11)												
(12)												
(13)												
(14)												
(15)												
(16)												

nedule R (Fo		INTERNATIONAL RE	SCUE COMMITTEE	E, INC		13-5660870	Page 5
art VII	Supplem	ental Information	_				
	Provide a	additional information	for responses to o	questions on Sch	edule R. See inst	ructions.	
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Part V Continuation of Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(7) IRC Deutschland gGmbh	r	5 ,643,396	Cash
(8) IRC Deutschland gGmbh	S	104,287,390	Cash
(9) IRC Guatimala		2,520,209	Cash
(10) IRC Polska	b	6,636,415	Cash
(11) International Rescue Committee Sverige Insamlingsstiftelse	b	4,717,321	Cash
(12) IRC Korea Foundation	b	930,462	Cash
(13) IRC Guatemala	b	733,059	Cash
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
_(24)			

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:
1	Afghanistan
	Bangladesh
3	Burundi
	Burkina Faso
4	
5	Cameroon
6	Chad
7	Congo (Kinshasa)
8	Colombia
9	Cote D'Ivoire (Ivory Coast)
10	Burma
11	Ethiopia
	El Salvador
	Iraq
	Pakistan
	Tanzania
	Thailand
	Kenya
	Uganda
	Zimbabwe
20	Niger
21	Nigeria
22	Greece
23	Sierra Leone
24	Sudan
25	South Sudan
26	Yemen (Aden)
27	Jordan
28	Lebanon
	Liberia
	Mali
31	Switzerland
	Malaysia
	Tunisia
34	Germany
35	Somalia
36	Serbia
37	Sweden
38	Mexico
	Libya
40	Bosnia-Herzegovina
41	Canada
42	United Kingdom
43	Belgium
44	Central African Republic
45	Poland
	Ukraine
46	Moldova
47	Noidova Korea, Republic of (South)
48	
49	Italy

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

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