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Form **990** 

Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047 2008

Open to Public Inspection

A Fo	r the	2008 ca	alendar yea	r, or tax year beginning 07	-01-2008 and ending 06-3	0-2009		T 5 5	
		pplicable	Please	C Name of organization Institute for the International	Education of			D Employer Ide	entification number
_	dress ch	_	use IRS label or	Students Doing Business As				36-225191 E Telephone nu	
	me cha	_	print or type. See						
	tıal retu		Specific Instruc-		oox if mail is not delivered to stree	et address) Ro	oom/suite	(312) 944- G Gross receip	
Te	mınatıd	on	tions.	33 North LaSalle Street					+,,
☐ Am	ended	return		City or town, state or country Chicago, IL 606022602	, and ZIP + 4	•		1	
Г Ар	plication	n pending		Cineago, IL 000022002					
				ne and address of Principa	l Officer	H(a		ıs a group return	
			,	Dwyer PHD th LaSalle St Ste 1500			affilia	ites?	ΓYes <b>Γ</b> Nο
				o,IL 606022602		— н(в	o) Are al	l affiliates include	ed?
<b>I</b> Ta	x-exen	npt status	<b>✓</b> 501(c)	) ( 3 ) ◀ (ınsert no )	(a)(1) or 527				See instructions )
J W	eb sit	e: 🕨 www	w iesabroad	dorg		H(c	:) Grou	ip Exemption Nu	mber 🟲
<b>К</b> Тур	e of or	ganızatıon	Corporat	ion trust association o	ther 🟲	L	Year of Fo	rmation 1953 M	State of legal domicile IL
Pa	rt I	Sumi	marv						
	1			e organization's mission o	r most significant activities				
9					of Students (IES) encourag	•	s to exp	lore foreign cour	ntries and fosters
Ē		student	s' personal	l and academic goals by pi	oviding study abroad progra	ams			
ē	2	Check t	this box	ıf the organization discont	inued its operations or dispo	osed of mor	e than 2	5% of its asset	s
Governance	3		,		body (Part VI, line 1a)				22
	4		_		e governing body (Part VI, I			_	21
Activities &	5	Total nu	umber of en	nployees (Part V, line 2a)				5 _	131
ΣX	6	Total nu	umber of vo	lunteers (estimate if nece	ssary)			6 _	51
ď		_			Part VIII, line 12, column			_	0
	Ь	Net unr	elated busi	ness taxable income from	Form 990-T, line 34			7b	0
	_				•	_	Pric	or Year	Current Year
ĕ	8				1)	· · ⊢		60,463	49,915
ren	9 10				])	· ·		72,479,278 6,958,199	80,491,655
Reven	11			, , , , , , , , , , , , , , , , , , , ,	5, 6d, 8c, 9c, 10c, and 11e			105,718	67,407
	12				st equal Part VIII, column (/	_			· · · · · · · · · · · · · · · · · · ·
		12)						79,603,658	74,035,346
	13			ar amounts paid (Part IX, o				1,990,019	2,140,529
	14			or for members (Part IX, co	numn (A), line 4) nefits (Part IX, column (A), l	lines E		0	
\$	15	10)	es, other co	ompensation, employee be	nents (Part 1X, Column (A), I	lines 5-		26,066,631	26,007,402
<b>⊕</b>	16a	Profes	sional fund	raısıng fees (Part IX, colu	mn (A), lıne 11e)			0	0
Expenses	ь	(Total f	undraising ex	penses, Part IX, column (D), line	25 22,315				
_	17	Other	expenses (	(Part IX, column (A), lines	11a-11d, 11f-24f)			52,062,347	51,088,550
	18				ual Part IX, line 25, column	(A))		80,118,997	79,236,481
_ 97	19	Reven	ue less exp	penses Subtract line 18 fr	om line 12			-515,339	-5,201,135
<b>8</b>						_		ing of Year	End of Year
esse Base	20		-	t X, line 16)		<u> </u>		111,677,566	89,330,487
Net Assets or Fund Balances	21			Part X, line 26)	N. 6	<u> </u>		67,597,532	57,751,754
	22			d balances Subtract line 2	21 from line 20			44,080,034	31,578,733
Ра	rt II		ature Blo		nined this return, including accomp	nanying schod	ules and o	statements, and to t	the hest of my knowledge
					on of preparer (other than officer)				
Plea		****						-01-19	
Sigr Her		Sign	ature of office	er			Date		
			am Martens C e or print nam						
		<b>       </b>	<u> </u>		Date	Check	ıf	Preparer's PTIN	(See Gen Inst )
Paid		Preparer signature			Date	self-		FIEDAICI S FIIN	(See Gen Tist)
	arer's	Firm's n	ame (or yours	s 👠 Crowe Horwath LLP		empoly	reu F		
Use		ıf self-er	mployed),	<b>)</b>		EIN 🕨			
	•	auaress,	and ZIP + 4	70 WEST MADISON STREET	SUITE 700			Phone no 🕨 (3	312) 899-7000
May	the ID	S discus	e this ratii	rn with the preparer shown	above? (See instructions)				Yes No

### Part III Statement of Program Service Accomplishments (See the instructions.)

<b>1</b> See A	Briefly describe the organization's mission dditional Data Table				
2	Did the organization undertake any sign the prior Form 990 or 990-EZ? If "Yes," describe these new services o		es during the year wh		ΓYes <b>Γ</b> No
3	Did the organization cease conducting services?	or make significant cha	anges in how it conduc	cts any program	ΓYes Γ⁄No
4	If "Yes," describe these changes on Sc Describe the exempt purpose achieven Section 501(c)(3) and (4) organization others, the total expenses, and revenue	nents for each of the or s and 4947(a)(1) trust	s are required to repo		
4a	(Code ) (Expenses \$ Standard & Direct enrollment programs The ir languages, fine arts, social and natural science enhancing their academic and social growth wi credit by studying at one of our 31 locations in Japan, Morocco, The Netherlands, New Zealan	nstitute for the International is, business, mathematics, a hile expanding their intercul i the countries of Argentina,	nd pre-professional studie ural competency These s	es Over 4,100 students benefite tudents earned either a semeste	d from our standard programs by er or two semesters worth of
4Ь	(Code ) (Expenses \$ Summer Programs The institute for the Internsocial and natural sciences, business, mathemacademic and social growth while expanding to a full semester and a viable alternative for by studying at one of our 17 locations in the contractions.	national Education of Studen atics, and pre-professional s heir intercultural competenc students with rigorous acade	tudies Over 760 students / many summer programs emic schedules Students in	benefited from our summer pro s offer internships and offer stud n our summer programs earn cr	ograms by enhancing their dents a more economical option edits toward college course work
<b>4c</b>	(Code ) (Expenses \$ CUSTOMIZED As the name implies, IES Abroa programs' curricula span the humanities, langu professional studies at the undergraduate and growth while expanding their intercultural com locations in the countries of Argentina, Austria, Spain	d offers customized progran lages, education, fine arts, s graduate levels Over 700 s petency Students earned co	social and natural sciences, tudents benefited from ou ollege credits toward their	, business, mathematics, techno ir customized programs by enha course work by studying at one	ology, engineering, and pre- ncing their academic and social or a combination of our 21
4d	Other program services (Describe in (Expenses \$	Schedule O ) Including grants of \$		) (Revenue \$	)
4e	Total program service expenses \$		Must equal Part IX, Lın	•	,

Form **990** (2008)

Part IV	Checklist o	f 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? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
5	Section $501(c)(4)$ , $501(c)(5)$ , and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Νο
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		N o
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		N o
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		N o
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? 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 questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		Νο
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

### Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νo
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? <i>If</i> "Yes," complete Schedule M	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	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		Νο
37	Did the organization conduct more than 5 percent 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

Pa	rt V	Statements Regarding Other IRS Filings and Tax Complianc	e				
						Yes	No
1a	Enter	r the number reported in Box 3 of Form 1096, Annual Summary and Transmittal		[			
		S. Information Returns. Enter -0- if not applicable					
			1a	48			
b	Enter	r the number of Forms W-2G included in line 1a Enter -0- if not applicable	14	0			
	Б		1b	0			
С		he organization comply with backup withholding rules for reportable payments to ng (gambling) winnings to prize winners?	oveno	dors and reportable	1c	Yes	
2a	_	r the number of employees reported on Form W-3, Transmittal of Wage and Tax					
		ments filed for the calendar year ending with or within the year covered by this	2-	4.24			
	returi		2a	131			
D		least one is reported in 2a, did the organization file all required federal employm :If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this			2b	Yes	
3a		he organization have unrelated business gross income of \$1,000 or more during		ľ			
		n <sup>,</sup>			3a		Νο
b		es," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Sch</i> e		ľ	3b		
4a		ny time during the calendar year, did the organization have an interest in, or a si a financial account in a foreign country (such as a bank account, securities acc					
		unt)?		, or other illumeral	4a	Yes	
b	If "Ye	es," enter the name of the foreign country					
	See t	he instructions for exceptions and filing requirements for Form TD F 90-22.1, Re	port o	f Foreign Bank and			
		cial Accounts.					
5a		the organization a party to a prohibited tax shelter transaction at any time durir			5a		N o
b	Dıd a	ny taxable party notify the organization that it was or is a party to a prohibited i	tax sh	nelter transaction?	5b		N o
c		es," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exemp</i>	t Entit	y Regarding Prohibited	_		
<b>c</b> -		helter Transaction?	•		5c		N -
6a		he organization solicit any contributions that were not tax deductible?			6a		No
D		es," did the organization include with every solicitation an express statement th not tax deductible?	iai SU(		6b		
7	Organ	nizations that may receive deductible contributions under section 170(c).					
а		he organization provide goods or services in exchange for any quid pro quo cont ?	trıbutı	on of \$75 or	7a		No
h		? es," dıd the organızatıon notıfy the donor of the value of the goods or services pr	rovida	d?	7b		
		he organization sell, exchange, or otherwise dispose of tangible personal proper					
Ĭ		orm 8282?		-	7c		Νο
d	If "Ye	es," indicate the number of Forms 8282 filed during the year	7d				
_	וז ריים	he organization during the year receive any funds. Averably as and describe	nrc=-	uume on a nereeral			
е		he organization, during the year, receive any funds, directly or indirectly, to pay fit contract?			7e		Νo
f		he organization, during the year, pay premiums, directly or indirectly, on a perso			7f		Νο
g	Fora	ll contributions of qualified intellectual property, did the organization file Form 8	8899	as required?	7g		
h		ontributions of cars, boats, airplanes, and other vehicles, did the organization fi	ıle a F	orm 1098-C as			
_	•	red?			7h		
8		on 501(c)(3) and other sponsoring organizations maintaining donor advised funds a orting organizations. Did the supporting organization, or a fund maintained by a s					
	exces	ss business holdings at any time during the		3 3	8		
•		501(5)(2) and at the common constraints are a second constraints.				<u> </u>	<u> </u>
9		on 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			<b>C</b> -		
a		he organization make any taxable distributions under section 4966?		ľ	9a		
10		he organization make a distribution to a donor, donor advisor, or related person'	· ·		9b		
10		on 501(c)(7) organizations. Enter	10a				
		s receipts, included on Form 990, Part VIII, line 12	10a 10b				
D	facilit		TOD	<u> </u>			
11	Secti	on 501(c)(12) organizations Enter					
		s income from members or shareholders					
			11a				
b		s income from other sources (Do not net amounts due or paid to other sources	11b				
	again	nst amounts due or received from them)..........[	TID				
12a	Sectio	on $4947(a)(1)$ non-exempt charitable trusts. Is the organization filing Form 990 in	lieu d	of Form 1041?	12a		
b		es," enter the amount of tax-exempt interest received or accrued during the	12b				
	year		_	i l			

# Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management
--

								Yes	No
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	, desc	ribe th	e circ	umsta	ances,			
1a	Enter the number of voting members of the governing body	1a				22			
Ь	Enter the number of voting members that are independent	1b				21			
2	Did any officer, director, trustee, or key employee have a family relationship or a bustother officer, director, trustee, or key employee?				•	•	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co						. 3		No
4	Did the organization make any significant changes to its organizational documents stilled? $\ \ .$	ince	the pri	or For	m 99	0 was	4		No
5	Did the organization become aware during the year of a material diversion of the org		5		Νo				
6	Does the organization have members or stockholders?						6		No
7a	Does the organization have members, stockholders, or other persons who may elect governing body?					of the	7a		No
Ь	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	rothe	r pers	ons?		7b		Νo
8	Did the organization contemporaneously document the meetings held or written activear by the following	ons u	nderta	ken d	urıng	the			
а	the governing body?						8a	Yes	
ь	each committee with authority to act on behalf of the governing body?						8b	Yes	
9a	Does the organization have local chapters, branches, or affiliates?					•	9a	Yes	
b	If "Yes," does the organization have written policies and procedures governing the a affiliates, and branches to ensure their operations are consistent with those of the o				•		9b	Yes	
10	Was a copy of the Form 990 provided to the organization's governing body before it must describe in Schedule O the process, if any, the organization uses to review the						10	Yes	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section of the organization's mailing address? If "Yes," provide the names and addresses in Sc	,					11		No

### Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

### Section C. Disclosure

- List the States with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, FL, GA, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. I another's website.
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

WILLIAM J MARTENS 33 N LASALLE STREET CHICAGO,IL 606022602 (312) 944-1750

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- \* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- \* List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- \* List all of the organization's **former** officers, key employees, 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

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

The check this box in the organization and i		Posit	(C	) chec	:k al				(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)		Estimated amount of other compensation from the organization and related organizations
							_			

# Software ID: Software Version:

**EIN:** 36-2251912

Name: Institute for the International Education of

Students

#### Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa												
		Posi t	(C tion ( hat a	ched		I			<b>(E)</b>	(F)		
( <b>A</b> ) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations		
Dr Mary M Dwyer , President/CEO	40 0	Х		Х				396,422	0	41,396		
Dr Kathryn M Moore , Board Chair	1 0	Х		Х				753	0	0		
Dr Danielle Allen , Director	1 0	X						0	0	0		
Dr Loren J Anderson , Director	1 0	Х						0	0	0		
John Coblentz , Dırector	1 0	X						0	0	0		
James E Crawford III , Dırector	1 0	X						0	0	0		
Kenneth W Cunningham , Director	1 0	Х						0	0	0		
Debora de Hoyos , Director	1 0	X						0	0	0		
Dr Mark H Erickson , Director	1 0	Х						0	0	0		
Dr Pamela Brooks Gann , Dırector	1 0	Х						0	0	0		
John J Gearen , Director	1 0	Х						0	0	0		
Dr Homer J Holland , Dırector	1 0	Х						591	0	0		
Regge Life , Director	1 0	X						0	0	0		
Robert McNeill , Director	1 0	X						696	0	0		
Dr David H Porter , Director	1 0	Х						0	0	0		
Dr Marla Salmon , Dırector	1 0	X						0	0	0		
Alan Schwartz , Dırector	1 0	Х						0	0	0		
Ian H Turvill , Director	1 0	Х						761	0	0		
Monica Vachher , Director/Vice Chair	1 0	Х		Х				0	0	0		
Ezio Vergani , Director/Vice Chair	1 0	Х		Х				0	0	0		
Dr Ana Marıa Wiseman , Director	1 0	Х						0	0	0		
Dr Hugo Sonneschein , Director-Part Year	1 0	Х						65	0	0		
William Hoye , Chief Operating Officer	40 0			Х				284,059	0	35,381		
William Martens , Chief Financial Officer	40 0			Х				198,545	0	36,364		
Dr Michael Steinberg , EVP Program Management	40 0			х				206,732	0	31,360		
Gayly Opem , EVP Marketing	40 0			Х				183,814	0	24,411		
Ian Ellis , Chief Information Officer	40 0			Х				193,942	0	28,309		
Rıchard Barteckı , VP Marketıng-Part Year	40 0			х				0	0	0		
Roger Sheffield , MP Chief Dev Officer- Part Year	40 0			х				0	0	0		
Carol Jambor-Smith , Assoc VP Institutional Support	40 0					х		111,154	0	17,231		

#### Form 990, Part VII - Section Aaa

	(B) Average hours per week	(C) Position (check all that apply)								(F)
<b>(A)</b> Name and Title		Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
John Lucas , Assoc VP Academic Programming	40 0					×		115,347	0	17,490
Joseph Sevigny , Assoc VP Enrollment	40 0					Х		108,815	0	16,414
Merel D Frank , Controller	40 0					Х		111,822	0	28,486
Michael Green , Assoc VP Recruiting	40 0					Х		114,630	0	28,985

### Part VIII Continued

			(C) Position (check all that apply)						(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Ke) employee	Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
			$\vdash$	Н	$\dashv$					
					-					
					_					
	-				_					
					+					
			$\vdash$	$\vdash\vdash$	$\dashv$		$\vdash$			
			$\vdash$	$\vdash$	$\dashv$					
1b Total							•	2,028,148	3	305,827
2 Total number of individuals (including	those in 1	a) who	recei	ved	more	thar	า \$1	00,000 ın reportabl	e	

compensation from the organization▶11

			Yes	No
3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual			
	on time 1a* 11 Tes, complete schedule 3 for such mulvidual	3		N o
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		Νo

### **Section B. Independent Contractors**

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
TSI 652 North 1st Bank Drive PALANTINE, IL 60067	Computer Consultants	767,082
Open Foundations 1454 N Orleans CHICAGO, IL 60610	Programming	460,604
Delta Vortex Technologies Inc 747 E Boughton PMB 325 BOLINGBROOK, IL 60440	Programming	241,213
Business Intelligent Solutions 1512 Sweetbriar Dr JAMISON, PA 18929	Business Consulting	131,184
2 Total number of independent contractors (including those in 1) who	· · · · · · · · · · · · · · · · · · ·	4

Part VIII

Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function Revenue	<b>(C)</b> Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC
	1a	Federated can	npaigns 1a			Revenue		512, 513, or 514
\$ \$	ь		ues					
죮		Membership a	1b					
ΩĔ	С	Fundraising ev	vents					
£ ±	d	Related organ	1c izations					
% <u>≡</u>	e		nts (contributions) 1e					
ntion: er sir	f	All other contribut	tions, gifts, grants, and not included above	49,915				
Contributions, gifts, grants and other similar amounts	g		<b>1f</b> ributions included in					
<u>⊒</u> 5			0					
	h	Total (Add lin	es 1a-1f)		49,915			
				Business Code				
III e	2a	Tuition and Fees			66,586,103	65,713,643	0	872,460
e ve	ь	ROOM AND BOAR	D		13,849,093	13,849,093	0	0
or GE	c	MEMBER SCHOOL	√AFFILIATE FEE		25,100	25,100	0	0
Š	d	TRANSCRIPT FEE			19,963	19,963	0	0
Š	e	INSTALLMENT FE	 E		11,061	11,061	0	0
ran	f	All other prog	ram service revenue		335	335	_	_
Program Service Revenue	g	Total. Add line	es 2a-2f					
		<b>▶</b> \$ 80,491,65						
	3		come (including divi amounts)		561,833	0	0	561,833
				▶	0			301,033
	4		estment of tax-exempt b	▶				
	5	Royalties .			0			
	_		(ı) Real	(II) Personal				
	6a	Gross Rents	67,407					
	ь	Less rental expenses						
	С	Rental income or (loss)	67,407					
	d	Net rental inc	ome or (loss)		67,407	0	0	67,407
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other	8,943,168					
	ь	than inventory Less cost or other basis and	16,078,632					
		sales expenses						
	c	Gain or (loss)	-7,135,464		7 125 464	0	0	7.125.464
	d	Net gain or (lo	· · · · ·	. ▶	-7,135,464	0	0	-7,135,464
άs	8a	events (not ın \$						
Other Revenue		1c) See Part <i>Attach Schedul</i>	e G ıf total exceeds					
<u>μ</u>	ь	\$15,000						
othe	c		xpensesb (loss) from fundrais		0			
	9a	Complete Sche	e part IV , line 19 dule G if total					
		exceeds \$15,00	0 <i>0</i> <b>a</b>					
	ь	Less directe	xpensesb					
	c		(loss) from gaming		0			
	10a	Gross sales o returns and al	f inventory, less lowances . a					
	ь	Less cost of	goods sold <b>b</b>					
	С		(loss) from sales of		0			
		Miscellaneou	s Revenue	Business Code				
	11a							
	ь							
	c							
	d	All other rever	nue					
	e		es 11a-11d	\$				
				0	74.025.246	70 (10 105		E (22 744
	12	8c,	a. Add lines 1h, 2g, 3		74,035,346	79,619,195	0	-5,633,764

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a Tuition and Fees		66,586,103	65,713,643	0	872,460
<b>b</b> ROOM AND BOARD		13,849,093	13,849,093	0	0
c MEMBER SCHOOL/AFFILIATE FEE		25,100	25,100	0	0
d TRANSCRIPT FEE		19,963	19,963	0	0
e INSTALLMENT FEE		11,061	11,061	0	0

#### Form 990, Part III, Line 1 - Briefly describe the organization's mission:

The Institute for the International Education of Students (IES) blends the best elements of foreign higher education with American University requirements and encourages students to explore the unique elements of foreign countries. IES is comprised of a consortium of more than 170 colleges and universities, and enrolls more than 5,600 students in unique programs in nearly 18 countries throughout Europe, Asia, Africa, Australia, and South America. IES fosters students' personal and academic goals by providing quality study abroad programs worldwide.

### Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgalised by the section 501(c)(3) and 501(c)(4) orgalised by the section 501(c)(4) organizations must complete column (A) but are not reference to the section of the se				).
Do 1	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U S See Part IV, line 22	2,140,529	2,140,529		
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,627,357	527,343	1,084,181	15,833
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	19,663,840	18,256,038		0
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)	536,524	465,733	70,791	0
9	Other employee benefits	1,030,189	842,526	187,279	384
10	Payroll taxes	3,149,492	2,998,571	149,496	1,425
11	Fees for services (non-employees)				
а	Management	0			_
b	Legal	155,696	49,740	105,956	0
c	Accounting	262,614	182,918	79,696	0
d	Lobbying	0			_
e	Professional fundraising See Part IV, line 17	0			_
f	Investment management fees	71,800	0	71,800	0
g	Other	1,748,464	1,145,708	602,756	0
12	Advertising and promotion	583,717	525,645	58,072	0
13	Office expenses	1,608,192	1,097,170	510,652	370
14	Information technology	1,343,939	649,755	694,184	0
15	Royalties	0			
16	Occupancy	10,825,609	10,083,977	741,632	0
17	Travel	4,161,851	3,605,171	552,377	4,303
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0			
19	Conferences, conventions and meetings	129,852	83,251	46,601	0
20	Interest	6,129	6,129	0	0
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,685,211	1,844,707	1,840,504	0
23	Insurance	43,967	43,931	36	0
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	Student Housing & Meals	16,426,819	16,426,819	0	0
ь	STUDENT INSTRUCTION/TUITION	6,680,460	6,680,369	91	0
c	Student Services	1,860,365	1,860,365	0	0
d	Field Trips	531,325	531,325	0	0
e	Furniture & Equipment	282,349	281,128	1,221	0
f	All other expenses	680,191	514,194	165,997	0
25	Total functional expenses. Add lines 1 through 24f	79,236,481	70,843,042	8,371,124	22,315
26	Joint Costs. Check I if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				000 (2.00g)

Part X	Balance	Sheet

					(A) Beginning of year		(E End of	
	1	Cash—non-interest-bearing			2,716,329			4,171,353
	2	Savings and temporary cash investments			19,270,728	2	1	6,073,928
	3	Pledges and grants receivable, net				3		
	4	Accounts receivable, net			2,295,175	4		2,695,062
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L				5		
	6	Receivables from other disqualified persons (as defined under spersons described in section 4958(c)(3)(B) Complete Part II of	ection	4958(f)(1)) and		6		
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use			0	8		5,699
92	9	Prepaid expenses and deferred charges			756,899	9		434,444
Assets	10a	Land, buildings, and equipment cost basis	10a	64,583,071				
4	١.	Land and the desired desired to the Control of the	IUa	04,303,071				
	b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b	19,031,560	58,480,714	10c	4	5,551,511
	11	Investments—publicly traded securities			19,955,769	11	1	3,669,085
	12	Investments—other securities See Part IV, line 11 $Complete Passive Schedule D$	rt VII	of	3,983,100	12		5,284,635
	13	Investments—program-related See Part IV, line 11 $\it Complete P \it of Schedule D$ .	art VIl	I		13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D			4,218,852	15		1,444,770
	16	Total assets. Add lines 1 through 15 (must equal line 34)			111,677,566	16	8	9,330,487
	17	Accounts payable and accrued expenses .			6,493,463	17		6,186,456
	18	Grants payable				18		
	19	Deferred revenue			4,479,760	19		5,030,276
	20	Tax-exempt bond liabilities				20		
eS	21	Escrow account liability Complete Part IV of Schedule D				21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
- 2		persons Complete Part II of Schedule L				22		
	23	Secured mortgages and notes payable to unrelated third parties			25,894,701	23	2	1,390,200
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D			30,729,608	25	2	5,144,822
	26	Total liabilities. Add lines 17 through 25			67,597,532	26	5	7,751,754
		Organizations that follow SFAS 117, check here ▶	lete li	nes 27				
anc	27	Unrestricted net assets			43,800,001	27	3	1,342,767
Balance	28	Temporarily restricted net assets			51,958	28		0
<u> </u>	29	Permanently restricted net assets			228,075	29		235,966
Fund		Organizations that do not follow SFAS 117, check here F an	d com	plete				
<u> </u>		lines 30 through 34.						
	30	Capital stock or trust principal, or current funds	•			30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31		
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32		
Ŋĕţ	33	Total net assets or fund balances			44,080,034	33	3	1,578,733
_	34	Total liabilities and net assets/fund balances			111,677,566	34	8	9,330,487
Pa	rt XI	Financial Statements and Reporting						
							Yes	No

ParitXI	Financial	Statements	and Reporting

				i
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
ь	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 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	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
ь	If "Yes," did the organization undergo the required audit or audits?	3b		

**Employer identification number** 

# OMB No 1545-0047

## **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)
nonexempt charitable trusts.
Attach to Form 990 or Form 990-EZ. See separate instructions.

2008

Open to Public Inspection

ınstitut Studen		ne internationa	i Education of					36	-225191	2		
Par	t I	Reason	for Public C	harity Status (to be co	mpleted	by all or	ganizatio					
				ation because it is (Please						,		
1	$\Gamma$	A church, o	onvention of ch	nurches, or association of ch	nurches de	scribed in	Section :	170(b)(1)	(A)(i).			
2	<u>~</u>	A school de	escribed in <b>Sect</b>	tion 170(b)(1)(A)(ii). (Attac	ch Schedu	ıle E )						
3	$\Gamma$	A hospital	or a cooperative	e hospital service organizati	ion descril	bed in <b>Sec</b>	t ion 170(l	b)(1)(A)(i	i <b>ii).</b> (Attac	:h Schedu	le H )	
4	Γ	A medical	research organı	zatıon operated ın conjunctı	on with a l	hospital de	escribed i	n <b>Section</b>	170(b)(1)	(A)(iii). E	nter the	
		hospital's i	name, city, and	state								
5	$\Gamma$	An organiza	atıon operated f	or the benefit of a college or	universit	y owned o	r operated	l by a gove	ernmental	unıt desc	rıbed ın	
		Section 17	D(b)(1)(A)(iv).	(Complete Part II )								
6	$\sqcap$	A federal, s	tate, or local go	overnment or governmental	unıt descr	ıbed ın <b>Se</b>	ction 170	(b)(1)(A)	(v).			
7	Γ	An organiza	ation that norma	ally receives a substantial p	art of its s	support fro	m a gove	rnmental u	ınıt or fror	n the gen	eral public	
		described i	n <b>Section 170(</b> b	o)(1)(A)(vi) (Complete Par	tII)							
8	Γ	A commun	ty trust describ	ed in <b>Section 170(b)(1)(A)</b>	(vi) (Com	plete Par	tII)					
9	Γ	An organiza	ation that norma	ally receives (1) more than	331/3% 0	fits supp	ort from c	ontributior	ns, membe	ership fee:	s, and gross	
		receipts fro	m activities rel	ated to its exempt functions	s—subject	to certair	n exceptio	ns, and (2	) no more	than 331	/3% of	
		ıts support	from gross inve	estment income and unrelate	ed busines	s taxable	ıncome (l	ess section	on 511 ta:	x) from bu	sinesses	
	_	acquired by	the organization	on after June 30, 1975 See	Section 5	09(a)(2).	(Complet	e Part III	)			
10	<u> </u>	=	=	and operated exclusively to	-		=					
11	ı		•	and operated exclusively fo		, ,			,	•		
				orted organizations describe type of supporting organiza						Section 5	109(a)(3). CI	ieck
		_	ype I <b>b</b>		Type III				d	Гтуре	e III - Other	
e	$\Gamma$	•		rtıfy that the organızatıon ıs			•				•	
				agers and other than one or	more publ	icly suppo	orted orga	nizations	described	ın sectioi	n 509(a)(1) d	or
f		section 50		d a written determination fro	om the IRS	S that it is	a Type I.	Type II o	r Tvpe III	supportu	na oraanizati	on.
-		check this					/ /	. , , ,	, , ,		.,	<u> </u>
g		_		as the organization accepte	d any gift	or contrib	utıon from	any of the	<u></u>			
		following pe		r indirectly controls, either a	alone or to	aether wit	th nersons	describe	d in (ii)		Yes N	 No
			•	ng body of the the supported		_	in persons	desembe	u III (II)	11g		<u> </u>
		· · · · · · · · · · · · · · · · · · ·	· -	erson described in (i) above	_					11g		—
				ty of a person described in (		bove?				11g(		—
h				nation about the organizatio			supports				/	
			_	-	_							
	(i) Na	ame of	(ii) EIN	(iii) Type of organization	(iv) I	s the	(v) Did y	ou notify	(vi) 1	Is the	(vii) A mou	nt of
_		orted		(described on lines 1 - 9	_	ation in		inization		ation in	support	,?
(	rgan	ıızatıon		above or IRC section (See Instructions))	col (i)	listed in verning	l .	i) of your port?		organized US?		
				(See Instructions)	, ,	nent?	Jupi	7016	"" ""	. 0 5 .		
					Yes	No	Yes	No	Yes	No		

Total

Part II	Support Schedule for Organizations Described in IRC 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.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					<del> </del>		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts 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							
10	from the sale of capital assets (Explain in							
	Part IV )							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns )		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and <b>stop here</b>		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	<b>▶</b> □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and <b>stop here.</b> The organization qualifies a				,			<b>▶</b> □
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				<b>▶</b> □
17a	10% Facts and Circumstances Test - 2008.							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							<b>►</b> □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	<b>Private Foundation.</b> If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	<b>▶</b> □
	ınstructions							F-1

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
С	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV )						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and <b>stop here</b>						<b>▶</b> □
	monutation of Dublic Compant Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumin (1))		15	
16 Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g							
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (			ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. 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 **33 1/3% Tests - 2007.** 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

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

Schedule A (Form 990 or 990-EZ) 2008

**▶**□

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)
	Facts and Circumstances Test

Schedule A (Form 990 or 990-EZ) 2008

OMB No 1545-0047

**Supplemental Financial Statements** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

**SCHEDULE D** (Form 990)

> ► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

	ne of the organization ute for the International Education of		Employer identific	ation number	r
Stud			36-2251912		
Pa	organizations Maintaining Donor Action organization answered "Yes" to Form 99		inds or Account	<b>s.</b> Completo	e if the
		(a) Donor advised funds	(b) Funds and	other accoun	nts
L	Total number at end of year				
2	Aggregate Contributions to (during year)				
3	Aggregate Grants from (during year)				
ŀ	Aggregate value at end of year				
5	Did the organization inform all donors and donor advi funds are the organization's property, subject to the	_	oradvised	☐ Yes	┌ No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?	efit of the donor or donor advisor or other		┌ Yes	∏ No
Par	<b>Conservation Easements.</b> Complete		o Form 990, Part I	V, line 7.	
L 2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual on the last day of the tax year	on or pleasure) Preservation of an Preservation of ce	historically importai rtified historic struct of a conservation ea	ure	1
	on the last day of the tax year		Held a	t the End of t	the Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easement	rs ·	2b		
c	Number of conservation easements on a certified hi	istoric structure included in (a)	2c		
d	Number of conservation easements included in (c) a	acquired after 8/17/06	2d		
3	Number of conservation easements modified, transfe	erred, released, extinguished, or terminate	d by the organization	n during	
	the taxable year 🕨	· · · · · · · · · · · · · · · · · · ·		Ū	
1	Number of states where property subject to conserva	ation eacament is located .			
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	g the periodic monitoring, inspection, viola	ations, and	☐ Yes	┌ No
5	Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during the	year <b>►</b>		
,	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ear ► \$		
3	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$ ?	2 (d) above satisfy the requirements of sec	tion	☐ Yes	┌ No
•	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easer	the footnote to the organization's financial			
ar	Organizations Maintaining Collection Complete if the organization answered		or Other Similar	Assets.	
la	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fire	for public exhibition, education or research	h in furtherance of p		,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ii		•	
	(i) Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$		
	(ii) Assets included in Form 990, Part X		<b>►</b> \$		
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA	·	r financial gain, prov	ıde the	
а	Revenues included in Form 990, Part VIII, line 1		<b>►</b> \$		

**b** Assets included in Form 990, Part X

Part	Organizations Maintaining Coll	ections of Art, His	<u>tori</u>	<u>cal Treası</u>	ires, or Othe	<u>r Similar As</u>	sets (	:ontɪnued)
3	Using the organization's accession and other ritems (check all that apply)	ecords, check any of th	e foll	owing that ar	e a significant u	se of its collect	ion	
а	Public exhibition	d	Γ	Loan or exc	hange programs			
b	Scholarly research	e	Γ	Other				
c	Preservation for future generations							
4	Provide a description of the organization's coll Part XIV	ections and explain hov	v the	further the	organization's ex	empt purpose ı	า	
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to						_ Yes	┌ No
Par	Trust, Escrow and Custodial Air Part IV, line 9, or reported an amo				anızatıon answ	ered "Yes" to	Form 9	₹90,
1a	Is the organization an agent, trustee, custodia included on Form 990, Part X?	n or other intermediary	for c	ontributions	or other assets		_ Yes	┌ No
b	If "Yes," explain why in Part XIV and complete	the following table						
						Am	ount	
с	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	m 990, Part X, line 21?				J	Yes	☐ No
	If "Yes," explain the arrangement in Part XIV							
Pa	rt V Endowment Funds. Complete if						(=)[=:::::	Voore Doele
1-	Beginning of year balance	(a)Current Year (b	Prior `	rear (C)IW	o Years Back (d)	Three Years Back	(e)rour	rears back
1a	Contributions							
b								
C	Investment earnings or losses							
d	Grants or scholarships							
е	and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year of	end balance held as						
а	Board designated or quasi-endowment 🕨							
ь	Permanent endowment 🕨							
с	Term endowment 🕨							
3a	Are there endowment funds not in the possess	ion of the organization	thata	re held and a	administered for	the		
	organization by						Yes	No
	(i) unrelated organizations		•			3a(	-	<del>                                     </del>
_	(ii) related organizations					3a(i		<del> </del>
	If "Yes" to 3a(II), are the related organizations	•				3b		
4 Dec	Describe in Part XIV the intended uses of the tVI Investments—Land, Buildings,				art V. lina 10			
Pal	t VI Investments—Land, Buildings,	and Equipment. 5			•			
	Description of investment			Cost or other (investment)	( <b>b)</b> Cost or other basis (other)	(c) Depreciation	(d) B	ook value
1a	Land			0	2,468,100	<u>I</u>		2,468,100
	Buildings			0	51,018,578	11,245,609	, 💳	39,772,969
	Leasehold improvements			0	4,636,636		+	2,194,711
	Equipment			0	6,459,757	5,344,026	+	1,115,731
	Other			0		3,311,020	+	0
	I. Add lines 1a-1e (Column (d) should equal Form	n 990. Part X. column (B.	line		-	<u> </u>	+	
Tota	II Add lilles to te (coldillil (d) silodia egadi i olil		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	IU(C).)			1	45,551,511

(a) Description of security or cateory		(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other GROSVENOR PARTNERSHIP INVST	3,351,486	F
Other HEDGE FUND	1,933,149	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12 )	5,284,635	
Down Will Investments Descript Deleted Co	a Farm 000 Dart V June 12	
Part VIII Investments—Program Related. Se		. (c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )		
Part IX Other Assets. See Form 990, Part X, II	ne 15.	
(a) Descri	ption	(b) Book value
		+
Total. (Column (b) should equal Form 990, Part X, col.(B) line.	15.)	
Part X Other Liabilities. See Form 990, Part X	K, line 25.	·
(a) Description of Liability	(b) A mount	
Federal Income Taxes		
CAPITAL LEASE OBLIGATION	25,144,822	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25 )	25,144,822	

	Total revenue (Form 990, Part VIII, column (A), line 12)	1	74,035,346
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	79,236,48
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-5,201,13!
4	Net unrealized gains (losses) on investments	4	-6,077,334
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,222,832
9	Total adjustments (net) Add lines 4 - 8	9	-7,300,166
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-12,501,30:
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	66,851,374
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	-7,183,972
3	Subtract line 2e from line 1	3	74,035,346
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	74,035,346
	Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	79,352,67
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
с	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	116,194
3	Subtract line 2e from line 1	3	79,236,481
4	A mounts 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 XIV)		
<b>C</b>	Add lines <b>4a</b> and <b>4b</b>	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	79,236,483
	rt XIV Supplemental Information		
Con	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P $lpha$	art XIV,	lines 1b and 2b,

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

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

Ident if ier	Return Reference	Explanation
O ther Revenue		Other Schedule D, Part XI, Line 8 Foreign Currency Translation Adjustment -\$1,106,638 Change in Allowance for Bad Debt - \$116,194 Total -\$1,222,832 Other Revenue Schedule D, Part XII, Line 2d Foreign Currency Translation Adjustment - \$1,106,638
Other Expense	Schedule D, Part XIII, Line 2d	Change in Allowance for Bad Debt \$116,194

**Employer identification number** 

#### **SCHEDULE E**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Schools**

Attach to Form 990 or Form 990-EZ. To be completed by organizations that answer "Yes" to Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

OMB No 1545-0047

2008

Open to Public Inspection

	ute for the International Education of	• •					
Stude	nts   3	36-2251912		VEC	NO		
		۲		YES	NO		
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its other governing instrument, or in a resolution of its governing body?	s charter, bylaws,	1	Yes			
2	2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?						
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcathe period of solicitation for students, or during the registration period if it has no solicitation prog						
	that makes the policy known to all parts of the general community it serves? If "Yes," please desc	cribe If "No,"					
	please explain		3	Yes			
	IES does not advertise through newspaper or broadcast media. Hence, we do not publicize our rac nondiscriminatory policy through this means. However, IES does publicize its racially nondiscrimi through the same means that it advertises its programs to students. website, study abroad fairs, of communications with students, universities' study abroad offices and consortium members.	inatory policy					
4	Does the organization maintain the following?						
ā	Records indicating the racial composition of the student body, faculty, and administrative staff?	Ļ	4a	Yes			
ŀ	Records documenting that scholarships and other financial assistance are awarded on a racially n basis?	ondiscriminatory	4b	Yes			
C	Copies of all catalogues, brochures, announcements, and other written communications to the pub with student admissions, programs, and scholarships?	olic dealing	4c	Yes			
c	<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions?						
	If you answered "No" to any of the above, please explain (If you need more space, attach a separ	ate statement )					
5	Does the organization discriminate by race in any way with respect to		F-		N -		
č	a Students' rights or privileges?	ŀ	5a		Νo		
ŀ	Admissions policies?	-	5b		Νo		
ď	Employment of faculty or administrative staff?	-	5c		Νo		
ď	Scholarships or other financial assistance?		5d		Νo		
•	e Educational policies?	_	5e		Νo		
f	Use of facilities?	-	5f		Νo		
ç	g Athletic programs?	-	5g		Νo		
ŀ	n Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a sepa	erate statement \	5h		Νo		
	Tryou answered Tes to any or the above, please explain (11 you need more space, attach a sepa						
6a	Does the organization receive any financial aid or assistance from a governmental agency?		6a		Νo		
ŀ	Has the organization's right to such aid ever been revoked or suspended?		6b				
	If you answered "Yes" to either 6a or b, please explain using an attached statement						
7	Does the organization certify that it has complied with the applicable requirements of sections 4 Of Nev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an expl	_	7	Yes			
	or Nevertoce 75-50, 1975-2 C.B. 507, covering racial nondiscrimination of involvention expr	anativn	,	162			

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As Filed Data -

DLN: 93493040011530

OMB No 1545-0047

2008

Department of the Treasury

SCHEDULE F (Form 990)

► Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**Statement of Activities Outside the United States** 

Open to Public Inspection

Interna	I Revenue Service			20, 1 a.t 20,e 2 .2.			Inspection
	e of the organization	<u> </u>				Employer ide	ntification number
	itute for the International ents	Education of				36-2251912	2
Pa	rt I General Infor "Yes" to Form 9			de the United States	. Complete	e if the orgar	nization answered
1	assistance, the grante	ees' eligibility fo	or the grants or	ecords to substantiate to assistance, and the se	lection crite	rıa used to a	ward
2	<b>For grant makers.</b> Descri United States	be in Part IV the	organization's pr	ocedures for monitoring th	ne use of gran	nt funds outsıd	e the
3	Activites per Region (U	se Schedule F-1	(Form 990) ıf adı	ditional space is needed )			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	ıs a progr describe sp	ty listed in (d) am service, pecific type of s) in region	(f) Total expenditures in
	pe (Including Iceland and inland)	19	175	Program Services	Education/C	urriculum	52,198,658
Sout	h A sıa	1	5	Program Services	Education/C	urriculum	464,05
Sout	h A merica	3	24	Program Services	Education/C	urriculum	3,420,410
East	Asia and the Pacific	6	29	Program Services	Education/C	urriculum	6,054,849
Sub-	Saharan Africa	1	3	Program Services	Education/C	urriculum	413,900
Mıdc	lle East and North Africa	1	4	Program Services	Start-up of (	Curriculum	118,820

240

Totals .

62,670,688

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	( <b>g)</b> A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
	_							
	_							
	_							
	_							-
	_							_
	_							
	_							
	_							
	_							
	_							
	_							
	_							
	_							

	F-1 (Form 990) if a			tea States. Complete	if the organization a	inswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+					
		1					
		+					
			•				

Schedule F (Form 990) 2008

Complete this part t	o provide the information required	ın Part I, line 2, and any other additional information.
Identifier	ReturnReference	Explanation

Software ID:

**Software Version:** 

**EIN:** 36-2251912

Name: Institute for the International Education of

Students

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)
--------------------------	--	------------	-------------------------	------------------------------	------------------------------------	---	--	--

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**Grants and Other Assistance to Organizations,** Governments and Individuals in the U.S.

OMB No 1545-0047

2008

DLN: 93493040011530

Department of the Treasury Internal Revenue Service Name of the organization

Institute for the International Education of

Schedule I

(Form 990)

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

Open to Public Inspect ion

Employer identification number

Students	Eddedtion of					36-2251912	
Part I General Info	rmation on Gra	nts and Assistanc	е			•	
the selection criteria us	ed to award the gra	ants or assistance?			gibility for the grants or a		✓ Yes   N
Form 990, Part Part IV and Sc	t IV, line 21 for a hedule I-1 if add	any recipient that rec litional space is	eived more than \$5,0	000. Check this box	tes. Complete if the confirmation one recipient rec	ceived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
					•		
For Paperwork Reduction Act No				Cat No 50055	P		hedule I (Form 990) 2008

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

(a)Type of grant or assistance	<b>(b)</b> Number of recipients	<b>(c)</b> A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Merit-Based Scholarships	124	211,379	0	n/a	n/a
Need-Based Scholarships	369	347,800	0	n/a	n/a
The HBCU Scholarships	29	58,000	0	n/a	n/a
Public University Grants	995	1,474,500	0	n/a	n/a
Summer Need-Based Scholarships	53	40,300	0	n/a	n/a
Legacy Scholarships	12	8,550	0	n/a	n/a

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

See Additional Data Table

Ident if ier	Return Reference	Explanation
Procedures for Monitoring the use of grant funds		A wards are given to US students or US schools in the form of grants or scholarships for the express purpose of studying abroad through one of IES' study abroad programs. Grants and scholarships are awarded to students via a direct reduction in their billed tuition for the term under which the grant or scholarship applies. The use of these grants and scholarships is limited in that monies can only be applied to tuition costs related to the specific IES program a recipient is enrolled in. When IES provides a student with any other grant or assistance for travel expenses related to one of its study abroad programs, the recipient would be required to provide IES with substantiation to ensure the funds were used for the intended purpose

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DLN: 93493040011530

**Employer identification number** 

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Name of the organization

ın Part III

Internal Revenue Service

### **Compensation Information**

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

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008 No 1545-0047

Open to Public Inspection

Institute for the International Education of Students 36-2251912 Part I **Questions Regarding Compensation** Νo Yes Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain **1**b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Written employment contract Compensation committee Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a Receive a severance payment or change of control payment? Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo 4c Νo 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 501(c)(3) and 501(c)(4) organizations only must complete lines 5-8. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe

Νo

#### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

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

(A) Name		<b>(B)</b> Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Dr Mary M Dwyer	(E)	363,838 0	1,407 0	31,177 0	25,079 0	16,318 0	437,819 0	0 0
William Hoye	(E)	249,794 0	20,000 0	14,266 0	19,973 0	15,408 0	319,440 0	0 0
William Martens	(I)	176,730 0	0	21,815 0	17,425 0	18,939 0	234,909 0	0 0
Dr Mıchael Steinberg	(I) (II)	184,345 0	0	22,387 0	19,636 0	11,724 0	238,092 0	0 0
Gayly Opem	(ı) (ıı)	129,629 0	17,042 0	37,143 0	13,290 0	11,121 0	208,225 0	0
Ian Ellis	(I)	164,855 0	18,774 0	10,313	14,748 0	13,561 0	222,251 0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

### Part III Supplemental Information

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

Ident if ier	Return Reference	Explanation
	Schedule J, Part I, Line 1a	IES allows spouses of its board members to attend board meetings. Any costs associated with the spouse's travel are considered to be taxable compensation to the board member and they are issued a Form 1099 accordingly
Health or social club dues or initiation fees	Schedule J, Part I, Line 1a	IES pays the cost of health club membership for the company's CEO, Mary M Dwyer The related benefit is included in the CEO's W-2 as taxable compensation

Schedule J (Form 990) 2008

### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

**Supplemental Information to Form 990** 

 $\blacktriangleright$  Attach to Form 990. To be completed by organizations to provide additional information for

responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public Inspection

Name of the organization
Institute for the International Education of

Employer identification number

36-2251912

ldentifier	Return Reference	Explanation
Foreign Financial Accounts	Form 990, Part V, Line 4b	The organization has foreign financial accounts for which a form TDF 90-22 1 was filed in the following countries. Argentina, Australia, Austria, Chile, Ecuador, France, Germany, India, Ireland, Italy, Japan, Netherlands, South Africa, Spain, and United Kingdom

ldentifier	Return Reference	Explanation
Organizations that may receive deductible contributions	Form 990, Part V, Line 7g and 7h	The organization did not receive any contributions of qualified intellectual property, cars, boats, airplanes, or other vehicles. Therefore, these questions are not applicable for the current year and have been intentionally left blank.

ldentifier	Return Reference	Explanation
Review of Form 990 by Governing Body	Form 990, Part VI, Section A, Line 10	IES management reviews the full form 990 in detail in conjuction with the organization's independent paid tax preparers. Subsequent to this review, the Form 990 is presented to the audit committee, a subcommittee of the organization's independent board. After the audit committee reviews and approves the Form 990, management e-mails a copy to each member of the Board of Directors for their review, prior to filing with the IRS.

ldentifier	Return Reference	Explanation
Organization's process for enforcing compliance with Conflict of Interest	Form 990, Part VI, Section B, Line 12c	In accordance with IES Abroad's Conflict of Interest Policy, all officers, directors, and key employees must complete and submit an annual conflict of interest form and disclose all potential or actual conflicts of interest. The forms completed by directors, and by the president/CEO, are reviewed by the chair of the Governance Committee of the Board. The chair of the Governance Committee reports any conflicts involving board members or the president/CEO to the full board each year. Individual conflict of interest forms completed by IES officers and key employees are placed in their confidential personnel files maintained by IES Abroad's Department of Human Resources. The chair of the Board of Directors also reviews the completed conflict of interest forms submitted by the President and CEO each year. The President/CEO reviews all other officers' conflict of interest forms. The Department of Human Resources reviews the conflict of interest forms completed and submitted by all other officers and key employees of IES Abroad. If it is discovered that a board member has a conflict of interest during board or committee deliberations, then the affected board member must recuse himself or herself from the relevant issue, deliberations, and decision-making process. IES Abroad does not know ingly allow for any IES business to be conducted with a board member or relative of a board member.

ldentifier	Return Reference	Explanation
Process used to establish compensation for top management officials	Form 990, Part VI, Section B, Line 15a and 15b	IES Abroad's Board Executive Committee, acting as the Board Compensation committee, reviews the compensation of IES officers annually. The Board Executive Committee is comprised of the elected board chair, the elected vice chairs, two other board members and the president/CEO Every four years, IES retains an independent, outside compensation review firm to evaluate the company's top management officials' and key employees' compensation. The independent firm uses market surveys and other resources to compare the compensation of each IES officers' and key employees' position to similar (or identical) positions at other non-profit organizations with similar annual revenues, comparable numbers of employees, and comparable levels and complexities of job responsibilities, in order to establish a benchmark for reasonable compensation. The overarching goal of IES Abroad's compensation policy is designed to achieve compensation levels for its officers and key employees at competitive market rates. Annually, IES Abroad reviews the performance of each of its officers and key employees. In addition, salary data for each position is aged annually based upon instructions provided in the independent third party study commissioned by IES every four years. The resulting analysis and recommendations for changes in compensation are presented to the board executive committee for its review every year. Once approved by the compensation committee, compensation recommendations for officers are presented to the full board of directors for review and approval. Officers and key employees never take part in the discussions regarding the setting of their ow n compensation. The chair of the Board of Directors documents the above process to the department of Human Resources on an annual basis.

ldentifier	Return Reference	Explanation		
Disclosure of governing documents, conflict of interest policy, etc	Form 990, Part VI, Section C, Line 19	Financial statements, governing documents, and conflict of interest policies are not required disclosures pursuant to Internal Revenue Code (IRC) Section 6104 These documents are not available to the public at this time		

#### DLN: 93493040011530

OMB No 1545-0047

2008

Open to Public Inspection

**Employer identification number** 

# **SCHEDULE R** (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

**Related Organizations and Unrelated Partnerships** 

Institute for the Inte Students	ernational Education of	36-2251912				
Part I	dentification of Disregarded Entities				•	
1	(A) Name, address, and EIN of disregarded entity	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	<b>(D)</b> Total income	<b>(E)</b> End-of-year assets	<b>(F)</b> Direct controlling entity
See Additional Data	a Table					
Part II I	dentification of Related Tax-Exempt Organizat	ions	_			
ı	(A) Name, address, and EIN of related organization	<b>(B)</b> Primary activity	(C) Legal domicile (state or foreign country)	( <b>D</b> ) Exempt Code section	(E) Public charity status (if section 501(c)(3))	<b>(F)</b> Direct controlling entity

<b>(A)</b> Name, address, and EIN of related organization	Prim	( <b>B)</b> nary activity	(C) Legal domicile (state or foreign country)	( <b>D</b> ) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	<b>(F)</b> e of total income	<b>(G)</b> Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organ		(B) Primary activity		(C) Legal domicile (state or foreign country)		( <b>D</b> ) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	( <b>G)</b> hare of l-of-yea assets	<b>(H)</b> Percentage r ownership		

	Note. Complete line 1 if any entity is listed in Parts II, III or IV			Y	es	No
<b>1</b> D	uring the tax year, did the orgranization engage in any of the following transaction	ns with one or more related organizations listed in Parts II-	IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled enti	ity	1a	3		
b	Gift, grant, or capital contribution to other organization(s)		1b	)		
С	Gift, grant, or capital contribution from other organization(s)		1c	:		
d	Loans or loan guarantees to or for other organization(s)		1d	t		
e	Loans or loan guarantees by other organization(s)		1e	•		
f	Sale of assets to other organization(s)		1f			
g	Purchase of assets from other organization(s)		<b>1</b> g	3		
h	Exchange of assets		1h	1		
i	Lease of facilities, equipment, or other assets to other organization(s)		1i	i		
j	Lease of facilities, equipment, or other assets from other organization(s)		1j	j		
k	Performance of services or membership or fundraising solicitations for other org	ganization(s)	1k	<		
ı	Performance of services or membership or fundraising solicitations by other orga	anızatıon(s)	11	ı		
m	Sharing of facilities, equipment, mailing lists, or other assets		1n	n		
n	Sharing of paid employees		1n	1		
0	Reimbursement paid to other organization for expenses		10	,		
р	Reimbursement paid by other organization for expenses		1р	,		
q	O ther transfer of cash or property to other organization(s)		19	1		
r	O ther transfer of cash or property from other organization(s)		1r	r		
2	If the answer to any of the above is "Yes," see the instructions for information or	n who must complete this line, including covered relationsh	nips and transaction thresholds			
	(A)	(B)	(C)			
	Name of other organization(s)	Transaction type(a-r)	Amount Involved			
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

#### Part VI Unrelated Organizations Taxable as a Partnership

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

								_				
<b>(A)</b> Name, address, and EIN of entity	<b>(B)</b> Primary activity	<b>(C)</b> Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		<b>(E)</b> Share of end-of-year assets			20 of K-1		r J
			Yes	No		Yes	No		Yes	No		
			•			•	•	Sabadula	D / Form	000) 2000		

Software ID: Software Version:

**EIN:** 36-2251912

Name: Institute for the International Education of

Students

Form 990, Schedule R, Part I - Identification of Disregarded Entities

Form 990, Schedule R, Part 1 - Identification of disregarded Entitles									
<b>(A)</b> Name, address, and EIN of disregarded entity	(B) Primary Activity	(C) Legal Domicile (State or Foreign Country)	<b>(D)</b> Total income (\$)	<b>(E)</b> End-of-year assets (\$)	<b>(F)</b> Direct Controlling Entity				
Stichting IES Amsterdam Prins Hendrikkade 189b 1011 TD Amsterdam 34198446 NL	A broad Prog	N L	-1,525,371	69,756	IES				
Institute for International Education 3 4 Lovers Walk Lower Campus Rondebosch 2008/020853/08 SF	A broad Prog	SF	-377,025	25,952	IES				
Society for the Intl Ed of Students D-31 Defence Colony New Delhi, 110024 #S/58572/2007 IN	A broad Prog	IN	-468,755	63,033	IES				
London Centre of European Studies 5 Bloomsbury Place London WC1A 2QP 290456 UK	A broad Prog	UK	-6,900,416	46,142,919	IES				
IES Nantes Association 7 rue des cadeniers nantes 44000 FR	abroad prog	FR	-1,242,757	49,247	IES				
Association d'IES Abroad-Paris 77 rue daguerre paris 75014 FR	abroad prog	FR	-4,590,586	456,848	IES				
IES Foundation (Quito Ecuador) La Pradera E7-174 y Diego de Almagro, Quito EC	A broad Prog	EC	-751,820	97,355	IES				
IES Spanish Foundation 7 Ciudad Universitaria Madrid SP	A broad Prog	SP	-14,715,224	1,575,617	IES				
Inst for the Intl Ed of Students Pty 1/169 O cean Street Narrabeen, NSW 2010 AS	A broad Prog	AS	0	0	IES				

(Rev December 2008)

# Information Return of U.S. Persons With Respect To Foreign Disregarded Entities

OMB No 1545-1910

DLN: 93493040011530

See separate instructions.

Department of the Treasury Internal Revenue Service

Information furnished for the foreign disregarded entity's annual accounting period (see instructions) beginning 07-01-2008, and ending 06-30-2009

Attachment Sequence No 140

Name of person filing this return Filer's identifying number INSTITUTE FOR THE INTERNATIONAL ED OF STUDENTS 36-2251912 Number, street, and room or suite no (or P O box number if mail is not delivered to street address)

33 N LASALLE 15TH FLOOR

City or town, state, and ZIP code CHICAGO, IL, 60602

Filer's tax year beginning 2008-07-01, and ending 2009-06-30

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

- Name and address of foreign disregarded entity THE INST FOR THE INTL ED OF STUDENTSAVENIDA DE SENECA NUMERO 7 COLEGIO **b** US identifying number, if any UNIV SAN AGUSTIN, MADRID 28040 d Date(s) of organization e Effective date as foreign c Country(ies) under whose laws organized and entity type under local tax law disregarded entity 2004-02-26 2004-07-01 SPAIN, NOT FOR PROFIT If benefits under a U.S. tax treaty were claimed Country in which principal Principal business activity Functional currency with respect to income of the foreign disregarded business activity is conducted **EDUCATION** entity, enter the treaty and article number
- Provide the following information for the foreign disregarded entity's accounting period stated above
- Name, address, and identifying number of branch office or agent | **b** (If any) in the United States

Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the foreign disregarded entity, and the location of such books and records, if different

WILLIAM J MARTENS

CustodianAddress

Location

- For the tax owner of the foreign disregarded entity (if different from the filer) provide the following
- Name and address Annual accounting period covered by the return (see instructions) to Country under whose laws
  - c US identifying number, if any
  - e Functional currency organized
- For the direct owner of the foreign disregarded entity (if different from the tax owner) provide the following
- Name and address **b** Country under whose laws US identifying number, if c organized d Functional currency
- Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity and each entity in which the foreign disregarded entity has a 10% or more direct or indirect interest. See instructions

# Schedule C Income Statement (see instructions)

Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM.

			Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	1	19,920	27,246
2	Cost of goods sold	2		
3	Gross profit (subtract line 2 from line 1)	3	19,920	27,246
4	Other income	4		
5	Total income (add lines 3 and 4)	5	19,920	27,246
6	Total deductions	6	10,778,220	14,742,470
7	Other adjustments	7		
8	Net income (loss) per books	8	-10,758,300	-14,715,224

Sc	hedule C-1 Section 987 Gain or Loss Information					Page Z
			(a) Amount stated in functional currency foreign disregarded e	of	A mount function	stated in al currency cipient
1	Remittances from the foreign disregarded entity	1		0		0
2	Section 987 gain (loss) of recipient	2				0
					Yes	No
3	Were all remittances from the foreign disregarded entity treated as made to the o	dırect	owner?			
4	Did the tax owner change its method of accounting for section 987 gain or loss verified from the foreign disregarded entity during the tax year?			es • •		No
	hedule F Balance Sheet					
	portant: Report all amounts in U.S. dollars computed in functional c					
<u>acc</u>	ordance with U.S. GAAP. See instructions for an exception for foreign	1 aisi		tnat		
	Assets		(a) Beginning of an accounting per		End o	( <b>b)</b> fannual ing period
1	Cash and other current assets	. 1	1,57	5,617		1,978,026
2	Other assets	. 2		0		18,565
3	Total assets	. 3	1,57	5,617		1,996,591
	Liabilities and Owner's Equity					
4	Liabilities	. 4	50	3,168		120,644
5	Owner's equity	. 5		2,449		1,875,947
6	Total liabilities and owner's equity	. 6	_	5,617		1,996,591
Sa	hedule G Other Information	-   -		-,		
					Yes	No
1	During the tax year, did the foreign disregarded entity own an interest in any trus	st?.				No
2	During the tax year, did the foreign disregarded entity own at least a 10% intere foreign partnership?		rectly or indirectly, i	n any		No
3	Answer the following question only if the foreign disregarded entity made its election from its owner during the tax year: Did the tax owner claim a loss with respect to disregarded entity as a result of the election?		_			
4	Answer the following question only if the foreign disregarded entity is owned directly corporation and the foreign disregarded entity incurred a net operating loss for the tadisregarded entity a separate unit as defined in Regulations sections 1 1503(d) instructions)	ax year	r: Is the foreign			
5	Answer the following question only if the tax owner of the foreign disregarded entity corporation (CFC): Were there any intracompany transactions between the foreign CFC or any other branch of the CFC during the tax year, in which the foreign disr manufacturing, selling, or purchasing branch?	dısre egard	garded entity and the			
	hedule H Current Earnings and Profits or Taxable Income (see					
Im	<b>portant:</b> Enter the amounts on lines 1 through 6 in functional cur	rrenc	<i>y.</i>			
1	Current year net income or (loss) per foreign books of account			1		-10,758,300
2	Total net additions			2		
3	Total net substractions			3		
4	Current earnings and profits (or taxable income—see instructions) (line 1 plus li	ne 2 r	minus line 3)	4		-10,758,300
5	DASTM gain or loss (if applicable)			5		
6	Combine lines 4 and 5		[	6		-10,758,300
7	Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated exchange rate determined under section 989(b) and the related regulations (see Enter exchange rate used for line 7. * 0.7311			7		-14,715,224

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Form **8858**(Rev December 2008)

Information Return of U.S. Persons With Respect To Foreign Disregarded Entities

OMB No 1545-1910

DLN: 93493040011530

► See separate instructions.

Information furnished for the foreign disregarded entity's annual accounting period (see instructions) beginning 07-01-2008, and ending 06-30-2009

Attachment Sequence No **140** 

Department of the Treasury
Internal Revenue Service

Name of person filing this return
INSTITUTE FOR THE INTERNATIONAL ED OF STUDENTS

Filer's identifying number

36-2251912

Number, street, and room or suite no (or P O box number if mail is not delivered to street address) 33 N LASALLE 15TH FLOOR

City or town, state, and ZIP code CHICAGO, IL, 60602

Filer's tax year beginning 2008-07-01 , and ending 2009-06-30

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

1a	Name and address of foreign disregarded STICHTING IES AMSTERDAMPRINS HENDRIKKADE AMSTERDAM 1011 TD NL	<b>b</b> US identifying number, if any		
С	Country(les) under whose laws organized and entit NL NETHERLANDS, NOT FOR PROFIT	y type under local tax law	d Date(s) of organization 2003-11-21	e Effective date as foreign disregarded entity 2004-07-01
f	If benefits under a U S tax treaty were claimed with respect to income of the foreign disregarded entity, enter the treaty and article number	g Country in which principal business activity is conducted	h Principal business activity EDUCATION	i Functional currency  EURO

Provide the following information for the foreign disregarded entity's accounting period stated above

а	Name, address, and identifying number of branch office or agent	b	Name and address (including corporate department, if
	(If any) in the United States		applicable) of person(s) with custody of the books and records
			of the foreign disregarded entity, and the location of such books
			and records, if different

CustodianAddress

WILLIAM J MARTENS

Location

3 For the tax owner of the foreign disregarded entity (if different from the filer) provide the following

a Name and address	<b>b</b> Annual accounting period covered by the return (see instructions)	c US identifying number, if any
	<b>d</b> Country under whose laws organized	e Functional currency
4 For the <b>direct owner</b> of the foreign disregarded e	entity (if different from the tax owner) provide the follow	ving
a Name and address	<b>b</b> Country under whose laws organized	c US identifying number, if any
		<b>d</b> Functional currency

Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity and each entity in which the foreign disregarded entity has a 10% or more direct or indirect interest. See instructions

## Schedule C Income Statement (see instructions)

**Important:** Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM.

			Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	1	30,938	42,317
2	Cost of goods sold	2		
3	Gross profit (subtract line 2 from line 1)	3	30,938	42,317
4	Other income	4		
5	Total income (add lines 3 and 4)	5	30,938	42,317
6	Total deductions	6	1,146,137	1,567,688
7	Other adjustments	7		
8	Net income (loss) per books	8	-1,115,199	-1,525,371

Sc	hedule C-1 Section 987 Gain or Loss Information					Page Z
			(a) Amount stated in functional currency of foreign disregarded ent		A mount functiona	b) stated in I currency upient
1	Remittances from the foreign disregarded entity	1		0		0
2	Section 987 gain (loss) of recipient	2				0
					Yes	No
3	Were all remittances from the foreign disregarded entity treated as made to the	dırect	owner?	. [		
4	Did the tax owner change its method of accounting for section 987 gain or loss from the foreign disregarded entity during the tax year?	with re	espect to remittances			No
	hedule F Balance Sheet					
	portant: Report all amounts in U.S. dollars computed in functional c					
<u>acc</u>	cordance with U.S. GAAP. See instructions for an exception for foreign	n aisi		nat		
	Assets		(a) Beginning of annuaccounting perio		End o	( <b>b)</b> fannual ing period
1	Cash and other current assets	. 1	69	,756		143,171
2	Other assets	. 2				
3	Total assets	. 3	69	,756		143,171
	Liabilities and Owner's Equity					
4	Liabilities	. 4	340	,391		276,246
5	Owner's equity	. 5	-270	,635		-133,075
6	Total liabilities and owner's equity	. 6	69	,756		143,171
Scl	hedule G Other Information			1		·
					Yes	No
1	During the tax year, did the foreign disregarded entity own an interest in any tru:	st?.		. [		No
2	During the tax year, did the foreign disregarded entity own at least a 10% intereforeign partnership?	est, dı • •	rectly or indirectly, in	any		No
3	Answer the following question only if the foreign disregarded entity made its election from its owner during the tax year: Did the tax owner claim a loss with respect to disregarded entity as a result of the election?					
4	Answer the following question only if the foreign disregarded entity is owned directly corporation and the foreign disregarded entity incurred a net operating loss for the talk disregarded entity a separate unit as defined in Regulations sections 1 1503(d) instructions)	ax yea	r: Is the foreign			
5	Answer the following question only if the tax owner of the foreign disregarded entity corporation (CFC): Were there any intracompany transactions between the foreign CFC or any other branch of the CFC during the tax year, in which the foreign disimanufacturing, selling, or purchasing branch?	n disre regard	garded entity and the ed entity acted as a			
	hedule H Current Earnings and Profits or Taxable Income (see					
Im	<b>portant:</b> Enter the amounts on lines 1 through 6 in functional cu	rrenc	<i>y,</i>			
1	Current year net income or (loss) per foreign books of account			1		-1,115,199
2	Total net additions			2		
3	Total net substractions			3		
4	Current earnings and profits (or taxable income—see instructions) (line 1 plus li	ıne 2 ı	minus line 3)	4		-1,115,199
5	DASTM gain or loss (if applicable)			5		
6	Combine lines 4 and 5			6		-1,115,199
7	Current earnings and profits (or taxable income) in U S dollars (line 6 translated exchange rate determined under section 989(b) and the related regulations (see Enter exchange rate used for line 7 🏲 0 7311			7		-1,525,371

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(Rev December 2008)

Information Return of U.S. Persons With Respect To Foreign Disregarded Entities

OMB No 1545-1910

DLN: 93493040011530

See separate instructions.

Internal Revenue Service

Information furnished for the foreign disregarded entity's annual accounting period (see Attachment Department of the Treasury Sequence No 140 instructions) beginning 07-01-2008, and ending 06-30-2009 Name of person filing this return Filer's identifying number INSTITUTE FOR THE INTERNATIONAL ED OF STUDENTS 36-2251912 Number, street, and room or suite no (or P O box number if mail is not delivered to street address) 33 N LASALLE 15TH FLOOR City or town, state, and ZIP code CHICAGO, IL, 60602 Filer's tax year beginning 2008-07-01, and ending 2009-06-30Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated. Name and address of foreign disregarded entity LONDON CENTRE OF EUROPEAN STUDIES5 BLOOMSBURY PLACE **b** US identifying number, if any LONDON WC1 c Country(ies) under whose laws organized and entity type under local tax law Date(s) of organization e Effective date as foreign disregarded entity 1984-10-16 2004-07-01 UK, NOT FOR PROFIT If benefits under a U.S. tax treaty were claimed Country in which principal Principal business activity Functional currency with respect to income of the foreign disregarded **EDUCATION** business activity is conducted entity, enter the treaty and article number **BRITISH POUND** Provide the following information for the foreign disregarded entity's accounting period stated above Name, address, and identifying number of branch office or agent | **b** Name and address (including corporate department, if (If any) in the United States applicable) of person(s) with custody of the books and records of the foreign disregarded entity, and the location of such books and records, if different WILLIAM J MARTENS CustodianAddress Location

3 For the tax owner of the foreign disregarded entity (if different from the filer) provide the following									
а	Name and address	<b>b</b> Annual accounting period covered by the return (see instructions) to <b>c</b> U S identifying number, if any the return (see instructions)							
		d Country under whose laws organized							
4	For the <b>direct owner</b> of the foreign disregarded entity (if different fro	om the tax owner) provide the following							
а	Name and address	b Country under whose laws organized  c U S identifying number, if any  d Functional currency							

Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity and each entity in which the foreign disregarded entity has a 10% or more direct or indirect interest. See instructions

## Schedule C Income Statement (see instructions)

Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM.

If you are using the average exchange rate (determined under section 989(b)), check the following box **Functional Currency U.S. Dollars** Gross receipts or sales (net of returns and allowances) 1 1,576,628 2,514,719 1 2 Cost of goods sold 3 Gross profit (subtract line 2 from line 1) 3 1,576,628 2,514,719 4 5 5 Total income (add lines 3 and 4) 1,576,628 2,514,719 6 Total deductions 6 5,902,913 9,415,135 7 7 Other adjustments Net income (loss) per books . 8 -4,326,285 -6,900,416

Sc	hedule C-1 Section 987 Gain or Loss Information					rage 🛋
			(a) Amount stated in functional currency of foreign disregarded er		A mount function	b) stated in il currency cipient
1	Remittances from the foreign disregarded entity	1		0		0
2	Section 987 gain (loss) of recipient	2				0
					Yes	No
3	Were all remittances from the foreign disregarded entity treated as made to the	dırect	owner?	[		
4	Did the tax owner change its method of accounting for section 987 gain or loss from the foreign disregarded entity during the tax year?	with re	espect to remittance	s .		No
	hedule F Balance Sheet			•		
	portant: Report all amounts in U.S. dollars computed in functional of					
<u>acc</u>	cordance with U.S. GAAP. See instructions for an exception for foreig	n aisi		tnat l		
	Assets		(a)  Beginning of ann accounting peri		End o	( <b>b)</b> fannual ing period
1	Cash and other current assets	. 1	2,204	4,824		2,487,242
2	Other assets	. 2	43,938	3,095		55,583,292
3	Total assets	. 3	46,142	2,919		58,070,534
	Liabilities and Owner's Equity					
4	Liabilities	. 4	49,916	5,720	-	110,893,340
5	Owner's equity	. 5	-3,77	3,801		-52,822,806
6	Total liabilities and owner's equity	. 6	46,142	2,919		58,070,534
Scl	hedule G Other Information		•			
					Yes	No
1	During the tax year, did the foreign disregarded entity own an interest in any tru	st?.		· ·		No
2	During the tax year, did the foreign disregarded entity own at least a 10% interesting partnership?	est, du	rectly or indirectly, in	n any		No 
3	Answer the following question only if the foreign disregarded entity made its election from its owner during the tax year: Did the tax owner claim a loss with respect to disregarded entity as a result of the election?					
4	Answer the following question only if the foreign disregarded entity is owned direct corporation and the foreign disregarded entity incurred a net operating loss for the t disregarded entity a separate unit as defined in Regulations sections 1 1503(dinstructions)	ax yea	r: Is the foreign	c 		
5	Answer the following question only if the tax owner of the foreign disregarded entity corporation (CFC): Were there any intracompany transactions between the foreign CFC or any other branch of the CFC during the tax year, in which the foreign dismanufacturing, selling, or purchasing branch?	n disre regard • •	garded entity and the ded entity acted as a	e • •		
	hedule H Current Earnings and Profits or Taxable Income (see					
	portant: Enter the amounts on lines 1 through 6 in functional cu	rrenc	<i>y,</i>			
1	Current year net income or (loss) per foreign books of account			1		-4,326,285
2	Total net additions			2		
3	Total net substractions			3		
4	Current earnings and profits (or taxable income—see instructions) (line 1 plus l	ıne 2 ı	minus line 3)	4		-4,326,285
5	DASTM gain or loss (if applicable)			5		
6	Combine lines 4 and 5			6		-4,326,285
7	Current earnings and profits (or taxable income) in U S dollars (line 6 translate exchange rate determined under section 989(b) and the related regulations (se Enter exchange rate used for line 7 > 0 627			7		-6,900,416

DLN: 93493040011530

(Rev December 2008)

Department of the Treasury

Information Return of U.S. Persons With Respect To Foreign Disregarded Entities

OMB No 1545-1910

See separate instructions.

Internal Revenue Service

Information furnished for the foreign disregarded entity's annual accounting period (see instructions) beginning 07-01-2008, and ending 06-30-2009

Attachment Sequence No 140

Name of person filing this return Filer's identifying number INSTITUTE FOR THE INTERNATIONAL ED OF STUDENTS 36-2251912

Number, street, and room or suite no (or P O box number if mail is not delivered to street address) 33 N LASALLE 15TH FLOOR

City or town, state, and ZIP code CHICAGO, IL, 60602

Filer's tax year beginning 2008-07-01, and ending 2009-06-30

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

- Name and address of foreign disregarded entity **b** US identifying number, if any IES NANTES ASSOCIATION7 RUE DES CADENIERS NANTES 44000 **d** Date(s) of organization e Effective date as foreign c Country(ies) under whose laws organized and entity type under local tax law disregarded entity 1966-01-01 2004-07-01 FRANCE, NOT FOR PROFIT If benefits under a U.S. tax treaty were claimed Country in which principal Principal business activity Functional currency with respect to income of the foreign disregarded business activity is conducted **EDUCATION** entity, enter the treaty and article number
- Provide the following information for the foreign disregarded entity's accounting period stated above
- Name, address, and identifying number of branch office or agent | **b** (If any) in the United States

Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the foreign disregarded entity, and the location of such books and records, if different

WILLIAM J MARTENS

CustodianAddress

Location

- For the tax owner of the foreign disregarded entity (if different from the filer) provide the following
- Name and address c US identifying number, if any Annual accounting period covered by the return (see instructions) to Country under whose laws

  - e Functional currency organized
  - For the direct owner of the foreign disregarded entity (if different from the tax owner) provide the following
- Name and address **b** Country under whose laws US identifying number, if c organized d Functional currency
- Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity and each entity in which the foreign disregarded entity has a 10% or more direct or indirect interest. See instructions

## Schedule C Income Statement (see instructions)

Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM.

			Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	1	0	0
2	Cost of goods sold	2		
3	Gross profit (subtract line 2 from line 1)	3	0	0
4	Other income	4		
5	Total income (add lines 3 and 4)	5	0	0
6	Total deductions	6	908,579	1,242,757
7	Other adjustments	7		
8	Net income (loss) per books	8	-908,579	-1,242,757

Sc	hedule C-1 Section 987 Gain or Loss Information					rage 🛋
			(a) Amount stated in functional currency of foreign disregarded er		A mount functiona	b) stated in Il currency cipient
1	Remittances from the foreign disregarded entity	1		0		0
2	Section 987 gain (loss) of recipient	2				0
					Yes	No
3	Were all remittances from the foreign disregarded entity treated as made to the	dırect	owner?	[		
4	Did the tax owner change its method of accounting for section 987 gain or loss from the foreign disregarded entity during the tax year?	with re	espect to remittance	s .		No
	hedule F Balance Sheet					•
	portant: Report all amounts in U.S. dollars computed in functional of					
<u>acc</u>	cordance with U.S. GAAP. See instructions for an exception for foreig	<u>   uisi</u>	(a)	liial		(b)
	Assets		Beginning of ann accounting peri		End o	fannual ing period
1	Cash and other current assets	. 1	33	3,804		115,488
2	Other assets	. 2	15	5,443		9,534
3	Total assets	. 3	49	247,		125,022
	Liabilities and Owner's Equity					
4	Liabilities	. 4		5,274		20,434
5	O wner's equity	. 5	43	3,973		104,588
6	Total liabilities and owner's equity	. 6	49	247,		125,022
Scl	hedule G Other Information					
					Yes	No
1	During the tax year, did the foreign disregarded entity own an interest in any tru	st?.				No
2	During the tax year, did the foreign disregarded entity own at least a 10% interesting partnership?	est, du	rectly or indirectly, in	n any		No
3	Answer the following question only if the foreign disregarded entity made its election from its owner during the tax year: Did the tax owner claim a loss with respect to disregarded entity as a result of the election?					
4	Answer the following question only if the foreign disregarded entity is owned direct corporation and the foreign disregarded entity incurred a net operating loss for the t disregarded entity a separate unit as defined in Regulations sections 1 1503(dinstructions)	ax yea	r: Is the foreign	с 		
5	Answer the following question only if the tax owner of the foreign disregarded entity corporation (CFC): Were there any intracompany transactions between the foreign CFC or any other branch of the CFC during the tax year, in which the foreign dismanufacturing, selling, or purchasing branch?	n disre regard • •	garded entity and the ded entity acted as a	e • •		
	hedule H Current Earnings and Profits or Taxable Income (see					
	portant: Enter the amounts on lines 1 through 6 in functional cu	rrenc	<i>.</i>	. 1		
1	Current year net income or (loss) per foreign books of account			1		-908,579
2	Total net additions			2		
3	Total net substractions			3		
4	Current earnings and profits (or taxable income—see instructions) (line 1 plus l	ıne 2 ı	minus line 3)	4		-908,579
5	DASTM gain or loss (if applicable)			5		
6	Combine lines 4 and 5			6		-908,579
7	Current earnings and profits (or taxable income) in U S dollars (line 6 translate exchange rate determined under section 989(b) and the related regulations (se Enter exchange rate used for line 7 > 0 7311			7		-1,242,757

(Rev December 2008)

Information Return of U.S. Persons With Respect To Foreign Disregarded Entities

OMB No 1545-1910

DLN: 93493040011530

See separate instructions.

Information furnished for the foreign disregarded entity's annual accounting period (see instructions) beginning 07-01-2008, and ending 06-30-2009

Attachment Sequence No 140

Department of the Treasury Internal Revenue Service

Name of person filing this return Filer's identifying number INSTITUTE FOR THE INTERNATIONAL ED OF STUDENTS 36-2251912

Number, street, and room or suite no (or P O box number if mail is not delivered to street address) 33 N LASALLE 15TH FLOOR

City or town, state, and ZIP code

CHICAGO, IL, 60602

Filer's tax year beginning 2008-07-01, and ending 2009-06-30

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

- Name and address of foreign disregarded entity **b** US identifying number, if any ASSOCIATION D'IES ABROAD-PARIS77 RUE DAGUERRE PARIS 75014 **d** Date(s) of organization e Effective date as foreign c Country(ies) under whose laws organized and entity type under local tax law disregarded entity 1992-01-01 2004-07-01 FRANCE, NOT FOR PROFIT If benefits under a U.S. tax treaty were claimed Country in which principal Principal business activity Functional currency with respect to income of the foreign disregarded business activity is conducted **EDUCATION** entity, enter the treaty and article number
- Provide the following information for the foreign disregarded entity's accounting period stated above
- Name, address, and identifying number of branch office or agent | **b** (If any) in the United States

Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the foreign disregarded entity, and the location of such books and records, if different

WILLIAM J MARTENS

CustodianAddress

Location

- For the tax owner of the foreign disregarded entity (if different from the filer) provide the following
- Name and address Annual accounting period covered by the return (see instructions) to
  - c US identifying number, if any
  - Country under whose laws e Functional currency organized
- For the direct owner of the foreign disregarded entity (if different from the tax owner) provide the following
- Name and address **b** Country under whose laws US identifying number, if c organized d Functional currency
- Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity and each entity in which the foreign disregarded entity has a 10% or more direct or indirect interest. See instructions

# Schedule C Income Statement (see instructions)

Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM.

			Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	1	839	1,147
2	Cost of goods sold	2		
3	Gross profit (subtract line 2 from line 1)	3	839	1,147
4	Other Income	4		
5	Total income (add lines 3 and 4)	5	839	1,147
6	Total deductions	6	3,357,016	4,591,733
7	Other adjustments	7		
8	Net income (loss) per books	8	-3,356,177	-4,590,586

Sc	hedule C-1 Section 987 Gain or Loss Information					rage 🛋
			(a) Amount stated in functional currency of foreign disregarded er		A mount function	b) stated in Il currency cipient
1	Remittances from the foreign disregarded entity	1		0		0
2	Section 987 gain (loss) of recipient	2				0
			•		Yes	No
3	Were all remittances from the foreign disregarded entity treated as made to the	dırect	owner?	[		
4	Did the tax owner change its method of accounting for section 987 gain or loss from the foreign disregarded entity during the tax year?	with re	espect to remittance	s 		No
	hedule F Balance Sheet			•		
	portant: Report all amounts in U.S. dollars computed in functional of					
<u>acc</u>	cordance with U.S. GAAP. See instructions for an exception for foreign	n aisi		tnat		
	Assets		(a)  Beginning of anr  accounting peri		End o	( <b>b)</b> fannual ing period
1	Cash and other current assets	. 1	340	0,844		432,185
2	Other assets	. 2	110	6,004		210,692
3	Total assets	. 3	456	6,848		642,877
	Liabilities and Owner's Equity					
4	Liabilities	. 4	234	4,561		177,916
5	Owner's equity	. 5	22:	2,287		464,961
6	Total liabilities and owner's equity	. 6	450	6,848		642,877
Sc	hedule G Other Information		l			
					Yes	No
1	During the tax year, did the foreign disregarded entity own an interest in any tru	st?.				No
2	During the tax year, did the foreign disregarded entity own at least a 10% interestoreign partnership?	est, du	rectly or indirectly, ii	n any • •		No
3	Answer the following question only if the foreign disregarded entity made its election from its owner during the tax year: Did the tax owner claim a loss with respect to disregarded entity as a result of the election?					
4	Answer the following question only if the foreign disregarded entity is owned direct corporation and the foreign disregarded entity incurred a net operating loss for the to disregarded entity a separate unit as defined in Regulations sections 1 1503(disposition)	ax yea	r: Is the foreign			
5	Answer the following question only if the tax owner of the foreign disregarded entity corporation (CFC): Were there any intracompany transactions between the foreign CFC or any other branch of the CFC during the tax year, in which the foreign dismanufacturing, selling, or purchasing branch?	n disre regard • •	garded entity and th led entity acted as a			
	hedule H Current Earnings and Profits or Taxable Income (see					
	portant: Enter the amounts on lines 1 through 6 in functional cu	rrenc	<i>:y,</i>			
1	Current year net income or (loss) per foreign books of account			1		-3,356,177
2	Total net additions			2		
3	Total net substractions	٠.		3		
4	Current earnings and profits (or taxable income—see instructions) (line 1 plus l	ıne 2 ı	minus line 3)	4		-3,356,177
5	DASTM gain or loss (if applicable)			5		
6	Combine lines 4 and 5			6		-3,356,177
7	Current earnings and profits (or taxable income) in U S dollars (line 6 translate exchange rate determined under section 989(b) and the related regulations (see Enter exchange rate used for line 7 > 0 7311			7		-4,590,586

(Rev December 2008)

Department of the Treasury

Information Return of U.S. Persons With Respect To Foreign Disregarded Entities

OMB No 1545-1910

DLN: 93493040011530

See separate instructions.

Internal Revenue Service

Information furnished for the foreign disregarded entity's annual accounting period (see instructions) beginning 07-01-2008, and ending 06-30-2009

Attachment Sequence No 140

Name of person filing this return Filer's identifying number INSTITUTE FOR THE INTERNATIONAL ED OF STUDENTS 36-2251912 Number, street, and room or suite no (or P O box number if mail is not delivered to street address)

33 N LASALLE 15TH FLOOR

City or town, state, and ZIP code CHICAGO, IL, 60602

Filer's tax year beginning 2008-07-01, and ending 2009-06-30

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

- Name and address of foreign disregarded entity SOCIETY FOR THE INTL ED OF STUDENTSD-31 DEFENCE COLONY **b** US identifying number, if any NEW DELHI 110024 Date(s) of organization e Effective date as foreign c Country(ies) under whose laws organized and entity type under local tax law disregarded entity 2007-05-09 2007-05-09 INDIA, NOT FOR PROFIT If benefits under a U.S. tax treaty were claimed Country in which principal Principal business activity Functional currency with respect to income of the foreign disregarded business activity is conducted **EDUCATION** entity, enter the treaty and article number INDIAN RUPEE
- Provide the following information for the foreign disregarded entity's accounting period stated above
- Name, address, and identifying number of branch office or agent | **b** (If any) in the United States

Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the foreign disregarded entity, and the location of such books and records, if different

WILLIAM J MARTENS

CustodianAddress

Location

organized

- For the tax owner of the foreign disregarded entity (if different from the filer) provide the following
- Name and address c US identifying number, if any Annual accounting period covered by the return (see instructions) to Country under whose laws e Functional currency

  - For the direct owner of the foreign disregarded entity (if different from the tax owner) provide the following

Name and address

- **b** Country under whose laws organized
- US identifying number, if c
- d Functional currency
- Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity and each entity in which the foreign disregarded entity has a 10% or more direct or indirect interest. See instructions

# Schedule C Income Statement (see instructions)

Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM.

			Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	1	-12,465	-258
2	Cost of goods sold	2		
3	Gross profit (subtract line 2 from line 1)	3	-12,465	-258
4	Other income	4		
5	Total income (add lines 3 and 4)	5	-12,465	-258
6	Total deductions	6	22,665,512	468,497
7	Other adjustments	7		
8	Net income (loss) per books	8	-22,677,977	-468,755

Sc	hedule C-1 Section 987 Gain or Loss Information					
			(a) Amount stated in functional currency foreign disregarded ei	of	A mount functiona	b) stated in I currency ipient
1	Remittances from the foreign disregarded entity	1		0		0
2	Section 987 gain (loss) of recipient	2				0
				L	Yes	No
3	Were all remittances from the foreign disregarded entity treated as made to the	dırect	owner?			
4	Did the tax owner change its method of accounting for section 987 gain or loss version the foreign disregarded entity during the tax year?		espect to remittance	:S		No
	hedule F Balance Sheet					
	portant: Report all amounts in U.S. dollars computed in functional c					
<u>acc</u>	ordance with U.S. GAAP. See instructions for an exception for foreign	1 4151	(a)	triat		b)
	Assets		Beginning of ani accounting per		End o	annual ing period
1	Cash and other current assets	. 1	3	6,712		42,874
2	Other assets	. 2	2	6,321		26,321
3	Total assets	. 3	6	3,033		69,195
	Liabilities and Owner's Equity					
4	Liabilities	. 4		530		17,737
5	Owner's equity	. 5		2,503		51,458
6	Total liabilities and owner's equity	. 6	+	3,033		69,195
	hedule G Other Information	.   •		3,033		
					Yes	No
1	During the tax year, did the foreign disregarded entity own an interest in any trus	st?.				No
2	During the tax year, did the foreign disregarded entity own at least a 10% intereforeign partnership?	st, dıı	rectly or indirectly, i	n any		No
3	Answer the following question only if the foreign disregarded entity made its election from its owner during the tax year: Did the tax owner claim a loss with respect to disregarded entity as a result of the election?					
4	Answer the following question only if the foreign disregarded entity is owned directle corporation and the foreign disregarded entity incurred a net operating loss for the tadisregarded entity a separate unit as defined in Regulations sections 1 1503(d) instructions)	ax yeal	r: Is the foreign			
5	Answer the following question only if the tax owner of the foreign disregarded entity corporation (CFC): Were there any intracompany transactions between the foreign CFC or any other branch of the CFC during the tax year, in which the foreign disr manufacturing, selling, or purchasing branch?	disre egard	garded entity and the dedentity acted as a			
	hedule H Current Earnings and Profits or Taxable Income (see					
	portant: Enter the amounts on lines 1 through 6 in functional cui	rrenc	<i>'y.</i> T			
1	Current year net income or (loss) per foreign books of account			1	-	22,677,977
2	Total net additions			2		
3	Total net substractions			3		22.677.077
4	Current earnings and profits (or taxable income—see instructions) (line 1 plus li	ne ∠ r	minus iine 3)	4	-	22,677,977
5	DASTM gain or loss (if applicable)			5		22 677 077
6	Combine lines 4 and 5	 		6	-	22,677,977
7	Current earnings and profits (or taxable income) in U.S. dollars (line 6 translated exchange rate determined under section 989(b) and the related regulations (see			7		-468,755

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Form **8858**(Rev December 2008)

Information Return of U.S. Persons With Respect To Foreign Disregarded Entities

OMB No 1545-1910

See separate instructions.

Department of the Treasury
Internal Revenue Service

Information furnished for the foreign disregarded entity's annual accounting period (see instructions) beginning 07-01-2008, and ending 06-30-2009

Attachment Sequence No **140** 

Name of person filing this return
INSTITUTE FOR THE INTERNATIONAL ED OF STUDENTS
Students
Number, street, and room or suite no (or P O box number if mail is not delivered to street address)
33 N LASALLE 15TH FLOOR

City or town, state, and ZIP code CHICAGO, IL, 60602

Filer's tax year beginning 2008-07-01 , and ending 2009-06-30

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

- Name and address of foreign disregarded entity **b** US identifying number, if any IES FOUNDATION (QUITO ECUADOR) REPUBLICA DE EL SÁLVADOR 3RD PISO EDIFICIO SAN SALVADO, QUITO N34-229 Y MOSCU **d** Date(s) of organization e Effective date as foreign c Country(ies) under whose laws organized and entity type under local tax law disregarded entity 2005-09-27 2005-09-27 ECUADOR, NOT FOR PROFIT If benefits under a U.S. tax treaty were claimed Country in which principal Principal business activity Functional currency with respect to income of the foreign disregarded business activity is conducted **EDUCATION** entity, enter the treaty and article number US DOLLAR
- Provide the following information for the foreign disregarded entity's accounting period stated above
- Name, address, and identifying number of branch office or agent (if any) in the United States

Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the foreign disregarded entity, and the location of such books and records, if different

WILLIAM J MARTENS

Custodian Address

Location

- 3 For the tax owner of the foreign disregarded entity (if different from the filer) provide the following
- a Name and address

  b Annual accounting period covered by the return (see instructions) to

  c U S identifying number, if any the return (see instructions) to

  d Country under whose laws organized
- For the **direct owner** of the foreign disregarded entity (if different from the tax owner) provide the following
- a Name and address

  b Country under whose laws organized

  c U S identifying number, if any

  d Functional currency
- Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity and each entity in which the foreign disregarded entity has a 10% or more direct or indirect interest. See instructions

## Schedule C Income Statement (see instructions)

**Important:** Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM.

			Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	1		812
2	Cost of goods sold	2		
3	Gross profit (subtract line 2 from line 1)	3		812
4	Other Income	4		
5	Total income (add lines 3 and 4)	5		812
6	Total deductions	6		752,632
7	Other adjustments	7		
8	Net income (loss) per books	8		-751,820

Sc	hedule C-1 Section 987 Gain or Loss Information					Page Z
			(a) Amount stated in functional currency foreign disregarded e	of	A mount function	b) stated in Il currency cipient
1	Remittances from the foreign disregarded entity	1		0		0
2	Section 987 gain (loss) of recipient	2				0
	•				Yes	No
3	Were all remittances from the foreign disregarded entity treated as made to the o	dırect	owner?			
4	Did the tax owner change its method of accounting for section 987 gain or loss verifrom the foreign disregarded entity during the tax year?	with re		s .		No
	hedule F Balance Sheet					
	portant: Report all amounts in U.S. dollars computed in functional c					
<u>acc</u>	ordance with U.S. GAAP. See instructions for an exception for foreign	1 aisi		tnat		
	Assets		(a) Beginning of ani accounting per		End o	( <b>b)</b> fannual ing period
1	Cash and other current assets	. 1		8,850		42,356
2	Other assets	. 2	8	8,505		111,091
3	Total assets	. 3	9	7,355		153,447
	Liabilities and Owner's Equity					
4	Liabilities	. 4	2	0,611		15,318
5	Owner's equity	. 5	7	6,744		138,129
6	Total liabilities and owner's equity	. 6	9	7,355		153,447
Scl	hedule G Other Information		•			
					Yes	No
1	During the tax year, did the foreign disregarded entity own an interest in any trus	st?.				No
2	During the tax year, did the foreign disregarded entity own at least a 10% intere foreign partnership?	st, dıı •	rectly or indirectly, i	n any		No
3	Answer the following question only if the foreign disregarded entity made its election from its owner during the tax year: Did the tax owner claim a loss with respect to disregarded entity as a result of the election?					
4	Answer the following question only if the foreign disregarded entity is owned directly corporation and the foreign disregarded entity incurred a net operating loss for the tadisregarded entity a separate unit as defined in Regulations sections 1 1503(d) instructions)	x year	r: Is the foreign			
5	Answer the following question only if the tax owner of the foreign disregarded entity corporation (CFC): Were there any intracompany transactions between the foreign CFC or any other branch of the CFC during the tax year, in which the foreign disr manufacturing, selling, or purchasing branch?	dıs re egard	garded entity and the			
	hedule H Current Earnings and Profits or Taxable Income (see		•			
<u>Im</u>	<b>portant:</b> Enter the amounts on lines 1 through 6 in functional cur	renc	<i>y.</i>			
1	Current year net income or (loss) per foreign books of account			1		-751,820
2	Total net additions			2		
3	Total net substractions			3		
4	Current earnings and profits (or taxable income—see instructions) (line 1 plus li	ne 2 r	minus line 3)	4		-751,820
5	DASTM gain or loss (if applicable)			5		
6	Combine lines 4 and 5		[	6		-751,820
7	Current earnings and profits (or taxable income) in U S dollars (line 6 translated exchange rate determined under section 989(b) and the related regulations (see Enter exchange rate used for line 7 🕨 1 0			7		-751,820

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Form **8858**(Rev December 2008)

Information Return of U.S. Persons With Respect To Foreign Disregarded Entities

OMB No 1545-1910

DLN: 93493040011530

See separate instructions.

Department of the Treasury
Internal Revenue Service
Instructions beginning 07

Information furnished for the foreign disregarded entity's annual accounting period (see instructions) beginning 07-25-2008, and ending 06-30-2009

Attachment Sequence No **140** 

Name of person filing this return
INSTITUTE FOR THE INTERNATIONAL ED OF STUDENTS
Students

Number, street, and room or suite no (or P O box number if mail is not delivered to street address)

Number, street, and room or suite no (or P O box number if mail is not delivered to street address; 33 N LASALLE 15TH FLOOR

City or town, state, and ZIP code CHICAGO, IL, 60602

Filer's tax year beginning 2008-07-01 , and ending 2009-06-30

Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated.

- Name and address of foreign disregarded entity INST FOR THE INTL ED OF STUDENTS34 LOVERS WALK LOWER CAMPUS **b** US identifying number, if any RONDEBOSCH Country(les) under whose laws organized and entity type under local tax law **d** Date(s) of organization e Effective date as foreign disregarded entity 2008-07-25 2008-07-25 SOUTH AFRICA, NOT FOR PROFIT If benefits under a U.S. tax treaty were claimed Country in which principal Principal business activity Functional currency with respect to income of the foreign disregarded business activity is conducted **EDUCATION** entity, enter the treaty and article number
- Provide the following information for the foreign disregarded entity's accounting period stated above
- Name, address, and identifying number of branch office or agent (if any) in the United States

Name and address (including corporate department, if applicable) of person(s) with custody of the books and records of the foreign disregarded entity, and the location of such books and records, if different

WILLIAM J MARTENS

CustodianAddress

Location

- 3 For the tax owner of the foreign disregarded entity (if different from the filer) provide the following
- a Name and address

  b Annual accounting period covered by the return (see instructions) to

  c U S identifying number, if any the return (see instructions) to
  - d Country under whose laws e Functional currency organized
  - For the **direct owner** of the foreign disregarded entity (if different from the tax owner) provide the following
- a Name and address

  b Country under whose laws organized

  c U S identifying number, if any

  d Functional currency
- Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity and each entity in which the foreign disregarded entity has a 10% or more direct or indirect interest. See instructions

#### Schedule C Income Statement (see instructions)

**Important:** Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM.

			Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)	1	17,960	1,964
2	Cost of goods sold	2		
3	Gross profit (subtract line 2 from line 1)	3	17,960	1,964
4	Other income	4		
5	Total income (add lines 3 and 4)	5	17,960	1,964
6	Total deductions	6	3,465,031	378,989
7	Other adjustments	7		
8	Net income (loss) per books	8	-3,447,071	-377,025

Sc	chedule C-1 Section 987 Gain or Loss Informa	tion						rage <b>=</b>
					(a) Amount stated in functional currency foreign disregarded e	of	A mount functiona	b) stated in I currency sipient
1	Remittances from the foreign disregarded entity			1		0		0
2	Section 987 gain (loss) of recipient			2				0
							Yes	No
3	Were all remittances from the foreign disregarded entity tre	eated as mad	e to the	dırect	owner?	[		
4	Did the tax owner change its method of accounting for sect from the foreign disregarded entity during the tax year?	tion 987 gain			espect to remittance	es .		No
	hedule F Balance Sheet							
	portant: Report all amounts in U.S. dollars comput							
acci	cordance with U.S. GAAP. See instructions for an ex	ксерион тог	roreigi	1 aisi	(a)	unau		(b)
	Assets				Beginning of an accounting pei		End o	fannual ing period
1	Cash and other current assets			. 1	2	5,388		0
2	Other assets			. 2		564		
3	Total assets			. 3	2	5,952		0
	Liabilities and Owner's Equit	у						
4	Liabilities			. 4	1	4,056		0
5	Owner's equity			. 5		1,896		
6	Total liabilities and owner's equity			. 6		5,952		0
Sch	hedule G Other Information				l			
							Yes	No
1	During the tax year, did the foreign disregarded entity own	an interest ir	any tru	st?.				No
2	During the tax year, did the foreign disregarded entity own foreign partnership?	at least a 10	% intere	st, dıı	rectly or indirectly,	n any		No
3	Answer the following question only if the foreign disregarded from its owner during the tax year: Did the tax owner claim a disregarded entity as a result of the election?							No
4	Answer the following question only if the foreign disregarded corporation and the foreign disregarded entity incurred a net of disregarded entity a separate unit as defined in Regulation instructions)	pperating loss	for the ta	ax year	r: Is the foreign			
5	Answer the following question only if the tax owner of the fore corporation (CFC): Were there any intracompany transaction CFC or any other branch of the CFC during the tax year, in manufacturing, selling, or purchasing branch?	ns between th which the for	e foreigr eign disi	disre egard	garded entity and the dedentity acted as a			
	hedule H Current Earnings and Profits or Taxa				<u> </u>			
	portant: Enter the amounts on lines 1 through		onal cui	rrenc	<i>y.</i>			
1	Current year net income or (loss) per foreign books of acco	ount				1		-3,447,071
2	Total net additions					2		
3	Total net substractions					3		2 4 4 7 0 7 4
4	Current earnings and profits (or taxable income—see instru	uctions) (line	I plus li	ne ∠ r	minus iine 3)	4		-3,447,071
5	DASTM gain or loss (if applicable)					5		2 4 4 7 0 7 1
6	Combine lines 4 and 5	llare (line 6 t	ranciat-			6		-3,447,071
7	Current earnings and profits (or taxable income) in U S do exchange rate determined under section 989(b) and the re Enter exchange rate used for line 7 - 9 1428					7		-377,025

#### DLN: 93493040011530 Information Return of U.S. Persons With

(Rev December 2008)

Respect To Foreign Disregarded Entities

OMB No 1545-1910

See separate instructions.

Information furnished for the foreign disregarded entity's annual accounting period (see instructions) beginning 07-01-2008, and ending 06-30-2009

Department of the Treasury Attachment Sequence No 140 Internal Revenue Service Name of person filing this return Filer's identifying number INSTITUTE FOR THE INTERNATIONAL ED OF STUDENTS 36-2251912 Students Number, street, and room or suite no (or P O box number if mail is not delivered to street address) 33 N LASALLE City or town, state, and ZIP code CHICAGO, IL, 60602 Filer's tax year beginning 2008-07-01, and ending 2009-06-30Important: Fill in all applicable lines and schedules. All information must be in English. All amounts must be stated in U.S. dollars unless otherwise indicated. Name and address of foreign disregarded entity INST FOR THE INTL ED OF STUDENTS PTY33 N LASALLE 15TH FLOOR **b** US identifying number, if any CHICAGO, IL 60602 c Country(ies) under whose laws organized and entity type under local tax law **d** Date(s) of organization e Effective date as foreign disregarded entity 2006-08-24 2006-08-24 AUSTRALIA, NOT FOR PROFIT If benefits under a U.S. tax treaty were claimed Country in which principal Principal business activity Functional currency with respect to income of the foreign disregarded business activity is conducted **EDUCATION** entity, enter the treaty and article number Provide the following information for the foreign disregarded entity's accounting period stated above Name and address (including corporate department, if Name, address, and identifying number of branch office or agent | **b** (If any) in the United States applicable) of person(s) with custody of the books and records of the foreign disregarded entity, and the location of such books and records, if different WILLIAM J MARTENS CustodianAddress Location For the tax owner of the foreign disregarded entity (if different from the filer) provide the following Name and address c US identifying number, if any Annual accounting period covered by the return (see instructions) to Country under whose laws e Functional currency organized For the direct owner of the foreign disregarded entity (if different from the tax owner) provide the following Name and address **b** Country under whose laws US identifying number, if c organized d Functional currency

Attach an organizational chart that identifies the name, placement, percentage of ownership, tax classification, and country of organization of all entities in the chain of ownership between the tax owner and the foreign disregarded entity, and the chain of ownership between the foreign disregarded entity and each entity in which the foreign disregarded entity has a 10% or more direct or indirect interest. See instructions

#### Income Statement (see instructions) Schedule C

Report all information in functional currency in accordance with U.S. GAAP. Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules or the average exchange rate determined under section 989(b)). If the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for foreign disregarded entities that use DASTM.

If y	ou are using the average exchange rate (determined under sectior	9	89(b)	), check the following	g box
				Functional Currency	U.S. Dollars
1	Gross receipts or sales (net of returns and allowances)		1	0	0
2	Cost of goods sold		2		
3	Gross profit (subtract line 2 from line 1)		3	0	0
4	Other income		4		
5	Total income (add lines 3 and 4)		5	0	0
6	Total deductions		6		
7	Other adjustments		7		
8	Net income (loss) per books		8	0	0

Sc	hedule C-1 Section 987 Gain or Loss Information						rage <b>=</b>	
				(a) Amount stated in functional currency o foreign disregarded en		A mount functiona	stated in I currency ipient	
1	Remittances from the foreign disregarded entity	. 1			0		0	
2	Section 987 gain (loss) of recipient	. 2	: [				0	
						Yes	No	
3	Were all remittances from the foreign disregarded entity treated as made to th	e dıre	cto	wner?	. [			
4	Did the tax owner change its method of accounting for section 987 gain or lose from the foreign disregarded entity during the tax year?		res •	pect to remittances	5	Yes		
	hedule F Balance Sheet							
	portant: Report all amounts in U.S. dollars computed in functional							
acci	ordance with U.S. GAAP. See instructions for an exception for foreign	gri ai	1516	(a)	uiat	(b)		
	Assets			Beginning of ann accounting perio		End of	annual ng period	
1	Cash and other current assets		1		0		0	
2	Other assets	. [	2					
3	Total assets		3		0		0	
	Liabilities and Owner's Equity							
4	Liabilities		4		0		0	
5	Owner's equity	.	5					
6	Total liabilities and owner's equity		6		0		0	
Sch	hedule G Other Information	ı						
						Yes	No	
1	During the tax year, did the foreign disregarded entity own an interest in any ti	ust?					No	
2	During the tax year, did the foreign disregarded entity own at least a 10% inte	rest,	dıre •	ctly or indirectly, in	any •••		No	
3	Answer the following question only if the foreign disregarded entity made its elect from its owner during the tax year: Did the tax owner claim a loss with respect t disregarded entity as a result of the election?			No				
4	Answer the following question only if the foreign disregarded entity is owned direct corporation and the foreign disregarded entity incurred a net operating loss for the disregarded entity a separate unit as defined in Regulations sections 1 1503(instructions)							
5	Answer the following question only if the tax owner of the foreign disregarded enticorporation (CFC): Were there any intracompany transactions between the foreign dispersion of the CFC during the tax year, in which the foreign disparding, selling, or purchasing branch?	gn dis	reg	arded entity and the	e • •			
	hedule H Current Earnings and Profits or Taxable Income (se							
	portant: Enter the amounts on lines 1 through 6 in functional c	urrei	ncy	<u>,                                      </u>	. 1			
1	Current year net income or (loss) per foreign books of account	•	•		1		0	
2	Total net additions	•	•		2			
3	Total net substractions		•		3			
4	Current earnings and profits (or taxable income—see instructions) (line 1 plus	iine 2	∠ m	inus line 3)	4		0	
5	DASTM gain or loss (if applicable)	•	•		5			
6	Combine lines 4 and 5	• • • • • • •	•		6		0	
7	Current earnings and profits (or taxable income) in U.S. dollars (line 6 translatexchange rate determined under section 989(b) and the related regulations (s.e., Enter exchange rate used for line 7.				7		0	