

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2023

Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2023 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization REFUGEES INTERNATIONAL INC.		D Employer identification number 52-1224516
	Doing business as		E Telephone number (202) 828-0110
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	1800 M ST. NW	405N	G Gross receipts \$ 6,072,378.
	City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20036		
F Name and address of principal officer: JEREMY KONYNDYK SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
J Website: WWW.REFUGEESINTERNATIONAL.ORG		If "No," attach a list. See instructions	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		H(c) Group exemption number	
L Year of formation: 1980		M State of legal domicile: DC	

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: ADVOCATE FOR LIFESAVING ASSIST.& PROTECTION FOR DISPLACED PEOPLE AND SOLUTIONS TO DISPLACEMENT CRISES		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	19
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	19
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	33
	6 Total number of volunteers (estimate if necessary)	6	24
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	3,946,263.	4,320,114.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	362,553.	231,913.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	235,928.	120,054.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	222,137.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4,544,744.	4,894,218.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	37,500.	318,500.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,143,655.	3,073,201.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	139,345.	136,343.
	b Total fundraising expenses (Part IX, column (D), line 25) 433,303.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,568,532.	1,623,793.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,889,032.	5,151,837.	
19 Revenue less expenses. Subtract line 18 from line 12	-344,288.	-257,619.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	7,508,050.	7,410,833.
	22 Net assets or fund balances. Subtract line 21 from line 20	2,714,629.	2,564,673.
		4,793,421.	4,846,160.

Part II Signature Block

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

Sign Here		10/23/2024
	Signature of officer	Date
Paid Preparer Use Only	JEREMY KONYNDYK, PRESIDENT	
	Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature
	RICHARD J. LOCASTRO, CPA	
Paid Preparer Use Only	Date	Check if self-employed <input type="checkbox"/> PTIN
	10/22/2024	P00288314
Paid Preparer Use Only	Firm's name	Firm's EIN
	GELMAN, ROSENBERG & FREEDMAN	52-1392008
Paid Preparer Use Only	Firm's address	Phone no.
	4550 MONTGOMERY AVE SUITE 800N BETHESDA, MD 20814-2930	301-951-9090

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: REFUGEES INTERNATIONAL ADVOCATES FOR LIFESAVING ASSISTANCE, HUMAN RIGHTS, AND PROTECTION FOR DISPLACED PEOPLE AND PROMOTES SOLUTIONS TO DISPLACEMENT CRISIS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 3,215,706. including grants of \$ 103,500.) (Revenue \$ 231,913.)

ADVOCACY: MAIN OUTCOMES: OVER THE PAST YEAR REFUGEES INTERNATIONAL ACHIEVED THE FOLLOWING AS A RESULT OF OUR REPORTING AND ADVOCACY EFFORTS:

IN 2023 REFUGEES INTERNATIONAL CONTINUED TO URGE THE BIDEN ADMINISTRATION TO IMPROVE THE U.S. PAROLE POLICY. AS A RESULT OF THESE EFFORTS IN AUGUST, DHS ANNOUNCED IMPROVEMENTS TO THE HAITI AND CUBA FAMILY UNIFICATION PROGRAMS IN LINE WITH CHANGES REFUGEES INTERNATIONAL RECOMMENDED. ADDITIONALLY, REFUGEES INTERNATIONAL ENGAGED WITH SENIOR BIDEN ADMINISTRATION OFFICIALS FOLLOWING THE OUTBREAK OF WAR IN SUDAN AND THE MIDDLE EAST TO ADVOCATE FOR CONTINUED LIFE SAVING HUMANITARIAN

4b (Code:) (Expenses \$ 1,006,764. including grants of \$ 215,000.) (Revenue \$)

STRATEGIC OUTREACH (INCLUDES PUBLIC EDUCATION): REFUGEES INTERNATIONAL ENGAGED IN A WIDE RANGE OF PUBLIC EDUCATION ACTIVITIES AND INITIATIVES THROUGHOUT 2023. THE ORGANIZATION PRODUCED 184 RESEARCH AND ADVOCACY PRODUCTS, INCLUDING 24 REPORTS AND BRIEFS, 22 OP-EDS, 24 COMMENTARIES, 75 STATEMENTS, AND 20 ADVOCACY LETTERS. TRAFFIC TO REFUGEE INTERNATIONAL'S WEBSITE REMAINED HIGH WITH OVER 271,000 USERS VISITING OUR WEBSITE.

REFUGEES INTERNATIONAL'S SOCIAL MEDIA PRESENCE ALSO GREW, HAVING GAINED OVER 1,200 FOLLOWERS ON INSTAGRAM AND OVER 11,000 ON LINKEDIN SEEING OUR FOLLOWING INCREASE BY OVER 16% ON LINKEDIN. REFUGEES INTERNATIONAL HAS ALSO EARNED CONSIDERABLE MEDIA COVERAGE IN 2023, GARNERING HUNDREDS

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 4,222,470.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

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

Table with 3 columns: Question number, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with 3 main columns: Question/Description, Yes, No. Rows include 2a (employees: 33), 2b, 3a, 3b, 4a, 4b, 5a, 5b, 5c, 6a, 6b, 7 (Organizations that may receive deductible contributions under section 170(c)), 8, 9, 10, 11, 12a, 12b, 13, 13a, 13b, 13c, 14a, 14b, 15, 16, 17.

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 19; 1b Enter the number of voting members included on line 1a... 19; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O. X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X; b Other officers or key employees of the organization X; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA, FL, IL, MD, MA, NJ, NY, VA, AL, AR, GA, HI
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
JEREMY KONYNDYK - (202)828-0110
1800 M ST. NW, 405N, WASHINGTON, DC 20036

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JEREMY M KONYNDYK PRESIDENT	40.00			X			294,870.	0.	20,060.	
(2) ELLEN P MCHUGH CHIEF ADMINISTRATIVE OFFICER	40.00				X		183,548.	0.	24,892.	
(3) JOSEPH HARDIN LANG VP FOR PROGRAMS & POLICY	40.00			X			183,682.	0.	21,531.	
(4) SARAH E SHEFFER VP FOR STRATEGIC OUTREACH	40.00			X			154,228.	0.	14,885.	
(5) KATE BRICK DIR. OF TRL AND SENIOR ADVISOR	40.00				X		139,845.	0.	10,092.	
(6) ELIZABETH ANN HOLLINGSWORTH SEN. DIR OF GR AND SEN. PA	40.00				X		126,164.	0.	13,917.	
(7) YVETTE SCHACHER DIR FOR THE AMERICAS AND EUROPE	40.00				X		109,509.	0.	23,241.	
(8) REBEKAH J. MEYEROWITZ VP OF PHILANTHROPY	40.00				X		123,597.	0.	8,261.	
(9) JEFFREY TINDELL CO CHAIR	5.00	X		X			0.	0.	0.	
(10) MAUREEN WHITE CO CHAIR	5.00	X		X			0.	0.	0.	
(11) DARYA NASR VICE CHAIR	1.00	X		X			0.	0.	0.	
(12) VAITHEHI MUTTILINGAM TREASURER, (UNTIL 04/2023)	3.00	X		X			0.	0.	0.	
(13) CRAIG JOHNSTONE TREASURER/FINANCE COMMITTEE CHAIR	1.00	X		X			0.	0.	0.	
(14) SOPHAL EAR PROGRAM COMMITTEE CO-CHAIR	1.00	X					0.	0.	0.	
(15) JOY LIAN ALFERNESS GOVERNANCE COMMITTEE CHAIR	1.00	X					0.	0.	0.	
(16) SARAH BACON NOMINATIONS COMMITTEE CHAIR	1.00	X					0.	0.	0.	
(17) AUGUSTIN NTABAGANYIMANA PROGRAM COMMITTEE CO-CHAIR	1.00	X					0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) NINA SAGLIMBENI INVESTMENT COMMITTEE CHAIR, (UNTIL 0	1.00	X						0.	0.	0.
(19) ELIZABETH STERN DEVELOPMENT COMMITTEE CHAIR	1.00	X						0.	0.	0.
(20) JOANNE LEEDOM-ACKERMAN DIRECTOR	1.00	X						0.	0.	0.
(21) MATT DILLON DIRECTOR, (UNTIL 04/2023)	0.00	X						0.	0.	0.
(22) ELIZABETH GALVIN DIRECTOR	1.00	X						0.	0.	0.
(23) ANNE-MARIE GREY DIRECTOR, (FROM 05/2023)	1.00	X						0.	0.	0.
(24) MAX GREENBERG DIRECTOR	1.00	X						0.	0.	0.
(25) ELENA KVOCHKO DIRECTOR	1.00	X						0.	0.	0.
(26) ERIKA LEE DIRECTOR	1.00	X						0.	0.	0.
1b Subtotal								1,315,443.	0.	136,879.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,315,443.	0.	136,879.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 9

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	4,320,114.				
	g	Noncash contributions included in lines 1a-1f	1g	\$ 19,768.				
	h	Total. Add lines 1a-1f		4,320,114.				
Program Service Revenue	2 a	CONTRACTS	Business Code					
			900099	231,913.	231,913.			
	b							
	c							
	d							
	e							
	f	All other program service revenue						
g	Total. Add lines 2a-2f		231,913.					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		184,163.			184,163.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	6a	(i) Real				
				(ii) Personal				
	b	Less: rental expenses ...	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities				
				(ii) Other				
					1,003,321.			
	b	Less: cost or other basis and sales expenses	7b	1,067,430.				
c	Gain or (loss)	7c	-64,109.					
d	Net gain or (loss)		-64,109.			-64,109.		
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a		332,867.				
b	Less: direct expenses	8b	110,730.					
c	Net income or (loss) from fundraising events		222,137.			222,137.		
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
b	Less: direct expenses	9b						
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	10a						
b	Less: cost of goods sold	10b						
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a		Business Code					
	b							
	c							
	d	All other revenue						
	e	Total. Add lines 11a-11d						
12	Total revenue. See instructions			4,894,218.	231,913.	0.	342,191.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	235,000.	235,000.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	83,500.	83,500.		
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	689,257.	620,331.	34,463.	34,463.
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	1,853,914.	1,552,198.	141,452.	160,264.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	147,479.	124,934.	10,642.	11,903.
9 Other employee benefits	207,395.	175,210.	15,167.	17,018.
10 Payroll taxes	175,156.	149,447.	12,192.	13,517.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	30,185.		30,185.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	136,343.			136,343.
f Investment management fees	32,476.		32,476.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	565,464.	434,900.	130,564.	
12 Advertising and promotion	1,707.	1,456.	119.	132.
13 Office expenses	46,499.	39,042.	3,184.	4,273.
14 Information technology				
15 Royalties				
16 Occupancy	367,621.	313,662.	25,589.	28,370.
17 Travel	200,866.	200,866.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	47,625.	43,050.	2,170.	2,405.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	15,296.	13,051.	1,065.	1,180.
23 Insurance	66,328.	56,592.	4,617.	5,119.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DUES AND PUBLICATIONS	183,141.	156,260.	12,748.	14,133.
b TEMPORARIES	37,557.		37,557.	
c EQUIPMENT	12,461.	10,634.	866.	961.
d MISCELLANEOUS	7,789.	5,369.	440.	1,980.
e All other expenses	8,778.	6,968.	568.	1,242.
25 Total functional expenses. Add lines 1 through 24e	5,151,837.	4,222,470.	496,064.	433,303.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	510,756.	1	1,540,527.
	2 Savings and temporary cash investments	449,890.	2	823,560.
	3 Pledges and grants receivable, net	550,394.	3	361,655.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	66,956.	9	75,249.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 120,011.		
	b Less: accumulated depreciation	10b 89,662.	35,500.	10c 30,349.
	11 Investments - publicly traded securities	4,790,448.	11	3,834,228.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	1,104,106.	15	745,265.
16 Total assets. Add lines 1 through 15 (must equal line 33)	7,508,050.	16	7,410,833.	
Liabilities	17 Accounts payable and accrued expenses	272,688.	17	346,255.
	18 Grants payable		18	
	19 Deferred revenue	195,770.	19	351,353.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	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	2,246,171.	25	1,867,065.
	26 Total liabilities. Add lines 17 through 25	2,714,629.	26	2,564,673.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	2,935,975.	27	3,159,335.
	28 Net assets with donor restrictions	1,857,446.	28	1,686,825.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	4,793,421.	32	4,846,160.
33 Total liabilities and net assets/fund balances	7,508,050.	33	7,410,833.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,894,218.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,151,837.
3	Revenue less expenses. Subtract line 2 from line 1	3	-257,619.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,793,421.
5	Net unrealized gains (losses) on investments	5	310,358.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	4,846,160.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2023)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3456873.	3746339.	4655256.	3946263.	4320114.	20124845.
2 Tax revenues levied for the organization'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	3456873.	3746339.	4655256.	3946263.	4320114.	20124845.
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)						4365617.
6 Public support. Subtract line 5 from line 4.						15759228.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	3456873.	3746339.	4655256.	3946263.	4320114.	20124845.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	119,454.	101,491.	145,623.	136,517.	184,163.	687,248.
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						20812093.
12 Gross receipts from related activities, etc. (see instructions)					12	1,096,942.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	75.72 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	77.82 %
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 performed, 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 business under section 513						
4 Tax revenues levied for the organization'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						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box 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

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
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	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	

Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

REFUGEES INTERNATIONAL INC.

Employer identification number

52-1224516

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

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

Schedule B (Form 990) (2023)

Name of organization REFUGEES INTERNATIONAL INC.	Employer identification number 52-1224516
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Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	 <hr/> <hr/> <hr/>	\$ <u>910,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ <u>500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ <u>387,496.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ <u>160,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ <u>150,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ 202,592.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 110,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization REFUGEES INTERNATIONAL INC.	Employer identification number 52-1224516
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

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

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

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

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

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

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

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

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures \$ _____
- 3 Volunteer hours for political campaign activities _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	375.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	151.													
c Total lobbying expenditures (add lines 1a and 1b)	526.													
d Other exempt purpose expenditures	4,982,492.													
e Total exempt purpose expenditures (add lines 1c and 1d)	4,983,018.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	399,151.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	not over \$500,000,	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000,	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
not over \$500,000,	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000,	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	99,788.													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	353,612.	369,459.	387,484.	399,151.	1,509,706.
b Lobbying ceiling amount (150% of line 2a, column(e))					2,264,559.
c Total lobbying expenditures	427.	647.	758.	526.	2,358.
d Grassroots nontaxable amount	88,403.	92,365.	96,871.	99,788.	377,427.
e Grassroots ceiling amount (150% of line 2d, column (e))					566,141.
f Grassroots lobbying expenditures	100.	623.	325.	375.	1,423.

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
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?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to not be 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).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

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

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
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?	4	
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 (see 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

2023

Open to Public Inspection

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

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: \$. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1. b Assets included in Form 990, Part X.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	353,086.	408,569.	387,102.	349,718.	145,751.
b Contributions			3,098.	9,398.	187,503.
c Net investment earnings, gains, and losses	39,406.	-37,040.	25,369.	27,986.	20,169.
d Grants or scholarships					
e Other expenditures for facilities and programs	15.	-18,443.	7,000.		3,705.
f Administrative expenses					
g End of year balance	392,477.	353,086.	408,569.	387,102.	349,718.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 0.0000 %
 - b Permanent endowment 50.9600 %
 - c Term endowment 49.0400 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------------------------|-------------------------------------|
| (i) Unrelated organizations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | <input type="checkbox"/> | <input type="checkbox"/> |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		107,026.	89,662.	17,364.
e Other		12,985.		12,985.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				30,349.

Part VII Investments - Other Securities

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

(a) Description	(b) Book value
(1) SECURITY DEPOSITS	45,231.
(2) RIGHT-OF-USE ASSET	700,034.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	745,265.

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	1,079,053.
(3) OPERATING LEASE LIABILITY	788,012.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	1,867,065.

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	5,430,120.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	310,358.	
b	Donated services and use of facilities	2b	147,290.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	110,730.	
e	Add lines 2a through 2d	2e		568,378.
3	Subtract line 2e from line 1	3		4,861,742.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	32,476.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		32,476.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		4,894,218.

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

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

1	Total expenses and losses per audited financial statements		1	5,377,381.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	147,290.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	110,730.	
e	Add lines 2a through 2d	2e		258,020.
3	Subtract line 2e from line 1	3		5,119,361.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	32,476.	
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b	4c		32,476.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		5,151,837.

Part XIII Supplemental Information

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

PART 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 XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES SHOWN AS EXPENSE 110,730.
ON THE AUDITED FINANCIAL STATEMENT AND
NETTED AGAINST REVENUE ON FORM 990, PART VIII, LINE 8B.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES SHOWN AS EXPENSE 110,730.

Part XIII Supplemental Information *(continued)*

ON THE AUDITED FINANCIAL STATEMENT AND
NETTED AGAINST REVENUE ON FORM 990, PART VIII, LINE 8B.

Multiple horizontal lines for supplemental information.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization

Employer identification number

REFUGEES INTERNATIONAL INC.

52-1224516

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	FIELD RESEARCH IN THE REGION	18,557.
EUROPE	0	0	PROGRAM SERVICES	FIELD RESEARCH IN THE REGION	80,823.
NORTH AMERICA	0	0	PROGRAM SERVICES	FIELD RESEARCH IN THE REGION	9,004.
SOUTH AMERICA	0	0	PROGRAM SERVICES	FIELD RESEARCH IN THE REGION	2,895.
SOUTH ASIA	0	0	PROGRAM SERVICES	FIELD RESEARCH IN THE REGION	27,445.
SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	FIELD RESEARCH IN THE REGION	41,674.
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	FIELD RESEARCH IN THE REGION	25,586.
3 a Subtotal	0	0			205,984.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			205,984.

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

Schedule F (Form 990) 2023

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

3 Enter total number of other organizations or entities

Part IV Foreign Forms

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

Part V Supplemental Information

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

Multiple horizontal lines for supplemental information.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		EVENT 1		NONE	
	Revenue	(event type)	(event type)	(total number)	
1	Gross receipts	332,867.			332,867.
2	Less: Contributions	0.			
3	Gross income (line 1 minus line 2)	332,867.			332,867.
Direct Expenses					
4	Cash prizes	5,000.			5,000.
5	Noncash prizes				
6	Rent/facility costs	96,871.			96,871.
7	Food and beverages	65.			65.
8	Entertainment	626.			626.
9	Other direct expenses	8,168.			8,168.
10	Direct expense summary. Add lines 4 through 9 in column (d)				110,730.
11	Net income summary. Subtract line 10 from line 3, column (d)				222,137.

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

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

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No
 b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount 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 _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

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

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: ORR GROUP, INC

(I) ADDRESS OF FUNDRAISER: 300 K ST, NW, #280, WASHINGTON, DC 20007

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

REFUGEES INTERNATIONAL INC.

Employer identification number
52-1224516

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
INTERNATIONAL RESCUE COMMITTEE 122 EAST 42ND ST NEW YORK, NY 10168	13-5660870	501(C)(3)	40,000.	0.			FUNDING FOR A ONE YEAR PROJECT TO CHAMPION INCLUSIVE STATE POLICY AND ELEVATE REFUGEE
WORLD RELIEF CORPORATION 7 EAST BALTIMORE STREET BALTIMORE, MD 21202	23-6393344	501(C)(3)	40,000.	0.			SUPPORTING WORLD RELIEF TO ADVANCE A NORTH CAROLINA STATE POLICY AGENDA THAT AIMS TO
THE CENTER FOR VICTIMS OF TORTURE 2356 UNIVERSITY AVENUE WEST #430 ST. PAUL, MN 55114	13-4080201	501(C)(3)	40,000.	0.			SUPPORTING CVT TO ADVANCE A STATE POLICY AGENDA THAT AIMS TO ADVANCE THE INCLUSION OF PEOPLE WHO
CHURCH WORLD SERVICE 475 RIVERSIDE DR., SUITE 700 NEW YORK, NY 10115	36-3383933	501(C)(3)	40,000.	0.			SUPPORTING STATE CWS TO ADVANCE A STATE POLICY AGENDA THAT AIMS TO
VIBRANT OHIO 1415 E, DUBLIN-GRANDVILLE RD. SUITE COLUMBUS, OH 43229	87-1016463	501(C)(3)	40,000.	0.			ADVANCE THE INCLUSION OF SUPPORTING VIBRANT OHIO TO ADVANCE A STATE POLICY AGENDA THAT AIMS TO
REFUGEE CONGRESS 1310 L ST NW #450 WASHINGTON, DC 20005	86-1189798	501(C)(3)	15,000.	0.			REFUGEE ASSISTANCE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **6.**

3 Enter total number of other organizations listed in the line 1 table **0.**

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2023

Part III

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SUMMER INTERN STIPENDS	4	14,000.	0.		
REFUGEES FELLOWS STIPENDS	7	69,500.	0.		

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:

RI REQUIRES GRANTEE(S) TO PROVIDE REPORT FOR USE OF GRANT FUND.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: INTERNATIONAL RESCUE COMMITTEE

(H) PURPOSE OF GRANT OR ASSISTANCE: FUNDING FOR A ONE YEAR PROJECT TO

CHAMPION INCLUSIVE STATE POLICY AND ELEVATE REFUGEE VOICES AND LEADERSHIP

IN STRATEGIC COMMUNICATIONS.

Part IV Supplemental Information

NAME OF ORGANIZATION OR GOVERNMENT: WORLD RELIEF CORPORATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING WORLD RELIEF TO ADVANCE A NORTH CAROLINA STATE POLICY AGENDA THAT AIMS TO ADVANCE THE INCLUSION OF PEOPLE WHO HAVE BEEN FORCIBLY DISPLACED

NAME OF ORGANIZATION OR GOVERNMENT: THE CENTER FOR VICTIMS OF TORTURE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING CVT TO ADVANCE A STATE POLICY AGENDA THAT AIMS TO ADVANCE THE INCLUSION OF PEOPLE WHO HAVE BEEN FORCIBLY DISPLACED WITH TECHNICAL ASSISTANCE.

NAME OF ORGANIZATION OR GOVERNMENT: CHURCH WORLD SERVICE

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING STATE CWS TO ADVANCE A STATE POLICY AGENDA THAT AIMS TO ADVANCE THE INCLUSION OF PEOPLE WHO HAVE BEEN FORCIBLY DISPLACED WITH TECHNICAL ASSISTANCE.

NAME OF ORGANIZATION OR GOVERNMENT: VIBRANT OHIO

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING VIBRANT OHIO TO ADVANCE A STATE POLICY AGENDA THAT AIMS TO ADVANCE THE INCLUSION OF PEOPLE WHO HAVE BEEN FORCIBLY DISPLACED WITH TECHNICAL ASSISTANCE.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

REFUGEES INTERNATIONAL INC.

Employer identification number

52-1224516

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

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

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

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

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

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

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JEREMY M KONYNDYK PRESIDENT	(i) 294,870.	(ii) 0.	(iii) 0.	5,506.	14,554.	314,930.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ELLEN P MCHUGH CHIEF ADMINISTRATIVE OFFICER	(i) 183,548.	(ii) 0.	(iii) 0.	7,483.	17,409.	208,440.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JOSEPH HARDIN LANG VP FOR PROGRAMS & POLICY	(i) 183,682.	(ii) 0.	(iii) 0.	7,483.	14,048.	205,213.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(4) SARAH E SHEFFER VP FOR STRATEGIC OUTREACH	(i) 154,228.	(ii) 0.	(iii) 0.	6,212.	8,673.	169,113.	0.
(ii)	0.	0.	0.	0.	0.	0.	0.
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							
(i)							
(ii)							

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

REFUGEES INTERNATIONAL INC.

Employer identification number

52-1224516

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

ASSISTANCE.

IN 2023, REFUGEES INTERNATIONAL WAS PROUD TO WELCOME ITS FIRST-EVER

COHORT OF SIX REFUGEE FELLOWS FROM AROUND THE WORLD WHO HAVE

DEMONSTRATED EXTRAORDINARY LEADERSHIP QUALITIES AND CAPABILITIES IN

GLOBAL ADVOCACY AND HAVE LIVED EXPERIENCE OF FORCED DISPLACEMENT.

REFUGEES INTERNATIONAL HELPED DRIVE TANGIBLE PROGRESS ON LOCALIZATION

OF HUMANITARIAN AID IN UKRAINE AND UNLOCKED TENS OF MILLIONS OF DOLLARS

FOR LOCAL PARTNERS WITH THE FORMATION OF THE UKRAINE HUMANITARIAN

ALLIANCE, A NEW NETWORK OF MAJOR UKRAINIAN NGOS THAT LAUNCHED IN

SEPTEMBER.

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.

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization

REFUGEES INTERNATIONAL INC.

Employer identification number

52-1224516

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

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

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

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

OFF AID TO REFUGEES, TO PROVIDE FAIR SCREENINGS OF VULNERABLE 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 REFUGEES CONDUCTED 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 SIRELS 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 SIRELS 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,

Name of the organization

REFUGEES INTERNATIONAL INC.

Employer identification number

52-1224516

WHICH DETAILED THE SITUATION AND PROVIDED RECOMMENDATIONS FOR IMMEDIATE 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, UNHCR, THE

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

THIS POPULATION.

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

OF MEDIA CITATIONS AND INTERVIEWS THROUGHOUT THE YEAR.

REFUGEES INTERNATIONAL APPEARED IN NEWS STORIES CARRIED OUT BY USA

TODAY, WASHINGTON POST, THE NEW HUMANITARIAN, BBC WORLD NEWS, CNN, NEW

ARAB, THE TIMES OF ISRAEL, NEW YORK TIMES, REUTERS, VOICE OF AMERICA,

MSNBC, THE FINANCIAL TIMES, NEWSWEEK, AL JAZEERA ENGLISH, THE GUARDIAN,

FRANCE24, POLITICO, DEVEX, THE DAILY MAIL UK AND THE HILL AMONG OTHERS

Name of the organization REFUGEES INTERNATIONAL INC.	Employer identification number 52-1224516
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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 GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND 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.

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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 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

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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 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

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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	434,900.
MANAGEMENT AND GENERAL EXPENSES	130,564.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	565,464.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	565,464.