** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047 Inspection

A I	or the	2022 calendar year, or tax year beginning and	l ending	_			
B (Check if upplicable	C Name of organization		D Employer identific	cation number		
	Addres	REFUGEES INTERNATIONAL INC.					
	Name change	Doing business as		52-12245	16		
F	□ Initial □ return □ Final	Number and street (or P.O. box if mail is not delivered to street address) 1800 M ST • NW	Room/suite 405N	E Telephone number (202)828			
	□return/ termin ated		4 0 2 M		6,057,548.		
	□Amend	1		G Gross receipts \$ H(a) Is this a group re			
F	return Applic tion			for subordinates			
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	·····= =		
T-	Гах-ехе	empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527		list. See instructions		
	Nebsit		01 027	H(c) Group exemptio			
		organization; X Corporation Trust Association Other	L Year		1 State of legal domicile: DC		
	art I	Summary					
_	1	Briefly describe the organization's mission or most significant activities: ADVO	CATE F	OR LIFESAVII	NG ASSIST.&		
Activities & Governance		PROTECTION FOR DISPLACED PEOPLE AND SOLUT					
rna	2	Check this box if the organization discontinued its operations or dispos	sed of more	than 25% of its net ass	sets.		
ove.	3	Number of voting members of the governing body (Part VI, line 1a)		3	22		
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	22		
es 9		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			38		
ĬĘ		Total number of volunteers (estimate if necessary)			25		
Acti		Total unrelated business revenue from Part VIII, column (C), line 12			0.		
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	······		0.		
				Prior Year	Current Year		
ne	l	Contributions and grants (Part VIII, line 1h)		4,655,256.	3,946,263.		
Revenue	I .	Program service revenue (Part VIII, line 2g)		256,447.	362,553. 235,928.		
Be		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		196,644.	233,926.		
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,108,347.	4,544,744.		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1-3)		10,000.	37,500.		
	I	D (1) (1) (D (1)) (A) (1) (A)		0.	0.		
	45	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,020,248.	3,143,655.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		10,265.	139,345.		
ben	b	Total fundraising expenses (Part IX, column (D), line 25) 534, 4	24.	,			
Ă	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,389,182.	4,889,032.		
		Revenue less expenses. Subtract line 18 from line 12		719,165.	-344,288.		
or Sec			В	eginning of Current Year	End of Year		
sets	20	Total assets (Part X, line 16)		7,519,531.	7,508,050.		
Net Assets or	21	Total liabilities (Part X, line 26)		1,460,873.	2,714,629.		
2	22	Net assets or fund balances, Subtract line 21 from line 20		6,058,658.	4,793,421.		
	art II	Signature Block					
		lties of perjury, I declare that I have examined this return, including accompanying schedule			knowledge and belief, it is		
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	hich preparei	has any knowledge.			
٠.		Signature of officer		I Date			
Sig				Date			
Her	е	JEREMY KONYNDYK, PRESIDENT Type or print name and title					
				Date Check	PTIN		
Paid	ı	Print/Type preparer's name RICHARD J. LOCASTRO, CPA Preparer's signature Preparer's sig		11/11/2023 if self-employ			
	arer	Firm's name GELMAN, ROSENBERG & FREEDMAN			2-1392008		
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N		Tillio Siliv 3			
	z ,	BETHESDA, MD 20814-2930		Phone no 30	1-951-9090		
May	/ the IF	RS discuss this return with the preparer shown above? See instructions		1. 110110 110.00	X Yes No		
	01 12-10		ons.		Form 990 (2022)		

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

(Expenses \$ including grants of \$

) (Revenue \$

le Total program service expenses

4,131,553.

Form 990 (2022)

232002 12-13-22

Form 990 (2022) REFUGEES INTERNATIONAL INC. 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_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	-		
8	, ,			x
•	Schedule D, Part III	8		
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?			37
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		77	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	IZG.		
		12b		X
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the appropriation projection of the constraint of the Heller of the			X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		441	v	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	\vdash
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			\ v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			\ ₃₇
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> X</u>
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	_X_	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20 a		20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X	

232003 12-13-22

Form 990 (2022) REFUGEES INTERNATIONAL INC.

[Part IV | Checklist of Required Schedules (continued)

22 Note the organization report more than \$5,000 of grants or other assistance to or for demestic individuals on Part X, columniar (X), iline 27 in Part XII Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If Y'es," complete Schedule J. 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If Y'es," arawer lines 28 th through 284 and complete Schedule J. If Y'es, to line 283 and the properties of the year, that was issued after December 31, 2002? If Y'es," arawer lines 28th through 284 and complete Schedule J. If Y'es, to line 284 and complete Schedule J. If Y'es, to line 284 and complete Schedule J. If Y'es, to line 284 and complete Schedule J. If Y'es, to line 284 and complete Schedule J. If Y'es, to line 284 and complete Schedule J. If Y'es, to line 284 and complete Schedule J. If Y'es, to line 284 and the schedule J. If Y'es, to line 284 and the schedule J. If Y'es, to line 284 and the schedule J. If Y'es, to line 284 and the schedule J. If Y'es, to line 284 and the schedule J. If Y'es, to line 284 and the transaction when the schedule J. If Y'es, to line 284 and the transaction has not been reported on any of the organization specifies Schedule J. If Y'es, to complete Schedule		Officerist of Required Scriedules (continued)			
Part X. column (A), line 2? If "Yes," completes Schedule I, Parts I and III 20 Did the organization answer "Yes" to Part VII), Section A, line 3, 4, or 5, about compensation of the organization sument and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24 Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," answer lines 26th through 26th and complete Schedule J 17 No." you fail me accrow account of the than a returning second at any time during the year to defease any tax-exempt bonds beyond a temporary period exception? 24d		Dill		Yes	No
24 De the organization answer "Yes" to Part VII Section A, line 3, 4, or 5, about compensation of the organization so current and former offices, directors, furstees, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24 De the organization have a taxexempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that vas issued after December 31, 2002? If "Yes," answer lines 25 through 26d and complete Schedule K. If "No," yo to line 25a 25b Did the organization invest was in your proceeds of faxexempt bonds beyond a temporary period exception? 26c Did the organization aniatian an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 26d Did the organization arise as an 'no behalf of issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 27d Did the organization arise as an 'no behalf of issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds? 28d Section 50(16), 801(6)(4), and 501(c)(29) organizations. Did the organization arise that the reasonable of the analysis of the section of the section of the section of the section with a disqualified person during the year? If "Yes," complete Schedule L. Part I 28d Is the organization aware that it engaged in an excess benefit transaction with a disqualified person on in a prior year, and that the transaction has not been reported on any of the organization profess Schedule L. Part II 28d Did the organization aware that in 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 profess of the development of the organization profess of the organization and the second of the organization provide and profess of the organization and the second of the organization provide and the organization with an eff the organization force, organization force, organization and the org	22		00	v	
and former officers, directors, trustees, key employees, and highest compensated employees? // If "Yes," complete Schedule // Schedule // If the yan; that was issued after December 31, 2002? // "Yes," answer lines 24b through 24d and complete Schedule // If they yan; that was issued after December 31, 2002? // "Yes," answer lines 24b through 24d and complete Schedule // If they yan; that was issued after December 31, 2002? // "Yes," answer lines 24b through 24d and complete Schedule // If they yan; that was issued after December 31, 2002? // "Yes," answer lines 24b through 24d and complete Schedule // If they yan; that was expended to the seempt bords beyond a temporary period exception? 24d	23		22	Λ	
Schedule / Late day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule / K "No." go to fine 25a b. Did the organization inwest any proceeds of tax exempt bonds beyond a temporary period exception? 24a Did the organization inwest any proceeds of tax exempt bonds beyond a temporary period exception? 25b Did the organization maintain an escrow account other than a refunding escrow at any time during the year of defease any tax exempt bonds? 25c Did the organization area at an on behalf of 'issuer for bonds outstanding at any time during the year? 25d Did the organization act as an 'on behalf of 'issuer for bonds outstanding at any time during the year? 25d Section 50(16), 50(16)4, and 50(16)20 and 50(16)20 programizations. Did the organization age in an excess benefit transaction with a disqualified person during the year? 'I "Yes," complete Schedule L, Part I 25a Section 50(16), 50(16)4, and 50(16)20 programizations. Did the organization age in an excess benefit transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule L, Part II 25d Did the organization aware that it engaged in an excess benefit transaction by the organization or program yamount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 25d Did the organization party to a business transaction with one of life following partitive for the 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27d Was the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule L, Part III 28a X 29b Did the organization receive contribution	20				
24a D4 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 "Yea," arrawer lines 24b through 24d and complete Schedule K. If "No.", "go to line 25a		· · ·	23	х	
slast day of the year. Nat was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? c Did the organization minest any proceeds of tax exempt bonds beyond a temporary period exception? d Did the organization anal nat as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization and at as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 50(16)3, 601(64)4, and 501(c)29 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction has not been reported on any of the organization's prior forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 25b Did the organization are port any amount on Part X, line 6 or 22, for neceivables from or payables to any current or former officer, clinector, trustee, key employee, controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 Did the organization aparty taxtee, key employee thereod, a grant or other assistance to any current or former officer, clinector, trustee, key employee, creator or founder, or substantial contributor or engage in any current or former officer, clinector, trustee, key employee, creator or founder, or substantial contribution? 27 Did the organization aparty to be a business transaction with one of the following partition, or a 5%% controlled entity (including an employee thereof) a grant selection committee member, or to a 5%% controlled entity (including an employee thereof) any of these persons? If "Yes," complete Schedule L, Part IV 28a Was the organization receive contributions of art. historical treasures, or there similar assets, or qualified conservation contributions? If "Ye	24a				
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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 980 or 990 EZ? If "Yes," complete Schedule L, Part I 256 X 250 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 271 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or a55% controlled entity (including an employee thereof) of ramily member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 272 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): 273 a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? Yes, complete Schedule L, Part IV 286 X 274	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? (If 'Yes,' complete Schedule L, Part I) 25b X 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part II 27 Did the organization provide a girant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes," complete Schedule L, Part III 28 Was the organization applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV 28a X 29 Did the organization reported in line 28a? If 'Yes,' complete Schedule L, Part IV 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule N, Part I 31 Did the organization inquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization eleven contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule N, Part II 32 Did the organization or 100% of an entity disregarded as separate from the organization under Regulations sections \$12(b)(13)? If 'Yes,' complete Schedul	25a				
that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? // "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity forduliding an employee thereof) or family member of any romplete Schedule L, Part IV 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // ** "Yes," complete Schedule L, Part IV 288 X ** b A family member of any individual described in line 28a? // "Yes," complete Schedule L, Part IV 28c X ** "Yes," complete Schedule L, Part IV 28c X ** "Yes," complete Schedule L, Part IV 28c X ** "Yes," complete Schedule L, Part IV 28c X ** "Yes," complete Schedule M 29 X X ** "It was the organization receive more than \$25,000 in non-cash contributions? // "Yes," complete Schedule M 29 X X ** "It did the organization in liquidate, terminate, or dissolve and cease operations? // "Yes," complete Schedule N, Part I 31 X ** Did the organization in liquidate, terminate, or dissolve and cease operations? // "Yes," complete Schedule N, Part I 31 X ** Was the organization own 100% of an entity disregarded as separate from the organization under Regulations sections \$0.1.7701.2 and \$0.1.7701.3? // "Yes," complete Schedule R, Part I, // III, or IV, and Part V, Iine 1 3		· · · · · · · · · · · · · · · · · · ·	25a		<u> </u>
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Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. 27			000		v
creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? // "Yes," complete Schedule L, Part IV, instructions for applicable filling thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // 1/2 28a X 28b X 2 A family member of any individual described in line 28a? // "Yes," complete Schedule L, Part IV. b A family member of any individual described in line 28a? // "Yes," complete Schedule L, Part IV. 28b X 2 29 Did the organization receive more than \$25,000 in non-cash contributions? // "Yes," complete Schedule L, Part IV. 29 Did the organization receive more than \$25,000 in non-cash contributions? // "Yes," complete Schedule M. 30 Did the organization individual contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // "Yes," complete Schedule M. 30 Did the organization individual contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // "Yes," complete Schedule M. Part I. 31 Did the organization individual contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // "Yes," complete Schedule M. Part I. 31 Did the organization individual contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? // "Yes," complete Schedule M. Part I. 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? // "Yes," complete Schedule N, Part I. 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? // "Yes," complete Schedule R, Part I, III, or IV, and Part V, Iine 1 33 Did the organization new a controlled entity within the meaning of s	27	· · · · · · · · · · · · · · · · · · ·	26		
entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III. Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. c A 3596 controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N. Part II. 31 Did the organization ilquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II. 31 Did the organization sell, exchange, dispose of, or transfer more than 2596 of its net assets? If "Yes," complete Schedule N, Part II. 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.77012 and 301.77013? If "Yes," complete Schedule R, Part II. 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 A X 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All	21				
Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV. b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV. c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV. 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M. 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. 30 Did the organization ilquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II. 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I. 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1 34 Was the organization have a controlled entity within the meaning of section 512(b)(13)? 35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 If "Yes," complete Schedule R, Part V, Iine 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization? 38 If "Yes," complete Schedule R, Part V, Iine 2 39 Did the organization conduct more than 5% of its activitie			27		x
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Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 Y 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Check if Schedule O contains a response or note to any line in this Part V 10 Yes No 11 Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	34		24		x
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part V I 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Check if Schedule O contains a response or note to any line in this Part V 10 Yes No 11 Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	35.2	D1111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
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 organization? If "Yes," complete Schedule R, Part V, line 2 36		•	000		
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 36 X 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 10 11 Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			35b		
If "Yes," complete Schedule R, Part V, line 2 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 10 In Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	36				
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			36		X
Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V The image of the complete Schedule O contains a response or note to any line in this Part V The image of the complete Schedule O complete Schedule O The image of the complete Schedule O complete Schedule O The image of the complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? The image of the image of the complete Schedule O for Part VI, lines 11b and 19? The image of the complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? The image of the ima	37				
Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V The image of the schedule of the schedul		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Check if Schedule O contains a response or note to any line in this Part V Yes No 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			38	X	
Tall Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1 1 2 0	Pai				
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 20 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		Check if Schedule O contains a response or note to any line in this Part V			
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			_		
		Enter the Harrister of Forms W Za moladed of line fall Enter of in flot applicable			
	С	(gambling) winnings to prize winners?	1c	X	
232004 12-13-22 Form 990 (2022)	23200/				(2022)

Form 990 (2022) REFUGEES INTERNATIONAL INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a3	8		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	21	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	38	3	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	31	,	\perp
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	48	1	X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50	;	₩
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			١,,,
	any contributions that were not tax deductible as charitable contributions?	6	3	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	۱ ۵.		
_	were not tax deductible?	61)	
7	Organizations that may receive deductible contributions under section 170(c).	, 📃		X
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			+
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	71	,	+-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	70		x
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	–	,	 ^
u _	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	76	_	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	71		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	98	3	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	91	,	$oxed{oxed}$
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	4		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a	4		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)	-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12	а	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	$+\Box$		
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? N/A	13		
а	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13	a	
h	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	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14	а	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	5	X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	3	X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953? N/A	17	7	<u> </u>
	If "Yes," complete Form 6069.		000	\ (0000)

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

Sec	tion A. Governing Body and Management					Λ
360	tion A. Governing body and Management				Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year	1a	22		162	INO
Ia	If there are material differences in voting rights among members of the governing body, or if the governing	la_				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
L		46	22			
ь	Enter the number of voting members included on line 1a, above, who are independent	1b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship					X
_	officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the			2		
3			-	3		Х
4			filed?	4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9 Did the organization become aware during the year of a significant diversion of the organization's ass			5		X
5	Print of the state			6		X
6	Did the organization have members or stockholders?			0		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap			- -		Х
	more members of the governing body?			7a		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, st			- 1.		Х
•	persons other than the governing body?			7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-	0-	Х	
a	The governing body?			8a_	X	
ь	Each committee with authority to act on behalf of the governing body?			8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			9		Х
Sec	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		21
000	tion B. Policies (This Section B requests information about policies not required by the Internal Re	<u>venue</u>	Code.)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?			10a	162	X
	If "Yes," did the organization have written policies and procedures governing the activities of such ch			IUa		
b				10b		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body		e filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	DCIO	e ming the form:	1 Ia		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y			120		
·	on Schedule O how this was done	,		12c	х	
13	Did the organization have a written whistleblower policy?			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 approva			17		
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	. Бу піч	асренает			
a	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b	Х	
5	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			.55		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	ith a			
.54	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat			. 54		
-	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	-	· ·			
	exempt status with respect to such arrangements?		-	16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed CA, FL, IL, MD, M	A,N	J,NY,VA,AL,	AR,	GA,	HI
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar					
	for public inspection. Indicate how you made these available. Check all that apply.		.,,,	• •		
	X Own website Another's website X Upon request Other (explain	on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co		,	financ	cial	
	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 boo ${\tt JEREMY}$ KONYNDYK - (202)828-0110	ks and	d records			
	1800 M ST. NW, 405N, WASHINGTON, DC 20036					
232006	SEE SCHEDULE O FOR FULL LIST OF STATES			Form	990	(2022)

6

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

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

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

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

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average			(C Pos	C) ition	1		(D) Reportable	(E) Reportable	(F) Estimated
name and title	hours per	(do box	not c	heck I	more	than o	one n an	compensation	compensation	amount of
	week	offic				r/trus		from	from related	other
	(list any	trustee or director						the	organizations	compensation
	hours for related	e or di	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	truste	al trus		yee	m pen		1099-NEC)	1000 (420)	and related
	below	Individual 1	Institutional trustee	Je.	Key employee	Highest compensated employee	Jer.	,		organizations
	line)	Indi	Insti	Officer	Key	High	Former			
(1) ERIC P SCHWARTZ	40.00								_	
PRESIDENT (UNTIL 8/2022)				Х				218,666.	0.	22,604.
(2) JOSEPH HARDIN LANG	40.00									
VP FOR PROGRAMS & POLICY					Х			184,770.	0.	18,026.
(3) LISA MARIE CANTU-PARKS	40.00				l			160 500		40.000
VP OF PHILANTHROPY (UNTIL 10/2022)	40.00				Х			168,789.	0.	19,073.
(4) SARAH E SHEFFER	40.00							154 400	•	10 100
VP FORSTRATEGICOUTREACH	40.00				Х			154,428.	0.	12,198.
(5) ELLEN P MCHUGH	40.00					3,		141 020	0	10 500
CHIEF ADMINISTRATIVE OFFICER	40.00					X		141,030.	0.	18,582.
(6) ELIZABETH ANN HOLLINGSWORTH	40.00					3,7		106 501	0.	11 615
SENIOR DIRECTOR OF GOVERNMENT RELATI	40.00					Х		126,521.	0.	11,615.
DIRECTOR OF FINANCE	40.00					x		113,617.	0.	16,340.
(8) DANIEL P SULLIVAN	40.00					Α		113,017.	0.	10,540.
DIRECTOR FOR AFRICA, ASIA, AND THEMI						x		105,831.	0.	14,128.
(9) JEFFREY TINDELL	5.00							,		,
CO-CHAIR		Х		Х				0.	0.	0.
(10) MAUREEN WHITE	20.00									
CO-CHAIR		Х		Х				0.	0.	0.
(11) DARYA NASR	1.00									
VICE CO-CHAIR		X		Х				0.	0.	0.
(12) VAITHEHI MUTTULINGAM	4.00									
TREASURER		Х		Х				0.	0.	0.
(13) CRAIG JOHNSTONE	1.00								_	_
SECRETARY		Х		Х				0.	0.	0.
(14) JOANNE LEEDOM-ACKERMAN	1.00									
DIRECTOR		Х						0.	0.	0.
(15) JOY LIAN ALFERNESS	6.00									_
DIRECTOR	1 00	Х			_	_		0.	0.	0.
(16) SARAH BACON	1.00	٦,							_	_
DIRECTOR (17) REUBEN BRIGETY	1 00	Х			\vdash			0.	0.	0.
, - · ,	1.00	Х						0.	0.	0
DIRECTOR (UNTIL 2/2022)	<u> </u>	Λ						<u> </u>	U •	0.

Form 990 (2022) REFUGEES	INTERNA	ΙΤΙ	ON	AL	I	NC			52-1224	516	Pa	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	ΙΗiς	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average	(do		Posi			nne	Reportable	Reportable	Es	timate	ed
	hours per	box	, unle	ss per	son is	s both	n an	compensation	compensation	an	nount (of
	week (list any		Ler ar	lu a u	recto	i/irus	lee)	from	from related	l	other	
	hours for	irecto						the organization	organizations (W-2/1099-MISC/	ı	pensa om the	
	related	eord	tee			sated		(W-2/1099-MISC/	1099-NEC)	l	anizati	
	organizations	Individual trustee or director	Institutional trustee		99/	Highest compensated employee		1099-NEC)	10001120)		d relate	
	below	idual	ution	ie.	key employee	est co oyee	er	,		orga	nizatio	ons
	line)	Indiv	Instit	Officer	Key e	High empl	Former					
(18) MATT DILLON	1.00											
DIRECTOR		Х						0.	0.			0.
(19) ELIZABETH GALVIN	1.00											
DIRECTOR		Х						0.	0.			0.
(20) MARIANNE GIMON	1.00											
DIRECTOR (UNTIL 5/2022)		Х						0.	0.			0.
(21) MAX GREENBERG	1.00											•
DIRECTOR	0.50	Х						0.	0.			0.
(22) SOPHAL EAR	2.50								•			•
DIRECTOR	1 00	Х				_		0.	0.			0.
(23) ELENA KVOCHKO	1.00	37						0.	0.			0
OIRECTOR (24) FARAH KATHWARI	1.00	Х						0.	0.			0.
DIRECTOR (UNTIL 5/2022)	1.00	Х						0.	0.			0.
(25) ERIKA LEE	1.00							0.	<u></u>			<u> </u>
DIRECTOR (FROM 5/2022)	1.00	х						0.	0.			0.
(26) KATI MARTON	1.00											
DIRECTOR		Х						0.	0.			0.
1b Subtotal	•							1,213,652.	0.	13:	2,56	66.
c Total from continuation sheets to Part VI								0.	0.			0.
d Total (add lines 1b and 1c)								1,213,652.	0.	13:	2,56	66.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,	000 of reportable			
compensation from the organization												<u>8</u>
											Yes	No
3 Did the organization list any former officer,	director, truste	ee, k	сеу е	empl	oye	e, or	hig	hest compensated emp	loyee on			
line 1a? If "Yes," complete Schedule J for s										3	_	X
4 For any individual listed on line 1a, is the su	•		-					·	-			
and related organizations greater than \$150										4	Х	
5 Did any person listed on line 1a receive or a	accrue compen	sati	on fr	om	any	unre	elate	ed organization or individ	dual for services	_		v

			162	INO
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
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
<u> </u>	Para D. Indian and ant October at an			

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.

(A) Name and business address NONE	(B) Description of services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than

	Form 990 REFUGEES INTERNATIONAL INC. 52-1224516										
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)			(((D)	(E)	(F)	
Name and title	Average		Position					Reportable	Reportable	Estimated	
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of	
	per							from	from related	other	
	week	or				loyee		the organization	organizations (W-2/1099-MISC)	compensation from the	
	(list any hours for	direct				d em b		(W-2/1099-MISC)	(88-2/1099-181130)	organization	
	related	ee or	stee			nsate		(** 27 1033 141100)		and related	
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations	
	below	vidua	tutior	.er	empl	nest c	ner				
	line)	ipul	Inst	Officer	Key	High	Former				
(27) H.M. QUEEN NOOR	1.00										
DIRECTOR		X						0.	0.	0.	
(28) AUGUSTIN NTABAGANYIMANA	2.00										
DIRECTOR		Х						0.	0.	0.	
(29) NINA SAGLIMBENI	10.00										
DIRECTOR		Х						0.	0.	0.	
(30) ELIZABETH STERN	1.00										
DIRECTOR		Х				L	L	0.	0.	0.	
(31) GEORGE VALANOS	1.00										
DIRECTOR		Х						0.	0.	0.	
(32) ALEXIA VON LIPSEY	1.00										
DIRECTOR		Х						0.	0.	0.	
(33) AI WEIWEI	1.00										
DIRECTOR (FROM 11/2022)		Х						0.	0.	0.	
										_	
										_	
										_	
										_	
										_	
		L				L	L				
						L					
Total to Part VII, Section A, line 1c			<u></u> .		<u></u>	<u></u>	<u></u>				

		Check if Schedule O contains a response of	or note to any line	e in this Part VIII			
		•	,	(A)	(B)	(C)	(D)
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
					iunction revenue	business revenue	sections 512 - 514
υs	1 a	Federated campaigns 1a	162,677.				
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues 1b	-				
يَ ق		Fundraising events 1c					
rA		Related organizations 1d					
nje,		Government grants (contributions)					
Sig		All other contributions, gifts, grants, and					
je je		similar amounts not included above 11	3,783,586.				
ള		Noncash contributions included in lines 1a-1f	51,630.				
Se	-	Total. Add lines 1a-1f	,	3,946,263.			
<u> </u>		Totall / Ida miles Ta Ti	Business Code	, ,			
	2 =	CONTRACTS	900099	362,553.	362,553.		
Š	2 b			, , , , , ,	7		
Ser							
ž Š							
gra Re	6						
Program Service Revenue		All other program service revenue					
_		Total. Add lines 2a-2f		362,553.			
	3	Investment income (including dividends, interes	et and	552,555.			
	3			136,517.			136,517.
	4	other similar amounts) Income from investment of tax-exempt bond pr		233,323.			
	5	Royalties					
	3	(i) Real	(ii) Personal				
	6 -	Gross rents 6a	(11) 1 01001141				
		Description Less: rental expenses 6b Rental income or (loss) 6c					
		Net rental income or (loss)					
		Gross amount from sales of (i) Securities	(ii) Other				
	, ,	assets other than inventory 7a 1,612,215.	(ii) Garioi				
		Less: cost or other basis					
ø							
Z	,	and sales expenses 7b 1,512,804. Gain or (loss) 7c 99,411.					
her Revenue		Net gain or (loss)		99,411.			99,411.
<u>⊬</u>		Gross income from fundraising events (not		, 1111			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	0 6	including \$ of					
δ		contributions reported on line 1c). See					
		Part IV, line 188a					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events					
		Gross income from gaming activities. See					
	3 6	Part IV, line 19 9a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities Gross sales of inventory, less returns					
	10 6	and allowances					
		Less: cost of goods sold 10b					
		Net income or (loss) from sales of inventory					
		Net income of (loss) from sales of inventory	Business Code				
sn	11 -						
ee me	ii a						
Miscellaneous Revenue							
See	,	l All other revenue					
Σ	,	• Total. Add lines 11a-11d					
	12	Total revenue. See instructions		4,544,744.	362,553.	0.	235,928.

Form 990 (2022) REFUGEES INTERNATIONAL INC. Part IX Statement of Functional Expenses

Sect	on 501(c)(3) and 501(c)(4) organizations must composite Check if Schedule O contains a response		_	nplete column (A).	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		·	g	-
	and domestic governments. See Part IV, line 21	20,000.	20,000.		
2	Grants and other assistance to domestic	17 500	17 500		
	individuals. See Part IV, line 22	17,500.	17,500.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
•	trustees, and key employees	798,554.	718,698.	39,928.	39,928.
6	Compensation not included above to disqualified	,		,	•
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,799,103.	1,648,138.	67,766.	83,199.
8	Pension plan accruals and contributions (include	440	4	2 2-2	4 444
	section 401(k) and 403(b) employer contributions)	149,572.	145,874.	2,378.	1,320. 1,460.
9	Other employee benefits	198,188.	193,816.	2,912.	1,460.
10	Payroll taxes	198,238.	191,030.	4,197.	3,011.
11	Fees for services (nonemployees):				
a	Management				
	Legal	19,060.		19,060.	
	Accounting	19,000.		19,000.	
	Lobbying Professional fundraising services. See Part IV, line 17	139,345.			139,345.
e f	Investment management fees	38,377.		38,377.	133,343.
'	Other. (If line 11g amount exceeds 10% of line 25,	30/3774		30,3771	
9	column (A), amount, list line 11g expenses on Sch 0.)	496,031.	450,341.	12,163.	33,527.
12	Advertising and promotion	15,804.	8,955.	139.	6,710.
13	Office expenses	42,145.	37,448.	1,871.	2,826.
14	Information technology				
15	Royalties				
16	Occupancy	371,317.	334,146.	21,646.	15,525.
17	Travel	122,814.	122,275.	280.	259.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1.50 1.00		150	1.51 0.50
19	Conferences, conventions, and meetings	169,108.	7,868.	172.	161,068.
20	Interest				
21	Payments to affiliates	16 202	14 650	0.40	601
22	Depreciation, depletion, and amortization	16,282. 72,963.	14,652. 69,712.	949.	681. 1,358.
23	Other expanses Itemize expanses not severed	14,903.	09,/14.	1,093.	1,338.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	DUES AND PUBLICATIONS	129,896.	98,361.	1,187.	30,348.
b	MISCELLANEOUS	37,712.	16,962.	7,411.	13,339.
c	HR GENERAL EXPENSES	24,131.	24,131.	,	-,
d	EQUIPMENT	10,644.	9,578.	621.	445.
	All other expenses	2,248.	2,068.	105.	75.
25	Total functional expenses. Add lines 1 through 24e	4,889,032.	4,131,553.	223,055.	534,424.
26	Joint costs. Complete this line only if the organization				<u> </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2022)
Part X Balance Sheet

1 2 3	Check if Schedule O contains a response or not	te to an	/ line in this Part X	(A)		(B)
2				(A)		(R)
2				Beginning of year		End of year
	Cash - non-interest-bearing			381,442.	1	510,756
2	Savings and temporary cash investments			976,040.	2	449,890
J	Pledges and grants receivable, net			366,457.	3	550,394
4	Accounts receivable, net		4			
5	Loans and other receivables from any current or					
	trustee, key employee, creator or founder, subst					
	controlled entity or family member of any of the	se perso	ons		5	
6	Loans and other receivables from other disquali	fied per	sons (as defined			
	under section 4958(f)(1)), and persons described	d in sec	tion 4958(c)(3)(B)		6	
7	Notes and loans receivable, net				7	
8					8	
9	5			57,402.	9	66,956
10a						
	basis. Complete Part VI of Schedule D	10a				
b	Less: accumulated depreciation	10b	74,366.		10c	35,500
11	Investments - publicly traded securities			5,660,440.	11	4,790,448
12	Investments - other securities. See Part IV, line	11			12	
13	Investments - program-related. See Part IV, line	11			13	
14				14		
15	Other assets. See Part IV, line 11				15	1,104,106
16					16	7,508,050
17		202,265.		272,688		
18		60.400		105 550		
19				68,423.		195,770
20						
21					21	
22						
					24	
25		-				
		s 1 <i>7-</i> 24)	. Complete Part X	1 100 105		2 246 171
						2,246,171
26		······	▼	1,400,073.	26	2,714,629
	_	eck ner				
07	• • • •		_	5 118 467	07	2,935,975
						1,857,446
28				940,191.	28	1,037,440
		oo, cne	ck nere			
20			-		20	
				6 058 658		4,793,421
						7,508,050
	8 9 110 a b 111 122 133 14 15 16 17 18 19 20 21	Notes and loans receivable, net Inventories for sale or use Prepaid expenses and deferred charges Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D Less: accumulated depreciation Investments - publicly traded securities Investments - other securities. See Part IV, line Investments - program-related. See Part IV, line Intangible assets Other assets. See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal transparable peferred revenue and accrued expenses and other payables to any current or form trustee, key employee, creator or founder, subscontrolled entity or family member of any of thee Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, paparties, and other liabilities not included on lines of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, che and complete lines 27, 28, 32, and 33. Net assets without donor restrictions Organizations that do not follow FASB ASC 9 and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or ed and complete lines 29 through 33. Total net assets or fund balances	7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 3 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of trustee, key employee, creator or founder, substantial of controlled entity or family member of any of these persocations and other payables to any current or former office trustee, key employee, creator or founder, substantial of controlled entity or family member of any of these persocations and other liabilities not included on lines 17-24) of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipmer Retained earnings, endowment, accumulated income, or controlled earnings, endowment, accumul	7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 74,366. 11 Investments - publicly traded securities 12 Investments - publicly traded securities 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets with donor restrictions Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances	7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 109,866. 10b Less: accumulated depreciation 74,366. 32,519. 1 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. Add lines 1 through 15 (must equal line 33) 7,519,531. 16 Total assets. Add lines 1 through 15 (must equal line 33) 7,519,531. 17 Accounts payable and accrued expenses 202,265. 18 Grants payable 19 Deferred revenue 68,423. 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X or Schedule D 26 Total liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X or Schedule D 26 Total liabilities (including federal income tax, payables to related third parties, and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 38 Organizations that follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retaired earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 5 Total net assets or fund balances	7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 74 , 366 . 32 , 519 . 10c 11 Investments - publicly traded securities 5 , 660 , 440 . 11 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 15 Other assets. See Part IV, line 11 16 17 18 19 19 19 19 19 19 19 19 19 19 19 19 19

Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1 2 3 4 5 6 7 8	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) Net unrealized gains (losses) on investments Donated services and use of facilities Investment expenses Prior period adjustments Other changes in net assets or fund balances (explain on Schedule O)	1 2 3	4,54 4,88 -34 6,05 -92	9,0 4,2 8,6	32. 88. 58.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	4,79	3,4	<u>21.</u>
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
2-	If the organization changed either its oversight process or selection process during the tax year, explain on School As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	edule O.			
oa	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2022)

232012 12-13-22

SCHEDULE A

(Form 990)

<u>Total</u>

Department of the Treasury Internal Revenue Service

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.

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

2022

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

				NATIONAL INC.				2-1224516		
Pa	art I	Reason for Public (Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructions.			
The	organ	ization is not a private found	ation because it is: (I	or lines 1 through 12, cl	neck only	one box.)				
1		A church, convention of chi	urches, or associatio	n of churches described	in sectio	n 170(b)(1)(A)(i).			
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)								
3		A hospital or a cooperative				(b)(1)(A)(ii	i).			
4	\Box	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,								
·		city, and state:								
5		An organization operated for	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental unit describ	ed in		
J		section 170(b)(1)(A)(iv). (C		loge of aniversity owned	ог орогас	ca by a go	vorninental unit desemb	5 4 III		
6				antal unit described in	aastian 17	70/6\/4\/4\	(.A			
6	V	A federal, state, or local gov	-				-			
1	X	An organization that norma		ntial part of its support fr	om a gove	ernmental	unit or from the general	public described in		
		section 170(b)(1)(A)(vi). (C								
8	Щ	A community trust describe								
9		An agricultural research org	janization described	in section 170(b)(1)(A)(i	ix) operate	ed in conju	nction with a land-grant	college		
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the i	name, city	, and state of the college	or		
		university:								
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	s, membership fees, an	d gross receipts from		
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its support f	rom gross investment		
		income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)								
11		An organization organized a	•	vely to test for public saf	etv. See	section 50	9(a)(4).			
12	一	An organization organized a	-	•	•			purposes of one or		
		more publicly supported or	· ·	•	•		•			
		lines 12a through 12d that						SHOOK THO BOX OH		
_		Type I. A supporting orga						aivina		
а			•	•	•	-				
		the supported organization			majority o	or trie direc	tors or trustees of the si	apporting		
		organization. You must o								
b)		•					-		
		control or management o			ame perso	ns that co	ntrol or manage the sup	oorted		
		organization(s). You mus	t complete Part IV,	Sections A and C.						
С	;		grated. A supporting	g organization operated	in connect	tion with, a	and functionally integrate	ed with,		
		its supported organization	n(s) (see instructions)). You must complete F	Part IV, Se	ctions A,	D, and E.			
d	ı 🗀		integrated. A supp	orting organization oper	ated in cor	nnection w	rith its supported organi	zation(s)		
		that is not functionally int	egrated. The organiz	ation generally must sati	sfy a distr	ibution rec	uirement and an attenti	veness		
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	٧.			
е		Check this box if the orga	anization received a v	written determination from	m the IRS	that it is a	Type I, Type II, Type III			
		functionally integrated, or	Type III non-function	nally integrated supporting	ng organiz	ation.				
f	Ente	er the number of supported o								
g		vide the following information						•		
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed	(v) Amount of monetary	(vi) Amount of other		
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)		

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

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

Se	ction A. Public Support		•	•			
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	(-,	(/	(-/	(-,	(5) =	(-)
	membership fees received. (Do not						
	include any "unusual grants.")	5884166.	3456873.	3746339.	4655256.	3946263.	21688897.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	5884166.	3456873.	3746339.	4655256.	3946263.	21688897.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						4331968.
	Public support. Subtract line 5 from line 4.						17356929.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	5884166.	3456873.	3746339.	4655256.	3946263.	21688897.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	111,780.	119,454.	101,491.	145,623.	136,517.	614,865.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						22303762.
12	Gross receipts from related activities,	etc. (see instruction	ns)			12	865,029.
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 50	01(c)(3)	
	organization, check this box and stor						
Se	ction C. Computation of Publi	c Support Per	centage				
	Public support percentage for 2022 (I		•	.,,		14	77.82 %
15	Public support percentage from 2021	Schedule A, Part I	I, line 14			15	74.61 %
16a	33 1/3% support test - 2022. If the o						
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2021. If the o						
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2022. If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part '	VI how the organiz	zation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pul	blicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2021. If the orga	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, chec	k this box and st	op here. Explain ir	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	llifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	<u> </u>
						Schedule A	(Form 990) 2022

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	<u>, , ,</u>	,				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7 <i>a</i>	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
r	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
			T		1	T	T
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6 Gross income from interest,						
102	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses						
	, , , , , , , , , , , , , , , , , , ,						
_	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '						
	Add lines 10a and 10b Net income from unrelated business						
••	activities not included on line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain						
-	or loss from the sale of capital						
13	assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fi	rst. second, third	fourth, or fifth tax	vear as a section F	501(c)(3) organizatio	on.
	check this box and stop here	· ·		•	•	. , . ,	
Se	ction C. Computation of Publi						
15	Public support percentage for 2022 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2021					16	%
Se	ction D. Computation of Inves	tment Income	e Percentage				
17	Investment income percentage for 20)22 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from					18	<u>%</u>
19a	33 1/3% support tests - 2022. If the						7 is not
	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
·JN	Drivate foundation If the organization	in did not chock a	nov on line 1/1 10/	a or iun chock th	are how and coo inc	tructions	1 1

232023 12-09-22

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
20		
3a		
3b		
3с		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

232024 12-09-22

	dule A (Form 990) 2022 REFUGEES INTERNATIONAL INC.	52-122	<u>451</u>	o Pa	age 5
Pa	rt IV Supporting Organizations (continued)				
		_		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and				
	11c below, the governing body of a supported organization?		11a		
b	A family member of a person described on line 11a above?		11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide				
_	detail in Part VI.		11c		
Sec	tion B. Type I Supporting Organizations				
				Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of more supported organizations have the power to regularly appoint or elect at least a majority of the organization's of the organization of the organiz			100	110
	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 sup				
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated amon supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	g the	1		
2	Did the organization operate for the benefit of any supported organization other than the supported				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in				
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	-			
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations		2		
				Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors				110
•	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		
Sec	tion D. All Type III Supporting Organizations				
				Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the				
_	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax				
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the				
	organization's governing documents in effect on the date of notification, to the extent not previously provided?		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		•		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how				
	the organization maintained a close and continuous working relationship with the supported organization(s).		2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a		_		
•	significant voice in the organization's investment policies and in directing the use of the organization's				
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's				
			3		
Sec	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations				I
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structions).			
а	The organization satisfied the Activities Test. Complete line 2 below.				
b	The organization is the parent of each of its supported organizations. Complete line 3 below.				
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental en	ntity (see instr	uction		ı
2	Activities Test. Answer lines 2a and 2b 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 on line 2a, above, constitute activities that, but for the organization's involvement,				
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in				
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	-			
_	these activities but for the organization's involvement.	F	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.				
2	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or				

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. 232025 12-09-22 Schedule A (Form 990) 2022

trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each

За

3b

1	Check here if the organization satisfied the Integral Part Test as a qualifying			Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	t complete S	Sections A through E.	T
Sect	ion 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		
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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	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		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
•	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
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		
7	Check here if the current year is the organization's first as a non-functional		d Type III supporting orga	nization (see
-	instructions).	, 39. 2.101) ···	

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

e Excess from 2022

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047 Open to Public Inspection

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

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

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

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

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

	Section 501(c)(4), (5), or (6) organizat	ions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
	REFUGEE	S INTERNATIONAL	INC.		52-1224516
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures			3
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	9	3
	Enter the amount of any excise tax				
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	a Was a correction made?				Yes No
_	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	anization is exempt und	er section 501(c),	except section 501(c	e)(3).
1	Enter the amount directly expended	I by the filing organization for se	ction 527 exempt funct	ion activities	S
2	Enter the amount of the filing organ		~		
	exempt function activities				S
3	Total exempt function expenditures		·		
	line 17b				S
4	3 3				
5	Enter the names, addresses and emmade payments. For each organizar				
	contributions received that were pro	•			·
	political action committee (PAC). If				3 3
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2022

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Sch	edule C (Form 990) 2022 REFUG	EES INTERNATIONAL INC.	52-1	224516 Page 2				
Pa	rt II-A Complete if the organizatio section 501(h)).	n is exempt under section 501(c)(3) and fi	led Form 5768 (ele	ction under				
	Check if the filing organization belong expenses, and share of exces	gs to an affiliated group (and list in Part IV each affiliate is lobbying expenditures). sed box A and "limited control" provisions apply.	d group member's name	e, address, EIN,				
	Limits on Lobb	oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals				
1a	Total lobbying expenditures to influence publ	lic opinion (grassroots lobbying)	325.					
b			122					
c	: Total lobbying expenditures (add lines 1a and	758.						
c		4,748,929.						
e	Total exempt purpose expenditures (add lines	s 1c and 1d)	4,749,687.					
	Lobbying nontaxable amount. Enter the amount		387,484.					
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:						
	Not over \$500,000	20% of the amount on line 1e.						
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.						
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.						
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.						
	Over \$17,000,000	\$1,000,000.						
	Grassroots nontaxable amount (enter 25% of	line 1f)	96,871.					
r	Subtract line 1g from line 1a. If zero or less, e	enter -0-	0.					
i	Subtract line 1f from line 1c. If zero or less, er	nter -0-	0.					
j	If there is an amount other than zero on eithe	er line 1h or line 1i, did the organization file Form 4720						
	reporting section 4911 tax for this year?	· · · · · · · · · · · · · · · · · · ·		Yes No				
	4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)							
	Lobk	bying Expenditures During 4-Year Averaging Period						

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total				
2a Lobbying nontaxable amount	362,526.	353,612.	369,459.	387,484.	1,473,081.				
b Lobbying ceiling amount (150% of line 2a, column(e))					2,209,622.				
c Total lobbying expenditures	786.	427.	647.	758.	2,618.				
d Grassroots nontaxable amount	90,632.	88,403.	92,365.	96,871.	368,271.				
e Grassroots ceiling amount (150% of line 2d, column (e))					552,407.				
f Grassroots lobbying expenditures		100.	623.	325.	1,048.				

Schedule C (Form 990) 2022

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	Amount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?	
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?	
c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?	
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?	
e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?	
f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body?	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	
i Other activities?	
j Total. Add lines 1c through 1i	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	
b If "Yes," enter the amount of any tax incurred under section 4912	
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section	
501(c)(6).	
Ye	s 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 campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, answered "Yes."	line 3, is
1 Dues, assessments and similar amounts from members1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	
b Carryover from last year 2b	
c Total 2c	
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	
expenditures next year?	
5 Taxable amount of lobbying and political expenditures. See instructions 5	
Part IV Supplemental Information	
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (S	ee
instructions); and Part II-B, line 1. Also, complete this part for any additional information.	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

Name of the organization

REFUGEES INTERNATIONAL INC.

Employer identification number 52-1224516

Par	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that grant funds can be ι	used only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpose c	onferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recreat	tion or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form o	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
С	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired a		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax
	year		
4	Number of states where property subject to conservation eas	<u> </u>	
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, l	nandling of violations, and enforcing conse	ervation easements during the year
7	Amount of avances incurred in manitoring inspecting band	ling of violations, and enforcing concernati	an accoments duving the year
7	Amount of expenses incurred in monitoring, inspecting, hand	iling of violations, and emorcing conservati	on easements during the year
8	Does each conservation easement reported on line 2(d) above	o satisfy the requirements of section 170/b	\\/\\\P\\\\\
Ü			
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense s	
5	balance sheet, and include, if applicable, the text of the footn	•	
	organization's accounting for conservation easements.	oto to the organization 3 mandar statemen	nts that describes the
Par		Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95		nd balance sheet works
	of art, historical treasures, or other similar assets held for pub	blic exhibition, education, or research in fur	therance of public
	service, provide in Part XIII the text of the footnote to its finan		•
b	If the organization elected, as permitted under FASB ASC 956		
	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:		·
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1		\$ <u></u>
<u>b</u>	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2022

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

	,	<i>'</i>	<u>, , , , , , , , , , , , , , , , , , , </u>	
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		96,881.	74,366.	22,515.
e Other		12,985.		12,985.
Total. Add lines 1a through 1e. (Column (d) must equa	35,500.			

Schedule D (Form 990) 2022

	TERNATIONAL I	NC.	52-1224516 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost of	r end-of-year market value
I) Financial derivatives			
Closely held equity interests			
) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost of	r end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
tal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1) SECURITY DEPOSITS			45,231
(2) RIGHT-OF-USE ASSET			1,058,875
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990. Part X. col. (B) lin	e 15.)		1,104,106

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED PENSION LIABILITY	1,076,251.
(3) OPERATING LEASE LIABILITY	1,169,920.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	2,246,171.

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

Schedule D (Form 990) 2022

Part XI	Recond	ciliation o	of Revenue per	Audited	Financial	Statements	With	Revenue pe	er Return

Pa	rt XI Reconciliation of Revenue per Audited Financial Statem				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	ła.			
1	Total revenue, gains, and other support per audited financial statements		1	3,749,458.	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-920,949.		
b	Donated services and use of facilities	2b	164,040.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	-756,909.
3	Subtract line 2e from line 1			3	4,506,367.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	38,377.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	38,377.
5			··· <u>··</u> ·····	5	4,544,744.
_	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) rt XII Reconciliation of Expenses per Audited Financial Staten	nents Witl	n Expenses per F		4,544,744.
_	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12	nents Witl	n Expenses per F		4,544,744. n.
_	rt XII Reconciliation of Expenses per Audited Financial Staten	nents Witl a.	n Expenses per F		4,544,744.
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12	nents Witl a.	n Expenses per F	Returi	4,544,744. n.
Pa	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents Witl	n Expenses per F	Returi	4,544,744. n.
1 2	rt XII Reconciliation of Expenses per Audited Financial Staten Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents Witl	n Expenses per F	Returi	4,544,744. n.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	ea. 2a 2b	n Expenses per F	Returi	4,544,744. n.
Pa 1 2 a b	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c	n Expenses per F	Returi	4,544,744. n. 5,014,695.
Pa 1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a 2b 2c 2d	164,040.	Returi	4,544,744. n. 5,014,695.
Pa 1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	164,040.	Return	4,544,744. n. 5,014,695.
Pa 1 2 a b c d e	Table Table Table Technical States Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	164,040.	1 2e	4,544,744. n. 5,014,695.
Pa 1 2 a b c d e 3	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	ea. 2a 2b 2c 2d	164,040.	1 2e	4,544,744. n. 5,014,695.
Pa 1 2 a b c d e 3 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a	164,040.	1 2e	4,544,744. n. 5,014,695. 164,040. 4,850,655.
1 2 a b c d e 3 4 a b	Table 12	2a 2b 2c 2d 4a 4b	164,040.	1 2e	4,544,744. n. 5,014,695. 164,040. 4,850,655.
Pa 1 2 a b c d e 3 4 a b c 5	Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	2a 2b 2c 2d 4a 4b	164,040.	1 2e 3	4,544,744. n. 5,014,695. 164,040. 4,850,655.

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

PART V, LINE 4:

ENDOWMENT FUNDS ARE FOR THE PURPOSE OF FURTHERING THE PROGRAMMATIC MISSION OF THE ORGANIZATION. THE CORPUS IS REQUIRED TO BE INVESTED IN PERPETUITY WITH THE INCOME AVAILABLE TO SUPPORT THE PURPOSE SPECIFIED BY THE DONOR.

PART X, LINE 2:

FOR THE YEAR ENDED DECEMBER 31, 2022, REFUGEES INTERNATIONAL, INC. HAS DOCUMENTED ITS CONSIDERATION OF FINANCIAL ACCOUNTING STANDARDS BOARD ASC 740-10, INCOME TAXES, AND DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 REFUGES INTERNATIONAL INC.	52-1224516 Page 5
Schedule D (Form 990) 2022 REFUGES INTERNATIONAL INC. Part XIII Supplemental Information (continued)	
To Minada)	

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

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection

OMB No. 1545-0047

Name of the organization **Employer identification number**

REFUGEES INTERNATIONAL INC.

52-1224516

Part I General Infor	mation on A	ctivities Out	side the United States. Comple	ete if the organization answered "	Yes" on
Form 990, Part IV	/, line 14b.			-	_
<u>-</u>	ū		ds to substantiate the amount of its gra	· —	_
the grantees' eligibility for	or the grants or a	assistance, and t	the selection criteria used to award the	grants or assistance?	Yes No
-	ribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and other assistance out	side the
United States.	a a fallaccia a Daut	. L. C. C. C. Labella	on the code of the stand of the standard control of th	d - d \	
3 Activities per Region. (TI	te following Part (b) Number of	(c) Number of	an be duplicated if additional space is not be duplicated if additional space is not be duplicated in the region	(e) If activity listed in (d)	(f) Total
(a) riegion	offices	employees, agents, and	(by type) (such as, fundraising, pro-	is a program service,	expenditures
	in the region	independent	gram services, investments, grants to	describe specific type	for and investments
		contractors in the region	recipients located in the region)	of service(s) in the region	in the region
		in the region			
CENTRAL AMERICA AND				FIELD RESEARCH IN THE	
THE CARIBBEAN	2	0	PROGRAM SERVICES	REGION	14,451.
EAST ASIA AND THE				FIELD RESEARCH IN THE	11 212
PACIFIC	2	0	PROGRAM SERVICES	REGION	11,212.
				FIELD RESEARCH IN THE	
EUROPE	1	0	PROGRAM SERVICES	REGION	24,477.
				FIELD RESEARCH IN THE	
NORTH AMERICA	1	0	PROGRAM SERVICES	REGION	5,729.
				L	
RUSSIA AND THE NEWLY			DDOGDAM GEDALIGE	FIELD RESEARCH IN THE	6.246
INDEPENDENT STATES	1	0	PROGRAM SERVICES	REGION	6,346.
				FIELD RESEARCH IN THE	
SOUTH AMERICA	1	0	PROGRAM SERVICES	REGION	14,609.
					<u> </u>
				FIELD RESEARCH IN THE	
SOUTH ASIA	0	0	PROGRAM SERVICES	REGION	11,385.
				ETELD DECEMBOUT IN MILE	
SUB-SAHARAN AFRICA	3	0	PROGRAM SERVICES	FIELD RESEARCH IN THE REGION	78 116
3 a Subtotal	11	0		MIGION	78,116.
b Total from continuation	<u> </u>				
sheets to Part I	0	0			0.
c Totals (add lines 3a					
and 3b)	11	0			166,325.
LHA For Paperwork Reduct	ion Act Notice,	see the Instruc	tions for Form 990.	Schedule F	(Form 990) 2022

Schedule F (Form 990) 2022

REFUGEES INTERNATIONAL INC.

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

(i) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2022
(h) Description of noncash assistance						Schedi
(g) Amount of noncash assistance					A A	
(f) Manner of cash disbursement					ecognized as a tax valency letter	
(e) Amount of cash grant					oreign country, roion 501(c)(3) equi	
(d) Purpose of grant					Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter.	
(c) Region					s listed above that are reformed by the grantee of contines.	
(b) IRS code section and EIN (if applicable)					recipient organizations nization by the IRS, or	oti ei galizations o
1 (a) Name of organization					Enter total number of recipient organizations listed a exempt 501(c)(3) organization by the IRS, or for which a Enter total number of other organizations or entities.	1

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

REFUGEES INTERNATIONAL INC.

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)					Schedule F (Form 990) 2022
(g) Description of noncash assistance					Schedi
(f) Amount of noncash assistance					
(e) Manner of cash disbursement					
(d) Amount of cash grant					
(c) Number of recipients					
(a) Type of grant or assistance					

Page 4

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	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 separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	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? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name	of the	organization

Employer identification number

REFUGEES INTERNATIONAL INC.					52-1224516	
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.						
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations b X Internet and email solicitations f Solicitation of government grants c Phone solicitations g Special fundraising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.						
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
SARAH B. WATKINS - 2020 12TH	WRITE GRANT PROPOSALS AND	Yes	No			
ST NW #309, WASHINGTON, DC	REPORTS		х	0.	14,820.	-14,820.
ORR GROUP, INC - 300 K ST, NW, #280, WASHINGTON, DC	OUTSOURCED DEVELOPMENT SERVICES		х	0.	124,525.	-124,525.
Total					139,345.	-139,345.
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2022

REFUGEES INTERNATIONAL INC. 52-1224516 Page 2 Schedule G (Form 990) 2022 Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 Part II of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events (add col. (a) through col. (c)) (total number) (event type) (event type) Gross receipts 2 Less: Contributions Gross income (line 1 minus line 2) 4 Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs 7 Food and beverages Entertainment Other direct expenses **10** Direct expense summary. Add lines 4 through 9 in column (d) Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) Net gaming income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? **b** If "No," explain: _ 10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

Schedule G (Form 990) 2022

b If "Yes," explain:

232082 10-27-22

Schedule G (Form 990) 2022 REFUGEES INTERNATIONAL INC.	02-1224516 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in:	
a The organization's facility	13a %
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 Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount	unt
of gaming revenue retained by the third party \$	
c If "Yes," enter name and address of the third party:	
Name	
Address	
16 Gaming manager information:	
Name	
Name	
Gaming manager compensation \$	
Description of services provided	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	the
organization's own exempt activities during the tax year \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); a	nd Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAIS	SERS:
	,
(I) NAME OF FUNDRAISER: SARAH B. WATKINS	
(I) ADDRESS OF FUNDRAISER: 2020 12TH ST NW #309, WASHINGTON, I	DC 20009
(I) NAME OF FUNDRAISER: ORR GROUP, INC	
(I) ADDRESS OF FUNDRAISER: 300 K ST, NW, #280, WASHINGTON, DC	20007
11, IDDITION OF TONDITION, DC	20001

Schedule G	(Form 990)	REFUGEES	INTERNATIONAL	INC.	52-1224516	Page 4
Part IV	(Form 990) Supplemental Infor	mation (continue	nd)			
		Continue	.u/			

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047

Open to Public Inspection

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

	Employer identification number $52-1224516$			X Yes No		1, for any	(h) Purpose of grant or assistance	REFUGEE ASSISTANCE			1.	0
	Employe		ion			r IV, line 2		REFUGEE				
			the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection			Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any ed if additional space is needed.	(g) Description of noncash assistance					
			for the grants or assis			nization answered "Y	(f) Method of valuation (book, FMV, appraisal, other)					
			grantees' eligibility f		States.	omplete if the orgaled.	(e) Amount of noncash assistance	0.				
9.900/1 0111330 101			or assistance, the		funds in the United	: Governments. Conal space is neede	(d) Amount of cash grant	20,000.			listed in the line 1 table	
	ONAL INC.				pring the use of grant	ations and Domestic	(c) IRC section (if applicable)	501(C)(3)			anizations listed in th	table
	REFUGEES INTERNATIONAL	ind Assistance	to substantiate the	stance?	ocedures for monito	Domestic Organiz \$5,000. Part II can I	(p) EIN	82-2167556			ind government org	s listed in the line 1
	Name of the organization REFUGEES	Irt I General Information on Grants and Assistance	Does the organization maintain records to substantiate the amount of	criteria used to award the grants or assistance?	S	Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Cor recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	1 (a) Name and address of organization or government	INTERNATIONAL REFUGEE ASSISTANCE PROJECT - ONE BATTERY PARK PLAZA, 4TH FLOOR - NEW YORK, NY 10004			Enter total number of section 501(c)(3) and government organizations	Enter total number of other organizations listed in the line 1 table
	Name	Part I	-	,	7	Par	-	INTE PROJ 4TH			8	3

52-1224516

(f) Description of noncash assistance **(e)** Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance 。 17,500. (c) Amount of cash grant (b) Number of recipients 5 (a) Type of grant or assistance SUMMER INTERN STIPENDS

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

PART I, LINE 2:

GRANT FUND O 된 RI REQUIRES GRANTEE(S) TO PROVIDE REPORT FOR USE Schedule I (Form 990) 2022 45 232102 10-31-22

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

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

Employer identification number

REFUGEES INTERNATIONAL INC. 52-1224516 Questions Regarding Compensation Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel 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 (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Written employment contract Compensation committee X Compensation survey or study Independent compensation consultant Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Х a Receive a severance payment or change-of-control payment? 4a Х **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4h X c Participate in or receive payment from an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: Х a The organization? 5a X **b** Any related organization? If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 6 contingent on the net earnings of: X a The organization? 6a Х **b** Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments X not described on lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III Х If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

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

Schedule J (Form 990) 2022

Regulations section 53.4958-6(c)?

52-1224516

Schedule J (Form 990) 2022

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	2 and/or 1099-MISC compensation	and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) ERIC P SCHWARTZ	Ξ	218,666.	0	0	8,921.	13,683.	241,270.	0
PRESIDENT (UNTIL 8/2022)	⊞		0.	0				
(2) JOSEPH HARDIN LANG	Ξ	184,770.	0.	0	7,483.	10,543.	202,796.	
VP FOR PROGRAMS & POLICY	⊞	0	0.		0			0
(3) LISA MARIE CANTU-PARKS	(i)	108,248.	• 0	60,541.	4,740.	14,333.	187,862.	• 0
VP OF PHILANTHROPY (UNTIL 10/2022)	(ii)	0.	0.	0	0	0.	• 0	0
(4) SARAH E SHEFFER	(i)	154,428.	• 0	• 0	6,212.	5,986.	166,626.	• 0
VP FORSTRATEGICOUTREACH	(ii)	0.	0.	0	0	0.	• 0	0
(5) ELLEN P MCHUGH	(i)	141,030.	• 0	• 0	5,117.	13,465.	159,612.	• 0
CHIEF ADMINISTRATIVE OFFICER	Œ	• 0	• 0	• 0	• 0	0 •	• 0	• 0
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52-1224516

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										Schedule J (Form 990) 202
PART I, LINE 4A:	LISA CANTU PARKS RECEIVED \$60,541.									

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

REFUGEES INTERNATIONAL INC.

Inspection Employer identification number

52-1224516

Pai	rtI Ty	pes of Property								
			(a)	(b)	(c)		(d)			
			Check if	Number of	Noncash contribu		Method of de		•	
			applicable	contributions or	amounts reported Form 990, Part VIII,		noncash contribu	tion ar	mounts	S
1	Art Work	s of art		Terrio continuacoa	Tomicoo, rait viii,	mic ig				
2		rical treasures								
3		ional interests								
4	Books and publications Clothing and household goods									
5		ınd household goods								
6	Cars and other vehicles									
7	Boats and planes									
8	Intellectual property									
9	Securities - Publicly traded X 12 51,630 • FMV									
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
	trust inter									
12		- Miscellaneous								
13	Qualified conservation contribution -									
.0	Historic structures									
14	Qualified conservation contribution - Other									
	Real estate - Residential									
15	Real estate - Residential Real estate - Commercial									
16										
17	Real estate - Other									
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other ()									
26	Other	()								
27	Other	()								
28	Other	(
29		f Forms 8283 received by the organic	zation durino	the tax vear for co	ontributions					
	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29									
	ioi willon	tilo organization completed i omi oz	00,1 411 1, 2	onee menious	o				Yes	No
30°	During the	e year, did the organization receive b	v contributio	in any property rep	orted in Part I lines	1 throug	h 28 that it		.00	.,,
ooa		for at least 3 years from the date of								
								20-		Х
		urposes for the entire holding period	·					30a		
		escribe the arrangement in Part II.	aaliau that	auiroo tha ravia	of any nanotandarial a	ontribt	iono?	04		Х
31		organization have a gift acceptance					IUI 18 ?	31	$\vdash\vdash\vdash$	
32a		organization hire or use third parties		_	· ·					37
	contribution							32a		X
b		escribe in Part II.								
33	_	inization didn't report an amount in c	olumn (c) for	r a type of property	for which column (a) is chec	ked,			
	describe i	n Part II.								
LHA	For Par	erwork Reduction Act Notice, see	the Instruct	tions for Form 990).		Schedule M	(Forn	n 990)	2022

232142 09-09-22

SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service

Name of the organization

REFUGEES INTERNATIONAL INC.

Employer identification number 52-1224516

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

THE PUBLIC EDUCATION PROGRAM WAS MERGED WITH THE STRAGETIC OUTREACH

PROGRAM IN 2022.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

RESPONSE. REFUGEES INTERNATIONAL CONTINUES TO ADVOCATE ON THIS ISSUE IN

ONGOING CONGRESSIONAL MEETINGS AND OUTREACH.

REFUGEES INTERNATIONAL AND PARTNERS ADVOCATED FOR A PROTECTION-FIRST

APPROACH TO MIGRATION AT THE SUMMIT AND FOR THE MEANINGFUL INCLUSION OF

AFFECTED PEOPLE, INCLUDING DISPLACED PEOPLE, IN THE AMERICAS AT THE

SUMMIT OF THE AMERICAS PROCEEDINGS. REFUGEES INTERNATIONAL AND PARTNERS

RELEASED A SET OF NINE GUIDING PRINCIPLES FOR THE REGIONAL FRAMEWORK

AND HOSTED A SIDE EVENT AT THE SUMMIT ON MIGRATION POLICY. CLIMATE

DISPLACEMENT PROGRAM MANAGER AND SENIOR ADVOCATE KAYLY OBER TESTIFIED

IN JULY AT A TOM LANTOS HUMAN RIGHTS COMMISSION HEARING ON HUMAN RIGHTS

CONCERNS ARISING FROM THE IMPACTS OF CLIMATE CHANGE AND MIGRATION. THIS

WAS THEIR FIRST-EVER HEARING ON CLIMATE CHANGE AND HUMAN RIGHTS

DISPLACEMENT IN CONGRESS.

REFUGEES INTERNATIONAL ENDORSED THE ETHIOPIA PEACE AND STABILIZATION

ACT, WHICH INCLUDED LANGUAGE ON HOLDING THOSE ACCOUNTABLE FOR THE

CONFLICT, PASSED OUT OF THE SENATE FOREIGN RELATIONS COMMITTEE IN

MARCH. ADDITIONALLY, RI SUCCESSFULLY ADVOCATED, INDIVIDUALLY AND IN

COALITION, FOR NEARLY \$5 BILLION IN FOOD ASSISTANCE IN THE UKRAINE

EMERGENCY SUPPLEMENTAL BILL, WHICH WAS SIGNED INTO LAW IN MAY.

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

Schedule O (Form 990) 2022

Name of the organization REFUGEES INTERNATIONAL INC. Employer identification number 52-1224516

THE NATIONAL DEFENSE AUTHORIZATION ACT (NDAA) PASSED IN DECEMBER AND

INCLUDED AMENDED VERSIONS OF THE BURMA ACT AND THE REFUGEE SANITATION

FACILITY SAFETY ACT. REFUGEES INTERNATIONAL ENDORSED BOTH AND CONDUCTED

A CAMPAIGN IN SUPPORT OF THE BURMA ACT, ALONG WITH OUR ONGOING

HIGH-LEVEL ADVOCACY EFFORTS ON THE LEGISLATION. REFUGEES INTERNATIONAL

WORKED WITH REPRESENTATIVE MENG IN THE PREVIOUS CONGRESS ON THE REFUGEE

SANITATION FACILITY SAFETY ACT.

ON DECEMBER 22, CONGRESS PASSED THE FISCAL YEAR 2023 OMNIBUS PACKAGE.

THE PASSAGE OF AN OMNIBUS WAS A KEY OBJECTIVE AND SUCCESS FOR RI'S

ADVOCACY EFFORTS, AS A FULL-YEAR CONTINUING RESOLUTION WOULD HAVE BEEN

DETRIMENTAL TO HUMANITARIAN PROGRAMMING.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

PROMOTING SUSTAINABLE SOLUTIONS

REFUGEES INTERNATIONAL CONTINUED ITS WORK ON EXPANDING LABOR MARKET

ACCESS FOR REFUGEES AND OTHER FORCED MIGRANTS. IN PARTNERSHIP WITH THE

CENTER FOR GLOBAL DEVELOPMENT, RI CONTINUES ITS RESEARCH AND ADVOCACY

WITH REFUGEE-HOSTING COUNTRIES, INCLUDING COLOMBIA, PERU, ETHIOPIA AND

KENYA. RI ALSO CONTINUED ITS ENGAGEMENT WITH THE WORLD BANK AND OTHER

FINANCING INSTITUTIONS, FOCUSING ON HOW THEIR RESOURCES AND INFLUENCE

COULD IMPROVE CONDITIONS FOR DISPLACED PERSONS IN HOST COUNTRIES. WE

CARRIED OUT ROUNDTABLES AND CONDUCTED RESEARCH TO FURTHER INFLUENCE THE

BANK'S POLICIES AND PROGRAMMING. WE ALSO BEGAN EFFORTS TO HELP REFUGEE

LEADERS INTERFACE WITH THE WORLD BANK, PRIMARILY THROUGH ROUNDTABLES

AND OTHER MEETINGS.

Schedule O (Form 990) 2022

Name of the organization Employer identification number

REFUGEES INTERNATIONAL INC.

WOMEN AND GIRLS

ON THE ONE-YEAR ANNIVERSARY OF THE TALIBAN TAKEOVER IN AUGUST 2022, RI

AND SEVERAL PARTNERS RELEASED AN ISSUE BRIEF ENTITLED FUTURES IN THE

BALANCE: TAKING ACTION TO ENSURE AFGHAN WOMEN'S AND GIRLS' RIGHTS UNDER

TALIBAN RULE. THIS BRIEF OUTLINED SEVEN STEPS FOR CENTERING GENDER

EQUALITY AND HUMAN RIGHTS IN ALL DIPLOMATIC, DEVELOPMENT,

PEACEBUILDING, AND HUMANITARIAN ENGAGEMENT IN AFGHANISTAN. RI ALSO

ADVOCATED FIERCELY AGAINST THE TALIBAN'S DECISION TO PROHIBIT WOMEN

FROM WORKING FOR NGOS IN AFGHANISTAN, ANNOUNCED IN LATE DECEMBER 2022.

RI SURVEYED THE HUMANITARIAN LANDSCAPE AND ADVOCATED FOR MORE EFFECTIVE

INTEGRATION POLICIES BY PUBLISHING THE REPORT, PREPARING FOR THE

UNPREDICTABLE: ENSURING THE PROTECTION AND INCLUSION OF REFUGEES FROM

UKRAINE IN ROMANIA AND MOLDOVA IN OCTOBER 2022.

CLIMATE DISPLACEMENT

AS INTERNATIONAL ORGANIZATIONS GRAPPLE WITH THE REALITY OF CLIMATE

DISPLACEMENT, REFUGEES INTERNATIONAL WORKED WITH UNICEF AND IOM TO

ESTABLISH NEW GUIDING PRINCIPLES FOR CHILDREN ON THE MOVE IN THE

CONTEXT OF CLIMATE CHANGE, WHICH WERE RELEASED IN JULY 2022. IN

SEPTEMBER 2022, REFUGEES INTERNATIONAL LED A LETTER FROM LEADERS OF 14

REFUGEE RESETTLEMENT AND POLICY ORGANIZATIONS TO THE WHITE HOUSE

CALLING ON THE BIDEN ADMINISTRATION TO CREATE RESETTLEMENT PATHWAYS FOR

CLIMATE-IMPACTED POPULATIONS IN THE FY2023 PRESIDENTIAL DETERMINATION.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

AFGHANISTAN

A REFUGEES INTERNATIONAL TEAM TRAVELED TO AFGHANISTAN IN JUNE 2022 TO

SPEAK DIRECTLY WITH PEOPLE INVOLVED IN THE HUMANITARIAN RESPONSE ABOUT

THE CURRENT CHALLENGES AND OPPORTUNITIES. RI PUBLISHED A REPORT, FIT

232212 10-28-22

52-1224516

Name of the organization REFUGEES INTERNATIONAL INC.

Employer identification number 52-1224516

FOR PURPOSE: GETTING HUMANITARIAN AID RIGHT IN AFGHANISTAN ONE YEAR

AFTER THE TALIBAN TAKEOVER THAT PROVIDED AN ASSESSMENT ON A WAY

FORWARD. REFUGEES INTERNATIONAL ALSO PARTNERED WITH THE AFGHAN AMERICAN

FOUNDATION TO LAUNCH A CONSTITUENT TAKE-ACTION CAMPAIGN TO URGE MEMBERS

OF CONGRESS TO URGENTLY PASS THE AFGHAN ADJUSTMENT ACT, A BILL THAT

PROVIDES A PATH TO PERMANENT RESIDENCY FOR THE MORE THAN 70,000 AFGHANS

PAROLED INTO THE UNITED STATES IN THE WAKE OF THE U.S. WITHDRAWAL FROM

AFGHANISTAN IN 2021

THE ROHINGYA CRISIS AND MYANMAR

REFUGEES INTERNATIONAL HAS BEEN A LEADING VOICE IN CALLING FOR THE

UNITED STATES TO RECOGNIZE THE CRIMES COMMITTED BY THE MYANMAR MILITARY

AGAINST THE ROHINGYA PEOPLE AS GENOCIDE AND TO TAKE ACTIONS TOWARD

ACCOUNTABILITY AND ASSISTANCE TO THE ROHINGYA. REFUGEES INTERNATIONAL

CAMPAIGNED FOR THE PASSAGE OF THE BURMA ACT, WHICH WOULD ENACT STEPS TO

HOLD THE MYANMAR MILITARY ACCOUNTABLE AND GET MUCH-NEEDED HUMANITARIAN

AID TO THE REGION. IN DECEMBER 2022, CONGRESS INCLUDED LARGE PARTS OF

THE BURMA ACT IN THE NATIONAL DEFENSE AUTHORIZATION ACT OF 2022 (NDAA).

DEFENDING REFUGEE PROTECTION AND ASYLUM

REFUGEES INTERNATIONAL HELPED PREPARE AN AMICUS BRIEF WHOSE ARGUMENT
WAS ADOPTED BY THE SUPREME COURT IN ITS JUNE 2022 RULING THAT THE BIDEN
ADMINISTRATION COULD END THE REMAIN IN MEXICO POLICY. IN EARLY 2022,
REFUGEES INTERNATIONAL PUBLISHED AN EXTENSIVE REPORT ON THE WAYS THAT
THE GREEK GOVERNMENT WAS LIMITING ACCESS TO ASYLUM AND VIOLATING THE
RIGHTS OF ASYLUM SEEKERS IN ITS CAMPS AND RECEPTION FACILITIES.
REFUGEES INTERNATIONAL CALLED ON THE GREEK GOVERNMENT TO STOP CUTTING
OFF AID TO REFUGEES, TO PROVIDE FAIR SCREENINGS OF VULNERABLE

Schedule O (Form 990) 2022

Name of the organization REFUGEES INTERNATIONAL INC.

| Employer identification number | 52-1224516 |

POPULATIONS, AND TO STOP HINDERING THE LIFE SAVING WORK OF NGOS. LATER

IN 2022, REFUGEES INTERNATIONAL SUCCESSFULLY ADVOCATED FOR THE BIDEN

ADMINISTRATION TO REDESIGNATE HAITI FOR TEMPORARY PROTECTED STATUS AND

TO INCREASE ACCESS TO HUMANITARIAN PAROLE FOR HAITIANS.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

LATIN AMERICA

IN LATE 2021, REFUGEES INTERNATIONAL AND IRCA CASABIERTAAN LGBTQ+ COSTA

RICA-BASED ORGANIZATION PROVIDING SERVICES FOR LGBTQ+ ASYLUM SEEKERS

AND REFUGEESCONDUCTED MEETINGS WITH OTHER LGBTQ+-LED ORGANIZATIONS

ACROSS THE REGION TO DISCUSS THE CHALLENGES THEY FACE. IN JANUARY 2022,

THE GROUPS CO-PUBLISHED A REPORT HIGHLIGHTING STEPS THE UNITED STATES

AND OTHERS CAN TAKE TO INVEST IN THESE CRITICALLY IMPORTANT LOCAL

GROUPS. BASED ON THE RECOMMENDATION OF THE REPORT, THE OFFICE OF U.S.

REPRESENTATIVE JOAQUIN CASTRO AND COLLEAGUES REP. DAVID N. CICILLINE

AND REP. ALBIO SIRES LED A LETTER IN JULY 2022 TO THE STATE DEPARTMENT

AND USAID URGING THEM TO EXPAND U.S. SUPPORT FOR LGBTQ+ RIGHTS IN LATIN

AMERICA. CASTRO, CICILLINE, AND SIRES ALSO HOSTED A VIRTUAL EVENT FOR

CONGRESSIONAL COLLEAGUES HIGHLIGHTING THE NEEDS OF LGBTQ+ COMMUNITIES

IN LATIN AMERICA FEATURING REFUGEES INTERNATIONAL STAFF AND

RECOMMENDATIONS.

EUROPE

THE WAR IN UKRAINE LED TO NUMBERS OF UKRAINIANS FLEEING INTO

NEIGHBORING STATES INCLUDING. DAYS AFTER THE WAR BROKE OUT, RI TOOK A

WEEK LONG TRIP TO POLAND TO PROVIDE POLICY RECOMMENDATIONS ON WHAT

GALVANIZE DONOR ENGAGEMENT. RI PUBLISHED ONE OF THE FIRST MAJOR

REPORTS, CRISIS IN UKRAINE: HUMANITARIAN AND HUMAN RIGHTS IMPERATIVES,

WHICH DETAILED THE SITUATION AND PROVIDED RECOMMENDATIONS FOR IMMEDIATE

WHICH BUILDING IN BUILDING IND INOVIDED RECOMMENDATIONS FOR THE PARTY.

Name of the organization REFUGEES INTERNATIONAL INC. Employer identification number 52-1224516

HUMANITARIAN RESPONSE.

SUB-SAHARAN AFRICA

REFUGEES INTERNATIONAL CARRIED OUT RESEARCH TRAVEL AND ADVOCACY ON

SEVERAL SUB-SAHARAN AFRICAN COUNTRIES FACING HUMANITARIAN AND

DISPLACEMENT CHALLENGES INCLUDING BURKINA FASO, CHAD, ETHIOPIA, AND

SOUTH SUDAN. REFUGEES INTERNATIONAL ALSO HIGHLIGHTED THE UNPRECEDENTED

FOOD AND NUTRITION EMERGENCY FACED BY ALMOST 40 MILLION PEOPLE IN

SOMALIA, ETHIOPIA, AND KENYA, DRIVEN BY CONFLICT AND CLIMATE CHANGE.

RI'S REPORT WE WERE WARNED: UNLEARNED LESSONS OF FAMINE IN THE HORN OF

AFRICA DREW ON LESSONS OF HISTORY TO SUGGEST SOLUTIONS. RI RAISED

FURTHER ATTENTION THROUGH PUBLIC EVENTS AND PRESS BRIEFINGS. IN

NOWHERE TO RUN: ERITREAN REFUGEES IN TIGRAY, REFUGEES INTERNATIONAL

DETAILS THE PLIGHT OF ERITREAN REFUGEES IN ETHIOPIA AMID THE COUNTRY'S

CIVIL WAR AND RECOMMENDS STEPS THE GOVERNMENT OF ETHIOPIA, UNHER, THE

UNITED STATES, AND NEIGHBORING COUNTRIES MUST TAKE TO OFFER SAFETY TO

THIS POPULATION.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

UN DISPATCH, NPR, REUTERS, THE ASSOCIATED PRESS, BLOOMBERG, BBC, CNN,

MSNBC, NBC, AND NUMEROUS OTHER PRINT, ONLINE, AND BROADCAST NEWS

OUTLETS. WIRE SERVICE NEWS STORIES THAT INCLUDED COMMENTS BY REFUGEES

INTERNATIONAL STAFF PROVIDED EVEN GREATER REACH, SINCE OTHER NEWS

OUTLETS PICKED UP AND FURTHER DISSEMINATED THOSE STORIES TO EVEN WIDER

AUDIENCES.

IN 2022, REFUGEES INTERNATIONAL ALSO ACHIEVED GREATER REACH ON SOCIAL MEDIA PLATFORMS SUCH AS TWITTER, FACEBOOK, INSTAGRAM, AND LINKEDIN. THE

Name of the organization REFUGEES INTERNATIONAL INC. Employer identification number 52-1224516

ORGANIZATION'S TWITTER HAS MORE THAN 305,000 FOLLOWERS, AND ITS

FACEBOOK, INSTAGRAM, AND LINKEDIN AUDIENCES GREW BY A COLLECTIVE 10,000

ADDITIONAL FOLLOWERS OVER THE YEAR. MANY OF THE ORGANIZATION'S TWITTER

FOLLOWERS HAVE SIZABLE AUDIENCES OF THEIR OWN SOME WITH MORE THAN A

MILLION FOLLOWERS FURTHER AMPLIFYING REFUGEES INTERNATIONAL'S

MESSAGING THROUGH RETWEETING OF OUR CONTENT. MANY OF THE ORGANIZATION'S

TWITTER FOLLOWERS HAVE SIZABLE AUDIENCES OF THEIR OWN SOME WITH MORE

THAN A MILLION FOLLOWERS FURTHER AMPLIFYING REFUGEES INTERNATIONAL'S

MESSAGING THROUGH RETWEETING OF OUR CONTENT.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS AND REVIEWED BY

MANAGEMENT. SUBSEQUENT TO THE REVIEW, A COPY OF THE FORM 990 WAS PROVIDED

TO THE FULL BOARD VIA EMAIL PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH DIRECTOR, PRINCIPAL OFFICER, AND MEMBER OF A COMMITTEE WITH BOARD

DELEGATED POWERS IS ANNUALLY REQUIRED TO SIGN A STATEMENT WHICH AFFIRMS

THAT SUCH PERSON:

- A) HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY;
- B) HAS READ AND UNDERSTANDS THE POLICY;
- C) HAS AGREED TO COMPLY WITH THE POLICY; AND
- D) UNDERSTANDS THAT THE ORGANIZATION IS CHARITABLE AND, IN ORDER TO

 MAINTAIN ITS FEDERAL TAX EXEMPTION, IT MUST ENGAGE PRIMARILY IN ACTIVITIES

 WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES.
- IF AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST ARISES, AN INTERESTED PERSON

 IS REQUIRED TO DISCLOSE THE EXISTENCE OF THE FINANCIAL INTEREST AND IS

Schedule O (Form 990) 2022 Page 2

Name of the organization REFUGEES INTERNATIONAL INC.

Employer identification number 52-1224516

MEMBERS OF COMMITTEES CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT.

AFTER DISCLOSURE OF THE FINANCIAL INTEREST AND ALL MATERIAL FACTS AND AFTER

ANY DISCUSSION WITH THE INTERESTED PERSON, HE OR SHE LEAVES THE BOARD OR

COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS

DISCUSSED AND VOTED ON. THE REMAINING BOARD OR COMMITTEE MEMBERS DECIDE IF

A CONFLICT OF INTEREST EXISTS. THE CHAIR OR PRESIDENT OF THE BOARD OR

COMMITTEE, IF APPROPRIATE, APPOINTS A DISINTERESTED PERSON OR COMMITTEE TO

INVESTIGATE ALTERNATIVES TO THE PROPOSED TRANSACTION OR ARRANGEMENT.

AFTER EXERCISING DUE DILIGENCE, THE BOARD OR COMMITTEE DETERMINES WHETHER
THE ORGANIZATION CAN, WITH REASONABLE EFFORTS, OBTAIN A MORE ADVANTAGEOUS
TRANSACTION OR ARRANGEMENT FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE
TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR
ARRANGEMENT IS NOT REASONABLY POSSIBLE UNDER CIRCUMSTANCES NOT PRODUCING A
CONFLICT OF INTEREST, THE BOARD OR COMMITTEE DETERMINES BY A MAJORITY VOTE
OF THE DISINTERESTED DIRECTORS OR COMMITTEE MEMBERS WHETHER THE TRANSACTION
OR ARRANGEMENT IS IN THE ORGANIZATION'S BEST INTEREST, FOR ITS OWN BENEFIT,
AND WHETHER IT IS FAIR AND REASONABLE. IN CONFORMITY WITH THE ABOVE
DETERMINATION, IT MAKES ITS DECISION AS TO WHETHER TO ENTER INTO THE
TRANSACTION OR ARRANGEMENT.

IF THE BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS

FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, IT INFORMS THE

MEMBER OF THE BASIS FOR SUCH BELIEF AND AFFORDS THE MEMBER AN OPPORTUNITY

TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE MEMBER'S

RESPONSE AND AFTER MAKING FURTHER INVESTIGATION AS WARRANTED BY THE

CIRCUMSTANCES, THE BOARD OR COMMITTEE DETERMINES THE MEMBER HAS FAILED TO

 Employer identification number 52-1224516

DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT TAKES APPROPRIATE
DISCIPLINARY AND CORRECTIVE ACTION.

EMPLOYEES ARE REQUIRED TO FILE A DISCLOSURE FORM WITH THE PRESIDENT OF
REFUGEES INTERNATIONAL OR HIS DELEGATE AT THE TIME OF EMPLOYMENT. EACH
EMPLOYEE IS REQUIRED TO UPDATE SUCH DISCLOSURE FORM AS SOON AS HE OR SHE
BECOMES AWARE OF ANY ACTUAL, POTENTIAL OR PERCEIVED CONFLICTS. THE
PRESIDENT OR HIS DELEGATE PROMPTLY REVIEWS THE DISCLOSURES AND DETERMINES
WHICH INTERESTS ARE IN CONFLICT WITH THE MISSION AND INTERESTS OF REFUGEES
INTERNATIONAL AND WHICH, IF ANY, CAN BE RESOLVED. IN GRANTING AUTHORITY FOR
EMPLOYEES TO ENGAGE IN OUTSIDE ACTIVITIES, REFUGEES INTERNATIONAL MAY, AT
ITS DISCRETION, GRANT AUTHORITY FOR PUBLIC OR MEDIA CONTACTS RELATED TO
THAT ACTIVITY PROVIDED SUCH PUBLIC OR MEDIA CONTACTS DO NOT COMPROMISE THE
PUBLIC IMAGE OF INDEPENDENCE, HONESTY, PROPRIETY, OBJECTIVITY AND
IMPARTIALITY OF REFUGEES INTERNATIONAL.

FAILURE TO MAKE REQUIRED DISCLOSURES OR TO SATISFACTORILY RESOLVE CONFLICTS
OF INTEREST MAY RESULT IN DISCIPLINE, UP TO AND INCLUDING TERMINATION OF
EMPLOYMENT. DECISIONS ON DISCIPLINE ARE THE EXCLUSIVE PREROGATIVE OF THE
PRESIDENT. IN THE CASE OF TERMINATION OF EMPLOYMENT, THE PRESIDENT CONSULTS
WITH THE EXECUTIVE COMMITTEE OF THE BOARD PRIOR TO MAKING THE DECISION.
NOTWITHSTANDING THIS REQUIREMENT TO CONSULT, THE BOARD'S APPROVAL IS NOT
REQUIRED FOR THE PRESIDENT TO TERMINATE AN EMPLOYEE AND THE FAILURE BY THE
PRESIDENT TO CONSULT WITH THE BOARD DOES NOT PROVIDE GROUNDS FOR AN
EMPLOYEE TO CHALLENGE THE TERMINATION.

REFUGEES INTERNATIONAL MAY DISCIPLINE AN EMPLOYEE IMMEDIATELY WHEN REFUGEES

INTERNATIONAL HAS KNOWLEDGE THAT THE EMPLOYEE HAS ENGAGED IN ACTIVITY

Name of the organization REFUGEES INTERNATIONAL INC.

Employer identification number 52-1224516

PROHIBITED BY THIS POLICY. REFUGEES INTERNATIONAL MAY PERMIT REMEDIATION OF

A BREACH OF THIS POLICY IF IT DETERMINES, IN ITS SOLE DISCRETION, THAT

REMEDIATION IS WARRANTED UNDER ALL THE FACTS AND CIRCUMSTANCES.

FORM 990, PART VI, SECTION B, LINE 15B:

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS AND/OR THE ENTIRE BOARD

HAS CONTINUALLY REVIEWED AND APPROVED THE COMPENSATION PACKAGE OF THE

PRESIDENT OF THE ORGANIZATION. SALARY SURVEYS ARE USED TO SUPPORT

ADJUSTMENTS TO COMPENSATION. ADJUSTMENTS ARE COMMUNICATED WITH THE

APPROPRIATE EMPLOYEES VIA A LETTER SIGNED OR APPROVED BY THE PRESIDENT AND

FILED IN THE FINANCE AND HUMAN RESOURCES DEPARTMENTS. THE LAST COMPENSATION

REVIEW TOOK PLACE JULY 2022.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

CA,FL,IL,MD,MA,NJ,NY,VA,AL,AR,GA,HI,KS,KY,MI,MN,MS,NH,NM,NC,OR,PA,RI,SC,TN

UT,WV,WI

FORM 990, PART VI, SECTION C, LINE 19:

RI DOES NOT MAKE ITS GOVERNING DOCUMENTS OR CONFLICT OF INTEREST POLICY

AVAILABLE TO THE PUBLIC. THE ORGANIZATION'S FINANCIAL STATEMENTS ARE

AVAILABLE ON THE RI WEBSITE.

FORM 990, PART IX, LINE 11G, OTHER FEES:

CONSULTING FEES:

PROGRAM SERVICE EXPENSES 450,341.

MANAGEMENT AND GENERAL EXPENSES 12,163.

FUNDRAISING EXPENSES 33,527.

TOTAL EXPENSES

Schedule O (Form 990) 2022

496,031.

chedule O (Form 990) 2022	Page 2
lame of the organization REFUGEES INTERNATIONAL INC.	Employer identification number 52-1224516
COTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	496,031.