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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 10-01-2010 and ending 09-30-2011

B Check if applicable
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
INSTITUTE OF INTERNATIONAL EDUCATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) 809 UNITED NATIONS PLAZA

Room/suite

City or town, state or country, and ZIP + 4
NEW YORK, NY 10017

D Employer identification number
13-1624046

E Telephone number
(212) 883-8200

G Gross receipts $ 369,451,531

F Name and address of principal officer
ALLAN E GOODMAN
809 UNITED NATIONS PLAZA
NEW YORK, NY 10017

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW IIE ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1919

M State of legal domicile NY

Part I Summary

1 Briefly describe the organization's mission or most significant activities
IIE IS AN INT'L NON-GOVERNMENTAL ORG THAT IMPLEMENTS HIGHER EDUCATION EXCHANGE AND TRAINING PROGRAMS INVOLVING US AND NON-US PARTICIPANTS ON BEHALF OF PUBLIC AND PRIVATE SECTORS, SPONSORS AND DONORS

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	41
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	40
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	**5**	646
6	Total number of volunteers (estimate if necessary)	**6**	6,125
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	0

		Prior Year	Current Year
Revenue			
8	Contributions and grants (Part VIII, line 1h)	309,497,032	339,940,082
9	Program service revenue (Part VIII, line 2g)	19,887,063	22,111,555
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,974,557	4,658,525
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-107,183	-21,301
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	331,251,469	366,688,861
Expenses			
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	238,810,562	264,400,237
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	47,265,672	47,507,859
16a	Professional fundraising fees (Part IX, column (A), line 11e)	309,868	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶859,907		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	51,863,010	58,794,653
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	338,249,112	370,702,749
19	Revenue less expenses Subtract line 18 from line 12	-6,997,643	-4,013,888

		Beginning of Current Year	End of Year
Net Assets or Fund Balances			
20	Total assets (Part X, line 16)	180,798,884	163,037,560
21	Total liabilities (Part X, line 26)	71,450,570	61,960,132
22	Net assets or fund balances Subtract line 21 from line 20	109,348,314	101,077,428

Part II Signature Block

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

Sign Here

Signature of officer — Date: 2012-05-03

PETER THOMPSON EXECUTIVE VP, CAO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ▶☐	PTIN
Firm's name ▶ PricewaterhouseCoopers LLP				Firm's EIN ▶
Firm's address ▶ 300 Madison Avenue New York, NY 10017				Phone no ▶ (646) 471-3000

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . . ☑

1 Briefly describe the organization's mission

SEE SCHEDULE O

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

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 260,436,522 including grants of $ 201,153,528) (Revenue $ 13,962,255)

INTERNATIONAL EXCHANGE OF STUDENTS AND SCHOLARS SEE SCHEDULE O

4b (Code) (Expenses $ 64,329,715 including grants of $ 54,020,193) (Revenue $ 941,208)

LEADERSHIP DEVELOPMENT EDUCATIONAL SERVICES SEE SCHEDULE O

4c (Code) (Expenses $ 13,946,442 including grants of $ 5,660,511) (Revenue $ 6,255,288)

HIGHER EDUCATION INSTITUTIONAL DEVELOPMENT SEE SCHEDULE O

4d Other program services (Describe in Schedule O)

(Expenses $ 7,659,414 including grants of $ 3,566,005) (Revenue $ 952,804)

4e **Total program service expenses** ▶ $ 346,372,093

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2	Yes	
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		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
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	Yes	
c	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		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e		No
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	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Parts II and IV*	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Parts III and IV*	16	Yes	
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		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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**	Yes	
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–24d and complete Schedule K. If "No," go to line 25*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 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**		
25a	**Section 501(c)(3) and 501(c)(4) 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**		No
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**		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
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**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	**34**	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	**35**	Yes	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☑ **Yes** ☐ **No**			
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**		No
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**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . . ☑

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	1a	390		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	
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	646		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a	No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .			5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c	
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .			7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?			9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10	**Section 501(c)(7) organizations.** Enter				
a	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				
a	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			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a	
b	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.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .			14b	

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

Check if Schedule O contains a response to any question in this Part VI . . . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	41		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	40		
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	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Does the organization have members or stockholders?		6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ CA , CO , CT , IL , MD , NJ , NY , VA

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☑ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

PETER THOMPSON CAO
809 UNITED NATIONS PLAZA
NEW YORK, NY 10017
(212) 984-5490

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

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

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, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b **Sub-Total** . . . . . ▶										
c **Total from continuation sheets to Part VII, Section A** . . . . ▶										
d **Total (add lines 1b and 1c)** . . . . . ▶								5,030,265	0	892,021

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 68

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

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

(A) Name and business address	(B) Description of services	(C) Compensation
ALPHA TECHNOLOGIES INC 78 ROUTE 173 WEST SUITE 4 HAMPTON, NJ 08827	IT CONSULTING SVCS	1,111,202
PRIME SOFTWARE TECHNOLOGIES INC 18228 CAMDENHURST DRIVE GAINSVILLE, VA 20155	COMPUTER SERVICES	1,029,165
SITA CORPORATION 347 ELIZABETH AVENUE SOMERSET, NJ 088730037	INFORMATION SERVICES	636,312
ARENT FOX 1050 CONNECTICUT AVE NW WASHINGTON, DC 200365339	LEGAL SERVICES	528,375
ASSYST INFORMATION TECHNOLOGIES 22866 SHAW ROAD STERLING, VA 201669400	SOFTWARE DEVELOPMENT	403,000

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 12

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . 1a					
	b Membership dues 1b					
	c Fundraising events 1c	736,902				
	d Related organizations . . . 1d					
	e Government grants (contributions) 1e	239,098,518				
	f All other contributions, gifts, grants, and similar amounts not included above 1f	100,104,662				
	g Noncash contributions included in lines 1a-1f $					
	h **Total.** Add lines 1a-1f . . . . . ▶		339,940,082			
Program Service Revenue		Business Code				
	2a FEE FOR SERVICE	900099	20,335,096	20,335,096		
	b PUBLICATIONS & MEMBERSHIP FEES	900099	808,015	808,015		
	c UNIVERSITY FAIR REVENUE	900099	968,444	968,444		
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f . . . . . ▶		22,111,555			
	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶		3,485,840			3,485,840
	4 Income from investment of tax-exempt bond proceeds . . ▶		0			
	5 Royalties . . . . . ▶		0			
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) . . . . . ▶					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	3,585,295	238,060			
	b Less cost or other basis and sales expenses	2,650,670				
	c Gain or (loss)	934,625	238,060			
	d Net gain or (loss) . . . . . ▶		1,172,685			1,172,685
Other Revenue	8a Gross income from fundraising events (not including $ 736,902 of contributions reported on line 1c) See Part IV, line 18 . . . a	90,098				
	b Less direct expenses . . . b	112,000				
	c Net income or (loss) from fundraising events . . ▶		-21,902			-21,902
	9a Gross income from gaming activities See Part IV, line 19 . a					
	b Less direct expenses . . . . . b					
	c Net income or (loss) from gaming activities . . . ▶		0			
	10a Gross sales of inventory, less returns and allowances . a					
	b Less cost of goods sold . . b					
	c Net income or (loss) from sales of inventory . . ▶		0			
	Miscellaneous Revenue	Business Code				
	11a MISCELLANEOUS INCOME	900099	601			601
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a–11d . . . . . ▶		601			
	12 **Total revenue.** See Instructions . . . ▶		366,688,861	22,111,555		4,637,224

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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	37,917,118	37,917,118		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	150,195,038	150,195,038		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	76,288,081	76,288,081		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	4,103,728	3,131,145	923,339	49,244
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	32,273,266	24,624,502	7,261,485	387,279
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,746,495	2,095,576	617,961	32,958
9	Other employee benefits	5,927,601	4,522,760	1,333,710	71,131
10	Payroll taxes	2,456,769	1,874,515	552,773	29,481
a	Fees for services (non-employees) Management	0			
b	Legal	1,234,579		1,234,579	
c	Accounting	366,336		366,336	
d	Lobbying	60,090		60,090	
e	Professional fundraising services *See Part IV, line 17*	0			
f	Investment management fees	240,695		240,695	
g	Other	11,515,439	10,961,745	553,694	
12	Advertising and promotion	0			
13	Office expenses	2,333,910	1,812,300	459,845	61,765
14	Information technology	3,894,262	3,049,684	833,267	11,311
15	Royalties	0			
16	Occupancy	6,334,200	4,351,777	1,933,441	48,982
17	Travel	2,252,204	1,858,362	381,693	12,149
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	13,293,133	13,085,441	172,718	34,974
20	Interest	769,779	664,041	105,738	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,810,209	1,584,801	2,189,590	35,818
23	Insurance	196	183	13	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	MISCELLANEOUS	12,689,621	8,355,024	4,249,782	84,815
b					
c					
d					
e					
f	All other expenses				
25	**Total functional expenses.** Add lines 1 through 24f	370,702,749	346,372,093	23,470,749	859,907
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		16,347,811	1	7,196,007
	2	Savings and temporary cash investments		6,924,051	2	6,938,063
	3	Pledges and grants receivable, net		1,883,083	3	1,641,528
	4	Accounts receivable, net		30,261,395	4	25,892,387
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		5,688,646	9	3,254,972
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 54,829,185			
	b	Less accumulated depreciation	10b 31,843,385	22,980,033	10c	22,985,800
	11	Investments—publicly traded securities		76,757,754	11	74,650,331
	12	Investments—other securities See Part IV, line 11		16,977,543	12	17,684,945
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		2,978,568	15	2,793,527
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		180,798,884	16	163,037,560
Liabilities	17	Accounts payable and accrued expenses		17,170,715	17	20,709,875
	18	Grants payable		39,983,588	18	27,343,146
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities		14,296,267	20	13,907,111
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*			21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		71,450,570	26	61,960,132
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		42,405,078	27	35,618,667
	28	Temporarily restricted net assets		60,437,030	28	59,137,596
	29	Permanently restricted net assets		6,506,206	29	6,321,165
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		109,348,314	33	101,077,428
	34	Total liabilities and net assets/fund balances		180,798,884	34	163,037,560

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	366,688,861
2	Total expenses (must equal Part IX, column (A), line 25)	2	370,702,749
3	Revenue less expenses Subtract line 2 from line 1	3	-4,013,888
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	109,348,314
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-4,256,998
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	101,077,428

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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 in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☑ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .	3b	Yes	

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
INSTITUTE OF INTERNATIONAL EDUCATION

Employer identification number
13-1624046

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 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

_____

5 ☐ An organization operated for 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).**

7 ☑ 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)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ 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)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ 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 that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization? **11g(i)**		
(ii) a family member of a person described in (i) above? **11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above? **11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	(iv) No	(v) Did you notify the organization in col (i) of your support? Yes	(v) No	(vi) Is the organization in col (i) organized in the U S ? Yes	(vi) No	(vii) Amount of support
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	238,624,502	274,847,008	338,813,957	309,497,032	339,940,082	1,501,722,581
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	238,624,502	274,847,008	338,813,957	309,497,032	339,940,082	1,501,722,581
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						198,546,060
6 **Public Support.** Subtract line 5 from line 4						1,303,176,521

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4	238,624,502	274,847,008	338,813,957	309,497,032	339,940,082	1,501,722,581
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,361,295	3,381,996	2,076,787	2,307,821	3,485,840	15,613,739
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	773,262	903,465	-101,115	-107,183	-21,301	1,447,128
11 **Total support** (Add lines 7 through 10)						1,518,783,448

12	Gross receipts from related activities, etc (See instructions)	12	83,665,446

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	85 804 %
15	Public Support Percentage for 2009 Schedule A, Part II, line 14	15	85 334 %

16a **33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support test—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(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 in 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 IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)						

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15
16	Public support percentage from 2009 Schedule A, Part III, line 15	16

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	17
18	Investment income percentage from **2009** Schedule A, Part III, line 17	18

19a **33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support tests—2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Additional Data

Software ID:
Software Version:
EIN: 13-1624046
Name: INSTITUTE OF INTERNATIONAL EDUCATION

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MR THOMAS S JOHNSON TRUSTEE	50	X						0	0	0
DR HENRY KAUFMAN TRUSTEE	10	X						0	0	0
MR MARK ANGELSON TRUSTEE	40	X						0	0	0
MRS MARYAM PANAHY ANSARY TRUSTEE	30	X						0	0	0
DR LEE C BOLLINGER TRUSTEE	10	X						0	0	0
DR GEORGE CAMPBELL JR TRUSTEE	30	X						0	0	0
MRS MARIA LIVANOS CATTAUI TRUSTEE	10	X						0	0	0
DR RICHARD A DEBS TRUSTEE	10	X						0	0	0
MR ROBERT L DILENSCHNEIDER TRUSTEE	50	X						0	0	0
MR GEORGE J DONNELLY TRUSTEE	10	X						0	0	0
DR WILLIAM G DURDEN TRUSTEE	10	X						0	0	0
AMBASSADOR HARRIET ELAM-THOMAS TRUSTEE	10	X						0	0	0
MR G STEPHEN FISHER TRUSTEE	10	X						0	0	0
MR STEPHEN C FRANCIS TRUSTEE	20	X						0	0	0
MR SCOTT FREIDHEIM TRUSTEE	20	X						0	0	0
MR VICTOR J GOLDBERG TRUSTEE	30	X						0	0	0
DR ALLAN E GOODMAN TRUSTEE/CEO	400	X		X				490,547	0	55,472
MR PETER M GOTTSEGEN TRUSTEE	10	X						0	0	0
MR JACK M GREENBERG TRUSTEE	10	X						0	0	0
MS RUTH HINERFELD TRUSTEE	50	X						0	0	0
DR KAREN A HOLBROOK TRUSTEE	30	X						0	0	0
MS PAMELA HOWARD TRUSTEE	10	X						0	0	0
MR SA IBRAHIM TRUSTEE	10	X						0	0	0
DR HENRY G JARECKI TRUSTEE	50	X						0	0	0
MR JULIAN JOHNSON TRUSTEE	15	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MR MARK KAPLAN TRUSTEE	2 0	X						0	0	0
DR HENRY A KISSINGER TRUSTEE	1 0	X						0	0	0
SENATOR EDWARD KAUFMAN TRUSTEE	1 0	X						0	0	0
MR JOHN W LOW TRUSTEE	2 0	X						0	0	0
THE HON DONALD F MCHENRY TRUSTEE	4 0	X						0	0	0
MS LINDA R MEIER TRUSTEE	1 0	X						0	0	0
MR MICHAEL G MORRIS TRUSTEE	2 0	X						0	0	0
MR LAURENCE C MORSE TRUSTEE	1 0	X						0	0	0
MR KARLHEINZ MUHR TRUSTEE	2 5	X						0	0	0
MS LAYA KHADJAVI TRUSTEE	2 0	X						0	0	0
MR VICTOR J REVENKO TRUSTEE	2 0	X						0	0	0
DR GEORGE RUPP TRUSTEE	2 0	X						0	0	0
MR THOMAS A RUSSO TRUSTEE	1 5	X						0	0	0
MR JOHN SEXTON TRUSTEE	1 0	X						0	0	0
DR BEVERLY DANIEL TATUM TRUSTEE	1 0	X						0	0	0
MR PETER R THOMPSON EXECUTIVE VICE PRESIDENT, CAO	40 0	X		X				0	0	0
MS LINDA VESTER TRUSTEE	1 0	X						0	0	0
MR BART FRIEDMAN TRUSTEE	1 0	X						0	0	0
MR MICHEL KRUSE TRUSTEE	1 0	X						0	0	0
MR HENRIK VANDERLIP TRUSTEE	1 0	X						0	0	0
MS PEGGY BLUMENTHAL EVP, COO AND SENIOR COUNSELLOR	40 0			X				305,591	0	53,731
MS EDITH CECIL VP, PROGRAMS	40 0			X				223,603	0	47,325
MR BRIAN CHEN VP, CHIEF INFORMATION OFFICER	40 0			X				245,697	0	53,025
MS JAYE CHEN EXECUTIVE VP, CPO	40 0			X				217,530	0	41,200
MS DANIELA Z KAISTH VP, STRATEGIC DEVELOPMENT	40 0			X				193,044	0	31,737

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MR DENNIS W KEAR DEPUTY VP, IT	40 0			X				162,006	0	45,451
MS MARY E KIRK VP, PROGRAMS	40 0			X				228,244	0	48,491
MR MARK S LAZAR VP, PROGRAMS	40 0			X				186,336	0	32,111
MR MARK D MOYER VP, CFO & ASST TREASURER	40 0			X				296,993	0	47,160
MS SABINE U O'HARA VP, PROGRAMS	40 0			X				221,008	0	25,969
MR ROBERT E SLATTERY DEPUTY VP,ADMIN,ASST SECRETARY	40 0			X				165,942	0	34,675
MS JOAN WALL VP HUMAN RESOURCES, SECRETARY	40 0			X				176,586	0	48,167
MR DANIEL OBST DEPUTY VP, INTL PARTNERSHIPS	40 0			X				124,214	0	17,186
MS ELIZABETH GLANS DEPUTY VP, PROGRAMS	40 0			X				127,554	0	32,364
MS RAJIKA BHANDARI DEPUTY VP, PROGRAMS	40 0			X				119,069	0	30,137
MR EDWARD ROSLOF DEPUTY VP, PROGRAMS	40 0			X				149,805	0	25,885
MS MELANIE SANDERS-SMITH VP, INTERNATIONAL PROGRAMS	40 0			X				125,026	0	13,413
MS ELLEN MCKEY DEPUTY VP	40 0			X				117,954	0	15,897
MR JONAH MURPHY-KOKODYNIAK DEPUTY VP, STRATEGIC DEVLOPMNT	40 0			X				132,650	0	12,189
MR STEVEN STEIGLEDER DEPUTY VP, GRANTS & CONTRACTS	40 0			X				137,606	0	19,082
MR PETER DONDERO CONTROLLER	40 0				X			183,515	0	18,150
MS ELIZABETH KHALIFA INTL DIVISION DIR	40 0					X		147,506	0	44,695
MS JAGRITI PAREKH DIRECTOR IT	40 0					X		149,862	0	32,226
MR KIRK LENGA DIR FINANCE & BUDGET	40 0					X		132,983	0	36,344
MS NANCY OVERHOLT EXECUTIVE DIRECTOR	40 0					X		139,498	0	21,643
MR RICHARD WARE DIRECTOR	40 0					X		129,896	0	8,296

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SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of the organization	Employer identification number
INSTITUTE OF INTERNATIONAL EDUCATION	13-1624046

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures ▶ $ _____

3 Volunteer hours _____

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ $ _____

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $ _____

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

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

A Check ☐ if the filing organization belongs to an affiliated group
B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?	Yes		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		
c	Media advertisements?		No	
d	Mailings to members, legislators, or the public?	Yes		
e	Publications, or published or broadcast statements?		No	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV	Yes		80,297
j	Total lines 1c through 1i			80,297
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information

Identifier	Return Reference	Explanation
SCHEDULE C, PART II-B, LINE 1I	OTHER LOBBYING ACTIVITIES	THE CEO AND CERTAIN BOARD TRUSTEES OF INSTITUTE OF INTERNATIONAL EDUCATION AS WELL AS AN INDEPENDENT CONSULTANT MEET WITH LEGISLATIVE AND GOVERNMENT OFFICIALS AND/OR THEIR STAFF TO PROVIDE INFORMATION REGARDING THE MISSION OF THE ORGANIZATION TO THOSE INDIVIDUALS

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
INSTITUTE OF INTERNATIONAL EDUCATION

Employer identification number
13-1624046

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	58,547,646	54,916,515	48,107,918		
b Contributions	5,308,487	1,504,318	6,871,737		
c Investment earnings or losses	135,886	4,894,436	2,357,117		
d Grants or scholarships					
e Other expenditures for facilities and programs	3,402,803	2,177,677			
f Administrative expenses	1,287,475	589,946	2,420,257		
g End of year balance	59,301,741	58,547,646	54,916,515		

2 Provide the estimated percentage of the year end balance held as

- a Board designated or quasi-endowment ▶ 15 700 %
- b Permanent endowment ▶ 5 900 %
- c Term endowment ▶ 78 400 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		19,069,498	11,243,160	7,826,338
c Leasehold improvements		10,325,923	3,329,434	6,996,489
d Equipment		8,942,635	7,299,174	1,643,461
e Other		16,491,129	9,971,617	6,519,512
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				22,985,800

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) ARCHSTONE	5,588,881	F
(B) EVANSTONE/WEATHERLOW	5,417,703	F
(C) PIMCO	6,678,361	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	17,684,945	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	0
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	0

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	366,688,861
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	370,702,749
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-4,013,888
4	Net unrealized gains (losses) on investments	4	-4,256,998
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	-4,256,998
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-8,270,886

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

1	Total revenue, gains, and other support per audited financial statements			1	362,191,168
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-4,256,998		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	-4,256,998
3	Subtract line **2e** from line **1**			3	366,448,166
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	240,695		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	240,695
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	366,688,861

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

1	Total expenses and losses per audited financial statements			1	370,462,054
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	370,462,054
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	240,695		
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	240,695
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	370,702,749

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
SCHEDULE D, PART V, LINE 4	INTENDED USE OF ORGANIZATION'S ENDOWMENT FUNDS	THE INSTITUTE INTENDS TO USE ITS ENDOWMENT, WHICH CONSISTS OF INDIVIDUAL FUNDS THAT HAVE BEEN ESTABLISHED FOR A VARIETY OF PURPOSES INCLUDING SCHOLAR SUPPORT AND SCHOLARSHIPS, CONSISTENT WITH THE PURPOSES FOR WHICH THE FUNDS HAVE BEEN ESTABLISHED
SCHEDULE D, PART X, LINE 2	FOOTNOTE FROM IIE AUDITED FINANCIAL STATEMENTS	AS OF OCTOBER 1, 2008, THE INSTITUTE ADOPTED GUIDANCE RELATED TO THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES THE INSTITUTE HAS DETERMINED THAT ITS ADOPTION DID NOT MATERIALLY IMPACT THE SEPTEMBER 30, 2011 AND 2010 FINANCIAL STATEMENTS

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
INSTITUTE OF INTERNATIONAL EDUCATION

Employer identification number
13-1624046

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

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

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Part V if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
See Add'l Data					
3a Sub-total	10	259			77,992,232
b Total from continuation sheets to Part I	2	37			21,052,347
c Totals (add lines 3a and 3b)	12	296			99,044,579

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . . ▶ ☐
Use Part V if additional space is needed.

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

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ 35

3 Enter total number of other organizations or entities . . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
See Add'l Data							

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*	☑ Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*	☑ Yes	☐ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*	☑ Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*	☑ Yes	☐ No

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	PROCEDURES FOR MONITORING GRANTS OUTSIDE THE UNITED STATES	OVERALL OPERATIONS ARE MANAGED BY THE PROGRAM MANAGERS AND VARIOUS DEPARTMENTS WITHIN FINANCE AND ADMINISTRATION (I E , CONTROLLER'S DIVISION, GRANTS AND CONTRACTS, LEGAL SERVICES AND ADMINISTRATIVE SERVICES) THERE IS REGULAR MONTHLY MONITORING BY THESE MANAGERS PERIODIC REPORTS ARE SUBMITTED TO THE SPONSOR PER CONTRACT OR GRANT REQUIREMENTS BUDGETS BUDGETS ARE ESTABLISHED ON A DIVISIONAL AND PROGRAM BASIS WITH COORDINATION BY THE PROGRAM DIRECTORS VARIANCES ARE REVIEWED EACH MONTH BY THE PROGRAM DIRECTORS IIE USES BUDGET TO ACTUAL REPORTS THAT ARE UPDATED WEEKLY TO MONITOR PERFORMANCE MID-YEAR BUDGET REVIEWS ARE PERFORMED BY SENIOR MANAGEMENT TO REVIEW THE ACTIVITIES OF ALL PROGRAMS AND ADJUST TO CHANGES IN BUDGET ASSUMPTIONS PAYMENTS PAYMENTS FOR DISBURSEMENTS AND REIMBURSEMENTS RELATING TO ALL GRANT FUNDS REQUIRE APPROPRIATE SUPPORTING DOCUMENTATION BEFORE PAYMENTS ARE MADE, GRANTEES AND VENDORS ARE CHECKED AGAINST THE EXCLUDED PARTIES LIST SYSTEM (EPLS) TO ENSURE THESE PAYEES ARE IN COMPLIANCE WITH APPROPRIATE RULES AND REGULATIONS UPON APPROVAL FROM EPLS, PAYMENTS WILL INCLUDE AGREEMENTS STATING THE TERMS OF THE GRANT SIGNED BY IIE AND THE GRANTEE OR VENDOR AND IIE SUPERVISOR/MANAGER LEVEL APPROVED PAYMENT DOCUMENTS TO PROCESS EACH OF THE DISBURSEMENTS OR REIMBURSEMENTS ALL COSTS ASSOCIATED WITH THESE PAYMENTS ARE CONTROLLED BY PROGRAM MANAGEMENT AS WELL AS THE FINANCE TEAM WHO ENSURE THAT THE PAYMENTS ARE RELATED TO ALLOWABLE AND SPONSOR APPROVED ACTIVITIES SEVIS IIE REPORTS TO THE STUDENT AND EXCHANGE VISITOR PROGRAM (SEVP) WHICH SERVES AS THE BRIDGE FOR VARIED GOVERNMENT ORGANIZATIONS THAT HAVE AN INTEREST IN INFORMATION ON FOREIGN STUDENTS SEVP USES WEB-BASED TECHNOLOGY, THE STUDENT AND EXCHANGE VISITOR INFORMATION SYSTEM (SEVIS), TO TRACK AND MONITOR SCHOOLS AND PROGRAMS, STUDENTS, EXCHANGE VISITORS AND THEIR DEPENDENTS THROUGHOUT THE DURATION OF APPROVED PARTICIPATION WITHIN THE U S EDUCATION SYSTEM

Additional Data

Software ID:
Software Version:
EIN: 13-1624046
Name: INSTITUTE OF INTERNATIONAL EDUCATION

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean			Grantmaking		11,004
Central America and the Caribbean			Program Services	EDUCATION GRANTS-INDIV	2,206,072
Central America and the Caribbean			Investments		10,985,805
East Asia and the Pacific	5	97	Maintaining offices		4,224,029
East Asia and the Pacific			Grantmaking		1,143,769
East Asia and the Pacific			Program Services	EDUCATION GRANTS-INDIV	21,958,407
Europe (Including Iceland and Greenland)	1	24	Maintaining offices		1,353,244
Europe (Including Iceland and Greenland)			Grantmaking		19,113
Europe (Including Iceland and Greenland)			Program Services	EDUCATION GRANTS-INDIV	21,849,494
Middle East and North Africa	1	39	Maintaining offices		1,488,581
Middle East and North Africa			Grantmaking		785,070
Middle East and North Africa			Program Services	EDUCATION GRANTS-INDIV	6,990,770
North America	1	26	Maintaining offices		1,784,385
North America			Grantmaking		142,060
North America			Program Services	EDUCATION GRANTS-INDIV	1,153,728
Russia and the Newly Independent States	2	73	Maintaining offices		1,883,712
Russia and the Newly Independent States			Grantmaking		12,989
Russia and the Newly Independent States			Program Services	EDUCATION GRANTS-INDIV	3,668,368
South America			Grantmaking		623,266
South America			Program Services	EDUCATION GRANTS-INDIV	6,149,024
South Asia	1	26	Maintaining offices		572,941
South Asia			Program Services	EDUCATION GRANTS-INDIV	2,894,652
Sub-Saharan Africa	1	11	Maintaining offices		463,801
Sub-Saharan Africa			Grantmaking		115,639
Sub-Saharan Africa			Program Services	EDUCATION GRANTS-INDIV	6,564,656

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(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)
		CENTRAL AMERICA AND THE	EDUCATION	11,004	CHECK		N/A	N/A
		EAST ASIA AND THE PACIFI	EDUCATION	10,671	CHECK		N/A	N/A
		EAST ASIA AND THE PACIFI	EDUCATION	1,103,647	CHECK		N/A	N/A
		EAST ASIA AND THE PACIFI	EDUCATION	12,833	CHECK		N/A	N/A
		EAST ASIA AND THE PACIFI	EDUCATION	16,618	CHECK		N/A	N/A
		EUROPE	EDUCATION	11,931	CHECK		N/A	N/A
		EUROPE	EDUCATION	7,182	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF	EDUCATION	86,400	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		298,668	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		5,040	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		59,398	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		19,809	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		11,023	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		136,524	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		49,094	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		15,389	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		5,608	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		17,019	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		18,215	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		8,555	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		9,500	CHECK		N/A	N/A
		MIDDLE EAST AND NORTH AF		17,870	CHECK		N/A	N/A
		NORTH AMERICA		7,000	CHECK		N/A	N/A
		NORTH AMERICA		60,020	CHECK		N/A	N/A
		NORTH AMERICA		75,040	CHECK		N/A	N/A
		RUSSIA AND THE NEWLY IND		12,989	CHECK		N/A	N/A
		SOUTH AMERICA		30,020	CHECK		N/A	N/A
		SOUTH AMERICA		45,020	CHECK		N/A	N/A
		SOUTH AMERICA		15,020	CHECK		N/A	N/A
		SOUTH AMERICA		128,376	CHECK		N/A	N/A

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		SOUTH AMERICA		30,020	CHECK		N/A	N/A
		SOUTH AMERICA		30,020	CHECK		N/A	N/A
		SOUTH AMERICA		30,020	CHECK		N/A	N/A
		SOUTH AMERICA		314,770	CHECK		N/A	N/A
		SUB-SAHARAN AFRICA		115,639	CHECK		N/A	N/A

Form 990 Schedule F Part III - Grants and Assistance to Individuals Outside The U S

(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
GRANTEE COST OF LIVING	CENTRAL AMERICA AND THE	34	170,900	Check		N/A	N/A
INSURANCE	CENTRAL AMERICA AND THE	1	41	Check		N/A	N/A
SCHOLARSHIPS	CENTRAL AMERICA AND THE	164	1,882,172	Check		N/A	N/A
TRAVEL AND FIELD TRIPS	CENTRAL AMERICA AND THE	33	142,959	Check		N/A	N/A
TUITION	CENTRAL AMERICA AND THE	4	10,000	Check		N/A	N/A
GRANTEE MAINTENANCE	EAST ASIA AND THE PACIFI	46	136,669	Check		N/A	N/A
GRANTEE COST OF LIVING	EAST ASIA AND THE PACIFI	751	4,923,675	Check		N/A	N/A
INSURANCE	EAST ASIA AND THE PACIFI	149	37,739	Check		N/A	N/A
SCHOLARSHIPS	EAST ASIA AND THE PACIFI	916	13,162,735	Check		N/A	N/A
TRAVEL AND FIELD TRIPS	EAST ASIA AND THE PACIFI	274	1,176,071	Check		N/A	N/A
TUITION	EAST ASIA AND THE PACIFI	661	2,521,518	Check		N/A	N/A
GRANTEE MAINTENANCE	EUROPE	68	194,890	Check		N/A	N/A
GRANTEE COST OF LIVING	EUROPE	554	4,023,966	Check		N/A	N/A
INSURANCE	EUROPE	288	88,956	Check		N/A	N/A
SCHOLARSHIPS	EUROPE	1,045	13,704,804	Check		N/A	N/A
TRAVEL AND FIELD TRIPS	EUROPE	539	2,141,955	Check		N/A	N/A
TUITION	EUROPE	198	1,694,923	Check		N/A	N/A
GRANTEE MAINTENANCE	MIDDLE EAST AND NORTH AF	1	1,000	Check		N/A	N/A
GRANTEE COST OF LIVING	MIDDLE EAST AND NORTH AF	296	2,599,764	Check		N/A	N/A
INSURANCE	MIDDLE EAST AND NORTH AF	72	26,447	Check		N/A	N/A
SCHOLARSHIPS	MIDDLE EAST AND NORTH AF	182	2,781,666	Check		N/A	N/A
TRAVEL AND FIELD TRIPS	MIDDLE EAST AND NORTH AF	84	367,575	Check		N/A	N/A
TUITION	MIDDLE EAST AND NORTH AF	69	1,214,318	Check		N/A	N/A
GRANTEE MAINTENANCE	NORTH AMERICA	4	1,434	Check		N/A	N/A
GRANTEE COST OF LIVING	NORTH AMERICA	77	276,862	Check		N/A	N/A
INSURANCE	NORTH AMERICA	24	5,301	Check		N/A	N/A
SCHOLARSHIPS	NORTH AMERICA	23	361,167	Check		N/A	N/A
TRAVEL AND FIELD TRIPS	NORTH AMERICA	74	344,804	Check		N/A	N/A
TUITION	NORTH AMERICA	42	164,160	Check		N/A	N/A
GRANTEE MAINTENANCE	RUSSIA AND THE NEWLY IND	21	77,965	Check		N/A	N/A
GRANTEE COST OF LIVING	RUSSIA AND THE NEWLY IND	155	1,848,199	Check		N/A	N/A
INSURANCE	RUSSIA AND THE NEWLY IND	25	15,799	Check		N/A	N/A
SCHOLARSHIPS	RUSSIA AND THE NEWLY IND	94	1,348,291	Check		N/A	N/A
TRAVEL AND FIELD TRIPS	RUSSIA AND THE NEWLY IND	66	219,576	Check		N/A	N/A
TUITION	RUSSIA AND THE NEWLY IND	34	158,538	Check		N/A	N/A
GRANTEE COST OF LIVING	SOUTH AMERICA	209	891,273	Check		N/A	N/A
INSURANCE	SOUTH AMERICA	50	6,641	Check		N/A	N/A
SCHOLARSHIPS	SOUTH AMERICA	342	4,357,395	Check		N/A	N/A
TRAVEL AND FIELD TRIPS	SOUTH AMERICA	152	698,993	Check		N/A	N/A
TUITION	SOUTH AMERICA	39	194,722	Check		N/A	N/A
GRANTEE MAINTENANCE	SOUTH ASIA	4	5,969	Check		N/A	N/A
GRANTEE COST OF LIVING	SOUTH ASIA	113	599,380	Check		N/A	N/A
INSURANCE	SOUTH ASIA	20	4,382	Check		N/A	N/A
SCHOLARSHIPS	SOUTH ASIA	110	1,570,733	Check		N/A	N/A
TRAVEL AND FIELD TRIPS	SOUTH ASIA	100	493,262	Check		N/A	N/A
TUITION	SOUTH ASIA	45	220,926	Check		N/A	N/A
GRANTEE MAINTENANCE	SUB-SAHARAN AFRICA	1	5,091	Check		N/A	N/A
GRANTEE COST OF LIVING	SUB-SAHARAN AFRICA	268	1,491,242	Check		N/A	N/A
INSURANCE	SUB-SAHARAN AFRICA	92	11,376	Check		N/A	N/A
SCHOLARSHIPS	SUB-SAHARAN AFRICA	277	3,723,922	Check		N/A	N/A
TRAVEL AND FIELD TRIPS	SUB-SAHARAN AFRICA	226	1,136,630	Check		N/A	N/A
TUITION	SUB-SAHARAN AFRICA	79	196,395	Check		N/A	N/A

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
INSTITUTE OF INTERNATIONAL EDUCATION

Employer identification number
13-1624046

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

- **a** ☐ Mail solicitations
- **b** ☐ Internet and e-mail solicitations
- **c** ☐ Phone solicitations
- **d** ☐ In-person solicitations
- **e** ☐ Solicitation of non-government grants
- **f** ☐ Solicitation of government grants
- **g** ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions?		**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
		Yes	**No**			
Total . . . . . ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

CA, CO, CT, IL, MD, NJ, NY, VA

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than $5,000.

		(a) Event #1 NEW YORK GALA (event type)	(b) Event #2 DENVER GALA (event type)	(c) Other Events 0 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	716,292	110,708		827,000
	2 Less Charitable contributions	716,292	20,610		736,902
	3 Gross income (line 1 minus line 2)		90,098		90,098
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses		112,000		112,000
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				112,000
	11 Net income summary Combine lines 3 and 10 in column (d) ▶				-21,902

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes % ☐ No	☐ Yes % ☐ No	☐ Yes % ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," Explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," Explain _____

11 Does the organization operate 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 operated in

a The organization's facility	**13a**	
b An outside facility	**13b**	

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address

Name ▶

Address ▶

16 Gaming manager information

Name ▶

Gaming manager compensation ▶ $

Description of services provided ▶

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation

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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," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
INSTITUTE OF INTERNATIONAL EDUCATION

Employer identification number
13-1624046

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed. . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations . . . ▶ 81

3 Enter total number of other organizations . . . ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) GRANTEE MAINTENANCE	4461	6,119,954		N/A	N/A
(2) GRANTEE COST OF LIVING	8597	83,946,415		N/A	N/A
(3) INSURANCE	887	367,763		N/A	N/A
(4) SCHOLARSHIPS	257	2,108,010		N/A	N/A
(5) TRAVEL AND FIELD TRIPS	3050	11,593,006		N/A	N/A
(6) TUITION	4125	46,059,890		N/A	N/A

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
SCHEDULE I, PART I, LINE 2	PROCEDURES FOR MONITORING GRANTS IN THE UNITED STATES	OVERALL OPERATIONS ARE MANAGED BY THE PROGRAM MANAGERS AND VARIOUS DEPARTMENTS WITHIN FINANCE AND ADMINISTRATION (I E , CONTROLLER'S DIVISION, GRANTS AND CONTRACTS, LEGAL SERVICES AND ADMINISTRATIVE SERVICES) THERE IS REGULAR MONTHLY MONITORING BY THESE MANAGERS PERIODIC REPORTS ARE SUBMITTED TO THE SPONSOR PER CONTRACT OR GRANT REQUIREMENTS BUDGETS BUDGETS ARE ESTABLISHED ON A DIVISIONAL AND PROGRAM BASIS WITH COORDINATION BY THE PROGRAM DIRECTORS VARIANCES ARE REVIEWED EACH MONTH BY THE PROGRAM DIRECTORS IIE USES BUDGET TO ACTUAL REPORTS THAT ARE UPDATED WEEKLY TO MONITOR PERFORMANCE MID-YEAR BUDGET REVIEWS ARE PERFORMED BY SENIOR MANAGEMENT TO REVIEW THE ACTIVITIES OF ALL PROGRAMS AND ADJUST TO CHANGES IN BUDGET ASSUMPTIONS PAYMENTS PAYMENTS FOR DISBURSEMENTS AND REIMBURSEMENTS RELATING TO ALL GRANT FUNDS REQUIRE APPROPRIATE SUPPORTING DOCUMENTATION BEFORE PAYMENTS ARE MADE, GRANTEES AND VENDORS ARE CHECKED AGAINST THE EXCLUDED PARTIES LIST SYSTEM (EPLS) TO ENSURE THESE PAYEES ARE IN COMPLIANCE WITH APPROPRIATE RULES AND REGULATIONS UPON APPROVAL FROM EPLS, PAYMENTS WILL INCLUDE AGREEMENTS STATING THE TERMS OF THE GRANT SIGNED BY IIE AND THE GRANTEE OR VENDOR AND IIE SUPERVISOR/MANAGER LEVEL APPROVED PAYMENT DOCUMENTS TO PROCESS EACH OF THE DISBURSEMENTS OR REIMBURSEMENTS ALL COSTS ASSOCIATED WITH THESE PAYMENTS ARE CONTROLLED BY PROGRAM MANAGEMENT AS WELL AS THE FINANCE TEAM WHO ENSURE THAT THE PAYMENTS ARE RELATED TO ALLOWABLE AND SPONSOR APPROVED ACTIVITIES SEVIS IIE REPORTS TO THE STUDENT AND EXCHANGE VISITOR PROGRAM (SEVP) WHICH SERVES AS THE BRIDGE FOR VARIED GOVERNMENT ORGANIZATIONS THAT HAVE AN INTEREST IN INFORMATION ON FOREIGN STUDENTS SEVP USES WEB-BASED TECHNOLOGY, THE STUDENT AND EXCHANGE VISITOR INFORMATION SYSTEM (SEVIS), TO TRACK AND MONITOR SCHOOLS AND PROGRAMS, STUDENTS, EXCHANGE VISITORS AND THEIR DEPENDENTS THROUGHOUT THE DURATION OF APPROVED PARTICIPATION WITHIN THE U S EDUCATION SYSTEM

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 13-1624046
Name: INSTITUTE OF INTERNATIONAL EDUCATION

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
AMERICAN COUNCIL FOR INT'L EDUCATION	52-1067256	501(C)(3)	1,870,294		N/A	N/A	
ANITA BORG INSTITUTE	77-0480427	501(C)(3)	129,305		N/A	N/A	
ARIZONA STATE UNIVERSITY	86-6051042	501(C)(3)	1,405,554		N/A	N/A	
ASPEN INSTITUTE	84-0399006	501(C)(3)	10,000		N/A	N/A	
BERKELEY CITY COLLEGE	94-1590799	501(C)(3)	76,410		N/A	N/A	
BOSTON FULBRIGHT COMMITTEE INC	04-2693036	501(C)(3)	57,407		N/A	N/A	
BOSTON UNIVERSITY	04-2103547	501(C)(3)	641,572		N/A	N/A	
BRIGHAM YOUNG UNIVERSITY	87-0217280	501(C)(3)	1,235,959		N/A	N/A	
BRYN MAWR COLLEGE	23-1352621	501(C)(3)	4,488,426		N/A	N/A	
CALIFORNIA STATE UNIVERSITY	95-2044300	501(C)(3)	117,215		N/A	N/A	
CHATHAM UNIVERSITY	25-0717890	501(C)(3)	15,000		N/A	N/A	
COLORADO STATE UNIVERSITY	23-7098397	501(C)(3)	109,022		N/A	N/A	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CORNELL UNIVERSITY	15-0532082	501(C)(3)	199,018		N/A	N/A	
DREXEL UNIVERSITY	23-1352630	501(C)(3)	49,995		N/A	N/A	
EASTERN MICHIGAN UNIVERSITY	38-2953297	501(C)(3)	32,785		N/A	N/A	
EMBRY-RIDDLE AERONAUTICAL UNIV	59-0936101	501(C)(3)	282,985		N/A	N/A	
EMORY UNIVERSITY	58-0566256	501(C)(3)	154,769		N/A	N/A	
FLORIDA INSTITUTE OF TECHNOLOGY	59-6046500	501(C)(3)	27,730		N/A	N/A	
GEORGE MASON UNIVERSITY	54-1603842	501(C)(3)	44,771		N/A	N/A	
GEORGIA TECH RESEARCH CORPORATION	58-2374837	501(C)(3)	307,000		N/A	N/A	
GLOBAL PITTSBURGH	25-6067678	501(C)(3)	7,133		N/A	N/A	
HUNTER COLLEGE	13-3598671	501(C)(3)	169,472		N/A	N/A	
INDIANA UNIVERSITY	35-6018940	501(C)(3)	1,418,358		N/A	N/A	
IOWA STATE UNIVERSITY	42-1143702	501(C)(3)	207,594		N/A	N/A	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
IVC OF PHILADELPHIA	23-1489115	501(C)(3)	76,146		N/A	N/A	
JAMES MADISON UNIVERSITY	23-7156305	501(C)(3)	387,524		N/A	N/A	
JOHN HOPKINS UNIVERSITY	52-0595110	501(C)(3)	294,245		N/A	N/A	
LASPAU	04-6151880	501(C)(3)	2,901,138		N/A	N/A	
LEHIGH UNIVERSITY	24-0795445	501(C)(3)	15,000		N/A	N/A	
LINCOLN UNIVERSITY	23-1352655	501(C)(3)	44,308		N/A	N/A	
MEEDAN	20-4504068	501(C)(3)	115,400		N/A	N/A	
MIAMI DADE COMMUNITY COLLEGE	59-6169745	501(C)(3)	106,625		N/A	N/A	
MICHIGAN STATE UNIVERSITY	23-7326030	501(C)(3)	937,429		N/A	N/A	
NEW YORK UNIVERSITY	13-5562308	501(C)(3)	110,773		N/A	N/A	
NORTH CAROLINA STATE UNIVERSITY	56-6049503	501(C)(3)	350,406		N/A	N/A	
NORTH GEORGIA COLLEGE & STATE UNIVERSITY	23-7066297	501(C)(3)	220,515		N/A	N/A	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NORWICH UNIVERSITY	03-0179424	501(C)(3)	63,885		N/A	N/A	
OHIO STATE UNIVERSITY	31-1145986	501(C)(3)	1,110,455		N/A	N/A	
PENN STATE UNIVERSITY	24-6000376	501(C)(3)	411,879		N/A	N/A	
PORTLAND STATE UNIVERSITY	93-0619733	501(C)(3)	421,115		N/A	N/A	
PURDUE UNIVERSITY	35-6002041	501(C)(3)	188,680		N/A	N/A	
RESEARCH FOUNDATION OF SUNY AT BUFFALO	14-1368361	501(C)(3)	18,130		N/A	N/A	
SAN DIEGO STATE UNIVERSITY FOUNDATION	95-6042721	501(C)(3)	379,366		N/A	N/A	
SAN FRANCISCO STATE UNIVERSITY	33-0868418	501(C)(3)	678,640		N/A	N/A	
SOUTHERN UNIVERSITY	23-7052911	501(C)(3)	248,797		N/A	N/A	
SYRACUSE UNIVERSITY	15-0532081	501(C)(3)	287,133		N/A	N/A	
TEXAS A & M UNIVERSITY	74-1238434	501(C)(3)	265,375		N/A	N/A	
THE CITADEL	57-6020493	501(C)(3)	163,612		N/A	N/A	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
THE POPULATION COUNCIL INC	13-1687001	501(C)(3)	25,060		N/A	N/A	
THE UNIVERSITY OF KANSAS	48-0680117	501(C)(3)	175,771		N/A	N/A	
THE UNIVERSITY OF UTAH	87-6000525	501(C)(3)	161,672		N/A	N/A	
TULANE UNIVERSITY	72-0423889	501(C)(3)	311,029		N/A	N/A	
UNIVERSITY OF ARIZONA	86-6050388	501(C)(3)	177,974		N/A	N/A	
UNIVERSITY OF BUFFALO	16-0865182	501(C)(3)	13,704		N/A	N/A	
UNIVERSITY OF CALIFORNIA	95-6006143	501(C)(3)	940,128		N/A	N/A	
UNIVERSITY OF COLORADO	84-6000555	501(C)(3)	19,742		N/A	N/A	
UNIVERSITY OF HAWAII	99-0085260	501(C)(3)	1,215,367		N/A	N/A	
UNIVERSITY OF IOWA	42-0796760	501(C)(3)	31,188		N/A	N/A	
UNIVERSITY OF MARYLAND	52-2197313	501(C)(3)	1,614,714		N/A	N/A	
UNIVERSITY OF MICHIGAN	23-7326030	501(C)(3)	375,874		N/A	N/A	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
UNIVERSITY OF MINNESOTA	41-6042488	501(C)(3)	731,502		N/A	N/A	
UNIVERSITY OF MISSISSIPPI	23-7310293	501(C)(3)	1,220,242		N/A	N/A	
UNIVERSITY OF NEBRASKA	23-1352655	501(C)(3)	55,256		N/A	N/A	
UNIVERSITY OF NEW MEXICO	85-6010741	501(C)(3)	63,598		N/A	N/A	
UNIVERSITY OF NORTH CAROLINA	56-6059417	501(C)(3)	55,338		N/A	N/A	
UNIVERSITY OF OKLAHOMA	73-6091755	501(C)(3)	372,354		N/A	N/A	
UNIVERSITY OF OREGON	93-6015767	501(C)(3)	2,172,142		N/A	N/A	
UNIVERSITY OF PENNSYLVANIA	23-1352685	501(C)(3)	96,573		N/A	N/A	
UNIVERSITY OF RHODE ISLAND	05-6014351	501(C)(3)	430,007		N/A	N/A	
UNIVERSITY OF SOUTH FLORIDA	59-0879015	501(C)(3)	7,014		N/A	N/A	
UNIVERSITY OF TEXAS	74-1587488	501(C)(3)	2,433,288		N/A	N/A	
UNIVERSITY OF VIRGINIA	54-1682176	501(C)(3)	366,414		N/A	N/A	

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
UNIVERSITY OF WASHINGTON	94-3079432	501(C)(3)	442,541		N/A	N/A	
UNIVERSITY OF WISCONSIN	39-1742564	501(C)(3)	154,615		N/A	N/A	
VANDERBILT UNIVERSITY	62-0476822	501(C)(3)	216,060		N/A	N/A	
VERMONT COUNCIL ON WORLD AFFAIRS	03-6010787	501(C)(3)	74,201		N/A	N/A	
VIRGINIA COMMONWEALTH UNIVERSITY	54-0757884	501(C)(3)	153,737		N/A	N/A	
VIRGINIA POLYTECHNIC INSTITUTE	54-6001805	501(C)(3)	284,403		N/A	N/A	
VMI RESEARCH LABORATORIES INC	54-0737652	501(C)(3)	241,265		N/A	N/A	
WESTERN KENTUCKY UNIVERSITY	61-1251555	501(C)(3)	350,645		N/A	N/A	
WORLDCHICAGO	36-2406639	501(C)(3)	75,000		N/A	N/A	

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
INSTITUTE OF INTERNATIONAL EDUCATION

Employer identification number
13-1624046

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☑ Housing allowance or residence for personal use ☑ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☐ Written employment contract ☑ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment from the organization or a related organization?	**4a**	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization?	**5b**		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization?	**6b**		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name	**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
See Additional Data Table							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Identifier	Return Reference	Explanation
SCHEDULE J, PART I, LINE 1A		TRAVEL FOR COMPANIONS THERE IS A HOME LEAVE POLICY IN WHICH INTERNATIONAL DIRECTORS THAT HAVE RELOCATED FOR THE ORGANIZATION ARE ALLOWED TO TRAVEL HOME ONCE EVERY TWO YEARS WITH THEIR FAMILY HOUSING ALLOWANCE ONE OF THE HIGHEST COMPENSATED EMPLOYEES, ELIZABETH KHALIFA, RECEIVES HOUSING ALLOWANCE THIS EMPLOYEE IS AN INTERNATIONAL DIRECTOR LIVING OUTSIDE THE U S SOCIAL CLUB DUES DR ALLAN E GOODMAN, CEO, IS A MEMBER OF THE CITY CLUB OF WASHINGTON AT FRANKLIN SQUARE WHICH IS LESS THAN $10K A YEAR THE VENUE WAS USED FOR INSTITUTE LUNCHEONS AND BOARD EVENTS HE ENDED HIS MEMBERSHIP IN AUGUST 2011
SCHEDULE J, PART I, LINE 4A	SEVERANCE PAYMENT	SABINE O'HARA RECEIVED SEVERANCE FOR APPROXIMATELY $105,000 DURING THE CALENDAR YEAR 2010
SCHEDULE J, PART I, LINE 4B	PARTICIPATION IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	THE CEO CAN PARTICIPATE IN THE 457(F) PLAN THE CEO RECEIVED A CONTRIBUTION OF $21,000 DURING THE CALENDAR YEAR 2010

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 13-1624046
Name: INSTITUTE OF INTERNATIONAL EDUCATION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
DR ALLAN E GOODMAN	(I)	401,157	0	89,390	49,000	6,472	546,019	0
	(II)	0	0	0	0	0	0	0
MS PEGGY BLUMENTHAL	(I)	297,209	0	8,382	49,000	4,731	359,322	0
	(II)	0	0	0	0	0	0	0
MS EDITH CECIL	(I)	206,027	0	17,576	44,000	3,325	270,928	0
	(II)	0	0	0	0	0	0	0
MR BRIAN CHEN	(I)	244,455	0	1,242	46,500	6,525	298,722	0
	(II)	0	0	0	0	0	0	0
MS JAYE CHEN	(I)	151,670	50,000	15,860	33,000	8,200	258,730	0
	(II)	0	0	0	0	0	0	0
MS DANIELA Z KAISTH	(I)	159,624	0	33,420	24,000	7,737	224,781	0
	(II)	0	0	0	0	0	0	0
MR DENNIS W KEAR	(I)	157,891	0	4,115	38,000	7,451	207,457	0
	(II)	0	0	0	0	0	0	0
MS MARY E KIRK	(I)	227,113	0	1,131	44,664	3,827	276,735	0
	(II)	0	0	0	0	0	0	0
MR MARK S LAZAR	(I)	180,911	0	5,425	27,346	4,765	218,447	0
	(II)	0	0	0	0	0	0	0
MR MARK D MOYER	(I)	278,975	0	18,018	40,375	6,785	344,153	0
	(II)	0	0	0	0	0	0	0
MS SABINE U O'HARA	(I)	85,969	0	135,039	23,438	2,531	246,977	0
	(II)	0	0	0	0	0	0	0
MR ROBERT E SLATTERY	(I)	161,675	0	4,267	31,350	3,325	200,617	0
	(II)	0	0	0	0	0	0	0
MS JOAN WALL	(I)	156,201	0	20,385	43,000	5,167	224,753	0
	(II)	0	0	0	0	0	0	0
MS ELIZABETH KHALIFA	(I)	142,853	4,000	653	26,335	18,360	192,201	0
	(II)	0	0	0	0	0	0	0
MS JAGRITI PAREKH	(I)	130,569	7,000	12,293	27,868	4,358	182,088	0
	(II)	0	0	0	0	0	0	0
MR KIRK LENGA	(I)	129,210	3,500	273	26,899	9,445	169,327	0
	(II)	0	0	0	0	0	0	0
MS ELIZABETH GLANS	(I)	127,165	0	389	26,479	5,885	159,918	0
	(II)	0	0	0	0	0	0	0
MR EDWARD ROSLOF	(I)	139,115	10,000	690	15,000	10,885	175,690	0
	(II)	0	0	0	0	0	0	0
MR PETER DONDERO	(I)	172,918	9,000	1,597	11,255	6,895	201,665	0
	(II)	0	0	0	0	0	0	0
MS NANCY OVERHOLT	(I)	138,256	0	1,242	14,536	7,107	161,141	0
	(II)	0	0	0	0	0	0	0
MR STEVEN STEIGLEDER	(I)	136,975	0	631	16,720	2,362	156,688	0
	(II)	0	0	0	0	0	0	0

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SCHEDULE O
(Form 990 or 990-EZ)

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 to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
INSTITUTE OF INTERNATIONAL EDUCATION

Employer identification number
13-1624046

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 1	ORGANIZATION'S MISSION	INSTITUTE OF INTERNATIONAL EDUCATION IS AN INTERNATIONAL NON-GOVERNMENTAL ORGANIZATION THAT FOCUSES ON (1) PROMOTING CLOSER EDUCATIONAL RELATIONS BETWEEN THE PEOPLE OF THE UNITED STATES AND THOSE OF OTHER COUNTRIES (2) STRENGTHENING AND LINKING INSTITUTIONS OF HIGHER LEARNING GLOBALLY (3) RESCUING THREATENED SCHOLARS AND ADVANCING ACADEMIC FREEDOM (4) BUILDING LEADERSHIP SKILLS AND ENHANCING THE CAPACITY OF INDIVIDUALS AND ORGANIZATIONS TO ADDRESS LOCAL AND GLOBAL CHALLENGES

Identifier	Return Reference	Explanation
FORM 990, PART III, LINE 4A - 4D	PROGRAM SERVICE ACCOMPLISHMENTS	LINE 4A - INTERNATIONAL EXCHANGE OF STUDENTS AND SCHOLARS EXPENSES $260,436,522 INCLUDING GRANTS OF$201,153,528,REVENUE$13,962,255 BY IMPLEMENTING SOME OF THE WORLD'S MOST PRESTIGIOUS AND INNOVATIVE SCHOLARSHIP PROGRAMS IN A FAIR, OPEN, AND TRANSPARENT MANNER, THE INSTITUTE PROVIDES TALENT FROM AROUND THE WORLD WITH ACCESS TO LEADING INSTITUTIONS OF HIGHER EDUCATION AND THE INTERNATIONAL EXPERIENCE THAT IS CRITICAL TO SUCCESS IN THE 21ST CENTURY WORKPLACE THESE PROGRAMS ARE VITAL TO PROMOTING MUTUAL UNDERSTANDING AND DEVELOPING GLOBAL LEADERS EXAMPLES INCLUDE THE FULBRIGHT STUDENT AND FULBRIGHT SCHOLAR PROGRAMS WHICH ARE SPONSORED BY THE UNITED STATES DEPARTMENT OF STATE LINE 4B - LEADERSHIP DEVELOPMENT EDUCATIONAL SERVICES EXPENSES $64,329,715 INCLUDING GRANTS OF $54,020,193, REVENUE $941,208 THE INSTITUTE IMPLEMENTS PROGRAMS TO BUILD LEADERSHIP SKILLS AND ENHANCE THE CAPACITY OF INDIVIDUALS AND ORGANIZATIONS TO ADDRESS LOCAL AND GLOBAL CHALLENGES LONG AND SHORT TERM TRAINING PROGRAMS IMPLEMENTED BY THE INSTITUTE CONNECT STUDENTS AND PROFESSIONALS WITH PEERS AND COLLEAGUES AROUND THE WORLD TO GAIN THE SKILLS AND INTERNATIONAL PERSPECTIVES THEY WILL NEED TO FORGE SOLUTIONS TO GLOBAL CHALLENGES EXAMPLES INCLUDE NATIONAL SECURITY EDUCATION PROGRAMS SPONSORED BY THE UNITED STATES DEPARTMENT OF DEFENSE, AND USAID PROGRAMS LINE 4C - HIGHER EDUCATION INSTITUTIONAL DEVELOPMENT EXPENSES $13,946,442 INCLUDING GRANTS OF $5,660,511, REVENUE $6,255,288 THE INSTITUTE WORKS CLOSELY WITH PUBLIC AND PRIVATE HIGHER EDUCATION INSTITUTIONS TO DEVELOP HIGH-QUALITY ACADEMIC EXCHANGE PROGRAMS IN COORDINATION WITH GOVERNMENTAL AND NON-GOVERNMENTAL ORGANIZATIONS AND CORPORATIONS LEVERAGING EXTENSIVE NETWORKS AND EXPERTISE WITHIN THE HIGHER EDUCATION COMMUNITY WORLDWIDE, THE INSTITUTE IS UNIQUELY POSITIONED TO HELP SHAPE NEW UNIVERSITIES AND EXPAND THE CAPABILITIES AND RELATIONSHIPS OF EXISTING ACADEMIC INSTITUTIONS THE INSTITUTE ALSO HELPS IDENTIFY AND DEVELOP RELATIONSHIPS WITH UNIVERSITIES IN THE US AND OTHER COUNTRIES EXAMPLES OF THESE RELATIONSHIPS INCLUDE KING ABDULLAH UNIVERSITY OF SCIENCE AND TECHNOLOGY (KAUST) AND NEW YORK UNIVERSITY, ABU DHABI LINE 4D - EMERGENCY STUDENT AND SCHOLAR ASSISTANCE EXPENSES $6,426,084 INCLUDING GRANTS OF $3,515,002, REVENUE $144,789 THE INSTITUTE PROVIDES EMERGENCY ASSISTANCE TO SCHOLARS AND STUDENTS THROUGHOUT THE WORLD THROUGH THE SCHOLAR RESCUE FUND, THE INSTITUTE PROVIDES SUPPORT AND SAFE HAVEN TO ACADEMICS WHO ARE PERSECUTED AS A RESULT OF THEIR ACADEMIC WORK THROUGH THE EMERGENCY STUDENT FUND, THE INSTITUTE PROVIDES SUPPORT TO STUDENTS FACING EMERGENCIES AND CRISES SUCH AS ILLNESS OR NATURAL DISASTERS LINE 4D - RESEARCH AND PUBLICATIONS EXPENSES $1,233,330, INCLUDING GRANTS OF $51,003, REVENUE $808,015 THE INSTITUTE PRODUCES APPLIED RESEARCH AND POLICY ANALYSIS IN THE FIELD OF INTERNATIONAL EDUCATION AND STUDENT MOBILITY AN EXAMPLE IS "OPEN DOORS," A COMPREHENSIVE INFORMATION RESOURCE PRODUCED WITH SUPPORT FROM THE UNITED STATES DEPARTMENT OF STATE THAT DOCUMENTS AND ANALYZES ACADEMIC MOBILITY BETWEEN THE US AND THE NATIONS OF THE WORLD THE INSTITUTE ALSO PROVIDES RESEARCH AND PROGRAM EVALUATION SERVICES TO DOMESTIC AND INTERNATIONAL GOVERNMENT AGENCIES, NONGOVERNMENTAL ORGANIZATIONS AND FOUNDATIONS THE INSTITUTE'S PUBLICATIONS, CONFERENCES AND MEMBERSHIP ORGANIZATION (IIE NETWORK) ON INTERNATIONAL EDUCATION TOPICS AND GUIDES TO INTERNATIONAL STUDY PROGRAMS AND FUNDING HELP GUIDE POLICIES AND PROGRAMS IN THE FIELD OF INTERNATIONAL EDUCATION

Identifier	Return Reference	Explanation
FORM 990, PART V, LINE 4B	FOREIGN COUNTRIES	CHINA, HUNGARY, MEXICO, THAILAND, VIETNAM, EGYPT, INDIA, RUSSIA, UKRAINE, ETHIOPIA, UNITED KINGDOM, INDONESIA

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 2	FAMILY AND BUSINESS RELATIONSHIPS	1 H JARECKI, TRUSTEE, AND M KAPLAN, TRUSTEE - BUSINESS RELATIONSHIP 2 H JARECKI, TRUSTEE, AND T RUSSO, TRUSTEE - BUSINESS RELATIONSHIP

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 11A	REVIEW PROCESS FOR FORM 990	THE ORGANIZATION'S AUDIT COMMITTEE REVIEWS THE FINAL FORM 990 THE FINAL FORM 990 IS THEN DISTRIBUTED TO THE EXECUTIVE COMMITTEE AND THEN THE BOARD OF TRUSTEE MEMBERS BEFORE FILING

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 12C	CONFLICT OF INTEREST POLICY	THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO ALL OFFICERS, TRUSTEES AND EMPLOYEES UPDATED ANNUAL DISCLOSURES ARE REQUIRED FROM EACH RECIPIENT THIS PROCESS IS MONITORED BY HUMAN RESOURCES AND THE SECRETARY OF THE BOARD

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 15A & 15B	COMPENSATION POLICY	THE COMPENSATION/HUMAN RESOURCES COMMITTEE REVIEWS THE SALARIES FOR THE OFFICERS ANNUALLY THEIR LAST MEETING WAS HELD ON SEPTEMBER 8, 2011 THERE IS AN OUTSIDE CONSULTING FIRM THAT IS HIRED EVERY THREE (3) YEARS THAT PERFORMS A PEER ANALYSIS ON THE COMPENSATION OF THE ORGANIZATION'S OFFICERS PERFORMANCE AND MERIT ARE CONSIDERED FOR BONUSES AND SALARY INCREASES THE COMPENSATION COMMITTEE APPROVES COMPENSATION FOR THE PRESIDENT, OFFICERS AND SELECTED SENIOR STAFF WHICH IS SUBJECT TO RATIFICATION BY THE BOARD OF TRUSTEES

Identifier	Return Reference	Explanation
FORM 990, PART VI, LINE 19	DOCUMENTS AVAILABLE FOR PUBLIC INSPECTION	INSTITUTE OF INTERNATIONAL EDUCATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST THE CONSOLIDATED FINANCIAL STATEMENTS ARE AVAILABLE ON IIE'S WEBSITE

Identifier	Return Reference	Explanation
FORM 990, PART VII	AVERAGE HOURS	J CHEN, AN OFFICER OF IIE, SPENDS ON AVERAGE ONE HOUR EACH WEEK ON INTERNATIONAL FELLOWSHIPS FUND, A RELATED ENTITY

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINE 5	OTHER CHANGES IN NET ASSETS OR FUND BALANCES	UNREALIZED LOSS ON INVESTMENTS ($4,256,998)

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
INSTITUTE OF INTERNATIONAL EDUCATION

Employer identification number
13-1624046

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) INTERNATIONAL FELLOWSHIPS FUND INC 809 UNITED NATIONS PLAZA 9 FL NEW YORK, NY 10017 13-4162722	SUPPORT ORG	DE	501(c)(3)	11A - I	IIE		
(2) INDONESIAN INTERNATIONAL EDUCATION FDN MENARA IMPERIUM 28TH FL JAKARTA INDONESIA 12980 ID	EDUC EXCHANGE	ID	FGN EXEMPT		IIE		
(3) INSTITUTE INTL EDUCATION NONPROFIT LTD BUDAPEST HUNGARY HU	EDUC EXCHANGE	HU	FGN EXEMPT		IIE		

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) CHARITABLE REMAINDER TRUST (1)	EDUCATION GRANTS	TX	IIE	TRUST			

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

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

		Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to other organization(s)	1b		No
c Gift, grant, or capital contribution from other organization(s)	1c	Yes	
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e		No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1g		No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
l Performance of services or membership or fundraising solicitations by other organization(s)	1l		No
m Sharing of facilities, equipment, mailing lists, or other assets	1m	Yes	
n Sharing of paid employees	1n	Yes	
o Reimbursement paid to other organization for expenses	1o		No
p Reimbursement paid by other organization for expenses	1p	Yes	
q Other transfer of cash or property to other organization(s)	1q		No
r Other transfer of cash or property from other organization(s)	1r	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) INTERNATIONAL FELLOWSHIPS FUND INC	C	2,139,987	
(2) INTERNATIONAL FELLOWSHIPS FUND INC	K	340,166	
(3) INTERNATIONAL FELLOWSHIPS FUND INC	M	204,451	
(4) INTERNATIONAL FELLOWSHIPS FUND INC	N	973,169	
(5) INTERNATIONAL FELLOWSHIPS FUND INC	P	404,309	
(6)			

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation