Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2023

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning 01-01-2023 , and ending 12-31-2023

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization
WORLD EDUCATION SERVICES INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
ONE BATTERY PARK PLAZA

City or town, state or province, country, and ZIP or foreign postal code
NEW YORK, NY 10004

D Employer identification number
23-7396384

E Telephone number
(212) 219-7307

G Gross receipts $ 139,962,579

F Name and address of principal officer:
ESTHER T BENJAMIN
ONE BATTERY PARK PLAZA
NEW YORK,NY 10004

H(a) Is this a group return for subordinates? ☐ Yes ☑ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list. See instructions.
H(c) Group exemption number

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

J Website: WWW.WES.ORG

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

L Year of formation: 1974

M State of legal domicile: NY

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
HELP PEOPLE THRIVE IN NEW PLACES AND HELP SOCIETY SEE THE VALUE OF PEOPLE'S EDUCATION & EXPERIENCE.

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	15
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15
5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	283
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	-7,571
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	0	0
	9	Program service revenue (Part VIII, line 2g)	97,997,750	97,212,546
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	659,199	2,631,978
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	48,074	93,892
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	98,705,023	99,938,416
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	10,935,240	7,540,795
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	46,585,537	52,201,121
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) 0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	28,091,805	31,750,781
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	85,612,582	91,492,697
	19	Revenue less expenses. Subtract line 18 from line 12	13,092,441	8,445,719

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	205,422,025	233,089,458
	21	Total liabilities (Part X, line 26)	31,021,391	31,975,886
	22	Net assets or fund balances. Subtract line 21 from line 20	174,400,634	201,113,572

Part II Signature Block

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

Sign Here

Signature of officer — Date: 2024-10-12

JOHN VERMAATEN CEO & EXEC. DIR.
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN P01306891
Firm's name EISNER ADVISORY GROUP LLC			Firm's EIN 87-1353108	
Firm's address 733 THIRD AVENUE NEW YORK, NY 100172703			Phone no. (212) 949-8700	

May the IRS discuss this return with the preparer shown above? See Instructions. ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

WES IS A NON-PROFIT SOCIAL ENTERPRISE THAT SUPPORTS THE EDUCATIONAL, ECONOMIC & SOCIAL INCLUSION OF IMMIGRANTS, REFUGEES & INTERNATIONAL STUDENTS IN THE US AND CANADA. WES HAS EXPANDED ITS MISSION TO PURSUE AND SCALE SOCIAL IMPACT.

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 $ 57,185,708 including grants of $) (Revenue $ 97,212,546)

CREDENTIAL EVALUATION PRODUCTION:AS A LEADER IN GLOBAL EDUCATION FOR NEARLY 50 YEARS, WES HAS SET THE STANDARD FOR INTERNATIONAL ACADEMIC CREDENTIAL EVALUATION, SUPPORTING MILLIONS OF PEOPLE AS THEY SEEK TO ACHIEVE THEIR ACADEMIC AND PROFESSIONAL GOALS. WES EVALUATES ACADEMIC CREDENTIALS FROM MORE THAN 48,000 INSTITUTIONS IN 203 COUNTRIES AND TERRITORIES AROUND THE WORLD. THE INDUSTRY-STANDARD REPORTS ARE RECOGNIZED BY OVER 4,500 ACADEMIC INSTITUTIONS, LICENSING BODIES, AND EMPLOYERS THROUGHOUT THE U.S. AND CANADA. IN 2023, WES EVALUATED CREDENTIAL EVALUATIONS FOR: IMMIGRATION (57%), EDUCATION (29%), EMPLOYMENT (6%), PROFESSIONAL LICENSING (7%), AND OTHER (1%). IN 2023, WES ISSUED 474,000, CREDENTIAL EVALUATIONS FOR APPLICANTS, BASED ON 478,000 CREDENTIALS.

4b (Code:) (Expenses $ 19,608,842 including grants of $ 7,540,795) (Revenue $)

SOCIAL IMPACT (FORMERLY GLOBAL TALENT BRIDGE AND GRANTMAKING): SEE SCHEDULE O.

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

4d Other program services (Describe in Schedule O.)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** 76,794,550

Part IV Checklist of Required Schedules

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

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

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L,* Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L,* Part I	25b		No
26	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? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete* Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b	Yes	
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

					Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	129			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	

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

Line	Question	Box	Amount	Line	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	283			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country: C A See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter:					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter:					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O.			13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?			15		No
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			16		No
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.			17		

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

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	**1a** 15			
b	Enter the number of voting members included in line 1a, above, who are independent	**1b** 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		**7a**		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*		**9**		No

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed CA,IL,NY

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.

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

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:
ESTHER T BENJAMIN ONE BATTERY PARK PLAZA NEW YORK,NY 10004 (212) 219-7307

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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) AUDREY HENDLEY CHAIR	2.00	X		X				0	0	0
(2) SIDNEY R HARGO VICE CHAIR	1.00	X		X				0	0	0
(3) HELEN HAYWARD SECRETARY	1.00	X		X				0	0	0
(4) SAMUEL ARTMANN TREASURER	1.00	X		X				0	0	0
(5) ANN BULLER TRUSTEE	1.00	X						0	0	0
(6) MISHA ESIPOV TRUSTEE	1.00	X						0	0	0
(7) CAROLINE GAYLE TRUSTEE	1.00	X						0	0	0
(8) FERIDUN HAMDULLAHPUR TRUSTEE	1.00	X						0	0	0
(9) JOANNA HARRIES TRUSTEE	1.00	X						0	0	0
(10) SHAKTI JAUHAR TRUSTEE	1.00	X						0	0	0
(11) DEWAYNE MATTHEWS TRUSTEE	1.00	X						0	0	0
(12) FRANCISCO MARMOLEJO TRUSTEE	1.00	X						0	0	0
(13) AARON WILLIAMS TRUSTEE	1.00	X						0	0	0
(14) JULIE REDDY TRUSTEE	1.00	X						0	0	0
(15) PAOLO VARIAS TRUSTEE	1.00	X						0	0	0
(16) ESTHER T BENJAMIN CEO & EXECUTIVE DIRECTOR	40.00			X				880,601	0	41,490
(17) CHERYL TOTO CHIEF OPERATIONS OFFICER	40.00			X				477,302	0	45,890

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) Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	(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
(18) JOHN VERMAATEN CHIEF FINANCIAL OFFICER	40.00			X				462,474	0	51,957
(19) MONICA K MUNN CHIEF SOCIAL IMPACT OFFICER	40.00			X				380,709	0	23,273
(20) SHAMIRA MADHANY MANAGING DIRECTOR, WES CANADA	40.00			X				352,003	0	28,642
(21) MEGAN BLACKBURN SIR. DIRECTOR, STRATEGY & PLANNING	40.00			X				299,496	0	40,212
(22) ABBIE J COWAN CHIEF PEOPLE OFFICER	40.00			X				291,590	0	39,068
(23) BIREN SHAH CHIEF TECHNOLOGY OFFICER	40.00				X			385,008	0	41,311
(24) HOLLY SANDERS CHIEF TRANSFORMATION OFFICER	40.00				X			380,808	0	32,371
(25) PAUL FELTMAN DEPUTY EXECUTIVE DIRECTOR, GTB	40.00				X			373,498	0	43,544
(26) NEGASH YUSUF QUALITY ANALYST III	40.00					X		387,485	0	23,407
(27) YUKI INOUE QUALITY ANALYST III	40.00					X		384,162	0	34,292
(28) ERNEST WURZBACH SR. DIRECTOR OF TECHNOLOGY	40.00					X		292,561	0	28,527
(29) DAVID J GALLAGHER QUALITY ANALYST III	40.00					X		421,926	0	51,957
(30) LOULADEY ASSEFA QUALITY ANALYST III	40.00					X		328,351	0	25,485

	(D)	(E)	(F)
1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	6,097,974	0	551,426

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 142

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. 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
AMERICAN CUSTOMER CARE INC 225 NORTH MAIN ST SUITE 500 BRISTOL, CT 06010	OUTSOURCE CALL CENTR	2,733,790
ALVAREZ & MARSAL HOLDINGS LLC 600 MADISON AVE NEW YORK, NY 10022	PROJECT MANAGEMENT	1,684,836
THINK SYSTEMS INC 7006 GOLDEN RING ROAD BALTIMORE, MD 21234	BUSINESS CONSULTANT	1,254,971
IDA APEX LLC 323 SUNNY ISLES BLVD SUITE 700 SUNNY ISLES BEACH, FL 33160	BUSINESS CONSULTANT	376,400

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 14

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 OtherAmt Similar Amounts					
1a Federated campaigns . .	1a				
b Membership dues . .	1b				
c Fundraising events . .	1c				
d Related organizations	1d				
e Government grants (contributions)	1e				
f All other contributions, gifts, grants, and similar amounts not included above	1f				
g Noncash contributions included in lines 1a - 1f:$	1g				
h **Total.** Add lines 1a-1f					
Program Service Revenue	Business Code				
2a CREDENTIAL EVALUATIONS	611710	97,212,546	97,212,546		
b					
c					
d					
e					
f All other program service revenue.					
g **Total.** Add lines 2a–2f.		97,212,546			
Other Revenue					
3 Investment income (including dividends, interest, and other similar amounts) . . .		2,056,141		-4,793	2,060,934
4 Income from investment of tax-exempt bond proceeds					
5 Royalties					

		(i) Real	(ii) Personal
6a Gross rents	6a		
b Less: rental expenses	6b		
c Rental income or (loss)	6c		

	(A)	(B)	(C)	(D)
d Net rental income or (loss)				

		(i) Securities	(ii) Other
7a Gross amount from sales of assets other than inventory	7a	40,600,000	
b Less: cost or other basis and sales expenses	7b	40,024,163	
c Gain or (loss)	7c	575,837	

		(A)	(B)	(C)	(D)
d Net gain or (loss)		575,837	578,615	-2,778	
8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c). See Part IV, line 18	8a				
b Less: direct expenses	8b				
c Net income or (loss) from fundraising events . .					
9a Gross income from gaming activities. See Part IV, line 19 . . .	9a				
b Less: direct expenses	9b				
c Net income or (loss) from gaming activities . .					
10a Gross sales of inventory, less returns and allowances . .	10a				
b Less: cost of goods sold	10b				
c Net income or (loss) from sales of inventory . .					
OtherRevenueMiscAmt	Business Code				
11a OTHER INCOME	900099	93,892	93,892		
b					
c					
d All other revenue					
e **Total.** Add lines 11a–11d		93,892			
12 **Total revenue.** See instructions		99,938,416	97,885,053	-7,571	2,060,934

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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,985,513	4,985,513		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	2,555,282	2,555,282		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	4,497,477	2,209,764	2,287,713	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	38,530,736	32,054,661	6,476,075	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,532,118	2,126,979	405,139	
9 Other employee benefits	3,606,432	3,029,403	577,029	
10 Payroll taxes	3,034,358	2,548,861	485,497	
11 Fees for services (non-employees):				
a Management				
b Legal	796,274	400,790	395,484	
c Accounting	174,856		174,856	
d Lobbying	28,547	28,547		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	43,744		43,744	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	9,187,744	8,328,772	858,972	
12 Advertising and promotion	1,573,292	1,120,753	452,539	
13 Office expenses	205,965	87,041	118,924	
14 Information technology	2,670,980	2,227,695	443,285	
15 Royalties . .				
16 Occupancy	1,729,062	1,452,412	276,650	
17 Travel	2,146,846	1,319,498	827,348	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization . .	390,237	173,390	216,847	
23 Insurance . . .	106,565		106,565	
24 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.)				
a RECRUITMENT&CALL CENTER	4,212,166	4,135,505	76,661	
b POSTAGE & PRINTING	3,083,448	3,069,658	13,790	
c REPAIRS & MAINTENANCE	2,446,350	2,344,840	101,510	
d CREDIT CARD & BANK FEES	2,358,916	2,331,064	27,852	
e All other expenses	595,789	264,122	331,667	
25 **Total functional expenses.** Add lines 1 through 24e	91,492,697	76,794,550	14,698,147	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ 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) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	2,770,683	1	3,061,833
	2	Savings and temporary cash investments	51,755,062	2	26,632,732
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	287,631	4	492,242
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	1,268,057	9	1,426,689
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 3,808,185			
	b	Less: accumulated depreciation — 10b: 3,627,059	456,081	10c	181,126
	11	Investments—publicly traded securities	8,586,413	11	37,948,671
	12	Investments—other securities. See Part IV, line 11	135,816,011	12	158,934,062
	13	Investments—program-related. See Part IV, line 11	750,000	13	1,754,793
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,732,087	15	2,657,310
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	205,422,025	16	233,089,458
Liabilities	17	Accounts payable and accrued expenses	11,289,377	17	12,102,639
	18	Grants payable	3,439,144	18	3,089,818
	19	Deferred revenue	12,807,935	19	15,063,808
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	3,484,935	25	1,719,621
	26	**Total liabilities.** Add lines 17 through 25	31,021,391	26	31,975,886
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☑ **and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	174,400,634	27	201,113,572
	28	Net assets with donor restrictions		28	
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ **and complete lines 29 through 33.**			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	174,400,634	32	201,113,572
	33	Total liabilities and net assets/fund balances	205,422,025	33	233,089,458

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	99,938,416
2	Total expenses (must equal Part IX, column (A), line 25)	2	91,492,697
3	Revenue less expenses. Subtract line 2 from line 1	3	8,445,719
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	174,400,634
5	Net unrealized gains (losses) on investments	5	18,019,992
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	247,227
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column	10	201,113,572

Part XII Financial Statements and Reporting

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

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

Additional Data

Return to Form

Software ID:

Software Version:

Form 990, Special Condition Description:

Special Condition Description

SCHEDULE A (Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047
2023
Open to Public Inspection

Name of the organization
WORLD EDUCATION SERVICES INC

Employer identification number
23-7396384

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**		
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . .						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge..						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . .						
6 **Public support.** Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
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, whether or not the business is regularly carried on . .						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.). .						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f)) **14**

15 Public support percentage for 2022 Schedule A, Part II, line 14 . . . . **15**

16a **33 1/3% support test—2023.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶☐

b **33 1/3% support test—2022.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . ▶☐

17a **10%-facts-and-circumstances test—2023.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . ▶☐

b **10%-facts-and-circumstances test—2022.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . ▶☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .	643,750	2,210,038	315,841			3,169,629
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	82,893,585	90,727,512	102,853,117	97,997,750	97,212,546	471,684,510
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . .						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	83,537,335	92,937,550	103,168,958	97,997,750	97,212,546	474,854,139
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
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.						0
c Add lines 7a and 7b. .						0
8 **Public support.** (Subtract line 7c from line 6.)						474,854,139

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6. . .	83,537,335	92,937,550	103,168,958	97,997,750	97,212,546	474,854,139
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . .	696,047	550,974	235,823	665,402	2,060,934	4,209,180
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.	696,047	550,974	235,823	665,402	2,060,934	4,209,180
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.					-7,571	-7,571
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . .	83,836	17,921	12,361	41,871	93,892	249,881
13 **Total support.** (Add lines 9, 10c, 11, and 12.). .	84,317,218	93,506,445	103,417,142	98,705,023	99,359,801	479,305,629

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2023 (line 8, column (f) divided by line 13, column (f))	15	99.070 %
16	Public support percentage from 2022 Schedule A, Part III, line 15	16	99.050 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2023** (line 10c, column (f) divided by line 13, column (f))	17	0.880 %
18	Investment income percentage from **2022** Schedule A, Part III, line 17	18	0.910 %

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

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

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, 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

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

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on 11a above?	11b		
c	A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to 11a, 11b, or 11c, provide detail in **Part VI**.*	11c		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*	2		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	1		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s).*	2		
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.*	3		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**:

a ☐ The organization satisfied the Activities Test. Complete **line 2** below.

b ☐ The organization is the parent of each of its supported organizations. Complete **line 3** below.

c ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions)

2 Activities Test. **Answer lines 2a and 2b below.**

			Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	2a		
b	Did the activities described on line 2a, above constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	2b		
3	Parent of Supported Organizations. **Answer lines 3a and 3b below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations?*If "Yes" or "No", provide details in **Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in **Part VI.** the role played by the organization in this regard.*	3b		

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

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

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

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

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

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

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

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

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

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 III, LINE 12, OTHER INCOME:	OTHER INCOME CONSISTS OF VARIOUS MISCELLANEOUS INCOME.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

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
WORLD EDUCATION SERVICES INC

Employer identification number
23-7396384

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-.
1				
2				
3				
4				
5				
6				

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	390	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	28,157	
c Total lobbying expenditures (add lines 1a and 1b)	28,547	
d Other exempt purpose expenditures	76,766,003	
e Total exempt purpose expenditures (add lines 1c and 1d)	76,794,550	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	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.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h Subtract line 1g from line 1a. If zero or less, enter -0-.	0	
i Subtract line 1f from line 1c. If zero or less, enter -0-.	0	

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

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2019	**(b)** 2020	**(c)** 2021	**(d)** 2022	**(e)** Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	3,622	51,779	32,274	28,547	116,222
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	2,200	8,997	3,246	390	14,833

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

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

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

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

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

Part IV **Supplemental Information**

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

Return Reference	Explanation
PART II-A, LINE 1C	WES STAFF ENGAGE IN A WIDE RANGE OF ADVOCACY ACTIVITIES TO FURTHER THEIR MISSION TO ADVANCE THE GLOBAL MOBILITY AND INTEGRATION OF PEOPLE INTO ACADEMIC AND PROFESSIONAL SETTINGS BY EVALUATING AND ADVOCATING FOR THE RECOGNITION OF INTERNATIONAL EDUCATIONAL QUALIFICATIONS AND ENABLING INDIVIDUALS TO FULLY UTILIZE THEIR EDUCATION. WES'S WORK INCLUDES EFFORTS TO EDUCATE MEMBERS OF CONGRESS, THEIR STAFF, AND THE PUBLIC ON IMMIGRANT INTEGRATION ISSUES AND IMMIGRANT ACCESS TO WORK. WES ADVOCATES FOR REMOVING UNNECESSARY BARRIERS TO EMPLOYMENT FOR IMMIGRANTS, ESPECIALLY THOSE WHO ARE INTERNATIONALLY TRAINED AND/OR EDUCATED. DURING 2023, WES'S STAFF AND CONSULTANTS ADVOCATED FOR FEDERAL LEGISLATION TO PROMOTE THE SOCIAL AND ECONOMIC INCLUSION OF IMMIGRANTS, REFUGEES, AND INTERNATIONAL STUDENTS IN THE U.S. SPECIFICALLY, WES LED EFFORTS TO INCREASE FUNDING FOR PROGRAMS TO ADDRESS BARRIERS OF ENTRY TO THE WORKFORCE FOR IMMIGRANTS AND REFUGEES WHO HOLD HEALTH CARE CREDENTIALS FROM OUTSIDE THE U.S., AND TO CONDUCT A COMPREHENSIVE STUDY AT THE FEDERAL LEVEL OF THE BARRIERS TO COMMENSURATE EMPLOYMENT FACING IMMIGRANTS AND REFUGEES WHO HOLD CREDENTIALS FROM OUTSIDE THE U.S. WES ALSO SUPPORTED EFFORTS TO ESTABLISH A NATIONAL OFFICE OF NEW AMERICANS. ON THE INTERNATIONAL STUDENT FRONT, WES EDUCATED POLICYMAKERS AND ADVOCATED FOR LEGISLATION THAT IMPLEMENTED INCLUSIVE POLICIES THAT WOULD NOT DETER U.S. COLLEGES AND UNIVERSITIES FROM RECRUITING INTERNATIONAL STUDENTS.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization
WORLD EDUCATION SERVICES INC

Employer identification number
23-7396384

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.

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

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

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

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).

☐ Preservation of land for public use (e.g., recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register . . .	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, and enforcement of the conservation easements it holds? . . . . ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ ____________

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

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

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 . . . . ▶ $ ____________

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 . . . . ▶ $ ____________

b Assets included in Form 990, Part X . . . . ▶ $ ____________

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

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds.

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

	(a) Current year	**(b)** Prior year	**(c)** Two years back	**(d)** Three years back	**(e)** Four years back
1a Beginning of year balance					
b Contributions . . .					
c Net investment earnings, gains, and losses					
d Grants or scholarships . . .					
e Other expenditures for facilities and programs . . .					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- **a** Board designated or quasi-endowment ▶ ....
- **b** Permanent endowment ▶ ....
- **c** Term endowment ▶ ....

The percentages on lines 2a, 2b, and 2c should equal 100%.

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

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	**(a)** Cost or other basis (investment)	**(b)** Cost or other basis (other)	**(c)** Accumulated depreciation	**(d)** Book value
1a Land				
b Buildings				
c Leasehold improvements		1,557,662	1,409,629	148,033
d Equipment		1,489,526	1,475,158	14,368
e Other		760,997	742,272	18,725

Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* . . ▶ 181,126

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) DOMESTIC LPS	154,000,981	F
(B) PREFERRED SHARES	119,570	F
(C) DOMESTIC LLCS	816,503	F
(D) INVESTMENT IN QUALIFICATION CHECK LIMITED	3,997,008	C
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* ▶	158,934,062	

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities.
Complete if the organization answered 'Yes' 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	
LEASES LIABILITY	1,719,621
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 25.)* ▶	1,719,621

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.

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue. Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12.)			5	

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

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

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

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 X, LINE 2:	WES IS SUBJECT TO THE PROVISIONS OF THE FINANCIAL ACCOUNTING STANDARDS BOARD'S ACCOUNTING STANDARDS CODIFICATION ("ASC") TOPIC 740, INCOME TAXES, AS IT RELATES TO ACCOUNTING AND REPORTING FOR UNCERTAINTY IN INCOME TAXES. BECAUSE OF WES'S GENERAL NOT-FOR-PROFIT STATUS, MANAGEMENT BELIEVES ASC TOPIC 740 HAS NOT HAD, AND IS NOT ANTICIPATED TO HAVE, A MATERIAL IMPACT ON WES'S CONSOLIDATED FINANCIAL STATEMENTS.

Additional Data

Return to Form

Software ID:

Software Version:

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization
WORLD EDUCATION SERVICES INC

Employer identification number
23-7396384

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

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

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

3 Activites 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)	NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	1	143	PROGRAM SERVICES	EVALUATIONS	61,991,005
(2)	NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES	1	143	GRANTMAKING		2,555,282
(3)	EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	INVESTMENT	INVESTMENT IN QUALIFICATION CHECK LIMITED	3,997,008
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Sub-total	2	286			68,543,295
b	Total from continuation sheets to Part I . . .	0	0			0
c	**Totals** (add lines 3a and 3b)	2	286			68,543,295

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	15,225	WIRE	0		FMV
(2)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	15,106	WIRE	0		FMV
(3)			NORTH AMERICA	GENERAL OPERATING SUPPORT	19,175	WIRE	0		FMV
(4)			NORTH AMERICA	GENERAL OPERATING SUPPORT	113,396	WIRE	0		FMV
(5)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	15,231	WIRE	0		FMV
(6)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	45,663	WIRE	0		FMV
(7)			NORTH AMERICA	GENERAL OPERATING SUPPORT	107,879	WIRE	0		FMV
(8)			NORTH AMERICA	GENERAL OPERATING SUPPORT	9,993	WIRE	0		FMV
(9)			NORTH AMERICA	GENERAL OPERATING SUPPORT	19,178	WIRE	0		FMV
(10)			NORTH AMERICA	CLIMATE JUSTICE INITIATIVE	382,995	WIRE	0		FMV
(11)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	15,077	WIRE	0		FMV
(12)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	15,225	WIRE	0		FMV
(13)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	14,937	WIRE	0		FMV
(14)			NORTH AMERICA	GENERAL OPERATING SUPPORT	77,024	WIRE	0		FMV
(15)			NORTH AMERICA	GENERAL OPERATING SUPPORT	76,295	WIRE	0		FMV
(16)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	15,251	WIRE	0		FMV
(17)			NORTH AMERICA	PARTICIPATORY PROJECT GRANT	225,225	WIRE	0		FMV
(18)			NORTH AMERICA	GENERAL OPERATING SUPPORT	149,065	WIRE	0		FMV
(19)			NORTH AMERICA	GENERAL OPERATING SUPPORT	19,144	WIRE	0		FMV
(20)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	15,105	WIRE	0		FMV
(21)			NORTH AMERICA	GENERAL OPERATING SUPPORT	75,792	WIRE	0		FMV
(22)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	182,569	WIRE	0		FMV
(23)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	38,433	WIRE	0		FMV
(24)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	229,358	WIRE	0		FMV
(25)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	14,939	WIRE	0		FMV
(26)			NORTH AMERICA	CAPACITY STRENGTHENING FUND	15,160	WIRE	0		FMV
(27)			NORTH AMERICA	GENERAL OPERATING SUPPORT	19,217	WIRE	0		FMV
(28)			NORTH AMERICA	CAPACITY	15,424	WIRE	0		FMV

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			STRENGTHENING FUND					
(29)		NORTH AMERICA	CAPACITY STRENGTHENING FUND	14,997	WIRE	0		FMV
(30)		NORTH AMERICA	CAPACITY STRENGTHENING FUND	167,349	WIRE	0		FMV
(31)		NORTH AMERICA	LOCAL GENERAL OPERATING SUPPORT	53,329	WIRE	0		FMV
(32)		NORTH AMERICA	CAPACITY STRENGTHENING FUND	15,106	WIRE	0		FMV
(33)		NORTH AMERICA	CAPACITY STRENGTHENING FUND	14,874	WIRE	0		FMV
(34)		NORTH AMERICA	GENERAL OPERATING SUPPORT	10,000	WIRE	0		FMV
(35)		NORTH AMERICA	TRANSCEND INITIATIVE	231,160	WIRE	0		FMV
(36)		NORTH AMERICA	AFRICAN RESETTLEMENT EMERGENCY FUND	76,283	WIRE	0		FMV
(37)		NORTH AMERICA	CAPACITY STRENGTHENING FUND	15,103	WIRE	0		FMV

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 . . . . ▶ 37

3 Enter total number of other organizations or entities . . . . ▶ 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if 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)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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:	WES REQUIRES GRANT RECIPIENTS TO AGREE TO STATED TERMS AND CONDITIONS AS OUTLINED IN ITS GRANT AGREEMENTS BEFORE DISBURSEMENT OF FUNDS. AGREEMENTS ALSO OUTLINE REQUIRED REPORTING, DELIVERABLES, AND MONITORING, WHICH EACH GRANT RECIPIENT MUST AGREE TO BEFORE DISBURSEMENT OF FUNDS. ALL GRANT RECIPIENTS ARE REQUIRED TO SUBMIT, AT A MINIMUM, REPORTING ON USE OF FUNDS, FINANCIAL EXPENDITURES, IMPACT CREATED, AND OTHER MILESTONES AT THE END OF THE GRANT TERM. ADDITIONALLY, PER THE GRANT AGREEMENT, ALL GRANT RECIPIENTS MUST PROVIDE REASONABLE ACCESS TO THE WES MARIAM ASSEFA FUND OR ITS DESIGNEES TO OBSERVE FUNDED PROGRAMS, ASSESS THE OUTCOMES AND IMPACT OF FUNDED EFFORTS, AND REVIEW FINANCIAL AND OTHER RECORDS.
PART I, LINE 3:	THE EXPENDITURES REPORTED REPRESENT THE ANNUAL INTERNATIONAL ACADEMIC DOCUMENT AUTHENTICATION AND EVALUATION AND TRAINING WORKSHOPS WHICH ARE EXPENDITURES OF WORLD EDUCATION SERVICES, CANADA (A BRANCH OF WORLD EDUCATION SERVICES, INC.) AS WELL AS GRANTS, TRANSLATED INTO U.S. DOLLARS. THE EXPENDITURES HAVE BEEN REPORTED ON THE ACCRUAL BASIS.

Additional Data

Software ID:

Software Version:

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization
WORLD EDUCATION SERVICES INC

Employer identification number
23-7396384

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.

(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 noncash assistance	(h) Purpose of grant or assistance
(1) ACTION RESEARCH COLLABORATIVE INC(DRIVER'S COOP) 2400 DAVIDSON AVENUE A23 BRONX,NY 10468	82-5252889	501(C)(3)	120,000	0			GENERAL OPERATING SUPPOT
(2) AFRICAN BRIDGE NETWORK INC 258 DERBY STREET UNIT 1 NEWTON,MA 02465	47-4507235	501(C)(3)	180,000	0			GENERAL OPERATING SUPPOT
(3) AFRIKANA 2477 BELMONT AVE APT 4D BRONX,NY 10458	93-2592894	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(4) ARTISTS ATHLETES ACTIVISTS 9 BLEECKER ST NEW YORK,NY 10012	83-0530322	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(5) ASIAN COMMUNITY & CULTURAL CENTER 144 N 44TH ST STE A LINCOLN,NE 68503	47-0807501	501(C)(3)	100,000	0			GRANT FOR PARTICIPATION IN SIIP PROGRAM
(6) ASIAN IMMIGRANT WOMEN ADVOCATES INC 310 8TH ST 301 OAKLAND,CA 94607	94-2977665	501(C)(3)	10,000	0			DONATION FOR FUND AMBASSDOR PROGRAM
(7) BETTER FUTURE FORWARD 7584 BLANFORD CT ALEXANDRIA,VA 22315	81-4772781	501(C)(3)	100,000	0			INVEST IN STUDENT SUPPORT GRANT
(8) BUILDING SKILLS PARTNERSHIP 828 W WASHINGTON BLVD LOS ANGELES,CA 90015	26-1254255	501(C)(3)	385,000	0			CAPACITY STRENGTHENING INITIATIVE
(9) CENTER FOR CIVIC POLICY (FISCAL SPONSOR FOR NEW MEXICO DREAM TEAM) 625 SILVER AVE SW 320 ALBUQUERQUE,NM 87102	01-0869701	501(C)(3)	200,000	0			PATHWAYS FOR IMMIGRANTS GRANTS
(10) CENTRAL VALLEY IMMIGRANT INTEGRATION COLLABORATIVE 5014 E UNIVERSITY AVE FRESNO,CA 93727	83-0682400	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(11) CHRISTIE REFUGEE WELCOME CENTRE PO BOX 179 WELCOME,NC 27374	88-3049343	501(C)(3)	10,000	0			DONATION FOR FUND AMBASSDOR PROGRAM
(12) CITY OF TULSA 175 E 2ND STREET SUITE 1570 TULSA,OK 74103	73-6005470	501(C)(3)	100,000	0			GRANT FOR PARTICIPATION IN SIIP PROGRAM
(13) COMINUDAD MAYA PIXAN IXIM 4913 S 25TH STREET SUITE 1 OMAHA,NE 68107	45-5539560	501(C)(3)	20,000	0			GENERAL OPERATING SUPPOT
(14) COMMUNITY SERVICES AGENCY (COMSA) 16500 SHAWAND AVE STE 108 GREEN BAY,WI 54303	82-0864722	501(C)(3)	120,000	0			CAPACITY STRENGTHENING INITIATIVE
(15) CULTURINGUA 8920 JOHN BARRETT DRIVE SAN ANTONIO,TX 78240	84-1940407	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(16) DOCUMENTED PO BOX 924 NEW YORK,NY 10272	83-3036502	501(C)(3)	100,000	0			GENERAL OPERATING SUPPOT
(17) FORDHAM UNIVERSITY (HER MIGRANT HUB) 441 E FORDHAM ROAD FMH 512 BRONX,NY 10458	13-1740451	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(18) FRESH START REFUGEE ASSISTANT CENTER 7714 GLENISTER DR SPRINGFIELD,VA 22152	82-1079316	501(C)(3)	10,000	0			DONATION FOR FUND AMBASSDOR PROGRAM
(19) FUNDERS TOGETHER TO END HOMELESSNESS INC 89 SOUTH STREET SUITE 803 BOSTON,MA 02111	27-3033048	501(C)(3)	100,000	0			WORKFORCE MATTERS GRANT
(20) FWDUS EDUCATION FUND INC(NATIONAL DIGNITY FOR FAMILIES FUND) 701 8TH ST NW STE 800 WASHINGTON,DC 20001	82-0962378	501(C)(3)	90,000	0			PROJECT SUPPORT GRANT
(21) GRANNIES RESPOND ABUELAS RESPONDEN INC PO BOX 1106 BEACON,NY 12508	83-3932245	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(22) HAITIAN BRIDGE ALLIANCE 4265 FAIRMOUNT AVE 280 SAN DIEGO,CA 92105	81-3558713	501(C)(3)	7,500	0			PROJECT SUPPORT GRANT
(23) HISPANIC SERVICES COUNCIL INC 7825 N DALE MABRY HWY STE 102 TAMPA,FL 33614	59-3198934	501(C)(3)	10,000	0			DONATION FOR FUND AMBASSDOR PROGRAM
(24) IMMIGRANT ADVOCATES RESPONSE COLLABORATIVE INC 150 STATE STREET 4TH FL ALBANY,NY 12207	85-0595592	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(25) JOBS FOR THE FUTURE INC 88 BROAD ST FL 8 BOSTON,MA 02110	06-1164568	501(C)(3)	50,000	0			PROJECT SUPPORT GRANT
(26) MANY LANGUAGES ONE VOICE 3166 MOUNT PLEASANT STREET NW WASHINGTON,DC 20010	27-4415158	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(27) MIDSTATE EDUCATION & SERVICE FOUNDATION 701 W STATE ST ITHACA,NY 14850	16-1586561	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(28) NATIONAL ASSOCIATION OF SYSTEM HEADS 1750 16TH ST NW APT31 WASHINGTON,DC 20009	20-8987993	501(C)(3)	100,000	0			GENERAL OPERATING SUPPOT
(29) NATIONAL FUND FOR WORKFORCE SOLUTIONS 1250 CONNECTICUT AVE NW STE 200 WASHINGTON,DC 20036	47-5172476	501(C)(3)	150,000	0			PROJECT SUPPORT GRANT
(30) NATIONAL GOVERNORS ASSOCIATION CENTER FOR BEST PRACTICES 444 N CAPITOL STREET NW WASHINGTON,DC 20001	23-7391796	501(C)(3)	25,000	0			SUPPORT FOR CHAIR'S INITIATIVE 23-24
(31) OAKLAND BLOOM 1721 BROADWAY SUITE 201 OAKLAND,CA 94612	81-1393321	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(32) ONE TO WORLD INC 2107 VANCE DR EDMOND,OK 73013	81-0715712	501(C)(3)	7,500	0			TO SUPPORT FULBRIGHT AWARDS
(33) OPEN COLLECTIVE FOUNDATION (SUENOS SIN FRONTERAS DE TEJAS) 340 S LEMON AVE 3717 WALNUT,CA 91789	81-4004928	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(34) PIONEER VALLEY WORKERS CENTER 20 HAMPTON AVE SUITE 200 NORTHAMPTON,MA 01060	82-4732798	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(35) RUSA LGBTQ CORP 25 CONNECTICUT AVE LONG BEACH,NY 11561	88-3859648	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(36) SOUTH ASIAN WOMEN'S AND IMMIGRANTS' SERVICES 1650 ARCH STREET SUITE 2130 PHILADELPHIA,PA 19103	26-3001212	501(C)(3)	10,000	0			DONATION FOR FUND AMBASSDOR PROGRAM
(37) SUMA 7450 NORTH CHARLESTON UNIT 108 PORTLAND,OR 97203	85-0565824	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(38) SYRIAN AMERICAN MEDICAL SOCIETY FOUNDATION 1012 14TH ST NW SUITE 910 WASHINGTON,DC 20005	16-1717058	501(C)(3)	10,000	0			HUMAITARIAN RAPID RESPONSE DONATION
(39) TECHEQUITY COLLABORATIVE 1120 PINE ST MARTINEZ,CA 94553	85-1685217	501(C)(3)	175,000	0			GENERAL OPERATING SUPPOT
(40) TECHSTARS PARTNERS 2021 LLC 4845 PEARL EAST CIRCLE SUITE 118 PMB 99696 BOULDER,CO 80301	26-4507415		403,333	0			CHARITABLE PURPOSE TO ADVANCE ECONOMIC MOBILITY
(41) THE ALLIANCE OF IDAHO 121 HONEYSUCKLE STREET BELLEVUE,ID 83333	85-2965458	501(C)(3)	10,000	0			DONATION FOR FUND AMBASSDOR PROGRAM
(42) THE NEW YORK IMMIGRATION COALITION INC 131 WEST 33RD ST SUITE 610 NEW YORK,NY 10001	13-3573409	501(C)(3)	145,000	0			PROJECT SUPPORT GRANT
(43) THE PIVOT FUND INC 504 FAIR STREET SW ATLANTA,GA 30313	87-1460953	501(C)(3)	100,000	0			GENERAL OPERATING SUPPOT
(44) THE ST BERNARD PROJECT INC 2645 TOULOUSE STREET NEW ORLEANS,LA 70119	26-2189665	501(C)(3)	500,000	0			PROJECT SUPPORT GRANT
(45) TURKISH PHILANTHROPY FUNDS 1460 BROADWAY NEW YORK,NY 10036	20-8392006	501(C)(3)	10,000	0			HUMAITARIAN RAPID RESPONSE DONATION
(46) UPWARDLY GLOBAL 582 MARKET ST SUITE 1207 SAN FRANCISCO,CA 94104	94-3346127	501(C)(3)	350,000	0			GENERAL OPERATING SUPPOT
(47) VENEZUELANS AND IMMIGRANTS AID INC 167 WEST 136TH ST APT 7 NEW YORK,NY 10030	37-1964314	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(48) VILCAP INC 1101 K STREET NW NO920 WASHINGTON,DC 20005	27-4059343	501(C)(3)	604,555	0			PROJECT SUPPORT GRANT
(49) WASHINGTON ACADEMY FOR INTERNATIONAL MEDICAL GRADUATES 3100 SOUTH 208TH ST STE J202 SEATAC,WA 98198	83-4541708	501(C)(3)	20,000	0			CAPACITY STRENGTHENING INITIATIVE
(50) WELCOMING AMERICA 315 W PONCE DE LEON AVENUE SUITE 905 DECATUR,GA 30030	27-1049805	501(C)(3)	25,000	0			SPONSORSHIP
(51) WELCOMING CENTER FOR NEW PENNSYLVANIANS 211 N 13TH STREET PHILADELPHIA,PA 19107	23-3001411	501(C)(3)	10,000	0			SOLAS SPONSORSHIP

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 50

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

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)					
(2)					
(3)					
(4)					
(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:	WES REQUIRES GRANT RECIPIENTS TO AGREE TO STATED TERMS AND CONDITIONS AS OUTLINED IN ITS GRANT AGREEMENTS BEFORE DISBURSEMENT OF FUNDS. AGREEMENTS ALSO OUTLINE REQUIRED REPORTING, DELIVERABLES, AND MONITORING, WHICH EACH GRANT RECIPIENT MUST AGREE TO BEFORE DISBURSEMENT OF FUNDS. ALL GRANT RECIPIENTS ARE REQUIRED TO SUBMIT, AT A MINIMUM, REPORTING ON USE OF FUNDS, FINANCIAL EXPENDITURES, IMPACT CREATED, AND OTHER MILESTONES AT THE END OF THE GRANT TERM. ADDITIONALLY, PER THE GRANT AGREEMENT, ALL GRANT RECIPIENTS MUST PROVIDE REASONABLE ACCESS TO THE WES MARIAM ASSEFA FUND OR ITS DESIGNEES TO OBSERVE FUNDED PROGRAMS, ASSESS THE OUTCOMES AND IMPACT OF FUNDED EFFORTS, AND REVIEW FINANCIAL AND OTHER RECORDS.

Additional Data

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Software ID:

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization
WORLD EDUCATION SERVICES INC

Employer identification number
23-7396384

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☑ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☐ Health or social club dues or initiation fees ☐ 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	**1b**	Yes	
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?	**2**	Yes	
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. ☑ Compensation committee ☑ Independent compensation consultant ☐ Form 990 of other organizations ☐ Written employment contract ☑ Compensation survey or study ☑ 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?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	**4c**		No
	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?	**5a**		No
b	Any related organization? . . . . If "Yes," on line 5a or 5b, describe in Part III.	**5b**		No
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?	**6a**		No
b	Any related organization? . . . . If "Yes," on line 6a or 6b, describe in Part III.	**6b**		No
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	**7**	Yes	
8	Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	**8**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	**9**		

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

For each individual whose compensation must be reported 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 ESTHER T BENJAMIN CEO & EXECUTIVE DIRECTOR	(i)	579,601	301,000	0	23,100	18,390	922,091	0
	(ii)	0	0	0	0	0	0	0
2 CHERYL TOTO CHIEF OPERATIONS OFFICER	(i)	342,302	135,000	0	16,940	28,950	523,192	0
	(ii)	0	0	0	0	0	0	0
3 JOHN VERMAATEN CHIEF FINANCIAL OFFICER	(i)	332,474	130,000	0	23,100	28,857	514,431	0
	(ii)	0	0	0	0	0	0	0
4 DAVID J GALLAGHER QUALITY ANALYST III	(i)	421,926	0	0	23,100	28,857	473,883	0
	(ii)	0	0	0	0	0	0	0
5 BIREN SHAH CHIEF TECHNOLOGY OFFICER	(i)	295,008	90,000	0	22,918	18,393	426,319	0
	(ii)	0	0	0	0	0	0	0
6 YUKI INOUE QUALITY ANALYST III	(i)	384,162	0	0	23,100	11,192	418,454	0
	(ii)	0	0	0	0	0	0	0
7 PAUL FELTMAN DEPUTY EXECUTIVE DIRECTOR, GTB	(i)	299,498	74,000	0	23,100	20,444	417,042	0
	(ii)	0	0	0	0	0	0	0
8 HOLLY SANDERS CHIEF TRANSFORMATION OFFICER	(i)	290,808	90,000	0	22,621	9,750	413,179	0
	(ii)	0	0	0	0	0	0	0
9 NEGASH YUSUF QUALITY ANALYST III	(i)	387,485	0	0	23,100	307	410,892	0
	(ii)	0	0	0	0	0	0	0
10 MONICA K MUNN CHIEF SOCIAL IMPACT OFFICER	(i)	280,709	100,000	0	22,073	1,200	403,982	0
	(ii)	0	0	0	0	0	0	0
11 SHAMIRA MADHANY MANAGING DIRECTOR, WES CANADA	(i)	266,776	85,227	0	21,529	7,113	380,645	0
	(ii)	0	0	0	0	0	0	0
12 LOULADEY ASSEFA QUALITY ANALYST III	(i)	328,351	0	0	23,033	2,452	353,836	0
	(ii)	0	0	0	0	0	0	0
13 MEGAN BLACKBURN SIR. DIRECTOR, STRATEGY & PLANNING	(i)	234,496	65,000	0	19,795	20,417	339,708	0
	(ii)	0	0	0	0	0	0	0
14 ABBIE J COWAN CHIEF PEOPLE OFFICER	(i)	281,590	10,000	0	19,513	19,555	330,658	0
	(ii)	0	0	0	0	0	0	0
15 ERNEST WURZBACH SR. DIRECTOR OF TECHNOLOGY	(i)	246,561	46,000	0	8,972	19,555	321,088	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 4B:	THE CEO & EXECUTIVE DIRECTOR, CHEIF OPERATIONS OFFICER, CHIEF TRANSFORMATION OFFICER, SENIOR DIRECTOR OF MARKETING & SALES, AND THE DEPUTY EXECUTIVE DIRECTOR - GTB PARTICIPATE IN THE 457(B) PLAN. THE PLAN WAS ESTABLISHED AND MAINTAINED FOR THE PURPOSE OF PROVIDING AN ADDITIONAL MEANS FOR DEFERRED COMPENSATION FOR SPECIFIED EMPLOYEES. THE PLAN CONSISTS OF ONLY EMPLOYEE CONTRIBUTIONS AND WES DOES NOT PROVIDE ANY CONTRIBUTIONS TO THE 457(B) PLAN.
PART I, LINE 7:	WES HAS A PERFORMANCE-BASED INCENTIVE PLAN WITH PAYMENT LEVELS SET AT YEAR-END BY THE BOARD.

Additional Data

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Schedule L (Form 990)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization
WORLD EDUCATION SERVICES INC

Employer identification number
23-7396384

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1 (a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. . . . . $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . $

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
Total					$							

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	**(b)** Relationship between interested person and the organization	**(c)** Amount of transaction	**(d)** Description of transaction	**(e)** Sharing of organization's revenues?	
				Yes	**No**
(1) JAY SANDERS	SEE SUPP. INFO.	66,492	SALARY		No
(2) JILL SANDERS	SEE SUPP. INFO.	86,626	SALARY		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

Return Reference	Explanation
PART IV, LINES 1 AND 2:	TWO RELATIVES OF HOLLY SANDERS, A KEY EMPLOYEE OF THE ORGANIZATION AND CHIEF TRANSFORMATION OFFICER, RECEIVED EMPLOYEE COMPENSATION AND BENEFITS FROM THE ORGANIZATION IN 2023.

Additional Data

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Software ID:

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 for the latest information.	OMB No. 1545-0047 **2023** **Open to Public Inspection**

Name of the organization	Employer identification number
WORLD EDUCATION SERVICES INC	23-7396384

Return Reference	Explanation
FORM 990, PART III, LINE 4B	SOCIAL IMPACT (FORMERLY GLOBAL TALENT BRIDGE AND GRANTMAKING): PROGRAMS: WES INCUBATES AND IMPLEMENTS PROGRAMS THAT TACKLE SOME OF THE MOST PERSISTENT CHALLENGES THAT PREVENT IMMIGRANTS AND REFUGEES FROM THRIVING IN THE U.S. AND CANADA. PROGRAMS ARE DESIGNED TO DRIVE CHANGE AT A SYSTEMS LEVEL WITH THE GOAL OF BEING SCALABLE OR REPLICABLE IN OTHER COMMUNITIES AND INDUSTRIES. EXAMPLES OF PROGRAMS INCLUDE THE SKILLED IMMIGRANT INTEGRATION PROGRAM, THE GLOBAL TALENT LEADERSHIP NETWORK, AND #IMMIGRANTSWORK. PHILANTHROPY: THE WES MARIAM ASSEFA FUND SEEKS TO CATALYZE ECONOMIC INCLUSION, OPPORTUNITIES, AND MOBILITY IN SUPPORT OF IMMIGRANTS AND REFUGEES IN THE U.S. AND CANADA. THROUGH GRANTMAKING AND IMPACT INVESTING, THE FUND SUPPORTS EFFORTS TO BRING ABOUT INCLUSIVE ECONOMIES AND TO ENSURE THAT ALL IMMIGRANTS AND REFUGEES CAN ACHIEVE THEIR GOALS AND THRIVE. POLICY AND ADVOCACY: THROUGH POLICY ADVOCACY, WES AIMS TO PROMOTE SKILLS-COMMENSURATE CAREER ADVANCEMENT AND REMOVE BARRIERS TO ECONOMIC MOBILITY. WES SEEKS TO DRIVE THE ADOPTION OF NEW POLICIES BY PROVIDING EVIDENCE, PROPOSING SOLUTIONS, ENGAGING POLICYMAKERS, NURTURING COMMUNITIES OF PARTNERS AND INFLUENCERS, SERVING AS A RESOURCE, AND RAISING PUBLIC AWARENESS. PARTNERSHIPS: WES SERVES AS A CONVENER OF MANY NETWORKS ACROSS THE U.S. AND CANADA. THE GOAL IS TO CREATE A HUB FOR SHARING, LEARNING, AND CO-CREATING A FUTURE IN WHICH IMMIGRANTS, REFUGEES, AND INTERNATIONAL STUDENTS CAN REALIZE THEIR ACADEMIC AND PROFESSIONAL GOALS. THE WES MARIAM ASSEFA FUND ALSO ENGAGES PARTNERS THROUGH CO-FUNDING WITH OTHER LIKE-MINDED FUNDERS TO COMPOUND RESOURCES AND IMPACT.
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS REVIEWED BY THE CHIEF FINANCIAL OFFICER AND THE CEO & EXECUTIVE DIRECTOR. COPIES ARE SENT OUT TO THE ENTIRE BOARD OF TRUSTEES BEFORE FILING.
FORM 990, PART VI, SECTION B, LINE 12C	EACH YEAR, THE BOARD OF TRUSTEES, AS WELL AS SENIOR MANAGEMENT STAFF, ARE REQUIRED TO COMPLETE AND SIGN A "CONFLICT OF INTEREST DISCLOSURE FORM." THIS IS DONE IN THE FIRST HALF OF THE YEAR. EACH SIGNER INDICATES THAT THEY HAVE READ WES'S CONFLICT OF INTEREST POLICY AND INDICATES WHETHER THEY DO OR DO NOT HAVE A CONFLICT OR A POTENTIAL CONFLICT. THESE FORMS ARE REVIEWED BY WES'S CHIEF FINANCIAL OFFICER FOR COMPLIANCE. TO DATE, THERE HAS BEEN COMPLIANCE WITH THE POLICY. SHOULD A CONFLICT BE FOUND, WES WILL ADDRESS SUCH CONFLICT ON A CASE BY CASE BASIS.
FORM 990, PART VI, SECTION B, LINE 15	EVERY TWO TO THREE YEARS, WES ENGAGES AN INDEPENDENT COMPENSATION CONSULTANT TO REVIEW WES'S SALARIES, SALARY STRUCTURE, AND SALARY POLICY AND MAKE RECOMMENDATIONS FOR CHANGES. COMPARABILITY DATA IS USED. THE COMPENSATION CONSULTANT REPORTS TO THE COMPENSATION COMMITTEE. THE FULL REPORT IS APPROVED BY THE BOARD OF TRUSTEES. THE COMPENSATION REPORT ADDRESSES THE COMPARABILITY OF THE CEO & EXECUTIVE DIRECTOR'S SALARY AS WELL AS THE SALARY OF ALL OFFICERS AND KEY EMPLOYEES. IN ADDITION, THE BOARD OF TRUSTEES ANNUALLY APPROVES AND PROVIDES SUBSTANTIATION OF THE DELIBERATION AND DECISION REGARDING THE CEO & EXECUTIVE DIRECTOR'S SALARY.
FORM 990, PART VI, SECTION C, LINE 19	WES PROVIDES THE FORM 990 UPON REQUEST.
FORM 990, PART IX, LINE 11G	GLOBAL TALENT BRIDGE: PROGRAM SERVICE EXPENSES 422,670. MANAGEMENT AND GENERAL EXPENSES 43,591. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 466,261. COMMUNICATION: PROGRAM SERVICE EXPENSES 306,023. MANAGEMENT AND GENERAL EXPENSES 31,561. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 337,584. BUSINESS TRANSFORMATION, IT, SYSTEMS AND RELATED CONSULTANTS: PROGRAM SERVICE EXPENSES 5,387,288. MANAGEMENT AND GENERAL EXPENSES 555,608. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 5,942,896. MARKETING: PROGRAM SERVICE EXPENSES 880,252. MANAGEMENT AND GENERAL EXPENSES 90,783. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 971,035. HUMAN RESOURCES: PROGRAM SERVICE EXPENSES 297,501. MANAGEMENT AND GENERAL EXPENSES 30,682. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 328,183. OTHER CONSULTANTS: PROGRAM SERVICE EXPENSES 1,035,038. MANAGEMENT AND GENERAL EXPENSES 106,747. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 1,141,785.
FORM 990, PART XI, LINE 9:	FOREIGN CURRENCY TRANSLATION GAIN 247,227.

Additional Data

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.
Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization
WORLD EDUCATION SERVICES INC

Employer identification number
23-7396384

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
(1) WES HOLDCO LLC ONE BATTERY PARK PLAZA NEW YORK, NY 10004 99-4195533	HOLDINGS OF STRATEGIC INVESTMENTS AND OTHER MISSION ALIGNED INVESTMENTS	DE	0	3,997,008	WORLD EDUCATION SERVICES INC

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(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

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

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

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

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

(a) Name, address, and EIN of entity	**(b)** Primary activity	**(c)** Legal domicile (state or foreign country)	**(d)** Predominant income (related, unrelated, excluded from tax under sections 512-514)	**(e)** Are all partners section 501(c)(3) organizations?		**(f)** Share of total income	**(g)** Share of end-of-year assets	**(h)** Disproprtionate 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**		**Yes**	**No**	

Part VII Supplemental Information

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

Return Reference	Explanation

Additional Data

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