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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

-	A F	or the 2	010 calendar year, or tax year beginning $$ OCT $$ $$ $$ $$ $$ $$ $$ $$ $$ $$	ng SI	EP 30, 20	11	
	B c	heck if	C Name of organization		D Employer ider	ntificat	ion number
	- at		IMMIGRANT AND REFUGEE	- 1			
	<u>_</u>	Address	COMMUNITY ORGANIZATION				
	느]Name]change]Initial	Doing Business As		93	<u>-080</u>	06295
	느	return		n/suite	E Telephone nun		004 4544
	느	Termin- ated Amended	10301 N.E. GLISAN STREET			03)	234-1541
	<u></u>	return Applica-	City or town, state or country, and ZIP + 4		G Gross receipts \$		10,106,588.
	Ь	Jtion pending	PORTLAND, OR 97220		H(a) Is this a grou		n □ Yes X No
			F Name and address of principal officer SOKHOM TAUCH SAME AS C ABOVE	ł	for affiliates? H(b) Are all affiliates		
	1 7	0 × 0 × 0 m	pt status: X 501(c)(3) 501(c) () ((Insert no) 4947(a)(1) or L	527			(see instructions)
			► WWW.IRCO.ORG		H(c) Group exem		•
							tate of legal domicile: OR
			Gummary				tato or rogal dominono.
	6		nefly describe the organization's mission or most significant activities. IRCO FC	OSTE	RS THE AM	ERIC	CAN DREAM
	ğ	_ B	Y ASSISTING FAMILIES TO BECOME SELF-SUFFIC	CIEN	T AND INT	EGR.	ATED INTO
28-0SC	ΙĔ	2 Cr	neck this box Fig. if the organization discontinued its operations or disposed of	of more	than 25% of its ne	et asse	
	اق	3 Nu	umber of voting members of the governing body (Part VI, line 1a)			3	10
2	5.5	5 A NI	umber of independent voting members of the governing body (Part VI, line 1b)			4	10
2012	es	.5 To	otal number of individuals employed in calendar year 2010 (Part V, line 2a)			5	666
0	ivit	Z6 To	otal number of volunteers (estimate if necessary)			6	2233
1 2	Act	To To	otal unrelated business revenue from Part VIII, column (C), line 12			7a	0.
APR (1)	4	DIP NO	et unrelated business taxable income from Form 990-T, line 34			7b	0.
A	\	ŎΙ		<u> </u>	Prior Year		Current Year
_	_e)		ontributions and grants (Part VIII, line 1h)	1	10,299,32		8,997,471.
810	Reven		rogram service revenue (Part VIII, line 2g)	-	1,045,32		980,052.
	Re		vestment income (Part VIII, column (A), lines 3, 4, and 7d)	_	2,22		2,683.
			ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	183,84 11,530,72		104,088.
			otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-+-	827,85		889,452.
			rants and similar amounts paid (Part IX, column (A), lines 1-3)	-		2 :	005,432.
	,	•	enefits paid to or for members (Part IX, column (A), line 4) alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	8,395,86		7,525,338.
	Se		rofessional fundraising fees (Part IX, column (A), line 11e)	-		0.	0.
	Expenses	.	otes for all fundraising expenses (Part IX, column (D), line 25) 84,612		*	-	
	ŭ		ther expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	-	2,017,30	8.	1,688,980.
		l	otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)		11,241,02		10,103,770.
		19 R	evenue less expenses. Subtract line 18 from line 12		289,69		-19,476.
	<u>8</u> 6			Be	ginning of Current Y		End of Year
	sets	20 To	otal assets (Part X, line 16)		6,261,27		6,765,607.
	PASS PASS PASS PASS PASS PASS PASS PASS	21 To	otal liabilities (Part X, line 26)		2,213,33	3.	2,734,718.
	Net Assets or Fund Balances	22 N	et assets or fund balances Subtract line 21 from line 20		4,047,94	4.	4,030,889.
	Pa	art II	Signature Block				
	سو		es of perjury, I declare that I have examined this return, including accompanying schedules and			of my k	nowledge and belief, it is
	true	, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which p	preparer			
	Z Sign		Supplied officer , Supplied		Date	4 41	6-2012
	Sig	n	Signature of officer		Date		
	Her A	e	SOKHOM TAUCH, EXECUTIVE DIRECTOR Type or print name and title				
	2			- 17	Date / Chec	k T	T PTIN
	Paid		Print/Type preparer's name YEE LEE LO	- [a / f	Ъ-	P01294356
•	÷	<u></u>	Firm's name GARY MCGEE & CO. LLP		Firm's EIN	mployed	F 01574220
		· -	Firm's address 808 S.W. THIRD AVENUE, SUITE 700		, t tums Env		
	3	J,	PORTLAND, OR 97204		Phone no.	(5	03) 222-2515
	Ma	the IRS	S discuss this return with the preparer shown above? (see instructions)		11 110110 110.	,,,,	Yes No
	1410	04 00 00	11 LHA For Panenwork Reduction Act Natice see the senarate instructions				Form 990 (2010)

orm	990 (2010) COMMUNITY ORGANIZATION	93-0806295	Page 2
	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
	Briefly describe the organization's mission:		
	THE MISSION OF THE IMMIGRANT AND REFUGEE COMMUNITY ORGAN	IZATION (IR	CO)
		ND THE	
		INCLUSIVE	
	MULTI-ETHNIC SOCIETY.		
	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.	***	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	X No
	If "Yes," describe these changes on Schedule O		
	Describe the exempt purpose achievements for each of the organization's three largest program services by exp	enses	
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of g		
	allocations to others, the total expenses, and revenue, if any, for each program service reported	ranto ano	
—- la	(Code) (Expenses \$ 2,757,192. including grants of \$ 582,540.) (Ret	Venue \$	<u> </u>
Tu	JOB PLACEMENT AND RELATED SERVICES - IRCO OFFERS SEVERAL		<u>πΑπ</u> /
	PROVIDE JOB READINESS TRAINING AND HELP ADULTS AND YOUTH		IIII
	REFUGEE AND IMMIGRANT COMMUNITY FIND AND MAINTAIN EMPLOY		ACE
	ECONOMIC SELF-SUFFICIENCY AND INTERGRATION WITH THE COMM		
	ECONOMIC BEDF-BOFFICIENCE AND INTERGRATION WITH THE COMM	ONITI AT DA	KGE.
			
			
		···	
	404 056		
4b	(Code) (Expenses \$ 2,452,368. including grants of \$ 104,056.) (Re)
	YOUTH PROGRAMS - IRCO'S CULTURALLY AND LINGUISTICALLY SE		
	SUPPORT PROGRAMS, MENTORING PROGRAMS, GANG INTERVENTION		ION
	PROGRAMS, AND SCHOOLS UNITING NEIGHBORHOODS (SUN) PROGRA		
	PORTLAND SCHOOLS ASSIST REFUGEE AND IMMIGRANT YOUTH ACHI	EVE HIGH SC	HOOL
	DIPLOMAS AND INTEGRATE WITH THE COMMUNITY AT LARGE.		
		·	
4c	(Code) (Expenses \$ 1,238,701. including grants of \$ 6,009.) (Re)
	CHILDREN AND HEALTH SERVICES - IRCO'S PARENTING SUPPORT	AND EDUCATI	ON
	FOR FAMILIES OF CHILDREN AGES BIRTH THROUGH FIVE YEARS O	LD PREPARE	
	CHILDREN TO BE READY TO LEARN WHILE IRCO'S CULTURALLY AN	ID	
	LINGUISTICALLY SPECIFIC HEALTH EDUCATION, ADVOCACY AND F		PS
	DEVELOP HEALTHY FAMILIES AND COMMUNITIES.		

	Other program convices (Describe in Schedule O.)		
4d	Other program services (Describe in Schedule O.)	52 v	
	(Expenses \$ 2,498,067. including grants of \$ 196,847.) (Revenue \$ 980,05] Total program service expenses ▶ 8,946,328.	24 •)	
<u>4e</u>	Total program service expenses ► 8,946,328.		

4e Total program service expenses ▶

93-0806295 Page 3

IMMIGRANT AND REFUGEE COMMUNITY ORGANIZATION

Form 990 (2010) COMMUNITY OR Part IV Checklist of Required Schedules

Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	_			Yes	No
If "Yes," complete Schedule 1 complete Schedule B, Schedule Cf Contributors? If the organization required to complete Schedule C, Part II Section 501(c)(s) organizations. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II Section 501(c)(s) organizations. Did the organization engage in lobbying activities, or have a section 501(n) electron in effect during the tax year? If "Yes," complete Schedule C, Part II Section 501(c)(s) organizations. Did the organization have represented in the provided advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II Did the organization investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization investment in part X, inc. 21; serve as a custodian for amounts not lated in Part X, or part II Did the organization investment in part X, inc. 21; serve as a custodian for amounts not lated in Part X, inc. 21; serve as a policiable. Did the organization report an amount for land, buildings, and equipment in Part X, inc. 10? If "Yes," complete Schedule D, Part VII Did the organization report an amount for minestments. or the such as applicable. Did the organization report an amount for envestments in Part X, inc. 10? If "Yes," complete Schedule D, Part X Did the organization report an amount for envestments. Inc. 10 Did the organization report an amount for envestments in th	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Dit the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part II 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 5 Is the organization a section 501(c)(4), 501(c)(6), 501(c)(6)		- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	1	Х	
public office? If "Yes," complete Schedule C, Part I Section 501(c)3 organization. Did the organization engage in lobbying activities, or have a section 501(n) electron in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 95.197 If "Yes," complete Schedule C, Part III Old the organization manitian any donor advised funds or any similar funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advise on the distribution or amounts in a fund or accounts where donors have the right to provide advise on the distribution or accounts where donors have the right to provide a fund or accounts where donors have the right to provide a fund or accounts where donors have the right to provide a fund or accounts where donors have the right to provide accounts where the name of the right to provide accounts where the name of the right to provide accounts where the name of the right to provide accounts where the substitute in the right to provide accounts and the right to provide accounts where the right to provide accounts where the right to provide accounts and the rig	2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(i) election in effect during the tax year? If "Yes," complete Schedule C, Part III. 5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedule 98-197 If "Yes," complete Schedule C, Part III. 6 Did the organization nearest analy donor advesded flunds or any similar flunds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such flunds or accounts? If "Yes," complete Schedule D, Part II. 7 Did the organization reverse or holid a conservation essement, including assements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III. 8 Did the organization mantain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III. 9 Did the organization mantain in Part X, line 21; serve as a custodian for amounts not bised in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. 10 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not bised in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV. 11 If the organization report an amount for line following questions is "Yes," then complete Schedule D, Part VIII. 12 Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part XIII. 13 Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part XIII. 13 Did the organization stability for uncertain tax positions under Film 48 (ASC 740)? If "Yes," complete Schedule D, Part XIII. 14 D	3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 99-197 If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic rail areas, or historic structures? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for eland, buildings, and equipment in Part X, line 107 If "Yes," complete Schedule D, Part VIII Did the organization report an amount for investments other securities in Part X, line 107 If "Yes," complete Schedule D, Part VIII Did the organization report an amount for mestments other securities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 157 If "Yes," complete Schedule D, Part X III Did the organization report an amount for other assets in Part X, line 158 In a set is reported in Part X, line 167 If "Yes," complete Schedule D, Part X III Did the organization report an amount for other assets in Part X, line 158 In a set IV Did the organization report an amount for other assets in Part X, line 158 In a set IV		public office? If "Yes," complete Schedule C, Part I	3		Х
5 Is the organization a section \$01(c)(4), 501(c)(6), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98.19.11 "Yes," complete Schedule C, Part III 6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II 7 Did the organization reaches or holid a conservation essement, including asseminest to preserve open space, the environment, historical areas, or historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV 10 Did the organization directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part IV 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part IV 11 If the organization report an amount for researches or other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI 12 Did the organization report an amount for reassets in Part X, line 10? If "Yes," complete Schedule D, Part X 13 Did the organization report an amount for other liabilities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 14 Did the organization report an amount for other liabilities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X 15 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D,	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
smilar amounts as defined in Revenue Procedure 8.19 // "Yes," complete Schedule C, Part III. 5 N/A 10 Did the organization maintain any donor advised funds or any smilar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts the right of the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or histonic structures if "Yes," complete Schedule D, Part III		· · · · · · · · · · · · · · · · · · ·	4		Х
6 Dd the organization maintain any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part I I Dd the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part II I S Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negoliation services? If "Yes," complete Schedule D, Part IV I I I the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V I I I the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V I I I I the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V I I I I the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V I I I I I I I I I I I I I I I I I I	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negolitation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization is device to any of the following questions is "Yes," then complete Schedule D, Part VI, VIII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI Did the organization report an amount for mestments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VII Did the organization report an amount for other assets in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X X Did the organization separate or consolidated financial statements for the tax year? If "Yes," complete Schedule D, Part X X Did the organization report on Part X, column (A), line, 3, more than \$5,000 for give or assistance to individuals		similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	N/	A
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, histonic land areas, or historic structures? If "Yes," complete Schedule D, Part III	6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
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B Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III B Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization sanswer to any of the following questions is "Yes," then complete Schedule D, Part VI, VII, VIII, IX, or X as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part XIII d Did the organization report an amount for other liabilities in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X III Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III W Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X III W Did the organization as chool described in section 170(b)(1)(A)(b)? If "Yes," complete Schedule D, Parts XI, XII, and XIII S Did the organization as chool described in section 170(b)(1)(A)(b)? If "Yes," complete Schedule D, Parts XI, XII, and XIII S Did the organization as a school described in section 170(b)(1)(A)(b)? If "Yes," complete Schedule D,	7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
Schedule D, Part III 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V on the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V on the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part V on the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part V on the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X on the organization report an amount for other liabilities in Part X, line 15? If "Yes," complete Schedule D, Part X on the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X on the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X on the organization or botan separate, independent audited financial statements for the tax year? If "Yes," and if the organization asserted in a consolidated, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X on the organization asserted on a school described in section 170(b)(1)(A)(9)? If "Yes," complete Schedule D, Part X on the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV on the organization		the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
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Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and If the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 of gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	400	• • • • • • • • • • • • • • • • • • • •	111	<u> </u>	
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93-0806295 Page 4

IMMIGRANT AND REFUGEE

Form 990 (2010) COMMUNITY ORGANIZATION
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			v
_	Schedule K. If "No", go to line 25	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
ч	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			<u> </u>
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			.
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			1,00
	instructions for applicable filing thresholds, conditions, and exceptions).	أتتمتن	Ã0	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	├	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-		x
20	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29	-	X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If res, complete schedule in	29	ļ	
30	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?		 	
•	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32	<u>l</u>	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	<u> </u>	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	}		ł
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			X
27	If "Yes," complete Schedule R, Part V, line 2	_36_		 ^
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	27		x
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	37	1	 ^
30	Note. All Form 990 filers are required to complete Schedule O	38	X	Į.
	140to. 7411 0111 000 fileto ale required to complete ochequie o			(2010)

Form 990 (2010) COMMUNITY ORGANIZATION

Part V Statements Regarding Other IRS Filings and Tax Compliance

1s Enter the number reported in Box 3 of Form 1036 Enter 0-f and applicable Enter the number of Enrows W26 included in line 1s, Enter-0-f and applicable Colf the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) with separation organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) within gaming to prize with separation organization rules and the calendar year ending with or within the year covered by this return Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return It is a separation of the calendar year and with or within the year covered by this return It is a separation of the calendar year and or with the reparation that the cale ending year of the organization in the 25, due to the organization in the reparation of \$1,000 or more during the year? As A stary time during the calendar year, did the organization that was an interest in, or a signature or other authority over, a financial account in a foreign country such as a bank account, sectioned account, or other financial account? As A that yime during the calendar year, did the organization has the sea of the foreign country such as a bank account, sectioned account or other financial accounts? If I' Yes, a financial account in a foreign country such as a shall account section of the properties of the organization and the vasion of the properties of the organization and sent the section of the properties of the organization of the section of the properties of the organization of the section of the properties of the organization of the section 170(c). If I' Yes, a financial account is the section of the value of the good of the properties of the organization section of the calendary were not tax deductible? If I' Yes, a financial accounts and properties of the organization of the properties of the org		Check if Schedule O contains a response to any question in this Part V					
b Enter the number of Forms W2Q included in line 1a. Enter 0- if not applicable — Did the organization comply with backup withholding rules for reportable payments to vendors and reportable garrang (gambing) winnings to prize winners? 22 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, lited for the calendar year ending with or within the year covered by this return 5 If a least one is reported on line 2a, did the organization file all required federal employment tax returns? 5 Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-fife (see instructions) 5 Did the organization have unrelated business gross income of \$1,000 or more during the year? 5 A Was a file of Form 950 for for the year II "No, "provide an explanation in Schedule O 5 A Was the organization have unrelated business gross income of \$1,000 or more during the year? 5 A Was the organization as a bank account, securities account, or other financial account? 5 A Was the organization and provided the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5 A Was the organization as party to a prohibited tax shelter transaction at any time during the tax year? 5 A Was the organization as party to a prohibited tax shelter transaction? 6 If "Yes," to line Sai or Sb, did the organization file Form 88867? 6 B Obes the organization shall evertual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6 D If "Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 6 D If "Yes," did the organization shall evertually associated to the payor? 7 D If "Yes," did the organization shall evertually associated the payor to thave the payor to the payor to the payor to the payor to the payor						Yes	No
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describing winnings to prize winners? 2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendary sear ending with or within the year covered by this return 5 If a least one is reported on line 2a, did the organization file all required federal employment tax returns? 5 If the sum of lines 1 and 2a greater than 250, you may be required to e-fife (see instructions) 5 If If Yes, 1 and 1 filed a Form 950 For fire they arr If 1%0, provide an explanation on Standulor of the analysis account in a foreign country (such as a bank account, securities account, or other authority over, a financial account)? 5 If Yes, 1 and 1 filed a Form 950 For fire they arr If 1%0, provide an explanation or Standulor Office (see instructions) 5 Was the organization aparty to a prohibed tax shelter transaction at any time duming the tax year? 5 Was the organization aparty to a prohibed tax shelter transaction at any time duming the tax year? 5 Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization to the tax deductible? 6 Dest the organization have annual gross receipts that are normally greater than \$100,000, and did the organization to the tax deductible? 6 If Yes, 1 did the organization much we very solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 If Yes, 1 did the organization netty the donor of the value of the goods or services provided? 9 Did the organization relieve a payment in excess of \$15 med party as a contribution of any party for goods and services provided? 1 If Yes, 1 indicate the number of Forms 8822 filed during the year. 1 Did the organization relieve a payment in excess of \$15 med party as a contribution of a morpholymorphy and the organization file a form 1098 or required to the Forms 8822 filed during the year. 1 Did the organization relieves a payment in exces	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		,	į
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a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b if "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d if "Yes," indicate the number of Forms 8282 filed during the year Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c		were not tax deductible?			6b		
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93-0806295 Page 6

IMMIGRANT AND REFUGEE

Form 990 (2010) COMMUNITY ORGANIZATION 93-0806295 Page
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 in Schedule O. See instructions.

	10 1110 00, 00, 100 2001, 100 110 1110 1			
<u> </u>	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management		¥	- N
4-	Enter the number of voting members of the governing body at the end of the tax year 1	\cap	Yes	No
	Enter the number of voting members of the governing body at the end of the tax year Enter the number of voting members included in line 1a, above, who are independent 1b 1b			4 4
р 2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	肖	**	2,1
2	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	-		
•	of officers, directors or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		х
b		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	8.	, 87°	* 1
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	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 in Schedule O	9		X_
Sec	etion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		X
þ	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b	<u></u>	_
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		- بي-	
12a		12a	Х	
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise		х	
_	to conflicts?	12b	4	├
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	400	Х]
40	In Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	├──
14 15	Does the organization have a written document retention and destruction policy?	14		<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent	,	ş; ·	1
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>
a	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	1.55		 -
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?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	194		
_	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	ı		ļ
	exempt status with respect to such arrangements?	16b		
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶OR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	ole for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy	and fina	ancial	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organi	zation 🕽	-	
	ANH NGOC TRUONG - (503) 234-1541			
	10301 N.E. GLISAN STREET, PORTLAND, OR 97220			

93-0806295

Page 7

Form 990 (2010) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any	question in this Part VII		

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization		orga I	nıza			nper	ısat			(5)
(A)	(B)			•) 			(D)	(E)	(F)
Name and Title	Average hours per	 (c		Posi		app	LΛ	Reportable compensation	Reportable compensation	Estimated amount of
	week		I		T TOTAL	مرم ا	'97	from	from related	other
	(describe	Individual trustee or director						the	organizations	compensation
	hours for	5 8	See			nsated		organization	(W-2/1099-MISC)	from the
	related organizations	trust	ral fru		93. C	эшс		(W-2/1099-MISC)		organization and related
	in Schedule	wdua	institutional trustee	Officer	Key employee	Highest compensated employee	JĝI.			organizations
	O)	르	ISI	ŧ	<u>ş</u>	를	ᅙ			3
ANDREW CHI										
BOARD MEMBER	1.00	X	L_		L_			0.	0.	0.
MUKESH DALAL	1 00	١							_	
BOARD MEMBER	1.00	X	↓_	<u> </u>	_	ļ.,		0.	0.	0.
STEPHANIE FUHRMAN	1 00	,,								_
BOARD MEMBER	1.00	X	_			-		0.	0.	0.
BOWEN MCBEATH	1.00	x			ļ			0.	0.	0.
BOARD MEMBER RICH SAYRE	1.00	^	├-	<u> </u>	_	-	_	- 0.		0.
BOARD MEMBER	1.00	Х	l	ļ	ļ			0.	0.	0.
CHANPONE SINLAPASAI-OKAMURA	1.00	 	╁╌	┝	-	\vdash	_			0.
BOARD MEMBER	1.00	x						0.	0.	0.
NHU TO-HAYNES			\vdash			┢	\vdash			
BOARD MEMBER	1.00	X						0.	0.	0.
VALERIE PALMER			 	t	T					
PRESIDENT	1.00	X		Х				0.	0.	0.
ROB TIMMONS										
VICE-PRESIDENT	1.00	X	<u></u>	Х				0.	0.	0.
RONAULT CATALANI										
SECRETARY	1.00	X	L	X				0.	0.	0.
SOKHOM TAUCH	1000	1	1	Ì	1			1		
EXECUTIVE DIRECTOR	40.00	┞-	┞	X	$ldsymbol{ldsymbol{ldsymbol{eta}}}$	-	<u> </u>	154,959.	0.	37,033.
			ļ	ļ	ļ	1				
		┼	├	┢	⊢	┼	<u> </u>			
				ĺ		1		1		
		╁	┼-	╁	-	⊢	-	 		
		1	1	1						
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			1							
			\top		Π		Γ			
			L							

IMMIGRANT AND REFUGEE COMMUNITY ORGANIZATION

(A)	istees, Key Ei (B)	mpic	oyee	s, a (C		High	est	Compensated Employ (D)	ees (continued) (E)		(F)
Name and title	Average			Pos	rtion			Reportable	Reportable	Es	timated
	hours per week (describe hours for related organizations in Schedule O)	stee or director	institutional trustee	Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MIS	s com SC) fr org	nount of other pensation om the anization drelated inizations
			_		_						
			_								
		-		_							
		<u> </u> _	ļ			<u> </u>					·
		-	-			-					
1b Sub-total c Total from continuation sheets to Part V	II, Section A	<u> </u>	1	<u> </u>	1	>	!	154,959.		0.	7, <mark>033.</mark> 0.
d Total (add lines 1b and 1c) Total number of individuals (including but no compensation from the organization	not limited to ti	hose	liste	ed a	bov	re) w	no r	154,959. eceived more than \$100			7,033. 1
3 Did the organization list any former officer,			e, ke	y en	nplo	yee,	or h	nighest compensated e	mployee on		Yes No
 line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the standard related organizations greater than \$15t 	um of reportab	ole c							the organization	3	X
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com							elat	ed organization or indiv	idual for services	5	X
1 Complete this table for your five highest co the organization NONE	ompensated in	dep	ende	ent o	cont	tracte	ors t	that received more than	\$100,000 of con	npensation	rom
(A) Name and business	address							(B) Description of	services	((Compe	c) nsation
							_				
							_				
				_				·		<u> </u>	
Total number of independent contractors (\$100,000 in compensation from the organi	_	not l	ımıte	ed to	the	ose II	sted	d above) who received i	nore than	,	990 (2010)

IMMIGRANT AND REFUGEE COMMUNITY ORGANIZATION

			Statement of Rever	iue .		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 a	а	Federated campaigns	1a	170,428.				
gra	t	b	Membership dues	1b		:			
ts, arr	•	C	Fundraising events	1c					
igi ilar			Related organizations	1d	550005				
ons,	•		Government grants (contribut	·	7733885.				
utic	1		All other contributions, gifts, gran	1 1	1000150				
d i			similar amounts not included abo		1093158.				
Š		_	Noncash contributions included in lines	1a-1f ⁻ \$		0007471			
<u> </u>	<u>r</u>	<u>n</u>	Total. Add lines 1a-1f		<u> </u>	8997471.			
ø)	2 8	_	INTERPRET. & TR	ANGT.	Business Code 541900	980,052.	980,052.		
, vic	2 6	a b	INTERNITORIA de IIV	GHIDD:	341900	900,032.	960,032.		
Ser	,	c							
am	`	d							
Program Service Revenue		e							
P	f	f	All other program service reve	enue					
	ç		Total. Add lines 2a-2f			980,052.	>		-
	3		Investment income (including	dividends, inter	est, and				
			other similar amounts)		>	2,683.			2,683.
	4		Income from investment of tax	x-exempt bond p	oroceeds >				
	5		Royalties		<u> </u>				
	_			(i) Real	(ıı) Personal				
	6 a		Gross Rents	60,017.					
			Less. rental expenses	37,723.					
			Rental income or (loss) Net rental income or (loss)	37,723.	•	37,723.			37,723.
			Gross amount from sales of	(i) Securities	(II) Other	31,123.			31,123.
	, ,	•	assets other than inventory	(i) Securities	(ii) Other				
	ŀ	b	Less cost or other basis		<u> </u>				3
			and sales expenses						;
		С	Gain or (loss)						
	•	d	Net gain or (loss)						
e	8 a	а	Gross income from fundraisin	g events (not			,		
Other Revenue			including \$	of					
- Re			contributions reported on line	1c). See					
Jer	_		Part IV, line 18	а	<u> </u>				,
ᅙ			Less direct expenses	. b	L				
			Net income or (loss) from fund	•	<u> </u>				<u></u>
	9 8		Gross income from gaming ac Part IV, line 19						
			Less direct expenses	a					
			Net income or (loss) from gam	b bung activities					
			Gross sales of inventory, less	_					
			and allowances	а					
	Ł	b	Less: cost of goods sold	b					,
			Net income or (loss) from sale	s of inventory					
			Miscellaneous Revenu		Business Code				
	11 a	а	OTHER		900099	66,365.			66,365.
	t	b							
		c	A						
			All other revenue			66 365			· · · · · <u></u>
		е	Total. Add lines 11a-11d			66,365.	000 050		106 994
	12		Total revenue. See instructions.			10,084,294.	980,052.	U.	106,771.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	not include amounts reported on lines 6b, Bb, 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 governments and			J	3
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in			•	
	the U.S. See Part IV, line 22	889,452.	889,452.		,
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				,
5	Compensation of current officers, directors,				
	trustees, and key employees	179,166.		179,166.	_
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 salanes and wages	5,788,907.	5,225,929.	528,561.	34,417
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	139,433.	116,590.	21,926.	917
9	Other employee benefits	771,551.	698,162.	68,467.	4,922
10	Payroll taxes	646,281.	577,503.	63,329.	5,449
11	Fees for services (non-employees).				
	Management				
b	Legal	32,419.	22,463.	9,956.	
C	Accounting	25,183.		25,183.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	380,544.	378,452.	2,092.	
12	Advertising and promotion				
13	Office expenses	352,782.	307,393.	42,576.	2,813
14	Information technology	499.	499.		
15	Royalties	0.40 4.20			
16	Occupancy	248,432.	210,048.	24,849.	13,535
17	Travel	128,139.	122,667.	5,285.	187
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	105 645			
20	Interest	125,647.	90,997.	22,910.	11,740
21	Payments to affiliates	100 600	120 252	<u> </u>	
22	Depreciation, depletion, and amortization	183,629.	132,278.	51,351.	
23	Insurance Characteristics (Appendix Appendix App	34,169.	21,519.	12,513.	137
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
а	SUBCONTRACT EXPENSE	91,304.	91,304.		
b	STAFF DEVO/TRAINING	50,299.	43,040.	7,237.	22
С	MISCELLANEOUS	35,934.	18,032.	7,429.	10,473
d		· · · · · · · · · · · · · · · · · · ·		,	==,=,=
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	10,103,770.	8,946,328.	1,072,830.	84,612
26	Joint costs. Check here I if following SOP	•		,	,
	98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Form	990 (2	2010) COMMUNITY ORGANIZATION		93-	0806295 Page 11
Par	tΧ	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	250.	1	1,021,566.
	2	Savings and temporary cash investments	1,057,239.	2	402,454.
	3	Pledges and grants receivable, net	2,098,635.	3	1,550,962.
	4	Accounts receivable, net	170,358.	4	174,976.
	5	Receivables from current and former officers, directors, trustees, key		٠,	,
		employees, and highest compensated employees Complete Part II		.	
		of Schedule L	**************************************	5	
	6	Receivables from other disqualified persons (as defined under section		<u> </u>	
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)		6	
ş	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges	96,320.	9	44,229.
		Land, buildings, and equipment, cost or other	30,020.		
	IVa	basis Complete Part VI of Schedule D 10a 5,406,175.			
	١,	Less. accumulated depreciation 10b 1,860,744.	2,735,758.	10c	3.545.431.
		Investments - publicly traded securities	102,717.		3,545,431. 25,989.
	11 12	Investments - publicly traded securities Investments - other securities See Part IV, line 11	102/11/6	12	20,7503.
	13	Investments - other securities See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	6,261,277.		6,765,607.
	17	Accounts payable and accrued expenses	440,552.		533,184.
	18	Grants payable and accrued expenses		18	330,2000
	19	Deferred revenue	141,001.		37,212.
	20	Tax-exempt bond liabilities		20	
"	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
ij		highest compensated employees, and disqualified persons. Complete Part II			s , %
Ë	[of Schedule L		22	
	22		1,631,780.	23	2,164,322.
	23 24	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties	2,002,700.	24	2,231,322.
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	2,213,333.		2,734,718.
	20	Organizations that follow SFAS 117, check here	3/223/333	20	2,7,51,712
w	l	lines 27 through 29, and lines 33 and 34.			·
ë	27	Unrestricted net assets	3,404,249.	27	3,482,609.
lan	28	Temporanly restricted net assets	643,695		548,280.
ä	29	Permanently restricted net assets	01370330	29	320,2000
Ĕ	29	Organizations that do not follow SFAS 117, check here	ļ <u>.</u>	+ 23	
Ē		• • • • • • • • • • • • • • • • • • • •			
Net Assets or Fund Balances	30	complete lines 30 through 34. Capital stock or trust principal, or current funds		30	
se	30			31	
t As	31	Paid-in or capital surplus, or land, building, or equipment fund		32	
Se	32	Retained earnings, endowment, accumulated income, or other funds	4,047,944.		4,030,889.
-	33	Total net assets or fund balances	6,261,277		6,765,607.
	34	Total liabilities and net assets/fund balances	0,201,277	1 34	50m 990 (2010)

Form **990** (2010)

Form 990 (2010)

Pa	rt XI Reconciliation of Net Assets				_	
	Check if Schedule O contains a response to any question in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	10,0			
2	Total expenses (must equal Part IX, column (A), line 25)	2	_10,1			
3	Revenue less expenses. Subtract line 2 from line 1	3		-19	, 4	76.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,(47	7,9	<u>44.</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5		2	2,4	21.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	4,() 3 (7,8	89.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
				T	Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.				13:
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audr	t,			
	review, or compilation of its financial statements and selection of an independent accountant?		L:	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule (o [· .	1	
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a	'			
	separate basis, consolidated basis, or both		ļ. •	2.1 2.1	(J.)	, - , -
	X Separate basis Consolidated basis Both consolidated and separate basis		, , ,	797		
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sil	ngle Au	udit			
	Act and OMB Circular A-133?		ľ	3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired au	ıdıt	\neg		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	Х	

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

itallie UI (I	ne organizatio		NT AND REFUG TY ORGANIZAT							3-08062		IIDEI
Part I	Reason 1		ty Status (All organiz		st complete	e this part) See inst	ructions.		<u>, 00002</u>	100	
<u></u>			pecause it is: (For lines 1	_								
		•	s, or association of churc	•	•	•	•	_				
			0(b)(1)(A)(ii). (Attach Sci			••.	-/(•/(• •/(•/					
			al service organization of	•	n section	170(b)(1)(ΔViii).					
	•	•	perated in conjunction					b)(1)(A)(iii). Enter t	he hospital's	s name	e.
	city, and state	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		p.n.a.: 0000.				, ·			-,
	•		penefit of a college or un	niversity ov	vned or op	erated by	a governn	nental unit	describe	ed in	-	
•	_	b)(1)(A)(iv). (Comple	_				3					
6 🔲			ent or governmental unit	described	l ın sectio	n 170(b)(1)(A)(v).					
	-	•	eives a substantial part					r from the	general i	oublic descr	ibed ir	า
		b)(1)(A)(vi). (Complet				J			3			
8 🔲			ection 170(b)(1)(A)(vi). (Complete	Part II)							
9 🔲	-		eives (1) more than 33 1			om contril	outions, m	embershir	o fees, ar	nd aross rec	eipts 1	from
			nctions - subject to certa									
		•	axable income (less sect	,		•				•		
		509(a)(2) . (Complete	•		•		•	, ,				
10 🔲	An organizati	on organized and op	perated exclusively to te	st for publi	c safety S	ee sectio	n 509(a)(4)).				
11 🔲	An organizati	on organized and or	perated exclusively for th	ne benefit o	of, to perfo	rm the fur	nctions of,	or to carry	out the	purposes of	one o	or
	more publicly	supported organiza	itions described in section	on 509(a)(1	l) or sectio	n 509(a)(2) See sec	tion 509(a	a)(3). Che	eck the box	that	
	describes the	type of supporting	organization and comple	ete lines 1	e through	11h						
	a Type I	b 🗀	☐ Type II c	; 🗀 тур	e III - Func	tionally int	egrated		d 🗔] Type III · O	ther	
е 🗀	By checking	this box, I certify tha	it the organization is not					r more disc	qualified	persons oth	er tha	n
	foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	itions desc	cribed in s	ection 509	(a)(1) or	section 509((a)(2).	
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	atıtıs a Ty	ре І, Туре	II, or Type	e III				
	supporting of	ganization, check th	nis box									
g	Since August	17, 2006, has the o	organization accepted ar	ny gift or co	ontribution	from any	of the folk	owing pers	sons?			
	(i) A person	n who directly or ind	rectly controls, either al	one or tog	ether with	persons d	escribed i	ın (ıı) and (ı	ıı) below,		Yes	No
	the gove	eming body of the su	upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)		
	(iii) A 35% d	controlled entity of a	person described in (i) o	or (II) above	∋ ?					11g(iii)		
h	Provide the fe	ollowing information	about the supported or	ganızatıon	(s)							
(i) Name	of supported	(ii) EIN	(iii) Type of organization		rganization			(vi) Is organizatio	the	(vii) Am	ount o	f
orga	anization		(described on lines 1-9		sted in your			(i) organizi U.S.	ed in the	supp	ort	
			above or IRC section	governing		(i) of your	Support					
			(see instructions))	Yes	No	Yes	No	Yes	No			
		<u> </u>		ļ								
				1	1							
				<u> </u>		ļ						
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

(Form 990 or 990 EZ) 2010 COMMUNITY ORGANIZATION 93-0806295 Page 2
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)

sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants.")	8,838,713.	9,266,217.	10,550,558.	10,299,327.	8,997,471.	47,952,286.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to			i			
	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	8,838,713.	9,266,217.	10,550,558.	10,299,327.	8,997,471.	47,952,286.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly			,		*	
	supported organization) included			,			
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)		*				
6	Public support. Subtract line 5 from line 4						47,952,286.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	8,838,713.	9,266,217.	10,550,558.	10,299,327.	8,997,471.	47,952,286.
8	Gross income from interest,		-				
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	65,336.	75,191.	58,113.	63,307.	62,700.	324,647.
9	Net income from unrelated business	· · · · · · · · · · · · · · · · · · ·					
	activities, whether or not the						
	business is regularly carried on		9.				9.
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)	42,771.	20,078.	7,326.	145,061.	66,365.	281,601.
11	Total support. Add lines 7 through 10						48,558,543.
12	Gross receipts from related activities,	etc (see instruction	ons)			12 3	,658,785.
	First five years. If the Form 990 is for		•	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
	organization, check this box and stop						
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
14	Public support percentage for 2010 (line 6, column (f) di	vided by line 11, o	column (f))		14	98.75 %
15	Public support percentage from 2009	Schedule A, Part	II, line 14			15	98.84 %
16a	33 1/3% support test - 2010.If the o	rganization did not	t check the box on	line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization	٠.			$\triangleright \mathbf{X}$
t	33 1/3% support test - 2009. If the o	organization did not	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ation			▶□
178	10% -facts-and-circumstances tes	t - 2010.If the orga	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						ightharpoons
t	10% -facts-and-circumstances tes	_	•	• •	-	7a, and line 15 is	10% or
	more, and if the organization meets t	•					
	organization meets the "facts-and-cir				· ·		ightharpoons
_18	Private foundation. If the organization						ıs >
_							or 990-E7) 2010

Schedule A (Form 990 or 990-EZ) 2010 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	etion A. Public Support	J.C.A., picade comp	note i ditti				
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants ")						
2	Gross receipts from admissions,						
	merchandise sold or services per- formed, or facilities furnished in			1	-		
	any activity that is related to the			l			
	organization's tax-exempt purpose						<u> </u>
3	Gross receipts from activities that						
	are not an unrelated trade or bus-				,		
	iness under section 513				<u> </u>		
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						1
	or expended on its behalf						
5	The value of services or facilities			1			
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and				j		
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received					<u> </u>	
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(Add lines 7a and 7b		<u> </u>			<u> </u>	
	Public support (Subtract line 7c from line 6.)	•			Α ,		
	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar sources						
t	Unrelated business taxable income]]
	(less section 511 taxes) from businesses				1		1
	acquired after June 30, 1975					<u> </u>	
•	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is		}	}	1	\	1
	regularly carried on				<u> </u>		<u></u>
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV)				<u>l</u>	<u> </u>	
13	Total support (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth	tax year as a section	on 501(c)(3) organi	zation,
	check this box and stop here						
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2010 (line 8, column (f) c	livided by line 13,	column (f))		15	%
16						16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage	<u> </u>			
17	Investment income percentage for 20	10 (line 10c, colu	mn (f) divided by I	ine 13, column (f))	·	17	%
18	Investment income percentage from	2009 Schedule A,	Part III, line 17			18	%
	a 33 1/3% support tests - 2010. If the			on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	-					▶□
1	b 33 1/3% support tests - 2009. If the	<u>-</u>	•	, ,			and
	line 18 is not more than 33 1/3%, che	•			•		
20							_ ▶□
_							

IMMIGRANT AND REFUGEE

Schedule A	\ (Form 990	or 990-EZ)	2010	COMMU	YTIN	ORGAN	IZATI	ON			93-08062	
Part IV	Supple	emental I	nform	ation.	omplete	this part to	provide th	e explanat	tions require	d by Part II, lin	e 10, Part II, line 1	7a or 17b,
	and Part	III, line 12	AISO COI	npiete thi	s part to	r any addition	onal Inform	ation (See	Instructions	<u> </u>		
SCHEDI	JLE A,	PART	II,	LINE	10,	EXPLA	NATIO	N FOR	OTHER	INCOME	<u>. </u>	
OTHER	INCOM	IE (\$28	31,6	01)								
							31.					
												
		 -	_									
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					<u> </u>							

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ▶ Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

IMMIGRANT AND REFUGEE Name of the organization

COMMUNITY ORGANIZATION

Employer identification number 93-0806295

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds of	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
	Aggregate grants from (during year)		
	Aggregate value at end of year		
	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		Yes No
6	Did the organization inform all grantees, donors, and donor a	-	ed only
_	for charitable purposes and not for the benefit of the donor of	5 5	•
	impermissible private benefit?		Yes No
Par		ganization answered "Yes" to Form 990, Part	
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or e		ically important land area
	Protection of natural habitat	Preservation of a certified	• •
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	a conservation easement on the last
	day of the tax year		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
	Number of conservation easements included in (c) acquired	• • • • • • • • • • • • • • • • • • • •	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the or	
	year >	, , , , , , , , , , , , , , , , , , , ,	3
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements	• • •	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements during	ng the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the	e year > \$
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(h)((4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense st	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	ition's financial statements that describes the	e organization's accounting for
	conservation easements	_	•
Par	t III Organizations Maintaining Collections of	of Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statemer	nt and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance	e of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	ibes these items.	
b	If the organization elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement ar	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public	service, provide the following amounts
	relating to these items.	·	·
	(i) Revenues included in 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 tre	easures, or other similar assets for financial o	ain, provide
	the following amounts required to be reported under SFAS	_	•
а	Revenues included in Form 990, Part VIII, line 1	, , ,	▶ \$
b	Assets included in Form 990, Part X		> \$
	•		

		II OKGANIZ							95 Page ∠
Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	easures, o	or Other	Similar A	issets (co	ntınued)
3	Using the organization's acquisition, accessi	on, and other record	ls, chec	k any of the	following tha	ıt are a sıgnı	ficant use o	of its collect	tion items
	(check all that apply)								
а	Public exhibition	d	· Щ	Loan or exc	hange progra	ams			
b	Scholarly research	е		Other					
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how tl	ney further t	he organizati	on's exemp	t purpose ir	n Part XIV	
5	During the year, did the organization solicit of								
	to be sold to raise funds rather than to be mi							Yes	☐ No
Par	t IV Escrow and Custodial Arran					"Yes" to For	m 990. Par		
	reported an amount on Form 990, Pa	rt X, line 21		<u> </u>				· · · · , · · · · · ,	•
1a	Is the organization an agent, trustee, custod	an or other intermed	dary for	contribution	ns or other as	sets not inc	luded		
	on Form 990, Part X?		,					Yes	□ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing	table					
_	, voc, oxplain the analigonion in in a arrange	and complete the	,	labio				Amo	unt
С	Beginning balance						1c	Airio	<u> </u>
٦	Additions during the year						1d		
	Distributions during the year						1e		 -
•	Ending balance								
2a	Did the organization include an amount on F	arm 000 Dort V line	010				1f		1 1
			217					└── Yes	∟ No
Par	If "Yes," explain the arrangement in Part XIV TV Endowment Funds. Complete			"Vool to Co	000 Dart	D/ les 10			
	2 Eliastificit Fallas, Complete						Theorem	bank a s T	
4-	Domining of week heles as	(a) Current year	(D) F	Prior year	(c) Two year	IS DACK (d)	Three years		our years back
1a	Beginning of year balance				 		. , 87,		<u>.</u>
b	Contributions				ļ			, ,	
С	Net investment earnings, gains, and losses				ļ	v.	* 	7.55	12 7.
d	Grants or scholarships								· · · · · · · · · · · · · · · · · · ·
е	Other expenditures for facilities	•					2		
	and programs						,	<i>i</i>	<u> </u>
f	Administrative expenses					,			<u>,</u> , ,)
g	End of year balance		L		<u> </u>				·
2	Provide the estimated percentage of the year	ir end balance held a	as.						
а	Board designated or quasi-endowment		_%						
b	Permanent endowment >	%							
С	Term endowment ▶	%							
За	Are there endowment funds not in the posse	ession of the organiz	ation th	at are held a	and administe	ered for the	organizatioi	n	
	by:						_		Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations			•				3a(i	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Sche	dule R?				36	
4	Describe in Part XIV the intended uses of the							تتسا	<u></u>
Pai	t VI Land, Buildings, and Equipn								
	Description of investment	(a) Cost or o	ther	(b) Cost	t or other	(c) Accu	mulated	(d) B	ook value
	,	basis (investi			(other)		ciation	(5,5)	
1a	Land	- '			6,811.		* *	8	16,811.
	Buildings				8,417.	1.65	5,880		02,537.
~	Leasehold improvements			 	,		_,		,,
d	Equipment			21	1,347.	18	5,264		26,083.
	Other			L .	9,600.		9,600		0.
	I. Add lines 1a through 1e (Column (d) must e	agual Form 990. Part	Y colu	 			5,000.		45,431.
1010	in as mos ra unough to foolunn follmost e	rquai i omii 330, rait	A, COIUI	ישווו , נטן היי	· <u> </u>				/ -

IMMIGRANT AND REFUGEE COMMUNITY ORGANIZATION

Part VII Investments - Other Securities.	See Form 990, Part X, line 12.	(c) Method	of voluntion
(a) Description of security or category (including name of security)	(b) Book value	Cost or end-of-ye	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other	<u> </u>		
(A)	 		
(B)			
(C)			
(D) (E)	 		
(F)	 		
(G)			
(H)			
(1)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶			
Part VIII Investments - Program Related.	See Form 990, Part X, line 13		
(a) Description of investment type	(b) Book value		of valuation: ear market value
(1)			
(2)		·	
(3)			
(4)			
(5)			
(6) (7)		· · · · · · · · · · · · · · · · · · ·	
(8)			
(9)			
(10)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, In			
	a) Description		(b) Book value
(1)			
(2)			
(3)			
			
(6)			
(7)		······································	
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col (B)			
Part X Other Liabilities. See Form 990, Part			
1. (a) Description of liability		(b) Amount	•
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5) (6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, col (B) FIN 48 (ASC 740) Foundte in Part XIV, provide the text of the found	line 25)	NO 1000 NO 100	WAS THE PROPERTY OF A PROPERTY
2. FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote in Part XIV, provide the text of the footnote in Part XIV, provide the text of the footnote in Part XIV, provide the text of the footnote in Part XIV, provide the text of the footnote in Part XIV, provide the text of the footnote in Part XIV, provide the text of the footnote in Part XIV, provide the text of the footnote in Part XIV, provide the text of the footnote in Part XIV, provide the text of the footnote in Part XIV, provide the fext of the footnote in Part XIV, provide the fext of the footnote in Part XIV, provide the fext of the footnote in Part XIV, provide the fext of the footnote in Part XIV, provide the fext of the footnote in Part XIV, provide the fext of the footnote in Part XIV, provide the fext of the footnote in Part XIV, provide the fext of th	те то вте огданизация в плалстаі втатетег	ins that reports the organization's ilability	ior uncertain tax positions under

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

COMMUNITY CENTER DEPRECIATION

22,294.

SCHEDULE I (Form 990)			Grants and Governments	Other Assistances, and Individuals	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States	sə;		2010 2010
Department of the Treasury Internal Revenue Service		Сотріє	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.	n answered "Yes" to Fo ➤ Attach to Form 990.	' to Form 990, Par m 990.	t IV, line 21 or 22.		Open to Public
Name of the organization	IMMIGRANT COMMUNITY	AND REFUGEE ORGANIZATION	SEE FION				<u> </u>	Employer identification number 93-0806295
Part I General Info	General Information on Grants and Assistance	Assistance						
1 Does the organizat	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	ubstantiate the	amount of the grants	or assistance, the	grantees' eligibility	/ for the grants or ass	istance, and the selectic	
	critena used to award the grants or assistance?	ice?		;				X Yes No
꺐	Describe in Part IV the organization's procedures for monitoring the u	dures for monito	oung the use of grant	se of grant funds in the United States	d States			
Part II Grants and (Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	vernments and	Organizations in the	United States. C	omplete if the orga	inization answered "Y	es" to Form 990, Part IV	', line 21, for any
1 (a) Name and address of organization or government	ame and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of valuation (book, non-cash assistance assistance assistance or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
						folio		
2 Enter total number	Enter total number of section 501(c)(3) and government organizations	government orga	anizations					
۱,	eduction Act Notice, see	e the Instruction	ns for Form 990.					Schedule I (Form 990) (2010)

93-0806295

Page 2

Schedule I (Form 990) (2010)

Part III Grants and Other

רמון זון כמון טי טעטווכמיפט זו מסטונטומן אטמיפי זא וופטפט					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
STIPEND	1746	87,937.	0.		
RENTAL ASSISTANCE	132	0	156,471.	ЕМУ	RENTAL ASSISTANCE
SUPPLIES	1015	.0	45,038.	МУ	FOOD AND CLOTHING
EDUCATION SUPPLIES	131	.0	3,365,FMV		EDUCATIONAL SUPPLIES
TRANSPORTATION ASSISTANCE	2690	0	485,989.FMV	AMA	TRANSPORTATION ASSISTANCE INCLUDING BUS PASSES
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information	le the information	required in Part I, II	ne 2, and any other	additional information	
SCHEDULE I, PART I, LINE 2: ASSISTANCE	IS	PROVIDED FO	FOR ELIGIBLE	×	
PARTICIPANTS IN VARIOUS PROGRAMS.	SELECTION	IS	BASED UPON PROGRAM	SRAM	
ELIGIBILITY AND MONITORING OF THE	USE OF AS	ASSISTANCE	IS ACCOMPLISHED	ISHED THROUGH	
PROGRAM MONITORING AND REPORTING OF	ALL	PARTICIPANTS.			

032102 01-13-11

AND REFUGEE	ORGANIZATION
IMMIGRANT	COMMUNITY

Schedule I (Form 990) COMMUNITY ORGANIZATION	AND REFUGEE ORGANIZATION		11.0		93-0806295 Page 2
Continuation of Grants and Other Assistance to Individ	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
CHILD CARE	110.	0	35,980.FMV	PMV	CHILD CARE ASSISTANCE
WORK TOOLS AND SUPPLIES	97.	0	8,445,FMV	FMV	WORK TOOLS AND SUPPLIES
UTILITY SUBSIDIES	318.	37,437.	0		
TUITION AND FEES ASSISTANCE	171.	0.	16,614.FMV	FMV	TRAINING SERVICES
SUBSIDIZED WORK	3.	0.	1,208.FMV	FMV	SUBSIDIZED WORK
OTHER EXPENSES	148.	0.	10,968.	FMV	OTHER EXPENSES
					Schedule I (Form 990)

SCHEDULE J (Form 990)

Part I

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,
Part IV, line 23.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

IMMIGRANT AND REFUGEE COMMUNITY ORGANIZATION

Questions Regarding Compensation

Employer identification number 93-0806295

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	4-40 (40) 3-6-5-5	A.	- %
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.		~~	". N
	First-class or charter travel Housing allowance or residence for personal use	_ ^ 	, (%) , (%), (1	
	Travel for companions Payments for business use of personal residence	STA	* ****	ici
	Tax indemnification and gross-up payments Health or social club dues or initiation fees		į į	
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)		٠, ١	, ,
		A		, ,
þ	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	<u>3</u>	~~	13:14
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,		Ì	
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
		1		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			4
	CEO/Executive Director Check all that apply		40	*
	Compensation committee Written employment contract	2	200	, ,
	Independent compensation consultant X Compensation survey or study		₩,, \$ 0	
	X Form 990 of other organizations X Approval by the board or compensation committee	, 10 , 10 , 10 , 10		
4	Division the view did any passes lated in Faire 200 Float VIII. Continue A. Ivia dia vieta view the files	2 8	*44,	,
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	. Ž ~ .		1
_	organization or a related organization. Receive a severance payment or change-of-control payment from the organization or a related organization?	∦ 4a	.334	X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
Ů	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		si #	
	The to any of lines 42 o, list the persons and provide the applicable amounts for each term in a farthi.	,	W 44	
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.		"Vit	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	22 S		, ,
	contingent on the revenues of			, !
а	The organization?	5a		X ~
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	>	*	_, ?i
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	4,8	Y	
	contingent on the net earnings of		-,2 	200-00-03
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.	<u> </u>	iA	
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	ļ	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	<u> </u>	L

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

Schedule J (Form 990) 2010

93-0806295

COMMUNITY ORGANIZATION

Schedule J (Form 990) 2010 COMMUNITY ORGANIZA

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

		(B) Breakdown of W	W-2 and/or 1099-MISC compensation	3C compensation	(C)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	retirement and other deferred compensation	benefits	(B)(l)-(D)	reported in prior Form 990 or Form 990-EZ
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	!			(Schedul	Schedule J (Form 990) 2010

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

032211 01-24-11

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Name of the organization

IMMIGRANT AND REFUGEE COMMUNITY ORGANIZATION

Employer identification number 93-0806295

Schedule O (Form 990 or 990-EZ) (2010)

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
OREGON SOCIETY.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
FAMILY AND COMMUNITY SERVICES - IRCO'S CULTURALLY SPECIFIC
ANTI-POVERTY, DOMESTIC VIOLENCE SERVICES, FINANCIAL LITERACY, FAMILY
MEDIATION, AND AFRICA HOUSE PROGRAMS, HELP FAMILIES AND COMMUNITIES
BECOME HEALTHY, SELF-SUFFICIENT, AND INTERGRATED.
EXPENSES \$ 1,152,213. INCLUDING GRANTS OF \$ 196,847. REVENUE \$ 0.

INTERNATIONAL LANGUAGE BANK (ILB) - IRCO'S ILB PROVIDES INTERPRETATION
AND TRANSLATION SERVICES ON A FEE FOR SERVICE BASIS TO OTHER HEALTH AND
SERVICE AGENCIES AND THE LEGAL SYSTEM TO ENSURE THAT LIMITED-ENGLISH
SPEAKING REFUGEES AND IMMIGRANTS HAVE EQUAL ACCESS AND ARE INCLUDED
WITHIN A MULTI-ETHNIC SOCIETY.
EXPENSES \$ 842,655. INCLUDING GRANTS OF \$ 0. REVENUE \$ 980,052.
SENIOR SERVICES - IRCO OPERATES THE MID-COUNTY SENIOR CENTER AND OTHER
SENIOR PROGRAMS THAT PROVIDE CASE MANAGEMENT AND OTHER SERVICES WITH
THE OBJECTIVE OF HELPING SENIORS REMAIN INDEPENDENT, SELF-SUFFICIENT
AND LIVING IN THEIR HOME AS LONG AS POSSIBLE.
EXPENSES \$ 503,199. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.
FORM 990, PART VI, SECTION B, LINE 11: THE FISCAL MANAGER REVIEWS THE FORM
990 AND SUBMITS IT TO THE EXECUTIVE DIRECTOR FOR REVIEW. AFTER REVIEW BY

THE EXECUTIVE DIRECTOR, THE FORM IS SUBMITTED TO THE FINANCE COMMITTEE AND

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

Employer identification number 93-0806295

ULTIMATELY THE BOARD OF DIRECTORS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ANNUALLY, BOTH IRCO'S BOARD OF
DIRECTORS AND KEY MANAGEMENT REVIEW IRCO'S CONFLICT OF INTEREST POLICIES.

THEY SUBMIT THE WRITTEN DOCUMENT THAT ACCOMPANIES IT, WHEREIN THEY DECLARE
ANY AND ALL POTENTIAL CONFLICTS OF INTEREST. IRCO'S MANAGEMENT AND BOARD
OF DIRECTORS ARE DIRECTLY MONITORED BY THE EXECUTIVE DIRECTOR FOR THEIR
COMPLIANCE. BOTH GROUPS MAY ALSO BE INDIRECTLY MONITORED BY THEIR PEERS.
ANY CONCERN FOR NONCOMPLIANCE MAY BE REPORTED TO THE PRESIDENT OF THE
BOARD, EXECUTIVE DIRECTOR, OR HUMAN RESOURCES MANAGER. IRCO'S MANAGEMENT
ANNUALLY RECEIVES PERFORMANCE EVALUATIONS IN WHICH SITUATIONS OF CONFLICTS
OF INTEREST MAY ALSO BE EVALUATED.

FORM 990, PART VI, SECTION B, LINE 15A: ANNUALLY, THE HUMAN RESOURCES MANAGER PREPARES A COMPARISON OF THE COMPENSATION OF SELECTED EXECUTIVE DIRECTORS AT LOCAL NONPROFITS. THE COMPARISON IS MADE USING PUBLICLY AVAILABLE FORM 990'S AND CONVERSATIONS WITH THOSE AGENCIES WILLING TO SHARE COMPENSATION INFORMATION. THE COMPARISON INFORMATION IS SUBMITTED TO THE EXECUTIVE DIRECTOR FROM THE HUMAN RESOURCES MANAGER. THE EXECUTIVE DIRECTOR SUBMITS THE INFORMATION TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS WHO REVIEWS THE COMPARISION INFORMATION AND ASSESS THE PERFORMANCE OF THE EXECUTIVE DIRECTOR OVER THE PAST YEAR. WITH THAT INFORMATION, THE EXECUTIVE COMMITTEE DETERMINES ANY CHANGE TO THE EXECUTIVE DIRECTOR'S COMPENSATION. THE EXECUTIVE COMMITTEE DOCUMENTS THIS PROCESS IN THEIR MEETING NOTES OR RESOLUTIONS. THIS PROCESS WAS LAST UNDERTAKEN IN NOVEMBER 2009.

chedule O (Form 990 or 990 EZ) (2010)	Page 2
lame of the organization IMMIGRANT AND REFUGEE COMMUNITY ORGANIZATION	Employer identification number 93-0806295
FORM 990 ARE POSTED ON THE ORGANIZATION'S WEBSITE. THE O	RGANIZATION'S
GOVERNING DOCUMENTS AND CONFICT OF INTEREST POLICY ARE AV	AILABLE UPON
REQUEST.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED GAINS ON INVESTMENTS:	2,421.
	

Form 8868 (Rev. January 2011) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

-	re filing for an Automatic 3-Month Extension, comple	_	•	•	•	LX.	
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of this	form).			
Do not co	mplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previously fi	led Form 8	3868.		
Electronic	c filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of time t	o file (6 m	onths for a corpo	ration	
required to	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically file F	orm 8868	to request an ex	tension	
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for Trar	nsfers Ass	ociated With Cer	taın	
Personal E	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions) For more details on t	he electro	nic filing of this f	orm,	
visit www.	irs.gov/efile and click on e-file for Chanties & Nonprofits	i					
Part I	Automatic 3-Month Extension of Time	Only su	bmit original (no copies needed)				
A corpora	tion required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and con	nplete			
Part I only					. •		
	orporations (including 1120-C filers), partnerships, REM ime tax returns.	IICs, and t	rusts must use Form 7004 to request ar	n extensio	n of time		
Type or	Name of exempt organization			Employe	er identification	number	
print	TIRETONIUM AND DEFENCE						
	COMMUNITY ORGANIZATION 93-0806295						
Frie by the	Number, street, and room or suite no. If a P.O. box, see instructions.						
filing your							
return See Instructions Crty, town or post office, state, and ZIP code For a foreign address, see instructions. PORTLAND, OR 97220							
						01	
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)		•	<u>[U]1</u>	
Application	on	Return	Application			Return	
Is For		Code	Is For			Code	
Form 990		01	Form 990-T (corporation)			07	
Form 990-	BL	02	Form 1041-A			08	
Form 990-	EZ	03	Form 4720			09	
Form 990-	PF	04	Form 5227			10	
Form 990-	T (sec 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-	T (trust other than above)	06	Form 8870		·	12	
	ANH NGOC TRUON						
	oks are in the care of \triangleright 10301 N.E. GLI	SAN S'	TREET - PORTLAND, OF	<u>9722</u>	20		
Teleph	one No. ► <u>(503) 234-1541</u>		FAX No. ▶				
If the o	rganization does not have an office or place of busines	s in the Ur	nited States, check this box				
If this is	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) If th	us is for th	e whole group, c	heck this	
box ▶ [. If it is for part of the group, check this box_	and atta	ach a list with the names and EINs of all	members	the extension is	for	
1 I red	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time un	til			
	MAY 15, 2012 , to file the exemp	t organiza	ation return for the organization named a	above The	e extension		
is fo	or the organization's return for:						
▶[calendar year or						
▶[X tax year beginning OCT 1, 2010	, an	nd ending <u>SEP 30, 2011</u>				
2 If th	e tax year entered in line 1 is for less than 12 months, on the control of the co	check reas	on. Initial return Fina	al return			
3a If th	is application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any				
non	refundable credits See instructions			3a \$		0.	
b If th	is application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and				
<u>esti</u>	mated tax payments made Include any pnor year over	payment a	llowed as a credit.	3b \$	<u> </u>	0.	
c Bala	ance due. Subtract line 3b from line 3a. Include your pa	ayment wil	th this form, if required,				
<u>b</u> y ι	using EFTPS (Electronic Federal Tax Payment System)	See instru	uctions.	3c \$	<u></u>	0.	
Caution.	If you are going to make an electronic fund withdrawal	with this F	orm 8868, see Form 8453-EO and Form	8879-EO	for payment inst	ructions.	