

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- ▶ Do not enter social security numbers on this form as it may be made public.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2021 calendar year, or tax year beginning <u>10/1/2021</u> , and ending <u>9/30/2022</u>																
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization <u>INTERNATIONAL RESCUE COMMITTEE, INC</u></td> <td>D Employer identification number <u>13-5660870</u></td> </tr> <tr> <td colspan="2">Doing business as</td> <td>E Telephone number <u>212-551-3000</u></td> </tr> <tr> <td colspan="2">Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>122 EAST 42ND STREET</u></td> <td>G Gross receipts \$ <u>1,395,836,237</u></td> </tr> <tr> <td>City or town State ZIP code <u>New York NY 10168</u></td> <td colspan="2"></td> </tr> <tr> <td>Foreign country name Foreign province/state/county Foreign postal code</td> <td colspan="2"></td> </tr> </table>	C Name of organization <u>INTERNATIONAL RESCUE COMMITTEE, INC</u>		D Employer identification number <u>13-5660870</u>	Doing business as		E Telephone number <u>212-551-3000</u>	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <u>122 EAST 42ND STREET</u>		G Gross receipts \$ <u>1,395,836,237</u>	City or town State ZIP code <u>New York NY 10168</u>			Foreign country name Foreign province/state/county Foreign postal code		
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F Name and address of principal officer: <u>Oscar Rapso 122 E 42ND STREET, NEW YORK, NY 10168</u>		H(a) Is this a group return for subsidiaries? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subsidiaries included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions.														
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(c) Group exemption number ▶														
J Website: ▶ <u>WWW.RESCUE.ORG</u>																
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		L Year of formation: <u>1933</u> M State of legal domicile: <u>NY</u>														

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>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 to survive, recover, and gain control of their future</u>			
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	41	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	40	
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	2,719	
	6	Total number of volunteers (estimate if necessary)	6	2,137	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0	
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b		
	Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
		9	Program service revenue (Part VIII, line 2g)	924,498,780	1,355,187,734
10		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,036,305	12,421,917	
11		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,622,894	3,844,324	
12		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,506,407	2,444,653	
13		Grants and similar amounts paid (Part IX, column (A), lines 1–3)	950,664,386	1,373,898,628	
Expenses		14	Benefits paid to or for members (Part IX, column (A), line 4)	354,959,789	525,335,107
		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	0	0
		16a	Professional fundraising fees (Part IX, column (A), line 11e)	408,346,395	508,122,605
		b	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>70,770,887</u>	2,979,705	5,863,625
		17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	137,861,152	230,839,362
		18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	904,147,041	1,270,160,699
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	46,517,345	103,737,929	
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year	
	21	Total liabilities (Part X, line 26)	527,551,484	584,265,431	
	22	Net assets or fund balances. Subtract line 21 from line 20	223,244,694	248,410,266	
			304,306,790	335,855,165	

Part II Signature Block

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

Sign Here	<u>Oscar Rapso</u> Signature of officer	Date <u>5/18/2023</u>
	<u>Oscar Rapso</u> Type or print name and title	<u>CFO</u>
Paid Preparer Use Only	Print/Type preparer's name <u>Omo - ose Joseph - Eramch</u>	Preparer's signature <u>Ose Joseph</u>
	Firm's name ▶ <u>KPMG LLP</u>	Date <u>5/18/2023</u>
	Firm's address ▶ <u>345 Park Avenue, New York, NY 10154-0102</u>	Check <input type="checkbox"/> if self-employed PTIN <u>P02534927</u>
		Firm's EIN ▶ <u>13-5665207</u> Phone no. <u>212-758-9700</u>

May the IRS discuss this return with the preparer shown above? See instructions. Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: The 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 the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 377,655,770 including grants of \$ 185,502,490) (Revenue \$ 11,144,861) 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, Uganda, and Zimbabwe, the IRC provided lifesaving aid in response to conflict and during periods of severe drought, and strengthened health, water, and sanitation systems throughout the region. In North and West Africa, including Burkina Faso, Cameroon, Chad, Cote D Ivoire, Liberia, Libya, Mali, Niger, Nigeria, and Sierra Leone, the IRC strengthened health systems and additionally implemented programs to protect vulnerable populations, particularly women and children. The IRC in the Great Lakes region, in Burundi, Central African Republic, the DR Congo, 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 \$ 297,046,085 including grants of \$ 143,708,306) (Revenue \$ 1,175,093) Through a network of 29 cities across the country, the IRCs Resettlement, Asylum, and Integration (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 Wellbeing, Education, and Power. Staff and volunteers work together to resettle newly arrived refugees, facilitating food, shelter, and other basic needs during the pivotal first months in the US. To promote self-reliance over the long term, 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 legal services to help refugees and other immigrants become permanent residents and US citizens, and supports a variety of programs designed to help new arrivals feel welcome and integrate into their adopted communities.

4c (Code:) (Expenses \$ 135,548,139 including grants of \$ 55,591,466) (Revenue \$) IRC employed expert staff and advisors in sectors including Economic Recovery and Development, Health, Governance, Education, and Violence Prevention and Response. IRC maintained units that provided logistical and administrative support to the country programs listed above and advanced Gender Equality Diversity, and Inclusion as well as ensuring innovation and data-informed decision-making. Finally, the IRCs Emergency Response team, which operated in Ukraine and Poland at the height of crisis, lent surge support and expertise to IRC teams across the globe.

4d Other program services (Describe on Schedule O.) (Expenses \$ 291,517,267 including grants of \$ 140,532,845) (Revenue \$ 101,963)

4e Total program service expenses 1,101,767,261

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		X
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? <i>If "Yes," complete Schedule L, Part II.</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
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):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
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>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
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? <i>If "Yes," complete Schedule R, Part I.</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>		X
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? <i>If "Yes," complete Schedule R, Part VI.</i>		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
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.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 2,719		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	X	
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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? 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 13b		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year Note: If "Yes," see the instructions and file Form 4720, Schedule N.	X	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? Note: If "Yes," complete Form 4720, Schedule O.		X
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? Note: If "Yes," complete Form 6069.		X

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (41), 1b (40), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 (See Attached Statement), 18 (Own website, Another's website, Upon request, Other), 19 (Describe on Schedule O), 20 (State the name, address, and telephone number of the person who possesses the organization's books and records).

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, 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 organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) David Miliband Dir/CEO/Pres	37.50 0.00	X		X				1,086,979	0	55,434
(2) Madlin J. Sheerman Senior Vice President, Operations & Strategy	37.50 0.00				X			442,322	0	55,039
(3) Oscar Raposo CFO, SVP Finance, Treasurer	37.50 0.00			X				422,685	0	55,015
(4) Madeleine Fackler Chief Information Officer	37.50 0.00					X		388,761	0	51,723
(5) Brian Johnson Chief HR Officer	37.50 0.00					X		361,285	0	55,018
(6) Ricardo Castro (Until 02/04/2022) General Counsel, Secretary	37.50 0.00			X				381,866	0	33,858
(7) Zain Habbao Chief Mobilization & Marketing Officer	37.50 0.00					X		376,260	0	30,001
(8) Ciaran Donnelly SVP International Programs	37.50 0.00				X			343,648	0	57,797
(9) Ourania Dionysiou Vice President IPP and GPPS	37.50 0.00					X		355,035	0	40,326
(10) Susan Ringler Chief Ethics and Compliance Officer	37.50 0.00					X		333,623	0	42,930
(11) Jennifer Sime (Until 09/15/2021) SVP US Programs	37.50 0.00						X	289,820	0	39,872
(12) Johannes Van De Weerd SVP Resettlement Asylum and Intergration	37.50 0.00				X			283,205	0	31,593
(13) Clifford S. Asness Director	1.00 0.00	X						0	0	0
(14) George Biddle Director	1.00 0.00	X						0	0	0

Part VII

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

(continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organization
(15) Susan Dentzer Director	1.00 0.00	X					0	0	0	
(16) Timothy F. Geithner Co-Chair, Board of Directors	1.00 0.00	X					0	0	0	
(17) Maria Hummer -Tuttle Director	1.00 0.00	X					0	0	0	
(18) Steven Klinsky Director	1.00 0.00	X					0	0	0	
(19) David A. Levine Director	1.00 0.00	X					0	0	0	
(20) Francois-Xavier de Mallmann Director	1.00 0.00	X					0	0	0	
(21) Eduardo G. Mestre Chair, Board of Directors	1.00 0.00	X					0	0	0	
(22) Jillian Muller Director	1.00 0.00	X					0	0	0	
(23) Michael J. O Neill Director	1.00 0.00	X					0	0	0	
(24) Dr. Kathleen M. Pike, Ph.D. Director	1.00 0.00	X					0	0	0	
(25) Omar Saeed Director	1.00 0.00	X					0	0	0	
1b Subtotal							5,065,489	0	548,606	
c Total from continuation sheets to Part VII, Section A							0	0	0	
d Total (add lines 1b and 1c)							5,065,489	0	548,606	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 283

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Wilmer Cutler Pickering Hale and 1875 Pennsylvania Av. NW Washington, DC 20006	Legal Service	2,261,251
The KonTerra Group, LLC 700 12th St. NW Washington, DC 20005	Consulting	1,022,516
Further, LLC 181 Harry S. Truman Pkwy, St. 265 Annapolis, MD 2	Professional fundraising Serv	952,491
KPMG LLP PO Box 120511 Dallas, TX 75312	Financial Audit Service	860,294
Idealist Consulting, Inc. 4076 N Mississippi Av. Portland, OR 97227	Consulting	803,205

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 23

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	Federated campaigns	1a	15,182,366				
	b	Membership dues	1b	0				
	c	Fundraising events	1c	6,370,149				
	d	Related organizations	1d	0				
	e	Government grants (contributions)	1e	728,302,816				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	605,332,403				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 11,845,530				
	h	Total. Add lines 1a-1f			1,355,187,734			
	Program Service Revenue				Business Code			
2a		US Agency for International Development		900099	5,018,838	5,018,838	0	
b		The Foreign, Commonwealth & Developmen		900099	7,318,875	7,318,875	0	
c		United Nations International Children's Emer		900099	40,242	40,242	0	
d		World Bank		900099	43,962	43,962	0	
e					0	0	0	
f		All other program service revenue			0	0	0	
g		Total. Add lines 2a-2f			12,421,917			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			2,472,241	0	0	
	4	Income from investment of tax-exempt bond proceeds			0	0	0	
	5	Royalties			0	0	0	
	6a	Gross rents	(i) Real	(ii) Personal				
			6a	168,051				
			b	Less: rental expenses	6b			
	c	Rental income or (loss)	6c	168,051	0			
	d	Net rental income or (loss)			168,051	0	0	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			7a	21,604,651	465,569			
			b	Less: cost or other basis and sales expenses	7b	20,698,137	0	
	c	Gain or (loss)	7c	906,514	465,569			
	d	Net gain or (loss)			1,372,083	0	0	
	8a	Gross income from fundraising events (not including \$ 6,370,149 of contributions reported on line 1c). See Part IV, line 18						
			8a	935,000				
b			Less: direct expenses	8b	1,239,472			
c	Net income or (loss) from fundraising events			-304,472		0		
9a	Gross income from gaming activities. See Part IV, line 19							
		9a	0					
		b	Less: direct expenses	9b	0			
c	Net income or (loss) from gaming activities			0		0		
10a	Gross sales of inventory, less returns and allowances							
		10a	0					
		b	Less: cost of goods sold	10b	0			
c	Net income or (loss) from sales of inventory			0		0		
Miscellaneous Revenue				Business Code				
	11a	IOM Loan Collection Fees		900099	359,150	359,150	0	
	b	Immigration Processing fees		900099	748,902	748,902	0	
	c	Miscellaneous Fees		900099	1,430,293	1,430,293	0	
	d	All other revenue			42,729	42,729	0	
e	Total. Add lines 11a-11d			2,581,074				
12	Total revenue. See instructions			1,373,898,628	15,002,991	0	3,707,903	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations domestic governments. See Part IV, line 21	23,710,454	23,710,454		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	119,997,851	119,997,851		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	381,626,802	381,626,802		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	3,196,731	1,105,875	1,789,647	301,209
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	424,375,848	353,684,457	48,981,454	21,709,937
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	16,298,506	11,868,338	2,843,218	1,586,950
9	Other employee benefits	51,705,188	44,244,771	5,156,157	2,304,260
10	Payroll taxes	12,546,332	9,244,601	2,167,496	1,134,235
11	Fees for services (nonemployees):				
a	Management	0	0	0	0
b	Legal	3,136,455	1,437,387	1,667,180	31,888
c	Accounting	1,176,388	484,638	678,896	12,854
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	5,863,625			5,863,625
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	28,969,411	16,949,038	9,310,458	2,709,915
12	Advertising and promotion	27,826,400	936,133	180,876	26,709,391
13	Office expenses	23,659,401	17,211,703	1,473,635	4,974,063
14	Information technology	19,113,850	11,404,071	7,434,760	275,019
15	Royalties	0			
16	Occupancy	29,097,452	27,937,354	797,152	362,946
17	Travel	67,794,117	67,103,761		690,356
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	4,500,452	3,837,150	275,849	387,453
20	Interest	318,711	347	318,364	0
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,856,525	1,236,847	562,795	56,883
23	Insurance	3,534,412	3,301,676	165,820	66,916
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a	Recruitment	1,013,817	944,675	27,507	41,635
b	Dues and Registration	436,720	347,292	49,059	40,369
c	Subscriptions	698,292	332,182	246,380	119,730
d		0	0	0	0
e	All other expenses	17,706,959	2,819,858	13,495,848	1,391,253
25	Total functional expenses. Add lines 1 through 24e	1,270,160,699	1,101,767,261	97,622,551	70,770,887
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	186,538,178	1	210,873,480
	2 Savings and temporary cash investments	201,833	2	19,981,803
	3 Pledges and grants receivable, net	146,618,501	3	165,552,254
	4 Accounts receivable, net	0	4	0
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
	7 Notes and loans receivable, net	4,615	7	4,565
	8 Inventories for sale or use	19,553,065	8	20,922,632
	9 Prepaid expenses and deferred charges	6,091,560	9	10,486,409
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 28,547,109		
	b Less: accumulated depreciation	10b 15,694,395	12,226,046	10c 12,852,714
	11 Investments—publicly traded securities	118,914,572	11	90,043,519
	12 Investments—other securities. See Part IV, line 11	27,440,697	12	37,285,356
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	4,109,675
	15 Other assets. See Part IV, line 11	9,962,417	15	12,153,024
16 Total assets. Add lines 1 through 15 (must equal line 33)	527,551,484	16	584,265,431	
Liabilities	17 Accounts payable and accrued expenses	66,435,303	17	91,214,139
	18 Grants payable	135,393,762	18	134,947,019
	19 Deferred revenue	969,935	19	1,280,272
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	1,401,655	21	0
	22 Loans and other 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	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	19,044,039	25	20,968,836
	26 Total liabilities. Add lines 17 through 25	223,244,694	26	248,410,266
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	103,620,251	27	53,936,701
	28 Net assets with donor restrictions	200,686,539	28	281,918,464
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	0
	30 Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
	31 Retained earnings, endowment, accumulated income, or other funds	0	31	0
32 Total net assets or fund balances	304,306,790	32	335,855,165	
33 Total liabilities and net assets/fund balances	527,551,484	33	584,265,431	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,373,898,628
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,270,160,699
3	Revenue less expenses. Subtract line 2 from line 1	3	103,737,929
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	304,306,790
5	Net unrealized gains (losses) on investments	5	-24,130,973
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-48,058,581
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	335,855,165

Part XII Financial Statements and Reporting

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

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

Continuation Sheet for Form 990

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(26) Pamela Saunders-Albin Director	1.00 0.00	X						0	0	0
(27) Gillian Sorensen Director	1.00 0.00	X						0	0	0
(28) Sally Susman Co-Chair, Board of Directors	1.00 0.00	X						0	0	0
(29) Mona K. Sutphen Director	1.00 0.00	X						0	0	0
(30) Tony Tamer Director	1.00 0.00	X						0	0	0
(31) Dr. Merryl H. Tisch Director	1.00 0.00	X						0	0	0
(32) E. Eric Tokat Director	1.00 0.00	X						0	0	0
(33) P. Maureen White Director	1.00 0.00	X						0	0	0
(34) Zeid Ra ad Al Hussein (Until 04/08/2022) Director	1.00 0.00	X						0	0	0
(35) Cheryl Cohen Efron Director	1.00 0.00	X						0	0	0
(36) Udi Grofman Director	1.00 0.00	X						0	0	0
(37) Becca Heller Director	1.00 0.00	X						0	0	0
(38) Andrew Klaber Director	1.00 0.00	X						0	0	0
(39) Joshua L. Steiner Director	1.00 0.00	X						0	0	0
(40) Leah Joy Zell Director	1.00 0.00	X						0	0	0
(41) Masood Ahmed Director	1.00 0.00	X						0	0	0
(42) Dr. Titilola Banjoko Director	1.00 0.00	X						0	0	0
(43) Laurence D. Fink Director	1.00 0.00	X						0	0	0
(44) Uzodinma Iweala, M.D. Director	1.00 0.00	X						0	0	0
(45) Matthew M. Johnson Director	1.00 0.00	X						0	0	0
(46) Prakash Melwani Director	1.00 0.00	X						0	0	0

Continuation Sheet for Form 990

Name of the Organization

INTERNATIONAL RESCUE COMMITTEE, INC

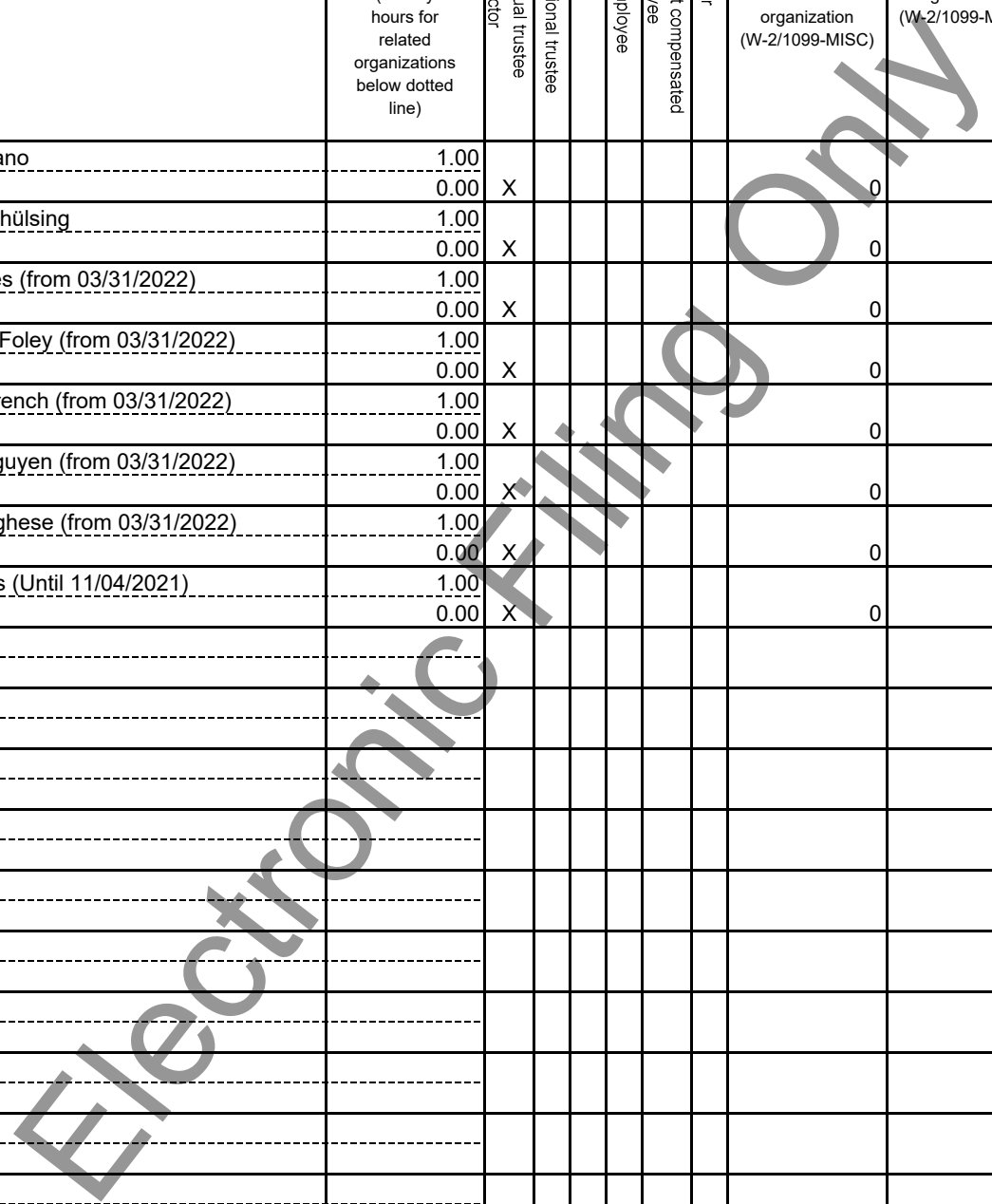
Employer identification number

13-5660870

Part VII Section A

Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) Janet Napolitano Director	1.00 0.00	X						0	0	0
(48) Kathrin Jungehülsing Director	1.00 0.00	X						0	0	0
(49) Kerwin Charles (from 03/31/2022) Director	1.00 0.00	X						0	0	0
(50) Victoria Long Foley (from 03/31/2022) Director	1.00 0.00	X						0	0	0
(51) Kenneth R. French (from 03/31/2022) Director	1.00 0.00	X						0	0	0
(52) Viet Thanh Nguyen (from 03/31/2022) Director	1.00 0.00	X						0	0	0
(53) Abraham Verghese (from 03/31/2022) Director	1.00 0.00	X						0	0	0
(54) Thomas Nides (Until 11/04/2021) Director	1.00 0.00	X						0	0	0
(55)										
(56)										
(57)										
(58)										
(59)										
(60)										
(61)										
(62)										
(63)										
(64)										
(65)										
(66)										
(67)										



**SCHEDULE A
(Form 990)**

Public Charity Status and Public Support

OMB No. 1545-0047

2021

Open to Public Inspection

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

▶ Attach to Form 990 or Form 990-EZ.

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

Department of the Treasury
Internal Revenue Service

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total					0	0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	711,075,998	764,828,594	785,978,272	924,498,780	1,355,187,734	4,541,569,378
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 Total. Add lines 1 through 3	711,075,998	764,828,594	785,978,272	924,498,780	1,355,187,734	4,541,569,378
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						4,541,569,378

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	711,075,998	764,828,594	785,978,272	924,498,780	1,355,187,734	4,541,569,378
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,740,922	3,623,361	2,209,306	2,292,190	2,640,292	13,506,071
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
11 Total support. Add lines 7 through 10						4,555,075,449
12 Gross receipts from related activities, etc. (see instructions)					12	79,655,052
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	99.70%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	99.45%
16a 33 1/3% support test—2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test—2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0	0			0
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0
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
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						0

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6	0	0	0	0	0	0
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						0
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c 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's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	0.00%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	0.00%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	0.00%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	0.00%

- 19a 33 1/3% support tests—2021.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on 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

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
3b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer 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).</i>		
5b	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?		
5c	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? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
9b	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? <i>If "Yes," provide detail in Part VI.</i>		
9c	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? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a	
b	A family member of a person described on line 11a above?	11b	
c	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 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.	1	
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2	

Section C. Type II Supporting Organizations

		Yes	No
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 D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2	
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have 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 E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/>	The organization satisfied the Activities Test. Complete line 2 below.	
b	<input type="checkbox"/>	The organization is the parent of each of its supported organizations. Complete line 3 below.	
c	<input type="checkbox"/>	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).	
2	Activities Test. Answer lines 2a and 2b below.		
a		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	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.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .	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	

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain		
2	Recoveries of prior-year distributions		
3	Other gross income (see instructions)		
4	Add lines 1 through 3.	0	0
5	Depreciation and depletion		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)		
7	Other expenses (see instructions)		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities		
b	Average monthly cash balances		
c	Fair market value of other non-exempt-use assets		
d	Total (add lines 1a, 1b, and 1c)	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		
3	Subtract line 2 from line 1d.	0	0
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	0	0
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	0	0
6	Multiply line 5 by 0.035.	0	0
7	Recoveries of prior-year distributions	0	0
8	Minimum Asset Amount (add line 7 to line 6)	0	0
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)		0
2	Enter 0.85 of line 1.		0
3	Minimum asset amount for prior year (from Section B, line 8, column A)		0
4	Enter greater of line 2 or line 3.		0
5	Income tax imposed in prior year		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).		0
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7 0
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9 0
10	Line 8 amount divided by line 9 amount	10 0.000

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			0
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016	0		
b	From 2017	0		
c	From 2018	0		
d	From 2019	0		
e	From 2020	0		
f	Total of lines 3a through 3e	0		
g	Applied to underdistributions of prior years		0	
h	Applied to 2021 distributable amount			0
i	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	0		
4	Distributions for 2021 from Section D, line 7: \$ 0			
a	Applied to underdistributions of prior years		0	
b	Applied to 2021 distributable amount			0
c	Remainder. Subtract lines 4a and 4b from line 4.	0		
5	Remaining underdistributions for years prior to 2021, 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 2021. 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 2022. Add lines 3j and 4c.	0		
8	Breakdown of line 7:			
a	Excess from 2017	0		
b	Excess from 2018	0		
c	Excess from 2019	0		
d	Excess from 2020	0		
e	Excess from 2021	0		

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.)

Area with horizontal dashed lines for supplemental information.

Electronic Filing Only

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2021

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information.

Table with 2 columns: Name of the organization (INTERNATIONAL RESCUE COMMITTEE, INC) and Employer identification number (13-5660870)

Organization type (check one):

- Filers of: Section: Form 990 or 990-EZ [X] 501(c)(3) (enter number) organization [] 4947(a)(1) nonexempt charitable trust not treated as a private foundation [] 527 political organization Form 990-PF [] 501(c)(3) exempt private foundation [] 4947(a)(1) nonexempt charitable trust treated as a private foundation [] 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

- [X] 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 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 "N/A" in column (b) instead of the contributor name and address), II, and III. [] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that 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).

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Bureau of Population Refugees & Migration (BPRM) 2201 C Street NW Washington DC 20520 Foreign State or Province: _____ Foreign Country: _____	\$ 177,966,003	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Department of Health & Human Services (HHS) 200 Independence Avenue SW Washington DC 20201 Foreign State or Province: _____ Foreign Country: _____	\$ 122,817,860	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	BUREAU FOR HUMANITARIAN ASSISTANCE (BHA) 1300 Pennsylvania Avenue, NW Washington DC 20523-1000 Foreign State or Province: _____ Foreign Country: _____	\$ 114,345,292	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	European Union Humanitarian Department (ECHO) 200 Rule de la Loi B-1049 1000 Foreign State or Province: Brussels Foreign Country: Belgium	\$ 74,828,491	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	The Foreign, Commonwealth & Development Office(F King Charles Street SW1A 2AH Foreign State or Province: London Foreign Country: United Kingdom	\$ 40,254,229	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	UN High Commissioner on Refugees (UNHCR) Case Postale 2500 CH-1211 Foreign State or Province: Geneva Foreign Country: Switzerland	\$ 45,901,916	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	German Federal Foreign Office (GFFO) Werderscher Markt 1 <div style="text-align: right;">10117</div> Foreign State or Province: Berlin Foreign Country: Germany	\$ 37,423,614	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	Swedish International Development Cooperation Agen Valhallav gen 199 <div style="text-align: right;">SE-105 25</div> Foreign State or Province: Stockholm Foreign Country: Sweden	\$ 34,976,031	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- Foreign State or Province: ----- Foreign Country: -----	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
6	Fuel and Parts Emergency Supplies ----- -----	\$ 1,462,986	9/30/2022
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----
-----	----- ----- -----	\$ -----	-----

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

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____ 0

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- ----- For. Prov. Country		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- ----- For. Prov. Country		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- ----- For. Prov. Country		----- ----- -----	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
----- ----- ----- For. Prov. Country		----- ----- -----	

**SCHEDULE C
(Form 990)**

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

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

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

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

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

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions ▶ \$

3 Volunteer hours for political campaign activities. See instructions

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ 0

4 Did the filing organization file **Form 1120-POL** for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and "limited control" provisions apply.

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

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	0	0	0	0	0
b Lobbying ceiling amount (150% of line 2a, column(e))					0
c Total lobbying expenditures	0	0	0	0	0
d Grassroots nontaxable amount	0	0	0	0	0
e Grassroots ceiling amount (150% of line 2d, column (e))					0
f Grassroots lobbying expenditures	0	0	0	0	0

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
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:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		168,236
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			168,236
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
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 year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

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).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	0
3 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 lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	0

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Part II-B Line 1g IRC tracks any time spent on lobbying by our Advocacy team in DC and members of HQ

staff that may contact legislators or other officials. Time spent by staff was tracked on the

specific basis of meetings held and the topics of discussion in those meetings.

Part IV Supplemental Information *(continued)*

Electronic Filing Only

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2021

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

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

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

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for values, 5-6 for Yes/No questions.

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

Form with multiple questions (1-9) regarding conservation easements, including a table for 'Held at the End of the Tax Year'.

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.

Form with questions (1a, 1b, 2, 2a, 2b) regarding art and historical treasures collections.

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

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

Part IV Escrow and Custodial Arrangements.

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

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

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	132,216,000	112,649,000	114,144,000	115,947,000	112,068,000
b Contributions				0	601,000
c Net investment earnings, gains, and losses	-18,628,000	24,865,000	3,704,000	3,253,000	8,278,000
d Grants or scholarships					
e Other expenditures for facilities and programs	5,540,000	5,298,000	5,199,000	5,056,000	5,000,000
f Administrative expenses					
g End of year balance	108,048,000	132,216,000	112,649,000	114,144,000	115,947,000

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 44%
 - b Permanent endowment 51%
 - c Term endowment 5%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	0		0
b Buildings	0	0	0	0
c Leasehold improvements	0	18,676,309	8,336,002	10,340,307
d Equipment	0	4,261,295	2,757,392	1,503,903
e Other	0	5,609,505	4,601,001	1,008,504

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 12,852,714

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely held equity interests	0	
(3) Other Limited Partnership	26,960,356	F
(A) Direct Lending Fund	10,325,000	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	37,285,356	

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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	0

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Revolving Loan Program Liability	644,246
(3) Annuity Liabilities Related to Split Interest Agreements	6,282,290
(4) Deferred rent obligations	11,596,508
(5) Intercompany	2,445,792
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	20,968,836

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	1,378,834,906
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	-24,130,973
b	Donated services and use of facilities	2b	300,267
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	27,527,512
e	Add lines 2a through 2d	2e	3,696,806
3	Subtract line 2e from line 1	3	1,375,138,100
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	-1,239,472
c	Add lines 4a and 4b	4c	-1,239,472
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	1,373,898,628

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

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

1	Total expenses and losses per audited financial statements	1	1,304,993,731
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	300,267
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	34,642,765
e	Add lines 2a through 2d	2e	34,943,032
3	Subtract line 2e from line 1	3	1,270,050,699
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	110,000
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	110,000
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	1,270,160,699

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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

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

Part XIII Supplemental Information (continued)

this category are endowment specific donations and emergency funds that allow IRC to use principal on a temporary basis for emergency response situations and to preposition itself with commonly used emergency response inventory. Principal used by IRC must be subsequently returned to the fund. IRC maintains a spending rate policy on the endowment 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 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 2022 or 2021.

Part XI Line 2d The amount includes subsidiary revenue amounting \$27,737,040 included in audited financial statement and change in value of splitting interest amounting \$(209,528).

Part XI Line 4b The amount \$1,239,472 represent special event expenses

Part XII Line 2d The amount includes subsidiary expense amounting \$33,403,293 included in audited consolidated financial statement and special event expenses amounting \$1,239,472.

Part XI Line 1 The financial statement revenue includes both operating and non-operating revenue amounts

Part XII Line 1 The financial statement expense includes both operating and non-operating expense amounts

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in 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)	2	76	Program Services	Safety and Protection	1,640,414
(2) Europe (Including Iceland and Greenland)			Grants to recipients		659,526
(3) Central America and the Caribbean	3	508	Program Services	Economic Wellbeing, Health Safety, Power and Education	20,661,421
(4) Central America and the Caribbean			Grants to recipients		18,599,638
(5) Middle East and North Africa	6	2,607	Program Services	Economic Wellbeing, Health Safety, Power and Education	85,917,652
(6) Middle East and North Africa			Grants to recipients		52,411,758
(7) Sub-Saharan Africa	20	7,619	Program Services	Economic Wellbeing, Health Safety, Power and Education	184,406,937
(8) Sub-Saharan Africa			Grants to recipients		178,497,731
(9) East Asia and the Pacific	3	1,302	Program Services	Economic Wellbeing, Health Safety, Power and Education	8,836,531
(10) East Asia and the Pacific			Grants to recipients		37,356,527
(11) South Asia	2	4,097	Program Services	Economic Wellbeing, Health Safety, Power and Education	41,674,746
(12) South Asia			Grants to recipients		38,510,155
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	36	16,209			669,173,036
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	36	16,209			669,173,036

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			East Asia and the Pacific	Economic Wellbeing	332,216	Bank Transfer			FMV
(2)			East Asia and the Pacific	Economic Wellbeing	12,721,423	Bank Transfer			FMV
(3)			East Asia and the Pacific	Education	18,842	Bank Transfer			FMV
(4)			East Asia and the Pacific	Health	184,352	Bank Transfer			FMV
(5)			East Asia and the Pacific	Health	2,662,927	Bank Transfer			FMV
(6)			East Asia and the Pacific	Health	137,332	Bank Transfer			FMV
(7)			East Asia and the Pacific	Health	62,210	Bank Transfer			FMV
(8)			East Asia and the Pacific	Health	189,901	Bank Transfer			FMV
(9)			East Asia and the Pacific	Health	51,120	Bank Transfer			FMV
(10)			East Asia and the Pacific	Health	20,814	Bank Transfer			FMV
(11)			East Asia and the Pacific	Health	146,630	Bank Transfer			FMV
(12)			East Asia and the Pacific	Health	30,562	Bank Transfer			FMV
(13)			East Asia and the Pacific	Health	1,045,076	Bank Transfer			FMV
(14)			East Asia and the Pacific	Health	97,345	Bank Transfer			FMV
(15)			East Asia and the Pacific	Health	11,781	Bank Transfer			FMV
(16)			East Asia and the Pacific	Health	12,434	Bank Transfer			FMV

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 298

3 Enter total number of other organizations or entities 13

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) CASH ASSISTANCE	East Asia and the Pacific		2,576,956	Bank and Cash			
(2) EDUCATION MATERIALS	East Asia and the Pacific		266,240	Bank and Cash			
(3) HEALTH CARE	East Asia and the Pacific		3,032,749	Bank and Cash			
(4) PROGRAM SUPPLIES & MATERIAL	East Asia and the Pacific		4,457,363	Bank and Cash	225,546	Program Supplies and materials	FMV
(5) SERVICE CONTRACTS	East Asia and the Pacific		196,898	Bank			
(6) PROGRAM SUPPLIES & MATERIAL	Europe (Including Iceland and Greenland)		15,367	Bank			
(7) SERVICE CONTRACTS	Europe (Including Iceland and Greenland)		9,534	Bank			
(8) CASH ASSISTANCE	Middle East and North Africa		13,219,045	Bank and Cash			
(9) EDUCATION MATERIALS	Middle East and North Africa		92,409	Bank and Cash			
(10) HEALTH CARE	Middle East and North Africa		2,328,348	Bank and Cash			
(11) OTHER ASSISTANCE	Middle East and North Africa		1,051,881	Bank and Cash			
(12) PROGRAM SUPPLIES & MATERIAL	Middle East and North Africa		12,765,405	Bank and Cash	1,189,425	Program Supplies and materials	FMV
(13) SERVICE CONTRACTS	Middle East and North Africa		722,061	Bank			
(14) CASH ASSISTANCE	South America		7,910,243	Bank and Cash			
(15) EDUCATION MATERIALS	South America		38,390	Bank and Cash			
(16) HEALTH CARE	South America		1,845,030	Bank and Cash			
(17) OTHER ASSISTANCE	South America		419,376	Bank and Cash			
(18) PROGRAM SUPPLIES & MATERIAL	South America		2,226,979	Bank and Cash			

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Electronic Filing Only

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 Column a and f Program services amounting to \$79,956,672 and grants to

recipients amounting to \$55,591,467 related to multiple regions that are managed and

tracked through headquarters are not included in the cost per region.

Part III 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 2022 in more than 40

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 2022

the IRC and our partners reached over 32.9 million people in countries affected by crisis.

As part of this work, IRC Supported 3,137 health facilities, provided 8,013,515 outpatient

consultations, treated 222,278 children under 5 for severe acute malnutrition, admitted

453,344 children and 106,722 pregnant and lactating women to nutrition programs, built or

rehabilitated water supplies serving 3,490,159 people, reached 1,421,270 people with cash

assistance, distributed \$109,751,532 in cash or vouchers, provided counseling to 43,814

women survivors of gender-based violence, supported 122,390 children in IRC safe spaces

and other protection programs, enrolled 807,853 children and youth in learning programs

and provided 186,491 individuals with livelihood support. In the United States IRC served

32,668 people across 29 cities with asylum and protection programs, 19,377 clients engaged

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.

in economic empowerment services and 18,052 refugees, special immigrants and Afghan

parolees resettled in the U.S. In Europe IRC 23,718 asylum seekers served 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.

Electronic Filing Only

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(17)			East Asia and the Pacific	Health	573,693	Bank Transfer			FMV
(18)			East Asia and the Pacific	Health	30,684	Bank Transfer			FMV
(19)			East Asia and the Pacific	Health	111,732	Bank Transfer			FMV
(20)			East Asia and the Pacific	Health	75,974	Bank Transfer			FMV
(21)			East Asia and the Pacific	Health	47,088	Bank Transfer			FMV
(22)			East Asia and the Pacific	Health	284,724	Bank Transfer			FMV
(23)			East Asia and the Pacific	Health	727,183	Bank Transfer			FMV
(24)			East Asia and the Pacific	Health	203,449	Bank Transfer			FMV
(25)			East Asia and the Pacific	Health	42,782	Bank Transfer			FMV
(26)			East Asia and the Pacific	Health	69,044	Bank Transfer			FMV
(27)			East Asia and the Pacific	Other	16,793	Bank Transfer			FMV
(28)			East Asia and the Pacific	Other	7,352	Bank Transfer			FMV
(29)			East Asia and the Pacific	Power	12,118	Bank Transfer			FMV
(30)			East Asia and the Pacific	Power	1,015,870	Bank Transfer			FMV
(31)			East Asia and the Pacific	Safety	192,381	Bank Transfer			FMV
(32)			East Asia and the Pacific	Safety	106,299	Bank Transfer			FMV
(33)			East Asia and the Pacific	Safety	361,386	Bank Transfer			FMV
(34)			East Asia and the Pacific	Safety	43,544	Bank Transfer			FMV
(35)			East Asia and the Pacific	Safety	32,134	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(36)			East Asia and the Pacific	Safety	192,266	Bank Transfer			FMV
(37)			East Asia and the Pacific	Safety	1,942,947	Bank Transfer			FMV
(38)			East Asia and the Pacific	Safety	469,234	Bank Transfer			FMV
(39)			East Asia and the Pacific	Safety	32,800	Bank Transfer			FMV
(40)			East Asia and the Pacific	Safety	171,129	Bank Transfer			FMV
(41)			East Asia and the Pacific	Safety	54,345	Bank Transfer			FMV
(42)			East Asia and the Pacific	Safety	177,949	Bank Transfer			FMV
(43)			East Asia and the Pacific	Safety	19,492	Bank Transfer			FMV
(44)			East Asia and the Pacific	Safety	29,167	Bank Transfer			FMV
(45)			East Asia and the Pacific	Safety	19,043	Bank Transfer			FMV
(46)			East Asia and the Pacific	Safety	31,357	Bank Transfer			FMV
(47)			East Asia and the Pacific	Safety	14,818	Bank Transfer			FMV
(48)			East Asia and the Pacific	Safety	29,142	Bank Transfer			FMV
(49)			East Asia and the Pacific	Safety	23,763	Bank Transfer			FMV
(50)			East Asia and the Pacific	Safety	133,382	Bank Transfer			FMV
(51)			East Asia and the Pacific	Safety	104,990	Bank Transfer			FMV
(52)			East Asia and the Pacific	Safety	163,303	Bank Transfer			FMV
(53)			East Asia and the Pacific	Safety	199,652	Bank Transfer			FMV
(54)			East Asia and the Pacific	Safety	162,770	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(55)			East Asia and the Pacific	Safety	10,969	Bank Transfer			FMV
(56)			Europe (Including Iceland and	Other	56,300	Bank Transfer			FMV
(57)			Europe (Including Iceland and	Other	13,895	Bank Transfer			FMV
(58)			Europe (Including Iceland and	Other	30,534	Bank Transfer			FMV
(59)			Europe (Including Iceland and	Safety	125,508	Bank Transfer			FMV
(60)			Europe (Including Iceland and	Safety	26,899	Bank Transfer			FMV
(61)			Europe (Including Iceland and	Safety	22,654	Bank Transfer			FMV
(62)			Europe (Including Iceland and	Safety	100,366	Bank Transfer			FMV
(63)			Europe (Including Iceland and	Safety	180,568	Bank Transfer			FMV
(64)			Europe (Including Iceland and	Safety	69,057	Bank Transfer			FMV
(65)			Europe (Including Iceland and	Safety	7,988	Bank Transfer			FMV
(66)			South America	Economic Wellbeing	115,461	Bank Transfer			FMV
(67)			South America	Economic Wellbeing	189,805	Bank Transfer			FMV
(68)			South America	Economic Wellbeing	80,000	Bank Transfer			FMV
(69)			South America	Economic Wellbeing	20,000	Bank Transfer			FMV
(70)			South America	Economic Wellbeing	30,000	Bank Transfer			FMV
(71)			South America	Economic Wellbeing	14,747	Bank Transfer			FMV
(72)			South America	Economic Wellbeing	459,667	Bank Transfer			FMV
(73)			South America	Education	143,973	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(74)			South America	Education	607,116	Bank Transfer			FMV
(75)			South America	Education	472,747	Bank Transfer			FMV
(76)			South America	Education	32,240	Bank Transfer			FMV
(77)			South America	Health	798,792	Bank Transfer			FMV
(78)			South America	Health	147,040	Bank Transfer			FMV
(79)			South America	Health	517,707	Bank Transfer			FMV
(80)			South America	Health	152,058	Bank Transfer			FMV
(81)			South America	Safety	167,480	Bank Transfer			FMV
(82)			South America	Safety	62,272	Bank Transfer			FMV
(83)			South America	Safety	389,543	Bank Transfer			FMV
(84)			South America	Safety	228,357	Bank Transfer			FMV
(85)			South America	Safety	12,838	Bank Transfer			FMV
(86)			South America	Safety	15,000	Bank Transfer			FMV
(87)			South America	Safety	68,812	Bank Transfer			FMV
(88)			South America	Safety	172,110	Bank Transfer			FMV
(89)			South America	Safety	22,002	Bank Transfer			FMV
(90)			South America	Safety	30,179	Bank Transfer			FMV
(91)			South America	Safety	38,586	Bank Transfer			FMV
(92)			South America	Safety	43,062	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(93)			South America	Safety	21,166	Bank Transfer			FMV
(94)			South America	Safety	24,508	Bank Transfer			FMV
(95)			South America	Safety	20,503	Bank Transfer			FMV
(96)			South America	Safety	42,000	Bank Transfer			FMV
(97)			South America	Safety	30,000	Bank Transfer			FMV
(98)			South America	Safety	148,030	Bank Transfer			FMV
(99)			South America	Safety	57,891	Bank Transfer			FMV
(100)			Middle East and North Africa	Economic Wellbeing	470,447	Bank Transfer			FMV
(101)			Middle East and North Africa	Economic Wellbeing	309,159	Bank Transfer			FMV
(102)			Middle East and North Africa	Economic Wellbeing	82,283	Bank Transfer			FMV
(103)			Middle East and North Africa	Economic Wellbeing	7,100	Bank Transfer			FMV
(104)			Middle East and North Africa	Economic Wellbeing	30,106	Bank Transfer			FMV
(105)			Middle East and North Africa	Economic Wellbeing	15,366	Bank Transfer			FMV
(106)			Middle East and North Africa	Economic Wellbeing	7,231	Bank Transfer			FMV
(107)			Middle East and North Africa	Economic Wellbeing	223,101	Bank Transfer			FMV
(108)			Middle East and North Africa	Education	116,758	Bank Transfer			FMV
(109)			Middle East and North Africa	Education	493,275	Bank Transfer			FMV
(110)			Middle East and North Africa	Education	39,387	Bank Transfer			FMV
(111)			Middle East and North Africa	Education	87,524	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(112)			Middle East and North Africa	Education	105,342	Bank Transfer			FMV
(113)			Middle East and North Africa	Education	273,056	Bank Transfer			FMV
(114)			Middle East and North Africa	Education	601,872	Bank Transfer			FMV
(115)			Middle East and North Africa	Education	337,731	Bank Transfer			FMV
(116)			Middle East and North Africa	Education	471,072	Bank Transfer			FMV
(117)			Middle East and North Africa	Education	951,823	Bank Transfer			FMV
(118)			Middle East and North Africa	Health	957,065	Bank Transfer			FMV
(119)			Middle East and North Africa	Health	29,805	Bank Transfer			FMV
(120)			Middle East and North Africa	Health	604,102	Bank Transfer			FMV
(121)			Middle East and North Africa	Health	23,992	Bank Transfer			FMV
(122)			Middle East and North Africa	Health	106,009	Bank Transfer			FMV
(123)			Middle East and North Africa	Health	28,845	Bank Transfer			FMV
(124)			Middle East and North Africa	Health	597,836	Bank Transfer			FMV
(125)			Middle East and North Africa	Health	422,202	Bank Transfer			FMV
(126)			Middle East and North Africa	Health	2,809,078	Bank Transfer			FMV
(127)			Middle East and North Africa	Health	515,379	Bank Transfer			FMV
(128)			Middle East and North Africa	Health	319,054	Bank Transfer			FMV
(129)			Middle East and North Africa	Health	486,313	Bank Transfer			FMV
(130)			Middle East and North Africa	Health	7,231	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(131)			Middle East and North Africa	Power	88,622	Bank Transfer			FMV
(132)			Middle East and North Africa	Safety	180,931	Bank Transfer			FMV
(133)			Middle East and North Africa	Safety	432,387	Bank Transfer			FMV
(134)			Middle East and North Africa	Safety	96,294	Bank Transfer			FMV
(135)			Middle East and North Africa	Safety	11,269	Bank Transfer			FMV
(136)			Middle East and North Africa	Safety	135,129	Bank Transfer			FMV
(137)			Middle East and North Africa	Safety	163,054	Bank Transfer			FMV
(138)			Middle East and North Africa	Safety	78,869	Bank Transfer			FMV
(139)			Middle East and North Africa	Safety	335,640	Bank Transfer			FMV
(140)			Middle East and North Africa	Safety	110,889	Bank Transfer			FMV
(141)			Middle East and North Africa	Safety	202,980	Bank Transfer			FMV
(142)			Middle East and North Africa	Safety	564,937	Bank Transfer			FMV
(143)			Middle East and North Africa	Safety	81,301	Bank Transfer			FMV
(144)			Middle East and North Africa	Safety	49,468	Bank Transfer			FMV
(145)			Middle East and North Africa	Safety	192,172	Bank Transfer			FMV
(146)			Middle East and North Africa	Safety	10,761	Bank Transfer			FMV
(147)			Middle East and North Africa	Safety	38,418	Bank Transfer			FMV
(148)			Middle East and North Africa	Safety	123,287	Bank Transfer			FMV
(149)			Middle East and North Africa	Safety	112,794	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(150)			Middle East and North Africa	Safety	48,887	Bank Transfer			FMV
(151)			Middle East and North Africa	Safety	6,078	Bank Transfer			FMV
(152)			Middle East and North Africa	Safety	184,373	Bank Transfer			FMV
(153)			Middle East and North Africa	Safety	340,230	Bank Transfer			FMV
(154)			Middle East and North Africa	Safety	117,201	Bank Transfer			FMV
(155)			Middle East and North Africa	Safety	391,824	Bank Transfer			FMV
(156)			Middle East and North Africa	Safety	298,608	Bank Transfer			FMV
(157)			Middle East and North Africa	Safety	257,515	Bank Transfer			FMV
(158)			Middle East and North Africa	Safety	14,092	Bank Transfer			FMV
(159)			Middle East and North Africa	Safety	42,598	Bank Transfer			FMV
(160)			Middle East and North Africa	Safety	357,235	Bank Transfer			FMV
(161)			Middle East and North Africa	Safety	330,442	Bank Transfer			FMV
(162)			Middle East and North Africa	Safety	6,050	Bank Transfer			FMV
(163)			Middle East and North Africa	Safety	50,000	Bank Transfer			FMV
(164)			South Asia	Economic Wellbeing	1,956,657	Bank Transfer			FMV
(165)			South Asia	Economic Wellbeing	586,021	Bank Transfer			FMV
(166)			South Asia	Economic Wellbeing	2,570,892	Bank Transfer			FMV
(167)			South Asia	Economic Wellbeing	67,225	Bank Transfer			FMV
(168)			South Asia	Economic Wellbeing	1,124,023	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(169)			South Asia	Economic Wellbeing	115,830	Bank Transfer			FMV
(170)			South Asia	Economic Wellbeing	455,504	Bank Transfer			FMV
(171)			South Asia	Economic Wellbeing	192,941	Bank Transfer			FMV
(172)			South Asia	Education	1,776,242	Bank Transfer			FMV
(173)			South Asia	Education	130,822	Bank Transfer			FMV
(174)			South Asia	Education	1,782,482	Bank Transfer			FMV
(175)			South Asia	Education	225,295	Bank Transfer			FMV
(176)			South Asia	Health	77,373	Bank Transfer			FMV
(177)			South Asia	Health	117,349	Bank Transfer			FMV
(178)			South Asia	Health	244,667	Bank Transfer			FMV
(179)			South Asia	Health	98,406	Bank Transfer			FMV
(180)			South Asia	Health	701,052	Bank Transfer			FMV
(181)			South Asia	Safety	430,363	Bank Transfer			FMV
(182)			South Asia	Safety	293,770	Bank Transfer			FMV
(183)			South Asia	Safety	251,660	Bank Transfer			FMV
(184)			South Asia	Safety	781,480	Bank Transfer			FMV
(185)			South Asia	Safety	128,023	Bank Transfer			FMV
(186)			South Asia	Safety	86,886	Bank Transfer			FMV
(187)			South Asia	Safety	266,439	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(188)			Sub-Saharan Africa	Economic Wellbeing	267,586	Bank Transfer			FMV
(189)			Sub-Saharan Africa	Economic Wellbeing	322,148	Bank Transfer			FMV
(190)			Sub-Saharan Africa	Economic Wellbeing	40,465	Bank Transfer			FMV
(191)			Sub-Saharan Africa	Economic Wellbeing	107,880	Bank Transfer			FMV
(192)			Sub-Saharan Africa	Economic Wellbeing	982,566	Bank Transfer			FMV
(193)			Sub-Saharan Africa	Economic Wellbeing	483,304	Bank Transfer			FMV
(194)			Sub-Saharan Africa	Economic Wellbeing	28,933	Bank Transfer			FMV
(195)			Sub-Saharan Africa	Economic Wellbeing	745,123	Bank Transfer			FMV
(196)			Sub-Saharan Africa	Economic Wellbeing	1,636,018	Bank Transfer			FMV
(197)			Sub-Saharan Africa	Economic Wellbeing	38,922	Bank Transfer			FMV
(198)			Sub-Saharan Africa	Economic Wellbeing	15,143	Bank Transfer			FMV
(199)			Sub-Saharan Africa	Economic Wellbeing	194,091	Bank Transfer			FMV
(200)			Sub-Saharan Africa	Economic Wellbeing	45,348	Bank Transfer			FMV
(201)			Sub-Saharan Africa	Economic Wellbeing	1,188,707	Bank Transfer			FMV
(202)			Sub-Saharan Africa	Economic Wellbeing	333,015	Bank Transfer			FMV
(203)			Sub-Saharan Africa	Economic Wellbeing	152,856	Bank Transfer			FMV
(204)			Sub-Saharan Africa	Economic Wellbeing	100,475	Bank Transfer			FMV
(205)			Sub-Saharan Africa	Education	65,474	Bank Transfer			FMV
(206)			Sub-Saharan Africa	Education	1,614,208	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(207)			Sub-Saharan Africa	Education	1,014,802	Bank Transfer			FMV
(208)			Sub-Saharan Africa	Education	39,241	Bank Transfer			FMV
(209)			Sub-Saharan Africa	Education	4,547,357	Bank Transfer			FMV
(210)			Sub-Saharan Africa	Education	242,374	Bank Transfer			FMV
(211)			Sub-Saharan Africa	Education	73,991	Bank Transfer			FMV
(212)			Sub-Saharan Africa	Education	29,234	Bank Transfer			FMV
(213)			Sub-Saharan Africa	Education	67,414	Bank Transfer			FMV
(214)			Sub-Saharan Africa	Education	386,892	Bank Transfer			FMV
(215)			Sub-Saharan Africa	Health	222,548	Bank Transfer			FMV
(216)			Sub-Saharan Africa	Health	1,218,910	Bank Transfer			FMV
(217)			Sub-Saharan Africa	Health	118,151	Bank Transfer			FMV
(218)			Sub-Saharan Africa	Health	28,943	Bank Transfer			FMV
(219)			Sub-Saharan Africa	Health	90,495	Bank Transfer			FMV
(220)			Sub-Saharan Africa	Health	326,853	Bank Transfer			FMV
(221)			Sub-Saharan Africa	Health	5,959,840	Bank Transfer			FMV
(222)			Sub-Saharan Africa	Health	13,685	Bank Transfer			FMV
(223)			Sub-Saharan Africa	Health	216,718	Bank Transfer			FMV
(224)			Sub-Saharan Africa	Health	11,691	Bank Transfer			FMV
(225)			Sub-Saharan Africa	Health	2,947,485	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(226)			Sub-Saharan Africa	Health	421,556	Bank Transfer			FMV
(227)			Sub-Saharan Africa	Health	281,344	Bank Transfer			FMV
(228)			Sub-Saharan Africa	Health	275,006	Bank Transfer			FMV
(229)			Sub-Saharan Africa	Health	66,649	Bank Transfer			FMV
(230)			Sub-Saharan Africa	Health	1,774,078	Bank Transfer			FMV
(231)			Sub-Saharan Africa	Health	269,797	Bank Transfer			FMV
(232)			Sub-Saharan Africa	Health	264,554	Bank Transfer			FMV
(233)			Sub-Saharan Africa	Health	317,665	Bank Transfer			FMV
(234)			Sub-Saharan Africa	Health	867,464	Bank Transfer			FMV
(235)			Sub-Saharan Africa	Health	493,474	Bank Transfer			FMV
(236)			Sub-Saharan Africa	Health	77,425	Bank Transfer			FMV
(237)			Sub-Saharan Africa	Health	1,290,570	Bank Transfer			FMV
(238)			Sub-Saharan Africa	Health	2,699,298	Bank Transfer			FMV
(239)			Sub-Saharan Africa	Health	1,028,696	Bank Transfer			FMV
(240)			Sub-Saharan Africa	Health	23,109	Bank Transfer			FMV
(241)			Sub-Saharan Africa	Health	57,424	Bank Transfer			FMV
(242)			Sub-Saharan Africa	Health	4,196,272	Bank Transfer			FMV
(243)			Sub-Saharan Africa	Health	209,889	Bank Transfer			FMV
(244)			Sub-Saharan Africa	Health	38,883	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(245)			Sub-Saharan Africa	Health	658,592	Bank Transfer			FMV
(246)			Sub-Saharan Africa	Health	44,448	Bank Transfer			FMV
(247)			Sub-Saharan Africa	Health	425,961	Bank Transfer			FMV
(248)			Sub-Saharan Africa	Health	11,504	Bank Transfer			FMV
(249)			Sub-Saharan Africa	Health	33,372	Bank Transfer			FMV
(250)			Sub-Saharan Africa	Health	81,366	Bank Transfer			FMV
(251)			Sub-Saharan Africa	Health	172,264	Bank Transfer			FMV
(252)			Sub-Saharan Africa	Health	145,855	Bank Transfer			FMV
(253)			Sub-Saharan Africa	Health	170,077	Bank Transfer			FMV
(254)			Sub-Saharan Africa	Health	13,761	Bank Transfer			FMV
(255)			Sub-Saharan Africa	Health	7,466	Bank Transfer			FMV
(256)			Sub-Saharan Africa	Health	271,268	Bank Transfer			FMV
(257)			Sub-Saharan Africa	Health	25,000	Bank Transfer			FMV
(258)			Sub-Saharan Africa	Health	129,384	Bank Transfer			FMV
(259)			Sub-Saharan Africa	Health	241,824	Bank Transfer			FMV
(260)			Sub-Saharan Africa	Health	468,696	Bank Transfer			FMV
(261)			Sub-Saharan Africa	Health	36,858	Bank Transfer			FMV
(262)			Sub-Saharan Africa	Health	6,834	Bank Transfer			FMV
(263)			Sub-Saharan Africa	Health	19,800	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(264)			Sub-Saharan Africa	Power	1,981,248	Bank Transfer			FMV
(265)			Sub-Saharan Africa	Power	208,746	Bank Transfer			FMV
(266)			Sub-Saharan Africa	Safety	82,501	Bank Transfer			FMV
(267)			Sub-Saharan Africa	Safety	95,193	Bank Transfer			FMV
(268)			Sub-Saharan Africa	Safety	153,486	Bank Transfer			FMV
(269)			Sub-Saharan Africa	Safety	110,455	Bank Transfer			FMV
(270)			Sub-Saharan Africa	Safety	692,385	Bank Transfer			FMV
(271)			Sub-Saharan Africa	Safety	6,165	Bank Transfer			FMV
(272)			Sub-Saharan Africa	Safety	6,384	Bank Transfer			FMV
(273)			Sub-Saharan Africa	Safety	153,775	Bank Transfer			FMV
(274)			Sub-Saharan Africa	Safety	140,932	Bank Transfer			FMV
(275)			Sub-Saharan Africa	Safety	452,481	Bank Transfer			FMV
(276)			Sub-Saharan Africa	Safety	82,500	Bank Transfer			FMV
(277)			Sub-Saharan Africa	Safety	7,688	Bank Transfer			FMV
(278)			Sub-Saharan Africa	Safety	1,752,512	Bank Transfer			FMV
(279)			Sub-Saharan Africa	Safety	8,806	Bank Transfer			FMV
(280)			Sub-Saharan Africa	Safety	5,282	Bank Transfer			FMV
(281)			Sub-Saharan Africa	Safety	156,684	Bank Transfer			FMV
(282)			Sub-Saharan Africa	Safety	1,013,377	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(283)			Sub-Saharan Africa	Safety	19,745	Bank Transfer			FMV
(284)			Sub-Saharan Africa	Safety	11,342	Bank Transfer			FMV
(285)			Sub-Saharan Africa	Safety	29,529	Bank Transfer			FMV
(286)			Sub-Saharan Africa	Safety	33,291	Bank Transfer			FMV
(287)			Sub-Saharan Africa	Safety	34,044	Bank Transfer			FMV
(288)			Sub-Saharan Africa	Safety	44,940	Bank Transfer			FMV
(289)			Sub-Saharan Africa	Safety	67,803	Bank Transfer			FMV
(290)			Sub-Saharan Africa	Safety	23,612	Bank Transfer			FMV
(291)			Sub-Saharan Africa	Safety	83,173	Bank Transfer			FMV
(292)			Sub-Saharan Africa	Safety	43,447	Bank Transfer			FMV
(293)			Sub-Saharan Africa	Safety	42,627	Bank Transfer			FMV
(294)			Sub-Saharan Africa	Safety	141,175	Bank Transfer			FMV
(295)			Sub-Saharan Africa	Safety	1,086,686	Bank Transfer			FMV
(296)			Sub-Saharan Africa	Safety	33,727	Bank Transfer			FMV
(297)			Sub-Saharan Africa	Safety	51,567	Bank Transfer			FMV
(298)			Sub-Saharan Africa	Safety	170,129	Bank Transfer			FMV
(299)			Sub-Saharan Africa	Safety	13,607	Bank Transfer			FMV
(300)			Sub-Saharan Africa	Safety	428,893	Bank Transfer			FMV
(301)			Sub-Saharan Africa	Safety	364,066	Bank Transfer			FMV

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(302)			Sub-Saharan Africa	Safety	1,129,895	Bank Transfer			FMV
(303)			Sub-Saharan Africa	Safety	367,545	Bank Transfer			FMV
(304)			Sub-Saharan Africa	Safety	390,980	Bank Transfer			FMV
(305)			Sub-Saharan Africa	Safety	68,164	Bank Transfer			FMV
(306)			Sub-Saharan Africa	Safety	39,425	Bank Transfer			FMV
(307)			Sub-Saharan Africa	Safety	15,273	Bank Transfer			FMV
(308)			Sub-Saharan Africa	Safety	127,968	Bank Transfer			FMV
(309)			Sub-Saharan Africa	Safety	7,514	Bank Transfer			FMV
(310)			Sub-Saharan Africa	Safety	16,959	Bank Transfer			FMV
(311)			Sub-Saharan Africa	Safety	55,449	Bank Transfer			FMV
(312)									
(313)									
(314)									
(315)									
(316)									
(317)									
(318)									
(319)									
(320)									

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(19) CASH ASSISTANCE	South Asia		15,548,265	Bank and Cash			
(20) OTHER ASSISTANCE	South Asia		39	Cash			
(21) PROGRAM SUPPLIES & MATERIAL	South Asia		9,168,218	Bank and Cash			
(22) SERVICE CONTRACTS	South Asia		271,291	Bank			
(23) CASH ASSISTANCE	Sub-Saharan Africa		26,790,104	Bank and Cash			
(24) EDUCATION MATERIALS	Sub-Saharan Africa		3,638,636	Bank and Cash			
(25) HEALTH CARE	Sub-Saharan Africa		5,663,832	Bank and Cash			
(26) OTHER ASSISTANCE	Sub-Saharan Africa		1,222,958	Bank and Cash			
(27) PROGRAM SUPPLIES & MATERIAL	Sub-Saharan Africa		78,054,199	Bank and Cash	8,224,295	Program Supplies and materials	FMV
(28) SERVICE CONTRACTS	Sub-Saharan Africa		3,373,471	Bank			
(29) SERVICE CONTRACTS	South America		783,926	Bank			
(30)							
(31)							
(32)							
(33)							
(34)							
(35)							
(36)							
(37)							

**SCHEDULE G
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

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

- 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a Mail solicitations
 - b Internet and email solicitations
 - c Phone solicitations
 - d In-person solicitations
 - e Solicitation of non-government grants
 - f Solicitation of government grants
 - g Special fundraising events
- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No
- b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 The Harrington Agency, LLC. 212 S.Chester Rd. Swarthmore PA 19081	Direct mail Consultant		X	0	2,220,706	0
2 Further, LLC. 181 Harry S. Truman Pkwy, Ste 265, Anna	Advertising		X	0	387,936	0
3 New Canvassing Experience, Inc. 78 San Marcos St, Austin TX 78702	Digital Fundraising		X	0	1,766,320	0
4 Green Planet Sales Company, Inc. dba 1526 Berlin Rd Cherry Hill NJ 08003	Fundraising Mail		X	0	1,236,726	0
5 GivePanel, t/a Nick Burne Consulting L Kemp House, 152 - 160 City Rd, London E	Consulting		X	0	78,605	0
6 Public Interest Communications, Inc 7700 Leesburg Pike Ste 416-S Falls Churc	Fundraising mail		X	0	173,331	0
7				0	0	0
8				0	0	0
9				0	0	0
10				0	0	0
Total				0	5,863,624	0

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

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

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		Rescue Dinner (event type)	San Diego (event type)	3 (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	6,935,811	341,477	27,861	7,305,149
	2	Less: Contributions	6,000,811	341,477	27,861	6,370,149
	3	Gross income (line 1 minus line 2)	935,000	0	0	935,000
Direct Expenses	4	Cash prizes			0	0
	5	Noncash prizes			0	0
	6	Rent/facility costs	361,500		4,393	365,893
	7	Food and beverages			0	0
	8	Entertainment			0	0
	9	Other direct expenses	873,346		233	873,579
	10	Direct expense summary. Add lines 4 through 9 in column (d)				(1,239,472)
	11	Net income summary. Subtract line 10 from line 3, column (d)				-304,472

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 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:

a 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 and records:

Name ▶ _____

Address ▶ _____

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

c 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:

a 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 or spent in the organization's own exempt activities during the tax year ▶ \$ _____ 0

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Part II Line 6 and 7 The information for line 7 (food and beverages) is combined into line 6 (Rent/facility costs) as most facilities generally provide the food and beverages which are not usually not broken out separately by the vendors on invoices.

Part I Line 2b and Column V IRC does not have a mechanism to calculate gross receipt related to each Fundraiser. Amount paid to professional fundraisers include current and future donors.

**SCHEDULE I
(Form 990)**

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990.

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

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Catholic Charities Archdiocese of 202 West French Place San Antonio, TX 78201	74-1109743	501 (C) (3)	5,704,094				Refugee Programs
(2) Church World Services, Inc 475 Riverside Dr. STE 700 New York, NY 10017	13-4080201	501 (C) (3)	4,662,855				Refugee Programs
(3) Refugee Services of Texas, Inc 9330LBJ Freeway Dallas, TX 75254	75-1618251	501 (C) (3)	3,029,466				Refugee Programs
(4) Interfaith Rise 19 South 2nd Avenue Highland Park, TX 75043	20-5012410	501 (C) (3)	1,401,310				Refugee Programs
(5) Catholic Charities Newark 590 N 7th St Newark, NJ 07107	22-2164120	501 (C) (3)	1,064,928				Refugee Programs
(6) Catholic Charities of Northeast Kansas 9720 West 87th Street Overland Park, KS 66207	48-1181305	501 (C) (3)	1,031,159				Refugee Programs
(7) Catholic Charities of the Texas Panhandle 2801 Duniven Circle Amarillo, TX 79106	75-0818147	501 (C) (3)	964,246				Refugee Programs
(8) The Independence Fund 8349 Arrowridge Blvd, Suite R Charlotte, NC 28226	26-0322088	501 (C) (3)	736,651				Refugee Programs
(9) Refugee and Immigrant Center for Education and Job Training 1305 N Flores St. San Antonio, TX 78207	74-2436920	501 (C) (3)	716,694				Refugee Programs
(10) Catholic Charities of Southwest Kansas 906 Central Ave Dodge City, KS 67801	48-0697602	501 (C) (3)	710,264				Refugee Programs
(11) Caritas of Austin 611 NECHES ST AUSTIN, TX 78701	74-1909670	501 (C) (3)	637,403				Refugee Programs
(12) Interfaith Action of Central Texas 2921 E. 17th St., Bldg., D, Ste. # 3 Bldg. D Austin, TX 78741	74-2509149	501 (C) (3)	370,444				Refugee Programs

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 69
- 3 Enter total number of other organizations listed in the line 1 table ▶ 0

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

Schedule I (Form 990) 2021

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Economic Wellbeing	0	38,463,869	1,068,218	FMV	Clothing and household items
2 Education Program	0	611,707	5,249	FMV	school supplies
3 Health programming	0	1,534,458	128	FMV	Health items
4 Power	0	177,647	275,595	FMV	supplies
5 Safety	0	76,897,032	963,948	FMV	Clothing and household items
6					
7					

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

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

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

Part III Line Column B Number of recipients is noted in total for the year. During 2022, in the United States, the IRC helped resettle some 11,862 newly arrived refugees and provided services to promote self-reliance and integration to many refugees, asylees and victims of human trafficking and other immigrants.

Continuation Sheet for Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(13) Lutheran Immigration and Refugee Serv 700 Light Street Baltimore, MD 21230	13-2574854	501 (C) (3)	181,961				Refugee Programs
(14) API Chaya P.O. Box 14047 Seattle, WA 98114	91-1674016	501 (C) (3)	180,033				Anti-Trafficking
(15) University of Denver 2601 E Colorado Ave Denver, CO 80208	84-0404231	501 (C) (3)	173,814				Refugee Programs
(16) Jewish Vocational Service of MetroWest 111 Prospect street East Orange, NJ 07017	22-1487229	501 (C) (3)	135,296				Refugee Programs
(17) Phoenix Dream Center 3210 NW Grand Avenue Phoenix, Az 85017	86-1001113	501 (C) (3)	103,420				Anti-Trafficking
(18) HIAS (Headquarters) PO Box 175 Challis, ID 83226	46-5422529	501 (C) (3)	98,695				Refugee Programs
(19) Refugees and Immigrants Community fo 3581 W NORTHERN AVE STE 8 PHOENIX, A	82-3242931	501 (C) (3)	90,455				Refugee Programs
(20) Real Escape from the Sex Trade, REST 4215 Rainier Ave S, Suite B Seattle, WA 981	45-3531020	501 (C) (3)	87,040				Refugee Programs
(21) Georgia Asylum and Immigration Networ PO Box 78425 Atlanta, GA 30357	26-1733523	501 (C) (3)	80,000				Refugee Programs
(22) A New Leaf 868 E University Dr Mesa, AZ 85203	86-0256667	501 (C) (3)	75,320				Refugee Programs
(23) Florence Immigrant and Refugee Rights P.O. Box 86299 Tucson, AZ 85754	86-0658103	501 (C) (3)	66,651				Refugee Programs
(24) Refugee and Immigrant Transitions 870 Market Street, Suite 718 San Francisco, C	94-3112099	501 (C) (3)	66,000				Refugee Programs
(25) Ethiopian Community Development Cou 901 S. Highland St Arlington, VA 22204	52-1308986	501 (C) (3)	61,130				Refugee Programs
(26) StreetLight USA PO Box 6178 Peoria, AZ 85385	26-4359672	501 (C) (3)	55,543				Anti-Trafficking
(27) Yolo Food Bank 233 Harter Ave Woodland, CA 95776	23-7111782	501 (C) (3)	54,761				Refugee Programs
(28) Upwardly Global 505 8th Avenue Suite 1704 New York, NY 100	94-3346127	501 (C) (3)	48,779				Refugee Programs
(29) Baltimore City Community College 2901 Liberty Heights Ave Baltimore, MD 2121	52-1361023	501 (C) (3)	45,980				Refugee Programs

Continuation Sheet for Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(30) El Calvario United Methodist Church 316 N. Campo St. Las Cruces, NM 88001	85-0351974	501 (C) (3)	45,092				Refugee Programs
(31) University of California, San Francisco PO Box 45339 San Francisco, CA 94145	94-2829914	501 (C) (3)	42,000				Refugee Programs
(32) Catholic Charities Camden 1845 Haddon Ave Camden, NJ 08103	22-3759994	501 (C) (3)	40,746				Refugee Programs
(33) Weave Inc 2020 Hurley Way Sacramento, CA 95811	94-2493158	501 (C) (3)	39,894				Anti-Trafficking
(34) Youth Care 2500 NE 54th Street Seattle, WA 98105	91-0917079	501 (C) (3)	39,656				Refugee Programs
(35) George Mason University 4400 University Drive MS 1A3 Fairfax, VA 220	54-1603842	501 (C) (3)	38,436				Refugee Programs
(36) Survive and Thrive Advocacy Center, Inc P. O. Box 13898 TALLAHASSEE, FL 32317	47-3189855	501 (C) (3)	38,114				Refugee Programs
(37) Access Inc. 111 Pine Street, San Francisco, CA 94111	95-2422704	501 (C) (3)	37,500				Refugee Programs
(38) Iowa Center for Economic Success 2210 Grand Ave Des Moines, IA 50312	20-1037604	501 (C) (3)	37,500				Refugee Programs
(39) Iowa's West Coast Initiative (IWCI) 1122 PIERCE ST Sioux City, IA 51105	87-3212695	501 (C) (3)	37,500				Refugee Programs
(40) Somali American Community Center 436 N Indian Creek Dr Ste D Clarkston, GA 30	26-4586095	501 (C) (3)	37,500				Refugee Programs
(41) Alhambra Elementary School District 4510 N 37th Ave Phoenix, AZ 85019	86-0857358	501 (C) (3)	37,500				Refugee Programs
(42) GK FOLKS FOUNDATION 7009 W 7895 S West Jordan, UT 84081	46-5222358	501 (C) (3)	37,500				Refugee Programs
(43) Cache Refugee & Immigration Connecti P.O. Box 4413 LOGAN, UT 84323	47-1525678	501 (C) (3)	37,500				Refugee Programs
(44) Latin American Association 3565 Piedmont Rd NE Bldg Ste 205 Atlanta, G	58-1237316	501 (C) (3)	37,500				Refugee Programs
(45) LagosPHX 800N Central avenue No. 1203 Phoenix, AZ 8	84-1805945	501 (C) (3)	37,500				Refugee Programs
(46) Immigrant Entrepreneurs Summit 3816 INGERSOLL AVE DES MOINES, IA 503	20-5347868	501 (C) (3)	37,500				Refugee Programs

Continuation Sheet for Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(47) Holy Cross Ministries 860 E 4500 S Salt Lake City, UT 84107	87-0359324	501 (C) (3)	34,167				Refugee Programs
(48) Glendale Elementary School District 7650 N 43rd Avenue Glendale, AZ 85301	74-2490334	GOVT	29,478				Refugee Programs
(49) Wind Youth Service INC 8001 Folsom Blvd, Sacramento, CA 95826	23-7348227	501 (C) (3)	27,312				Anti-Trafficking
(50) Refugee Women's Network, Inc. 500 S Columbia Dr, Decatur, GA 30030	58-2369796	501 (C) (3)	37,500				Refugee Programs
(51) Drake University 2507 University Ave, Des Moines, IA 50311	42-0680460	501 (C) (3)	25,000				Refugee Programs
(52) Karen Organization Of San Diego 5354 University Ave #1 San Diego, CA 92105	27-2917644	501 (C) (3)	30,000				Refugee Programs
(53) Sacramento LGBT Community Center 1015 20th St, Sacramento, CA 95811	94-2502229	501 (C) (3)	22,845				Anti-Trafficking
(54) Lutheran Services in Iowa, Inc. 3200 University of Iowa Des Moines, IA 50311	42-1254906	501 (C) (3)	16,500				Refugee Programs
(55) Ruby's Place, Inc. 20880 Baker Rd Castro Valley, CA 94546	94-2212241	501 (C) (3)	15,716				Refugee Programs
(56) IRC Center for Economic Opportunity 122 East 42nd Street New York, NY 10168	45-3686069	501 (C) (3)	14,000				Refugee Programs
(57) VIDA Legal Assistance, Inc. 12955 Biscayne Blvd Ste 200 Miami, FL 3318	27-5325859	501 (C) (3)	13,284				Refugee Programs
(58) Musuma Ntumba dba Congolese Comm 722 Collins Hill Rd. Suite H-338 Lawrenceville	46-5413918	501 (C) (3)	12,500				Refugee Programs
(59) Friends of Refugees 2356 Main St, Tucker, GA 30084	20-1989492	501 (C) (3)	12,500				Refugee Programs
(60) Somali American United Council of Arizo 3150 E. Indian School Rd Phoenix, AZ 85016	01-0876916	501 (C) (3)	12,500				Refugee Programs
(61) 19NORTH 2701 E Camelback Rd. Ste 110. Phoenix, AZ	81-3885594	501 (C) (3)	12,500				Refugee Programs
(62) Union of Pan Asian Communities (UPAC) 800 Silverado St, Ste 100 La Jolla, CA 92037	23-7279074	501 (C) (3)	12,500				Refugee Programs
(63) Afghan Community Cultural Center, Inc. 140 W Park Ave El Cajon, CA 92020	84-4928135	501 (C) (3)	12,000				Refugee Programs

Continuation Sheet for Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(64) University of California Davis 1 Shields Ave Davis, CA 95616	96-6081352	GOVT	10,624				Refugee Programs
(65) Church of the Messiah 6436 Montgomery Street Rhinebeck, NY 1257	14-1490103	501 (C) (3)	10,500				Refugee Programs
(66) Immigrant Integration and Empowerment 3088 Fiji Island Dr., West Sacramento, CA 956	84-3150957	501 (C) (3)	9,500				Refugee Programs
(67) University of Utah 155 S 1452 E, INSCC Bldg., Rm 350, Salt Lak	87-6000525	501 (C) (3)	7,502				Refugee Programs
(68) Vassar College 124 Raymond Avenue Poughkeepsie, NY 126	14-1338587	501 (C) (3)	6,300				Refugee Programs
(69) Episcopal Migration Ministries 815 2nd Ave New York, NY 10017	13-5562208	501 (C) (3)	5,100				Refugee Programs
(70)							
(71)							
(72)							
(73)							
(74)							
(75)							
(76)							
(77)							
(78)							
(79)							
(80)							

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Continuation Sheet for Schedule I (Form 990)

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

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

Electronic Filing Only

Compensation Information

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

2021

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

INTERNATIONAL RESCUE COMMITTEE, INC

13-5660870

Part I Questions Regarding Compensation

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.

- | | |
|---|---|
| <input type="checkbox"/> First-class or charter travel | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input checked="" type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

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?

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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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 organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in or receive payment from a supplemental nonqualified retirement plan?
 - c** Participate in or receive payment from an equity-based compensation arrangement?
- 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** The organization?
 - b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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:

- a** The organization?
 - b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 David Miliband Dir/CEO/Pres	(i)	710,219	150,000	226,761	30,450	24,984	1,142,414	0
	(ii)	0	0	0	0	0	0	0
2 Oscar Raposo CFO, SVP Finance, Treasurer	(i)	422,685	0	0	30,450	24,565	477,700	0
	(ii)	0	0	0	0	0	0	0
3 Ricardo Castro (Until 02/04/2022) General Counsel, Secretary	(i)	381,866	0	0	30,450	3,408	415,724	0
	(ii)	0	0	0	0	0	0	0
4 Ciaran Donnelly SVP International Programs	(i)	343,648	0	0	33,350	24,447	401,445	0
	(ii)	0	0	0	0	0	0	0
5 Jennifer Sime (Until 09/15/2021) SVP US Programs	(i)	289,820	0	0	32,420	7,452	329,692	0
	(ii)	0	0	0	0	0	0	0
6 Johannes Van De Weerd SVP Resettlement Asylum and Inter	(i)	283,205	0	0	29,481	2,112	314,798	0
	(ii)	0	0	0	0	0	0	0
7 Madlin J. Sheerman Senior Vice President, Operations &	(i)	432,742	0	9,580	30,450	24,589	497,361	0
	(ii)	0	0	0	0	0	0	0
8 Zain Habboo Chief Mobilization & Marketing Office	(i)	376,260	0	0	27,550	2,451	406,261	0
	(ii)	0	0	0	0	0	0	0
9 Madeleine Fackler Chief Information Officer	(i)	368,761	10,000	0	33,350	18,373	430,484	0
	(ii)	0	0	0	0	0	0	0
10 Ourania Dionysiou Vice President IPP and GPPS	(i)	355,035	0	0	30,450	9,876	395,361	0
	(ii)	0	0	0	0	0	0	0
11 Brian Johnson Chief HR Officer	(i)	361,285	0	0	30,450	24,568	416,303	0
	(ii)	0	0	0	0	0	0	0
12 Susan Ringler Chief Ethics and Compliance Officer	(i)	333,623	0	0	33,350	9,580	376,553	0
	(ii)	0	0	0	0	0	0	0
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

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

Part I Line 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 I Line 1a IRC grossed up 457f plan payment and employee tax preparation payments of David Miliband.

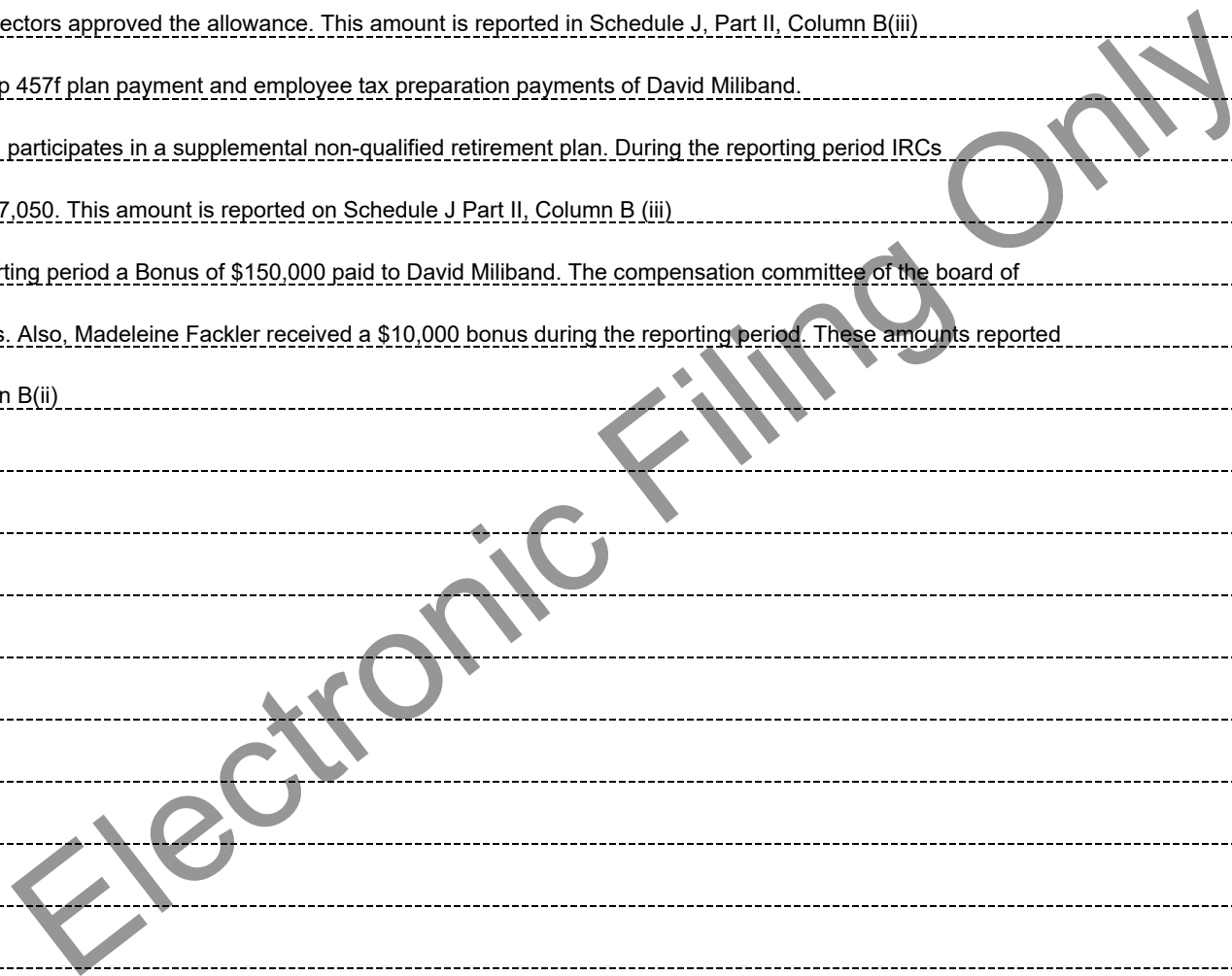
Part I Line 4b David Miliband participates in a supplemental non-qualified retirement plan. During the reporting period IRCs

457(f) contribution was of \$47,050. This amount is reported on Schedule J Part II, Column B (iii)

Part I 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. Also, Madeleine Fackler received a \$10,000 bonus during the reporting period. These amounts reported

in Schedule J, Part II, Column B(ii)



**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization INTERNATIONAL RESCUE COMMITTEE, INC	Employer identification number 13-5660870
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Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		3,380,677	FMV/Receipts
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	X		387,028	FMV/Receipts
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (Fuel and Parts)	X		1,416,861	FMV/Receipts
26 Other ▶ (Emergency Kits an)	X		6,044,888	FMV/Receipts
27 Other ▶ (Water and Sanitati)	X		616,076	FMV/Receipts
28 Other ▶ (.)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement	29			0
--	-----------	--	--	---

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		X
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		X
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

Part I Line 5, 20, 25, 26, 27 The number of contributions is difficult to confirm as the same donor will make various contributions throughout the project in tranches as needed to support their grant funded program implementation and the individual contributions are received at the field level in our various country offices. The detailed documentation is held at the different office locations throughout the 32+ countries we work in including our US program offices. The number of individual contributions of goods would easily number in the 100s of thousands of items. HQ does not track to that level of detail but has all of the supporting documentation and invoices utilized for valuation and recording in the US and country locations.

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**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

Form 990, Part III, Line 4d: Program Service Expenses: 126,377,960, Grants and allocations:

75,866,682, Revenue: 0 In Asia, the IRC responded to the health needs of internally displaced

persons, refugees, and host communities across Afghanistan, Bangladesh, Myanmar, Pakistan,

Thailand, Malaysia, and Philippines. In Afghanistan, the IRC intervened to respond to the

collapse of local economies and ensure safety of staff in the change of local power. 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.

Form 990, Part III, Line 4d: Program Service Expenses: 123,578,308, Grants and allocations:

45,406,999, Revenue: 0 In the Middle East, the IRC worked in Iraq, Yemen, Jordan, Lebanon,

Syria, and Turkiye. Through local partnerships, the IRC delivered aid inside Syria, and

additionally supported Syrian refugees in Lebanon and Jordan. The IRC also delivered programs

in the Kurdish Region of Iraq and aided Iraqi refugees through the region. The IRC, along with

the Sesame Workshop, implemented a large-scale childhood development intervention 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.

Form 990, Part III, Line 4d: Program Service Expenses: 39,261,059, Grants and allocations:

18,599,638, Revenue: 101,963 In Latin America, the IRC provided assistance to vulnerable

migrant and asylum seekers fleeing economic instability and violence in El Salvador, Honduras,

Guatemala, Mexico, Venezuela, Ecuador, Peru, Ecuador, and Colombia. In collaboration with our

US programs, we supported families at the US/Mexico border establishing a Women and Girls Safe

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.

Form 990, Part III, Line 4d: Program Service Expenses: 2,299,940, Grants and allocations:

659,526, Revenue: 0 In FY22, RAI Europe worked across Europe to assist refugees and asylum

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

HTA

Schedule O (Form 990) 2021

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

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 19,300 employees. The 3315
 only represents staff on the NY Headquarters payroll covering HQ, US office locations and
 international expatriate employees. The remaining 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 19,300 employees. The 3315
 only represents staff on the NY Headquarters payroll covering HQ, US office locations and
 international expatriate employees. The remaining 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
 the Board of Directors prior to filing electronically on 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/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.

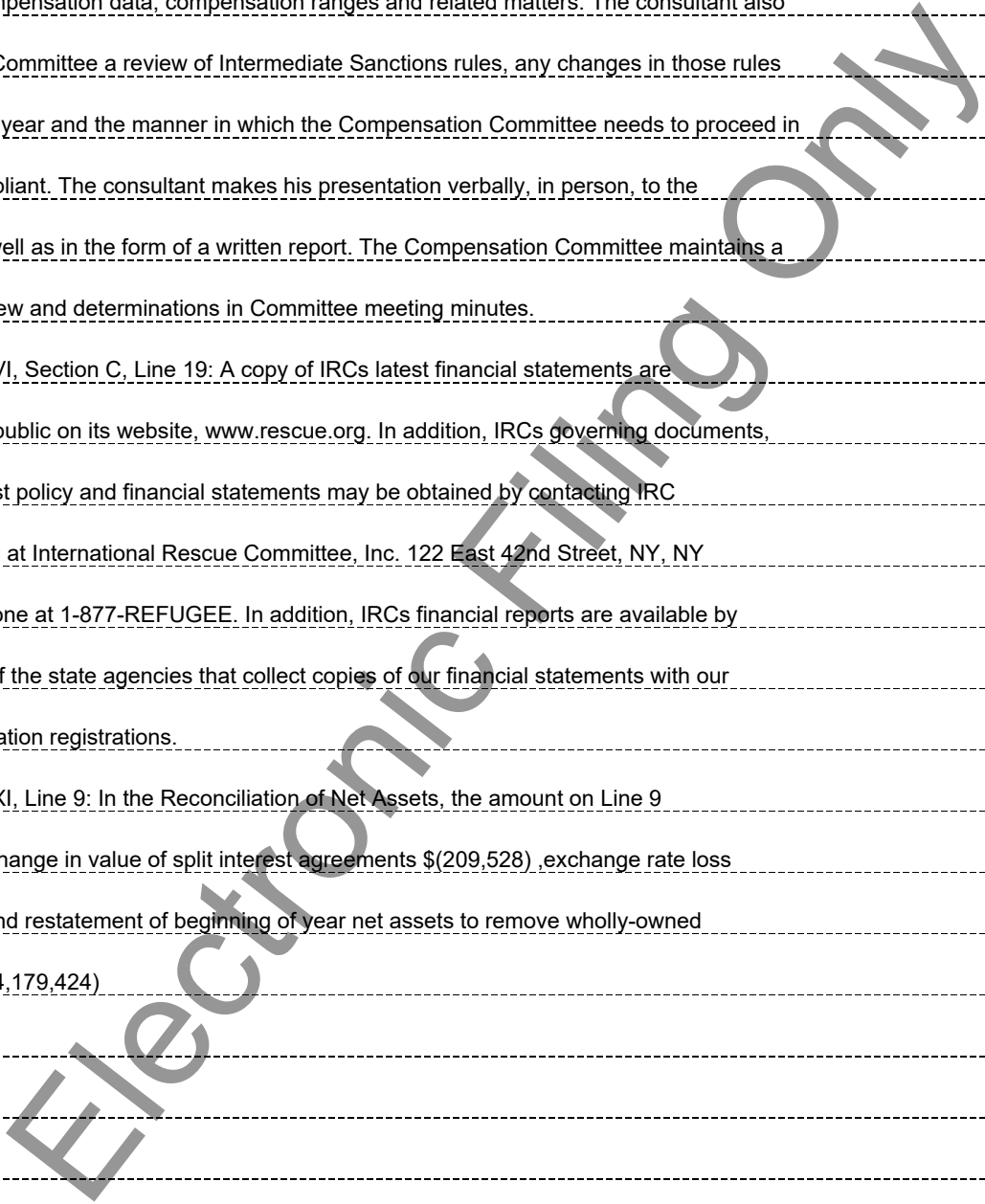
Form 990, Part VI, Section B, Line 15: The IRC Board of Directors established a Board
 Compensation Committee in November 2004. Pursuant to IRC Bylaws and Board Governance
 Guidelines, Committee members are nominated by the Nominating and Governance Committee and
 presented to the full Board for approval at the IRC Board Meetings. All Compensation Committee
 members are independent, uncompensated members of the Board. The Compensation Committee meets

Name of the organization INTERNATIONAL RESCUE COMMITTEE, INC	Employer identification number 13-5660870
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annually to review the performance of and determine compensation for the President & CEO. In addition, the Committee reviews compensation for the senior executive team (which includes Officers and Key Employees). An experienced, independent consultant is engaged to compile comparative compensation data, compensation ranges and related matters. The consultant also presents to the Committee a review of Intermediate Sanctions rules, any changes in those rules in the preceding year and the manner in which the Compensation Committee needs to proceed in order to be compliant. The consultant makes his presentation verbally, in person, to the Committee, as well as in the form of a written report. The Compensation Committee maintains a record of its review and determinations in Committee meeting minutes.

Form 990, Part VI, Section C, Line 19: A copy of IRCs latest financial statements are available to the public on its website, www.rescue.org. In addition, IRCs governing documents, conflict of interest policy and financial statements may be obtained by contacting IRC directly in writing at International Rescue Committee, Inc. 122 East 42nd Street, NY, NY 10168, or by phone at 1-877-REFUGEE. In addition, IRCs financial reports are available by contacting any of the state agencies that collect copies of our financial statements with our charitable solicitation registrations.

Form 990, Part XI, Line 9: In the Reconciliation of Net Assets, the amount on Line 9 represents the change in value of split interest agreements \$(209,528) ,exchange rate loss \$(13,669,629) and restatement of beginning of year net assets to remove wholly-owned subsidiaries \$(34,179,424)



**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number

13-5660870

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) IRC Hellas Apollon Tower, Louizis Riankour 64 Athens 11523, Greece	Humanitarian Aid	Greece			IRC Inc.	X	
(2) IRC Deutschland gGmbH Wallstrasse 15 A Berlin 10179, Germany	Humanitarian Aid	Germany			IRC Inc.	X	
(3) International Rescue Committee Sverige Insamlingsstiftelse Magnus Ladulasgatan 3 Stockholm 11865, Sweden	Humanitarian Aid	Sweden			IRC Inc.	X	
(4) IRC Korea Foundaiton 364 Gangnamdae-ro No. 1403 Soul 06241, Korea, Democratic Peop	Humanitarian Aid	Korea, Republic of			IRC Inc.	X	
(5) IRC Polska Przyokopowa 31, 3rd floor Warsaw 01-208, Poland	Humanitarian Aid	Poland			IRC Inc.	X	
(6) -----							
(7) -----							

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

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

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

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

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

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

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II–IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)	X	
s Other transfer of cash or property from related organization(s)	X	

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

(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1) IRC Hellas	b	3,268,156	Cash
(2) IRC Deutschland gGmbH	b	5,324,811	Cash
(3) International Rescue Committee Sverige Insamlingsstiftelse	r	3,366,132	Cash
(4) IRC Korea Foundation	r	1,427,939	Cash
(5) IRC Polska	r	749,672	Cash
(6) IRC Hellas	r	5,047,372	Cash

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

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

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

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Electronic Filing Only

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	4,112,640	Cash
(8) IRC Deutschland gGmbH	s	91,704,894	Cash
(9)			
(10)			
(11)			
(12)			
(13)			
(14)			
(15)			
(16)			
(17)			
(18)			
(19)			
(20)			
(21)			
(22)			
(23)			
(24)			

Electronic Filing Only

Tax Exempt Entity Declaration and Signature for Electronic Filing

Department of the Treasury
Internal Revenue Service

For calendar year 2021, or tax year beginning 10/1, 2021, and ending 9/30, 20 22
For use with Forms 990, 990-EZ, 990-PF, 990-T, 1120-POL, 4720, 8868, 5227, 5330, and 8038-CP

2021

▶ Go to www.irs.gov/Form8453TE for the latest information.

Name of filer INTERNATIONAL RESCUE COMMITTEE, INC	EIN or SSN 13-5660870
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Part I Type of Return and Return Information

Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here . . . ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . .	1b	1,373,898,628
2a Form 990-EZ check here . . . ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	0
3a Form 1120-POL check here . . . ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	0
4a Form 990-PF check here . . . ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part V, line 5) . . .	4b	0
5a Form 8868 check here . . . ▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	0
6a Form 990-T check here . . . ▶ <input type="checkbox"/>	b Total tax (Form 990-T, Part III, line 4)	6b	0
7a Form 4720 check here . . . ▶ <input type="checkbox"/>	b Total tax (Form 4720, Part III, line 1)	7b	0
8a Form 5227 check here . . . ▶ <input type="checkbox"/>	b FMV of assets at end of tax year (Form 5227, Item D)	8b	0
9a Form 5330 check here . . . ▶ <input type="checkbox"/>	b Tax due (Form 5330, Part II, line 19)	9b	0
10a Form 8038-CP check here . . ▶ <input type="checkbox"/>	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	0

Part II Declaration of Officer or Person Subject to Tax

- 11a** I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- b** If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named entity or I am the person subject to tax with respect to (name of entity) INTERNATIONAL RESCUE COMMITTEE, INC, (EIN) 13-5660870, and that I have examined a copy of the 2021 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here ▶ _____ ▶ **CFO**
Signature of officer or person subject to tax Date Title, if applicable

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

ERO's Use Only	ERO's signature ▶ _____	Date	Check if also paid preparer <input type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code ▶ _____				EIN
					Phone no.

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

Paid Preparer Use Only	Print/Type preparer's name <u>Omo - ose Joseph - Erameh</u>	Preparer's signature	Date <u>5/16/2023</u>	Check if self-employed <input type="checkbox"/>	PTIN <u>P02534927</u>
	Firm's name ▶ <u>KPMG LLP</u>			Firm's EIN ▶ <u>13-5665207</u>	
	Firm's address ▶ <u>345 Park Avenue New York NY 10154-0102</u>			Phone no. <u>212-758-9700</u>	

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

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

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