

Form **990**

** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

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

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

2022
Open to Public

Department of the Treasury

		e 2022 calendar year, or tax year beginning and endir	na					
_	heck if	C Name of organization	- 9	D Employer identific	cation number			
D a	neck if pplicabl	THE AMERICAN IRELAND FUND (DBA THE		D Employer identilis	cation number			
	¬Addre	SS THE AND STREET AMERICA (MAIL THE AND STREET)						
H	_ chang ¬Name			25-1306992				
H	_ chang ⊤Initial	*	,					
H	_lreturn □Final	,		· ·				
	return termir	_		(617) 574-07				
_	ated ∃Amen	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	28,290,393.			
H	_return □Applic	BUSION, MA 02109		H(a) Is this a group re				
	_tion pendi	F Name and address of principal officer: CATIKTONA FOTTREED		for subordinates				
		SAME AS C ABOVE	7	H(b) Are all subordinates in				
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	•	list. See instructions			
	Vebsi			H(c) Group exemptio				
	orm of		L Year o	of formation: 1976	A State of legal domicile: PA			
Pa		Summary	~~~					
Φ	1	Briefly describe the organization's mission or most significant activities: EDUCATION;		UNITY				
auc		DEVELOPMENT; ARTS & CULTURE AND PEACE & (CONTINUED ON SCHEDULE O						
Governance	2	Check this box if the organization discontinued its operations or disposed of	f more					
ŏ	3	Number of voting members of the governing body (Part VI, line 1a)			48			
<u>م</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)			48			
es		Total number of individuals employed in calendar year 2022 (Part V, line 2a)			18			
Ĭ		Total number of volunteers (estimate if necessary)			75			
Activities &		Total unrelated business revenue from Part VIII, column (C), line 12			0.			
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.			
				Prior Year	Current Year			
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)	.	22,490,700.	20,794,012.			
enc	9	Program service revenue (Part VIII, line 2g)		0.	0.			
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,375,190.	794,640.			
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-1,189,941.	-1,249,919.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		22,675,949.	20,338,733.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		17,742,439.	16,474,438.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,203,860.	2,508,944.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		55,950.	31,800.			
ă		Total fundraising expenses (Part IX, column (D), line 25) 1,659,181.						
Ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,008,670.	2,479,841.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		22,010,919.	21,495,023.			
	19	Revenue less expenses. Subtract line 18 from line 12		665,030.	-1,156,290.			
Net Assets or Fund Balances			Beg	ginning of Current Year	End of Year			
set	20	Total assets (Part X, line 16)		28,715,910.	25,730,540.			
A A	21	Total liabilities (Part X, line 26)		7,719,579.	7,682,342.			
	22	Net assets or fund balances. Subtract line 21 from line 20		20,996,331.	18,048,198.			
	rt II	Signature Block						
		lties of perjury, I declare that I have examined this return, including accompanying schedules and s			knowledge and belief, it is			
true,	corre	t, and complete. Declaration of preparer (other than officer) is based on all information of which pr	eparer l	has any knowledge.				
		Cignature of officer		Doto				
Sig		Signature of officer		Date				
Her	е	CONALL MCGONAGLE, CFAO						
		Type or print name and title	Ιn	lata later F	T DTIN			
		Print/Type preparer's name Preparer's signature		Date Check Check	PTIN			
Paid		ERIN COUTURE (III) CONTURE	<u> </u>	1/13/2023 if self-employ				
Prep		Firm's name GRANT THORNTON LLP		Firm's EIN 36-6055558				
Use	Only	Firm's address 75 STATE STREET		_				
		BOSTON, MA 02109		Phone no.617				
May	the II	RS discuss this return with the preparer shown above? See instructions			X Yes No			

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) THE AMERICAN IRELAND FUND (DBA THE print IRELAND FUNDS AMERICA/THE IRELAND FUNDS) 25-1306992 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 10 POST OFFICE SQUARE, N950 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. BOSTON, MA 02109 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 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 Form 990-T (corporation) CONALL MCGONAGLE Telephone No. ▶ 617-574-0720 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box 🕨 📉 and attach a list with the names and TINs of all members the extension is for. NOVEMBER 15, 2023 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or , and ending Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

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LHA

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)

4e Total program service expenses

Other program services (Describe on Schedule O.)

278,898. including grants of \$

Form **990** (2022)

18,133,636.

0.) (Revenue \$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	Ť		
•	during the tax year? If "Yes," complete Schedule C, Part II	4		x
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	i i		
Ŭ	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	Ť		
U	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<u> </u>
7		_		x
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete		v	
	Schedule D, Part III	8	Х	-
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	···		\vdash
.5	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	-10		\vdash
.9	,	19		x
20a	complete Schedule G, Part III	20a		X
	• •	20a 20b		
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21	Х	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	41		l

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Form 990 (AMERICA/THE
Part IV	Checklist of	Required S	Schedu	ules (continued)

	· /		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
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	Х	
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	04-		х
h	Schedule K. If "No," go to line 25a	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			l
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		х
28	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		
20	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
-	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
04	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, Part II, III, or IV, and	34		х
35 =	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	554		
-	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
Pai	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Fal				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	N _C
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	No
	Enter the number reported in box 3 or Form 1030. Enter 40 in not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
_	(gambling) winnings to prize winners?	1c	х	

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 18			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a	Х	
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ad	counts (FBAR).			
5a			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				,,
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	· ·	۵.		
_	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).	dana anno dala dan dha anno 0	_	Х	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a	X	
b			7b	Λ	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	•	7-		x
a	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year	7d	7c		
d e	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	•	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7 6		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		<u> </u>
h	If the organization received a contribution of qualified intellectual property, and the organization rife ro		79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		711		
•	and the second section is a second section of the second section of the second section is a second section of the sec		8		х
9	Sponsoring organizations maintaining donor advised funds.		_		
а			9a		х
b	Did the constitution and a distribution to a decomposition and the		9b		Х
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
D	Enter the amount of reserves the organization is required to maintain by the states in which the	405			
_	organization is licensed to issue qualified health plans	13b			
	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	13c	1/10		х
14a h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14a 14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		1 -1 D		
	excess parachute payment(s) during the year?		15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		х
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act	tivities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes." complete Form 6069.				

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

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

<u></u>	Check if Schedule O contains a response or note to any line in this Part VI						X
Sec	tion A. Governing Body and Management						
		ı	ı			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>		48			
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		48			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with	any other				
	officer, director, trustee, or key employee?			. :	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the	direc	t supervision				
	of officers, directors, trustees, or key employees to a management company or other person?			<u> </u> :	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	🚅	1		Х
5	Did the organization become aware during the year of a significant diversion of the organization's asset	ets?		上	5		Х
6	Did the organization have members or stockholders?			. 🔟	3		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or				
	more members of the governing body?			. 7	а		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or				
	persons other than the governing body?			7	b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by th	e following:				
а	The governing body?			<u>8</u>	а	Х	
b	Each committee with authority to act on behalf of the governing body?			. <u> 8</u>	b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched a	it the				
_	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)				
				_		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			. 10	Оа		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such characteristics.	apters	s, affiliates,				
				<u>1</u> ()b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befo	re filing the form?	1	1a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.						
	Did the organization have a written conflict of interest policy? If "No," go to line 13			- 1	2a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12	2b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	'es," a	lescribe				
	on Schedule O how this was done				2c	Х	
13	Did the organization have a written whistleblower policy?			. —	3	X	
14	Did the organization have a written document retention and destruction policy?			. [1	4	Х	
15	Did the process for determining compensation of the following persons include a review and approval	l by in	dependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					v	
	The organization's CEO, Executive Director, or top management official				Ба 	Х	v
b	Other officers or key employees of the organization			. 1	5b		Х
40-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		م ملاند				
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements and the contribute assets to, or participate in a joint venture or similar arrangements and the contribute assets to, or participate in a joint venture or similar arrangements.			رم ا			Х
	taxable entity during the year?			10	3a		Δ
a	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	-	· ·				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ			4	- la		
Sec	exempt status with respect to such arrangements? tion C. Disclosure			. 10	3b		
17	List the states with which a copy of this Form 990 is required to be filedCA,CO,CT,DC,FL,IL,M.	A NJ	NY PA TX VA				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar			(3)s or	lv) s	availah	nle
.5	for public inspection. Indicate how you made these available. Check all that apply.	000	. (5551.511.551(6)	JJ 01	.y, c	. randk	2.0
	X Own website X Another's website X Upon request Other (explain	on S	chedule (1)				
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con		•	and fin	anc	ial	
.5	statements available to the public during the tax year.	(z. microst policy, o	A1 10 1111	ui 10		
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks an	d records				
_0	CONALL MCGONAGLE - 617-574-0720	ail	a 1000143				
	10 POST OFFICE SQUARE, SUITE N950, BOSTON, MA 02109						

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

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

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

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

Check this box if neither the organization ne	or any related	orga	niza	tion	con	nper	sat	ed any current officer, d	irector, or trustee.	
(A)	(B)		(C)					(D)	(E)	(F)
Name and title	Average	(do	not c	Pos			one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week	-	l a		l	1711 43	100)	from	from related	other
	(list any hours for	lirecto						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or 0	trustee			satec		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	al tru		yee	n bei		1099-NEC)	10001120,	and related
	below	Individual trustee or director	Institutional	ie.	Key employee	Highest compensated employee	Jer.			organizations
	line)	Indi	Insti	Officer	Key	High	Former			
(1) CONALL MCGONAGLE	45.00	_								
CHIEF FINANCIAL & ADMIN OFFICER	0.00			Х				277,156.	0.	57,270.
(2) CAITRIONA FOTTRELL	50.00	1								
WORLDWIDE PRESIDENT AND CEO	0.00			Х				290,385.	0.	40,297.
(3) SARAH PAGE	40.00									
VICE PRESIDENT OF DEVELOPMENT	0.00					Х		198,793.	0.	31,358.
(4) AINE MALLAGHAN VICE PRESIDENT OF DEVELOPMENT	0.00	1				x		178,500.	0.	26 230
(5) MARJORIE MULDOWNEY	40.00					^		170,500.	0.	26,230.
VICE PRESIDENT OF DEVELOPMENT	0.00	1				x		183,385.	0.	19,767.
(6) RORY MACINTYRE	40.00							100,505.	· ·	25,707.
DIRECTOR, OFFICE OF THE CEO	0.00	1				x		157,445.	0.	26,602.
(7) BRIAN BECK	40.00							, -		, -
DIRECTOR OF IT	0.00	1				x		104,167.	0.	39,693.
(8) EUGENE MCQUADE	8.00							· ·		,
CHAIR	0.00	х		х				0.	0.	0.
(9) SHAUN KELLY	5.00									
VICE-CHAIR	0.00	Х		х				0.	0.	0.
(10) ANGELA MOORE	5.00									
VICE-CHAIR	0.00	Х		Х				0.	0.	0.
(11) SHEILA O'MALLEY FUCHS	3.00									
SECRETARY	0.00	Х		Х				0.	0.	0.
(12) CHRISTOPHER M. CONDRON	3.00									
TREASURER	0.00	Х		Х				0.	0.	0.
(13) PATRICK BROE	1.00	1								
DIRECTOR	0.00	Х						0.	0.	0.
(14) JEREMIAH CALLAGHAN	1.00	-								
DIRECTOR (THRU 09/2022)	0.00	Х						0.	0.	0.
(15) RORY CAMERON	2.00	-							_	_
DIRECTOR	 	Х						0.	0.	0.
(16) LIAM CASEY	1.00									_
DIRECTOR (17) MUNAC COPP	 	Х			\vdash			0.	0.	0.
(17) THOMAS CODD	3.00	Ţ						_	_	^
DIRECTOR	0.00	Х		l	<u> </u>			0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
Section A. Officers, Directors, Trus	1	loy	ees,			ghes	t Co		, ,			
(A) Name and title	(B) Average hours per	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of		
	week (list any hours for related organizations below line)				irecto		tee)	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations		
(18) SUZANNE CORCORAN	2.00											
DIRECTOR	0.00	Х						0.	0.	0.		
(19) THOMAS CORCORAN	1.00	ł						_	_	_		
DIRECTOR (THRU 02/2022)	0.00	Х						0.	0.	0.		
(20) KEVIN CURLEY	2.00	ł						_	_	_		
DIRECTOR	0.00	Х						0.	0.	0.		
(21) SUSAN DAVIS	3.00	ł						_	_	_		
DIRECTOR	0.00	Х						0.	0.	0.		
(22) LORE MORAN DODGE	1.00											
DIRECTOR	0.00	Х						0.	0.	0.		
(23) EJ FARRELL DIRECTOR	0.00	х						0	_			
(24) IRIAL FINAN	2.00	Λ						0.	0.	0.		
DIRECTOR	0.00	х						0.	0.	0.		
(25) ANNE FINUCANE	3.00	Α.						· · ·	0.	· ·		
DIRECTOR	0.00	Х						0.	0.	0.		
(26) JOHN FITZPATRICK	3.00	21						· ·	· ·	<u>·</u>		
DIRECTOR	0.00	x						0.	0.	0.		
1b Subtotal	1 .,,,,						·	1,389,831.	0.	241,217.		
c Total from continuation sheets to Part VI	I. Section A	•	0.	0.	0.							
d Total (add lines 1b and 1c)								1,389,831.	0.	241,217.		

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

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

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

the organization. Report compensation for the calendar year ending with or with	Title organization 3 tax year.	
(A)	(B)	(C)
Name and business address	Description of services	Compensation
GRANT THORNTON LLP		
75 STATE STREET, BOSTON, MA 02109	ACCOUNTING SERVICES	131,200.
SUSAN O'NEILL		
5910 GLOSTER ROAD, BETHESDA, MD 20816	EVENT PLANNING	111,096.
2 Total number of independent contractors (including but not limited to those listed		

SEE PART VII, SECTION A CONTINUATION SHEETS

\$100,000 of compensation from the organization

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Form 990

Dort VIII										
Part VII Section A. Officers, Directors, True		nplo I	yee			lighe	est (` ,	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	/			ition			Reportable	Reportable	Estimated
	hours per	(CI	теск	all	that	appi	у)	compensation from	compensation from related	amount of other
	week					ee		the	organizations	compensation
	(list any	ector				m plo,		organization	(W-2/1099-MISC)	from the
	hours for	ordire	a			ted er		(W-2/1099-MISC)		organization
	related	stee (truste		в	ben sa				and related
	organizations	nal tru	ional 1		ploye	tcom				organizations
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) ELIZABETH FRAWLEY BAGLEY	1.00	-	=	0	~	エ	Œ			
DIRECTOR (THRU 12/2022)	0.00	Х						0.	0.	0.
(28) MICHAEL GALLAGHER	1.00	21						· ·	•••	٠.
DIRECTOR	0.00	х						0.	0.	0.
(29) LORETTA BRENNAN GLUCKSMAN	3.00							••		•
DIRECTOR	0.00	х						0.	0.	0.
(30) KENNETH GORMAN	2.00									-
DIRECTOR	0.00	х						0.	0.	0.
(31) LESLIE KING GRENIER	2.00									-
DIRECTOR	0.00	х						0.	0.	0.
(32) HARRY HARTFORD	2.00									
DIRECTOR	0.00	х						0.	0.	0.
(33) MICHAEL HIGGINS	2.00									
DIRECTOR	0.00	х						0.	0.	0.
(34) MICHAEL JACKSON	1.00									
DIRECTOR	0.00	х						0.	0.	0.
(35) ADRIAN JONES	2.00									
DIRECTOR	0.00	х						0.	0.	0.
(36) JOHN B. KANE	1.00									
DIRECTOR	0.00	х						0.	0.	0.
(37) MICHELE KESSLER	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(38) JOHN LYNCH	1.00									
DIRECTOR (THRU 02/2022)	0.00	Х						0.	0.	0.
(39) JOHN MANNING	1.00									
DIRECTOR (THRU 09/2022)	0.00	Х						0.	0.	0.
(40) TARA MCCABE	2.00									
DIRECTOR	0.00	Х						0.	0.	0.
(41) DOLORES MCCALL	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(42) MICHAEL MCGAVICK	2.00									
DIRECTOR	0.00	Х						0.	0.	0.
(43) WILLIAM S. MCKIERNAN	3.00									
DIRECTOR	0.00	Х						0.	0.	0.
(44) THOMAS F. MEAGHER, JR	3.00								_	
DIRECTOR	0.00	Х						0.	0.	0.
(45) BARTHOLOMEW MURPHY	2.00							_	ا _	_
DIRECTOR	0.00	Х						0.	0.	0.
(46) WILLIAM MURPHY	2.00	l							0.	0.
DIRECTOR	0.00	Х						0.		

Form 990 IRELAND FUND	S AMERICA/T	S)	25-1306992							
Part VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd F	ligh	est (Compensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos	ition	ı		Reportable	Reportable	Estimated
	hours	(cl	heck	c all	that	app	ly)	compensation	compensation	amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(47) SHANE NAUGHTON	3.00									
DIRECTOR	0.00	Х						0.	0.	0
(48) MICHAEL O'HALLERAN	1.00									
DIRECTOR	0.00	Х						0.	0.	(
(49) RONALD O'HANLEY	1.00									
DIRECTOR	0.00	Х						0.	0.	d
(50) THOMAS E. O'NEILL	2.00									
DIRECTOR	0.00	х						0.	0.	0
(51) THOMAS P. O'NEILL	1.00									
DIRECTOR (THRU 09/2022)	0.00	х						0.	0.	C
(52) CHRYSS O'REILLY	1.00								•	
DIRECTOR	0.00	х						0.	0.	0
(53) ANTHONY O'REILLY	1.00								•	
DIRECTOR	0.00	х						0.	0.	
(54) THOMAS C. QUICK	3.00								••	
DIRECTOR	0.00	х						0.	0.	d
(55) THOMAS QUINLAN	1.00								••	
DIRECTOR	0.00	х						0.	0.	C
(56) PAUL QUINN	1.00								••	
DIRECTOR	0.00	х						0.	0.	C
(57) ROBERT REYNOLDS	1.00								••	
DIRECTOR	0.00	х						0.	0.	(
(58) JAMES ROONEY	2.00								•	
DIRECTOR	0.00	х						0.	0.	
(59) COLIN RYAN	1.00								•	
DIRECTOR	0.00	x						0.	0.	(
(60) MAUREEN SULLIVAN	1.00									
DIRECTOR	0.00	х						0.	0.	(
(61) MARK TUOHEY	1.00									
DIRECTOR (THRU 09/2022)	0.00	х						0.	0.	(
(62) STEPHEN WHYTE	2.00									
DIRECTOR	0.00	х						0.	0.	d
Fotal to Part VII, Section A, line 1c										

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Pa	rt VI	II Statement of Revenue					
		Check if Schedule O contains a response or	note to any lin	e in this Part VIII			
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
र र	1 a	Federated campaigns1a					
ran	b	Membership dues 1b	500.				
₽,	c	Fundraising events 1c	4,638,048.				
iffts ar A	c	Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions)					
Sign	f	All other contributions, gifts, grants, and					
but		similar amounts not included above 1f 1	16,155,464.				
d di	g	Noncash contributions included in lines 1a-1f	619,179.				
Co	h	Total. Add lines 1a-1f		20,794,012.			
		<u></u>	Business Code				
e	2 a						
e vi	b						
Sco	C						
ran 3ev	C	·					
Program Service Revenue	e	·					
ъ.	f	All other program service revenue					
	9	Total. Add lines 2a-2f					
	3	Investment income (including dividends, interest	·	302,354.			302,354.
	4	other similar amounts) Income from investment of tax-exempt bond pro		302,334.			302,334.
	5	Royalties	ceeus				
	3	(i) Real	(ii) Personal				
	6 a	Gross rents 6a	(-)				
		Less: rental expenses 6b					
	c	Rental income or (loss) 6c					
	c	Net rental income or (loss)					
		Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 7a 6,302,532.					
	b	Less: cost or other basis					
ne		and sales expenses					
Revenue	c	Gain or (loss) 7c 492,286.					
.Be		Net gain or (loss)		492,286.			492,286.
Other	8 a	Gross income from fundraising events (not					
δ		including \$ of					
		contributions reported on line 1c). See	001 454				
		Part IV, line 18 8a Less: direct expenses 8b	891,454. 2,141,414.				
		Niet in a new de and franche in in a new te		-1,249,960.			-1,249,960.
		Gross income from gaming activities. See		1,212,200.			2,223,300.
	3 6	Part IV, line 19 9a					
	b	Less: direct expenses 9b					
		Net income or (loss) from gaming activities					
		Gross sales of inventory, less returns					
		and allowances 10a					
	b	Less: cost of goods sold 10b					
	c	Net income or (loss) from sales of inventory					
S		<u> </u>	Business Code				
Miscellaneous Revenue	11 a	MISCELLANEOUS REVENUE	900099	41.			41.
ane	b						
cell ev	c						
Mis	C	All other revenue					
	е	Total. Add lines 11a-11d		41.	_	_	455 455
	12	Total revenue. See instructions		20,338,733.	0.	0.	-455,279.

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Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	retai expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,362,361.	1,362,361.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	1,892,048.	1,892,048.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	12 222 222	42 222 222		
	individuals. See Part IV, lines 15 and 16	13,220,029.	13,220,029.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	665 105	166 055	100 520	000 000
	trustees, and key employees	665,107.	166,277.	199,532.	299,298
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 406 515	251 600	401 055	620 022
7	Other salaries and wages	1,406,517.	351,629.	421,955.	632,933
8	Pension plan accruals and contributions (include	105 510	24 400	25 544	F.C. F.T.
_	section 401(k) and 403(b) employer contributions)	125,712.	31,428.	37,714.	56,570
9	Other employee benefits	180,831.	45,208.	54,249.	81,374
10	Payroll taxes	130,777.	32,694.	39,233.	58,850
11	Fees for services (nonemployees):				
а	Management	162 215	22 642	106 000	24 492
b	Legal	163,215.	32,643.	106,090.	24,482
_	Accounting	131,200.		131,200.	
d	Lobbying	21 000			21 000
e	Professional fundraising services. See Part IV, line 17	31,800.		120 054	31,800
f	Investment management fees	138,854.		138,854.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	50,823.	2F 411	E 002	20.220
12	Advertising and promotion	-	25,411.	5,082.	20,330
13	Office expenses	197,352.	49,338.	69,073.	78,941
14	Information technology	100,923.	20,187.	40,368.	40,368
15	Royalties	202 270	70 942	99,180.	112 240
16	Occupancy	283,370.	70,842.		113,348
17	Travel	116,592.	23,318.	23,318.	69,956
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	297,876.	208,513.		89,363
19	Conferences, conventions, and meetings	237,070.	200,313.		09,303
20	Interest				
21	Payments to affiliates	22,233.		11,117.	11,116
22	Depreciation, depletion, and amortization	55,760.		41,820.	13,940
23	Other expanses, Itamiza expanses not severed	33,700.		11,020.	15,340
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.) IRELAND FUNDS – OVERSEAS	418,410.	376,569.	41,841.	0
a	CONTRACT SERVICES	304,272.	57,160.	211,725.	35,387
b	PROGRAM DIRECT COSTS	186,646.	· · · · · ·	18,665.	35,367
c C	STATE REGISTRATIONS	10,095.	167,981.	9,085.	1,010
d		2,220.	0.	2,105.	1,010
e	All other expenses Add lines 1 through 24s	21,495,023.	18,133,636.	1,702,206.	1,659,181
2 <u>5</u>	Total functional expenses. Add lines 1 through 24e	21,400,020.	10,133,030.	1,702,200.	1,000,101
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Part X	Balance Sheet	
	Check if Schedule O contains a response or note to any line in this Part X	
		(A)

		Check if Schedule O contains a response or note	to any line	in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	6,763,865.	1	6,549,852.		
	2	Savings and temporary cash investments	4,032,630.	2	4,147,685.		
	3	Pledges and grants receivable, net			836,734.	3	426,554.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or for					
		trustee, key employee, creator or founder, substa	ntial contri	ibutor, or 35%			
		controlled entity or family member of any of these	persons			5	
	6	Loans and other receivables from other disqualified	d persons	s (as defined			
		under section 4958(f)(1)), and persons described i	n section (4958(c)(3)(B)		6	
Ø	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	5			157,375.	9	482,417.
	10a	1					
		basis. Complete Part VI of Schedule D	10a	276,033.			
	b		10b	193,145.	55,495.	10c	82,888.
	11	Investments - publicly traded securities	•		16,456,760.	11	13,065,603.
	12	Investments - other securities. See Part IV, line 11				12	
	13	Investments - program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			413,051.	15	975,541.
	16	Total assets. Add lines 1 through 15 (must equal		1	28,715,910.	16	25,730,540.
	17	Accounts payable and accrued expenses			396,360.	17	461,423.
	18	Grants payable			6,814,532.	18	6,098,492.
	19	Deferred revenue			146,100.	19	214,070.
	20	Tax-exempt bond liabilities			·	20	
	21	Escrow or custodial account liability. Complete Pa				21	
"	22	Loans and other payables to any current or forme					
Liabilities		trustee, key employee, creator or founder, substa					
į		controlled entity or family member of any of these		·		22	
Ë	23	Secured mortgages and notes payable to unrelate				23	
	24	Unsecured notes and loans payable to unrelated	•	······		24	
	25	Other liabilities (including federal income tax, paya					
		parties, and other liabilities not included on lines 1					
		of Schedule D	,	.	362,587.	25	908,357.
	26	Total liabilities. Add lines 17 through 25			7,719,579.	26	7,682,342.
		Organizations that follow FASB ASC 958, check	k here	X			
ės		and complete lines 27, 28, 32, and 33.					
auc	27	ALL TO THE REAL PROPERTY.			9,599,074.	27	10,387,920.
Balt	28	Net assets with donor restrictions			11,397,257.	28	7,660,278.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 956					
		and complete lines 29 through 33.	,	_			
9	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equ				30	
Ass	31	Retained earnings, endowment, accumulated inco				31	
let,	32	Total net assets or fund balances			20,996,331.	32	18,048,198.
Z	33	Total liabilities and net assets/fund balances			28,715,910.	33	25,730,540.
					, ,		Form 990 (2022)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI				X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,	338,	733.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,	495,	023.	
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,	156,	290.	
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))4					
5						
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9	2,	083,	789.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	18,	048,	198.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?				Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?					
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1	
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			
			Form	990	(2022)	

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

THE AMERICAN IRELAND FUND (DBA THE

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

IRELAND FUNDS AMERICA/THE IRELAND FUNDS) 25-1306992 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	29,713,477.	19,348,139.	20,612,793.	22,490,700.	20,794,012.	112,959,121.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	29,713,477.	19,348,139.	20,612,793.	22,490,700.	20,794,012.	112,959,121.
	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)						20,538,260.
6	Public support. Subtract line 5 from line 4.						92,420,861.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	29,713,477.	19,348,139.	20,612,793.	22,490,700.	20,794,012.	112,959,121.
	Gross income from interest,	, ,	, ,	, ,	, ,		, ,
_	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	308,949.	290,058.	278,065.	268,408.	302,354.	1,447,834.
9	Net income from unrelated business	,	, -	, -	, -	, -	, , , -
·	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	1 436 535.	1,294,123.	369,140.	437,589.	891,495.	4,428,882.
11	Total support. Add lines 7 through 10			7-2-1		7	118,835,837.
	Gross receipts from related activities,	etc (see instructio	ne)			12	
	First 5 years. If the Form 990 is for th			ourth or fifth tax v			
10	organization, check this box and stor			y		. , . ,	
Sec	etion C. Computation of Publi						
	Public support percentage for 2022 (li			olumn (f))		14	77.77 %
	Public support percentage from 2021					15	77.23 %
	33 1/3% support test - 2022. If the o					-	,,,
100							TV
h	stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box						
_	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
.,,	and if the organization meets the facts						
	meets the facts-and-circumstances te			-		_	
h	10% -facts-and-circumstances test	-	•	*	-	7a and line 15 is	
	more, and if the organization meets the	-					1070 OI
	organization meets the facts-and-circu				-		
18	Private foundation. If the organization		-		• • •		
10	Trivate ioditation. If the organization	IT GIG HOL GIEGK & L	JOA OIT III 10 10, 102	i, 100, 17a, 01 17b	, origon triis box at		(Form 990) 2022

Schedule A (Form 990) 2022

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to 						
include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to						
 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to 						
merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to					1	
merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to						
any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to						
organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to						
 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to 						
are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to						
iness under section 513 Tax revenues levied for the organization's benefit and either paid to						
Tax revenues levied for the organization's benefit and either paid to						
ization's benefit and either paid to						
· I						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support						
		T		I	1	
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on						
securities loans, rents, royalties,						
and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included on line 10b,						
whether or not the business is regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for th	•		•		. , . ,	· —
check this box and stop here						
Section C. Computation of Public						
15 Public support percentage for 2022 (li	ne 8, column (f), c	livided by line 13,	column (f))		15	
16 Public support percentage from 2021					16	(
Section D. Computation of Inves	tment Income	e Percentage			, ,	
17 Investment income percentage for 20	22 (line 10c, colu	mn (f), divided by li	ine 13, column (f))		17	(
18 Investment income percentage from 2	2021 Schedule A,	Part III, line 17			18	(
19a 33 1/3% support tests - 2022. If the					33 1/3%, and line 17	' is not
more than 33 1/3%, check this box an						
b 33 1/3% support tests - 2021. If the						nd
line 18 is not more than 33 1/3%, chec						
	n did not check a					

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Schedule A (Form 990) 2022

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	За		
	3b		
	3c		
	_		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	. 54		
	10b		
ule	A (Forn	n 990)	2022

Sche	dule A (Form 990) 2022 IRELAND FUNDS AMERICA/THE IRELAND FUNDS)	25-1306992	Pa	age 5
Pai	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of on	ie or		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's office	cers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the control of the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	uctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity	y (see instructior	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	lov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	nization (see
	instructions).			

Schedule A (Form 990) 2022

Par	t V Type III Non-Functionally Integrated 509	a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes	1	
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purpose	3		
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2022 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2022			
a	From 2017			
b	From 2018			
	From 2019			
	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
	Applied to underdistributions of prior years			
	Applied to 2022 distributable amount			
ī	Carryover from 2017 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2022 distributable amount			
	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
·	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
•	and 4c.			
8	Breakdown of line 7:			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
	Excess from 2021			
	Excess from 2022			
_	LAGGGG HOTH AUAL			

Schedule A (Form 990) 2022

Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C,

Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
GROSS INCOME FROM FUNDRAISING
2018 AMOUNT: \$ 1,401,419.
2019 AMOUNT: \$ 1,264,823.
2020 AMOUNT: \$ 369,140.
2021 AMOUNT: \$ 435,389.
2022 AMOUNT: \$ 891,454.
GROSS INCOME FROM GAMING
2018 AMOUNT: \$ 35,116.
2019 AMOUNT: \$ 29,300.
2020 AMOUNT: \$ 0.
2021 AMOUNT: \$ 0.
2022 AMOUNT: \$ 0.
MISCELLANEOUS REVENUE
2018 AMOUNT: \$ 0.
2019 AMOUNT: \$ 0.
2020 AMOUNT: \$ 0.
2021 AMOUNT: \$ 2,200.
2022 AMOUNT: \$ 41.

THE AMERICAN IRELAND FUND (DBA THE

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

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

Employer identification number

2022

Schedule B (Form 990) (2022)

IRELAND FUNDS AMERICA/THE IRELAND FUNDS) 25-1306992 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______\$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

Name of organization
THE AMERICAN IRELAND FUND (DBA THE
IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Employer identification number

25-1306992

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$1,666,550.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$1,225,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$677,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$\$554,750.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$	Person X Payroll

Schedule B (Form 990) (2022)

Name of organization

THE AMERICAN IRELAND FUND (DBA THE

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Employer identification number

25-1306992

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)

Name of organization
THE AMERICAN IRELAND FUND (DBA THE
IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Employer identification number
25-1306992

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I (a) (c) No. (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I (a) No. (b) (d) FMV (or estimate) from Description of noncash property given **Date received** (See instructions.) Part I

Schedule B (Form 990) (2022) Page **4**

	ganization ICAN IRELAND FUND (DBA THE		Employer identification number					
eland I	FUNDS AMERICA/THE IRELAND FUNDS) Fycusively religious, charitable, etc., contribution	uns to organizations described in s	25-1306992 section 501(c)(7), (8), or (10) that total more than \$1,000 for the year					
art III	from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, cl	through (e) and the following line en	ntry. For organizations					
	Use duplicate copies of Part III if additional s	pace is needed.	riess for the year. (Enter this fino. once.)					
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
_		(e) Transfer of gi	ift					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
a) No								
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-								
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee					
a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gi	ift					
-	Transferee's name, address, ar	nd 7IP + 4	Relationship of transferor to transferee					
-			netationship of transfer of to transferee					

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Inspection

Name of the organization

THE AMERICAN IRELAND FUND (DBA THE

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Employer identification number 25-1306992

Par			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	22	(a) i dilas dila strisi assocints
2	Aggregate value of contributions to (during year)	61,820.	
3	Aggregate value of grants from (during year)	8,500.	
4	Aggregate value at end of year	· -	
5	Did the organization inform all donors and donor advisors in		d funds
	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o		
	impermissible private benefit?		X YesN
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form o	
	day of the tax year.		Held at the End of the Tax Ye
	Total number of conservation easements		2a
	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included in (c) acquired a	•	
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax
	year		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		Yes
6	violations, and enforcement of the conservation easements it Staff and volunteer hours devoted to monitoring, inspecting,		
U	Stall and volunteer riodis devoted to monitoring, inspecting,	rialiding of violations, and emorcing conse	ervation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservati	on easements during the year
•	,ca 5. 5. ps. 1555ca 52		on caccinonic daming and year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial stateme	nts that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement ar	d balance sheet works
	of art, historical treasures, or other similar assets held for public	olic exhibition, education, or research in fur	therance of public
	service, provide in Part XIII the text of the footnote to its finar	ncial statements that describes these items	s.
b	If the organization elected, as permitted under FASB ASC 95	8, to report in its revenue statement and be	alance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in further	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
2	If the organization received or held works of art, historical tre-		gain, provide
	the following amounts required to be reported under FASB A	_	
	Revenue included on Form 990, Part VIII, line 1		<u> </u>
-		- for Form 000	
LHA	For Paperwork Reduction Act Notice, see the Instructions	S TOT FORM 99U.	Schedule D (Form 990) 20

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

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Par	t III Organizations Maintaining Co	ollections of Art	, Historical Tre	asures, or Ot	her S	imilar As	sets (c	ontinue	ed)
3	Using the organization's acquisition, accessio	n, and other records	, check any of the fo	ollowing that mak	e signi	ficant use o	f its		
	collection items (check all that apply):								
а	X Public exhibition	d	X Loan or exch	nange program					
b	X Scholarly research	е							
С	X Preservation for future generations								
4	Provide a description of the organization's col	llections and explain	how they further the	e organization's e	xempt	purpose in	Part XIII.		
5	During the year, did the organization solicit or	•	•	•	•				
	to be sold to raise funds rather than to be mai						Ye	s	X No
Par	t IV Escrow and Custodial Arrang						t IV, line 9	, or	
	reported an amount on Form 990, Part		· ·			,	,	,	
1a	Is the organization an agent, trustee, custodia	n or other intermedia	ary for contributions	or other assets r	ot incl	uded			
	on Form 990, Part X?						Ye	s	No
b	If "Yes," explain the arrangement in Part XIII a								
	gg						Am	ount	
С	Beginning balance					1c			
	Additions during the year					1d			
	Distributions during the year					1e			
f	Ending balance					1f			
	Did the organization include an amount on Fo						Ye		No
	If "Yes," explain the arrangement in Part XIII.		•		•			ĺ	= "
Par									
	Complete	(a) Current year	(b) Prior year	(c) Two years bac		Three years	back (e)	Four ve	ars back
1a	Beginning of year balance	17,016,904.	14,879,004.	13,083,98		10,385,4			20,079.
b	Contributions	129,474.	50,000.	33,13		-64,1			00,000.
0	Net investment earnings, gains, and losses	-3,026,047.	2,418,480.	1,885,59		2,872,1			33,670.
4	Grants or scholarships	0,020,027.	2,120,100.	2,000,00	+	-, -, -	-		-, -, -,
d									
е	Other expenditures for facilities	210,000.	184,407.						
	and programs	144,015.	146,173.	123,70	6	109,5	39	1.0	00,931.
	Administrative expenses	13,766,316.	17,016,904.			13,083,9			35,478.
g	End of year balance	· · ·			<u> </u>	13,003,3		10,50	3,470.
2	Provide the estimated percentage of the curre	•		neid as:					
а	Board designated or quasi-endowment	44.4560	_%						
b	Permanent endowment 39.5510	%							
С	Term endowment 15.9930 9								
_	The percentages on lines 2a, 2b, and 2c shou	•							
За	Are there endowment funds not in the posses	sion of the organizat	ion that are held an	d administered fo	r the			\(\mathbf{v}\)	No.
	organization by:						_	_	es No
	(i) Unrelated organizations							a(i)	X
	(ii) Related organizations						3	ı(ii)	X
	If "Yes" on line 3a(ii), are the related organizat						نا	Bb	
Do:	Describe in Part XIII the intended uses of the		ment funds.						
Pai	t VI Land, Buildings, and Equipme		Doubly line 44 a Co	F 000 D	. V . II	- 10			
	Complete if the organization answered	1		Time to the second seco			_		
	Description of property	(a) Cost or other			•	umulated	(d)	Book v	alue
		basis (investm	ent) basis (otner)	aepre	ciation	-		
1a	Land						-		
b	Buildings						1		
С	Leasehold improvements							-	
d	Equipment			276,033.		193,145.		8	32,888.
	Other								
Total	. Add lines 1a through 1e. (Column (d) must ed	rual Form 990 Part X	column (B) line 10	Oc.)				8	32,888.

Schedule D (Form 990) 2022

25-1306992

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Complete if the organization answered "Yes"		•	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.	,		•
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	5.
(a) Description of liability	·		(b) Book value
(1) Federal income taxes			
(2) ACCRUED SALARIES			383,381
(3) ACCRUED PAYROLL WITHHOLDING			18,196
(4) DEFERRED RENT			16,846
(5) OPERATING LEASE LIABILITIES			489,934
(0)			
(6)			1
(7)			
(7) (8)			
(7)	05)		908,357

Schedule D (Form 990) 2022

Sche	dule D (Form 990) 2022 IRELAND FUNDS AMERICA/THE IRELAND FUNDS))		25-130699	2 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	ts With F	Revenue per Ret	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	18,408,036.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-3,875,632.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	2,083,789.		
е	Add lines 2a through 2d			2e	-1,791,843.
3	Subtract line 2e from line 1			3	20,199,879.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	138,854.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	138,854.
_5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				20,338,733.
Par	t XII Reconciliation of Expenses per Audited Financial Stateme	nts With	Expenses per R	leturn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	21,356,169.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	21,356,169.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	138,854.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	138,854.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	21,495,023.
Pai	t XIII Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I $\!$	/, lines 1b a	and 2b; Part V, line 4;	; Part X, line 2;	Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additi	onal inform	ation.		
PART	V, LINE 4:				
ENDO	WMENT FUNDS				
THE	FUND'S ENDOWMENT CONSISTS OF FUNDS ESTABLISHED FOR THE PURPOSE	OF			
CREA	TING ENCUMBERED AND UNENCUMBERED FUNDS. OVER TIME, IF THE ENDOV	VMENT			
GROW	S TO A SUSTAINABLE SIZE, THE OBJECTIVE IS THAT THE UNENCUMBEREI	FUNDS			
WILL	PROVIDE ANNUAL MONIES TO SUPPORT THE ONGOING WORK OF THE AMER	ICAN			
IREL	AND FUND IN IRELAND AND WORLDWIDE. THE ENDOWMENT INCLUDES BOTH				
DONO	R-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE BOARD	OF			
DIRE	CTORS TO FUNCTION AS QUASI-ENDOWMENTS. THE SPENDING POLICY FOR	THE			
ENDO	WMENT FUND REQUIRES THAT THE FUND (INCLUDING BOARD DESIGNATED I	FUNDS)			
REAC	H A BALANCE OF \$10 MILLION PRIOR TO DISTRIBUTION OF ANY EARNING	S. THE			
BOAR	D APPROVED THE APPROPRIATION OF \$210,000 FOR USE IN OPERATIONS	IN			

Schedule D (Form 990) 2022

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Schedule F (Form 990) 2022

Name of the organization					Employer identi	fication number
THE AMERICAN IRELAND F		EIMDa \			25 1206002	
Part I General Info			side the United States. Comple	ata if the even	25-1306992	Vaall an
Form 990, Part I		ouvilles out	side the Officed States. Comple	ete ir the organ	ization answered	res" on
		n maintain record	ds to substantiate the amount of its gra	nts and other	assistance,	
			he selection criteria used to award the			Yes No
2 For grantmakers. Desc	cribe in Part V the	e organization's p	procedures for monitoring the use of its	grants and ot	her assistance out	side the
United States.						
			an be duplicated if additional space is n		(ام) من ام معان بالنب	(6) Tatal
(a) Region	(b) Number of offices	employees.	(d) Activities conducted in the region (by type) (such as, fundraising, pro-		vity listed in (d) gram service,	(f) Total expenditures
	in the region	agents, and independent	gram services, investments, grants to		specific type	for and
		independent contractors in the region	recipients located in the region)	of service	(s) in the region	investments in the region
		in the region				
EUROPE (INCLUDING						
ICELAND & GREENLAND)	0	0	GRANTMAKING			13,220,029.
<u> </u>						
						10
3 a Subtotal	0	0				13,220,029.
b Total from continuation		_				_
sheets to Part I	0	0				0.
c Totals (add lines 3a and 3b)	0	0				13,220,029.
and 501	1	ı				

232071 10-17-22

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

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

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

25-1306992

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	100,290.		0.		
		EUROPE (INCLUDING	ARTS & CULTURE	42,109.		0.		
		EUROPE (INCLUDING	ARTS & CULTURE	19,426.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	50,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	9,713.		0.		
			COMMUNITY DEVELOPMENT	58,761.		0.		

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

3 Enter total number of other organizations or entities

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Schedule F (Form 990) 2022

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Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	1)	r ugo z
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING						
		ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	5,175.		0.		
		EUROPE (INCLUDING	EDUCATION	5,175.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	191,529.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	22,600.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	9,713.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	39,333.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	16,650.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	37,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	11,306.		0.		

Schedule F (Form 990)	IRELAND	FUNDS AMERICA/THE	IRELAND FUNDS)	25-1306992 Page 2					
Part II Continuation of	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	9,713.		0.			
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	35,400.		0.			
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.			
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	9,713.		0.			
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.			
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	6,500.		0.			
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	30,000.		0.			
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	37,383.		0.			
		EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	10,000.		0.			

Schedule F (Form 990)	IRELAND	FUNDS AMERICA/THE	IRELAND FUNDS)		25-130	5992		Page 2
Part II Continuation of	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	•
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	138,389.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	9,713.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	66,500.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	28,265.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	135,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	50,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	28,265.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	56,529.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	28,265.		0.		

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Scriedule F (Form 990)			·					Fage Z
Part II Continuation of	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	EDUCATION	389,645.		0.		
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	COMMUNITY DEVELOPMENT	9,713.		0.		
		,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	COMMUNITY DEVELOPMENT	11,306.		0.		
		EUROPE (INCLUDING						
		ICELAND &	COMMINITAL DEVEL ODMENIA	11 206		0		
		GREENLAND)	COMMUNITY DEVELOPMENT	11,306.		0.		
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	COMMUNITY DEVELOPMENT	6,350.		0.		
				·				
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	COMMUNITY DEVELOPMENT	275,803.		0.		
		EUROPE (INCLUDING ICELAND &						
		GREENLAND)	EDUCATION	49,750.		0.		
		ORDINIUM)	2200111014	45,750.		0.		
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	COMMUNITY DEVELOPMENT	59,547.		0.		
		EUROPE (INCLUDING						
		ICELAND &		4				
		GREENLAND)	ARTS & CULTURE	14,720.		0.		

	e F (Form 990)		TONDS AMERICA/IIIE	INDERNO I CHOO,					Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Nan	ne of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	75,602.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	9,713.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	43,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	25,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	25,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,175.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	75,000.		0.		

Schedule	F (Form 990)	IKELAND	FUNDS AMERICA/THE	IRELAND FUNDS)		25-130	0332		Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Nam	ne of organization	(b) IRS code section and EIN (if applicable)	(a) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	25,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	100,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	105,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	10,349.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	1,704,942.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	11,306.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		

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Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	1)	
1 (a) Nam	ne of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING						
			GREENLAND)	COMMUNITY DEVELOPMENT	5,175.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	87,953.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	1,141,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	343,112.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	5,303.		0.		

Schedule F (Forn	n 990)	IKELAND	FUNDS AMERICA/THE	IRELIAND FUNDS/		25-130	0994		Page 2
Part II Con	tinuation of	Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Name of org	ganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	30,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	50,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	12,245.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	55,769.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	26,702.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	100,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	100,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		

Schedule F (Form 990)	IRELAND	FUNDS AMERICA/THE	IRELAND FUNDS)		25-130	5992		Page 2
	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	10,349.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	33,619.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	32,109.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,700.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	21,489.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	80,500.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	34,597.		0.		

Scriedule	F (Form 990)	IREEINE	FUNDS AMERICA/IIIE	INDERNO FORDE,		25 150			Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	1)	
1 (a) Nam	ne of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	5,800.		0.		
			EUROPE (INCLUDING	COMMUNITY DEVELOPMENT	50,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	5,175.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	20,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	65,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	8,500.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	21,362.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	192,994.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	463,989.		0.		

Schedule	e F (Form 990)	IRELAND	FUNDS AMERICA/THE	IRELAND FUNDS)		Page 2			
Part II	art II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)								
1 (a) Nar	ne of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	5,175.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	10,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	50,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	PEACE & RECONCILIATION	19,426.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	6,500.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	27,083.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	10,349.		0.		

25-1306992 Page 2 Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)

Part II Continuation of	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	70,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	5,175.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	28,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	30,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	650,246.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	20,228.		0.		

Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	r ago z
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING						
		ICELAND &						
			EDUCATION	50,000.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	22,296.		0.		
		EUROPE (INCLUDING				_		
		GREENLAND)	COMMUNITY DEVELOPMENT	5,175.		0.		
		EUROPE (INCLUDING		10.240				
		GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		+
		EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	30,611.		0.		
		EUROPE (INCLUDING	COMMUNITY DEVELOPMENT	562,025.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	5,090.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.		
		EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.		

Scriedule	F (FORM 990)		FUNDS AMERICA/INE						Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1)	
1 (a) Nam	ne of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	25,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,349.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	5,908.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	10,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	30,500.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	8,500.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	63,100.		0.		

25-1306992	
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Part II Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States	(Schedule F (Form 9	90) Part II line 1)	Page
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(a) Pagion	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM appraisal, other)
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	ARTS & CULTURE	20,000.		0.		
		EUROPE (INCLUDING ICELAND &	PEACE &					
		GREENLAND)	RECONCILIATION	24,655.		0.		
		GREENHAND)	RECONCIDIATION	24,033.		· ·		
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	EDUCATION	131,005.		0.		
		EUROPE (INCLUDING						
		ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	28,265.		0.		
		CHEENERING /	COMMONITY DEVELORMENT	20,203.		· ·		
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	COMMUNITY DEVELOPMENT	11,306.		0.		
		EUDODE / INGLUDING						
		EUROPE (INCLUDING ICELAND &						
			EDUCATION	29,049.		0.		
				,				
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	EDUCATION	391,417.		0.		
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND)	COMMUNITY DEVELOPMENT	11,306.		0.		
		EUROPE (INCLUDING						
		ICELAND &		05.000				
		GREENLAND)	EDUCATION	25,000.		0.		

Scriedule	e F (Form 990)	INDEFINE	FUNDS AMERICA/IIIE	INDERNO FORDET		25 150			Page 2
Part II	Continuation o	f Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line 1	1)	
1 (a) Nan	ne of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION	746,891.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	11,306.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	56,529.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	7,500.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	60,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	ARTS & CULTURE	30,100.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	11,000.		0.		
			EUROPE (INCLUDING ICELAND & GREENLAND)	COMMUNITY DEVELOPMENT	19,426.		0.		

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

Part III can be duplicated if		(c) Number of	(d) Amount of	(e) Manner of	(f) Amount of	(g) Description of	(h) Method of
(a) Type of grant or assistance	(b) Region	recipients	cash grant	cash disbursement	noncash assistance	noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	EUROPE (INCLUDING						
	ICELAND &						
SCHOLARSHIPS	GREENLAND)	279	1,994,525.		0.	WIRE	

Part IV Foreign Forms

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

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

Schedule F (Form 990) 2022

Part V | Supplemental Information

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

PART I, LINE 2:

PROCEDURE FOR MONITORING USE OF GRANT FUNDS OUTSIDE U.S.

THE FUND MONITORS THE GRANT RECIPIENTS IN A NUMBER OF WAYS: VISITS TO THE

GRANTEES TO OBSERVE THE ORGANIZATIONS' PROGRAMS, INTERVIEWS WITH GRANTEES

FOR PUBLICATIONS, RECEIPT OF FINANCIAL STATEMENT REPORTING ON HOW THE

MONEY WAS SPENT AND GENERAL ONGOING COMMUNICATION WITH THE GRANTEES BY

EXECUTIVES AND OTHER EMPLOYEES.

PART I, LINE 3:

ACCOUNTING METHOD USED TO REPORT GRANTS

THE ACCOUNTING METHOD USED TO REPORT GRANTS FOLLOWS THE ACCRUAL METHOD

WHICH IS ALSO THE METHOD OF THE ORGANIZATION'S BOOKS AND RECORDS.

PART III:

THE IRELAND FUNDS GEORGE MOORE SCHOLARSHIP PROGRAM:

THE IRELAND FUNDS GEORGE MOORE SCHOLARS PROGRAM IS AN AMBITIOUS

ALL-IRELAND SCHOLARSHIP PROGRAM THAT OFFERS EXTRAORDINARY SCHOLARSHIPS

TO SUPPORT ACADEMICALLY TALENTED STUDENTS WHO WISH TO UNDERTAKE A

MASTER'S DEGREE IN THE UNITED STATES, CANADA, UNITED KINGDOM, AUSTRALIA

OR NEW ZEALAND. THE PROGRAM GIVES THEM THE FINANCIAL RESOURCES AND THE

OPPORTUNITY TO REALIZE THEIR FULL CAREER POTENTIAL AND TO PURSUE THEIR

HIGHER EDUCATION DREAM OVERSEAS.

THE IRELAND FUNDS NO MIND LEFT BEHIND SCHOLARSHIP PROGRAM:

THE NO MIND LEFT BEHIND SCHOLARSHIP PROGRAM IS AN INITIATIVE DEVELOPED

BY THE FUND AND LONGTIME IRELAND FUNDS' DONORS JOHN AND PAULINE RYAN TO

GIVE PROMISING YOUNG PEOPLE AN OPPORTUNITY TO ACCESS AND TO COMPLETE

Schedule F (Form 990) 2022

Part V	Supplemental Information
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of
	investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)
	(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
MII T D T E	VEL EDVICAMION DV DDOVIDING AN ANNUAL GOUOLADOUID MO COVED MUE
THIKD-LE	VEL EDUCATION BY PROVIDING AN ANNUAL SCHOLARSHIP TO COVER THE
COSTS OF	BOOKS, ACCOMMODATION AND OTHER KEY EXPENSES.
	,

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

THE AMERICAN IRELAND FUND (DBA THE **Employer identification number** Name of the organization IRELAND FUNDS AMERICA/THE IRELAND FUNDS) 25-1306992 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants X Phone solicitations g X Special fundraising events In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) SUSAN O'NEILL & ASSOCIATE Yes No 5910 GLOSTER ROAD, BETHESDA EVENT PLANNING FUNDRAISING Х 1,002,163 19,200 982,963. CARLA CAPONE COMPANY LLC EVENT PLANNING FUNDRAISING 345 PARK AVENUE, 17TH FLOOR Х 322,750 12,600 310,150. 1,324,913. 31 800. 1,293,113. Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing CA, CO, CT, DC, FL, IL, MA, NJ, NY, PA, TX, VA

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

Schedule G (Form 990) 2022

SEE PART IV FOR CONTINUATIONS

Sch	edul	3 3 (1 3 3 3 3) 2 3 2 2	NDS AMERICA/THE IR	•		1306992 Page 2			
Pa	ırt I								
		of fundraising event contributions and gro				s greater than \$5,000.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events			
			BOSTON GALA	WASHINGTON GALA	10	(add col. (a) through col. (c))			
			(event type)	(event type)	(total number)	COI. (C))			
Revenue	1	Gross receipts	1,512,483.	1,002,163.	3,014,856.	5,529,502.			
_	2	Less: Contributions	1,352,058.	867,963.	2,418,027.	4,638,048.			
	3	Gross income (line 1 minus line 2)	160,425.	134,200.	596,829.	891,454.			
	4	Cash prizes							
ģ	5	Noncash prizes							
sued	6	Rent/facility costs							
Direct Expenses	7	Food and beverages							
Ö		Entertainment							
	8	Entertainment Other direct expenses		463,505.	1,212,343.	2,141,414.			
	10	Direct expense summary. Add lines 4 through		, , ,	· · · · ·	2,141,414.			
		Net income summary. Subtract line 10 from li				-1,249,960.			
Pa	rt I					, ,			
		\$15,000 on Form 990-EZ, line 6a.							
			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add			
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other garming	col. (a) through col. (c))			
3eve									
	1	Gross revenue							
es S	2	Cash prizes							
Expenses	3	Noncash prizes							
Direct E	4	Rent/facility costs							
	5	Other direct expenses							
	6	Volunteer labor	Yes %		Yes %				
	6	Volunteer labor	No	No	No				
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)						
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)						
	_								
		ter the state(s) in which the organization condu	_						
	a Is the organization licensed to conduct gaming activities in each of these states? Yes No								
D	b If "No," explain:								
	_								
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	erminated during the tax	vear?	Yes No			
		Yes," explain:			,				
	_								
2320	32 10	-27-22			Sche	dule G (Form 990) 2022			

THE AMERICAN IRELAND FUND (DBA THE

Schedule G (Form 990) 2022 TRELAND FUNDS AMERICA/THE TRELAND FUNDS)	25-1306992	Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes	☐ No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	☐ No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility	13a	%
b An outside facility		%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
Name		
Address		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
b If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization \$ and the amount of gaming revenue received by the organization of the amount of gaming revenue received by the organization of the amount of gaming revenue received by the organization of gaming revenue received by the organizat	ınt	
of gaming revenue retained by the third party \$		
c If "Yes," enter name and address of the third party:		
Name		
Address		
16 Gaming manager information:		
Country manager morniation.		
Name		
Gaming manager compensation \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
retain the state gaming license?	····· L Yes	∟ No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the	
organization's own exempt activities during the tax year \$ Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v): a	15 111 11 0	01 401
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); a 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	nd Part III, lines 9,	96, 106,
COMPANIE C. DADE T. LINE AD LICE OF MEN. HIGHER DAID BUNDDAIGED.		
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:		
(I) NAME OF FUNDRAISER: SUSAN O'NEILL & ASSOCIATE		
(I) ADDRESS OF FUNDRAISER: 5910 GLOSTER ROAD, BETHESDA, MD 20816		
· ·		
/I\ NAME OF BINDDATCED. CADIA CADONE COMDANY IIC		
(I) NAME OF FUNDRAISER: CARLA CAPONE COMPANY LLC		
(I) ADDRESS OF FUNDRAISER: 345 PARK AVENUE, 17TH FLOOR, NEW YORK, NY 10154		
PART I, LINE 2B, COLUMN (V):	Schodulo C /Farres	000/ 2000
232083 10-27-22	Schedule G (Form	JJUJ ZUZZ

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

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

2022
Open to Public

Inspection

THE AMERICAN IRELAND FUND (DBA THE Name of the organization **Employer identification number** IRELAND FUNDS AMERICA/THE IRELAND FUNDS) 25-1306992 Part I **General Information on Grants and Assistance** 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 1 X Yes criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) AFRICAN AMERICAN IRISH DIASPORA NETWORK - 1717 N ST NW STE 1 -84-3671883 501(C)(3) WASHINGTON, DC 20036 35,000. 0 COMMUNITY DEVELOPMENT BOYS AND GIRLS CLUBS OF DORCHESTER 1135 DORCHESTER AVE. DORCHESTER, MA 02125 23-7076465 501(C)(3) 0. COMMUNITY DEVELOPMENT 20,000 CATHOLIC EXTENSION 150 S. WACKER DR., 20TH FLOOR 36-6000520 501(C)(3) CHICAGO, IL 60606 85,000 0 COMMUNITY DEVELOPMENT CATHOLIC SCHOOLS FOUNDATION 67 BATTERYMARCH STREET 6TH FLOOR 22-2485502 501(C)(3) COMMUNITY DEVELOPMENT BOSTON MA 02110 10 000 0. CELTIC FC FOUNDATION 101 FEDERAL STREET 32-0602538 501(C)(3) COMMUNITY DEVELOPMENT BOSTON MA 02119 25 000 0. CONCERN WORLDWIDE USA 355 LEXINGTON AVE., 16TH FLOOR NEW YORK, NY 10017 13-3712030 501(C)(3) 10 000 0 COMMUNITY DEVELOPMENT

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

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

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

Schedule I (Form 990) 2022

26.

Schedule I (Form 990) Page 1 Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (g) Description of (h) Purpose of grant organization or government if applicable valuation non-cash assistance or assistance cash grant noncash (book, FMV, assistance appraisal, other) EITHNE AND PADDY FITZPATRICK MEMORIAL FUND - 687 LEXINGTON AVENUE - NEW YORK, NY 10022 13-3764252 501(C)(3) 18,500 0. COMMUNITY DEVELOPMENT FRIENDS OF FACES 12030 SUNRISE VALLEY DR RESTON, VA 20191 20-8944024 501(C)(3) 100,000 0 COMMUNITY DEVELOPMENT HARVARD BUSINESS SCHOOL EXED FINANCE (TATA HALL SUITE 020) 1 SOLDIERS FIELD - BOSTON, MA 02163 04-2103580 501(C)(3) 6,700 0. COMMUNITY DEVELOPMENT IRELAND US COUNCIL FOUNDATION, INC. - C/O BUTTONWOOD PARTNERS 420 LEXINGTON AVE. SUITE 356 - NEW YORK, NY 10170 23-7003298 501(C)(3) 49.737. 0 COMMUNITY DEVELOPMENT IRISH AMERICAN PARTNERSHIP 15 BROAD STREET SUITE 501 22-2801642 501(C)(3) 0. EDUCATION BOSTON, MA 02109 14,174. IRISH ARTS CENTER 553 WEST 51ST STREET NEW YORK, NY 10019 51-0244834 501(C)(3) 0. ARTS & CUTURE 257,000 IRISH PASTORAL CENTRE 512-516 GALLIVAN BOULEVARD DORCHESTER MA 02124 04-2106175 501(C)(3) 10 000 0. COMMUNITY DEVELOPMENT IRISH REPERTORY THEATRE 132 WEST 22ND STREET, 2ND FLOOR NEW YORK, NY 10011 13-3531713 501(C)(3) 155,000. 0. ARTS & CUTURE LAWRENCE CATHOLIC ACADEMY 101 PARKER STREET 27-2281636 501(C)(3) LAWRENCE, MA 01843 10 000 0. COMMUNITY DEVELOPMENT

Schedule I (Form 990)

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(a) Amount of	(f) Method of	(a) Description of	(h) Durnaga of grant
(a) Name and address of organization or government	(b) EIN	if applicable	cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MATIONAL COMMITTEE ON AMERICAN							
POREIGN POLICY - 320 PARK AVENUE,							
EIGHTH FLOOR - NEW YORK, NY							
10022-6839	52-1043767	501(C)(3)	9,000.	0.			COMMUNITY DEVELOPMENT
NYU FACES							
223 EAST 34TH STREET							
NEW YORK, NY 10016	13-5562308	501(C)(3)	150,000.	0.			COMMUNITY DEVELOPMENT
NYU GLUCKSMAN IRELAND HOUSE							
ONE WASHINGTON MEWS							
NEW YORK, NY 10003	13-5562308	501(C)(3)	210,000.	0.			COMMUNITY DEVELOPMENT
ORIGIN THEATRE COMPANY							
520 8TH AVENUE, SUITE 329A, 3RD FL		504 (5) (2)	07.500				
NEW YORK, NY 10018	45-0562349	501(C)(3)	27,500.	0.			COMMUNITY DEVELOPMENT
RIAN IMMIGRANT CENTER							
ONE STATE STREET, 8TH FLOOR							
BOSTON, MA 02109	04-3063382	501(C)(3)	27,000.	0.			COMMUNITY DEVELOPMENT
,			, ,	-			
SMALL BUSINESS STRONG							
265 FRANKLIN STREET, 17TH FLOOR							
BOSTON, MA 02110	04-2790704	501(C)(3)	10,000.	0.			COMMUNITY DEVELOPMENT
SOLACE HOUSE, INC.							
LO40 JACKSON AVENUE	45 0600561	501 (7) (2)	50.000	0			
ONG ISLAND CITY, NY 11101	47-2629761	501(C)(3)	50,000.	0.			COMMUNITY DEVELOPMENT
SOLAS NUA							
1777 CHURCH ST							
WASHINGTON, DC 20036	20-2454448	501(C)(3)	10,000.	0.			COMMUNITY DEVELOPMENT
·			,	-			
SPECIAL OLYMPICS INC							
133 19TH ST							
WASHINGTON, DC 20036	52-0889518	501(C)(3)	25,000.	0.			COMMUNITY DEVELOPMENT

Schedule I (Form 990)

Page 1

(a) Name and address of	(6) EINI	(a) IDO anation	(al) A as a cost of	(a) Amazumt - 5	(f) Mathemalics	(a) December of	(In) Drawn and of success
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PATRICKS CATHEDRAL							
011 FIRST AVENUE							
EW YORK, NY 10022	45-2400914	501(C)(3)	10,000.	0.			COMMUNITY DEVELOPMENT
HE PALM BEACH POLICE & FIRE							
OUNDATION, INC 139 NORTH							
OUNTY ROAD, SUITE 20C - PALM							
BEACH, FL 33480	83-0462654	501(C)(3)	10,000.	0.			COMMUNITY DEVELOPMENT

Page 2

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	e organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
SCHOLARSHIPS	40	1,892,048.	0.		SEE PART IV
Part IV Supplemental Information. Provide the information rec	uired in Part I, lin	ie 2; Part III, column	(b); and any other ac	dditional information.	
PART I, LINE 2:					
PROCEDURE FOR MONITORING USE OF GRANT FUNDS IN U.S					
WE HAVE OFFICES IN 5 LOCATIONS WITH REGIONAL DIRECT	TORS THAT ARE	E IN CONTACT			
WITH OUR U.S. GRANT RECIPIENTS ON A REGULAR BASIS.	OUR U.S. GRA	ANTS ARE TO			
ORGANIZATIONS THAT ARE CHARITABLE ORGANIZATIONS UN	DER U.S. LAW.	,			
PART III:					
THE IRELAND FUNDS GEORGE MOORE SCHOLARS PROGRAM IS	AN AMBITIOUS	3			
SCHOLARSHIP PROGRAM THAT OFFERS EXTRAORDINARY SCHO	LARSHIPS TO S	STIPPORT			

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.
THE AMERICAN IRELAND FUND (DBA THE

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Employer identification number 25-1306992

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

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Schedule J (Form 990) 2022

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

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

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

		(B) Breakdown of W	I-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990	
(1) CONALL MCGONAGLE	(i)	277,156.	0.	0.	27,885.	29,385.	334,426.	0.	
CHIEF FINANCIAL & ADMIN OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.	
(2) CAITRIONA FOTTRELL	(i)	290,385.	0.	0.	29,039.	11,258.	330,682.	0.	
WORLDWIDE PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
(3) SARAH PAGE	(i)	198,793.	0.	0.	19,950.	11,408.	230,151.	0.	
VICE PRESIDENT OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(4) AINE MALLAGHAN	(i)	178,500.	0.	0.	14,829.	11,401.	204,730.	0.	
VICE PRESIDENT OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(5) MARJORIE MULDOWNEY	(i)	183,385.	0.	0.	18,338.	1,429.	203,152.	0.	
VICE PRESIDENT OF DEVELOPMENT	(ii)	0.	0.	0.	0.	0.	0.	0.	
(6) RORY MACINTYRE	(i)	157,445.	0.	0.	15,750.	10,852.	184,047.	0.	
DIRECTOR, OFFICE OF THE CEO	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
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	(ii)								

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Page 3

Part III Supplemental Information						
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.						

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

THE AMERICAN IRELAND FUND (DBA THE

IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Employer identification number

25-1306992

Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or litems contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu		•	s
1	Art - Works of art		items contributed	r omi ooo, r are viii, iiio rg				
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications	X		88,465.	FMV			
5	Clothing and household goods			, , , , , , , , , , , , , , , , , , , ,				
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9		X	14	454,806.	FMV			
	Securities - Publicly traded	21	11	131,000.	111			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
40	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	***							
15								
16								
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (DONATED GOODS)	Х	22	75,908.	FMV			
26	Other ()							
27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organization	ation during	the tax year for co	ontributions				
	for which the organization completed Form 828	3, Part V, D	onee Acknowledge	ement 29			2	
							Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of the	ne initial co	ntribution, and whi	ch isn't required to be used	for			
	exempt purposes for the entire holding period?					30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance po	olicy that re	quires the review o	of any nonstandard contribut	ions?	31	Х	
32a	2a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash							
	contributions?					32a		Х
b	If "Yes," describe in Part II.				·			
33	If the organization didn't report an amount in co	olumn (c) for	a type of property	for which column (a) is chec	cked,			
	describe in Part II.			• •				

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

Schedule M (Form 990) 2022

Schedule M (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE AMERICAN IRELAND FUND (DBA THE IRELAND FUNDS AMERICA/THE IRELAND FUNDS)

Employer identification number 25-1306992

PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: EDUCATION; COMMUNITY DEVELOPMENT; ARTS & CULTURE AND PEACE & RECONCILIATION PRIMARILY IN IRELAND. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ALL OFFICES IN THE UNITED STATES LIAISE WITH GRANTEES AND ORGANIZATIONS IN IRELAND. THE FUND HELPS THEM REFINE THEIR CASES AND HELPS THEM TO IDENTIFY POTENTIAL DONORS AND ADVISES THESE APPLICANTS ON HOW TO BEST ADVOCATE FOR THEIR CHARITABLE PURPOSE. THE FUND ALSO PROVIDES ADVICE ON MAINTAINING GOOD DONOR RELATIONS. THE FUND HAS CO-HOSTED AND ASSISTED WITH A NUMBER OF EVENTS AND DINNERS TO BENEFIT IRISH NOT FOR PROFITS. THE FUND EFFECTIVELY PROVIDES ADVICE, AND MARKETING SERVICES FOR IRISH ORGANIZATIONS IN ACCESSING SUPPORT IN AMERICA. EXPENSES \$ 278,898. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 2: FAMILY AND BUSINESS RELATIONSHIPS THERE IS A FAMILY RELATIONSHIP BETWEEN ANTHONY O'REILLY AND CHRYSS O'REILLY. FORM 990, PART VI, SECTION B, LINE 11B: FORM 990 REVIEW PROCESS THE FORM 990 IS COMPILED BY MANAGEMENT AND PREPARED AND SIGNED BY A PUBLIC ACCOUNTING FIRM. A DRAFT OF THE FORM 990 IS PRESENTED TO THE AUDIT COMMITTEE BY MANAGEMENT AND THE PAID PREPARER PRIOR TO BEING SUBMITTED TO THE BOARD OF DIRECTORS FOR REVIEW AND COMMENTARY. A COPY OF THE FORM 990 AS LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022

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Schedule O (Form 990) 2022 Page **2**

THE AMERICAN IRELAND FUND (DBA THE **Employer identification number** Name of the organization IRELAND FUNDS AMERICA/THE IRELAND FUNDS) 25-1306992 IT IS ULTIMATELY FILED IS PROVIDED TO ALL MEMBERS OF THE BOARD PRIOR TO BEING ELECTRONICALLY FILED WITH THE IRS. FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST POLICY MONITORING & ENFORCEMENT THE CONFLICT OF INTEREST POLICY REQUIRES THAT THE BOARD MEMBERS AND TOP MANAGEMENT COMMUNICATE TO THE ORGANIZATION IF ANY CONFLICT OF INTEREST ARISES BY COMPLETING A CONFLICT OF INTEREST QUESTIONNAIRE EACH YEAR. QUESTIONNAIRES ARE SUBJECT TO REVIEW BY THE CFAO AND CEO, AS APPLICABLE, TO DETERMINE IF A CONFLICT EXISTS. IF A CONFLICT ARISES, IT IS BROUGHT TO THE ATTENTION OF THE AUDIT COMMITTEE AND SUBSEQUENTLY TO THE ENTIRE BOARD. THE PERSON WITH THE CONFLICT DOES NOT PARTICIPATE IN THE BOARD DISCUSSION NOR FINAL DECISION REGARDING RESOLUTION OF THE CONFLICT. FORM 990, PART VI, SECTION B, LINE 15A: PROCESS FOR DETERMINING COMPENSATION THE CEO'S COMPENSATION IS SUBJECT TO REVIEW AND APPROVAL BY THE COMPENSATION COMMITTEE, COMPRISED OF 6 INDEPENDENT BOARD MEMBERS. PART OF THE REVIEW OF THE COMPENSATION COMMITTEE INCLUDES AN ANALYSIS OF THE CEO'S COMPENSATION BY AN OUTSIDE COMPENSATION CONSULTANT WHO RESEARCHES AND COMPARES COMPENSATION DATA WITH LIKE POSITIONS IN SIMILAR ORGANIZATIONS. THE REVIEW BY AN OUTSIDE COMPENSATION CONSULTANT IS PERFORMED AT LEAST EVERY 5 YEARS. A RECOMMENDATION IS MADE BY THE CONSULTANT AS TO WHETHER THE PROPOSED COMPENSATION IS REASONABLE, TAKING INTO CONSIDERATION THE RESEARCH CONDUCTED AS WELL AS COMPARISONS TO OTHER NONPROFIT ORGANIZATIONS. THE ANALYSIS IS THEN SUBMITTED TO THE COMPLETE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL AND CONTEMPORANEOUSLY DOCUMENTATED IN THE BOARD MINUTES.

Schedule O (Form 990) 2022	Page 2
Name of the organization THE AMERICAN IRELAND FUND (DBA THE IRELAND FUNDS)	Employer identification number 25-1306992
FORM 990, PART VI, SECTION C, LINE 19:	
HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC	_
THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON	
REQUEST. THE FINANCIAL STATEMENTS ARE AVAILABLE ON OUR WEBSITE AND UPON	
REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
FOREIGN EXCHANGE TRANSLATION LOSS -7,817.	
CHANGE IN VALUE OF CASH SURRENDER VALUE OF LIFE INSURANCE -4,294.	
OTHER INCOME FROM RESCINDED GRANTS 2,095,900.	
TOTAL TO FORM 990, PART XI, LINE 9 2,083,789.	
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