Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2014 calendar year, or tax year beginning 10/1/2014 9/30/2015 , and ending

В	Check if a	applicable:	C Name of organization	NTERNATION	AL RESCUE CO	OMMITTEE	, INC		D Emplo	yer ider	ntification	number	
	Address o	change	Doing business as										
	Name cha	ange	Number and street (or P.O. b		vered to street addre	ess) Room	/suite		13-56608				
_			122 EAST 42ND STREE	I					E Teleph	one num	nber		
	Initial retu	ırn	City or town NEW YORK		State NY	ZIP co	ode 181289	,	(212)55	1-3000)		
	Final return	/terminated	Foreign country name	Foreign pro	vince/state/county		n postal						
	Amended	l return	· ·	, oroign pro	Timos/ Glate/Obanky	rororg	n pootai	0000	G Gross	receipts	\$	716	,313,258
=			F Name and address of princip	al officer:						-			s X No
	Applicatio	n pending			OCTREET NEW	VVODK N	V 101	NO. 03	nis a group ret				=
			David Miliband c/o IRC 1				7					X Ye	s No
	Tax-exem		X 501(c)(3) 501(c)	() ◄ (ir	sert no.) 494	7(a)(1) or	527	11.	'No," attach	a list. (se	ee instruction	ons)	
J \	Vebsite	e: Nw	w.rescue.org	<u></u>		****		H(c) Gr	oup exempti	on numb	oer ▶		
K	orm of or	rganization:	X Corporation Trust	t Association	o Other ▶		L Yea	r of forma	ation: 190	33	M State of	legal domic	le: NY
	art I	Su	mmary										
	1		escribe the organization's	mission or mo	st significant ac	tivities:	The	IRC he	ps people	e whos	se lives a	ınd	
ည			ds are shattered by confli										
nar		their future.											
Activities & Governance	2	Check to	his box ▶ if the orga	nization discor	ntinued its opera	tions or dis	posed	of more	e than 25	% of its	s net ass	sets.	
တိ	3		of voting members of the				•						30
త	4		of independent voting me		the transfer security of the second second second second					4	_		29
ties	5		mber of individuals employ	and the second s	and the same of th	· · · · · · · · · · · · · · · · · · ·				5			1,984
ξį	6		mber of volunteers (estimate							6			4,495
Ac	7a		related business revenue							7a	3		0
	b		elated business taxable in		and the control of th					7b)		0
									Prior Year			Current Ye	ear
<u>e</u>	8		itions and grants (Part VII						556,9	933,82	1	682	,277,233
enn	9		n service revenue (Part VI	- 175. Y						47,55			376
Revenue	10		ent income (Part VIII, colu						2,9	935,53	0		,928,023
Œ	11		venue (Part VIII, column (104,70		2	,715,288
	12		enue—add lines 8 through 1						562,0	021,60	7	688	,920,920
	13		and similar amounts paid (10 5000				240,2	222,91	5	298	,523,443
	14		paid to or for members (F								0		0
es	15		other compensation, emplo		200 MARI 1	800	200			254,07		256	,251,979
ens	16a		onal fundraising fees (Par		15.7					488,27	4		443,563
Expenses	b		ndraising expenses (Part I			16,35					a desart		malai e
ш	17		kpenses (Part IX, column (397,96			,720,929
	18		penses. Add lines 13–17 (63,22			,939,914
- 0	19	Revenu	e less expenses. Subtract	line 18 from III	ne 12			Daning		358,38			,981,006
Net Assets or Fund Balances	20	Total ac	sets (Part X, line 16)					Бедіпі	ing of Curr	587,76		End of Ye	,142,599
Ass	21		oilities (Part X, line 26)				•			531,22			,369,057
Net	22		ets or fund balances. Subt							056,54		100	,773,542
	rt II		nature Block				•		100,0	300,01	<u> </u>	101	,110,012
			y, I declare that I have examined t	his return, includin	g accompanying sch	edules and sta	tements	and to th	ne best of my	knowle	dge		
and	belief, it is	s true, corre	ct, and complete. Declaration of p	oreparer (other than	n officer) is based on	all information	of which	n prepare	r has any kn	owledge).		
Sig	ın		De - Kca	<u>C</u>							5/12/	2016	
He			Signature of officer						Dat	е			
			David Johnson				CFO						
			Type or print name and title										
D -	: ₄ 1	Prin	t/Type preparer's name	Pro	eparer's signature			Dat	e	Check	if	PTIN	
Pa		.									mployed		
	eparer		's name ▶						Firm's EIN	>			
US	e Only		's address ►						Phone no.				
Ma	v tha ID		s this return with the prepare	arer chown ch	ove2 (see instru	ctions)			i none no.			Vac	X No
ivid	y trie in	vo discus	s this return with the preparation	arer shown ab	over (see mstru	clions)						Yes	

Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III. Briefly describe the organization's mission: The IRC helps people whose lives and livelihoods are shattered by conflict and disaster to survive, recover and gain control of their future. The IRC leads the humanitarian field by implementing high impact, cost effective programs for the people affected by crises and by using learning and experience to shape policy and practices. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program	Form 9	990 (2014)	INTERNATIONAL RESCUE COMMITTEE, INC	13-5660870			
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Other program services. (Describe in Schedule O.)

115,914,892 including grants of \$

(Expenses \$

4e

Total program service expenses

115,914,892)

2,922,557) (Revenue \$

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)? If "Yes," complete Schedule A	1	_	
2	,	2	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?		^	
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</i> "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Χ	
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,</i>			
	Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	٦		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Χ
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</i> "Yes," <i>complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		Χ
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt			
	negotiation services? If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	Ť		
	endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Х	
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	Па	^	
~	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	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? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	Х	
	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)? If "Yes," complete Schedule D, Part X	11f	Χ	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Χ	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		¥
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Χ	
b				
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Χ	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15	Χ	
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? If "Yes," complete Schedule F, Parts III and IV.	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services		^	
-	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17	Χ	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Χ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		v
202	If "Yes," complete Schedule G, Part III	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		^

Page 4 Part IV **Checklist of Required Schedules** (continued) Yes No 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 22 23 Did the organization answer "Yes" to Part VII. Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated 23 **24a** Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c **d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit 25a **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 25b Χ 26 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 26 Χ 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 27 Χ Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Χ A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b c 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? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 29 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 Χ Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes." complete Schedule N. 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 32 Χ 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Χ 33 Was the organization related to any tax-exempt or taxable entity? If "Yes." complete Schedule R. Part II. 34 Χ 35a 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)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related Х 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and Χ

37

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

ı aı	Check if Schedule O contains a response or note to any line in this Part V			Χ
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Χ	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1,984			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	_		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4.0	V	
b	account)?	4a	Х	
b	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
_	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		\ \
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g h	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?.	7g 7h		Х
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/11		Ĥ
•	sponsoring organization have excess business holdings at any time during the year?	8		Х
9	Sponsoring organizations maintaining donor advised funds.	Ů		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		Х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	40		
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
ıs p	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.	ısa		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
~	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

Part VI

Sect	ion A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 30						
	If there are material differences in voting rights among members of the governing body, or						
	if the governing body delegated broad authority to an executive committee or similar						
	committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent 1b 29						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with						
	any other officer, director, trustee, or key employee?	2		Χ			
3	Did the organization delegate control over management duties customarily performed by or under the direct						
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Χ			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х			
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Χ			
6	Did the organization have members or stockholders?	6		Χ			
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint						
	one or more members of the governing body?	7a		Χ			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,						
	stockholders, or persons other than the governing body?	7b		Χ			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during						
	the year by the following:						
а	The governing body?	8a	Χ				
b	Each committee with authority to act on behalf of the governing body?	8b	Χ				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached						
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Χ			
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue (Code.					
			Yes	No			
	Did the organization have local chapters, branches, or affiliates?	10a	Х				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b	Х				
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?						
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?.						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	4.0					
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	X				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If</i> "Yes,"	12b	Χ				
С	describe in Schedule O how this was done	120	~				
13	Did the organization have a written whistleblower policy?	12c 13	X				
14	Did the organization have a written document retention and destruction policy?	14	X				
15	Did the process for determining compensation of the following persons include a review and approval by	14	^				
13	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
а	The organization's CEO, Executive Director, or top management official.	15a	Χ				
a b	Other officers or key employees of the organization	15b	X	\vdash			
J	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	.00	^				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement						
. J u	with a taxable entity during the year?	16a		Х			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	. 54					
~	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard						
	the organization's exempt status with respect to such arrangements?	16b					
Sect	ion C. Disclosure						
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed See Attached Statement						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3	s only	/)				
	available for public inspection. Indicate how you made these available. Check all that apply.		,				
	X Own website Another's website X Upon request Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest poli	cy, an	d				
	financial statements available to the public during the tax year.						
20	State the name, address, and telephone number of the person who possesses the organization's books and records:	•					
	DANUSIA DZIERZBINSKI c/o IRC (212) 551-2914						
	122 FAST 42ND STREET NEW YORK NY 10168						

1	3-	5	R	A	n	R	7	n		
- 1	J-	\cdot	u	u	u	Ю	•	u		

<u>Page</u> **7**

Form 990 (2014)

Director/Trustee

Part VII

INTERNATIONAL RESCUE COMMITTEE, INC

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. Position (A) (B) (do not check more than one (D) (E) Name and Title Average box, unless person is both an Reportable Reportable Estimated officer and a director/trustee) compensation compensation amount of hours per

nouis per					mecu	Ji/li uSt	T T from		compensation	aniount of
	week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	trom the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Cliff Asness	1.00									
Director/Trustee	0.00	Χ								
(2) Mary Boies	1.00									
Director/Trustee	0.00	Χ								
(3) Andrew Brimmer	1.00									
Director/Trustee	0.00	Χ								
(4) Glenda Burkhart	1.00									
Director/Trustee	0.00	Χ								
(5) Florence Davis	1.00									
Director/Trustee	0.00	Χ								
(6) Susan Dentzer	1.00									
Director/Trustee	0.00	Χ								
(7) Katherine Farley	1.00									
Director/Trustee	0.00	Χ								
(8) David Levine	1.00									
Director/Trustee	0.00	Χ								
(9) Francois-Xavier de Mallmann	1.00									
Director/Trustee	0.00	Χ								
(10) Eduardo Mestre	1.00									
Director/Trustee	0.00	Χ								
(11) Anjali Pant	1.00									
Director/Trustee	0.00	Χ								
(12) Thomas Nides	1.00									
Director/Trustee	0.00	Χ								
(13) Michael J. O'Neill	1.00									
Director/Trustee	0.00	Х								
(14) Omar Saeed	1.00									

Form **990** (2014)

Form 990 (2014) INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII Position (do not check more than one (D) (A) (B) (E) Name and title Average Reportable Reportable Estimated box, unless person is both an hours per officer and a director/trustee) compensation compensation amount of week (list any from related other from Former Highest compensated employee Institutional trustee Individual trustee Key employee organizations hours for the compensation organization (W-2/1099-MISC) related from the organizations (W-2/1099-MISC) organization below dotted and related organizations (15) Kathleen Pike 1.00 Director/Trustee 0.00 Χ (16) Gordon Smtih 1.00 0.00 Director/Trustee (17) Pamela Saunders- Albin 1.00 Director/Trustee 0.00 (18) Gillian Martin Sorensen 1.00 Director/Trustee 0.00 (19) Sally Susman 1.00 Director/Trustee 0.00 (20) Mona Sutphen 1.00 Director/Trustee 0.00 1.00 (21) Ercument Tokat 0.00 Director/Trustee (22) Maureen White 1.00 Director/Trustee 0.00 Х 1.00 (23) Nina Whitman 0.00 Director/Trustee Х (24) Rajiv Shah 1.00 Director/Trustee 0.00 (25) Sir John Holmes 1.00 Director/Trustee 0 0 0 0 Total from continuation sheets to Part VII, Section A. 3,854,955 Total (add lines 1b and 1c). 3.854.955 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 128 Voc No

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

Section B. Independent Contractors

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.

Na	(A) ame and business address	(B) Description of services	(C) Compensation
APPIRIO INC	760 Market Street, 11th floor San Francisco, CA 941	Consulting	716,834
KPMG LLP	345 PARK AVENUE NEW YORK, NY 10154	Financial Audit Services	668,200
KEY AQUSITION PARTNERS	2525 Riva Road, Suite 145 Annapolis, MD 21401	Consulting	503,799
PRICE WATERHOUE COOPERS	300 Madison Ave. New York, NY 10017	Consulting	473,363
GOOGLE INC	1600 Amphitheatre pkwy Mountain View, CA 94043	Advertising Services	448,827
2 Total number of independent			

more than \$100,000 of compensation from the organization

Part VIII Statement of Revenue

		Check if Schedule O contains	a response or r	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
s s	1a	Federated campaigns	1a	303,966				
unt	b	Membership dues	1b	0				
, G	С	Fundraising events	1c	4,524,232				
ar /	d	Related organizations	1d	0				
imil	е	Government grants (contributions	s) 1e	453,916,856				
rtior er S	f	All other contributions, gifts, gran	ts, and					
di di		similar amounts not included abo	ve 1f	223,532,179				
Contributions, Giffs, Grants and Other Similar Amounts	g	Noncash contributions included in li	nes 1a-1f: \$	13,250,669				
OB	h	Total. Add lines 1a-1f			682,277,233			
e				Business Code				
ven	2a	Program Income		900099	376			
Se.	b				0			
vice	С				0			
Ser	d				0			
am	е				0			
Program Service Revenue	f	All other program service revenue			0			
ā	g	Total. Add lines 2a–2f			376			
	3	Investment income (including div						
		other similar amounts)			1,796,887			
	4	Income from investment of tax-ex			0			
	5	Royalties	(i) Real	▶	0			
	٥-	Curana mainta	* /	` '				
	6a	Gross rents	541,298					
	b	Less: rental expenses	786,977 -245,679					
	C C	Rental income or (loss) Net rental income or (loss)			-245,679			
	d 73	Gross amount from sales of	(i) Securities	(ii) Other	-245,079			
	<i>i</i> a	assets other than inventory	27,873,048					
	b	Less: cost or other basis	21,013,040	109,200				
		and sales expenses	25,881,197	0				
	С	Gain or (loss)	1,991,851					
	d	Net gain or (loss)			2,131,136			
<u>ə</u>	8a	Gross income from fundraising			_, ,			
Other Revenue		events (not including \$	1.654.532					
ě		of contributions reported on line						
<u>ت</u> ا		See Part IV, line 18		184,153				
the	b	Less: direct expenses		724,164				
0	С	Net income or (loss) from fundrai	sing events	•	-540,011			
	9a	Gross income from gaming activi	ties.					
		See Part IV, line 19	а	0				
	b	Less: direct expenses	b	0				
	С	Net income or (loss) from gaming	activities	. <u></u>	0			
	10a	3 /						
		returns and allowances	a	0				
	b	Less: cost of goods sold	b	0				
	С	Net income or (loss) from sales of	f inventory		0			
ļ		Miscellaneous Revenue		Business Code				
				900099	1,451,183	1,451,183		
	b	Immigration processing Fees		900099	1,287,059	1,287,059		
		Miscellaneous Revenue		900099	762,736	762,736		
	d	All other revenue			0 500 070			
	e	Total. Add lines 11a–11d			3,500,978	0.500.050		
	12	Total revenue. See instructions.	<u></u>	🟲	688,920,920	3,500,978	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3)	and 501(c)(4)	organizations must com	plete all columns.	All other organ	nizations must com	plete column (A).

	Check if Schedule O contains a response or note t	o any line in this Pa	art IX		
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		·	9	
	domestic governments. See Part IV, line 21	1,140,546	1,140,546		
2	Grants and other assistance to domestic	, -,	, -,		
	individuals. See Part IV, line 22	24,808,640	24,808,640		
3	Grants and other assistance to foreign	= 1,000,010	= 1,000,010		
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	272,574,257	272,574,257		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
•	trustees, and key employees	2,105,183	325,344	1,467,418	312,421
6	Compensation not included above, to disqualified	2,100,100	020,011	1,107,110	012,121
•	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	224,937,586	202,691,635	15,904,804	6,341,147
8	Pension plan accruals and contributions (include	224,937,300	202,031,000	10,904,004	0,041,147
0	section 401(k) and 403(b) employer contributions)	5,287,047	4 161 046	771,817	25/ 10/
0	Other employee benefits	18,193,439	4,161,046 15,033,797	2,217,229	354,184 942,413
9	· ·				,
10	Payroll taxes	5,728,724	4,429,832	908,457	390,435
11	Fees for services (non-employees):	0		0	0
a	Management	0	0	0	0
b	Legal	676,181	608,162	63,649	4,370
C	Accounting	885,694	291,043	593,513	1,138
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	443,563			443,563
f	Investment management fees	106,901	0	106,901	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	11,710,124	7,714,452	3,210,718	784,954
12	Advertising and promotion	4,083,515	859,003	586,342	2,638,170
13	Office expenses	21,198,165	18,216,750	767,035	2,214,380
14	Information technology	5,841,554	4,627,757	1,100,455	113,342
15	Royalties	0	0	0	0
16	Occupancy	21,609,665	18,595,590	2,193,052	821,023
17	Travel	39,358,819	38,380,260	692,744	285,815
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	3,143,748	2,897,913	126,850	118,985
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	1,068,378	475,166	474,744	118,468
23	Insurance	3,722,446	3,168,891	386,751	166,804
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.)				
а	Recruitment	1,219,769	744,721	439,765	35,283
b	Exchange Loss (Gain)	1,263,004	1,263,004	0	0
С		0	0	0	0
d		0	0	0	0
e	All other expenses	2,832,966	2,378,520	185,189	269,257
25	Total functional expenses. Add lines 1 through 24e	673,939,914	625,386,329	32,197,433	16,356,152
26	Joint costs. Complete this line only if the		,,.	. ,,.00	.,,.
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				
	10110Willing 001 00 2 (100 000-120)				

13-5660870

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line	e in this Part X .			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		50,432,685	1	69,454,140
	2	Savings and temporary cash investments		2,181,289	2	379,987
	3	Pledges and grants receivable, net		45,753,434	3	57,483,471
	4	Accounts receivable, net		0	4	0
	5	Loans and other receivables from current and former officers, or	directors,			
		trustees, key employees, and highest compensated employees				
		Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined un	der section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing en	nployers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' benefic	iary			
Assets		organizations (see instructions). Complete Part II of Schedule L			6	
SS	7	Notes and loans receivable, net		463,100	7	619,954
⋖	8	Inventories for sale or use		11,473,416	8	12,902,863
	9	Prepaid expenses and deferred charges		3,715,101	9	3,759,906
	10a	Land, buildings, and equipment: cost or				
		other basis. Complete Part VI of Schedule D 10a	14,057,412			
	b	Less: accumulated depreciation 10b	8,810,419	4,955,449	10c	5,246,993
	11	Investments—publicly traded securities		75,139,625	11	67,813,098
	12	Investments—other securities. See Part IV, line 11		47,222,062	12	47,607,703
	13	Investments—program-related. See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets. See Part IV, line 11		4,251,599	15	4,874,484
	16	Total assets. Add lines 1 through 15 (must equal line 34)		245,587,760	16	270,142,599
	17	Accounts payable and accrued expenses		27,550,330	17	39,702,393
	18	Grants payable	46,112,648	18	54,424,214	
	19	Deferred revenue		2,959,407	19	1,593,454
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Sche	dule D...	353,586	21	470,145
es	22	Loans and other payables to current and former officers, direct	ors,			
Liabilities		trustees, key employees, highest compensated employees, an	d			
abi		disqualified persons. Complete Part II of Schedule L			22	
Ë	23	Secured mortgages and notes payable to unrelated third partie	s [0	23	0
	24	Unsecured notes and loans payable to unrelated third parties .	[0	24	0
	25	Other liabilities (including federal income tax, payables to relate	ed third			
		parties, and other liabilities not included on lines 17-24). Comp	lete			
		Part X of Schedule D		13,555,249	25	12,178,851
	26	Total liabilities. Add lines 17 through 25		90,531,220	26	108,369,057
Se		Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34.	► X and			
ŭ				77.005.004		70.070.000
<u>ala</u>	27	Unrestricted net assets		77,025,961	27	78,370,923
B	28	Temporarily restricted net assets		23,224,346	28	28,500,903
Ĭ	29	Permanently restricted net assets	· · · · · · · · · · · · · · · · · · ·	54,806,233	29	54,901,716
or Fund Balances		Organizations that do not follow SFAS 117 (ASC958), check here complete lines 30 through 34.	► and			
ets	30	Capital stock or trust principal, or current funds			30	
Net Assets	31	Paid-in or capital surplus, or land, building, or equipment fund.			31	
it A	32	Retained earnings, endowment, accumulated income, or other			32	
Š	33	Total net assets or fund balances		155,056,540	33	161,773,542
	34	Total liabilities and net assets/fund balances		245,587,760	34	270,142,599

Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				. [Χ
1	Total revenue (must equal Part VIII, column (A), line 12)	1		688	3,920	,920
2	Total expenses (must equal Part IX, column (A), line 25)	2		673	3,939	,914
3	Revenue less expenses. Subtract line 2 from line 1	3		14	,981	,006
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		155	,056	,540
5	Net unrealized gains (losses) on investments	5		-8	3,059	,535
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			-204	,469
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10		161	,773	,542
Part	XII Financial Statements and Reporting				_	
	Check if Schedule O contains a response or note to any line in this Part XII				. [
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_ [
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		_			
	Schedule O.		_			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Χ
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or		_			
	reviewed on a separate basis, consolidated basis, or both:		_			
	Separate basis Consolidated basis Both consolidated and separate basis		_			
b	Were the organization's financial statements audited by an independent accountant?			2b		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both:		_			
	Separate basis Consolidated basis Both consolidated and separate basis		_			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		_			
·	the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c		Χ
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O.		_			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
- Ou	the Single Audit Act and OMB Circular A-133?			3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		·		<i></i>	
~	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			3b	х	
	, and the state of	-				

Form **990** (2014)

Continuation Sheet for Form 990

Page 1 of 1

Name of the Organization

Part VII Section A

Employer identification number

13-5660870

INTERNATIONAL RESCUE COMMITTEE, INC

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

Compensated Employees										
(A) (B) (C)				(D)	(E)	(F)				
Name and title	Average	Posit	tion (chec	k all	that ap	ply)	Reportable	Reportable	Estimated
	hours per	or Inc	ln:	잋	<u>~</u>	en ∓	Ţ	compensation	compensation	amount of
	week (list any	Individual trustee or director	Institutional trustee	Officer	Key employee	ghes Oplo	Former	from the	from related organizations	other compensation
	hours for	ual ector	tiona		olqn	st cc yee	4	organization	(W-2/1099-MISC)	from the
	related	trus	al t		yee	mp		(W-2/1099-MISC)	,	organization
	organizations	tee	ste			ens				and related
	below dotted line)		ð			Highest compensated employee				organizations
	,									
(26) Hon. Timothy Geithner	1.00									
Director/Trustee	0.00	_								
(27) Corydon J. Gilchrist	1.00									
Director/Trustee	0.00	+			_					
(28) Tracy R. Wolstencroft	1.00									
Director/Trustee	0.00	+	-				-			
(29) Glenda Burkhart	1.00									
Director/Trustee-Secretary	0.00 37.50	_			\vdash	1				
(30) David Miliband	0.00							E01 046		
Dir/CEO/ Pres. (31) Patricia Long	37.50	_		Х				591,846		
CFO, SVP Finance	0.00			Х				315,122		
(32) Carrie Simon	37.50	_		^				313,122		
General Counsel	0.00			Х				215,287		
(33) Ceorge Riddle	37.50	_		^				210,201		
Executive Vice President	0.00				х			255,440		
(34) John Keye	37.50	_			Ĥ			200,110		
Senior Vice President, Programs	0.00				Х			229,449		
(35) Ciaran Donnelly	37.50	_						,		
Senior Vice President, International Program	0.00				Х			177,647		
(36) Jennifer Sime	37.50									
Senior Vice President ,US Program	0.00				Х			194,817		
(37) Madlin Sadler	37.50									
Senior Vice President, Operation & Stategy	0.00				Х			328,049		
(38) Carrie Welch	37.50									
SVP, External Relations	0.00				Х			242,394		
(39) John Shumaker	37.50									
Chief of Party, PRP	0.00					Χ		306,532		
(40) Edward Bligh	37.50									
Vice President, Communications	0.00		<u> </u>			Х	<u> </u>	289,876		
(41) Sandra Mitchell	37.50									
Vice President, International Programs	0.00		!		<u> </u>	Х	!	237,750		
(42) Mary Jane Jamar	37.50					.,		00= 100		
Chief HR Officer	0.00	_	-			Х	-	235,480		
(43) Sharon Waxman	37.50					v		005 000		
Vice President, Advocacy	0.00	\vdash			\vdash	Х		235,266		
(44)										
(45)		1	 		 	1	 			
(45)		1								
(46)		1	 		\vdash	1	 			
X/		1								
		1	<u> </u>			1	<u> </u>			

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Employer identification number

NTEF	RN	ATIONAL RESCUE COMMITTE	E, INC				13-56	60870	
Part	art I Reason for Public Charity Status (All organizations must complete this part.) See instructions.								
The o	ne organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)								
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2		A school described in section 1	170(b)(1)(A)(ii). (Att	ach Schedule E.)					
3		A hospital or a cooperative hos	pital service organiz	zation described in sec	tion 170(l	o)(1)(A)(iii	i).		
4		A medical research organizatio hospital's name, city, and state	· · ·	nction with a hospital d	lescribed i	n section	170(b)(1)(A)(iii). En	ter the	
5		An organization operated for th section 170(b)(1)(A)(iv). (Com	e benefit of a colleg	e or university owned	or operate	d by a go	vernmental unit desc	cribed in	
6 F		A federal, state, or local govern		ntal unit described in se	ection 170	(b)(1)(A)(v).		
7	Χ	An organization that normally redescribed in section 170(b)(1)(eceives a substantia	al part of its support fro			-	ral public	
в Г		A community trust described in			II.)				
9 [An organization that normally rereceipts from activities related to support from gross investment acquired by the organization af	eceives: (1) more the coits exempt function income and unrelated	nan 33 1/3% of its supp ons—subject to certain ed business taxable in	ort from c exception come (les	s, and (2) s section t	no more than 33 1/3 511 tax) from busine	3% of its	
10		An organization organized and	operated exclusivel	ly to test for public safe	ety. See se	ection 509)(a)(4).		
11 [An organization organized and of one or more publicly support Check the box in lines 11a thro	ed organizations de	escribed in section 509	9(a)(1) or s	section 50	9(a)(2). See section	n 509(a)(3).	
а									
b		Type II. A supporting organize control or management of the organization(s). You must c	e supporting organi	ization vested in the sa					
С		Type III functionally integrated its supported organization(s)	ated. A supporting of	organization operated i				rated with,	
d		Type III non-functionally in that is not functionally integr requirement (see instruction	itegrated. A suppor ated. The organizat	ting organization operation generally must sati	ated in cor isfy a distr	nection with	rith its supported org quirement and an att		
е	[Check this box if the organiz functionally integrated, or Ty	ation received a wr	itten determination fror	m the IRS	that it is a		e III	
f		Enter the number of supported	•						0
g		Provide the following information	n about the support	ed organization(s).					
	(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the of listed in you docur	ır governing	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)	е
				(**************************************	Yes	No			
(A)									
(B)									
(C)	_								
(D)									
(E)									
Total							0		

13-5660870

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	388,492,046	380,496,906	451,017,146	556,423,123	682,076,363	2,458,505,584
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4 5	Total. Add lines 1 through 3	388,492,046	380,496,906	451,017,146	556,423,123	682,076,363	2,458,505,584
6	Column (f)						2,458,505,584
	Public support. Subtract line 5 from line 4. etion B. Total Support						2,430,303,304
	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	388,492,046	380,496,906	451,017,146	556,423,123	682,076,363	2,458,505,584
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,392,264	1,515,190	1,585,738	1,505,164	1,796,887	7,795,243
9	Net income from unrelated business activities, whether or not the business is regularly carried on	1,002,201	1,010,100	1,000,100	1,000,101	1,100,001	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	3,159,150	2,936,058	2,876,902	3,063,651	3,693,295	15,729,056
11	Total support. Add lines 7 through 10						2,482,029,883
12 13	Gross receipts from related activities, etc. (see First five years. If the Form 990 is for the org organization, check this box and stop here .	janization's first, s	econd, third, fourth	n, or fifth tax year a	s a section 501(c)		•
Sec	tion C. Computation of Public Sup	port Percenta	ige				
15	Public support percentage for 2014 (line 6, co Public support percentage from 2013 Schedul	e A, Part II, line 1	4			14 15	99.05% 98.96%
	33 1/3% support test—2014. If the organiza and stop here. The organization qualifies as	a publicly supporte	ed organization .				▶ X
	33 1/3% support test—2013. If the organization and stop here. The organization qualifies	as a publicly sup	ported organizatio	n			· · · · •
17a	10%-facts-and-circumstances test—2014. is 10% or more, and if the organization meets Part VI how the organization meets the "facts-organization	the "facts-and-circ	cumstances" test, es" test. The organ	check this box and ization qualifies as	stop here. Explai a publicly supporte	n in ed	▶ □
b	10%-facts-and-circumstances test—2013. 15 is 10% or more, and if the organization me Part VI how the organization meets the "facts- supported organization.	ets the "facts-and- and-circumstance	-circumstances" te es" test. The organ	st, check this box a ization qualifies as	and stop here. Ex a publicly	plain in	▶
18	Private foundation. If the organization did no instructions	ot check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		_

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

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

Sec	tion A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise						0
2	sold or services performed, or facilities						1
	furnished in any activity that is related to the						1
	organization's tax-exempt purpose						0
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's						1
	benefit and either paid to or expended on						
_	its behalf						0
5	The value of services or facilities						1
	furnished by a governmental unit to the						0
6	organization without charge	0	0	0	0	0	0
6 72	Amounts included on lines 1, 2, and 3	0	0		0	0	
<i>i</i> a	received from disqualified persons						0
h	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						1
	exceed the greater of \$5,000 or 1% of the						1
	amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from						
	line 6.)						0
Sec	tion B. Total Support	1			1		
Cale	endar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						1
	payments received on securities loans,						
	rents, royalties and income from similar sources .						0
b	Unrelated business taxable income (less						1
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0			0	0	0
	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						1
	activities not included in line 10b, whether						
12	or not the business is regularly carried on . Other income. Do not include gain or						0
12	loss from the sale of capital assets						1
	(Explain in Part VI.)						0
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	0	0	0	0	0	0
14	First five years. If the Form 990 is for the org		econd, third, fourth				
	organization, check this box and stop here .					· · · · · · · ·	
Sec	tion C. Computation of Public Sup	port Percenta	ge				
15	Public support percentage for 2014 (line 8, co	lumn (f) divided by	/ line 13, column (f))		15	0.00%
16	Public support percentage from 2013 Schedul	le A, Part III, line 1	5			16	0.00%
Sec	tion D. Computation of Investment	Income Perc	entage				
17	Investment income percentage for 2014 (line		-			17	0.00%
18	Investment income percentage from 2013 Sch					18	0.00%
19a	33 1/3% support tests—2014. If the organization						<u>. </u>
	not more than 33 1/3%, check this box and st	-			-		▶ 🔼
b	33 1/3% support tests—2013. If the organizatine 18 is not more than 33 1/3%, check this b						▶ □
20	Private foundation. If the organization did no	-	_				
	ato rounidation, il tile organization did lit	A STICON A DUA UIT	i - , i ∪ u, ∪i l ∃	w, or room tries box c	a 000 ii idii UUliUl lõ		

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	70		
	5a		
	Ja		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	O۲		
	9b		
	9с		
	10a		
	10b		
· · · ·			

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations		1	ı
_			Yes	No
1	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? 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.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? <i>If</i> "Yes," <i>explain in Part</i>			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations		l .	l
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the	_		
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
2	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	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? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ction	e).	
a	The organization satisfied the Activities Test. <i>Complete line 2 below.</i>	011011	5).	
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below</i> .			
			,	
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	nstruc	tions)).
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	_		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described 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? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	O.L.		
•	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
~	of its supported organizations? If "Ves" describe in Part VI the role played by the organization in this regard	3h		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting (Organi	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifyi	-		tructions. All
other Type III non-functionally integrated supporting organizations must co	<u>omplete</u>	Sections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4	0	0
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3	0	0
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4	0	0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by .035	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		0
2 Enter 85% of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		0
4 Enter greater of line 2 or line 3	4		0
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		0
7 Check here if the current year is the organization's first as a non-functional instructions).	ally-integ	rated Type III supporting	organization (see

1 / 2 /	n D - Distributions Amounts paid to supported organizations to accomplish examounts paid to perform activity that directly furthers exenorganizations, in excess of income from activity Administrative expenses paid to accomplish exempt purpo			Current Year				
2 /	Amounts paid to perform activity that directly furthers exen organizations, in excess of income from activity		<u> </u>					
	organizations, in excess of income from activity	npt purposes of supported						
C			Amounts paid to perform activity that directly furthers exempt purposes of supported					
	Administrative expenses paid to accomplish exempt purpo							
		ses of supported organiza	ations					
	Amounts paid to acquire exempt-use assets							
	Qualified set-aside amounts (prior IRS approval required)							
	Other distributions (describe in Part VI). See instructions.							
	Total annual distributions. Add lines 1 through 6.			0				
	Distributions to attentive supported organizations to which	the organization is respor	nsive					
	(provide details in Part VI). See instructions.							
	Distributable amount for 2014 from Section C, line 6			0				
10 L	Line 8 amount divided by Line 9 amount	1	an an	0.000				
	ction E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014				
	Distributable amount for 2014 from Section C, line 6			0				
	Underdistributions, if any, for years prior to 2014							
	(reasonable cause required-see instructions)							
3 E	Excess distributions carryover, if any, to 2014:							
а								
b								
С								
d								
	From 2013							
	Total of lines 3a through e	0						
	Applied to underdistributions of prior years		0					
	Applied to 2014 distributable amount			0				
	Carryover from 2009 not applied (see instructions)	_						
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	0						
	Distributions for 2014 from Section							
	-, ······ -		0					
	Applied to underdistributions of prior years		0					
	Applied to 2014 distributable amount			0				
	Remainder. Subtract lines 4a and 4b from 4.	0						
	Remaining underdistributions for years prior to 2014, if							
	any. Subtract lines 3g and 4a from line 2 (if amount		0					
	greater than zero, see instructions). Remaining underdistributions for 2014. Subtract lines 3h		0					
	and 4b from line 1 (if amount greater than zero, see							
	instructions).			0				
	Excess distributions carryover to 2015. Add lines 3j			0				
	and 4c.	0						
	Breakdown of line 7:	0						
a	DIGGRADWIT OF HITO 7.							
b								
С								
	Excess from 2013							

Schedule B

(Form 990, 990-EZ, or 990-PF)

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

Schedule of Contributors

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

2011 A

2014

OMB No. 1545-0047

Department of the Treasury

Name of the organization **Employer identification number** 13-5660870 INTERNATIONAL RESCUE COMMITTEE, INC 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 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

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

Name of organizationEmployer identification numberINTERNATIONAL RESCUE COMMITTEE, INC13-5660870

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	Department for International Development (DFID) 1 Palace Street SW 1E-5HE Foreign State or Province: London Foreign Country: United Kingdom (England, Northern Ing.)	\$129,012,434	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
2	Office of Foreign Disaster Assistance (OFDA) 1300 Pennsylvania Avenue, NW Washington DC 20523-1000 Foreign State or Province: Foreign Country:	\$	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
3	Bureau of Population Refugees and Migration 2201 C Street NW Washington DC 20523-1000 Foreign State or Province: Foreign Country:	\$	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
4	US Agency for International Development (USAID) 1300 Pennsylvania Avenue, NW Washington DC 20523-1000 Foreign State or Province: Foreign Country:	\$55,351,166	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
5	UN High Commissioner on Refugees (UNHCR) Case Postale 2500 CH-1211 Foreign State or Province: Geneva Foreign Country: Switzerland	\$48,322,183	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
6	European Union Humanitarian Department (ECHO) 200 Rule de la Loi B-1049 1000 Foreign State or Province: Brussels Foreign Country: Belgium	\$38,380,335	Person X Payroll				

Name of organization
INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number 13-5660870

Part I	Contributors (see instructions). Use duplicate copie	iles 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:	\$ 32,114,111	Person X Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
88	United Nations Children's Fund (UNICEF) 3 United Nations Plaza New York NY 10017 Foreign State or Province: Foreign Country:	\$ 23,674,923	Person X Payroll				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province: Foreign Country:	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province: Foreign Country:	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province: Foreign Country:	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
	Foreign State or Province: Foreign Country:	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)				

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

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I Education Supplies 1 \$ 204,266 9/30/2015 (a) No. (c) (b) (d) FMV (or estimate) from Date received Description of noncash property given (see instructions) Part I Fuel and Spare Parts 5 Emergency Program Materials 9/30/2015 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) Emergency Program Materials 8 9/30/2015 (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (see instructions) Part I (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I

Name of org	ganization IONAL RESCUE COMMITTEE, INC				Employer identification number 13-5660870
Part III	Exclusively religious, charitable, etc., co (10) that total more than \$1,000 for the year the following line entry. For organizations of contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	ear from any on the completing Part in (Enter this information)	one contributor. Comple III, enter the total of excl formation once. See instr	te colu <i>usivel</i> y	section 501(c)(7), (8), or umns (a) through (e) and religious, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift) Use of gift	(d) Description of how gift is held
		(e) T	ransfer of gift		
	Transferee's name, address, and 2	ZIP + 4	Relationsh	nip of t	transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(с) Use of gift	(d	l) Description of how gift is held
		(e) T	ransfer of gift		
	Transferee's name, address, and 2	ZIP + 4	Relationsh	nip of t	transferor to transferee
	For. Prov. Country			 	
(a) No. from Part I	(b) Purpose of gift	(с) Use of gift	(d) Description of how gift is held
		(e) T	ransfer of gift		
	Transferee's name, address, and 2	ZIP + 4	Relationsh	nip of t	transferor to transferee
(a) No.	For. Prov. Country) Has of wife	(-1	N Decembring of hours wife in held
from Part I	(b) Purpose of gift	(C) Use of gift	(0) Description of how gift is held
		(e) T	ransfer of gift	<u> </u>	
	Transferee's name, address, and 2	ZIP + 4	Relationsh	ip of t	transferor to transferee
	For. Prov. Country				

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

Employer identification number

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of organization

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. If the organization answered "Yes," to 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.

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

If the organization answered "Yes." to 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," to 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

INTE	ERNATIONAL RESCUE C	OMMITTEE, INC			13-56	60870	
Pa		he organization is exempt und			organiza	tion.	
1 2 3	Political expenditures	he organization's direct and indirect p		· ▶ \$			
Pa	rt I-B Complete if t	he organization is exempt und	ler section 501((c)(3).			
1	Enter the amount of any e	excise tax incurred by the organizatio	n under section 49	955 ▶ \$			
2		excise tax incurred by organization m					
3	_	ed a section 4955 tax, did it file Form	-			Yes	No
						Yes	No
	If "Yes," describe in Part			(-) FO4	(-)(0)		
		he organization is exempt und			(c)(3).		
1	-	expended by the filing organization for the second					
2	Enter the amount of the fi	iling organization's funds contributed unction activities	to other organizati	ons			
3	·	penditures. Add lines 1 and 2. Enter h					
Ū							0
4	Did the filing organization	file Form 1120-POL for this year? .				Yes	No
5	organization made payme the amount of political col	ses and employer identification numb ents. For each organization listed, ent ntributions received that were prompt fund or a political action committee (ter the amount pai	d from the filing organization vered to a separate political	n's funds. Il organiza	Also ente	er n
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contrib pron delive politic	mount of polutions received and directed to a september and organizatione, enter -0	red and ectly parate ion. If
(1)							
(2)							
(3)	-						
(4)	3						
(5)							
(6)							

Schedule C (Form 990 or 990-EZ) 2014

Sch	edule C (Form 990 or 990-EZ) 2014					Page 2
P	art II-A Complete if the organiz	ation is exempt	under section 5	01(c)(3) and filed	l Form 5768 (ele	ction
	under section 501(h)).	•			`	
Α	Check ▶ if the filing organization	n belongs to an a	affiliated group (a	nd list in Part IV e	ach affiliated gro	up member's
	name, address, EIN, e	-	•		-	
В	Check ▶ if the filing organization					
_				р. ст. с. с. р.		
	Limits on i The term "expenditures)	Lobbying Expendit			(a) Filing organization's totals	(b) Affiliated group totals
4-	· ·		·		g	
1a	Total lobbying expenditures to influence		,	•		0
b	Total lobbying expenditures to influence	-			0	0
C	Total lobbying expenditures (add lines	•		•	0	0
d	Other exempt purpose expenditures .				0	0
e	Total exempt purpose expenditures (ad	·		•	0	0
f	Lobbying nontaxable amount. Enter the	amount from the it	niowing table in bot	[]	0	0
ſ	columns.	Vie. The lebberin			0	0
ŀ	If the amount on line 1e, column (a) or (b		ng nontaxable amou	int is:		
ŀ	Not over \$500,000 Over \$500,000 but not over \$1,000,000		mount on line 1e. us 15% of the excess	over \$500,000		
ŀ	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess			
ŀ	Over \$1,500,000 but not over \$17,000,000		us 5% of the excess of			
Ī	Over \$17,000,000	\$1,000,000.	20 0 70 01 1110 010000 0	γι, σοσ, σοσ.		
g	Grassroots nontaxable amount (enter 2				0	0
h	Subtract line 1g from line 1a. If zero or	· ·			0	
i	Subtract line 1f from line 1c. If zero or le				0	
i	If there is an amount other than zero or			•	0 reporting	
•	section 4911 tax for this year?					Yes No
	•		g Period Under sed			
	(Some organizations that made	•			f the five columns	below.
			tructions for lines	-		20.011.
		o and doparate me		_u oug,		
	Lok	bying Expenditure	es During 4-Year A	veraging Period		
	Calendar year (or fiscal year	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
	beginning in)	(4)	(3)	(4)	(4)	(1)
2a	Lobbying nontaxable amount	0	0	0	0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))					0
	, , , , , , , , , , , , , , , , , , , ,					
С	Total lobbying expenditures	0	0	0	0	0
d	Grassroots nontaxable amount	0	0	0	0	0
е	Grassroots ceiling amount (150% of line 2d, column (e))					0
f	Grassroots lobbying expenditures	0	0	0	0	0

Schedule C (Form 990 or 990-EZ) 2014

Page 3

Schedule C (Form 990 or 990-EZ) 2014

Par	(election under section 501(h)).	i tilec	Fori	n 5/68
For 4	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(6	a)	(b)
	e lobbying activity.	Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local			
	legislation, including any attempt to influence public opinion on a legislative matter or			
	referendum, through the use of:			
а	Volunteers?	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Х	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х		
C	Media advertisements?	-	X	
d	Mailings to members, legislators, or the public?		X	
e f	Publications, or published or broadcast statements?		X	
	Direct contact with legislators, their staffs, government officials, or a legislative body?		^	12,000
g h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х	12,000
ï	Other activities?		Х	
i	Total. Add lines 1c through 1i			12,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	,
b	If "Yes," enter the amount of any tax incurred under section 4912			
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part	t III-A Complete if the organization is exempt under section 501(c)(4), section 50	(c)(5)	or s	ection
	501(c)(6).			
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			
	Complete if the organization is exempt under section 501(c)(4), section 50: 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes.") Pai	
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
а	Current year		2a	
b	Carryover from last year		2b	
С	Total		2c	0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the			
	excess does the organization agree to carryover to the reasonable estimate of nondeductible			
	lobbying and political expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	0
Part				
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group instructions); and Part II B, line 1. Also, complete this part for any additional information.	p list); F	Part II-	A, lines 1 and
	e instructions); and Part II-B, line 1. Also, complete this part for any additional information. II-B Line 1g IRC tracks any time spent on lobbying by our Advocacy team in DC and other members			
ганн	in belief by INC tracks any time spent of lobbying by our Advocacy team in DC and other members			
of HC	staff that may contact legislators or other officials. Time spent by staff was tracked on the			
speci	fic basis of meetings held and the topics of discussion in those meetings.			

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

| Employer identification number

INTE	RNATIONAL RESCUE COMMITTEE, INC		13-5660870
Part		or Advised Funds or Other Similar F	
		vered "Yes" to Form 990, Part IV, line 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year).		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do		
	funds are the organization's property, subject		
6	Did the organization inform all grantees, done		
	used only for charitable purposes and not for		
	purpose conferring impermissible private ben	efit?	Yes No
Part			
		rered "Yes" to Form 990, Part IV, line 7	7
1	Purpose(s) of conservation easements held to		
	Preservation of land for public use (e.g., recr	eation or education) Preservation	n of a historically important land area
	Protection of natural habitat	Preservation	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organizat	ion held a qualified conservation contributio	on in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation ease		
С	Number of conservation easements on a cert		2 c
d	Number of conservation easements included		
_	historic structure listed in the National Register		
3	Number of conservation easements modified	, transferred, released, extinguished, or terr	ninated by the organization
4	during the tax year Number of states where property subject to c	anagration aggregated	
4 5	Does the organization have a written policy re	•	handling of
3	violations, and enforcement of the conservati		
6	Staff and volunteer hours devoted to monitori		
•	>		outening and you
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing conservation ease	ments during the year
	▶ \$		5 ,
8	Does each conservation easement reported of	on line 2(d) above satisfy the requirements	of section
	170(h)(4)(B)(i) and section $170(h)(4)(B)(ii)$?.		Yes No
9	In Part XIII, describe how the organization re		•
	balance sheet, and include, if applicable, the		ancial statements that describes
Dow	the organization's accounting for conservation	n easements.	an Othan Cimilan Assats
Part		ections of Art, Historical Treasures,	
		vered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted under		
	works of art, historical treasures, or other sim	•	•
	of public service, provide, in Part XIII, the text		
b	If the organization elected, as permitted under works of art, historical transuras, or other sim		
	works of art, historical treasures, or other sim		ion, or research in furtherafice
	of public service, provide the following amour (i) Revenue included in Form 990, Part VIII,	its relating to these items. line 1	> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a		
_	following amounts required to be reported un		<u> </u>
а			
b	Revenue included in Form 990, Part VIII, line Assets included in Form 990, Part X		> \$

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

Par	t III Organizations Maintaining (Collections of A	Art, Histo	rical Tr	easures, oi	r Othe	r Similar Asse	ts (cor	ntinue	d)
3	Using the organization's acquisition, acc	ession, and other	records, c	heck any	of the following	ng that	are a significant			
	use of its collection items (check all that	apply):								
а	Public exhibition		d	Loan o	or exchange p	orogram	ns			
b	Scholarly research		е	Other						
С	Preservation for future generation	S								
4	Provide a description of the organization Part XIII.	's collections and	explain ho	w they fu	rther the orga	anizatio	n's exempt purpo	se in		
5	During the year, did the organization soli assets to be sold to raise funds rather th							Y	es	No
Par	ESCROW and Custodial Arrar	igements.								
	Complete if the organization a 990, Part X, line 21.	inswered "Yes"	to Form 9	990, Par	t IV, line 9,	or repo	orted an amour	it on Fo	orm	
1a	Is the organization an agent, trustee, cus	stodian or other in	termediary	for contr	ibutions or ot	her ass	ets not		_	1
	included on Form 990, Part X?							Y	es X	No
b	If "Yes," explain the arrangement in Part	XIII and complete	e the follow	ing table:						
•	Paginning halanga					10		Amount		0
c d	Beginning balance					1c 1d				U
e	Distributions during the year					1e				
f	Ending balance					1f				0
2a	Did the organization include an amount					al acco	unt liability?	XY	es	No
b	If "Yes," explain the arrangement in Part								X	ĺ
Pari										1
ui	Complete if the organization a	nswered "Yes"	to Form	990. Par	t IV. line 10	_				
		(a) Current year	(b) Prio		(c) Two years		(d) Three years back	(e) F	our years	back
1a	Beginning of year balance	112,162,000	106	,512,000	93,80		83,782,000)	83,28	38,000
b	Contributions	685,000	3	,178,000	4,13	2,000	2,084,000)	4,64	17,000
С	Net investment earnings, gains,									
	and losses	-4,085,000	7	,919,000	13,62	3,000	12,635,00)	10	04,000
d	Grants or scholarships									
е	Other expenditures for facilities	4.059.000	_	447.000	F 04	0.000	4 605 00	1	4 21	7 000
f	and programs	4,958,000	3	,447,000	3,04	9,000	4,695,00	+	4,20	57,000
g	End of year balance	103,804,000	112	,162,000	106,51	2 000	93,806,000)	83 78	32,000
2	Provide the estimated percentage of the						00,000,00		00,10	,,,,,,,
а	Board designated or quasi-endowment	▶ `	45% `	O.	. ,,					
b	Permanent endowment	53%								
С	Temporarily restricted endowment	2%								
	The percentages in lines 2a, 2b, and 2c	•								
3a	Are there endowment funds not in the po	ssession of the o	rganizatio	n that are	held and adn	ninister	ed for the			·
	organization by:							0 (2)	Yes	No
	(i) unrelated organizations							3a(i)		X
b	(ii) related organizations							3a(ii) 3b		Х
4	Describe in Part XIII the intended uses of		•					30		
Pari			o ondown	ione ianae	<u>,, </u>					
	Complete if the organization a		to Form	990, Par	t IV, line 11	a. See	Form 990, Pai	t X, lin	e 10.	
	Description of property	(a) Cost or ot			st or other		Accumulated		Book valu	е
		(investm	ent)	basis	s (other)	d	epreciation			
1a	Land		0		0					0
b	Buildings	•	0		0		0			0
C	Leasehold improvements		0		8,287,898		2,806,599			71,696
d	Equipment		0		2,436,715		1,649,978			30,828
е	Other		0		3,332,799		3.103.296		44	14.469

5,246,993

- 4 3 700	
Part VII	Investments—Other Securities.
I dit vii	mycouncing other occurres.

	Complete if the organization an	<u>swered "Yes" to Form 99</u>	<u>0, Part IV, line 11b. See Fori</u>	<u>m 990, Part X, line 12.</u>
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year	
(1) Financial	derivatives	0		
(2) Closely-h	eld equity interests	0		
(3) Other C	losed-end macro fund	4,635,752	F	
(A) Direct	lending fund	6,490,437	F	
(B) Limited	d Partnerships	36,481,514	F	
(C)				
(F)				
(G)				
(H)				
Total. (Column (b)	must equal Form 990, Part X, col. (B) line 12.)	47,607,703		
Part VIII	Investments—Program Relate	ed.		
	Complete if the organization an	swered "Yes" to Form 99	0, Part IV, line 11c. See Forr	m 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year	aluation:
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	must equal Form 990, Part X, col. (B) line 13.)	0		
Part IX	Other Assets.			
1 411171	Complete if the organization an	swered "Yes" to Form 99	0 Part IV line 11d See For	m 990 Part X line 15
) Description	o, ,	(b) Book value
(1)	,	, ,		(1, 11 111
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nn (b) must equal Form 990, Part X, co	I. (B) line 15.)		0
Part X	Other Liabilities.	. (2)		
I art A	Complete if the organization an	swered "Yes" to Form 99	0 Part IV line 11e or 11f Se	e Form 990 Part X
	line 25.	owered res to roim so	o, raitiv, into the or this oc	so i omi ooo, i ait x,
1.	(a) Description of liability	(b) Book value		
	income taxes	(b) Book value		
	Liabilities related to split interest agree	5,026,134		
(3) Deferred		5,826,355		
	ng Loan Program Liability			
	ig Loan i rogiani Liability	1,326,362		
(5)				
(6)				
(7)				
(8)				
(9)	nust equal Form 990. Part X. col. (B) line 25.)	40 470 054		
i otai. (Coiumn (b) r	nust equal Form 990, Part X, col. (B) line 25.)	12,178,851		

INTERNATIONAL RESCUE COMMITTEE, INC Schedule D (Form 990) 2014 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

	Complete if the organization answered "Yes" to Form 990, Pa	rt IV, li	ne 12a.		•••
1	Total revenue, gains, and other support per audited financial statements			1	680,754,484
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-8,059,535		
b	Donated services and use of facilities	2b	,		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	-8,059,535
3	Subtract line 2e from line 1			3	688,814,019
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	ĺ			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	106,901		
C	Add lines 4a and 4b		,	4c	106,901
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	688,920,920
Par	t XII Reconciliation of Expenses per Audited Financial Stateme			er Ret	
	Complete if the organization answered "Yes" to Form 990, Pa				
1	Total expenses and losses per audited financial statements			1	673,833,013
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0
3	Outstand the On from the A			3	673,833,013
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	106,901		
С	Add lines 4a and 4b	<u> </u>		4c	106,901
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	673,939,914
Par	t XIII Supplemental Information.				
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part III	art IV, I	ines 1b and 2b; Par	t V, line	e 4; Part X, line
2; Pa	art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro	vide an	y additional informa	ation.	
Part	IV Line 2b Custodial accounts at IRC represent funds held on behalf of refugee				
	1.7 Ellio Eb Gudioului ucoscullo ut il to roproscolit iulius iliou chi boliuli criticiagoo				
partio	cipants related to economic empowerment programs (Assets for Financial Indeper	ndence			
7521.11					
(AFI)	and Individual Development Accounts (IDA)) in compliance with program require	ments			
as st	ipulated by the donors. Funds will be released as refugees complete the program				
requi	irements.				
Part	IV Line 4 IRC board of directors has established a fund to provide for the long-terr	n			
finan	cial stability of IRC and to enhance its ability to respond to extraordinary				
emer	rgency needs. The purpose of this fund is to provide a mechanism for the board of	f			
direc	tors to set aside and invest certain funds. Accordingly, the board of directors has				
desig	gnated the Leo Cherne Emergency Fund, certain unrestricted bequests, extraordin	nary			
-::	(an electronic address than be and of directions) and a sufficient of the control	_			
girts	(as determined by the board of directors), and portions of unrestricted surpluses in	1			
oner	ating funds for this purpose. IRC permanently restricted donor endowment and em	ergeng	:V		
26216	dang lands for the purpose. It to permanently required deficiency might and en	.o. goil	Z		

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 During 2010, IRC adopted ASU No. 2009 06, Implementation Guidance on
Accounting For Uncertainty in Income Taxes and Disclosure Amendments for Nonpublic
Entities in conjunction with the adoption of FASB interpretation No. 48, Accounting for
Uncertainty in Income Taxes. FASB Interpretation No 48 addresses the accounting for
uncertainties in an organization financial statements and prescribes a threshold of more
than likely not for recognition and derecognition of tax positions taken or to be taken in
a tax return. FASB Interpretation No. 48 also provides related guidance on measurements,
classification, interest and penalties and disclosures. The adoption of FASB
Interpretation No. 48 and ASU No 2009 06 did not have a significant impact on the IRC
financial Statements.
Part XI Line 4b This amount represents investment manager fees that are netted against
investment income when reported to IRC. For 990 purposes, these fees are reported within
expenses and income is grossed back up.
Part XII Line 4b This amount represents investment manager fees that are netted against
investment income when reported to IRC. For 990 purposes, these fees are reported within
expenses and income is grossed back up.
t

Schedule F (Form 990)

Statement of Activities Outside the United States

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

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name	e of the organization					Employer identification number
INT	ERNATIONAL RESCUE (COMMITTEE, IN	IC			13-5660870
Par		ormation on A 990, Part IV, lin		side the United States.	Complete if the organizat	ion answered
2	assistance, the grantee the grants or assistance For grantmakers. Desc assistance outside the U	es' eligibility for the?	he grants or ass	ords to substantiate the amount istance, and the selection of the control of the	riteria used to award	. Yes No
	(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) a program service, describe specific type of service(s) in region	expenditures for
(1)	Europe (Including Iceland and Greenland)	3	343	Program Services	Technical Assistance a Providing indigent relie	
(2)	Europe (Including Iceland and Greenland)			Grants to recipients	Providing indigent relie	ef 5,530,716
(3)	Russia and the Neighboring States	2	12	Program Services	Providing indigent relie	ef 1,150,821
(4)	Russia and the Neighboring States			Grants to recipients	Providing indigent relie	ef 262,975
(5)	Central America and the Caribbean	1	45	Program Services	Providing indigent relie	ef 2,058,353
(6)	Central America and the Caribbean			Grants to recipients	Providing indigent relie	ef 6,736
(7)	Middle East and North Africa	4	1,167	Program Services	Providing indigent relie	ef 81,531,597
(8)	Middle East and North Africa			Grants to recipients	Providing indigent relie	ef 7,053,854
(9)	Sub-Saharan Africa	18	5,927	Program Services	Providing indigent relie	ef 237,030,888
(10)	Sub-Saharan Africa			Grants to recipients	Providing indigent relie	ef 51,080,165
(11)	East Asia and the Pacific	2	1,431		Providing indigent relie	ef 18,174,466
(12)	East Asia and the Pacific			Grants to recipients	Providing indigent relie	ef 24,035,798
(13)	South Asia	3	716	Program Services	Providing indigent relie	ef 28,510,049
(14)	South Asia			Grants to recipients	Providing indigent relie	ef 16,871,722
(15)						
(16)						
				ĺ		ĺ

33

0

33

9,641

9,641

0

513,540,369

513,540,369

3a Sub-total

b Total from continuation sheets to Part I . . .

c Totals (add lines 3a and 3b)

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.

Pailiv	, line 15, lor an	y recipient who rece	ived more man \$5,0	100. Part il cari be	duplicated if additi	onal space is nee	dea.	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)
(1)		Central America and the Caribbean	WATER AND SANITATION	6,736	Bank Transfer			
(2)		East Asia and the Pacific	Health	29,797	Bank Transfer			
(3)		East Asia and the Pacific	Governance	57,662	Bank Transfer			
(4)		East Asia and the Pacific	Health	66,023	Bank Transfer			
(5)		East Asia and the Pacific	Health	68,005	Bank Transfer			
(6)		East Asia and the Pacific	Health	73,899	Bank Transfer			
(7)		East Asia and the Pacific	Health	76,918	Bank Transfer			
(8)		East Asia and the Pacific	Health	219,510	Bank Transfer			
(9)		East Asia and the Pacific	Health	505,994	Bank Transfer			
(10)		East Asia and the Pacific	Community Development	1,049,540	Bank Transfer			
(11)		East Asia and the Pacific	Community Development	1,917,884	Bank Transfer			
(12)		East Asia and the Pacific	GBV Programs	30,404	Bank Transfer			
(13)		East Asia and the Pacific	Shelter	351,601	Bank Transfer			
(14)		East Asia and the Pacific	Protection	-25,627	Return			
(15)		East Asia and the Pacific	Health	3,347	Bank Transfer			
(16)		East Asia and the Pacific	Health		Bank Transfer			

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax	-exempt	
	by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	>	538
3	Enter total number of other organizations or entities	>	(

INTERNATIONAL RESCUE COMMITTEE, INC

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 Part III can be duplicated if additional space is needed.

	ted if additional space is no		(a) A	(-) M	(6) A	(a) December	(I-) M-HI
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) CASH ASSISTANCE	Central America and the Caribbean		889	CASH			
(2) PROGRAM SUPPLIES & MATERIA	Central America and the Caribbean		565,007	Bank Transfer	8,604	Program Materials	FMV
(3) CASH ASSISTANCE	East Asia and the Pacific		992,359	Bank Transfer	,		
(4) HEALTH CARE	East Asia and the Pacific		821,042	Bank Transfer			
(5) OTHER ASSISTANCE	East Asia and the Pacific		252,468	Bank Transfer			
(6) OTHER EDUCATION	East Asia and the Pacific		267,569	Bank Transfer			
(7) PROGRAM SUPPLIES & MATERIA	East Asia and the Pacific		3,305,393	Bank Transfer	81,862	Program Materials	FMV
(8) CASH ASSISTANCE	Europe (Including Iceland and Greenland)		1,324,566	Bank Transfer			
(9) OTHER ASSISTANCE	Europe (Including Iceland and Greenland)		185,171	Bank Transfer			
(10) PROGRAM SUPPLIES & MATERIA	Europe (Including Iceland and Greenland)		17,592,958	Bank Transfer	7,401,568	Program Materials	FMV
(11) SERVICE CONTRACTS	Europe (Including Iceland and Greenland)		1,793,170	Bank Transfer			
(12) TRANSPORTATION	Europe (Including Iceland and Greenland)		27,097	Bank Transfer			
(13) CASH ASSISTANCE	Middle East and North Africa		2,882,033	Bank Transfer			
(14) HEALTH CARE	Middle East and North Africa		8,619,911	Bank Transfer			
(15) OTHER ASSISTANCE	Middle East and North Africa		881,312	Bank Transfer			
(16) OTHER EDUCATION	Middle East and North Africa		49,191	Bank Transfer			
(17) PROGRAM SUPPLIES & MATERIA	Middle East and North Africa		22,003,629	Bank Transfer	341,653	Program Materials	FMV
(18) SERVICE CONTRACTS	Middle East and North Africa		112,299	Bank Transfer	,		

Part	V Foreign Forms			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "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	X No	
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No	
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "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	X 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	X No	
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "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	X No	
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	X Yes	□ No	

13-5660870

Supplemental Information

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

Part I Line 1 IRC maintains records of all grants made from the pre-award / due diligence
phase which determines the selection of the subgrantee, the signing of the grant agreement
and throughout the activity with the submission of periodic financial and programmatic
reports as required per the grant agreement.
Part I Line 2 IRC has detailed required procedures for monitoring the use of funds outside
of the US which vary based on the type of award granted, the dollar size of the award and
the organization (US, Local NGO, Community Based Organization (CBO) Local Government,
etc.) the funds have been granted to. All reports are reviewed, on-site periodic review
visits occur routinely and capacity building is performed as required.
Part III Line Column C In 2015, 23 million people in more than 40 countries and 26 U.S.
cities benefited from IRC programs that help restore health, safety, education and
economic well-being to those devastated by conflict and disaster. Our doctors, nurses and
community health workers provided 21 million people with primary and reproductive health
care. We gave 2.6 million people access to clean drinking water and sanitation. 1.3M
children provided with schooling and educational opportunities. We vaccinated over 440,000
children under age of one against measles. IRC supported 2,384 clinics and health
facilities that helped more than 315,000 women deliver healthy babies. We supported more
than 13,000 community health workers to treat communicable diseases in children under age
5 and treated 186,000 children under age 5 for acute malnutrition. We provided schooling
and educational opportunities to more than 1.3 million children; trained more than 54,000
educators and supported 7,959 schools. We provided counseling, care and support to more
than 36,800 vulnerable children and trained 9,525 child protection workers. IRC provided
24,555 families with parenting support. We created 1,716 village savings and loan
associations that benefited more than 38,000 members who saved a total of nearly \$1.8
million. We trained more than 14,900 farmers in agriculture and agribusiness, and provided
more than 34,700 farmers with access to markets and farm resources including seeds and
fertilizers. IRC helped create or support 8,760 businesses and provided \$11.8 million in

13-5660870

Part V

Supplemental Information

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

cash and asset transfers to 75,625 refugees and displaced households. IRC provided
counseling and health, social and legal services to more than 11,400 survivors of gender
based violence (GBV); trained 33,000 people in GBV prevention and reached some 750,000
people with community-based violence prevention efforts. IRC offered legal assistance to
more than 35,450 people; trained 18,267 people in the principles of human rights and
protection; offered information on preventing and responding to human rights abuses to
more than 190,000 people.Also, IRC trained over 25,800 people in the principles of
governance (improving government accountability) and provided information on governance to
168,400 people.
Part III Line Colum C Continued In the United States, helped resettle 9,961 newly arrived
refugees and provided services to over 36,000 refugees, asylees, victims of human
trafficking and other immigrants.Through the IRC Resettlement Support Center in Thailand,
we assisted 18,151 refugees from East Asia to resettle in the U.S.

Continuation Sheet for Schedule F (Form 990)

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

13-5660870

Part I	Continuat	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)												
Totals	<u></u> .▶	0	0			0						

Part II Contin	nuation of Grai	nts and Other Assi	stance to Organiza	ations or Entities	Outside the Unite	d States. (Schedu	le F (Form 990), Part II,	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(17)		East Asia and the Pacific	Health	4,833	Bank Transfer			
(18)		East Asia and the Pacific	Health		Bank Transfer			
(19)		East Asia and the Pacific	Health		Bank Transfer			
(20)		East Asia and the Pacific	Protection		Bank Transfer			
(21)		East Asia and the Pacific	Health		Bank Transfer			
(22)		East Asia and the Pacific	Health		Bank Transfer			
(23)		East Asia and the Pacific	Protection		Bank Transfer			
(24)		East Asia and the Pacific	Health		Bank Transfer			
(25)		East Asia and the Pacific	Health		Bank Transfer			
(26)		East Asia and the Pacific	Health		Bank Transfer			
(27)		East Asia and the Pacific	Protection		Bank Transfer			
(28)		East Asia and the Pacific	Protection		Bank Transfer			
(29)		East Asia and the Pacific	Health		Bank Transfer			
(30)		East Asia and the Pacific	Health		Bank Transfer			
(31)		East Asia and the Pacific	Health		Bank Transfer			
(32)		East Asia and the Pacific	Protection		Bank Transfer			
(33)		East Asia and the Pacific	Health		Bank Transfer			
(34)		East Asia and the Pacific	Protection		Bank Transfer			
(35)		East Asia and the Pacific	Health		Bank Transfer			

Page 2 of 28

Part II Contin	uation of Grar	nts and Other Assi	stance to Organiza	tions or Entities	Outside the United	States. (Schedul	e F (Form 990), Part II,	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(36)		East Asia and the Pacific	GBV Programs	56 191	Bank Transfer			
		East Asia and the Pacific	Protection					
(37)		East Asia and the Pacific	Health		Bank Transfer Bank Transfer			
(39)		East Asia and the Pacific	Health		Bank Transfer			
(40)		East Asia and the Pacific	GBV Programs		Bank Transfer			
(41)		East Asia and the Pacific	Health		Bank Transfer			
(42)		East Asia and the Pacific	Health	71,141	Bank Transfer			
(43)		East Asia and the Pacific	Protection	72,973	Bank Transfer			
(44)		East Asia and the Pacific	Health	92,741	Bank Transfer			
(45)		East Asia and the Pacific	Health	109,779	Bank Transfer			
(46)		East Asia and the Pacific	Health	127,499	Bank Transfer			
(47)		East Asia and the Pacific	Health	143,512	Bank Transfer			
(48)		East Asia and the Pacific	Health	169,720	Bank Transfer			
(49)		East Asia and the Pacific	Health	214,427	Bank Transfer			
(50)		East Asia and the Pacific	Health	234,783	Bank Transfer			
(51)		East Asia and the Pacific	Health	1,210,099	Bank Transfer			
(52)		East Asia and the Pacific	Education	1,523,879	Bank Transfer			
(53)		East Asia and the Pacific	Distribution	1,643,467	Bank Transfer			
(54)		East Asia and the Pacific	Distribution	2,762,839	Bank Transfer			

Part II								le F (Form 990), Part II,	
	a) Name of rganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(55)			East Asia and the Pacific	Distribution	3,531,741	Bank Transfer			
(56)			East Asia and the Pacific	Distribution	6,294,182	Bank Transfer			
(57)			Middle East and North Africa	Community Development		Return			
(58)			Middle East and North Africa	Distribution	5,377				
(59)			Middle East and North Africa	Community Development		Bank Transfer			
(60)			Middle East and North Africa	Distribution	-16,688				
(61)			Middle East and North Africa	Health		Bank Transfer			
(62)			Middle East and North Africa	Distribution		Bank Transfer			
(63)			Middle East and North Africa	Distribution		Bank Transfer			
(64)			Middle East and North Africa	Distribution		Bank Transfer			
(65)			Middle East and North Africa	Health		Bank Transfer			
(66)			Middle East and North Africa	Distribution		Bank Transfer			
(67)			Middle East and North Africa	Helath		Bank Transfer			
(68)			Middle East and North Africa	Distribution		Bank Transfer			
(69)			Middle East and North Africa	Community Development	285,802	Bank Transfer			
(70)			Middle East and North Africa	Distribution		Bank Transfer			
(71)			Middle East and North Africa	Health		Bank Transfer			
(72)			Middle East and North Africa	Distribution		Bank Transfer			
(73)			Middle East and North Africa	Health		Bank Transfer			

Part II Contin	uation of Grar	nts and Other Assis	tance to Organiza	tions or Entities	Outside the United	States. (Schedul	e F (Form 990), Part II,	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(74)		Middle East and North Africa	Distribution	2.009.971	Bank Transfer			
		Middle East and North Africa	GBV Programs					
(75) (76)		Middle East and North Africa	GBV Programs	-23,399 -9 284	Return			
(77)		Middle East and North Africa	Protection		Bank Transfer			
(78)		Middle East and North Africa	Distribution		Bank Transfer			
(79)		Middle East and North Africa		10,323	Bank Transfer			
(80)		Middle East and North Africa	_	14,324	Bank Transfer			
(81)		Middle East and North Africa		17,028	Bank Transfer			
(82)		Middle East and North Africa		17,521	Bank Transfer			
(83)		Middle East and North Africa	_	19,000	Bank Transfer			
(84)		Middle East and North Africa	· ·	60,458	Bank Transfer			
(85)		Middle East and North Africa		65,130	Bank Transfer			
(86)		Middle East and North Africa		65,211	Bank Transfer			
(87)		Middle East and North Africa		86,248	Bank Transfer			
(88)		Middle East and North Africa		98,059	Bank Transfer			
(89)		Middle East and North Africa		99,419	Bank Transfer			
(90)		Middle East and North Africa	_	101,250	Bank Transfer			
(91)		Middle East and North Africa		109,721	Bank Transfer			
(92)		Middle East and North Africa	IGBV Programs	121,584	Bank Transfer			

Part II Contin	uation of Grar	nts and Other Assis	tance to Organiza	tions or Entities	Outside the United	States. (Schedul	e F (Form 990), Part II,	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(93)		Middle East and North Africa	Protection	132,458	Bank Transfer			
(94)		Middle East and North Africa	Protection		Bank Transfer			
(95)		Middle East and North Africa	Protection		Bank Transfer			
(96)		Middle East and North Africa	GBV Programs		Bank Transfer			
(97)		Middle East and North Africa	GBV Programs		Bank Transfer			
(98)		Middle East and North Africa	Protection		Bank Transfer			
(99)		Middle East and North Africa	Protection		Bank Transfer			
(100)		Middle East and North Africa	Health	-41,194				
(101)		Middle East and North Africa	Helath		Return			
(102)		Middle East and North Africa	Protection		Bank Transfer			
(103)		Middle East and North Africa	Health		Bank Transfer			
(104)		Middle East and North Africa	Health		Bank Transfer			
(105)		Middle East and North Africa	Distribution		Bank Transfer			
(106)		Middle East and North Africa	Health	96,279	Bank Transfer			
(107)		Middle East and North Africa	GBV Programs	104,739	Bank Transfer			
(108)		Middle East and North Africa	Health	214,625	Bank Transfer			
(109)		Middle East and North Africa	Health	275,418	Bank Transfer			
(110)		Middle East and North Africa	Health	809,405	Bank Transfer			
(111)		Middle East and North Africa	Health	1,399,340	Bank Transfer			

Part II	Continuatio	n of Gran	ts and Other Assis	tance to Organizat	ions or Entities	Outside the United	States. (Schedul	e F (Form 990), Part II,	line 1)
1 (a) Na organi	zation sect	IRS code on and EIN 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)
(440)			Middle East and North Africa	Health	4 044 007	Dank Transfer			
(112)			Middle East and North	GRV Programs	1,611,837	Bank Transfer			
(113)			Africa	ODV i Tograms	10.040	Bank Transfer			
(114)			Middle East and North Africa	Health		Bank Transfer			
(115)			Middle East and North Africa			Bank Transfer			
(116)			Middle East and North Africa	-	31,610	Bank Transfer			
(117)			Middle East and North Africa	-	36,554	Bank Transfer			
(118)			Middle East and North Africa		38,033	Bank Transfer			
(119)			Middle East and North Africa		61,686	Bank Transfer			
(120)			Middle East and North Africa		100,132	Bank Transfer			
(121)			Middle East and North Africa		164,746	Bank Transfer			
(122)			Neighboring States	GBV Programs	19,109	Bank Transfer			
(123)			Russia and the Neighboring States	GBV Programs	26,716	Bank Transfer			
(124)			Russia and the Neighboring States	GBV Programs	29,209	Bank Transfer			
(125)			Russia and the Neighboring States	GBV Programs	57,845	Bank Transfer			
(126)			Russia and the Neighboring States	GBV Programs	130,095	Bank Transfer			
(127)			South Asia	Education	735,324	Bank Transfer			
(128)			South Asia	Education	1,086,433	Bank Transfer			
(129)			South Asia	Education		Bank Transfer			
(130)			South Asia	GBV Programs	-1,603	Return			

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Part	Contin	uation of Grar	nts and Other Assis	stance to Organizat	tions or Entities	Outside the United	d States. (Schedul	e F (Form 990), Part II,	line 1)
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			South Asia	Education					
(13	31)				565	Bank Transfer			_
(13	2)		South Asia	GBV Programs	3 206	Bank Transfer			
(13			South Asia	Governance		Bank Transfer			
(13			South Asia	Water and Sanitation		Bank Transfer			
(13			South Asia	GBV Programs		Bank Transfer			
(13			South Asia	GBV Programs		Bank Transfer			
(13			South Asia	Education		Bank Transfer			
(13			South Asia	Water and Sanitation		Bank Transfer			
(13			South Asia	GBV Programs		Bank Transfer			
(14			South Asia	Education		Bank Transfer			
(14			South Asia	Protection		Bank Transfer			
(14			South Asia	Education		Bank Transfer			
(14			South Asia	Water and Sanitation		Bank Transfer			
(14			South Asia	Education		Bank Transfer			
(14			South Asia	Education		Bank Transfer			
(14			South Asia	Education	325	Bank Transfer			
(14			South Asia	Education		Bank Transfer			
(14			South Asia	Education		Bank Transfer			
(14			South Asia	Education		Bank Transfer			

Part	Conti	nuation of Grar	nts and Other Assi	stance to Organizat	ions or Entities	Outside the United	d States. (Schedul	e F (Form 990), Part II,	line 1)
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			South Asia	Education	==				
(15	00)		South Asia	Education	574,206	Bank Transfer			
(15	31)		South Asia	Education	1.160.452	Bank Transfer			
(15			South Asia	Education		Bank Transfer			
(15			South Asia	Education		Bank Transfer			
(15			Sub-Saharan Africa	Children & Youth Programs		Bank Transfer			
(15			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(15	66)		Sub-Saharan Africa	Governance		Bank Transfer			
(15	7)		Sub-Saharan Africa	GBV Programs	30,172	Bank Transfer			
(15	8)		Sub-Saharan Africa	Children & Youth Programs	31,819	Bank Transfer			
(15	9)		Sub-Saharan Africa	Children & Youth Programs	35,058	Bank Transfer			
(16	60)		Sub-Saharan Africa	Children & Youth Programs	35,825	Bank Transfer			
(16	1)		Sub-Saharan Africa	Children & Youth Programs	73,178	Bank Transfer			
(16	(2)		Sub-Saharan Africa	Children & Youth Programs	74,817	Bank Transfer			
(16	3)		Sub-Saharan Africa	Governance	78,629	Bank Transfer			
(16	4)		Sub-Saharan Africa	Children & Youth Programs	206,820	Bank Transfer			
(16	5)		Sub-Saharan Africa	Community Development	28,577	Bank Transfer			
(16	6)		Sub-Saharan Africa	Walter and Sanitation	-920	Return			
(16	7)		Sub-Saharan Africa	Children & Youth Programs	28	Cash			
(16	8)		Sub-Saharan Africa	Governance	303	Bank Transfer			

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Part II Contin	uation of Grar	nts and Other Assi	stance to Organizat	ions or Entities	Outside the United	d States. (Schedul	le 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)
(400)		Sub-Saharan Africa	Walter and Sanitation	40.700	D 1 T (
(169)		Sub-Saharan Africa	Health	10,708	Bank Transfer			
(170)		Oub-Gariaran Amea	Ticalui	10,877	Bank Transfer			
(171)		Sub-Saharan Africa	Health		Bank Transfer			
(172)		Sub-Saharan Africa	Health		Bank Transfer			
(173)		Sub-Saharan Africa	Health	40,592	Bank Transfer			
(174)		Sub-Saharan Africa	Children & Youth Programs	64,848	Bank Transfer			
(175)		Sub-Saharan Africa	Health	68,418	Bank Transfer			
(176)		Sub-Saharan Africa	Health	73,618	Bank Transfer			
(177)		Sub-Saharan Africa	Health	200,226	Bank Transfer			
(178)		Sub-Saharan Africa	Children & Youth Programs	244,866	Bank Transfer			
(179)		Sub-Saharan Africa	Water and Sanitation	290,110	Bank Transfer			
(180)		Sub-Saharan Africa	Water and Sanitation	-3,447	Return			
(181)		Sub-Saharan Africa	Water and Sanitation	-2,903	Return			
(182)		Sub-Saharan Africa	Distribution	-331	Return			
(183)		Sub-Saharan Africa	Water and Sanitation	2,903	Bank Transfer			
(184)		Sub-Saharan Africa	Water and Sanitation	3,447	Bank Transfer			
(185)		Sub-Saharan Africa	Water and Sanitation	27,909	Bank Transfer			
(186)		Sub-Saharan Africa	Health	95,021	Bank Transfer			
(187)		Sub-Saharan Africa	Water and Sanitation	183,172	Bank Transfer			

Part				stance to Organizat					
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)
			Sub-Saharan Africa	Water and Sanitation					
(188	3)				220,817	Bank Transfer			
			Sub-Saharan Africa	Health					
(189	9)				315,455	Bank Transfer			
(190))		Sub-Saharan Africa	Water and Sanitation	372,542	Bank Transfer			
(191	1)		Sub-Saharan Africa	Water and Sanitation	1.004.410	Bank Transfer			
(192	•		Sub-Saharan Africa	Health	-13,231				
(192	-)	1	Sub-Saharan Africa	Health	-13,231	retuiii			
(193	3)		Cub Canaran / imca	1 Tourist	-2 197	Return			
(·/		Sub-Saharan Africa	Health	2,107	rtotarri			
(194	I)				464	Bank Transfer			
			Sub-Saharan Africa	Health					
(195	5)				1,541	Bank Transfer			
(196	5)		Sub-Saharan Africa	Health	14,642	Bank Transfer			
(197			Sub-Saharan Africa	Health		Bank Transfer			
(198			Sub-Saharan Africa	Health		Bank Transfer			
(199			Sub-Saharan Africa	Protection		Bank Transfer			
(200			Sub-Saharan Africa	Protection		Bank Transfer			
(201			Sub-Saharan Africa	Protection		Bank Transfer			
(202			Sub-Saharan Africa	Protection		Bank Transfer			
			Sub-Saharan Africa	Health					
(203			Sub-Saharan Africa	Health		Bank Transfer			
(204	1)		Cub Cabarra Afri	Ductostica	50,622	Bank Transfer			
(205	5)		Sub-Saharan Africa	Protection	61,770	Bank Transfer			
(206	3)		Sub-Saharan Africa	Protection	74,272	Bank Transfer			

Part II Co	ntinuation of Grar	nts and Other Assi	stance to Organiza	ations or Entities	Outside the United	d States. (Schedul	le F (Form 990), Part II,	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(207)		Sub-Saharan Africa	Protection	75 700	Bank Transfer			
(201)		Sub-Saharan Africa	Protection	75,700	Dalik Hallslei			
(208)				104,509	Bank Transfer			
(209)		Sub-Saharan Africa	Protection	125,217	Bank Transfer			
(210)		Sub-Saharan Africa	Protection	170,305	Bank Transfer			
(211)		Sub-Saharan Africa	Health	348,009	Bank Transfer			
(212)		Sub-Saharan Africa	Health	531,558	Bank Transfer			
(213)		Sub-Saharan Africa	Health		Bank Transfer			
(214)		Sub-Saharan Africa	Health	1,157,225	Bank Transfer			
(215)		Sub-Saharan Africa	Community Development	-38,093				
(216)		Sub-Saharan Africa	GBV Programs	-35,973	Return			
(217)		Sub-Saharan Africa	Community Development	-7,568	Return			
(218)		Sub-Saharan Africa	Community Development	-6,134	Return			
(219)		Sub-Saharan Africa	Community Development	-3,134	Return			
(220)		Sub-Saharan Africa	Community Development	-2,812	Return			
(221)		Sub-Saharan Africa	Community Development	-1,804	Return			
(222)		Sub-Saharan Africa	Community Development	-1,736	Return			
(223)		Sub-Saharan Africa	Community Development	-1,206	Return			
(224)		Sub-Saharan Africa	Community Development		Return			
(225)		Sub-Saharan Africa	Community Development	-1,032	Return			

Part II Contin	nuation of Gran	nts and Other Assi	stance to Organiza	tions or Entities	Outside the United	d States. (Schedul	e F (Form 990), Part II,	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(226)		Sub-Saharan Africa	Community Development	-961	Return			
(227)		Sub-Saharan Africa	Community Development	-785	Return			
(228)		Sub-Saharan Africa	Community Development	-472	Return			
(229)		Sub-Saharan Africa	Community Development		Return			
(230)		Sub-Saharan Africa	Community Development		Return			
(231)		Sub-Saharan Africa	Community Development	-40	Return			
(232)		Sub-Saharan Africa	Community Development		Return			
(233)		Sub-Saharan Africa	Community Development	-4	Return			
(234)		Sub-Saharan Africa	GBV Programs	80	Cash			
(235)		Sub-Saharan Africa	Community Development	166	Cash			
(236)		Sub-Saharan Africa	Community Development	267	Cash			
(237)		Sub-Saharan Africa	Community Development	293	Bank Transfer			
(238)		Sub-Saharan Africa	Community Development	303	Bank Transfer			
(239)		Sub-Saharan Africa	Community Development	307	Bank Transfer			
(240)		Sub-Saharan Africa	Community Development	318	Bank Transfer			
(241)		Sub-Saharan Africa	Community Development	350	Bank Transfer			
(242)		Sub-Saharan Africa	Community Development	357	Bank Transfer			
(243)		Sub-Saharan Africa	Community Development	378	Bank Transfer			
(244)		Sub-Saharan Africa	Community Development	419	Bank Transfer			

Part I	Continu	uation of Grar	nts and Other Assis	stance to Organiza	tions or Entities	Outside the United	States. (Schedul	e F (Form 990), Part II,	line 1)
	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(245))		Sub-Saharan Africa	Community Development	426	Bank Transfer			
(246))		Sub-Saharan Africa	Community Development	455	Bank Transfer			
(247))		Sub-Saharan Africa	Community Development	601	Bank Transfer			
(248)			Sub-Saharan Africa	Community Development	601	Bank Transfer			
(249)			Sub-Saharan Africa	Community Development		Bank Transfer			
(250)			Sub-Saharan Africa	Education		Bank Transfer			
(251)			Sub-Saharan Africa	Community Development		Bank Transfer			
(252)			Sub-Saharan Africa	Community Development		Bank Transfer			
(253)			Sub-Saharan Africa	Community Development		Bank Transfer			
(254)			Sub-Saharan Africa	Community Development		Bank Transfer			
(255)			Sub-Saharan Africa	Community Development		Bank Transfer			
(256)			Sub-Saharan Africa	Community Development		Bank Transfer			
(257)			Sub-Saharan Africa	Community Development	1,021	Bank Transfer			
(258))		Sub-Saharan Africa	Community Development	1,125	Bank Transfer			
(259)			Sub-Saharan Africa	Community Development		Bank Transfer			
(260)			Sub-Saharan Africa	Community Development	1,157	Bank Transfer			
(261)			Sub-Saharan Africa	Community Development	1,200				
(262)			Sub-Saharan Africa	Community Development	1,412	Bank Transfer			
(263)			Sub-Saharan Africa	Health		Bank Transfer			

Part II Conti	nuation of Grai	nts and Other Assi	stance to Organiza	ntions or Entities	Outside the United	d States. (Schedul	le F (Form 990), Part II,	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(264)		Sub-Saharan Africa	Community Development	1,540	Bank Transfer			
(265)		Sub-Saharan Africa	Community Development	1.569	Bank Transfer			
(266)		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(267)		Sub-Saharan Africa	Community Development	1,703				
(268)		Sub-Saharan Africa	Community Development		Bank Transfer			
(269)		Sub-Saharan Africa	Community Development		Bank Transfer			
(270)		Sub-Saharan Africa	Community Development		Bank Transfer			
(271)		Sub-Saharan Africa	Community Development		Bank Transfer			
(272)		Sub-Saharan Africa	Community Development	1,856	Bank Transfer			
(273)		Sub-Saharan Africa	Community Development	1,936	Bank Transfer			
(274)		Sub-Saharan Africa	GBV Programs	2,157	Bank Transfer			
(275)		Sub-Saharan Africa	Community Development		Bank Transfer			
(276)		Sub-Saharan Africa	Community Development	2,287	Bank Transfer			
(277)		Sub-Saharan Africa	Community Development	2,337	Bank Transfer			
(278)		Sub-Saharan Africa	Community Development	2,388	Bank Transfer			
(279)		Sub-Saharan Africa	Community Development	2,400	Bank Transfer			
(280)		Sub-Saharan Africa	Community Development		Bank Transfer			
(281)		Sub-Saharan Africa	Community Development		Bank Transfer			
(282)		Sub-Saharan Africa	Community Development		Bank Transfer			

Part II Contin	nuation of Gran	nts and Other Assi	stance to Organiza	tions or Entities	Outside the United	States. (Schedul	e F (Form 990), Part II,	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(283)		Sub-Saharan Africa	Community Development	2,893	Bank Transfer			
(284)		Sub-Saharan Africa	Community Development	2,910	Bank Transfer			
(285)		Sub-Saharan Africa	Community Development	2,959	Bank Transfer			
(286)		Sub-Saharan Africa	Community Development	3,024	Bank Transfer			
(287)		Sub-Saharan Africa	Community Development	3,033	Bank Transfer			
(288)		Sub-Saharan Africa	Community Development	3,150	Bank Transfer			
(289)		Sub-Saharan Africa	Community Development	3,167	Bank Transfer			
(290)		Sub-Saharan Africa	Community Development	3,538	Bank Transfer			
(291)		Sub-Saharan Africa	Community Development	3,576	Bank Transfer			
(292)		Sub-Saharan Africa	Community Development	3,600	Bank Transfer			
(293)		Sub-Saharan Africa	Community Development	3,771	Bank Transfer			
(294)		Sub-Saharan Africa	Community Development	4,202	Bank Transfer			
(295)		Sub-Saharan Africa	Education	4,212	Bank Transfer			
(296)		Sub-Saharan Africa	Community Development	4,247	Bank Transfer			
(297)		Sub-Saharan Africa	Health	4,285	Bank Transfer			
(298)		Sub-Saharan Africa	Community Development	4,600	Bank Transfer			
(299)		Sub-Saharan Africa	Community Development	5,458	Bank Transfer			
(300)		Sub-Saharan Africa	Community Development	6,722	Bank Transfer			
(301)		Sub-Saharan Africa	Community Development	7,312	Bank Transfer			

Part	Contin	uation of Grar	nts and Other Assi	stance to Organiza	tions or Entities	Outside the United	States. (Schedul	e F (Form 990), Part II,	line 1)
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(30	2)		Sub-Saharan Africa	Community Development	7,426	Bank Transfer			
(30	3)		Sub-Saharan Africa	Distribution	7,500	Bank Transfer			
(30			Sub-Saharan Africa	Community Development		Bank Transfer			
(30			Sub-Saharan Africa	Community Development		Bank Transfer			
(30			Sub-Saharan Africa	Community Development		Bank Transfer			
(30	7)		Sub-Saharan Africa	Community Development		Bank Transfer			
(30	8)		Sub-Saharan Africa	Community Development		Bank Transfer			
(30	9)		Sub-Saharan Africa	Community Development	13,510	Bank Transfer			
(31	0)		Sub-Saharan Africa	Community Development	14,165	Bank Transfer			
(31	1)		Sub-Saharan Africa	Health	14,394	Bank Transfer			
(31	2)		Sub-Saharan Africa	Community Development	14,896	Bank Transfer			
(31	3)		Sub-Saharan Africa	Community Development	16,954	Bank Transfer			
(31	4)		Sub-Saharan Africa	GBV Programs	19,910	Bank Transfer			
(31	5)		Sub-Saharan Africa	Education	19,923	Bank Transfer			
(31	6)		Sub-Saharan Africa	Community Development	22,281	Bank Transfer			
(31	7)		Sub-Saharan Africa	GBV Programs	24,142	Bank Transfer			
(31	8)		Sub-Saharan Africa	Community Development	26,384	Bank Transfer			
(31	9)		Sub-Saharan Africa	Community Development	27,315	Bank Transfer			
(32	0)		Sub-Saharan Africa	Community Development	27,782	Bank Transfer			

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Part II Continu	uation of Gran	nts and Other Assi	stance to Organiza	tions or Entities	Outside the United	l States. (Schedul	e F (Form 990), Part II,	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(321)		Sub-Saharan Africa	Community Development	29,303	Bank Transfer			
(322)		Sub-Saharan Africa	GBV Programs	31.621	Bank Transfer			
(323)		Sub-Saharan Africa	Community Development		Bank Transfer			
(324)		Sub-Saharan Africa	Community Development		Bank Transfer			
(325)		Sub-Saharan Africa	Community Development		Bank Transfer			
(326)		Sub-Saharan Africa	Community Development		Bank Transfer			
(327)		Sub-Saharan Africa	Community Development		Bank Transfer			
(328)		Sub-Saharan Africa	Community Development	38,116	Bank Transfer			
(329)		Sub-Saharan Africa	Community Development	38,886	Bank Transfer			
(330)		Sub-Saharan Africa	Community Development	44,699	Bank Transfer			
(331)		Sub-Saharan Africa	Education	45,532	Bank Transfer			
(332)		Sub-Saharan Africa	Education	46,323	Bank Transfer			
(333)		Sub-Saharan Africa	Health	47,258	Bank Transfer			
(334)		Sub-Saharan Africa	Health	47,351	Bank Transfer			
(335)		Sub-Saharan Africa	Community Development	52,786	Bank Transfer			
(336)		Sub-Saharan Africa	Community Development	53,561	Bank Transfer			
(337)		Sub-Saharan Africa	Education	55,822	Bank Transfer			
(338)		Sub-Saharan Africa	Community Development	60,124	Bank Transfer			
(339)		Sub-Saharan Africa	Health	73,206	Bank Transfer			

Part II								le F (Form 990), Part II,	
	nization sectio	RS code n and EIN oplicable)	(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)
			Sub-Saharan Africa	Health					
(340)					82,434	Bank Transfer			
			Sub-Saharan Africa	Health					
(341)					90,785	Bank Transfer			
(342)			Sub-Saharan Africa	Health	123 367	Bank Transfer			
(342)			Sub-Saharan Africa	Health	123,307	Darik Transici			
(343)			oub oundrain / imou	riculti	136,293	Bank Transfer			
			Sub-Saharan Africa	Education					
(344)					188,977	Bank Transfer			
			Sub-Saharan Africa	Education					
(345)					529,642	Bank Transfer			
			Sub-Saharan Africa	Community					
(346)				Development	1,378,071	Bank Transfer			
			Sub-Saharan Africa	Community Development					
(347)			0 1 0 1 46:	· · · · · · · · · · · · · · · · · · ·	1,582,457	Bank Transfer			
(348)			Sub-Saharan Africa	Education	3,036,085	Bank Transfer			
			Sub-Saharan Africa	Education	, ,				
(349)					3,979,128	Bank Transfer			
			Sub-Saharan Africa	Health					
(350)					-95,307	Return			
			Sub-Saharan Africa	Health					
(351)					525	cash			
			Sub-Saharan Africa	Education					
(352)					9,200	Bank Transfer			
			Sub-Saharan Africa	Education					
(353)				0.717.7	9,956	Bank Transfer			
			Sub-Saharan Africa	GBV Programs					
(354)					10,635	Bank Transfer	-		
(0.5.5)			Sub-Saharan Africa	Education	4,,,,,	D 1 T (
(355)			Cub Cabaran Africa	CDV Dragger	11,482	Bank Transfer	1		
(256)			Sub-Saharan Africa	GBV Programs	14 007	Dank Transfor			
(356)			Sub Saharan Africa	GBV Programs	14,927	Bank Transfer	1		
(357)			Sub-Saharan Africa	ODV FIOGRAMS	15 165	Bank Transfer			
(357)			Sub-Saharan Africa	Health	10,105	Dalik HallSIEI	1		
(358)			Gub-Gariaran Airica	i icaiui	17 172	Bank Transfer			
(330)					17,173	Dalik Halisiei			

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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)
(350)		Sub-Saharan Africa	Health	17 412	Bank Transfer			
(359)		Sub-Saharan Africa	GBV Programs	17,413	Dank Hansier			
(360)				24,035	Bank Transfer			
(361)		Sub-Saharan Africa	Education	28.945	Bank Transfer			
		Sub-Saharan Africa	GBV Programs					
(362)		Sub-Saharan Africa	GBV Programs	30,779	Bank Transfer			
(363)			_	31,777	Bank Transfer			
(364)		Sub-Saharan Africa	Education	38,862	Bank Transfer			
(365)		Sub-Saharan Africa	Health		Bank Transfer			
(303)		Sub-Saharan Africa	Health	40,173	Dank Hansiei	†		
(366)				57,882	Bank Transfer			
(367)		Sub-Saharan Africa	Health		Bank Transfer			
(368)		Sub-Saharan Africa	Health		Bank Transfer			
(369)		Sub-Saharan Africa	Health		Bank Transfer			
(370)		Sub-Saharan Africa	Health	273.187	Bank Transfer			
(371)		Sub-Saharan Africa	Health		Bank Transfer			
(372)		Sub-Saharan Africa	Health		Bank Transfer			
(373)		Sub-Saharan Africa	Health		Bank Transfer			
(374)		Sub-Saharan Africa	Health		Bank Transfer			
(375)		Sub-Saharan Africa	Health		Bank Transfer			
(376)		Sub-Saharan Africa	Community Development		Bank Transfer			
(377)		Sub-Saharan Africa	Children & Youth Programs		Bank Transfer			

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Part II Con	ntinuation of Gran	nts and Other Assi	stance to Organizat	ions or Entities	Outside the United	States. (Schedul	le F (Form 990), Part II	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(378)		Sub-Saharan Africa	Health	15 010	Bank Transfer			
		Sub-Saharan Africa	Children & Youth Programs					
(379)		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(380)		Sub-Saharan Africa	Water and Sanitation		Bank Transfer			
(381)		Sub-Saharan Africa	Water and Sanitation		Bank Transfer			
(382)		Sub-Saharan Africa	Children & Youth	30,572	Bank Transfer			
(383)			Programs	38,769	Bank Transfer			
(384)		Sub-Saharan Africa	Protection	119,830	Bank Transfer			
(385)		Sub-Saharan Africa	Health	-524	Return			
(386)		Sub-Saharan Africa	Health	6,002	Bank Transfer			
(387)		Sub-Saharan Africa	Water and Sanitation		Bank Transfer			
(388)		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(389)		Sub-Saharan Africa	Water and Sanitation		Bank Transfer			
(390)		Sub-Saharan Africa	Water and Sanitation		Bank Transfer			
(391)		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(392)		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(393)		Sub-Saharan Africa	Health		Bank Transfer			
(394)		Sub-Saharan Africa	Goverance		Bank Transfer			
(395)		Sub-Saharan Africa	Children & Youth Programs		Bank Transfer			
(396)		Sub-Saharan Africa	Goverance		Bank Transfer			

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(207)		Sub-Saharan Africa	Goverance	22 774	Bank Transfer			
(397)		Sub-Saharan Africa	Children & Youth Programs					
(398)		Sub-Saharan Africa	Health		Bank Transfer			
(399)		Sub-Saharan Africa	Health		Bank Transfer			
(400)		Sub-Saharan Africa	Health	1,235	Bank Transfer			
(401)		Sub-Saharan Africa	Health	2,495	Bank Transfer			
(402)		Sub-Saharan Africa	Health	2,506	Bank Transfer			
(403)		Sub-Saharan Africa	Health	2,608	Bank Transfer			
(404)		Sub-Saharan Africa	Health	5,938	Bank Transfer			
(405)		Sub-Saharan Africa	Health	6,383	Bank Transfer			
(406)		Sub-Saharan Africa		7,878	Bank Transfer			
(407)			Health	9,668	Bank Transfer			
(408)		Sub-Saharan Africa	Health	14,470	Bank Transfer			
(409)		Sub-Saharan Africa	Health	15,680	Bank Transfer			
(410)		Sub-Saharan Africa	GBV Programs	15,901	Bank Transfer			
(411)		Sub-Saharan Africa	Health	21,008	Bank Transfer			
(412)		Sub-Saharan Africa	Education	23,037	Bank Transfer			
(413)		Sub-Saharan Africa	Health		Bank Transfer			
(414)		Sub-Saharan Africa	Health		Bank Transfer			
(415)		Sub-Saharan Africa	Health		Bank Transfer			

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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)
(440)		Sub-Saharan Africa	GBV Programs	20.004				
(416)		Sub-Saharan Africa	GBV Programs	32,894	Bank Transfer			
(417)		Sub-Sanaran Amea	GBV Flograms	34.207	Bank Transfer			
()		Sub-Saharan Africa	Health	0.,_0.				
(418)				35,565	Bank Transfer			
(419)		Sub-Saharan Africa	GBV programs	36,527	Bank Transfer			
(420)		Sub-Saharan Africa	Health		Bank Transfer			
(421)		Sub-Saharan Africa	Health		Bank Transfer			
(422)		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(423)		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(424)		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(425)		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(426)		Sub-Saharan Africa	Health		Bank Transfer			
(427)		Sub-Saharan Africa	Health	56,822	Bank Transfer			
(428)		Sub-Saharan Africa	Health		Bank Transfer			
(429)		Sub-Saharan Africa	Health		Bank Transfer			
(430)		Sub-Saharan Africa	Health		Bank Transfer			
(431)		Sub-Saharan Africa	Health		Bank Transfer			
(432)		Sub-Saharan Africa	Health		Bank Transfer			
(433)		Sub-Saharan Africa	Children & Youth Programs		Bank Transfer			
(434)		Sub-Saharan Africa	Health		Bank Transfer			

Part	Contin	uation of Grar	nts and Other Assi	stance to Organiza	tions or Entities	Outside the United	d States. (Schedul	e F (Form 990), Part II,	line 1)
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			Sub-Saharan Africa	Health					
(43	5)		0 1 0 1 46:		151,912	Bank Transfer			
(43	6)		Sub-Saharan Africa	Health	152,828	Bank Transfer			
(43			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(43			Sub-Saharan Africa	Health		Bank Transfer			
(43			Sub-Saharan Africa	Education	208,665	Bank Transfer			
(44			Sub-Saharan Africa	Health		Bank Transfer			
(44	1)		Sub-Saharan Africa	Health	222,830	Bank Transfer			
(44			Sub-Saharan Africa	Health		Bank Transfer			
(44			Sub-Saharan Africa	Health		Bank Transfer			
(44			Sub-Saharan Africa	Health		Bank Transfer			
(44			Sub-Saharan Africa	Education		Bank Transfer			
(44			Sub-Saharan Africa	Health		Bank Transfer			
(44			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(44	8)		Sub-Saharan Africa	Education	387,191	Bank Transfer			
(44	9)		Sub-Saharan Africa	Education	419,920	Bank Transfer			
(45	0)		Sub-Saharan Africa	Health	518,617	Bank Transfer			
(45			Sub-Saharan Africa	Education		Bank Transfer			
(45	•		Sub-Saharan Africa	Health		Bank Transfer			
(45			Sub-Saharan Africa	Health		Bank Transfer			

Schedule F (Form 990) 2013

Part II Contin	nuation of Grai	nts and Other Assi	stance to Organiza	tions or Entities	Outside the Unite	d States. (Schedu	le 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)
		Sub-Saharan Africa	Health					
(473)				24,220	Bank Transfer			
(474)		Sub-Saharan Africa	GBV Programs	20.200	Donk Tropofor			
(474)		Sub-Saharan Africa	Health	28,200	Bank Transfer			
(475)		Sub-Sanaran Amca	i icaitii	28 391	Bank Transfer			
		Sub-Saharan Africa	GBV Programs					
(476)	+	Sub-Saharan Africa	GBV Programs	30,000	Bank Transfer			
(477)		Sub-Sanaran Amca	GBV Programs	40,000	Bank Transfer			
		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(478)		Sub-Saharan Africa	Health	40,000	Dalik Hallslei			
(479)		Cub Gariaran 7 imoa	ricaiai	57.191	Bank Transfer			
		Sub-Saharan Africa	Children & Youth Programs					
(480)		Sub-Saharan Africa	Children & Youth	48,701	Bank Transfer			
(481)		oub canaran / anca	Programs	63,536	Bank Transfer			
(482)		Sub-Saharan Africa	Children & Youth Programs	189,923	Bank Transfer			
(483)		Sub-Saharan Africa	Children & Youth Programs		Bank Transfer			
(403)		Sub-Saharan Africa	Children & Youth					
(484)			Programs	300,638	Bank Transfer			
(485)		Sub-Saharan Africa	Children & Youth Programs	305,037	Bank Transfer			
(486)		Sub-Saharan Africa	Children & Youth Programs	358,974	Bank Transfer			
(487)		Sub-Saharan Africa	GBV Programs		Bank Transfer			
(.51)		Sub-Saharan Africa	Community	3,327	Bank Hanoloi			
(488)			Development	23,454	Bank Transfer			
(489)		Sub-Saharan Africa	Community Development	50,863	Bank Transfer			
(490)		Sub-Saharan Africa	Health	384.453	Bank Transfer			
(491)		Sub-Saharan Africa	Health		Bank Transfer			

Part II Cor	ntinuation of Gran	nts and Other Assi	stance to Organizat	ions or Entities	Outside the United	d States. (Schedul	le F (Form 990), Part II,	line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(492)		Sub-Saharan Africa	Community Development	10,497	Bank Transfer			
(493)		Sub-Saharan Africa	Water and Sanitation		Bank Transfer			
(494)		Sub-Saharan Africa	Community Development		Bank Transfer			
(495)		Sub-Saharan Africa	Community Development		Bank Transfer			
(496)		Sub-Saharan Africa	Water and Sanitation	107,829	Bank Transfer			
(497)		Sub-Saharan Africa	Water and Sanitation	171,670	Bank Transfer			
(498)		Sub-Saharan Africa	GBV Programs	3,079	Bank Transfer			
(499)		Sub-Saharan Africa	GBV Programs	18,955	Bank Transfer			
(500)		Sub-Saharan Africa	GBV Programs	131,333	Bank Transfer			
(501)		Sub-Saharan Africa	GBV Programs	-22,500	Bank Transfer			
(502)		Sub-Saharan Africa	GBV Programs	4,486	Bank Transfer			
(503)		Sub-Saharan Africa	GBV Programs	14,720	Bank Transfer			
(504)		Sub-Saharan Africa	GBV Programs	15,659	Bank Transfer			
(505)		Sub-Saharan Africa	GBV Programs	16,613	Bank Transfer			
(506)		Sub-Saharan Africa	GBV Programs	19,990	Bank Transfer			
(507)		Sub-Saharan Africa	GBV Programs	20,099	Bank Transfer			
(508)		Sub-Saharan Africa	GBV Programs	23,582	Bank Transfer			
(509)		Sub-Saharan Africa	GBV Programs	25,514	Bank Transfer			
(510)		Sub-Saharan Africa	GBV Programs	25,514	Bank Transfer			

Part II	Continua	tion of Gran	ts and Other Assi	stance to Organizat	ions or Entities	Outside the United	States. (Schedul	e F (Form 990), Part II,	line 1)
	ame of nization	(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)
			Sub-Saharan Africa	GBV Programs					
(511)					42,957	Bank Transfer			
(512)			Sub-Saharan Africa	GBV Programs	47 554	Bank Transfer			
(513)			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(514)			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(515)			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(516)			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(517)			Sub-Saharan Africa	GBV Programs		Bank Transfer			
			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(518)			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(520)			Sub-Saharan Africa	Governance		Bank Transfer			
(521)			Sub-Saharan Africa	Governance		Bank Transfer			
(522)			Sub-Saharan Africa	GBV Programs	-33,177				
(523)			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(524)			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(525)			Sub-Saharan Africa	GBV Programs	33,177	Bank Transfer			
(526)			Sub-Saharan Africa	GBV Programs	33,177	Bank Transfer			
(527)			Sub-Saharan Africa	GBV Programs		Bank Transfer			
(528)			Sub-Saharan Africa	GBV Programs	12,000	Bank Transfer			
(529)			Sub-Saharan Africa	Emergency response		Bank Transfer			

Part II Con	ntinuation of Grar	nts and Other Assi	stance to Organizat	ions or Entities	Outside the United	d States. (Schedul	e F (Form 990), Part II,	, line 1)
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(===)		Europe (Including Iceland and	Emergency response	= 400				
(530)		L		5,492	Bank Transfer			
(531)		Europe (Including Iceland and	Emergency response	5,492	Bank Transfer			
(532)		Sub-Saharan Africa	Emergency response	59,468	Bank Transfer			
(533)		East Asia and the Pacific	Emergency response	150,000	Bank Transfer			
(534)		East Asia and the Pacific	Emergency response	400,000	Bank Transfer			
(535)		Sub-Saharan Africa	Emergency response		Bank Transfer			
(536)		Sub-Saharan Africa	Emergency response		Bank Transfer			
(537)		Sub-Saharan Africa	Emergency response		Bank Transfer			
(538)		Sub-Saharan Africa	Emergency response		Bank Transfer			
(539)								
(540)								
(541)								
(542)								
(543)								
(544)								
(545)								
(546)								
(547)								
(548)								

Part III Continuation of Gran	nts and Other Assistance	to Individua	ls Outside the U	nited States. (S	chedule F (For	m 990), Part III)	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(19) TRANSPORTATION	Middle East and North Africa		1.554	Bank Transfer			
	Russia and the Neighboring						
(20) OTHER ASSISTANCE	States		90,692	Bank Transfer			
(21) PROGRAM SUPPLIES & MATI			12,997	Bank Transfer			
(22) TRANSPORTATION	Russia and the Neighboring States		119	Cash			
(23) OTHER EDUCATION	South Asia		3,491,036	Bank Transfer			
(24) PROGRAM SUPPLIES & MATI	South Asia		5,418,396	Bank Transfer			
	South Asia						
(25) SERVICE CONTRACTS	South Asia		148,908	Bank Transfer			
(26) TRANSPORTATION			872	Bank Transfer			
(27) CASH ASSISTANCE	Sub-Saharan Africa		3,409,540	Bank Transfer			
(28) HEALTH CARE	Sub-Saharan Africa		932,993	Bank Transfer			
(29) OTHER ASSISTANCE	Sub-Saharan Africa		12,309	Bank Transfer			
(30) OTHER EDUCATION	Sub-Saharan Africa		4,572,986	Bank Transfer			
(31) PROGRAM SUPPLIES & MATI	Sub-Saharan Africa			Bank Transfer	4,336,962	Program Materials	FMV
(32) REVOLVING LOANS	Sub-Saharan Africa		93,419	Bank Transfer			
(33) SERVICE CONTRACTS	Sub-Saharan Africa		346,877	Bank Transfer			
(34) SHELTER	Sub-Saharan Africa			Bank Transfer			
(35) TRANSPORTATION	Sub-Saharan Africa			Bank Transfer			
(36)			,				
(37)							

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection
Employer identification number

INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Χ Mail solicitations e X Solicitation of non-government grants а Χ Internet and email solicitations Solicitation of government grants b Phone solicitations Special fundraising events C X In-person solicitations d Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or 2a key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes If "Yes." list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) (or retained by) (ii) Activity custody or control of or entity (fundraiser) from activity fundraiser listed in contributions? organization col. (i) Yes No 1 C. Madden Productions LLC Project 10 Park Avenue Suite 2E New York NY 10 planning for Х 0 87.370 0 2 Telefund Inc. Professional Fund raising 0 186 Lincoln st. Suit 100 Boston MA 02111 Χ 26,828 0 3 Eidolon Communications Advise 15 Maiden Lane, Suite 1401 New York NY marketing Х 0 317,750 0 4 Public Interest Communication Professional fundraising 7700 Leesburg pike Falls Church VA 2204 Χ 0 13,224 0 5 Donor Service Group Professional 6715 SunSet Blvd. Los Angeles CA 90028 fundraising 0 Χ 11,789 0 6 0 0 0 7 0 0 0 0 0 0 0 0 0 10 0 0 0 0 456,961 0 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, AZ, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ , NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

Schedule G (Form 990 or 990-EZ) 2014 INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to 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 rece	eipts greater than \$5,00	10.			
			(a) Event #1 reedom Award Dinne (event type)	(b) Event #2 Seattle Dinner (event type)	(c) Other events 3 (total number)	(d) Total events (add col. (a) through col. (c))	
ē			(evelik type)	(oroni typo)	(total names)		
Revenue	1	Gross receipts	4,425,623	103,127	179,636	4,708,386	
ď	2	Less: Contributions Gross income (line 1	4,294,023	92,837	137,373	4,524,233	
		minus line 2)	131,600	10,290	42,263	184,153	
	4	Cash prizes			0	0	
•	5	Noncash prizes			0	0	
Direct Expenses	6	Rent/facility costs	376,484	0	98,697	475,181	
ot Exp	7	Food and beverages			0	C	
Dire	8	Entertainment			0	0	
	9	Other direct expenses	109,068	96,335	43,580	248,983	
	10 11					(724,164) -540,011	
Pa	rt II	Gaming. Complete if t	he organization answe	red "Yes" to Form 990	n Part IV line 19 or r		
		than \$15,000 on Form	•		o,	op 0.10 u 0.0	
		than φ15,000 0π1 0π1	JJU-LZ, IIIC Ga.	(h) Dull tobe/instant		(d) Total coming (add	
ηę			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue				0 1 0 0		() () ()	
Re	1	Gross revenue				0	
_	•	Cross revende					
nses	2	Cash prizes				0	
Direct Expenses	3	Noncash prizes				0	
Direct	4	Rent/facility costs				0	
	5	Other direct expenses				0	
		,	Yes %	Yes %	Yes %		
	6	Volunteer labor	No No	No	No No		
	7	Direct expense summary. Add	d lines 2 through 5 in colu	mn (d)		(0)	
	8	Net gaming income summary.	. Subtract line 7 from line	1, column (d)		0	
0		Enter the etato(a) in which the er	anization conducts gamin	a activition:			
	a Is	Enter the state(s) in which the org s the organization licensed to co f "No," explain:	-	each of these states? .		. Yes No	
10		Vere any of the organization's gaf "Yes," explain:	aming licenses revoked, s	•	•		

Sched	ule G (Form 990 or 990-EZ) 2014 INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870 Page 3
11	Does the organization conduct gaming activities with nonmembers?
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?
13	Indicate the percentage of gaming activity conducted in:
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address
15a b	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
V	amount of gaming revenue retained by the third party \$\bigs\tag{\text{P}} \\ \text{\$\text{\$}} \\ \$
С	If "Yes," enter name and address of the third party:
	Name ▶
	Address ▶
16	Gaming manager information:
	Name ▶
	Gaming manager compensation \$
	Description of services provided
	Director/officer Employee Independent contractor
17	Mandatory distributions:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
L	retain the state gaming license?
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ 0
Part	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information
	(see instructions).
Part I	Il Line 6 and 7 The information for line 7 (food and beverages) is combined into line
o (Re are n	ent/facility costs) as most facilities generally provide the food and beverages which ot usually not broken out separately by the vendors on invoices.
<u> </u>	ot usually not broken out separately by the vendors on invoices.

SCHEDULE I (Form 990)

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

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection
Employer identification number

OMB No. 1545-0047

INTERNATIONAL RESCUE COMM	IITTEE, INC					1	3-5660870
Part I General Information	n on Grants	and Assistance					
1 Does the organization mainta	ain records to su	bstantiate the amou	int of the grants or assis	stance, the grantees' e	ligibility for the grants of	or assistance, and	
the selection criteria used to	award the grants	s or assistance?					. X Yes No
2 Describe in Part IV the organ	ization's proced	ures for monitoring	the use of grant funds ir	the United States.			
Part II Grants and Other	Assistance to	Domestic Orga	nizations and Dome	estic Governments	. Complete if the or	ganization answere	ed "Yes" to Form 990
Part IV, line 21, for a	any recipient t	hat received more	e than \$5,000. Part II	can be duplicated i	if additional space is	needed.	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) LAO Family							Youth Program
2325 East 12t h Street Oakland, CA 94	94-3115164	501 (C) (3)	215,596	0			
(2) Ethiopian Community Dev. Council							Refugee Programs
901 South highland St. Arlington, VA 2	52-1308986	501 (C) (3)	147,009	0			
(3) Lutheran Social Services of the Na							Refugee Programs
4406 Georgia Avenue, NW Washingto	53-0207407	501 (C) (3)	119,630	0			
(4) English Center							Youth Programs
66 Franklin Street, Suite 220 Oakland,	94-2416184	501 (C) (3)	99,223	0			
(5) Hayward Adult School							Youth Programs
22100 Princeton Street Hayward, CA 9	94-1693499	501 (C) (3)	98,016	0			
(6) API Chaya							Anti-Trafficking
P.O. Box 14047 Seattle, WA 98114	91-1674016	501 (C) (3)	78,131	0			
(7) Youth Care							Anti-Trafficking
2500 NE 54th Street Seattle, WA 9810	91-0917079	501 (C) (3)	50,000	0			
(8) Assoc. for Supportive Childcare							Children and Youth
3910 S. Rural Road, Suite E Tempe, A	86-0332919	501 (C) (3)	48,293	0			Services
(9) World relief							Refugee Programs
102 sixth Avenue , NE, Suit A Glen Bu	07-7078194	501 (C) (3)	38,400	0			
(10) Refugee Transitions							Youth Programs
870 Market Street, Suite 718 San Fran	94-3112099	501 (C) (3)	37,452	0			
(11) Arizona Board of Regents for Unive							Refugee Programs
888 N Euclid Avenue Room 510 Tucso	74-2652689	501 (C) (3)	36,107	0			
(12) NW JUSTICE PROJECT							Refugee Programs
510 Larson Building, 6 South 2nd st Ya		501 (C) (3)	30,000	0			
2 Enter total number of section							19
3 Enter total number of other or	rganizations liste	ed in the line 1 table				<u></u>	1

	(f) Description of r	ethod of valuation (book, MV, appraisal, other)		(d) Amount non-cash assist	(c) Amount of cash grant	(b) Number of recipients	(a) Type of grant or assistance
							Community Integration
			0		43,859	0	
owerment	Economic Empow						Economic Empowerment
		FMV	10,945		2,583,542	0	
							Education Programs
			0		30,991	0	
							Emergency Response
			0		202,469	0	
ıming	Health programmii						Health programming
		FMV	18,085		491,061	0	
					00.007		Immigration Programs
t Dua susana	Matabina Crant Dr		0		29,837	0	Matakina Canat Danasana
Programs	Matching Grant Pr	FMV	26,306	4.4	4,715,307	0	Matching Grant Programs
						· ·	art IV Supplemental Information. Provi
		ammatic	ial and p	periodic financ	ith the submission of	oughout the activity w	bgrantee, the signing of the grant agreement and ports as required per the grant agreement.
						monitoring the use of	
		viewing	limited	ncluding but no	runds within the US i	monitoring the use of	rt I Line 2 IRC has detailed required procedures for
		viewing					ort I Line 2 IRC has detailed required procedures for ogrammatic and financial reports, on-site monitoring
			uired.	/ building as re	ts as well as capacit	visits, phones contac	
		e	luired. elped re	/ building as re	ts as well as capacit	visits, phones contact	ogrammatic and financial reports, on-site monitorin
		e	luired. elped re	/ building as re	ts as well as capacit	visits, phones contact	ogrammatic and financial reports, on-site monitoring a little col. B Number of recipients is noted it to
		e	luired. elped re	/ building as re	ts as well as capacit	visits, phones contact	ogrammatic and financial reports, on-site monitoring and III Line Col. B Number of recipients is noted it to the second newly arrived refugees and provided second provided second newly arrived refugees.
			uired.	/ building as re	ts as well as capacit	visits, phones contac	ogrammatic and financial reports, on-site monitorin

Continuation Sheet for Schedule I (Form 990)

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

13-5660870

Part II Continuation of Grants a		sistance to Gov	ernments and O	rganizations in t	he United States	13-5660870	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(13) New Ventures Advisors							Refugee Programs
2506 North Clark Chicago, IL 60614	27-1433311	Not Exempt	25,000	0			
(14) DODGE City Community College							Refugee Programs
2501 N14th Ave. Dodge City, KS 67801	48-1164712	501 (C) (3)	23,310	0			01.11.1.11.11.11
(15) Lutheran Social Services of the SW3443 N. Central Ave. North Rotunda Phoenix,	86-0252302	501 (C) (3)	20,063	0			Children and Youth Services
(16) Capital Area Asset Builders 3516 Eastern Ave. Baltimore, MD 21224	52-2002672	501 (C) (3)	15,525	0			Children and Youth Services
(17) Thatre of the Operaressed NYC	32-2002012	501 (C) (S)	10,020	0			Youth Programs
68 Jay Street, Suite 220, Brooklyn, NY 11202	45-4815944	501 (C) (3)	14,250	0			TouriTrograms
(18) Lutheran Social Services of the National	F2 0207407			0			Refugee Programs
4406 Georgia Avenue, NW Washington, DC 2	53-0207407	501 (C) (3)	7,686	U			Youth Programs
(19) San Diego Youth Services3255 Wing Street San Diego, CA 92110	95-2648050	501 (C) (3)	7,500	0			Toutil Flograms
(20) Jewish Community Services			1,000				Refugee Services
5750 Park Heights Avenue Baltimore, MD 212	52-0607909	501 (C) (3)	6,500	0			
(21)							
(22)							
(23)							
(24)							
(25)							
(26)							
(27)							
(28)							
(29)							

Continuation Sheet for Schedule I (Form 990)

Name of the organization

INTERNATIONAL RESCUE COMMITTEE, INC

Page 1 of 1

of 1

INTERNATIONAL RESCUE COMMITTEE, INC

Part III Continuation of Grants and Other Assistance to Individuals in the United States

INTERNATIONAL RESCUE COMMITTEE, INC					13-5000870
Part III Continuation of Grants and Ot	ther Assistance to Inc	dividuals in the Un	ited 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
Resettlement Programs					Resettlement Programs
Ω	0	14,805,571	14,607	FMV	
Youth Programs					
9	0	181,463	0		
10					
_11					
12					
_13					
44					
_15					
_16					
17					
_18					
19					
20					
21					
_22					
22					
24					
25					
_26					

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

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

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection Employer identification number

	RNATIONAL RESCUE COMMITTEE, INC	0870		
Par	t I Questions Regarding Compensation		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		res	NO
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
	ia:			
3	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.			
	X Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	Χ	
b b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b 4c	Х	Х
5 a	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: The organization?	5a		X
b	Any related organization?	5b		X
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			V
a b	The organization?	6a 6b		X
-	If "Yes" to line 6a or 6b, describe in Part III.	0.0		X
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported in 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	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

13-5660870

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 in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual **(B)** Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (D) Nontaxable (E) Total of columns (F) Compensation (A) Name and Title other deferred benefits (B)(i)-(D) in column (B) reported (iii) Other (i) Base (ii) Bonus & incentive compensation as deferred in prior reportable compensation compensation Form 990 compensation 51,200 662.538 David Miliband (i) 591,846 19,492 1 Dir/CEO/ Pres. (ii) Patricia Long (i) 315,122 29,949 2,092 347,163 2 CFO, SVP Finance (ii) Carrie Simon (i) 215,287 24,988 6,780 247,055 (ii) 3 General Counsel George Biddle (i) 255,440 16,258 18,735 290,433 **4** Executive Vice President (ii) 13,311 John Shumaker (i) 306,532 8,760 328,603 5 Chief of Party, PRP (ii) 312,367 **Edward Bligh** 289,876 21,788 703 (i) 6 Vice President, Communications (ii) John Keys (i) 229,449 5,621 3,122 238,192 7 Senior Vice President, Programs (ii) Sandra Mitchell (i) 237,750 16,901 7,284 261,935 8 Vice President, International Program (ii) Mary Jane Jamar 235,480 20,461 6,903 262,844 (i) 9 Chief HR Officer (ii) Sharon Waxman 235,266 22,371 1,893 259,530 (i) (ii) **10** Vice President, Advocacy 201,401 Ciaran Donnelly (i) 177,647 17,111 6,643 11 Senior Vice President, International F (ii) 222,312 Jennifer Sime (i) 194,817 20,752 6,743 12 Senior Vice President ,US Program (ii) Madlin Sadler (i) 328,049 14,867 18,730 361.646 13 Senior Vice President, Operation & S (ii) Carrie Welch 242.394 16,895 10,516 269.805 (i) **14** SVP. External Relations (ii) (i) 15 (ii) (i) 16 (ii)

Part III Supplemental Information

or any additional information.
Part I Line 3 The IRC Board of Directors established a Board Compensation Committee in Nov.2004. Pursuant to IRC Bylaws and Board
Governance Guidelines, Committee members are nominated by the Nominating and Governance Committee and presented to the full Board
or approval at the Annual Meetings. All Compensation Committee members are independent, uncompensated members of the Board. The
Compensation Committee meets annually to review the performance of and determine compensation for the President & CEO. In
addition, the Committee reviews compensation for the Senior executive team (which includes Officers and Key Employees). An
experienced, independent consultant is engaged to compile comparative compensation data, compensation ranges and related matters.
The consultant also presents to the Committee a review of Intermediate Sanctions rules, any changes in those rules in the
preceding year and the manner in which the Compensation Committee needs to proceed in order to be compliant. The consultant makes
nis presentation verbally, in person, to the Committee, as well as in the form of a written report. The Compensation Committee
naintains a record of its review and determinations in Committee meeting minutes.
Part I Line 4a \$177,188 severance was paid to John Keys.
Part II Line 4b During the reporting period IRC made 457F contributions of \$26,500 for David Miliband

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

INTERNATIONAL RESCUE COMMITTEE, INC

Employer identification number 13-5660870

Par	Types of Property			•					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		ethod of sh contr			
1	Art—Works of art								
2	Art—Historical treasures								
3	Art—Fractional interests								
4	Books and publications								
5	Clothing and household								
	goods	Χ		1,687,512	FMV,R	eceipts			
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities—Publicly traded								
10	Securities—Closely held stock								
11	Securities—Partnership, LLC,								
	or trust interests								
12	Securities—Miscellaneous								
13	Qualified conservation								
	contribution—Historic								
	structures								
14	Qualified conservation								
4-	contribution—Other								
15	Real estate—Residential								
16	Real estate—Commercial								
17 40	Real estate—Other								
18	Collectibles								
19 20	Food inventory	X		2,404,674	EN/1\/ F	oro form	o In	voicos	
21	Drugs and medical supplies Taxidermy			2,404,074	FIVIV, F	10 10111	ia ii	voices	•
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ► (FUEL AND TRANS)	Х		708,140	FMV r	ro form	na in	voices	
26	Other ► (EMERGENCY PR()	X		8,150,938					
27	Other ► (EDUCATION MAT)	X		299,405					
28	Other ► (, , , , ,				
29	Number of Forms 8283 received b	y the organ	ization during the tax year for	or contributions for					
	which the organization completed				29				
								Yes	No
30a	During the year, did the organization	on receive b	by contribution any property	reported in Part I, lines 1 thr	ough				
	28, that it must hold for at least thr	ee years fro	om the date of the initial con	tribution, and which is not re	quired				
	to be used for exempt purposes for		holding period?			. 3	0a		Χ
b	If "Yes," describe the arrangement	in Part II.							
31	Does the organization have a gift a	-							
	contributions?					· <u> 3</u>	31	Χ	
32a	Does the organization hire or use	•	<u> </u>						
	noncash contributions?					. 3	2a		Χ
b	If "Yes," describe in Part II.								
33	If the organization did not report at checked, describe in Part II.	n amount in	column (c) for a type of pro	perty for which column (a) is	;				

Cohodulo M (Form 000) (2014)	INTERNATIONAL DECOME COMMITTEE INC	

3-5660870	Page	2
3-3000010	raye	_

Schedule M (Form 990) (2014) INTERNATIONAL RESCUE COMMITTEE, INC	13-5660870	Page 2
Part II Supplemental Information. Provide the information required by Part I, lines 30b,	32b, and 33, and who	ether
the organization is reporting in Part I, column (b), the number of contributions, the	number of items rece	ived,
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 40+ countries we work in and 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 country locations.		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

INTERNATIONAL RESCUE COMMITTEE, INC 13-5660870

Form 990, Part III, Line 4d: Program Service Expenses: 75,624,784, Grants and allocations:
1,127,947, Revenue: 75,624,784 Through 26 regional offices in cities across the U.S. that
support newly arrived refugees by providing immediate aid, including food and shelter. Through
a network of staff members and volunteers the IRC provide access to the tools of
selfreliance,housing,job placement and employment skills,clothing,medical attention,education
and English language classes. Each resettlement office serves as a free, one stop center for
refugees needs during their pivotal first months in the U.S. Through community gardening,
nutrition education and small business farming, the IRC New Roots program is giving hundreds
of refugee the tools and training they need to grow healthy and affordable food and become
self sufficient.The IRC also provides specialized services to victims of human trafficking in
the U.S. men,women and children who have been forced or coerced into modern day slavery.In
addition to integrating refugees into the U.S., the IRC refugee resettlement network provides
comprehensive immigration services to assist refugees and asylees on their path to becoming
permanent resident or U.S citizen.
Form 990, Part III, Line 4d: Program Service Expenses: 36,221,192, Grants and allocations:
1,491,950, Revenue: 36,221,192 IRC employs technical advisors and expert staff in the
following sectors: Economic Recovery and Development; Womens Protection and Empowerment;
Governance & Rights; Health Programs, Child & Youth Protection, Education and Development; and
Research, Evaluation and Learning. In addition to the technical units, IRC maintains regional
units to provide logistical and administrative support to country programs. In FY2015, these
regions were West Africa, Sahel, CAR and Haiti; Horn & East Africa and Zimbabwe; Asia,
Caucasus and Middle East; the Syria Regional Response; and DRC as its own region. IRC also
employs an Emergency Response Team that is always on standby to deploy to a crisis within
seventy two hours, whether they are launching new relief efforts or lending support to IRC
teams already on the ground.

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

Pac	ne.	

Name of the organization	Employer identification number
INTERNATIONAL RESCUE COMMITTEE, INC	13-5660870
be compliant. The consultant makes his presentation verbally, in person, to the Committee, as	
well as in the form of a written report. The Compensation Committee maintains a record of its	
review and determinations in Committee meeting minutes.	
Form 990, Part VI, Section C, Line 19: A copy of IRCs latest financial statements are	
available to the public on its website. 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 5: In the Reconciliation of Net Assets, the amount on Line 5 Other	
changes represents net unrealized gains on investments related to our endowment portfolio not	
captured in the required reporting for the 990 as well as the change in value of split	
interest agreements.	

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Part I

Related Organizations and Unrelated Partnerships

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

Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

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

OMB No. 1545-0047 Open to Public Inspection

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

	(a) Name, address, and EIN (if applicable) of disregarded entity			b) y activity		(c) domicile (state reign country)	To	(d) otal income	End-	(e) of-year assets	Direc	(f) ct control entity	lling
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
Part II	Identification of Related Tax-Exempt Organione or more related tax-exempt organizations of			e organizati	ion an	swered "Ye	s" on	Form 990,	l Part I\	V, line 34 be	ecause	it had	d
	(a) Name, address, and EIN of related organization	,	b) y activity	(c) Legal domicile or foreign cou		(d) Exempt Code s	section	(e) Public charity (if section 501		(f) Direct contro entity	olling	Section 5° contro enti	12(b)(13) olled
	` '	,	,	Legal domicile			section	Public charity		Direct contro	olling	Section 5	12(b)(13) olled
	` '	,	y activity	Legal domicile			section	Public charity	(c)(3))	Direct contro	olling §	Section 5 contro enti	12(b)(13) olled ity?
122 E 42nd 9	Name, address, and EIN of related organization enter For Economic Opportunity Inc 45-3686069	Making bus	y activity	Legal domicile or foreign cou		Exempt Code s	section	Public charity (if section 501	(c)(3))	Direct contro entity	olling S	Section 5 contro enti	12(b)(13) olled ity?
122 E 42nd (Name, address, and EIN of related organization enter For Economic Opportunity Inc 45-3686069 St. New York, NY 10168	Making bus	y activity	Legal domicile or foreign cou		Exempt Code s	section	Public charity (if section 501	(c)(3))	Direct contro entity	olling §	Section 5 contro enti	12(b)(13) olled ity?
122 E 42nd (2) (3)	Name, address, and EIN of related organization enter For Economic Opportunity Inc 45-3686069 St. New York, NY 10168	Making bus consumer k	y activity	Legal domicile or foreign cou		Exempt Code s	section	Public charity (if section 501	(c)(3))	Direct contro entity	olling \$	Section 5 contro enti	12(b)(13) olled ity?
(3) (4)	Name, address, and EIN of related organization enter For Economic Opportunity Inc 45-3686069 St. New York, NY 10168	Making bus consumer k	y activity	Legal domicile or foreign cou		Exempt Code s	section	Public charity (if section 501	(c)(3))	Direct contro entity	olling S	Section 5 contro enti	12(b)(13) olled ity?
(2) (3) (4) (5)	Name, address, and EIN of related organization enter For Economic Opportunity Inc 45-3686069 St. New York, NY 10168	Making bus consumer k	y activity	Legal domicile or foreign cou		Exempt Code s	section	Public charity (if section 501	(c)(3))	Direct contro entity	olling S	Section 5 contro enti	12(b)(13) olled ity?

	ne or more related orga						ı re	S OII	1 F01111 990, Pa	π,	iiie s	04
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Dispropo alloca		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man	i) eral or aging ner?	(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												

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 5 contr enti	rolled
								Yes	No
_(1)									
(2)									
(3)									
(4)									
(5)									
<u>(6)</u>									
(7)									

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

Yes No

13-5660870

Part V	Transactions With Related Or	rganizations Complete if the	ne organization answered "Y	es" on Form 990,	Part IV, line 34, 35b, or 36.
--------	------------------------------	------------------------------	-----------------------------	------------------	-------------------------------

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?

а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х
b	Gift, grant, or capital contribution to related organization(s)	1b	Χ	
С	Gift, grant, or capital contribution from related organization(s)	1c		Χ
d	Loans or loan guarantees to or for related organization(s)	1d		Χ
е	Loans or loan guarantees by related organization(s)	1e		Χ
f	Dividends from related organization(s)	1f		Х
g	Sale of assets to related organization(s)	1g		Χ
h	Purchase of assets from related organization(s)	1h		Х
i	Exchange of assets with related organization(s)	1i		Х
i	Lease of facilities, equipment, or other assets to related organization(s)	1j		Х
-				
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х
ı	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х
0	Sharing of paid employees with related organization(s)	10		Х
р	Reimbursement paid to related organization(s) for expenses	1p		Х
q	Reimbursement paid by related organization(s) for expenses	1q	Χ	
-				
r	Other transfer of cash or property to related organization(s)	1r		Χ
s	Other transfer of cash or property from related organization(s)	1s		Х
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	n thresh	olds.	
	(a) (b) (c)		(d)	
	Name of related organization Transaction Amount involved	Method of	f determi	
	type (a–s)		il ilivoive	
		Cash		
(1) IR	C's Center For Economic Opportunity Inc b 275,000			
		Cash		
2) IR	C's Center For Economic Opportunity Inc q 52,070			
		rvoice		
(3) IR	C's Center For Economic Opportunity Inc q 52,374			
4)				
(5)				
(6)				
	Schedu	le R (For	m 990)	2014

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)	Are all sec	tion c)(3)	(f) Share of total income	(g) Share of end-of-year assets		h) ortionate itions?	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	i) ral or aging ner?	(k) Percentage ownership
-				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
<u>(4)</u>													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													

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

	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
	If "Yes," enter the name of the foreign country:
1	Afghanistan
2	Central African Republic
3	Chad
4	Congo (Kinshasa)
5	Ethiopia
6	Haiti
7	Iraq
8	Pakistan
9	Rwanda
10	Tanzania
11	Thailand
12	Kenya
13	Turkey
14	Uganda
15	Zimbabwe
16	Niger
17	Burundi
18	Burma
19	Cote D'Ivoire (Ivory Coast)
20	Greece
21	Sierra Leone
22	South Sudan
23	Yemen (Aden)
24	Jordan
25	Lebanon
26	Liberia
27	Mali
28	Nigeria
29	Switzerland
30	Malaysia
31	Russia

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

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