

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2021

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

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

Form 990 Department of the Treasury Internal Revenue Service

For the 2021 calendar year, or tax year beginning 10-01-2021, and ending 09-30-2022

- B Check if applicable: Address change, Name change, Initial return, Final 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) Room/suite: ONE WORLD TRADE CENTER 36TH FLOOR. City or town, state or province, country, and ZIP or foreign postal code: NEW YORK, NY 10007

D Employer identification number: 13-1624046. E Telephone number: (212) 883-8200. G Gross receipts \$ 341,263,911

F Name and address of principal officer: ALLAN E GOODMAN, ONE WORLD TRADE CENTER 36TH FLOOR, NEW YORK, NY 10007

H(a) Is this a group return for subordinates? No. H(b) Are all subordinates included? No. H(c) Group exemption number

I Tax-exempt status: 501(c)(3)

J Website: WWW.IIE.ORG

K Form of organization: Corporation

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: HELP PEOPLE AND ORGANIZATIONS LEVERAGE THE POWER OF INT'L EDUCATION - CONTINUED IN SCHEDULE O

Table with 2 columns: Description and Amount. Rows include: 2 Check this box, 3 Number of voting members, 4 Number of independent voting members, 5 Total number of individuals employed, 6 Total number of volunteers, 7a Total unrelated business revenue, 7b Net unrelated business taxable income.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 8 Contributions and grants, 9 Program service revenue, 10 Investment income, 11 Other revenue, 12 Total revenue.

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 13 Grants and similar amounts paid, 14 Benefits paid to or for members, 15 Salaries, other compensation, 16a Professional fundraising fees, 16b Total fundraising expenses, 17 Other expenses, 18 Total expenses, 19 Revenue less expenses.

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows include: 20 Total assets, 21 Total liabilities, 22 Net assets or fund balances.

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: AMY EAPPEN SENIOR VICE PRESIDENT AND CFO. Date: 2023-07-13

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN P01390592, Firm's name GRANT THORNTON LLP, Firm's EIN 36-6055558, Firm's address 757 THIRD AVENUE 3RD FLOOR, NEW YORK, NY 100172013, Phone no. (212) 599-0100

Part III Statement of Program Service Accomplishments

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



1 Briefly describe the organization's mission:

THE INSTITUTE OF INTERNATIONAL EDUCATION, INC. (THE "INSTITUTE") IS A NOT-FOR-PROFIT ORGANIZATION THAT WAS ORGANIZED AND OPERATES EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES TO PROMOTE INTERNATIONAL EDUCATIONAL AND CULTURAL EXCHANGES. (SEE SCHEDULE O).ORGANIZATION'S MISSION STATEMENT (CONTINUED):THE INSTITUTE'S PROGRAMS INCLUDE, BUT ARE NOT LIMITED TO, MANAGING FELLOWSHIPS AND SCHOLARSHIPS; ASSISTING THREATENED STUDENTS AND SCHOLARS THROUGH ITS SCHOLAR RESCUE FUND, EMERGENCY STUDENT FUND, AND OTHER EFFORTS; DEVELOPING LEADERS BY BUILDING LEADERSHIP SKILLS AND ENHANCING THE CAPACITY OF INDIVIDUALS AND ORGANIZATIONS TO ADDRESS LOCAL AND GLOBAL CHALLENGES; PROVIDING STRATEGIC RESOURCES AND SERVICES TO HELP FACULTY AND ADMINISTRATORS INTERNATIONALIZE THEIR CAMPUSES; HELPING INSTITUTIONS OF HIGHER EDUCATION BUILD CAPACITY; PROMOTING INTERNATIONAL DEVELOPMENT; AND ENGAGING IN RESEARCH, DIALOGUE AND OTHER ACTIVITIES IN FURTHERANCE OF ITS PURPOSE.

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 organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 229,227,861 including grants of \$ 186,094,753 ) (Revenue \$ 15,332,384 ) INTERNATIONAL EXCHANGE OF STUDENTS AND SCHOLARS:BY IMPLEMENTING SOME OF THE WORLD'S MOST PRESTIGIOUS AND INNOVATIVE SCHOLARSHIP PROGRAMS IN A FAIR 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: FULBRIGHT STUDENT AND FULBRIGHT SCHOLAR PROGRAMS WHICH ARE SPONSORED BY THE U.S. DEPARTMENT OF STATE.

4b (Code: ) (Expenses \$ 30,923,602 including grants of \$ 15,601,267 ) (Revenue \$ 5,249,666 ) LEADERSHIP DEVELOPMENT EDUCATIONAL SERVICES: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 U.S. DEPARTMENT OF DEFENSE, AND USAID PROGRAMS.

4c (Code: ) (Expenses \$ 10,593,862 including grants of \$ 1,867,771 ) (Revenue \$ 13,922,223 ) HIGHER EDUCATION INSTITUTIONAL DEVELOPMENT:THE INSTITUTE WORKS CLOSELY WITH PUBLIC AND PRIVATE HIGHER EDUCATION INSTITUTIONS TO DEVELOP HIGH-QUALITY ACADEMIC EXCHANGE PROGRAMS IN COORDINATION WITH GOVERNMENT AND NOT-FOR-PROFIT 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 INCLUDE: THE KING ABDULLAH UNIVERSITY OF SCIENCE AND TECHNOLOGY (KAUST) AND NEW YORK UNIVERSITY, ABU DHABI.

(Code: ) (Expenses \$ 9,551,043 including grants of \$ 5,874,472 ) (Revenue \$ 599,436 ) EMERGENCY STUDENT AND SCHOLAR ASSISTANCE: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. THE IIE ODYSSEY PROGRAM PROVIDES COMPREHENSIVE SCHOLARSHIPS TO REFUGEES AND DISPLACED STUDENTS AROUND THE WORLD.RESEARCH AND PUBLICATIONS:THE INSTITUTE PRODUCES APPLIED RESEARCH AND 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, NOT-FOR-PROFIT ORGANIZATIONS AND FOUNDATIONS. THE INSTITUTE'S PUBLICATIONS, CONFERENCES AND MEMBERSHIP ORGANIZATION (IIE NETWORK) HELP GUIDE POLICIES AND PROGRAMS IN THE FIELD OF INTERNATIONAL EDUCATION BY PROVIDING GUIDANCE ON INTERNATIONAL STUDY PROGRAMS AND FUNDING.

4d Other program services (Describe in Schedule O.) (Expenses \$ 9,551,043 including grants of \$ 5,874,472 ) (Revenue \$ 599,436 )

4e Total program service expenses 280,296,368

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response columns. Rows include questions 1 through 21, with sub-questions 11a-e and 12a-b. Each row has a corresponding 'Yes' and 'No' column for the answer.

**Part IV Checklist of Required Schedules (continued)**

		Yes	No	
<b>22</b>	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	22	Yes	
<b>23</b>	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> . . . . .	23	Yes	
<b>24a</b>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> . . . . .	24a		No
<b>b</b>	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .	24b		
<b>c</b>	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		
<b>d</b>	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
<b>25a</b>	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	25a		No
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
<b>26</b>	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?	26		No
<b>27</b>	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	27		No
<b>28</b>	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
<b>a</b>	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
<b>b</b>	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
<b>c</b>	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29		No
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?	30		No
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	32		No
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?	33	Yes	
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> . . . . .	34	Yes	
<b>35a</b>	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
<b>b</b>	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b	Yes	
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	36		No
<b>37</b>	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? <i>If "Yes," complete Schedule R, Part VI</i> . . . . .	37		No
<b>38</b>	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note.</b> 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 or note to any line in this Part V . . . . .

		Yes	No	
<b>1a</b>	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	149	
<b>b</b>	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable . . . . .	1b	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? . . . . .	1c	Yes	

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

Table with 17 main rows (2a-17) and sub-rows (a-e). Columns include question text, response boxes (e.g., 2a, 2b, 569), and Yes/No/blank response boxes.

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 or note to any line in this Part VI



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members... 2 Did any officer, director, trustee... 3 Did the organization delegate control... 4 Did the organization make any significant changes... 5 Did the organization become aware... 6 Did the organization have members... 7a Did the organization have members... 7b Are any governance decisions... 8 Did the organization contemporaneously document... 8a The governing body? 8b Each committee... 9 Is there any officer, director, trustee...

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters... 10b If "Yes," did the organization have written policies... 11a Has the organization provided a complete copy... 11b Describe on Schedule O the process... 12a Did the organization have a written conflict of interest policy... 12b Were officers, directors, or trustees... 12c Did the organization regularly and consistently monitor... 13 Did the organization have a written whistleblower policy... 14 Did the organization have a written document retention... 15 Did the process for determining compensation... 15a The organization's CEO... 15b Other officers or key employees... 16a Did the organization invest in, contribute assets to... 16b If "Yes," did the organization follow a written policy...

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed: AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI
18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: AMY EAPPEN SVP AND CFO ONE WORLD TRADE CENTER 36TH FLOOR NEW YORK, NY 10007 (212) 883-8200

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DR ALLAN E GOODMAN CHIEF EXECUTIVE OFFICER/TRUSTEE	40.00 0.00	X		X				770,766	0	52,036
(2) MR HARTLEY R ROGERS TREASURER/TRUSTEE	1.50 0.00	X		X				0	0	0
(3) MR MARK ANGELSON CHAIR/TRUSTEE	4.50 0.00	X		X				0	0	0
(4) MR CALVIN G BUTLER JR VICE CHAIR/TRUSTEE	1.25 0.00	X		X				0	0	0
(5) MR THOMAS A RUSSO VICE CHAIR/TRUSTEE	2.00 0.00	X		X				0	0	0
(6) MS LINDA VESTER TRUSTEE/VICE CHAIR (AS OF 01/2022)	1.75 0.00	X		X				0	0	0
(7) MS MARYAM PANAHY ANSARY TRUSTEE (THRU 01/2022)	2.25 0.00	X						0	0	0
(8) MR SETH R BERGSTEIN TRUSTEE	2.50 0.00	X						0	0	0
(9) DR LEE C BOLLINGER TRUSTEE	1.25 0.00	X						0	0	0
(10) MS AMY BRANDT TRUSTEE	1.00 0.00	X						0	0	0
(11) MS BARBARA BYRNE TRUSTEE (THRU 06/10/2022)	1.25 0.00	X						0	0	0
(12) DR GEORGE CAMPBELL JR TRUSTEE	4.25 0.00	X						0	0	0
(13) MS MARIA LIVANOS CATTALU V. CHAIR (THRU 01/2022)/TRUSTEE	3.00 0.00	X		X				0	0	0
(14) MR ROBERT L DILENSCHNEIDER TRUSTEE	3.75 0.00	X						0	0	0
(15) MS COLLEEN GOGGINS TRUSTEE	1.25 0.00	X						0	0	0
(16) MR JACK M GREENBERG TRUSTEE	1.25 0.00	X						0	0	0
(17) MS JOYCE P HENDRICKS TRUSTEE	1.00 0.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MS KAREN A HOLBROOK TRUSTEE	1.25 0.00	X						0	0	0
(19) MR JONATHAN HOLLOWAY TRUSTEE	1.00 0.00	X						0	0	0
(20) MR MICHAEL E HOUSTON TRUSTEE (AS OF 05/2022)	1.00 0.00	X						0	0	0
(21) MR SANFORD A IBRAHIM TRUSTEE (AS OF 01/2022)	1.00 0.00	X						0	0	0
(22) MR THOMAS S JOHNSON TRUSTEE	1.00 0.00	X						0	0	0
(23) DR HENRY KAUFMAN TRUSTEE	1.00 0.00	X						0	0	0
(24) MS LAYA KHADJAVI TRUSTEE	3.25 0.00	X						0	0	0
(25) MR MAHBOOB MAHMOOD TRUSTEE	1.00 0.00	X						0	0	0
(26) MR DWIGHT A MCBRIDE TRUSTEE	1.00 0.00	X						0	0	0
(27) MS STEPHANIE J MUDICK TRUSTEE	1.00 0.00	X						0	0	0
(28) DR HARRIS PASTIDES TRUSTEE	1.25 0.00	X						0	0	0
(29) MR GEORGE RUPP TRUSTEE	2.25 0.00	X						0	0	0
(30) DR JAN SIEGMUND TRUSTEE (AS OF 09/2022)	1.00 0.00	X						0	0	0
(31) MS JOANNE BERGER-SWEENEY TRUSTEE	1.00 0.00	X						0	0	0
(32) HRH PRINCESS GHIDA TALAL TRUSTEE (THRU 01/2022)	1.00 0.00	X						0	0	0
(33) MR MARTIN Y TANG TRUSTEE	1.50 0.00	X						0	0	0
(34) MS AMY TOWERS TRUSTEE	1.00 0.00	X						0	0	0
(35) MS SARAH WATERBURY TRUSTEE	1.00 0.00	X						0	0	0
(36) DR MARK S WRIGHTON TRUSTEE	1.50 0.00	X						0	0	0
(37) MR JASON CZYZ - EVP CFO CO-PRESIDENT (AS OF 01/2022)	40.00 0.00			X				641,516	0	30,023
(38) MS COURTNEY TEMPLE - SVP CAO/EVP (AS OF 01/2022)	40.00 0.00			X				409,123	0	30,976
(39) MS AMY EAPPEN - SVPCHIEF FINANCIAL OFFICER (AS OF 01/2022)	40.00 0.00			X				214,466	0	44,993
(40) MS KATHERINE CAMPBELL SECRETARY	40.00 0.00			X				104,217	0	19,204
(41) MS A SARAH HOLLINGER - SVP SCHLR. OFF./CO-PRES. (AS OF 01/2022)	40.00 0.00			X				374,359	0	54,899
(42) MR PETER YOUNG SVP, CHIEF TECHNOLOGY OFFICER	40.00 0.00					X		372,553	0	31,997
(43) MS EDITH CECIL SENIOR VICE PRESIDENT	40.00 0.00					X		339,785	0	44,257
(44) MR JONAH MURPHY-KOKODYNIAK SVP, PROGRAM DEVELOPMENT	40.00 0.00					X		317,754	0	44,587
(45) MS CHERYL ROBERTS CONTROLLER	40.00 0.00					X		250,442	0	27,267
(46) MS NINA SMITH SVP, CHIEF PHILANTHROPY OFFICER	40.00 0.00					X		242,829	0	5,233
<b>1b Sub-Total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>								4,037,810	0	385,472

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **8 1**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		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. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PRICEWATERHOUSECOOPERS LLP PO BOX 7247-8001 PHILADELPHIA, PA 19170	AUDIT & TAX SERVICES	617,000
MARKS PANETH LLP 685 THIRD AVENUE NEW YORK, NY 10017	TAX ADVISORS	539,470
JURIN CONSULTING SERVICES LLC 2250 2ND STREET JACKSONVILLE BEACH, FL 32250	PEOPLESFT SUPPORT	209,490
SKADDEN ARPS SLATE MEAGHER & FLOM LLP FOUR TIMES SQUARE NEW YORK, NY 10036	LEGAL SERVICES	173,438
KAE STRATEGIC LLC 2101 L STREET NW SUITE 800 WASHINGTON, DC 20037	PROGRAM STRATEGY SERVICES	147,500

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **1 1**

**Part VIII Statement of Revenue**

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and Other Amt Similar Amounts				
<b>1a</b> Federated campaigns . . . . .				
<b>1b</b> Membership dues . . . . .				
<b>1c</b> Fundraising events . . . . .				
<b>1d</b> Related organizations				
<b>1e</b> Government grants (contributions)			250,732,076	
<b>1f</b> All other contributions, gifts, grants, and similar amounts not included above			34,733,525	
<b>1g</b> Noncash contributions included in lines 1a - 1f:\$				
<b>h Total.</b> Add lines 1a-1f . . . . .				285,465,601

Program Service Revenue		Business Code				
			(A)	(B)		
<b>2a</b> FIXED FEE CONTRACTS		900099	34,048,263	34,048,263		
<b>b</b> PUBLICATIONS & MEMBERSHIP FEES		900099	677,256	677,256		
<b>c</b> EDUCATIONAL FORUM		900099	378,190	378,190		
<b>d</b>						
<b>e</b>						
<b>f</b> All other program service revenue.						
<b>g Total.</b> Add lines 2a-2f. . . . .			35,103,709			

Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		4,099,585		-1,317	4,100,902	
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties . . . . .						
	<b>6a</b> Gross rents	(i) Real					
		(ii) Personal					
		<b>6b</b> Less: rental expenses					
		<b>6c</b> Rental income or (loss)					
	<b>d</b> Net rental income or (loss) . . . . .						
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	16,504,768				
		(ii) Other					
		<b>7b</b> Less: cost or other basis and sales expenses	14,810,031				
		<b>7c</b> Gain or (loss)	1,694,737				
	<b>d</b> Net gain or (loss) . . . . .		1,694,737			1,694,737	
	<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 . . . . .						
		<b>8b</b> Less: direct expenses					
<b>c</b> Net income or (loss) from fundraising events . . . . .							
<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . .							
	<b>9b</b> Less: direct expenses						
	<b>c</b> Net income or (loss) from gaming activities . . . . .						
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .							
	<b>10b</b> Less: cost of goods sold						
	<b>c</b> Net income or (loss) from sales of inventory . . . . .						
Miscellaneous Revenue	Business Code						
<b>11a</b> MISCELLANEOUS REVENUE	900099	90,248			90,248		
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . .		90,248					
<b>12 Total revenue.</b> See instructions . . . . .		326,453,880	35,103,709	-1,317	5,885,887		

**Part IX Statement of Functional Expenses**

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

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

**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
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	51,453,831	51,453,831		
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22	145,950,151	145,950,151		
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	12,034,281	12,034,281		
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	2,733,297	1,901,095	775,981	56,221
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	42,407,555	29,495,800	12,039,476	872,279
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,445,707	2,396,598	978,234	70,875
<b>9</b> Other employee benefits	7,468,306	5,194,444	2,120,247	153,615
<b>10</b> Payroll taxes	2,753,554	1,915,184	781,732	56,638
<b>11</b> Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal	512,553	158,419	351,980	2,154
<b>c</b> Accounting	631,932	10,868	621,064	
<b>d</b> Lobbying	302,605		302,605	
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	339,679		339,679	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	21,205,534	17,909,456	2,973,780	322,298
<b>12</b> Advertising and promotion				
<b>13</b> Office expenses	2,021,622	973,703	1,013,685	34,234
<b>14</b> Information technology	2,469,433	881,490	1,585,026	2,917
<b>15</b> Royalties				
<b>16</b> Occupancy	6,306,609	5,697,125	363,670	245,814
<b>17</b> Travel	2,018,413	1,708,039	295,524	14,850
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings	2,539,872	2,382,125	95,296	62,451
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	3,370,981	225,863	3,142,589	2,529
<b>23</b> Insurance	486,115	7,896	478,219	
<b>24</b> Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
<b>a</b> BAD DEBT EXPENSE	136,747		136,747	
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b> All other expenses				
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	310,588,777	280,296,368	28,395,534	1,896,875
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

**Part X Balance Sheet**

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

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash-non-interest-bearing . . . . .	10,821,059	<b>1</b>	17,234,567
	<b>2</b> Savings and temporary cash investments	58,606,841	<b>2</b>	53,820,273
	<b>3</b> Pledges and grants receivable, net . . . . .	1,267,708	<b>3</b>	4,606,248
	<b>4</b> Accounts receivable, net . . . . .	37,517,519	<b>4</b>	51,016,600
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	7,718,807	<b>9</b>	6,613,143
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 36,872,203		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 23,147,991	11,694,883	<b>10c</b> 13,724,212
	<b>11</b> Investments—publicly traded securities . . . . .	210,568,260	<b>11</b>	167,917,540
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .	11,255,024	<b>12</b>	20,824,899
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11	3,555,491	<b>15</b>	40,144,397
<b>16 Total assets:</b> Add lines 1 through 15 (must equal line 33) . . . . .	353,005,592	<b>16</b>	375,901,879	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	44,440,936	<b>17</b>	48,441,714
	<b>18</b> Grants payable . . . . .	28,595,927	<b>18</b>	32,142,842
	<b>19</b> Deferred revenue . . . . .	129,229	<b>19</b>	227,461
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	0	<b>25</b>	43,978,017
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	73,166,092	<b>26</b>	124,790,034
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .	187,930,411	<b>27</b>	170,100,752
	<b>28</b> Net assets with donor restrictions	91,909,089	<b>28</b>	81,011,093
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds		<b>31</b>	
	<b>32</b> Total net assets or fund balances	279,839,500	<b>32</b>	251,111,845
<b>33</b> Total liabilities and net assets/fund balances	353,005,592	<b>33</b>	375,901,879	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	326,453,880
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	310,588,777
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	15,865,103
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	279,839,500
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	-44,592,758
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	<b>10</b>	251,111,845

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b>	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
<b>3a</b>	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?	Yes	
<b>b</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.	Yes	

**Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

**Form 990, Special Condition Description:**

**Special Condition Description**

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.  
▶ Attach to Form 990 or Form 990-EZ.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**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 12, 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 (Form 990).)
- 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 agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:
- 10  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . . \_\_\_\_\_
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First 5 years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2021; 15 Public support percentage for 2020; 16a 33 1/3% support test—2021; b 33 1/3% support test—2020; 17a 10%-facts-and-circumstances test—2021; b 10%-facts-and-circumstances test—2020; 18 Private foundation.

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 . . . . .						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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.						
<b>c</b> Add lines 7a and 7b. .						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
<b>9</b> Amounts from line 6. . . . .						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
<b>c</b> Add lines 10a and 10b.						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .						
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here.</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2021 (line 8, column (f) divided by line 13, column (f)) . . . . .	<b>15</b>	
<b>16</b> Public support percentage from 2020 Schedule A, Part III, line 15 . . . . .	<b>16</b>	

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2021</b> (line 10c, column (f) divided by line 13, column (f)) . . . . .	<b>17</b>	
<b>18</b> Investment income percentage from <b>2020</b> Schedule A, Part III, line 17 . . . . .	<b>18</b>	

**19a 33 1/3% support tests—2021.** 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—2020.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . .

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows include questions 1 through 10b regarding supported organizations, including their status, control, and reporting requirements.



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

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

**Section A - Adjusted Net Income**

(A) Prior Year

(B) Current Year  
(optional)

- |   |          |  |  |
|---|----------|--|--|
| <b>1</b> Net short-term capital gain  | <b>1</b> |  |  |
| <b>2</b> Recoveries of prior-year distributions   | <b>2</b> |  |  |
| <b>3</b> Other gross income (see instructions)  | <b>3</b> |  |  |
| <b>4</b> Add lines 1 through 3  | <b>4</b> |  |  |
| <b>5</b> Depreciation and depletion   | <b>5</b> |  |  |
| <b>6</b> Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | <b>6</b> |  |  |
| <b>7</b> Other expenses (see instructions)  | <b>7</b> |  |  |
| <b>8 Adjusted Net Income</b> (subtract lines 5, 6 and 7 from line 4)  | <b>8</b> |  |  |

**Section B - Minimum Asset Amount**

(A) Prior Year

(B) Current Year  
(optional)

- |  |           |  |  |
|--|-----------|--|--|
| <b>1</b> Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): | <b>1</b>  |  |  |
| <b>a</b> Average monthly value of securities   | <b>1a</b> |  |  |
| <b>b</b> Average monthly cash balances   | <b>1b</b> |  |  |
| <b>c</b> Fair market value of other non-exempt-use assets  | <b>1c</b> |  |  |
| <b>d Total</b> (add lines 1a, 1b, and 1c)  | <b>1d</b> |  |  |
| <b>e Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):   |           |  |  |
| <b>2</b> Acquisition indebtedness applicable to non-exempt use assets  | <b>2</b>  |  |  |
| <b>3</b> Subtract line 2 from line 1d  | <b>3</b>  |  |  |
| <b>4</b> Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).                                  | <b>4</b>  |  |  |
| <b>5</b> Net value of non-exempt-use assets (subtract line 4 from line 3)  | <b>5</b>  |  |  |
| <b>6</b> Multiply line 5 by 0.035  | <b>6</b>  |  |  |
| <b>7</b> Recoveries of prior-year distributions  | <b>7</b>  |  |  |
| <b>8 Minimum Asset Amount</b> (add line 7 to line 6)   | <b>8</b>  |  |  |

**Section C - Distributable Amount**

Current Year

- |  |          |  |
|--|----------|--|
| <b>1</b> Adjusted net income for prior year (from Section A, line 8, Column A)   | <b>1</b> |  |
| <b>2</b> Enter 85% of line 1   | <b>2</b> |  |
| <b>3</b> Minimum asset amount for prior year (from Section B, line 8, Column A)  | <b>3</b> |  |
| <b>4</b> Enter greater of line 2 or line 3   | <b>4</b> |  |
| <b>5</b> Income tax imposed in prior year  | <b>5</b> |  |
| <b>6 Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) | <b>6</b> |  |

- 7**  Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

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

(continued)

Section D - Distributions		Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>	
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>	
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>	
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>	
<b>5</b> Qualified set-aside amounts (prior IRS approval required - provide details in <b>Part VI</b> )	<b>5</b>	
<b>6</b> Other distributions (describe in <b>Part VI</b> ). See instructions	<b>6</b>	
<b>7 Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>	
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions	<b>8</b>	
<b>9</b> Distributable amount for 2021 from Section C, line 6	<b>9</b>	
<b>10</b> Line 8 amount divided by Line 9 amount	<b>10</b>	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
<b>1</b> Distributable amount for 2021 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2021 (reasonable cause required-- explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2021:			
<b>a</b> From 2016. . . . .			
<b>b</b> From 2017. . . . .			
<b>c</b> From 2018. . . . .			
<b>d</b> From 2019. . . . .			
<b>e</b> From 2020. . . . .			
<b>f Total</b> of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2021 distributable amount			
<b>i</b> Carryover from 2016 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2021 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2021 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7 Excess distributions carryover to 2022.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2017. . . . .			
<b>b</b> Excess from 2018. . . . .			
<b>c</b> Excess from 2019. . . . .			
<b>d</b> Excess from 2020. . . . .			
<b>e</b> Excess from 2021. . . . .			

**Part VI Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

### Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	MISCELLANEOUS REVENUE - 2017 AMOUNT: \$ 122,134. 2018 AMOUNT: \$ 85,250. 2019 AMOUNT: \$ 31,363. 2020 AMOUNT: \$ 20,138. 2021 AMOUNT: \$ 90,248.

## **Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

**Political Campaign and Lobbying Activities**  
**For Organizations Exempt From Income Tax Under section 501(c) and section 527**  
  
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

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

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

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

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

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

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

Name of the organization INSTITUTE OF INTERNATIONAL EDUCATION	<b>Employer identification number</b>  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. See instructions for definition of "political campaign activities."

**2** Political campaign activity expenditures. See instructions ..... ▶ \$ \_\_\_\_\_

**3** Volunteer hours for political campaign activities. See instructions .....

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

**1** Enter the amount of any excise tax incurred by the organization under section 4955 ..... \$ \_\_\_\_\_

**2** Enter the amount of any excise tax incurred by organization managers under section 4955 ..... \$ \_\_\_\_\_

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

**4a** Was a correction made? .....  Yes  No

**b** If "Yes," describe in Part IV.

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

**1** Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... \$ \_\_\_\_\_

**2** Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_

**3** Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..... \$ \_\_\_\_\_

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

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
<b>1</b>				
<b>2</b>				
<b>3</b>				
<b>4</b>				
<b>5</b>				
<b>6</b>				

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

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:50%; text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:50%; text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> 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)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers? .....	Yes		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....	Yes		
<b>c</b> Media advertisements? .....		No	
<b>d</b> Mailings to members, legislators, or the public? .....	Yes		
<b>e</b> Publications, or published or broadcast statements? .....		No	
<b>f</b> Grants to other organizations for lobbying purposes? .....		No	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....	Yes		302,605
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....		No	
<b>i</b> Other activities? .....	Yes		
<b>j</b> Total. Add lines 1c through 1i .....			302,605
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....		No	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> 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
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carry over lobbying and political expenditures from the prior year? .....	<b>3</b>	

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

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> ).	
<b>a</b> Current year .....	<b>2a</b>
<b>b</b> Carryover from last year .....	<b>2b</b>
<b>c</b> Total .....	<b>2c</b>
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	<b>3</b>
<b>4</b> 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? .....	<b>4</b>
<b>5</b> Taxable amount of lobbying and political expenditures. See Instructions .....	<b>5</b>

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation
PART II-B, LINE 1:	THE CEO, TRUSTEES, SENIOR STAFF AND ALUMNI VOLUNTEERS OF INSTITUTE OF INTERNATIONAL EDUCATION AS WELL AS INDEPENDENT CONSULTANTS MEET WITH LEGISLATIVE AND GOVERNMENT OFFICIALS AND/OR THEIR STAFF TO PROVIDE INFORMATION REGARDING THE MISSION AND PROGRAMS. FROM TIME TO TIME WE HAVE SUPPLEMENTED THESE VISITS WITH CORRESPONDENCE.

**Additional Data**

**Return to Form**

**Software ID:**  
**Software Version:**

Supplemental Financial Statements

2021

Open to Public Inspection

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

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" on Form 990, Part IV, line 6.

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 show values for total number, aggregate value of contributions, grants, and total value.

- 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...
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes...

Part II Conservation Easements.

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

Table with 2 columns: Line number, Held at the End of the Year. Rows 2a, 2b, 2c, 2d.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations...
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations...
7 Amount of expenses incurred in monitoring, inspecting, handling of violations...
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service...
1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service...
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that 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 XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . .  **Yes**  **No**

**Part IV Escrow and Custodial Arrangements.**

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

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

**Part V Endowment Funds.**

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance . . . . .	183,118,679	163,447,909	77,107,494	78,423,839	76,578,973
<b>b</b> Contributions . . . . .	9,239,194	106,017	82,095,285	251,247	1,802,827
<b>c</b> Net investment earnings, gains, and losses	-32,235,390	23,274,477	7,495,791	1,557,529	5,090,039
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .	4,630,080	3,709,724	3,250,661	3,125,121	5,048,000
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .	155,492,403	183,118,679	163,447,909	77,107,494	78,423,839

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ 60.000 %
  - b** Permanent endowment ▶ 3.700 %
  - c** Term endowment ▶ 36.300 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes | No |
|--|-----|----|
| <b>(i)</b> Unrelated organizations . . . . . | No  | No |
| <b>(ii)</b> Related organizations . . . . .  | No  | No |
- b** If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? . . . . .

**4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements		6,497,206	625,829	5,871,377
<b>d</b> Equipment . . . . .		5,783,163	575,835	5,207,328
<b>e</b> Other . . . . .		24,591,834	21,946,327	2,645,507
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				13,724,212

**Part VII Investments - Other Securities.**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A) MULTI-STRATEGY	16,317,676	F
(B) EQUITY-ORIENTED	4,247,498	F
(C) DEBT-BOND FUNDS	259,725	F
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	20,824,899	

**Part VIII Investments - Program Related.**

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

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

**Part IX Other Assets.**

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

(a) Description	(b) Book value
(1) RIGHT-OF-USE ASSETS	37,317,437
(2) BENEFICIAL INTERESTS IN PERPETUAL TRUSTS HELD BY THIRD PARTIES	2,826,960
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 15.)	40,144,397

**Part X Other Liabilities.**

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.)	43,978,017

**2.** Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	281,521,443
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	-44,592,758
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	-44,592,758
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	326,114,201
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	339,679
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	339,679
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .	<b>5</b>	326,453,880

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

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	310,249,098
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	0
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	310,249,098
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	339,679
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	339,679
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .	<b>5</b>	310,588,777

**Part XIII Supplemental Information**

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

Return Reference	Explanation
PART V, LINE 4:	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.
PART X, LINE 2:	INCOME TAXES: THE INSTITUTE IS A NOT-FOR-PROFIT ORGANIZATION EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE U.S. INTERNAL REVENUE CODE. THE INSTITUTE IS NOT GENERALLY REQUIRED TO PAY CORPORATE INCOME TAX IN MOST JURISDICTIONS IN WHICH IT OPERATES BY VIRTUE OF, INTER ALIA, IIE'S NOT-FOR-PROFIT STATUS AND/OR THE STATUS OF ITS LOCAL AFFILIATE OR REPRESENTATIVE OFFICES. HOWEVER, IIE PAYS PAYROLL AND USE TAXES IN THE NORMAL COURSE OF BUSINESS WHERE REQUIRED, AND SOME ACTIVITIES MAY BE SUBJECT TO SALES AND VALUE ADDED TAXES IN CERTAIN JURISDICTIONS. ACCORDINGLY, IIE PAYS OR MAINTAINS APPROPRIATE PROVISIONS TO ACCOUNT FOR SUCH LIABILITIES.
PART IX, LINE 1, RIGHT-OF-USE ASSETS, AND PART X, LINE 1(2)	OPERATING LEASE LIABILITIES: THE FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") IMPLEMENTED A NEW LEASE ACCOUNTING STANDARD THAT BECAME EFFECTIVE FOR INSTITUTE OF INTERNATIONAL EDUCATION IN THE YEAR ENDING SEPTEMBER 30, 2022. THIS ACCOUNTING STANDARD WAS EFFECTUATED TO IMPROVE THE TRANSPARENCY SURROUNDING KEY INFORMATION PERTAINING TO AN EXEMPT ORGANIZATION'S LEASING ARRANGEMENTS (AND TO ENSURE THAT ALL ORGANIZATIONS WERE RECORDING THE TRANSACTIONS UNIFORMLY ON THEIR BALANCE SHEETS). RIGHT-OF-USE ASSETS REPRESENT THE INSTITUTE'S RIGHT TO USE AN UNDERLYING ASSET FOR THE LEASE TERM, WHILE LEASE LIABILITIES REPRESENT THE INSTITUTE'S OBLIGATION TO MAKE LEASE PAYMENTS ARISING FROM THE LEASE. RIGHT-OF-USE ASSETS AND LEASE LIABILITIES ARE RECOGNIZED AT THE COMMENCEMENT DATE OF A LEASE BASED ON THE NET PRESENT VALUE OF LEASE PAYMENTS OVER THE LEASE TERM.

## **Additional Data**

[\*\*Return to Form\*\*](#)

**Software ID:**

**Software Version:**

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

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

**2021**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants or other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) CENTRAL AMERICA AND THE CARIBBEAN	0	0	PROGRAM SERVICES	EDUCATION GRANTS-INDIV	176,994
(2) EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	EDUCATION GRANTS-INDIV	2,667,805
(3) EAST ASIA AND THE PACIFIC	0	0	GRANTMAKING		282,361
(4) EAST ASIA AND THE PACIFIC	4	20	MAINTAINING OFFICES		3,217,988
(5) EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	PROGRAM SERVICES	EDUCATION GRANTS-INDIV	2,104,470
(6) EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	GRANTMAKING		93,383
(7) EUROPE (INCLUDING ICELAND & GREENLAND)	1	7	MAINTAINING OFFICES		1,401,882
(8) MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	EDUCATION GRANTS-INDIV	1,031,144
(9) MIDDLE EAST AND NORTH AFRICA	0	0	GRANTMAKING		1,157,015
(10) MIDDLE EAST AND NORTH AFRICA	1	13	MAINTAINING OFFICES		1,143,194
(11) NORTH AMERICA	0	0	PROGRAM SERVICES	EDUCATION GRANTS-INDIV	835,566
(12) NORTH AMERICA	0	0	GRANTMAKING		50,000
(13) NORTH AMERICA	1	18	MAINTAINING OFFICES		3,503,653
(14) RUSSIA AND NEIGHBORING STATES	0	0	PROGRAM SERVICES	EDUCATION GRANTS-INDIV	292,219
(15) RUSSIA AND NEIGHBORING STATES	0	0	GRANTMAKING		148,575
(16) RUSSIA AND NEIGHBORING STATES	2	24	MAINTAINING OFFICES		2,982,118
(17) SOUTH AMERICA	0	0	PROGRAM SERVICES	EDUCATION GRANTS-INDIV	990,951
(18) SOUTH ASIA	0	0	PROGRAM SERVICES	EDUCATION GRANTS-INDIV	458,576
(19) SOUTH ASIA	1	6	MAINTAINING OFFICES		837,421
(20) SUB-SAHARAN AFRICA	0	0	PROGRAM SERVICES	EDUCATION GRANTS-INDIV	1,745,221
(21) SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	1	14	MAINTAINING OFFICES		416,463
(22) CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	INVESTMENTS		15,531,318
<b>3a</b> Sub-total . . . . .	5	27			10,976,027
<b>b</b> Total from continuation sheets to Part I . . . . .	6	75			30,092,290
<b>c Totals</b> (add lines 3a and 3b)	11	102			41,068,317

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

<b>1</b>	<b>(a)</b> Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	<b>(c)</b> Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	<b>(h)</b> Description of noncash assistance	<b>(i)</b> Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA AND THE PACIFIC	EDUCATION EXCHANGE	23,708	WIRE TRANSFER	0		
(2)			EAST ASIA AND THE PACIFIC	EDUCATION EXCHANGE	94,985	WIRE TRANSFER	0		
(3)			EAST ASIA AND THE PACIFIC	EDUCATION EXCHANGE	25,000	WIRE TRANSFER	0		
(4)			EAST ASIA AND THE PACIFIC	EDUCATION EXCHANGE	113,669	WIRE TRANSFER	0		
(5)			EAST ASIA AND THE PACIFIC	EDUCATION EXCHANGE	25,000	WIRE TRANSFER	0		
(6)			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION EXCHANGE	25,000	WIRE TRANSFER	0		
(7)			EUROPE (INCLUDING ICELAND & GREENLAND)	EDUCATION EXCHANGE	68,383	WIRE TRANSFER	0		
(8)			MIDDLE EAST AND NORTH AFRICA	EDUCATION EXCHANGE	293,279	WIRE TRANSFER	0		
(9)			MIDDLE EAST AND NORTH AFRICA	EDUCATION EXCHANGE	849,836	WIRE TRANSFER	0		
(10)			MIDDLE EAST AND NORTH AFRICA	EDUCATION EXCHANGE	13,900	WIRE TRANSFER	0		
(11)			NORTH AMERICA	EDUCATION EXCHANGE	25,000	WIRE TRANSFER	0		
(12)			NORTH AMERICA	EDUCATION EXCHANGE	25,000	WIRE TRANSFER	0		
(13)			RUSSIA AND NEIGHBORING STATES	EDUCATION EXCHANGE	148,575	WIRE TRANSFER	0		
(14)									
(15)									
(16)									

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 13

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" on Form 990, Part IV, line 16.

Part III can be duplicated 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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) STIPENDS & GRANTS	CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	25	126,878	WIRE TRANSFER			
(2) TUITION, BOOKS AND FEES	CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	2	40,000	WIRE TRANSFER			
(3) HEALTH INSURANCE	EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	74	125,849	WIRE TRANSFER			
(4) STIPENDS & GRANTS	EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	365	1,609,636	WIRE TRANSFER			
(5) TRAVEL	EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	31	62,921	WIRE TRANSFER			
(6) TUITION, BOOKS AND FEES	EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,	96	864,749	WIRE TRANSFER			
(7) HEALTH INSURANCE	EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIU	36	18,674	WIRE TRANSFER			
(8) OTHER EDUCATIONAL EXPENSES	EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIU	18	12,706	WIRE TRANSFER			
(9) STIPENDS & GRANTS	EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIU	161	1,146,624	WIRE TRANSFER			
(10) TRAVEL	EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIU	35	44,454	WIRE TRANSFER			
(11) TUITION, BOOKS AND FEES	EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIU	56	882,011	WIRE TRANSFER			
(12) HEALTH INSURANCE	MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	33	22,403	WIRE TRANSFER			
(13) STIPENDS & GRANTS	MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	85	378,040	WIRE TRANSFER			
(14) TRAVEL	MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN, DJIBOUTI, EGYPT,	25	41,073	WIRE TRANSFER			
(15) TUITION, BOOKS AND FEES	MIDDLE EAST AND NORTH AFRICA - ALGERIA, BAHRAIN,	34	585,300	WIRE TRANSFER			

(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	DJIBOUTI, EGYPT,						
(16) HEALTH INSURANCE	NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	32	8,294	WIRE TRANSFER			
(17) OTHER EDUCATIONAL EXPENSES	NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	14	12,335	WIRE TRANSFER			
(18) STIPENDS & GRANTS	NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	93	474,398	WIRE TRANSFER			
(19) TRAVEL	NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	35	52,639	WIRE TRANSFER			
(20) TUITION, BOOKS AND FEES	NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	25	287,901	WIRE TRANSFER			
(21) STIPENDS & GRANTS	RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,	69	250,929	WIRE TRANSFER			
(22) TRAVEL	RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,	8	17,985	WIRE TRANSFER			
(23) TUITION, BOOKS AND FEES	RUSSIA AND NEIGHBORING STATES - ARMENIA, AZERBIJAN, BELARUS,	5	21,956	WIRE TRANSFER			
(24) STIPENDS & GRANTS	SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	106	794,429	WIRE TRANSFER			
(25) TRAVEL	SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	19	47,622	WIRE TRANSFER			
(26) TUITION, BOOKS AND FEES	SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,	11	146,400	WIRE TRANSFER			
(27) STIPENDS & GRANTS	SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL,	82	390,452	WIRE TRANSFER			
(28) TRAVEL	SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL,	36	19,823	WIRE TRANSFER			
(29) TUITION, BOOKS AND FEES	SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL,	9	43,874	WIRE TRANSFER			
(30) HEALTH INSURANCE	SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	41	41,944	WIRE TRANSFER			
(31) OTHER EDUCATIONAL EXPENSES	SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	26	20,969	WIRE TRANSFER			
(32) STIPENDS & GRANTS	SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	171	1,167,162	WIRE TRANSFER			
(33) TRAVEL	SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	53	88,335	WIRE TRANSFER			
(34) TUITION, BOOKS AND FEES	SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	39	426,812	WIRE TRANSFER			

**Part IV Foreign Forms**

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

**Part V Supplemental Information**

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

ReturnReference	Explanation
PART I, LINE 2:	<p>PROCEDURES FOR MONITORING GRANTS OUTSIDE THE UNITED STATES: OVERALL: ALL OPERATIONS ARE CLOSELY MANAGED BY THE PROGRAM MANAGERS AND VARIOUS DEPARTMENTS WITHIN FINANCE AND ADMINISTRATION (I.E., CFO, GRANTS AND CONTRACTS, LEGAL SERVICES AND ADMINISTRATIVE SERVICES). THERE IS REGULAR MONTHLY MONITORING BY FINANCIAL MANAGERS, MID-YEAR BUDGET REVIEWS ARE PERFORMED BY SENIOR MANAGEMENT TO REVIEW THE ACTIVITIES OF ALL PROGRAMS AND ADJUST TO CHANGES IN BUDGET ASSUMPTIONS. REPORTS ARE SUBMITTED TO THE SPONSOR PER CONTRACT OR GRANT REQUIREMENTS. THE INTERNAL AUDIT STAFF MAKES OCCASIONAL VISITS TO OUR INTERNATIONAL OFFICES TO AUDIT PROGRAM CONTROLS AND COMPLIANCE. BUDGETS: BUDGETS ARE ESTABLISHED ON A DEPARTMENT AND PROGRAM BASIS WITH CLOSE COORDINATION BETWEEN PROGRAM FINANCE, PRICING, PROGRAMS, AND FINANCIAL PLANNING &amp; ANALYSIS. BUDGET TO ACTUAL REPORTS ARE REVIEWED REGULARLY BY PROGRAM FINANCE AND PROGRAM TEAM MEMBERS TO MONITOR PERFORMANCE. IN ADDITION, SENIOR MANAGEMENT REVIEWS ARE HELD QUARTERLY. THE BUDGET AND FINANCE COMMITTEE OF THE BOARD OF TRUSTEES REVIEWS THE ANNUAL OPERATING AND CAPITAL BUDGETS, REVIEWS IMPLEMENTATION OF OPERATING PLANS AND CAPITAL PROJECTS, OVERSEES BUDGETING AND INTERNAL FINANCIAL REPORTING SYSTEMS AND PROCEDURES, AND REGULARLY MEETS WITH STAFF TO REVIEW THE FINANCIAL RESULTS AND OTHER FINANCIAL MANAGEMENT REPORTS AND PROVIDE STAFF WITH GUIDANCE AS NECESSARY. PAYMENTS/CASH RECEIPTS: PAYMENTS FOR DISBURSEMENTS AND REIMBURSEMENTS RELATING TO ALL GRANT FUNDS REQUIRE APPROPRIATE SUPPORTING DOCUMENTATION. BEFORE PAYMENTS ARE MADE, GRANTEEES AND VENDORS ARE CHECKED AGAINST SPECIALLY DESIGNATED NATIONAL LISTS AND OTHER SIMILAR PROHIBITED TRANSACTION LISTS TO HELP CONFIRM THAT PAYMENTS ARE NOT PROHIBITED. UPON APPROVAL, 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 CONFIRM THAT THE PAYMENTS ARE RELATED TO ALLOWABLE AND SPONSOR APPROVED ACTIVITIES.</p>
PART I, LINE 3:	<p>METHOD USED ON FINANCIAL STATEMENTS: THE METHOD USED TO ACCOUNT FOR FOREIGN EXPENDITURES AND CASH GRANTS ON THE ORGANIZATION'S FINANCIAL STATEMENTS IS ACCRUAL-BASED AND FOLLOWS US GAAP.</p>
PART III ACCOUNTING METHOD:	
PART IV:	<p>THE INSTITUTE OF INTERNATIONAL EDUCATION INVESTS IN DOMESTIC AND FOREIGN LIMITED PARTNERSHIPS THAT MAY OWN AN INTEREST IN A FOREIGN CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN PARTNERSHIP. NEVERTHELESS, IIE'S INVESTMENT ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS 926, 5471, 8621 OR 8865. TO THE EXTENT SUCH A FORM WAS COMPLETED, IT HAS BEEN FILED WITH THE ORGANIZATION'S FORM 990-T.</p>

## Additional Data

**Software ID:**

**Software Version:**

Schedule I (Form 990) Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

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

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of non-cash assistance, (h) Purpose of grant or assistance. Rows include AMERICAN UNIVERSITY, ARIZONA STATE UNIVERSITY, BARD COLLEGE, BOSTON UNIVERSITY, BRIGHAM YOUNG UNIVERSITY, BRYN MAWR COLLEGE, CALIFORNIA STATE UNIVERSITY LONG BEACH, COLLEGE OF WILLIAM AND MARY, CONCORDIA COLLEGE, CORNELL UNIVERSITY, COUNCIL OF AMERICAN OVERSEAS RESEARCH CENTER, EMBRY-RIDDLE AERONAUTICAL UNIVERSITY, EMORY UNIVERSITY, GEORGE MASON UNIVERSITY, GEORGE WASHINGTON UNIVERSITY, GEORGIA TECH RESEARCH CORPORATION, INDIANA UNIVERSITY, INTERNATIONAL HOUSE DAVIS, JAMES MADISON UNIVERSITY, MARQUETTE UNIVERSITY, MASSACHUSETTS INSTITUTE OF TECHNOLOGY, MICHIGAN STATE UNIVERSITY, MIDDLEBURY COLLEGE, NORTH CAROLINA STATE UNIVERSITY, NORTHEASTERN ILLINOIS UNIVERSITY, NORTHERN ILLINOIS UNIVERSITY, NORWICH UNIVERSITY, ONE TO WORLD INC, PENNSYLVANIA STATE UNIVERSITY, PORTLAND STATE UNIVERSITY, RESEARCH FOUNDATION CUNY, RUTGERS THE STATE UNIV OF NJ, SAN DIEGO STATE UNIVERSITY FOUNDATION, SAN FRANCISCO STATE UNIVERSITY, SHENANDOAH UNIVERSITY, SYRACUSE UNIVERSITY, TEXAS A AND M UNIVERSITY, THE CITADEL THE MILITARY COLLEGE OF SOUTH CAROLINA, UNIVERSITY OF UTAH, U OF KS CENTER FOR RESEARCH INC, UNIVERSITY OF ARIZONA, UNIVERSITY OF CALIFORNIA DAVIS, UNIVERSITY OF CALIFORNIA LOS ANGELES, UNIVERSITY OF FLORIDA, UNIVERSITY OF GEORGIA, UNIVERSITY OF HAWAII, UNIVERSITY OF HOUSTON, UNIVERSITY OF KENTUCKY, UNIVERSITY OF MARYLAND, UNIVERSITY OF MINNESOTA, UNIVERSITY OF MISSISSIPPI, UNIVERSITY OF MONTANA, UNIVERSITY OF NORTH CAROLINA, UNIVERSITY OF NORTH GEORGIA, UNIVERSITY OF NOTRE DAME, UNIVERSITY OF OREGON, UNIVERSITY OF PITTSBURGH, UNIVERSITY OF RHODE ISLAND, UNIVERSITY OF TEXAS AT AUSTIN, UNIVERSITY OF TEXAS AT SAN ANTONIO, UNIVERSITY OF WASHINGTON, UNIVERSITY OF WISCONSIN, UNIVERSITY OF WYOMING, VIRGINIA POLYTECHNIC INSTITUTE AND STATE UNIVERSITY, VANDERBILT UNIVERSITY, VIRGINIA MILITARY INSTITUTE, VIRGINIA MILITARY LABORATORIES INC, WESTERN KY UNIV RESEARCH FOUNDATION, WOODROW WILSON INTL CTR FOR SCHOLAR, WORLD BOSTON, WORLD CHICAGO.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 70

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

**Part III Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) HEALTH INSURANCE	2190	4,005,039			
(2) OTHER EDUCATIONAL EXPENSES	2185	2,873,806			
(3) STIPENDS & GRANTS	14426	100,156,726			
(4) TRAVEL	4798	8,629,753			
(5) TUITION, BOOKS AND FEES	3936	30,284,827			
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2:	<p>PROCEDURES FOR MONITORING GRANTS IN THE UNITED STATES: OVERALL: OPERATIONS ARE CLOSELY MANAGED BY THE PROGRAM MANAGERS AND VARIOUS DEPARTMENTS WITHIN FINANCE AND ADMINISTRATION (I.E., CFO, GRANTS AND CONTRACTS, LEGAL SERVICES AND ADMINISTRATIVE SERVICES). THERE IS REGULAR MONTHLY MONITORING BY PROGRAM FINANCE AND QUARTERLY FINANCIAL MANAGEMENT REVIEWS BY SENIOR MANAGEMENT. FISCAL YEAR PLANNING AND MIDYEAR BUDGET REVIEWS ARE PERFORMED BY SENIOR MANAGEMENT TO REVIEW THE ACTIVITIES OF ALL PROGRAMS AND DEPARTMENTS AND ADJUST TO CHANGES IN BUDGET ASSUMPTIONS. REPORTS ARE SUBMITTED TO THE SPONSOR PER CONTRACT OR GRANT REQUIREMENTS. BUDGETS: BUDGETS ARE ESTABLISHED ON A DEPARTMENT AND PROGRAM BASIS WITH CLOSE COORDINATION BETWEEN PROGRAM FINANCE, PRICING, PROGRAMS, AND FINANCIAL PLANNING &amp; ANALYSIS. BUDGET TO ACTUAL REPORTS ARE REVIEWED REGULARLY BY PROGRAM FINANCE AND PROGRAM TEAM MEMBERS TO MONITOR PERFORMANCE. IN ADDITION, SENIOR MANAGEMENT REVIEWS ARE HELD QUARTERLY. THE BUDGET AND FINANCE COMMITTEE OF THE BOARD OF TRUSTEES REVIEWS THE ANNUAL OPERATING AND CAPITAL BUDGETS, REVIEWS IMPLEMENTATION OF OPERATING PLANS AND CAPITAL PROJECTS, OVERSEES BUDGETING AND INTERNAL FINANCIAL REPORTING SYSTEMS AND PROCEDURES, AND REGULARLY MEETS WITH STAFF TO REVIEW THE FINANCIAL RESULTS AND OTHER FINANCIAL MANAGEMENT REPORTS AND PROVIDE STAFF WITH GUIDANCE AS NECESSARY. PAYMENTS/CASH RECEIPTS: FOR REIMBURSEMENTS AND DISBURSEMENTS RELATING TO GRANTS APPROPRIATE SUPPORTING DOCUMENTATION IS REQUIRED. ALL ACTIVITIES AND COSTS ARE PERFORMED UNDER THE AUSPICES OF AND ARE CONTROLLED BY THE PROGRAM AND/OR ADMINISTRATION DIRECTORS (CFO, GRANTS AND CONTRACTS, LEGAL COUNSEL, ADMINISTRATIVE SERVICES) WHO ENSURE THAT THE TASKS PERFORMED ARE RELATED TO ALLOWABLE AND SPONSOR APPROVED ACTIVITIES. COSTS ARE REVIEWED AND APPROVED BY PROGRAM DIRECTORS, WITH ADDITIONAL OVERSIGHT BY THE FINANCE DEPARTMENT. SEVIS: IIE ALSO UTILIZES 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.</p>

**Additional Data**

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**Software ID:**  
**Software Version:**

**Schedule J**  
**(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
- ▶ **Attach to Form 990.**
- ▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

**2021**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
INSTITUTE OF INTERNATIONAL EDUCATION

Employer identification number  
13-1624046

**Part I Questions Regarding Compensation**

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		No
<b>4b</b>		No
<b>4c</b>		No
<b>5a</b>		No
<b>5b</b>		No
<b>6a</b>		No
<b>6b</b>		No
<b>7</b>	Yes	
<b>8</b>		No
<b>9</b>		

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

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

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

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 DR ALLAN E GOODMAN CHIEF EXECUTIVE OFFICER/TRUSTEE	(i)	600,622	114,000	56,144	32,000	20,036	822,802	0
	(ii)	0	0	0	0	0	0	0
2 MR JASON CZYZ - EVP CFO CO-PRESIDENT (AS OF 01/2022)	(i)	455,400	164,000	22,116	29,663	360	671,539	0
	(ii)	0	0	0	0	0	0	0
3 MS COURTNEY TEMPLE - SVP CAO/EVP (AS OF 01/2022)	(i)	298,000	110,000	1,123	26,696	4,280	440,099	0
	(ii)	0	0	0	0	0	0	0
4 MS A SARAH HOLLINGER - SVP SCHLR. OFF./CO-PRES. (AS OF 01/2022)	(i)	313,008	59,000	2,351	31,738	23,161	429,258	0
	(ii)	0	0	0	0	0	0	0
5 MR PETER YOUNG SVP, CHIEF TECHNOLOGY OFFICER	(i)	286,038	63,000	23,515	21,750	10,247	404,550	0
	(ii)	0	0	0	0	0	0	0
6 MS EDITH CECIL SENIOR VICE PRESIDENT	(i)	259,911	56,000	23,874	29,560	14,697	384,042	0
	(ii)	0	0	0	0	0	0	0
7 MR JONAH MURPHY-KOKODYNIAK SVP, PROGRAM DEVELOPMENT	(i)	261,488	55,000	1,266	29,890	14,697	362,341	0
	(ii)	0	0	0	0	0	0	0
8 MS CHERYL ROBERTS CONTROLLER	(i)	246,805	0	3,637	19,096	8,171	277,709	0
	(ii)	0	0	0	0	0	0	0
9 MS AMY EAPPEN - SVPCHIEF FINANCIAL OFFICER (AS OF 01/2022)	(i)	203,010	11,000	456	24,659	20,334	259,459	0
	(ii)	0	0	0	0	0	0	0
10 MS NINA SMITH SVP, CHIEF PHILANTHROPY OFFICER	(i)	192,533	30,000	20,296	0	5,233	248,062	0
	(ii)	0	0	0	0	0	0	0

**Part III Supplemental Information**

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

Return Reference	Explanation
PART I, LINE 7	EXECUTIVE BONUSES ARE DETERMINED BASED ON A COMBINATION OF ORGANIZATIONAL AND INDIVIDUAL PERFORMANCE. ORGANIZATIONAL PERFORMANCE RATING IS RECOMMENDED BY THE EXECUTIVE TEAM AS A WHOLE AND APPROVED BY THE COMPENSATION HUMAN RESOURCES COMMITTEE. INDIVIDUAL PERFORMANCE RATING IS RECOMMENDED BY THE INDIVIDUAL EXECUTIVE'S MANAGER.

## **Additional Data**

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**Software Version:**

**SCHEDULE O**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.**▶ **Attach to Form 990 or 990-EZ.**▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.**

OMB No. 1545-0047

**2021****Open to Public  
Inspection**Name of the organization  
INSTITUTE OF INTERNATIONAL EDUCATION**Employer identification number**

13-1624046

Return Reference	Explanation
PART I, LINE 1, ORGANIZATION'S MISSION (CONTINUED):	TO THRIVE IN TODAY'S WORLD THROUGH SCHOLARSHIP, EXCHANGE, SCHOLAR RESCUE, AND OTHER HIGHER EDUCATION PROGRAMS.
FORM 990, PART VI, SECTION B, LINE 11B	THE ORGANIZATION'S AUDIT COMMITTEE REVIEWS THE FINAL FORM 990 AND MAKES SUGGESTIONS. THE FINAL FORM 990 IS THEN DISTRIBUTED TO THE FULL BOARD OF TRUSTEES BEFORE FILING.
FORM 990, PART VI, SECTION B, LINE 12C	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 (FOR EMPLOYEES) AND THE LEGAL DEPT./SECRETARY OF THE BOARD (FOR TRUSTEES AND OFFICERS).
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION AND HUMAN RESOURCES COMMITTEE OF THE BOARD ANNUALLY REVIEWS THE COMPENSATION FOR THE INSTITUTE'S SENIOR EXECUTIVES, INCLUDING THE CEO, CO-PRESIDENTS, EVP, AND SVPS. THE COMMITTEE BASES ITS REVIEW, IN PART, ON COMPARABLE DATA OBTAINED FROM AN OUTSIDE, INDEPENDENT CONSULTANT, WHICH IS UPDATED FROM TIME TO TIME. THE CEO ALSO PROVIDES SUGGESTIONS TO THE COMMITTEE. THE COMMITTEE REVIEWS AND APPROVES THE ANNUAL SALARY, INCENTIVE COMPENSATION, AND ANY OTHER BENEFITS ("EXECUTIVE COMPENSATION") OF THE SENIOR EXECUTIVES, EXCLUDING THE CEO, AND SO ADVISES THE EXECUTIVE COMMITTEE OF THE BOARD. THE COMMITTEE REVIEWS AND RECOMMENDS TO THE EXECUTIVE COMMITTEE FOR ITS APPROVAL THE EXECUTIVE COMPENSATION OF THE CEO. THE EXECUTIVE COMMITTEE THEN ADVISES THE BOARD OF ITS DETERMINATION. THE COMPENSATION DATA REPORTED IN THIS FORM 990 IS FOR THE PERIOD JANUARY 2021 THROUGH DECEMBER 2021.
FORM 990, PART VI, SECTION C, LINE 19	THE FINANCIAL STATEMENTS ARE AVAILABLE ON IIE'S WEBSITE. GOVERNING DOCUMENTS AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.
FORM 990, PART VII - AVERAGE HOURS:	THE AVERAGE HOURS PER WEEK ARE BASED UPON ESTIMATES. ACTUAL HOURS INCURRED MAY FLUCTUATE THROUGHOUT THE YEAR.

## **Additional Data**

**Return to Form**

**Software ID:**

**Software Version:**

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

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 (if applicable) 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
<b>(1)</b> IIE NETWORKS LLC ONE WORLD TRADE CENTER 36TH FL NEW YORK, NY 10017 46-5009643	HOLDING CO	DE	0	50,000	IIE
<b>(2)</b> IIE OVERSEAS LLC TVERSKOY BULEVAR 14 BLDG 1 MOSCOW 125009 RS 83-4178554	HOLDING CO	DE	0	244,271	IIE

**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 entity?	
						Yes	No
<b>(1)</b> INSTITUTE INTL EDUCATION NONPROFIT LTD BUDAPEST HU	EDUCATION EXCHANGE	HU	FGN EXEMPT		IIE	Yes	

**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) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K- 1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

**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	(i) Section 512(b) (13) controlled entity?	
								Yes	No
(1) CHARITABLE REMAINDER TRUST (1)	EDUCATION GRANTS	TX	IIE	T				Yes	

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

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

**1** During the tax year, did the organization 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, or **(iv)** rent from a controlled entity . . . . .
- b** Gift, grant, or capital contribution to related organization(s) . . . . .
- c** Gift, grant, or capital contribution from related organization(s) . . . . .
- d** Loans or loan guarantees to or for related organization(s) . . . . .
- e** Loans or loan guarantees by related organization(s) . . . . .
- f** Dividends from related organization(s) . . . . .
- g** Sale of assets to related organization(s) . . . . .
- h** Purchase of assets from related organization(s) . . . . .
- i** Exchange of assets with related organization(s) . . . . .
- j** Lease of facilities, equipment, or other assets to related organization(s) . . . . .
- k** Lease of facilities, equipment, or other assets from related organization(s) . . . . .
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s) . . . . .
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) . . . . .
- o** Sharing of paid employees with related organization(s) . . . . .
- p** Reimbursement paid to related organization(s) for expenses . . . . .
- q** Reimbursement paid by related organization(s) for expenses . . . . .
- r** Other transfer of cash or property to related organization(s) . . . . .
- s** Other transfer of cash or property from related organization(s) . . . . .

	Yes	No
<b>1a</b>		No
<b>1b</b>		No
<b>1c</b>		No
<b>1d</b>		No
<b>1e</b>		No
<b>1f</b>		No
<b>1g</b>		No
<b>1h</b>		No
<b>1i</b>		No
<b>1j</b>		No
<b>1k</b>		No
<b>1l</b>	Yes	
<b>1m</b>	Yes	
<b>1n</b>		No
<b>1o</b>		No
<b>1p</b>	Yes	
<b>1q</b>	Yes	
<b>1r</b>		No
<b>1s</b>		No

**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 related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
<b>(1)</b> INSTITUTE INTL EDUCATION NONPROFIT (BUDAPEST)	R	388,400	BOOK



**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference

Explanation

Schedule R (Form 990) 2021

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