

# Return of Organization Exempt From Income Tax

**2017**

**Open to Public Inspection**

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

Department of the Treasury  
Internal Revenue Service

**A** For the 2017 calendar year, or tax year beginning 10/1/2017, and ending 9/30/2018

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

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

**D** Employer identification number  
13-5660870

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

**G** Gross receipts \$ 770,003,734

**F** Name and address of principal officer:  
DAVID MILIBAND 122 E 42ND STREET, NEW YORK, NY 10168

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

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

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

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

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

**H(c)** Group exemption number ▶ \_\_\_\_\_

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b>	Briefly describe the organization's mission or most significant activities: <u>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.</u>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	31
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	30
	<b>5</b>	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	<b>5</b>	2,147
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	8,027
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	-2,129
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	413,386	
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	Prior Year 710,339,839	Current Year 711,075,998
	<b>9</b>	Program service revenue (Part VIII, line 2g)	9,596,011	9,354,711
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,154,514	5,793,993
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,734,150	3,331,824
	<b>12</b>	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	727,824,514	729,556,526
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	279,439,833	257,754,476
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	291,859,479	333,726,729
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	3,511,530	2,924,275
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>36,121,512</u>		
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	119,288,346	135,256,187
<b>18</b>	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	694,099,188	729,661,667	
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	33,725,326	-105,141	
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	Beginning of Current Year 374,727,943	End of Year 371,224,556
	<b>21</b>	Total liabilities (Part X, line 26)	160,668,495	148,791,599
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	214,059,448	222,432,957

**Part II Signature Block**

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

**Sign Here**

Signature of officer: Oscar Raposo Date: 5/15/2019  
 Type or print name and title: Oscar Raposo, CFO

**Paid Preparer Use Only**

Print/Type preparer's name: David M Highfill Preparer's signature: [Signature] Date: 5/15/2019 Check  if self-employed PTIN: P01517891  
 Firm's name ▶ KPMG LLP Firm's EIN ▶ 13-5565207  
 Firm's address ▶ 345 Park Avenue, New York, NY 10154 Phone no. 212-758-9700

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 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.

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 \$ 269,839,387 including grants of \$ 127,038,587 ) (Revenue \$ 4,981,961 ) In Africa, the IRC worked in 19 countries to respond to new and ongoing crises in the region. In East Africa, including Ethiopia, Kenya, Somalia, South Sudan, Uganda, and Zimbabwe, the IRC provided life-saving 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 Libya, Cameroon, Central African Republic, Chad, Cote D Ivoire, Liberia, 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, the Democratic Republic of the 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 life-saving support to those in need.

4b (Code: ) (Expenses \$ 143,058,127 including grants of \$ 54,812,475 ) (Revenue \$ 0 ) In the Middle East, the IRC worked in Iraq, Jordan, Lebanon, and Syria. 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.

4c (Code: ) (Expenses \$ 78,776,460 including grants of \$ 48,263,098 ) (Revenue \$ 4,372,750 ) In Asia, the IRC responded to the primary and reproductive health needs of internally displaced persons, refugees, and host communities across Afghanistan, Bangladesh, Myanmar, Pakistan, and Thailand. In Afghanistan, the IRC also provided shelter, water, and sanitation services to internally displaced persons and returning refugees from Pakistan. In Pakistan, the IRC supported thousands of students through the Pakistan Reading Project. 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 health services to individuals and families residing in camps.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 146,533,638 including grants of \$ 27,640,316 ) (Revenue \$ 3,796,154 )

4e Total program service expenses 638,207,612

**Part IV Checklist of Required Schedules**

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

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

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II.</i>		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>		X
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i>		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i>		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i>	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	X	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	X	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	X	
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for line number, description, and Yes/No boxes. Includes sections for backup withholding, employee reporting, unrelated business income, foreign accounts, prohibited tax shelter transactions, deductible contributions, and sponsoring organizations.



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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) Clifford S. Asness ----- Director	1.00 ----- 0.00	X					0	0	0
(2) George Biddle ----- Director	1.00 ----- 0.00	X					0	0	0
(3) Florence A. Davis ----- Director	1.00 ----- 0.00	X					0	0	0
(4) Susan Dentzer ----- Director	1.00 ----- 0.00	X					0	0	0
(5) Katherine Farley ----- Co-Chair, Board of Directors	1.00 ----- 0.00	X		X			0	0	0
(6) Timothy F. Geithner ----- Director	1.00 ----- 0.00	X					0	0	0
(7) Corydon J. Gilchrist (until June 2018) ----- Director	1.00 ----- 0.00	X					0	0	0
(8) John Holmes ----- Director	1.00 ----- 0.00	X					0	0	0
(9) Maria Hummer -Tuttle (from June 2018) ----- Director	1.00 ----- 0.00	X					0	0	0
(10) Steven Klinsky ----- Director	1.00 ----- 0.00	X					0	0	0
(11) David A. Levine ----- Director	1.00 ----- 0.00	X					0	0	0
(12) John Mack ----- Director	1.00 ----- 0.00	X					0	0	0
(13) Francois-Xavier De Mallmann ----- Director	1.00 ----- 0.00	X					0	0	0
(14) Eduardo G. Mestre ----- 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Jillian Muller Director	1.00 0.00	X						0	0	0
(16) Thomas Nides Director	1.00 0.00	X						0	0	0
(17) Michael J. O Neill Director	1.00 0.00	X						0	0	0
(18) Anjali Pant M.D., M.P.H Director	1.00 0.00	X						0	0	0
(19) Kathleen M. Pike, Ph.D. Director	1.00 0.00	X						0	0	0
(20) Queen Rania Al-Abdullah Director	1.00 0.00	X						0	0	0
(21) Omar Saeed Director	1.00 0.00	X						0	0	0
(22) Pamela Saunders-Albin Director	1.00 0.00	X						0	0	0
(23) Dr. Rajiv Shah (until March 2018) Director	1.00 0.00	X						0	0	0
(24) Gordon A. Smith (until June 2018) Director	1.00 0.00	X						0	0	0
(25) Gillian Sorensen Director	1.00 0.00	X						0	0	0
<b>1b Sub-total</b>								0	0	0
<b>c Total from continuation sheets to Part VII, Section A</b>								4,511,943	0	496,815
<b>d Total (add lines 1b and 1c)</b>								4,511,943	0	496,815

**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 **209**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
KEY ACQUISITION PARTNERS 2525 River Rd. Annapolis, MD 21401	Digital Fundraising Consultar	2,812,560
AKA ENTERPRISE SOLUTION,II 875 6th Ave.20th Floor New York, NY 10001	Consulting	2,073,636
MINTZ GROUP LLC 110 5th Ave. 8th floor New York, NY 10011	Consulting	1,407,605
KPMG LLP 345 Park Ave. New York, NY 10154	Financial Audit Service	751,000
JACKSON RIVER LLC 1875 Connecticut Ave. Washington, DC 20009	Consulting	597,105

**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 **30**



**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b> 29,636				
	<b>b</b>	Membership dues . . . . .	<b>1b</b> 0				
	<b>c</b>	Fundraising events . . . . .	<b>1c</b> 9,554,708				
	<b>d</b>	Related organizations . . . . .	<b>1d</b> 0				
	<b>e</b>	Government grants (contributions) . . . . .	<b>1e</b> 422,902,511				
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above . . . . .	<b>1f</b> 278,589,143				
	<b>g</b>	Noncash contributions included in lines 1a-1f: \$ 6,346,361					
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . .		711,075,998			
	Program Service Revenue			<b>Business Code</b>			
<b>2a</b>		US Agency for International Development	900099	6,144,253	6,144,253	0	
<b>b</b>		Department for International Development	900099	3,210,458	3,210,458	0	
<b>c</b>				0	0	0	
<b>d</b>				0	0	0	
<b>e</b>				0	0	0	
<b>f</b>		All other program service revenue . . . . .		0	0	0	
<b>g</b>	<b>Total.</b> Add lines 2a-2f . . . . .		9,354,711				
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . .		2,739,422	0	-2,129	
	<b>4</b>	Income from investment of tax-exempt bond proceeds . . . . .		0	0	0	
	<b>5</b>	Royalties . . . . .		0	0	0	
	<b>6a</b>	Gross rents . . . . .	(i) Real	1,500			
			(ii) Personal				
			<b>b</b> Less: rental expenses . . . . .	0			
			<b>c</b> Rental income or (loss) . . . . .	1,500	0		
	<b>d</b>	Net rental income or (loss) . . . . .		1,500	0	0	
	<b>7a</b>	Gross amount from sales of assets other than inventory . . . . .	(i) Securities	42,781,653	0		
			(ii) Other				
			<b>b</b> Less: cost or other basis and sales expenses . . . . .	39,727,082	0		
			<b>c</b> Gain or (loss) . . . . .	3,054,571	0		
	<b>d</b>	Net gain or (loss) . . . . .		3,054,571	0	0	
	<b>8a</b>	Gross income from fundraising events (not including \$ 9,554,708 of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>a</b>	254,296			
			<b>b</b> Less: direct expenses . . . . .	720,126			
			<b>c</b> Net income or (loss) from fundraising events . . . . .		-465,830	0	-465,830
	<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>a</b>	0			
<b>b</b> Less: direct expenses . . . . .			0				
<b>c</b> Net income or (loss) from gaming activities . . . . .				0	0	0	
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>	0				
		<b>b</b> Less: cost of goods sold . . . . .	0				
		<b>c</b> Net income or (loss) from sales of inventory . . . . .		0	0	0	
Miscellaneous Revenue		<b>Business Code</b>					
<b>11a</b>	IOM Loan Collection Fees	900099	1,650,441	1,650,441	0		
<b>b</b>	Immigration Processing fees	900099	1,690,493	1,690,493	0		
<b>c</b>			0		0		
<b>d</b>	All other revenue . . . . .		455,220	455,220	0		
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . .		3,796,154				
<b>12</b>	<b>Total revenue.</b> See instructions . . . . .		729,556,526	13,150,865	-2,129	5,331,792	

**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations domestic governments. See Part IV, line 21 . . . . .	2,518,275	2,518,275		
2	Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . .	17,270,709	17,270,709		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . . .	237,965,492	237,965,492		
4	Benefits paid to or for members . . . . .	0			
5	Compensation of current officers, directors, trustees, and key employees . . . . .	3,027,708	1,004,335	1,481,879	541,494
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 . . . . .	292,954,906	250,991,331	29,694,639	12,268,936
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	8,636,255	6,156,910	1,661,152	818,193
9	Other employee benefits . . . . .	21,531,142	15,988,338	3,977,137	1,565,667
10	Payroll taxes . . . . .	7,576,718	5,324,841	1,506,618	745,259
11	Fees for services (non-employees):				
a	Management . . . . .	0	0	0	0
b	Legal . . . . .	1,226,650	817,824	369,033	39,793
c	Accounting . . . . .	1,131,679	414,526	713,483	3,670
d	Lobbying . . . . .	0	0	0	0
e	Professional fundraising services. See Part IV, line 17 . . . . .	2,924,275			2,924,275
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.)	16,657,847	8,909,978	6,021,866	1,726,003
12	Advertising and promotion . . . . .	11,205,700	829,988	178,028	10,197,684
13	Office expenses . . . . .	22,533,202	19,410,875	1,080,330	2,041,997
14	Information technology . . . . .	8,768,405	5,492,847	2,534,791	740,767
15	Royalties . . . . .	0	0	0	0
16	Occupancy . . . . .	21,856,967	18,669,257	2,300,374	887,336
17	Travel . . . . .	39,924,044	37,287,454	1,929,828	706,762
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0	0	0	0
19	Conferences, conventions, and meetings . . . . .	4,334,248	3,791,078	258,380	284,790
20	Interest . . . . .	0	0	0	0
21	Payments to affiliates . . . . .	0	0	0	0
22	Depreciation, depletion, and amortization . . . . .	1,459,786	673,651	591,022	195,113
23	Insurance . . . . .	2,349,186	2,106,525	152,601	90,060
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Recruitment	1,211,943	624,176	433,077	154,690
b	Dues and Registrations	403,667	221,123	89,217	93,327
c	Subscriptions	370,457	167,761	193,846	8,850
d		0	0	0	0
e	All other expenses	1,822,406	1,570,318	165,242	86,846
25	<b>Total functional expenses.</b> Add lines 1 through 24e . . . . .	729,661,667	638,207,612	55,332,543	36,121,512
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .				

**Part X Balance Sheet**

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

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	104,551,107	<b>1</b>	98,802,166
	<b>2</b> Savings and temporary cash investments . . . . .	50,589,604	<b>2</b>	60,610,946
	<b>3</b> Pledges and grants receivable, net . . . . .	75,415,301	<b>3</b>	61,571,936
	<b>4</b> Accounts receivable, net . . . . .	0	<b>4</b>	0
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . .	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .	245,354	<b>7</b>	69,155
	<b>8</b> Inventories for sale or use . . . . .	7,200,792	<b>8</b>	8,034,166
	<b>9</b> Prepaid expenses and deferred charges . . . . .	4,529,981	<b>9</b>	5,009,473
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 16,371,170		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b> 12,700,101	4,531,217	<b>10c</b> 3,671,069
	<b>11</b> Investments—publicly traded securities . . . . .	93,298,281	<b>11</b>	99,706,535
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	30,989,715	<b>12</b>	30,026,282
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .	0	<b>13</b>	0
	<b>14</b> Intangible assets . . . . .	0	<b>14</b>	0
	<b>15</b> Other assets. See Part IV, line 11 . . . . .	3,376,591	<b>15</b>	3,722,828
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	374,727,943	<b>16</b>	371,224,556	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	50,628,954	<b>17</b>	49,764,561
	<b>18</b> Grants payable . . . . .	94,658,824	<b>18</b>	84,242,386
	<b>19</b> Deferred revenue . . . . .	2,811,607	<b>19</b>	3,888,690
	<b>20</b> Tax-exempt bond liabilities . . . . .	0	<b>20</b>	0
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .	498,124	<b>21</b>	331,694
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	0	<b>23</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	0	<b>24</b>	0
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .	12,070,986	<b>25</b>	10,564,268
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	160,668,495	<b>26</b>	148,791,599
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	92,104,977	<b>27</b>	93,379,962
	<b>28</b> Temporarily restricted net assets . . . . .	67,038,731	<b>28</b>	73,560,461
	<b>29</b> Permanently restricted net assets . . . . .	54,915,740	<b>29</b>	55,492,534
	<b>Organizations that do not follow SFAS 117 (ASC958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .	0	<b>30</b>	0
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .	0	<b>31</b>	0
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .	0	<b>32</b>	0
<b>33</b> Total net assets or fund balances . . . . .	214,059,448	<b>33</b>	222,432,957	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	374,727,943	<b>34</b>	371,224,556	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	729,556,526
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25) . . . . .	<b>2</b>	729,661,667
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1 . . . . .	<b>3</b>	-105,141
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . . .	<b>4</b>	214,059,448
<b>5</b>	Net unrealized gains (losses) on investments . . . . .	<b>5</b>	4,466,945
<b>6</b>	Donated services and use of facilities . . . . .	<b>6</b>	
<b>7</b>	Investment expenses . . . . .	<b>7</b>	
<b>8</b>	Prior period adjustments . . . . .	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>9</b>	4,011,705
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) . . . . .	<b>10</b>	222,432,957

**Part XII Financial Statements and Reporting**

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

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

# 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) Sally Susman Director	1.00 0.00	X						0	0	0
(27) Mona K. Sutphen Director	1.00 0.00	X						0	0	0
(28) Tony Tamer Director	1.00 0.00	X						0	0	0
(29) Dr. Merryl H. Tisch Director	1.00 0.00	X						0	0	0
(30) E. Eric Tokat Director	1.00 0.00	X						0	0	0
(31) Maureen White Director	1.00 0.00	X						0	0	0
(32) Nina Whitman Director	1.00 0.00	X						0	0	0
(33) Tracy R. Wolstencroft Co-Chair, Board of Directors	1.00 0.00	X		X				0	0	0
(34) David Miliband Dir/CEO/Pres	37.50 0.00	X		X				861,209	0	50,587
(35) Oscar Raposo (from May 2018) CFO, SVP Finance, Treasurer	37.50 0.00			X				0	0	0
(36) Ricardo Castro General Counsel, Secretary	37.50 0.00			X				317,285	0	42,766
(37) Ciaran Donnelly SVP International Programs	37.50 0.00				X			316,890	0	46,706
(38) Jennifer Sime SVP US Programs	37.50 0.00				X			359,002	0	38,826
(39) Amanda Seller Senior Vice President, Revenue	37.50 0.00				X			394,248	0	36,195
(40) Madlin Sadler Senior Vice President, Operations & Strategy	37.50 0.00				X			345,237	0	40,900
(41) Jodi Nelson (until October 2018) Senior Vice President Policy & Practice	37.50 0.00					X		341,719	0	49,704
(42) Madeleine Fackler Chief Information Officer	37.50 0.00					X		325,932	0	48,416
(43) Brian Johnson Chief HR Officer	37.50 0.00					X		321,094	0	49,482
(44) Mania Boyder (until June 2018) Vice President Development	37.50 0.00					X		316,215	0	49,616
(45) Kurt Tjossem Regional Vice President	40.00 0.00					X		282,976	0	26,749
(46) David Johnson (until September 2017) CFO, SVP Finance, Treasurer	37.50 0.00						X	330,136	0	16,868

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2017**

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

Department of the Treasury  
Internal Revenue Service

<b>Name of the organization</b> INTERNATIONAL RESCUE COMMITTEE, INC	<b>Employer identification number</b> 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 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An 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 in 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)						
<b>Total</b>					0	0

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

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

Section A. Public Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: Calendar year (or fiscal year beginning in), (a) 2013, (b) 2014, (c) 2015, (d) 2016, (e) 2017, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows include: 14 Public support percentage for 2017 (99.16%); 15 Public support percentage from 2016 Schedule A, Part II, line 14 (99.10%); 16a 33 1/3% support test—2017 (checked); 16b 33 1/3% support test—2016; 17a 10%-facts-and-circumstances test—2017; 17b 10%-facts-and-circumstances test—2016; 18 Private foundation.

**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) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						0
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . . .						0
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						0
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						0
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						0
<b>6 Total.</b> Add lines 1 through 5 . . . . .	0	0	0	0	0	0
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . . .						0
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year . . . . .						0
<b>c</b> Add lines 7a and 7b . . . . .	0	0	0	0	0	0
<b>8 Public support</b> (Subtract line 7c from line 6.) . . . . .						0

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
<b>9</b> Amounts from line 6 . . . . .	0	0	0	0	0	0
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .						0
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						0
<b>c</b> Add lines 10a and 10b . . . . .	0	0	0	0	0	0
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on . . . . .						0
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						0
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .	0	0	0	0	0	0

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

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

<b>15</b> Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	0.00%
<b>16</b> Public support percentage from 2016 Schedule A, Part III, line 15 . . . . .	<b>16</b>	0.00%

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

<b>17</b> Investment income percentage for <b>2017</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	0.00%
<b>18</b> Investment income percentage from <b>2016</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	0.00%

**19a 33 1/3% support tests—2017.** 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—2016.** 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
<b>11a</b>		
<b>b</b> A family member of a person described in (a) above?		
<b>11b</b>		
<b>c</b> A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>1</b>		
<b>2</b> 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? <i>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.</i>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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)? <i>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).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>1</b>		
<b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>2</b>		
<b>3</b> By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).			
<b>2</b> Activities Test. Answer (a) and (b) below.			
<b>a</b> 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? <i>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.</i>			
<b>2a</b>			
<b>b</b> Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>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.</i>			
<b>2b</b>			
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.			
<b>a</b> 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? <i>Provide details in Part VI.</i>			
<b>3a</b>			
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
<b>3b</b>			

**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.

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





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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

OMB No. 1545-0047

**2017**

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

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

**Filers of:**

**Section:**

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

**General Rule**

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

**Special Rules**

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

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

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. 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, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Office of Foreign Disaster Assistance (OFDA) 1300 Pennsylvania Avenue, NW Washington DC 20523-1000 Foreign State or Province: _____ Foreign Country: _____	\$ 80,061,689	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	European Union Humanitarian Department (ECHO) 200 Rule de la Loi B-1049 1000 Foreign State or Province: Brussels Foreign Country: Belgium	\$ 59,905,369	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	Bureau of Population Refugees & Migration (BPRM) 2201 C Street NW Washington DC 20520 Foreign State or Province: _____ Foreign Country: _____	\$ 68,113,406	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	Department for International Development (DFID) 1 Palace Street SW 1E-5HE Foreign State or Province: London Foreign Country: United Kingdom	\$ 60,341,064	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
5	US Agency for International Development (USAID) 1300 Pennsylvania Avenue, NW Washington DC 20523-1000 Foreign State or Province: _____ Foreign Country: _____	\$ 45,404,443	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	\$ 41,514,555	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	Department of Health & Human Services (HHS) 200 Independence Avenue SW Washington DC 20201 Foreign State or Province: _____ Foreign Country: _____	\$ 37,791,433	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	Stichting Vluchteling (SV) Laan van Nieuw Oost-Indie 131 2593 BM Foreign State or Province: Den Haag Foreign Country: Netherlands	\$ 18,837,585	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	Swedish International Development Cooperation Agen Valhallavägen 199 SE-105 25 Foreign State or Province: Stockholm Foreign Country: Sweden	\$ 17,350,371	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	United Nations Children's Fund (UNICEF) 3 United Nations Plaza New York NY 10017 Foreign State or Province: _____ Foreign Country: _____	\$ 14,652,059	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
-----	----- ----- ----- Foreign State or Province: _____ Foreign Country: _____	\$ -----	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



<b>Name of organization</b> INTERNATIONAL RESCUE COMMITTEE, INC	<b>Employer identification number</b> 13-5660870
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**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
4	Emergency Program Materials ----- ----- -----	\$ 211,741	9/30/2018
6	Fuel and Spare Parts Emergency Program Materials ----- -----	\$ 1,341,643	9/30/2018
10	Emergency Program Materials ----- ----- -----	\$ 1,512,999	9/30/2018
	----- ----- -----	\$ -----	-----
	----- ----- -----	\$ -----	-----
	----- ----- -----	\$ -----	-----

<b>Name of organization</b> INTERNATIONAL RESCUE COMMITTEE, INC	<b>Employer identification number</b> 13-5660870
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**Part III** *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$ ..... 0  
 Use duplicate copies of Part III if additional space is needed.

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

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

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

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

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

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

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

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

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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2017**

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

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**Open to Public Inspection**

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

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

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

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

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

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

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

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

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) Total
<b>2a</b> Lobbying nontaxable amount				0	0
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					0
<b>c</b> Total lobbying expenditures				0	0
<b>d</b> Grassroots nontaxable amount				0	0
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					0
<b>f</b> Grassroots lobbying expenditures				0	0

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

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? . . . . .		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
<b>c</b> Media advertisements? . . . . .		X	
<b>d</b> Mailings to members, legislators, or the public? . . . . .		X	
<b>e</b> Publications, or published or broadcast statements? . . . . .		X	
<b>f</b> Grants to other organizations for lobbying purposes? . . . . .		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? . . . . .	X		113,735
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? . . . . .		X	
<b>i</b> Other activities? . . . . .		X	
<b>j</b> Total. Add lines 1c through 1i . . . . .			113,735
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 . . . . .			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 . . . . .			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? . . . . .			

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

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

<b>1</b> Dues, assessments and similar amounts from members . . . . .	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year . . . . .	<b>2a</b>	
<b>b</b> Carryover from last year . . . . .	<b>2b</b>	
<b>c</b> Total . . . . .	<b>2c</b>	0
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . . . . .	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? . . . . .	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) . . . . .	<b>5</b>	0

**Part IV Supplemental Information**

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

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

and US program staff that may contact legislators or other officials. Time spent by staff was

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



SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2017

Open to Public Inspection

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 include total number at end of year, aggregate value of contributions, aggregate value of grants, aggregate value at end of year, and questions about donor informed status.

Part II Conservation Easements.

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

Form for Part II Conservation Easements. Includes questions about purpose of easements, total number and acreage, and monitoring requirements. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, 2d.

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 for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting requirements for art and historical treasures.

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

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

**Part IV Escrow and Custodial Arrangements.**

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f 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	112,068,000	106,977,000	103,804,000	112,162,000	106,512,000
b Contributions	601,000	59,000	584,000	685,000	3,178,000
c Net investment earnings, gains, and losses	8,278,000	10,030,000	7,545,000	-4,085,000	7,919,000
d Grants or scholarships					
e Other expenditures for facilities and programs	5,000,000	4,998,000	4,956,000	4,958,000	5,447,000
f Administrative expenses					
g End of year balance	115,947,000	112,068,000	106,977,000	103,804,000	112,162,000

- 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 ▶ 48%
  - c Temporarily restricted endowment ▶ 8%
- 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  | 3a(i)  | X  |
| (ii) related organizations   | 3a(ii) | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b     |    |
- 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	0
b Buildings	0	0	0	0
c Leasehold improvements	0	8,617,365	6,532,865	2,084,500
d Equipment	0	3,725,741	2,711,093	1,014,648
e Other	0	4,028,064	3,456,143	571,921

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 3,671,069



**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	26,201,282	F
(A) Direct Lending Fund	3,825,000	F
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	30,026,282	

**Part VIII Investments—Program Related.**

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	0	

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	0

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Revolving Loan Program Liability	657,788
(3) Annuity Liability Related to Split Interest Agreement	6,767,696
(4) Deferred rent	3,138,784
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	10,564,268

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	748,878,444
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	4,466,945	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>		
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	14,134,847	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .			<b>2e</b> 18,601,792
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .			<b>3</b> 730,276,652
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	-720,126	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .			<b>4c</b> -720,126
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .			<b>5</b> 729,556,526

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	746,454,798
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>		
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>		
<b>c</b>	Other losses . . . . .	<b>2c</b>		
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	16,793,131	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .			<b>2e</b> 16,793,131
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .			<b>3</b> 729,661,667
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>		
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>		
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .			<b>4c</b> 0
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .			<b>5</b> 729,661,667

**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 2018 or 2017.

Part XI Line 2d The amount includes subsidiary revenue amounting \$14,330,344 included in audited financial statement and change in value of split interest amounting (\$195,497).

Part XI Line 4b The amount (\$720,126) represents special event expense.

Part XII Line 2d The amount includes subsidiary expense \$14,438,137 included in audited consolidated financial statement, exchange rate loss \$1,634,869 and special event expense \$720,126.

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

OMB No. 1545-0047

**2017**

**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)	3	7	Program Services		1,113,247
(2) Europe (Including Iceland and Greenland)			Grants to recipients		744,699
(3) Central America and the Caribbean	2	57	Program Services		1,813,853
(4) Central America and the Caribbean			Grants to recipients		384,877
(5) Middle East and North Africa	6	2,579	Program Services		84,910,257
(6) Middle East and North Africa			Grants to recipients		61,534,231
(7) Sub-Saharan Africa	18	6,189	Program Services		139,414,439
(8) Sub-Saharan Africa			Grants to recipients		127,038,587
(9) East Asia and the Pacific	3	881	Program Services		14,251,967
(10) East Asia and the Pacific			Grants to recipients		25,340,652
(11) South Asia	2	1,514	Program Services		16,261,395
(12) South Asia			Grants to recipients		22,922,446
(13)					
(14)					
(15)					
(16)					
(17)					
<b>3a</b> Sub-total . . . . .	34	11,227			495,730,650
<b>b</b> Total from continuation sheets to Part I . . .	0	0			0
<b>c</b> Totals (add lines 3a and 3b)	34	11,227			495,730,650

**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.

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
(1)			Sub-Saharan Africa	Community Development	9,376	Bank Transfer			FMV
(2)			Sub-Saharan Africa	Community Development	33,371	Bank Transfer			FMV
(3)			Sub-Saharan Africa	Community Development	63,320	Bank Transfer			FMV
(4)			Sub-Saharan Africa	Community Development	111,906	Bank Transfer			FMV
(5)			Sub-Saharan Africa	Community Development	117,530	Bank Transfer			FMV
(6)			Sub-Saharan Africa	Community Development	186,775	Bank Transfer			FMV
(7)			Sub-Saharan Africa	Distribution	1,794,989	Bank Transfer			FMV
(8)			East Asia and the Pacific	Distribution	442,831	Bank Transfer			FMV
(9)			East Asia and the Pacific	Distribution	787,402	Bank Transfer			FMV
(10)			East Asia and the Pacific	Distribution	5,189,227	Bank Transfer			FMV
(11)			East Asia and the Pacific	Distribution	5,689,793	Bank Transfer			FMV
(12)			Middle East and North Africa	Distribution	9,775	Bank Transfer			FMV
(13)			Europe (Including Iceland and	Education	14,706	Bank Transfer			FMV
(14)			Sub-Saharan Africa	Education	12,913	Bank Transfer			FMV
(15)			Sub-Saharan Africa	Education	259,582	Bank Transfer			FMV
(16)			Sub-Saharan Africa	Education	293,132	Bank Transfer			FMV

- 2** Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . **▶** 183
- 3** Enter total number of other organizations or entities . . . . . **▶** 168

**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		217,972	Bank Transfer			FMV
(2) HEALTH CARE	East Asia and the Pacific		1,563,249	Bank Transfer			FMV
(3) OTHER ASSISTANCE	East Asia and the Pacific		950,261	Bank Transfer			FMV
(4) OTHER EDUCATION	East Asia and the Pacific		508,510	Bank Transfer			FMV
(5) PROGRAM SUPPLIES & MATERI	East Asia and the Pacific		2,936,549	Bank Transfer	499,313	PROGRAM MATERIAL	FMV
(6) OTHER EDUCATION	Europe (Including Iceland and Greenland)		10,603	Bank Transfer			FMV
(7) PROGRAM SUPPLIES & MATERI	Europe (Including Iceland and Greenland)		23,187	Bank Transfer			FMV
(8) SERVICE CONTRACTS	Europe (Including Iceland and Greenland)		22,855	Bank Transfer			FMV
(9) CASH ASSISTANCE	Middle East and North Africa		15,608,792	Bank Transfer			FMV
(10) HEALTH CARE	Middle East and North Africa		6,534,774	Bank Transfer			FMV
(11) OTHER ASSISTANCE	Middle East and North Africa		4,012,791	Bank Transfer			FMV
(12) OTHER EDUCATION	Middle East and North Africa		586,121	Bank Transfer			FMV
(13) PROGRAM SUPPLIES & MATERI	Middle East and North Africa		14,602,986	Bank Transfer	42,126	PROGRAM MATERIAL	FMV
(14) SERVICE CONTRACTS	Middle East and North Africa		36,989	Bank Transfer			FMV
(15) TRANSPORTATION	Middle East and North Africa		4,557	Bank Transfer			FMV
(16) CASH ASSISTANCE	Sub-Saharan Africa		9,629,331	Bank Transfer			FMV
(17) HEALTH CARE	Sub-Saharan Africa		3,879,585	Bank Transfer			FMV
(18) OTHER ASSISTANCE	Sub-Saharan Africa		3,528,376	Bank Transfer			FMV

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . .  Yes  No
  
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; 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

**Part V Supplemental Information**

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

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

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

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

reports as required per the grant agreement.

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

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

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

Local Government, etc.) that the funds have been granted to. All reports are reviewed

on-site periodic review visits occur routinely and capacity building is performed as

required.

Part III Line Column C 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 2018 in more than 40

countries and in 25 U.S. cities, our dedicated teams provide clean water, shelter, health

care, education and empowerment support to refugees and displaced people. We provided

schooling and educational opportunities to more than 1.6 million children. IRC and our

partner organizations supported 15,645 existing businesses and 4,738 new businesses.

21,982 people participated in awareness-raising sessions on governance-related topics,

such as individual rights, conflict mitigation and local government hotlines. Trained

23,852 people on child protection, gender-based violence and protection principles, and

service delivery. Reached 1.2 million people through our efforts to raise awareness about

human rights, protection and gender-based violence. Supported 27,827 village saving and

loan association (VSLA) members. VSLA participants saved more than 1 million USD.

Supported 16,177 schools, education centers, vocational training centers and safe healing

and learning spaces. In the United States in 2018, the IRC served 9,127 people with

economic empowerment programs, including financial coaching, vocational training and asset

building. Assisted 2,175 children and parents seeking asylum in the U.S. and resettled



**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.

5,374 refugees and SIV recipients across 25 U.S. cities. IRC worked with 8,027 volunteers

in the U.S. who collectively provided more than 200,000 hours of service.

# Continuation Sheet for Schedule F (Form 990)

Name of the organization INTERNATIONAL RESCUE COMMITTEE, INC	Employer identification number 13-5660870
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**Part I** Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(18)					
(19)					
(20)					
(21)					
(22)					
(23)					
(24)					
(25)					
(26)					
(27)					
(28)					
(29)					
(30)					
(31)					
(32)					
(33)					
(34)					
(35)					
(36)					
(37)					
(38)					
(39)					
<b>Totals . . . . . ▶</b>	0	0			0

**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)			Sub-Saharan Africa	Education	9,410	Bank Transfer			FMV
(18)			Sub-Saharan Africa	Education	184,330	Bank Transfer			FMV
(19)			Sub-Saharan Africa	Education	2,020,379	Bank Transfer			FMV
(20)			Sub-Saharan Africa	Education	131,985	Bank Transfer			FMV
(21)			East Asia and the Pacific	Education	2,951,327	Bank Transfer			FMV
(22)			East Asia and the Pacific	Education	3,372,581	Bank Transfer			FMV
(23)			East Asia and the Pacific	Education	5,697,479	Bank Transfer			FMV
(24)			East Asia and the Pacific	Education	51,925	Bank Transfer			FMV
(25)			Middle East and North Africa	Education	64,860	Bank Transfer			FMV
(26)			Sub-Saharan Africa	Education	13,752	Bank Transfer			FMV
(27)			Sub-Saharan Africa	Education	179,085	Bank Transfer			FMV
(28)			Sub-Saharan Africa	Education	7,937	Bank Transfer			FMV
(29)			Sub-Saharan Africa	Education	8,376	Bank Transfer			FMV
(30)			Middle East and North Africa	Education	16,058	Bank Transfer			FMV
(31)			Middle East and North Africa	Education	20,866	Bank Transfer			FMV
(32)			Middle East and North Africa	Education	62,655	Bank Transfer			FMV
(33)			Middle East and North Africa	Education	97,838	Bank Transfer			FMV
(34)			Sub-Saharan Africa	Education	16,776	Bank Transfer			FMV
(35)			Sub-Saharan Africa	Education	19,428	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)			Sub-Saharan Africa	Health	23,626	Bank Transfer			FMV
(37)			Sub-Saharan Africa	Health	12,000	Bank Transfer			FMV
(38)			Sub-Saharan Africa	Distribution	5,329	Bank Transfer			FMV
(39)			Sub-Saharan Africa	Distribution	6,000	Bank Transfer			FMV
(40)			Sub-Saharan Africa	Distribution	6,279	Bank Transfer			FMV
(41)			Sub-Saharan Africa	Distribution	25,649	Bank Transfer			FMV
(42)			Sub-Saharan Africa	Distribution	29,071	Bank Transfer			FMV
(43)			Sub-Saharan Africa	Distribution	33,392	Bank Transfer			FMV
(44)			Sub-Saharan Africa	Distribution	45,361	Bank Transfer			FMV
(45)			Sub-Saharan Africa	Distribution	45,993	Bank Transfer			FMV
(46)			Sub-Saharan Africa	Distribution	55,753	Bank Transfer			FMV
(47)			Sub-Saharan Africa	Distribution	56,935	Bank Transfer			FMV
(48)			Sub-Saharan Africa	Distribution	58,104	Bank Transfer			FMV
(49)			Sub-Saharan Africa	Distribution	84,127	Bank Transfer			FMV
(50)			Sub-Saharan Africa	Distribution	92,924	Bank Transfer			FMV
(51)			Sub-Saharan Africa	Distribution	155,079	Bank Transfer			FMV
(52)			Sub-Saharan Africa	Distribution	86,000	Bank Transfer			FMV
(53)			Sub-Saharan Africa	Governance	35,263	Bank Transfer			FMV
(54)			Sub-Saharan Africa	Governance	7,459	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)			Sub-Saharan Africa	Health	17,198	Bank Transfer			FMV
(56)			Sub-Saharan Africa	Health	19,259	Bank Transfer			FMV
(57)			Sub-Saharan Africa	Health	22,394	Bank Transfer			FMV
(58)			Sub-Saharan Africa	Health	26,392	Bank Transfer			FMV
(59)			Sub-Saharan Africa	Health	27,236	Bank Transfer			FMV
(60)			Sub-Saharan Africa	Health	28,120	Bank Transfer			FMV
(61)			Sub-Saharan Africa	Health	29,048	Bank Transfer			FMV
(62)			Sub-Saharan Africa	Health	29,263	Bank Transfer			FMV
(63)			Sub-Saharan Africa	Health	31,638	Bank Transfer			FMV
(64)			Sub-Saharan Africa	Health	32,547	Bank Transfer			FMV
(65)			Sub-Saharan Africa	Health	33,304	Bank Transfer			FMV
(66)			Sub-Saharan Africa	Health	40,034	Bank Transfer			FMV
(67)			Sub-Saharan Africa	Health	41,792	Bank Transfer			FMV
(68)			Sub-Saharan Africa	Health	42,350	Bank Transfer			FMV
(69)			Sub-Saharan Africa	Health	43,240	Bank Transfer			FMV
(70)			Sub-Saharan Africa	Health	48,249	Bank Transfer			FMV
(71)			Sub-Saharan Africa	Health	49,329	Bank Transfer			FMV
(72)			Sub-Saharan Africa	Health	83,371	Bank Transfer			FMV
(73)			Sub-Saharan Africa	Health	95,414	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)			Sub-Saharan Africa	Health	127,952	Bank Transfer			FMV
(75)			Sub-Saharan Africa	Health	233,169	Bank Transfer			FMV
(76)			Sub-Saharan Africa	Health	252,716	Bank Transfer			FMV
(77)			Sub-Saharan Africa	Health	118,051	Bank Transfer			FMV
(78)			Sub-Saharan Africa	Health	11,070	Bank Transfer			FMV
(79)			Sub-Saharan Africa	Health	13,411	Bank Transfer			FMV
(80)			Sub-Saharan Africa	Health	13,619	Bank Transfer			FMV
(81)			Sub-Saharan Africa	Health	36,814	Bank Transfer			FMV
(82)			Sub-Saharan Africa	Health	58,684	Bank Transfer			FMV
(83)			Sub-Saharan Africa	Health	72,494	Bank Transfer			FMV
(84)			Sub-Saharan Africa	Health	82,004	Bank Transfer			FMV
(85)			Sub-Saharan Africa	Health	82,402	Bank Transfer			FMV
(86)			Sub-Saharan Africa	Health	21,054	Bank Transfer			FMV
(87)			Sub-Saharan Africa	Health	22,234	Bank Transfer			FMV
(88)			Sub-Saharan Africa	Health	75,058	Bank Transfer			FMV
(89)			Sub-Saharan Africa	Health	90,133	Bank Transfer			FMV
(90)			Sub-Saharan Africa	Health	93,715	Bank Transfer			FMV
(91)			Sub-Saharan Africa	Health	120,896	Bank Transfer			FMV
(92)			Sub-Saharan Africa	Health	123,439	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)
(93)			Sub-Saharan Africa	Health	177,180	Bank Transfer			FMV
(94)			Sub-Saharan Africa	Health	336,695	Bank Transfer			FMV
(95)			Sub-Saharan Africa	Health	678,850	Bank Transfer			FMV
(96)			Sub-Saharan Africa	Health	1,309,904	Bank Transfer			FMV
(97)			Sub-Saharan Africa	Health	10,000	Bank Transfer			FMV
(98)			Sub-Saharan Africa	Health	35,648	Bank Transfer			FMV
(99)			Sub-Saharan Africa	Health	50,593	Bank Transfer			FMV
(100)			Sub-Saharan Africa	Health	61,191	Bank Transfer			FMV
(101)			Sub-Saharan Africa	Health	71,061	Bank Transfer			FMV
(102)			Sub-Saharan Africa	Health	73,072	Bank Transfer			FMV
(103)			Sub-Saharan Africa	Health	93,441	Bank Transfer			FMV
(104)			Sub-Saharan Africa	Health	175,794	Bank Transfer			FMV
(105)			Sub-Saharan Africa	Health	271,213	Bank Transfer			FMV
(106)			Sub-Saharan Africa	Health	20,011	Bank Transfer			FMV
(107)			Sub-Saharan Africa	Health	297,269	Bank Transfer			FMV
(108)			Sub-Saharan Africa	Health	348,323	Bank Transfer			FMV
(109)			Sub-Saharan Africa	Health	7,382	Bank Transfer			FMV
(110)			Sub-Saharan Africa	Health	12,949	Bank Transfer			FMV
(111)			Sub-Saharan Africa	Health	17,694	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)			Sub-Saharan Africa	Health	68,784	Bank Transfer			FMV
(113)			Sub-Saharan Africa	Health	411,715	Bank Transfer			FMV
(114)			Sub-Saharan Africa	Health	880,559	Bank Transfer			FMV
(115)			East Asia and the Pacific	Health	7,163	Bank Transfer			FMV
(116)			East Asia and the Pacific	Health	31,649	Bank Transfer			FMV
(117)			East Asia and the Pacific	Health	32,793	Bank Transfer			FMV
(118)			East Asia and the Pacific	Health	32,793	Bank Transfer			FMV
(119)			East Asia and the Pacific	Health	58,215	Bank Transfer			FMV
(120)			East Asia and the Pacific	Health	60,360	Bank Transfer			FMV
(121)			East Asia and the Pacific	Health	70,368	Bank Transfer			FMV
(122)			East Asia and the Pacific	Health	261,067	Bank Transfer			FMV
(123)			East Asia and the Pacific	Health	427,171	Bank Transfer			FMV
(124)			East Asia and the Pacific	Health	483,647	Bank Transfer			FMV
(125)			East Asia and the Pacific	Health	5,000	Bank Transfer			FMV
(126)			East Asia and the Pacific	Health	12,889	Bank Transfer			FMV
(127)			East Asia and the Pacific	Health	33,401	Bank Transfer			FMV
(128)			East Asia and the Pacific	Health	35,086	Bank Transfer			FMV
(129)			East Asia and the Pacific	Health	50,327	Bank Transfer			FMV
(130)			East Asia and the Pacific	Health	51,956	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)			East Asia and the Pacific	Health	90,022	Bank Transfer			FMV
(132)			East Asia and the Pacific	Health	97,530	Bank Transfer			FMV
(133)			East Asia and the Pacific	Health	180,815	Bank Transfer			FMV
(134)			East Asia and the Pacific	Health	304,720	Bank Transfer			FMV
(135)			South Asia	Health	10,000	Bank Transfer			FMV
(136)			Middle East and North Africa	Health	136,106	Bank Transfer			FMV
(137)			Middle East and North Africa	Health	289,196	Bank Transfer			FMV
(138)			Middle East and North Africa	Health	10,000	Bank Transfer			FMV
(139)			Middle East and North Africa	Health	25,000	Bank Transfer			FMV
(140)			Middle East and North Africa	Health	25,000	Bank Transfer			FMV
(141)			Middle East and North Africa	Health	30,000	Bank Transfer			FMV
(142)			Middle East and North Africa	Health	83,882	Bank Transfer			FMV
(143)			Middle East and North Africa	Health	237,567	Bank Transfer			FMV
(144)			Middle East and North Africa	Health	316,029	Bank Transfer			FMV
(145)			Middle East and North Africa	Health	12,221	Bank Transfer			FMV
(146)			Middle East and North Africa	Health	24,806	Bank Transfer			FMV
(147)			Middle East and North Africa	Health	60,793	Bank Transfer			FMV
(148)			Middle East and North Africa	Health	263,834	Bank Transfer			FMV
(149)			Middle East and North Africa	Health	296,669	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	Health	417,248	Bank Transfer			FMV
(151)			Middle East and North Africa	Health	691,663	Bank Transfer			FMV
(152)			Middle East and North Africa	Health	1,228,065	Bank Transfer			FMV
(153)			Middle East and North Africa	Health	1,360,154	Bank Transfer			FMV
(154)			Sub-Saharan Africa	Health	36,174	Bank Transfer			FMV
(155)			Sub-Saharan Africa	Health	37,733	Bank Transfer			FMV
(156)			Sub-Saharan Africa	Health	39,272	Bank Transfer			FMV
(157)			Sub-Saharan Africa	Health	45,117	Bank Transfer			FMV
(158)			Sub-Saharan Africa	Health	54,760	Bank Transfer			FMV
(159)			Sub-Saharan Africa	Health	61,555	Bank Transfer			FMV
(160)			Sub-Saharan Africa	Health	64,017	Bank Transfer			FMV
(161)			Sub-Saharan Africa	Health	90,080	Bank Transfer			FMV
(162)			Sub-Saharan Africa	Health	91,692	Bank Transfer			FMV
(163)			Sub-Saharan Africa	Health	141,312	Bank Transfer			FMV
(164)			Sub-Saharan Africa	Health	114,898	Bank Transfer			FMV
(165)			Sub-Saharan Africa	Health	58,177	Bank Transfer			FMV
(166)			Sub-Saharan Africa	Health	23,861	Bank Transfer			FMV
(167)			Sub-Saharan Africa	Health	11,642	Bank Transfer			FMV
(168)			Sub-Saharan Africa	Health	39,903	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)			Sub-Saharan Africa	Health	40,668	Bank Transfer			FMV
(170)			Sub-Saharan Africa	Health	462,245	Bank Transfer			FMV
(171)			Sub-Saharan Africa	Health	25,615	Bank Transfer			FMV
(172)			Sub-Saharan Africa	Health	26,262	Bank Transfer			FMV
(173)			Sub-Saharan Africa	Health	232,247	Bank Transfer			FMV
(174)			Sub-Saharan Africa	Health	10,000	Bank Transfer			FMV
(175)			Sub-Saharan Africa	Health	10,405	Bank Transfer			FMV
(176)			Sub-Saharan Africa	Health	17,970	Bank Transfer			FMV
(177)			Sub-Saharan Africa	Health	20,060	Bank Transfer			FMV
(178)			Sub-Saharan Africa	Health	21,622	Bank Transfer			FMV
(179)			Sub-Saharan Africa	Health	35,791	Bank Transfer			FMV
(180)			Sub-Saharan Africa	Health	46,931	Bank Transfer			FMV
(181)			Sub-Saharan Africa	Health	62,968	Bank Transfer			FMV
(182)			Sub-Saharan Africa	Health	17,770	Bank Transfer			FMV
(183)			Sub-Saharan Africa	Health	39,694	Bank Transfer			FMV
(184)			East Asia and the Pacific	Health	6,337	Bank Transfer			FMV
(185)			East Asia and the Pacific	Health	16,382	Bank Transfer			FMV
(186)			East Asia and the Pacific	Health	28,509	Bank Transfer			FMV
(187)			East Asia and the Pacific	Health	52,028	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)			East Asia and the Pacific	Health	9,266	Bank Transfer			FMV
(189)			East Asia and the Pacific	Health	18,597	Bank Transfer			FMV
(190)			East Asia and the Pacific	Health	21,333	Bank Transfer			FMV
(191)			East Asia and the Pacific	Health	46,837	Bank Transfer			FMV
(192)			Middle East and North Africa	Health	47,029	Bank Transfer			FMV
(193)			Middle East and North Africa	Health	5,350	Bank Transfer			FMV
(194)			Middle East and North Africa	Health	5,656	Bank Transfer			FMV
(195)			Middle East and North Africa	Health	13,244	Bank Transfer			FMV
(196)			Middle East and North Africa	Health	15,295	Bank Transfer			FMV
(197)			Middle East and North Africa	Health	81,813	Bank Transfer			FMV
(198)			Middle East and North Africa	Health	149,158	Bank Transfer			FMV
(199)			Middle East and North Africa	Health	38,329	Bank Transfer			FMV
(200)			Middle East and North Africa	Health	150,000	Bank Transfer			FMV
(201)			Middle East and North Africa	Health	200,400	Bank Transfer			FMV
(202)			Middle East and North Africa	Health	27,791	Bank Transfer			FMV
(203)			Middle East and North Africa	Health	40,625	Bank Transfer			FMV
(204)			Middle East and North Africa	Health	42,059	Bank Transfer			FMV
(205)			Middle East and North Africa	Health	61,682	Bank Transfer			FMV
(206)			Middle East and North Africa	Health	66,960	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)			Middle East and North Africa	Health	205,055	Bank Transfer			FMV
(208)			Sub-Saharan Africa	Health	5,876	Bank Transfer			FMV
(209)			Sub-Saharan Africa	Health	13,100	Bank Transfer			FMV
(210)			Sub-Saharan Africa	Health	13,858	Bank Transfer			FMV
(211)			Sub-Saharan Africa	Health	19,122	Bank Transfer			FMV
(212)			Sub-Saharan Africa	Health	24,362	Bank Transfer			FMV
(213)			Sub-Saharan Africa	Health	32,019	Bank Transfer			FMV
(214)			Sub-Saharan Africa	Health	49,811	Bank Transfer			FMV
(215)			Sub-Saharan Africa	Health	62,659	Bank Transfer			FMV
(216)			Sub-Saharan Africa	Health	69,584	Bank Transfer			FMV
(217)			Sub-Saharan Africa	Health	76,233	Bank Transfer			FMV
(218)			Sub-Saharan Africa	Health	16,258	Bank Transfer			FMV
(219)			Sub-Saharan Africa	Health	85,537	Bank Transfer			FMV
(220)			Europe (Including Iceland and	Health	36,963	Bank Transfer			FMV
(221)			Sub-Saharan Africa	Health	37,015	Bank Transfer			FMV
(222)			Sub-Saharan Africa	Community Development	9,650	Bank Transfer			FMV
(223)			Sub-Saharan Africa	Community Development	38,887	Bank Transfer			FMV
(224)			Sub-Saharan Africa	Community Development	698,710	Bank Transfer			FMV
(225)			Sub-Saharan Africa	Community Development	1,454,494	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	Community Development	50,441	Bank Transfer			FMV
(227)			East Asia and the Pacific	Community Development	28,006	Bank Transfer			FMV
(228)			East Asia and the Pacific	Community Development	28,963	Bank Transfer			FMV
(229)			East Asia and the Pacific	Community Development	31,773	Bank Transfer			FMV
(230)			East Asia and the Pacific	Community Development	33,379	Bank Transfer			FMV
(231)			East Asia and the Pacific	Community Development	44,263	Bank Transfer			FMV
(232)			East Asia and the Pacific	Community Development	48,284	Bank Transfer			FMV
(233)			East Asia and the Pacific	Community Development	52,757	Bank Transfer			FMV
(234)			East Asia and the Pacific	Community Development	53,400	Bank Transfer			FMV
(235)			East Asia and the Pacific	Community Development	56,520	Bank Transfer			FMV
(236)			East Asia and the Pacific	Community Development	62,443	Bank Transfer			FMV
(237)			East Asia and the Pacific	Community Development	648,255	Bank Transfer			FMV
(238)			East Asia and the Pacific	Community Development	728,346	Bank Transfer			FMV
(239)			East Asia and the Pacific	Community Development	746,269	Bank Transfer			FMV
(240)			Middle East and North Africa	Community Development	58,548	Bank Transfer			FMV
(241)			Middle East and North Africa	Community Development	335,090	Bank Transfer			FMV
(242)			East Asia and the Pacific	Community Development	30,329	Bank Transfer			FMV
(243)			Middle East and North Africa	Community Development	80,097	Bank Transfer			FMV
(244)			Middle East and North Africa	Community Development	28,942	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)			Middle East and North Africa	Community Development	45,748	Bank Transfer			FMV
(246)			Middle East and North Africa	Community Development	68,627	Bank Transfer			FMV
(247)			Middle East and North Africa	Community Development	72,700	Bank Transfer			FMV
(248)			Middle East and North Africa	Community Development	127,880	Bank Transfer			FMV
(249)			Sub-Saharan Africa	Community Development	8,688	Bank Transfer			FMV
(250)			Sub-Saharan Africa	Community Development	10,716	Bank Transfer			FMV
(251)			Sub-Saharan Africa	Community Development	105,066	Bank Transfer			FMV
(252)			Sub-Saharan Africa	Community Development	124,562	Bank Transfer			FMV
(253)			Sub-Saharan Africa	Community Development	224,768	Bank Transfer			FMV
(254)			Central America and the Caribbean	Community Development	163,873	Bank Transfer			FMV
(255)			Sub-Saharan Africa	Protection	19,699	Bank Transfer			FMV
(256)			Europe (Including Iceland and	Protection	35,667	Bank Transfer			FMV
(257)			Sub-Saharan Africa	Protection	34,949	Bank Transfer			FMV
(258)			Sub-Saharan Africa	Protection	79,938	Bank Transfer			FMV
(259)			Sub-Saharan Africa	Protection	236,087	Bank Transfer			FMV
(260)			Sub-Saharan Africa	Protection	1,036,777	Bank Transfer			FMV
(261)			Sub-Saharan Africa	Protection	1,057,993	Bank Transfer			FMV
(262)			Middle East and North Africa	Protection	24,670	Bank Transfer			FMV
(263)			Sub-Saharan Africa	Protection	13,667	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)			East Asia and the Pacific	Protection	49,650	Bank Transfer			FMV
(265)			Europe (Including Iceland and	Protection	8,000	Bank Transfer			FMV
(266)			Europe (Including Iceland and	Protection	7,828	Bank Transfer			FMV
(267)			Europe (Including Iceland and	Protection	9,980	Bank Transfer			FMV
(268)			Europe (Including Iceland and	Protection	14,509	Bank Transfer			FMV
(269)			Europe (Including Iceland and	Protection	15,681	Bank Transfer			FMV
(270)			Europe (Including Iceland and	Protection	16,933	Bank Transfer			FMV
(271)			Europe (Including Iceland and	Protection	18,715	Bank Transfer			FMV
(272)			Europe (Including Iceland and	Protection	19,925	Bank Transfer			FMV
(273)			Europe (Including Iceland and	Protection	21,275	Bank Transfer			FMV
(274)			Europe (Including Iceland and	Protection	26,336	Bank Transfer			FMV
(275)			Europe (Including Iceland and	Protection	28,068	Bank Transfer			FMV
(276)			Europe (Including Iceland and	Protection	29,152	Bank Transfer			FMV
(277)			Europe (Including Iceland and	Protection	37,569	Bank Transfer			FMV
(278)			Europe (Including Iceland and	Protection	39,996	Bank Transfer			FMV
(279)			Europe (Including Iceland and	Protection	41,759	Bank Transfer			FMV
(280)			Europe (Including Iceland and	Protection	45,000	Bank Transfer			FMV
(281)			Europe (Including Iceland and	Protection	47,914	Bank Transfer			FMV
(282)			Europe (Including Iceland and	Protection	51,998	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)			Europe (Including Iceland and	Protection	103,162	Bank Transfer			FMV
(284)			Europe (Including Iceland and	Protection	11,743	Bank Transfer			FMV
(285)			Sub-Saharan Africa	Protection	8,078	Bank Transfer			FMV
(286)			Sub-Saharan Africa	Protection	12,254	Bank Transfer			FMV
(287)			Sub-Saharan Africa	Protection	29,627	Bank Transfer			FMV
(288)			Sub-Saharan Africa	Protection	44,731	Bank Transfer			FMV
(289)			Sub-Saharan Africa	Protection	698,784	Bank Transfer			FMV
(290)			Sub-Saharan Africa	Protection	966,969	Bank Transfer			FMV
(291)			Sub-Saharan Africa	Protection	1,519,686	Bank Transfer			FMV
(292)			Sub-Saharan Africa	Protection	46,498	Bank Transfer			FMV
(293)			East Asia and the Pacific	Protection	19,802	Bank Transfer			FMV
(294)			East Asia and the Pacific	Protection	108,293	Bank Transfer			FMV
(295)			East Asia and the Pacific	Protection	1,468,589	Bank Transfer			FMV
(296)			East Asia and the Pacific	Protection	15,421	Bank Transfer			FMV
(297)			East Asia and the Pacific	Protection	15,953	Bank Transfer			FMV
(298)			East Asia and the Pacific	Protection	61,372	Bank Transfer			FMV
(299)			South America	Protection	30,000	Bank Transfer			FMV
(300)			Middle East and North Africa	Protection	52,437	Bank Transfer			FMV
(301)			Middle East and North Africa	Protection	9,387	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)			Middle East and North Africa	Protection	10,385	Bank Transfer			FMV
(303)			Middle East and North Africa	Protection	20,546	Bank Transfer			FMV
(304)			Middle East and North Africa	Protection	20,880	Bank Transfer			FMV
(305)			Middle East and North Africa	Protection	22,057	Bank Transfer			FMV
(306)			Middle East and North Africa	Protection	40,736	Bank Transfer			FMV
(307)			Middle East and North Africa	Protection	83,767	Bank Transfer			FMV
(308)			Sub-Saharan Africa	Protection	28,687	Bank Transfer			FMV
(309)			Sub-Saharan Africa	Protection	46,653	Bank Transfer			FMV
(310)			Sub-Saharan Africa	Protection	105,878	Bank Transfer			FMV
(311)			Sub-Saharan Africa	Water and Sanitation	48,456	Bank Transfer			FMV
(312)			Sub-Saharan Africa	Water and Sanitation	848,230	Bank Transfer			FMV
(313)			Sub-Saharan Africa	Water and Sanitation	8,066	Bank Transfer			FMV
(314)			Sub-Saharan Africa	Water and Sanitation	13,262	Bank Transfer			FMV
(315)			Sub-Saharan Africa	Water and Sanitation	14,325	Bank Transfer			FMV
(316)			Sub-Saharan Africa	Water and Sanitation	27,004	Bank Transfer			FMV
(317)			Sub-Saharan Africa	Water and Sanitation	48,438	Bank Transfer			FMV
(318)			Sub-Saharan Africa	Water and Sanitation	72,016	Bank Transfer			FMV
(319)			Sub-Saharan Africa	Water and Sanitation	95,172	Bank Transfer			FMV
(320)			Sub-Saharan Africa	Water and Sanitation	148,074	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)
(321)			Sub-Saharan Africa	Water and Sanitation	163,728	Bank Transfer			FMV
(322)			Sub-Saharan Africa	Water and Sanitation	168,260	Bank Transfer			FMV
(323)			Sub-Saharan Africa	Water and Sanitation	177,722	Bank Transfer			FMV
(324)			Sub-Saharan Africa	Water and Sanitation	220,048	Bank Transfer			FMV
(325)			Sub-Saharan Africa	Water and Sanitation	227,431	Bank Transfer			FMV
(326)			Sub-Saharan Africa	Water and Sanitation	274,455	Bank Transfer			FMV
(327)			Sub-Saharan Africa	Water and Sanitation	357,290	Bank Transfer			FMV
(328)			Sub-Saharan Africa	Water and Sanitation	360,471	Bank Transfer			FMV
(329)			Sub-Saharan Africa	Water and Sanitation	389,112	Bank Transfer			FMV
(330)			Sub-Saharan Africa	Water and Sanitation	389,139	Bank Transfer			FMV
(331)			Sub-Saharan Africa	Water and Sanitation	390,414	Bank Transfer			FMV
(332)			Sub-Saharan Africa	Water and Sanitation	406,774	Bank Transfer			FMV
(333)			Sub-Saharan Africa	Water and Sanitation	411,489	Bank Transfer			FMV
(334)			Sub-Saharan Africa	Water and Sanitation	479,077	Bank Transfer			FMV
(335)			Sub-Saharan Africa	Water and Sanitation	487,230	Bank Transfer			FMV
(336)			Sub-Saharan Africa	Water and Sanitation	500,106	Bank Transfer			FMV
(337)			Sub-Saharan Africa	Water and Sanitation	518,100	Bank Transfer			FMV
(338)			Sub-Saharan Africa	Water and Sanitation	527,672	Bank Transfer			FMV
(339)			Sub-Saharan Africa	Water and Sanitation	533,889	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)
(340)			Sub-Saharan Africa	Water and Sanitation	566,706	Bank Transfer			FMV
(341)			Sub-Saharan Africa	Water and Sanitation	631,913	Bank Transfer			FMV
(342)			Sub-Saharan Africa	Water and Sanitation	659,149	Bank Transfer			FMV
(343)			Sub-Saharan Africa	Water and Sanitation	693,624	Bank Transfer			FMV
(344)			Sub-Saharan Africa	Water and Sanitation	808,799	Bank Transfer			FMV
(345)			Sub-Saharan Africa	Water and Sanitation	874,323	Bank Transfer			FMV
(346)			Sub-Saharan Africa	Water and Sanitation	1,027,132	Bank Transfer			FMV
(347)			Sub-Saharan Africa	Water and Sanitation	1,679,705	Bank Transfer			FMV
(348)			Sub-Saharan Africa	Protection	22,500	Bank Transfer			FMV
(349)			Sub-Saharan Africa	Protection	100,000	Bank Transfer			FMV
(350)			Europe (Including Iceland and	IRC Affiliate	678,012	Bank Transfer			FMV
(351)			Europe (Including Iceland and	IRC Affiliate	6,120,572	Bank Transfer			FMV
(352)									
(353)									
(354)									
(355)									
(356)									
(357)									
(358)									

**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) OTHER EDUCATION	Sub-Saharan Africa		2,584,023	Bank Transfer			FMV
(20) PROGRAM SUPPLIES & MATERIALS	Sub-Saharan Africa		56,970,501	Bank Transfer	4,034,927	PROGRAM MATERIAL	FMV
(21) SERVICE CONTRACTS	Sub-Saharan Africa		763,376	Bank Transfer			FMV
(22) TRANSPORTATION	Sub-Saharan Africa		460,408	Bank Transfer			FMV
(23) CASH ASSISTANCE	South Asia		1,151,652	Bank Transfer			FMV
(24) HEALTH CARE	South Asia		61,376	Bank Transfer			FMV
(25) OTHER EDUCATION	South Asia		3,078,820	Bank Transfer			FMV
(26) PROGRAM SUPPLIES & MATERIALS	South Asia		4,287,429	Bank Transfer	323,482	PROGRAM MATERIAL	FMV
(27) SERVICE CONTRACTS	South Asia		371,289	Bank Transfer			FMV
(28) CASH ASSISTANCE	South America		234,199	Bank Transfer			FMV
(29) HEALTH CARE	South America		4,261	Bank Transfer			FMV
(30) OTHER ASSISTANCE	South America		51,022	Bank Transfer			FMV
(31) OTHER EDUCATION	South America		5,839	Bank Transfer			FMV
(32) PROGRAM SUPPLIES & MATERIALS	South America		31,686	Bank Transfer			FMV
(33)							
(34)							
(35)							
(36)							
(37)							

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, 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](http://www.irs.gov/Form990) for the latest instructions.

OMB No. 1545-0047

**2017**

**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, 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 KEY ACQUISITION PARTNERS 2525 Riva Rd, Suite 145 Annapolis MD 214	Digital Fundraising		X	0	1,853,308	0
2 THE HARRINGTON AGENCY 212 S.Chester Rd. Swarthmore PA 19081	Direct mail Consultant		X	0	433,615	0
3 GOTT ADVERTISING LLC 191 Skyview Way San Francisco CA 94131	Digital Fundraising		X	0	166,428	0
4 THINK DIGITAL SOLUTIONS LTD 22-26 Celtic Court Ballmoor Buckingham M	Digital Fundraising		X	0	77,038	0
5 PUBLIC INTEREST COMMUNICATION 7700 Leesburg Pike Falls Church VA 22041	Professional Fundraising		X	0	26,740	0
6 BLUE STATE DIGITAL 101 6th Ave New York NY 10013	Digital Fundraising		X	0	292,258	0
7 ANNE LEWIS STRATEGIES LLC 650 Massachusetts Ave NW Washington D	Professional Fundraising		X	0	74,888	0
8				0	0	0
9				0	0	0
10				0	0	0
<b>Total</b>				0	2,924,275	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)	GenR (event type)	2 (total number)	(add col. (a) through col. (c))		
Revenue	1	Gross receipts . . . . .	9,370,658	136,065	302,281	9,809,004	
	2	Less: Contributions . . . . .	9,213,338	80,367	261,003	9,554,708	
	3	Gross income (line 1 minus line 2) . . . . .	157,320	55,698	41,278	254,296	
Direct Expenses	4	Cash prizes . . . . .			0	0	
	5	Noncash prizes . . . . .			0	0	
	6	Rent/facility costs . . . . .	498,633	0	736	499,369	
	7	Food and beverages . . . . .			0	0	
	8	Entertainment . . . . .			0	0	
	9	Other direct expenses . . . . .	132,422	0	88,335	220,757	
	10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶					( 720,126)
	11	Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶					-465,830

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

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

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

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

\_\_\_\_\_

\_\_\_\_\_

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

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

\_\_\_\_\_

\_\_\_\_\_





**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2017**

**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](http://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) API Chaya P.O. Box 14047 Seattle, WA 98114	91-1674016	501 (C) (3)	50,591	0			Anti-Trafficking
(2) YouthCare 2500 NE 54th Street Seattle, WA 9810	91-0917079	501 (C) (3)	22,707	0			Anti-Trafficking
(3) World Relief 102 Sixth Avenue , NE, Suit A Glen Bu	07-7078194	501 (C) (3)	28,000	0			Refugee Programs
(4) WEAVE 2020 Hurley Way Sacramento, CA 958	94-2493158	501 (C) (3)	154,645	0			Anti-Trafficking
(5) Alliance for African Assistance 5952 El Cajon Blvd. San Diego, CA 92	93-1008369	501 (C) (3)	22,600	0			Refugee Programs
(6) California Rural Legal Assistance II 1430 Franklin Street, Suite 103 Oaklan	95-2428657	501 (C) (3)	46,750	0			Anti-Trafficking
(7) Catholic Charities Of Northeast Ka 9720 West 87th Street Overland Park,	48-1181305	501 (C) (3)	311,480	0			Refugee Programs
(8) Catholic Charities Of The Texas Pa 2801 Duniven Circle Amarillo, TX 7910	75-0818147	501 (C) (3)	217,430	0			Refugee Programs
(9) Catholic Charities USA 1531 James M Wood Blvd. Los Angele	95-1690973	501 (C) (3)	24,000	0			Refugee Programs
(10) Catholic Charities Diocese Of Cam 1845 Haddon Avenue Camden, NJ 08	22-3759994	501 (C) (3)	48,714	0			Refugee Programs
(11) Church World Services Inc. 475 Riverside Dr. STE 700 New York,	13-4080201	501 (C) (3)	55,189	0			Refugee Programs
(12) Diocesan Migrant & Refugee Servi 2400-A E Yandell El Paso, TX 79903	74-2723627	501 (C) (3)	68,440	0			Refugee Programs

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 34

**3** Enter total number of other organizations listed in the line 1 table ▶ 1

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

Schedule I (Form 990) (2017)

**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 Community Integration	0	7,286	0	FMV	
2 Economic Empowerment	0	2,066,520	0	FMV	
3 Education Program	0	27,962	0	FMV	
4 Health programming	0	867,718	220,806	FMV	Health Supplies
5 Matching Grant Programs	0	3,395,213	1,667,946	FMV	Clothing , Household items
6 immigration Service	0	83,922		FMV	
7 Resettlement Programs	0	8,607,866	220,266		Clothing , Household items

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

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

Part III Line Col B Number of recipients is noted in total for the year. During 2018, in the United States, the IRC helped resettle some 5,382 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) East African Community Of O. C 2323 W Lincoln Ave Anaheim, CA 92801	33-0923085	501 (C) (3)	6,000	0			Refugee Programs
(14) Interfaith Refugee And Immigration Servi 840 Echo Park Ave Los Angeles, CA 90026	95-1684078	501 (C) (3)	6,000	0			Refugee Programs
(15) International Institute Of Los Angeles 3845 Selig Place Los Angeles, CA 90031	95-1641446	501 (C) (3)	16,000	0			Refugee Programs
(16) Jewish Family Service Of Los Angeles 3580 Wilshire Blvd Ste 700 Los Angeles, CA 9	95-1691013	501 (C) (3)	16,000	0			Refugee Programs
(17) National Partnership For New Americans 1818 S PAULINA ST. Chicago, IL 60608	45-3419142	501 (C) (3)	7,500	0			Refugee Programs
(18) Newark Community Health Center 741 Broadway Newark, NJ 07104	22-2747589	501 (C) (3)	50,633	0			Refugee Programs
(19) North Hudson Community Action Corpora 324 Palisade Ave., Jersey City, NJ 07307	22-1818699	501 (C) (3)	22,719	0			Refugee Programs
(20) Opening Doors Inc. 1111 Howe Avenue, Suite 125 Sacramento, C	37-1417129	501 (C) (3)	16,000	0			Refugee Programs
(21) Refugee Services Of Texas Inc. 9241 Lyndon B. Johnson Freeway Ste. 210 D	75-1618251	501 (C) (3)	374,018	0			Refugee Programs
(22) California Rural Legal Assistance Founda 2210 K Street , Suite 201 Sacramento, CA 955	94-2800442	501 (C) (3)	61,000	0			Anti-Trafficking
(23) SAINT FRANCIS COMMUNITY SERVIC 509 East Elm Street. Salina, KS 67401	48-0543809	501 (C) (3)	32,905	0			Refugee Programs
(24) Jewish Vocational Service of MetroWest, 111 Prospect Street East Orange, NJ 07017	22-14872229	501 (C) (3)	36,150	0			Refugee Programs
(25) Washington Elementary School District 4650 West Sweetwater Glendale, AZ 85304	86-6000484	Gov't Arizona	41,175	0			Refugee Programs
(26) Association for Supportive Child Care 3910 South Rulral Road, Suite E Tempe, AZ 8	86-0332913	501 (C) (3)	36,768	0			Refugee Programs
(27) Glendale Union High School Dis 650 N 43rd Ave Glendale, AZ 85301	74-2490334	501 (C) (9)	21,210	0			Refugee Programs
(28) Glendale Elementary School District 7301 N, 58th Avenue Glendale, AZ 85301	86-6000498	Gov't Arizona	39,568	0			Refugee Programs
(29) The Domestic and Foreign Missionary Sc 815 2nd Avenue New York, NY 10017	13-5562208	501 (C) (3)	17,427	0			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) Phoenix Dream Center 3210 NW Grand Avenue Phoenix, AZ 85017	86-1001113	501 (C) (3)	109,294	0			Anti-Trafficking
(31) Streetlightusa PO Box 6178 Peoria, AZ 85385	26-4359672	501 (C) (3)	62,244	0			Anti-Trafficking
(32) Project H.O.P.E., Inc. 519-525 West Street Camden, NJ 08103	20-4133180	501 (C) (3)	6,402	0			Refugee Programs
(33) Alhambra Elementary School District 6615 North 39th Aenue Phoenix, AZ 85019	86-6000510	501 (C) (3)	40,000	0			Refugee Programs
(34) YMCA of Greater Houston 2600 North Loop West, Suite 300 Houston, TX	74-1109737	501 (C) (3)	20,000	0			Refugee Programs
(35) Lutheran Immigration and Refugee Servi 700 Light Street Baltimore, MD 21230	13-2574854	501 (C) (3)	75,000	0			Refugee Programs
(36) .....							
(37) .....							
(38) .....							
(39) .....							
(40) .....							
(41) .....							
(42) .....							
(43) .....							
(44) .....							
(45) .....							
(46) .....							

# 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 Youth Program	0	105,204	0	FMV	
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
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21					
22					
23					
24					
25					
26					

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2017**

- ▶ 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](http://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**

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

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that 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 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)	814,384	0	46,825	27,165	23,422	911,796	0
	(ii)	0	0	0	0	0	0	0
2 David Johnson (until September 2017) CFO, SVP Finance, Treasurer	(i)	330,136	0	0	0	16,868	347,004	0
	(ii)	0	0	0	0	0	0	0
3 Ricardo Castro General Counsel, Secretary	(i)	317,285	0	0	27,058	15,708	360,051	0
	(ii)	0	0	0	0	0	0	0
4 Ciaran Donnelly SVP International Programs	(i)	316,890	0	0	29,698	17,008	363,596	0
	(ii)	0	0	0	0	0	0	0
5 Jennifer Sime SVP US Programs	(i)	359,002	0	0	29,767	9,059	397,828	0
	(ii)	0	0	0	0	0	0	0
6 Amanda Seller Senior Vice President, Revenue	(i)	394,248	0	0	27,090	9,105	430,443	0
	(ii)	0	0	0	0	0	0	0
7 Madlin Sadler Senior Vice President, Operations & Support	(i)	345,237	0	0	17,975	22,924	386,136	0
	(ii)	0	0	0	0	0	0	0
8 Jodi Nelson (until October 2018) Senior Vice President Policy & Practice	(i)	341,719	0	0	26,655	23,049	391,423	0
	(ii)	0	0	0	0	0	0	0
9 Madeleine Fackler Chief Information Officer	(i)	325,932	0	0	25,395	23,021	374,348	0
	(ii)	0	0	0	0	0	0	0
10 Brian Johnson Chief HR Officer	(i)	321,094	0	0	26,469	23,013	370,576	0
	(ii)	0	0	0	0	0	0	0
11 Mania Boyder (until June 2018) Vice President Development	(i)	316,215	0	0	26,617	22,999	365,831	0
	(ii)	0	0	0	0	0	0	0
12 Kurt Tjossem Regional Vice President	(i)	282,976	0	0	18,383	8,366	309,725	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 4b David Miliband participates in a supplemental non-qualified retirement plan. During the reporting period, the 457f contribution was \$46,825.00. This amount is reported on Schedule J Part II, Column B (iii)



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2017**

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

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

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .	X		2,650,324	FMV, RECEIPTS
6 Cars and other vehicles . . . . .	X	21	115,104	FMV
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .				
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .	X		1,912,181	FMV, Pro forma invoices
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( Fuel and Transport ) . . . . .	X		818,962	FMV, Pro forma invoices
26 Other ▶ ( Emergency Progra ) . . . . .	X		388,186	FMV, Pro forma invoices
27 Other ▶ ( Education Material ) . . . . .	X		215,020	FMV, Pro forma invoices
28 Other ▶ ( Water and Sanitatio ) . . . . .	X		246,584	FMV, Pro forma invoices

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . .	<b>29</b>			1
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		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? . . . . .	<b>30a</b>		X
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? . . . . .	<b>31</b>	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .	<b>32a</b>		X
b If "Yes," describe in Part II.			
33 If the organization 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 5,20-25-28 The number of contributions is difficult to confirm as the same donor will make various contributions throughout the project in tranches as needed to support their grant funded program implementation and the individual contributions are received at the field level in our various country offices. The detailed documentation is held at the different office locations throughout the 34+ countries we work in plus our US program offices. The number of individual contributions of goods would easily number in the 100s of thousands of items. HQ does not track to that level of detail but has all of the supporting documentation and invoices utilized for valuation and recording in the US and country locations.

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

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 990-EZ.

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

OMB No. 1545-0047

**2017**

**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: 83,197,975, Grants and allocations:

19,788,984, Revenue: 3,796,154 Through a network of 25 cities across the country, the IRCs US

Programs (USP) Department ensures that refugees and other vulnerable immigrants have the

resources and tools they need to build new lives in America. USP serves 35,000 individuals

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

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

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

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

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

services for asylees, survivors of torture, human trafficking, and other forms of trauma. The

IRC provides comprehensive legal services to help refugees and other immigrants become

permanent residents and US citizens, and supports a variety of programs designed to help new

arrivals feel welcome and integrate into their adopted communities.

Form 990, Part III, Line 4d: Program Service Expenses: 59,278,988, Grants and allocations:

6,721,757, Revenue: 0 The IRC employed expert staff and advisors in the following sectors:

Economic Recovery and Development; Health; Governance; Education; Violence Prevention and

Response; Gender Equality; Research, Evaluation, and Learning. The IRC maintained units that

provided logistical and administrative support to country programs in the following regions:

West Africa, East Africa, Great Lakes, Asia, Europe and North Africa, the Middle East. IRC

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

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

already on the ground.

Form 990, Part III, Line 4d: Program Service Expenses: 4,056,675, Grants and allocations:

1,129,575, Revenue: 0 In FY18, the IRC worked across Europe to assist refugees and asylum

seekers in camps and urban areas. In Germany, the IRC supported the government and local

organizations to implement migrant integration programs. In addition, the IRCs Emergency

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

Schedule O (Form 990 or 990-EZ) (2017)

Name of the organization INTERNATIONAL RESCUE COMMITTEE, INC	Employer identification number 13-5660870
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Response team, along with lending support to IRC teams across the globe, operated in El Salvador and Columbia to provide emergency assistance to vulnerable migrant and asylum seekers fleeing economic instability and violence.

Form 990, Part I, Line 5: IRC's global workforce is approximately 13,000 employees. The 2,147 only represents staff on the NY Headquarters payroll covering HQ, US office locations and international expatriate employees. The remaining approximate 11,000 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 13,000 employees. The 2,147 only represents staff on the NY Headquarters payroll covering HQ, US office locations and international expatriate employees. The remaining approximate 11,000 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 and reviewed by an external paid preparer. The legal team is consulted for relevant disclosures and the 990 is reviewed with the CFO. The final form 990 is distributed electronically to all members of the Board of Directors prior to filing electronically.

Form 990, Part VI, Section B, Line 12c: Per IRCs Conflict of Interest Policies, anyone who is in a position to influence IRC policies and actions has a duty to disclose any potential conflict to IRCs General Counsel. IRCs Audit Committee will then review the facts, including whether IRC can obtain an alternative transaction that would not pose a conflict. The Audit Committee will decide whether the transaction is in IRCs best interest and whether it is fair and reasonable, and shall accordingly decide whether to allow the transaction to proceed.

Pursuant to IRCs Code of Conduct and Conflict of Interest Policies, all other staff have a duty to report any potential conflict to their supervisor or to IRCs Ethics and Compliance Unit. Senior management will review the facts, including whether an alternative transaction would be possible that would not pose a conflict of interest. Senior management will decide

Name of the organization INTERNATIONAL RESCUE COMMITTEE, INC	Employer identification number 13-5660870
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whether the transaction is permissible and whether mitigating controls should be implemented.

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

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

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

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

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

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

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

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

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

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

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

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 and form 990

are available to the public on its website, [www.rescue.org](http://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 (\$195,497), exchange rate loss

(\$1,634,868 ) and restatement of net assets to remove wholly-owned subsidiaries \$5,842,070.

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2017**

**Open to Public  
Inspection**

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

Department of the Treasury  
Internal Revenue Service

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 RainKour 64 Athens 11523, Greece	Humanitarian Aid	Greece			IRC	X	
(2) IRC Deutschland gGmbH Wallstrasse 15A Berlin 10179, Germany	Humanitarian Aid	Germany			IRC	X	
(3) -----							
(4) -----							
(5) -----							
(6) -----							
(7) -----							

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

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

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

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

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

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

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

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

(a) Name of related organization	(b) Transaction type (a–s)	(c) Amount involved	(d) Method of determining amount involved
(1) IRC Hellas	r	11,998,530	Cash
(2) IRC Deutschland gGmbH	r	2,342,111	Cash
(3) IRC Deutschland gGmbH	s	529,854	Cash
(4)			
(5)			
(6)			



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

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

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



**Item M (990) - State of Legal Domicile**

State NY	Foreign Country
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**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	Central African Republic
3	Cameroon
4	Chad
5	Congo (Kinshasa)
6	Ethiopia
7	Iraq
8	Pakistan
9	Tanzania
10	Thailand
11	Kenya
12	Uganda
13	Zimbabwe
14	Niger
15	Nigeria
16	Burundi
17	Burma
18	Cote D'Ivoire (Ivory Coast)
19	Greece
20	Sierra Leone
21	South Sudan
22	Yemen (Aden)
23	Jordan
24	Lebanon
25	Liberia
26	Mali
27	Switzerland
28	Malaysia
29	Serbia
30	Tunisia
31	Bangladesh
32	Germany
33	Somalia
34	El Salvador
35	Colombia
36	Turkey
37	Rwanda
38	
39	
40	
41	

**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		