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DLN: 93493198018707

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

► Information about Form 990 and its instructions is at <u>www IRS qov/form990</u>

OMB No 1545-0047 2015

Open to Public Inspection

A F	or the	2 015 ca	lendar year, or tax year begir	nning 09-01-2015 , and ending 08-31-20	16			
B Ch	eck ıf a	pplicable	C Name of organization CIEE Inc			D Emplo	yer id	entification number
_		change				13-4	3890)7
_	ame ch iitial ret	-	Doing business as					
Fi		Lurn				E Teleph	one nur	mber
return,	/termır		Number and street (or P O box 300 Fore Street	if mail is not delivered to street address) Room/s	uite			
		return		country, and ZID as favoran nactal and		(207)	553-	4000
Ap	plicatio	n pending	Portland, ME 04101	country, and ZIP or foreign postal code		G Gross	receipts	\$ \$ 143,339,233
			F Name and address of prii	ncipal officer	H(a) 1	s this a group	rotur	n for
			James P Pellow		I	s this a group ubordinates?		⊤ Yes 🔽
			300 Fore Street Portland, ME 04101			No		
r Ta	x-exer	npt status		◀ (insert no) 4947(a)(1) or 527		Are all subord ncluded?	ınates	⊤Yes
				4 (msetcho) 4547(a)(1) 01 327			n a list	(see instructions)
, w	ebsite	e:► ww	w ciee org		H(c)	Group exempt	tion ni	ımber 🕨
K For	n of or	ganızatıon	Corporation Trust Ass	sociation	L Year	of formation 19	99	State of legal domicile DE
Da	rt I	Sum	ımary					
	1			sion or most significant activities				
			-	programs and student and professional in	tercultural	exchange pr	ogram	s
Ce	_							
Ě	_							
E E]	Chack th	nic how • 🗆 if the organization	n discontinued its operations or disposed	of more th	2 5 9/2 of the	not s	occotc .
Governance	- '	CHECK	iis box P II tile organizatio	n discontinued its operations or disposed	or more tr	Idii 25 % OF IC	s net a	155615
	3	Number	of voting members of the gove	erning body (Part VI, line 1a)			3	16
ě	4	Number	of independent voting membe	rs of the governing body (Part VI, line 1b)		4	16
₹	5	Total nui	mber of individuals employed	ın calendar year 2015 (Part V, line 2a)			5	501
Activities &	6	Total nui	mber of volunteers (estimate	ıf necessary)			6	16
•	7a -	Total uni	related business revenue fron	n Part VIII, column (C), line 12			7a	0
	b N	et unrela	ated business taxable income	e from Form 990-T, line 34			7b	0
						Prior Year		Current Year
۵.	8	Contr	ibutions and grants (Part VII	I, line 1h)		1,618,	862	2,957,605
E S	9	Progra	am service revenue (Part VII	I, line 2g)	·	130,661,	577	138,428,295
Ravenua	10		·	umn (A), lines 3, 4, and 7d)		1,689,	_	2,376,626
_	11			(A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	413,	403	-426,313
	12	10tai 12)	revenue—add lines 8 through	11 (must equal Part VIII, column (A), lii	ne	134,383,	053	143,336,213
	13	Grant	s and similar amounts paid (P	Part IX, column (A), lines 1-3)		3,322,	108	5,748,233
	14	Benef	its paid to or for members (Pa	art IX, column (A), line 4)			0	0
s	15			loyee benefits (Part IX, column (A), lines		28,220,	117	40,866,464
Expenses	16-	5-10	,	IV solumn (A) lime (1.1.a)			0	0
рeя	16a		- '	IX, column (A), line 11e)	•			
Δ	17		undraising expenses (Part IX, column	A), lines 11a-11d, 11f-24e)	-	97,546,	202	89,436,592
	17 18			(must equal Part IX, column (A), line 25)	•	129,088,		136,051,289
	19		·	ine 18 from line 12		5,294,		7,284,924
<u>≽ &</u>			Impensos oubtracti					End of Year
Net Assets or Fund Balances					beginn	ing of Current		
Ass Bal	20		assets (Part X, line 16) .			112,649,		137,697,094
ž Ž	21				•	60,126,		76,128,307
	22	_		act line 21 from line 20		52,522,	102	61,568,787
	r t II r pena		nature Block perjury. I declare that I have	examined this return, including accompa	nvina sche	edules and sta	ateme	nts, and to the hest of
my k	nowle	dge and		complete Declaration of preparer (other t				
			***			2047.07.15		
Sigr			ature of officer			2017-07-17 Date		
Sigr Her		Time	Propp CFO					
			e or print name and title					
			Print/Type preparer's name		Date	Check I if	PTIN	10457
Paid	d	L	Barbara J McGuan CPA	Barbara J McGuan CPA	2017-07-17	self-employed		19457
	pare	? Γ ⊢	Firm's name Berry Dunn McNeil	& Parker LLC		Firm's EIN ▶ 0		
	On		Firm's address ► PO Box 1100			Phone no (207	7) 775-:	2387
		·	Portland, ME 0410	041100				

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

t IV Checklist of Required Schedules (continued)			
			No
domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		
IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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
Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Pait I	25b		No
Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28 c		No
Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note. All Form 990 filers are required to complete Schedule O	38	Yes	
	Did the organization report more than \$5,00 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule 1, Parts 1 and III. Did the organization answer "Yes" to Part VII, Section A, Jine 3, 4, or 5 about compensation of the organization's current and former officiers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I. Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 on so of the last day of the year, that was issued after December 31, 2002? If "Yes," aware lines 24b through 24d and complete Schedule K. If "No," go to line 25a. Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? Did the organization maintain an escrow account other than a refunding escrow at any time during the year? Section 501(C(3), 501(C)(4), and 501(C)(29) organizations. Did the organization and a single of the scrow account other than a refunding escrow at any time during the year? If "Yes," complete Schedule I., Part I. Is the organization engage in an excess benefit transaction with a disqualified person uning the year? If "Yes," complete Schedule I., Part II. Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 990 or 990-E2? If "Yes," complete Schedule I., Part II. Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I., Part II. Was the organization provide a grant or other assistance to an officer, director, trustee, key employee? If "Yes," complete Schedule I., Part II. Did the organization	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or comestic government on Part IX, column (A), line 12 if "res", "complete Schedule I, Parts I and II 22 IX, column (A), line 12 if "Yes", complete Schedule I, Parts I and II 23 IX, column (A), line 12 if "Yes", complete Schedule I, Parts I and III 24 IX, column (A), line 12 if "Yes", complete Schedule I, Parts I and III 25 IX, column (A), line 12 if "Yes", complete Schedule I, Parts I and III 26 IX, column (A), line 12 if "Yes", complete Schedule I, Parts I and III 27 IX, column (A), line 12 if "Yes", complete Schedule I, Parts I and III 28 Complete Schedule II and the organization of the organization of the organization of the organization aware I as a set the last day of the year, I that was issued after December 31, 2002? If "Yes," answer lines 240 through 24d and complete Schedule II "Yes", or to line 25a 29 Did the organization mentain an escrew account other than a refunding escrew at any time during the year? 20 Did the organization mentain an escrew account other than a refunding escrew at any time during the year? 21 Did the organization means are not behalf of "issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule I, Part II 22 Did the organization areas are not behalf of "issuer for bonds outstanding at any time during the year? If "Yes," complete Schedule I, Part II 22 Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior forms 990 or 990-E27 23 Did the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization or popyables to any current or former officer schedule I, Part II 25 Did the organization report any amounts on Part X, line 5, 6, or 22 for receivables from or payables to	Dot the organization report more than \$5,000 of grants or other assistance to any demestic organization or comestic movement or Part IX, column (A), line 12 if Yes, "complete Schedule I, Parts I and III. Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 22 if Yes," complete Schedule I, Parts I and III. Did the organization answer Yes* to Part VII.; section A, line 3, 4, or 5 about compensation of the organization according to the complete Schedule II. Did the organization answer Yes* to Part VII. Section A, line 3, 4, or 5 about compensation of the organization and former officers, directors, trustees, key employees, and highest compensated employees 3 if Yes, and of the last Cay of the year, first way is issued after December 31, 2002 if Yes," answer lines 24th through 24d and complete Schedule II. Will way issued after December 31, 2002 if Yes," answer lines 24th through 24d and complete Schedule III Yes, go to line 25s. Did the organization meant an an escrow account other than a refunding escrow at any time during the year? 24d Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d Did the organization organization and the state of the

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u> </u>	. 🗸
	Enterthe number and the Day 2 of Enterthe Option to Start and the Land		Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 82 Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	AS , BE , BC , BR , CI , CH , CS , EZ , DR , FR , GM , GH , HU , IN , EI , IT , JA , JO , KS , MX , MO , NL , PE , PL , PO , RS , SG , SF , SP , SW , TW , TZ , TH , TU , AE , UK ,			
	If "Yes," enter the name of the foreign country ►CA, IS, LG			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		No
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
-	year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
L4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	İ	No
	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure

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

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 16			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
a	Did the organization have local chapters, branches, or affiliates?	10 a		Νo
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
la	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12 c	Yes	
3	Did the organization have a written whistleblower policy?	13	Yes	
ŀ	Did the organization have a written document retention and destruction policy?	14	Yes	
5	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	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
ā	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
_	organization's exempt status with respect to such arrangements?	16 b		
	ction C. Disclosure			
7	List the States with which a copy of this Form 990 is required to be filed ► NY , CA			
8	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 made these available. Check all that apply			
9	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			
n	State the name address, and telephone number of the person who possesses the organization's books and record	s		

▶Tim Propp CFO 300 Fore Street Portland, ME 04101 (207) 553-4060

Part VII

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	verage Position (do not check purs per more than one box, unless eek (list person is both an officer and a director/trustee) Reportable compensation from the organization (W- organizations)								(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										
			_							
										Form 990 (2015)

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

	(A) Name and Title	(B) Average hours per week (list any hours	more t	than o	one both	not o box, n an	check unles: officer istee)	3	Repo compe fror organiz	D) ortable ensation in the ation (W-	(E) Reportable compensation from related organizations (W	٧-	(F) Estima amount o compens from t	ited fother sation the
		for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099	∍-MISC)	2/1099-MISC) 0	rganizati relati organiza	ed
See	Addıtıonal Data Table													
												\top		
												\top		
												\top		
												\top		
												\top		
												\top		
												\top		
												\top		
												\top		
												\top		
1b c d	Sub-Total Total from continuation sheet Total (add lines 1b and 1c) .		ection A	۸.					3,2	76,418	0			362,477
2	Total number of individuals (in						d abov	e) wl			nan			· ·
	\$100,000 of reportable comp	ensation from th	e organ	ızatıd	on 🟲	36								
													Yes	No
3	Did the organization list any f oon line 1a? <i>If "Yes," complete S</i>					key	emplo	yee,	or highes	st compen	sated employee			
4	For any individual listed on lin					• mpe	nsatio	n and	other co	mpensatio	on from the	3	Yes	
	organization and related organ	izations greater	than \$	150,	000	ìf د	"Yes,"	comp	lete Sched	dule J for s	uch	4	Vas	
5	Did any person listed on line 1	a receive or acc	rue cor	npen	satı	- on fr	om an	unr	elated or	ganızatıon	or individual for	_	Yes	
	services rendered to the organ	nization? <i>If "Yes,</i>	" comple	ete Sc	chedi	ule J	for suc	h pe	rson .			5		No
Se	ection B. Independent Co	ntractors												
1	Complete this table for your fire	ve highest comp											tay year	
		(A)		ation	101	tile (alenu	ai ye	ar enumy	Τ	(B)		(C)
Pro S	earch Inc	lame and business	address							Temporary	cription of services Staffing	+	Comper 1	,119,020
	enter Street and, ME 04112													
	om House Square Condo Association									Property M	anagement	\dashv		326,392
	Canal Plaza and, ME 04101													
	Il egic									Marketing/	Conculting	-+		203 081

Name and business address	Description of services	Compensation
Pro Search Inc	Temporary Staffing	1,119,020
70 Center Street Portland, ME 04112		
Custom House Square Condo Association	Property Management	326,392
One Canal Plaza Portland, ME 04101		
BrandLogic	Marketing/Consulting	293,981
122 W 27th Street 9th Floor New York, NY 10001		
Spelman College	Educational Services	292,633
350 Spelman Lane SW Atlanta, GA 30314		
Travisa	Visa/Passport Services	246,113
1519 New Hampshire Ave NW Washington, DC 20036		

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 13

Part V	* + + +	Statement o	of Revenue					
		Check If Sched	ule O contains a respoi	nse or note to any lir	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
0	1a	Federated cam	paigns 1a					
nts	ь	Membership du	ues 1b					
3ra nou		·						
s. (An	С	Fundraising ev						
3ift Iar	d	Related organiz	zations 1d					
s, (e	Government grant	rs (contributions) 1e	200,000				
Contributions, Gifts, Grants and Other Similar Amounts	f		ons, gifts, grants, and 1f	2,757,605	i			i i
but the		similar amounts no			ļ			
i j	g	1a-1f \$	ions included in lines	1,868,548				
Col	h	Total. Add line:	s 1a-1f		2,957,605			
				Business Code				
ž	2a	International Study	y Fees	611710	137,928,683	137,928,683		
Program Service Revenue	ь	Membership Fees		611710	499,612	499,612		
υ. Ε	С							
<u>₹</u>	d							
ν Σ	е							
graf	f	All other progra	am service revenue					
ď	_	Total Add line	s 2a-2f	•	129 429 205			
			come (including dividen		138,428,295			
			ar amounts)		996,130			996,130
	4	Income from inves	stment of tax-exempt bond	proceeds >				
	5	Royalties .		•				
		C	(ı) Real	(II) Personal				
	6a	Gross rents						
	ь	Less rental expenses						
	С	Rental income						
	d	or (loss) Net rental inco	me or (loss)	•				
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	1,383,516					
	ь	Less cost or						
		other basis and sales expenses	0	3,020				
	С	Gain or (loss)	1,383,516	-3,020				
	d		ss)		1,380,496			1,380,496
Other Revenue	8a	events (not inc \$ of contributions	s reported on line 1c)					
<u>. </u>		See Part IV, lir	ne 18 a					
the the	ь	Less direct ex	penses b					
0	С		(loss) from fundraising	events >				
	9a		from gaming activities ne 19 a					
	l		penses b (loss) from gamıng actı	vities				
	10a	Gross sales of	inventory, less	P				
		returns and allo						
		_	a					
	b	_	loods sold b					
	├	Miscellaneou	(loss) from sales of inv	Business Code				
	11a	Foreign Exchar		900099	-113,187			-113,187
	ь	Forward Contra		900099	-313,126			-313,126
	c	1 OTWATE COILL	ACCO EAC EUSS		, ==			,
	d	All other reven	ue					
	e		s 11a-11d	▶				
	12		See Instructions .		-426,313			
		.o.a. ievellue.	Sectionactions :	· · · · •	143,336,213	138,428,295	C	1,950,313

Part IX Statement of Functional Expenses

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

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

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22	5,742,408	5,742,408		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15				
_	and 16	5,825	5,825		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,385,621	1,456,203	929,418	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	30,873,594	27,257,437	3,616,157	
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	532,364	218,804	313,560	
9	Other employee benefits	4,281,164	4,114,037	167,127	
10	Payroll taxes	2,793,721	2,403,091	390,630	
11	Fees for services (non-employees)	2,793,721	2,403,091	390,030	
	, , , ,				
a	Management	600 642		600 643	
b	Legal	699,643		699,643	
C	Accounting	444,878	02.026	444,878	
d	Lobbying	83,926	83,926		
e	Professional fundraising services See Part IV, line 17	160 126		160 126	
f	Investment management fees Other (If line 11g amount exceeds 10% of line 25, column (A)	168,126		168,126	
g	amount, list line 11g expenses on Schedule O)	1,444,494	224,957	1,219,537	
12	Advertising and promotion	2,888,477	2,710,325	178,152	
13	Office expenses	2,000,639	904,268	1,096,371	
14	Information technology	1,121,955		1,121,955	
15	Royalties				
16	Occupancy	3,644,296	2,410,398	1,233,898	
17	Travel	3,047,744	240,844	2,806,900	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	972,046	335,170	636,876	
20	Interest	530,805		530,805	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,426,358		4,426,358	
23	Insurance	552,825	197,111	355,714	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Site Expenses	66,707,721	66,485,816	221,905	
b	Repairs & Maintenance	313,613		313,613	
c	Membership Dues & Subsc	218,115		218,115	
d	Bad Debt	170,931		170,931	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	136,051,289	114,790,620	21,260,669	(
26	Joint costs.Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Fai	τx	Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	2,984,881	1	4,743,972
	2	Savings and temporary cash investments	20,945,862	2	29,692,466
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	15,643,974	4	19,802,273
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			
				5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		_	
\ss	_			6	
•	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	7 500 710	8	7 (0) 000
	9 10a	Prepaid expenses and deferred charges	7,582,740	9	7,181,026
		Complete Part VI of Schedule D 10a 38,088,763			
	b	Less accumulated depreciation 10b 12,567,730	20,414,792	10c	25,521,033
	11	Investments—publicly traded securities	36,153,795	11	38,045,989
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets	899,447	14	899,447
	15	Other assets See Part IV, line 11	8,023,543	15	11,810,888
	16	Total assets.Add lines 1 through 15 (must equal line 34)	112,649,034	16	137,697,094
	17	Accounts payable and accrued expenses	29,540,856	17	13,230,694
	18	Grants payable	20 672 447	18	24 552 646
	19	Deferred revenue	22,672,147	19 20	31,553,646
	20	Tax-exempt bond liabilities			
Ñ	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
ap		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	4,728,722	23	27,559,529
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			
			3,185,207	25	3,784,438
	26	Total liabilities. Add lines 17 through 25	60,126,932	26	76,128,307
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶			
alan	27	Unrestricted net assets	52,522,102	27	61,568,787
Ä	28	Temporarily restricted net assets		28	
Ē	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
\$\$6	31	Paid-in or capital surplus, or land, building or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds		32	
Se	33	Total net assets or fund balances	52,522,102	33	61,568,787
	34	Total liabilities and net assets/fund balances	112,649,034	34	137,697,094

Form	990 (2015)			l	Page 12
Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				🔽
1	Total revenue (must equal Part VIII, column (A), line 12)	1		143,3	36,213
2	Total expenses (must equal Part IX, column (A), line 25)	2		136,0)51,289
3	Revenue less expenses Subtract line 2 from line 1	3		7.2	284,924
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			522,102
5	Net unrealized gains (losses) on investments	5			217,903
6	Donated services and use of facilities	6		1,2	17,903
7	Investment expenses				
8	Prior period adjustments	7			
9	Other changes in net assets or fund balances (explain in Schedule O)	8			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,	10			543,858
Dar	t XII Financial Statements and Reporting	10		61,3	68,787
-C:	Check if Schedule O contains a response or note to any line in this Part XII				
	Check if Schedule O Contains a response of note to any fine in this Part All		<u> </u>	Yes	No
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
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	ewed or	1		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig of the audit, review, or compilation of its financial statements and selection of an independent accountant		2 c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule ${\sf O}$	n			
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?	ne	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Additional Data

Software ID: Software Version:

EIN: 13-4038907

Name: CIEE Inc.

Form 990, Part III, Line 4a

4a (Code) (Expenses \$ 114,790,620 including grants of \$ 5.748.233) (Revenue \$ 138,428,295)

For 70 years, CIEE's mission has been to develop and deliver international programs and support services to help people gain understanding, acquire knowledge, and develop skills for living in a globally interdependent and culturally diverse world. CIEE provides intercultural educational opportunities for approximately 13,000 high school and college students to study abroad each year, and approximately 26,000 participants, primarily college students, the intercultural opportunity to study and work in the United States

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

(F) Estimated amount of other

> compensation from the

organization and related organizations

0

0

0

0

0

0

0

Compensated Employees, and Inde	pendent Cor	ntracto	rs						
(A) Name and Title	(B) A verage hours per week (list any hours	Posit more the perso and a	ion (han o n is b	ne b ooth	ox, i an o	unles s fficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)
Robert E Fallon	3 50								
Chair	0 50	X		X				0	0
Thomas Mooney Vice Chair	1 75 0 25	×		×				0	0
Laura Brege Director	1 75 0 25	×						0	0
Kendall Brostuen Director	1 75 0 25	х						0	0
Kathleen Cheek-Milby Director	1 75 0 25	×						0	0
Burch Ford	1 75								

0 25 1 75

0 25 1 75

0 25 1 75

0 25 1 75

0 25

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Director

Director

Director

Director

Director

Christopher Hill

David Jones

Peter Lighte

William Martens III

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

(F) Estimated amount

of other

compensation

from the organization and

related organizations

0

0

0

0

0

54,814

24,758

29,055

32,430

793,964

343,384

311,068

244,499

(A) Name and Title	(B) Average hours per week (list any hours	Posit more the perso and a	ion (han o n is b	ne b oth	ox, ι an o	unles s fficer		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)
Larry Schall Director	1 75 0 25	×						0	0
Kathleen Sideli Director	1 75 0 25	х						0	0
Kumble Subbaswamy Director	1 75 0 25	х						0	0
Amb Marcelle Wahba Director	1 75 0 25	×						0	0
John H Yopp	1 75	х						0	0

0 25 35 00

5 00 35 00

5 00 35 00

5 00 35 00

5 00

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Director

Director

Amb Johnny Young

......

.....

James P Pellow

President & CEO

Timothy Propp

Jorge Barrosso

Brenda J Majeski

Senior Vice President

COO & CFO

Past CIO

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

(A)
(B)
(C)
(D)
(E)

Name and Title
Average
Position (do not check
Reportable

hours per

0 00 35 00

5 00 30 00

10 00 40 00

0.00

.

Past Vice President

Executive Director

Elizabeth O'Neill

David Fougere

Former Executive Vice President

Former Senior Vice President

Tuan Huynh

(F)

Estimated amount

of other

compensation

compensation

156,631

129,712

232,588

0

0

0

26,213

7,057

10,285

	week (list any hours	perso and a						from the organization (W-	from related organizations (W-	compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
Nancy Kittredge Vice President	35 00				х			224,859	0	34,580
- Vice i resident	5 00			<u> </u>		_				
Mantheresa Frain	40 00							202.645		22.566
Executive Vice President	0 00				X			202,645	0	32,566
Philip Simon	40 00									
						X		165,017	0	33,870
Vice President	0 00									
Catharine Scruggs	40 00									
						X		152,217	0	25,306
Past Executive Director	0 00									
Adriana Uribe	35 00									
						X		161,030	0	15,894
Past Director	5 00									
Anna Fincke	40 00									
						X		158,804	0	35,649

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more than one box, unless

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493198018707

SCHEDULE A (Form 990 or 990EZ) **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015
Open to Public

Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization

CIEE Inc

Total

Employer identification number

							13-4038907	
Par	t I	Reason for Publi	c Charity S	tatus (All organiza	tions must co	mplete this	part.) See instruction	ns.
The o	rganı	zation is not a private fo	oundation beca	ause it is (For lines 1	through 11, ch	eck only one	box)	
1		A church, convention	of churches, o	r association of churc	hes described i	n section 17 0	O(b)(1)(A)(i).	
2	<u></u>	A school described in	section 170(b)(1)(A)(ii).(Attach So	hedule E (Form	1990 or 990	-EZ))	
3	<u> </u>	A hospital or a cooper	ative hospital	service organization of	described in sec	tion 170(b)(1)(A)(iii).	
4	<u></u>	A medical research or	ganization ope	erated in conjunction v	vith a hospital d	lescribed in s	section 170(b)(1)(A)(iii). Enter the
	ı	hospital's name, city,	and state					
5		An organization opera 170(b)(1)(A)(iv). (Co		_	iversity owned	or operated l	by a governmental unit o	lescribed in section
6		A federal, state, or loc			described in se	ection 170(b)	(1)(A)(v).	
7 8	_	An organization that n described in section 1 A community trust des	70(b)(1)(A)(\	/i). (Complete Part II)	-	mental unit or from the o	general public
9	<u> </u>	•				•	itributions, membership	foos and gross
10	▽	receipts from activitie	es related to it it income and e 30, 1975 S	s exempt functions—sunrelated business table esection 509(a)(2).	subject to certa xable income (le (Complete Part	in exceptions ess section ! III)	s, and (2) no more than 511 tax) from businesse	331/3% of its support
11	<u> </u>			•		•	inctions of, or to carry o	ut the nurnoses of
 а	' _	one or more publicly s the box in lines 11a th Type I. A supporting o	upported orga nrough 11d tha organization op	nizations described in at describes the type o perated, supervised, o	section 509(a) of supporting or r controlled by i)(1) or sectio ganization ai ts supported	on 509(a)(2) See sectio nd complete lines 11e, 1 organization(s), typical	in 509(a)(3). Check .1f, and 11g lly by giving the
		organization You mus				ty of the dire	ctors or trustees of the	supporting
b	Г	Type II. A supporting management of the su	organization s pporting orgar	upervised or controlle nization vested in the	d in connection		ported organization(s), l r manage the supported	
c	_	must complete Part I\ Type III functionally i	•		in operated in c	onnection wi	th, and functionally inte	grated with its
•	l	supported organization						gracea men, res
d		Type III non-function	ally integrate	d. A supporting organi	zation operated	ın connectio	n with its supported org	anızatıon(s) that ıs
	•						iirement and an attentiv	eness requirement
_	_	(see instructions) You					tıs a Type I, Type II, T	uno III functionally
е	ı	integrated, or Type III					t is a Type I, Type II, T	ype III lunctionally
f	Ente	r the number of support						
g		Provide the following in	-					
Nam	e of s	(i) supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organ Insted in your docume	nızatıon governıng	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)
					Yes	No		

Pa	rt II Support Schedule for (Complete only if you Part III. If the organize	checked the bo	ox on line 5, 7, o	or 8 of Part I o	r if the organiza	ition failed to	qualify under
Se	ection A. Public Support	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			p. 0 0 0 1 0 1 0 1 1	/
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f)Total
	fiscal year beginning in)	(a)2011	(0)2012	(0)2013	(u)2014	(e) 2013	(1)1 Otal
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						
3	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
6	(f) Public support. Subtract line 5 from line 4						
Se	ection B. Total Support			1			
	Calendar year	(a)2011	(b) 2012	(c) 2013	(d)2014	(e) 2015	(f) Total
(or	fiscal year beginning in) 🟲	(a)2011	(0)2012	(0)2013	(u)2014	(e)2013	(1)1 Otal
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly						
	carried on						
10	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
11	Total support. Add lines 7						
12	through 10 Gross receipts from related activit	Les. etc. (see inst	tructions)			12	
13	First five years.If the Form 990 is			third fourth or i	fifth tax vear as a)(3) organization
	check this box and stop here	_			·		- -
Se	ection C. Computation of Pul	blic Support F	Percentage				
14	Public support percentage for 201	5 (line 6, column	(f) divided by line	11, column (f))		14	
15	Public support percentage for 2014	4 Schedule A, Pa	rt II, line 14			15	
16a	33 1/3% support test—2015. If the	organization did	not check the box	on line 13, and	line 14 is 33 1/3%	or more, chec	k this box
b	and stop here. The organization qu. 33 1/3% support test—2014. If the				, and line 15 is 33	1/3% or more	► ☐ , check this
17a	box and stop here. The organizatio 10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization me	—2015. If the organization meets the fa	anization did not c acts-and-circums	heck a box on lir tances test, chec	k this box and sto	op here. Explai	
b	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiza	nızatıon meets th	e "facts-and-circ	umstances" test	, check this box ar	nd stop here.	
18	supported organization Private foundation. If the organizat	ion did not check	a box on line 13,	. 16a, 16b, 17a, i	or 17b, check this	box and see	▶┌
	instructions						▶□

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part

	II. If the organization						
Se	ction A. Public Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f)Total
(or 1	iscal year beginning in) ► Gifts, grants, contributions, and				. ,		
-	membership fees received (Do				1 610 063	2,957,60	4,576,467
	not include any "unusual				1,618,862	2,937,00.	4,370,407
_	grants ") Gross receipts from admissions,						
2	merchandise sold or services						
	performed, or facilities furnished	93,236,815	103,421,488	119,253,797	130,661,577	138,428,29	585,001,972
	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 The value of services or						
5	facilities furnished by a						
	governmental unit to the						
_	organization without charge	22.226.045	102 121 100	110 252 707	122 200 120	111 205 201	500 570 400
6	Total. Add lines 1 through 5 Amounts included on lines 1, 2,	93,236,815	103,421,488	119,253,797	132,280,439	141,385,900	589,578,439
/a	and 3 received from disqualified				1,618,862	2,702,410	4,321,272
	persons						
b	Amounts included on lines 2						
	and 3 received from other than disqualified persons that exceed						
	the greater of \$5,000 or 1% of						0
	the amount on line 13 for the						
•	year Add lines 7a and 7b				1,618,862	2,702,410	4,321,272
8	Public support. (Subtract line 7c				1,010,002	2,702,110	
	from line 6)						585,257,167
Se	ction B. Total Support						
/ a = 4	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f)Total
-	iscal year beginning in) ▶						<u> </u>
(or 1 9 10a	iscal year beginning in) ► A mounts from line 6 Gross income from interest,	(a)2011 93,236,815	(b)2012 103,421,488	(c)2013 119,253,797	(d)2014 132,280,439	(e)2015 141,385,900	<u> </u>
9	iscal year beginning in) ► A mounts from line 6 Gross income from interest, dividends, payments received	93,236,815	103,421,488	119,253,797	132,280,439	141,385,900	589,578,439
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents,						589,578,439
9	iscal year beginning in) ► A mounts from line 6 Gross income from interest, dividends, payments received	93,236,815	103,421,488	119,253,797	132,280,439	141,385,900	589,578,439
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	93,236,815	103,421,488	119,253,797	132,280,439	141,385,900	589,578,439
9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511	93,236,815	103,421,488	119,253,797	132,280,439	141,385,900	589,578,439
9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses	93,236,815	103,421,488	119,253,797	132,280,439	141,385,900	589,578,439
9 10a	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511	93,236,815	103,421,488	119,253,797	132,280,439	141,385,900	589,578,439
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	93,236,815 593,896	103,421,488 515,785	119,253,797 632,362	132,280,439	141,385,900 996,130	589,578,439
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included	93,236,815 593,896	103,421,488 515,785	119,253,797 632,362	132,280,439	141,385,900 996,130	589,578,439
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	93,236,815 593,896	103,421,488 515,785	119,253,797 632,362	132,280,439	141,385,900 996,130	589,578,439
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	93,236,815 593,896	103,421,488 515,785	119,253,797 632,362	132,280,439	141,385,900 996,130	589,578,439
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	93,236,815 593,896 593,896	103,421,488 515,785 515,785	119,253,797 632,362 632,362	132,280,439 598,027 598,027	141,385,900 996,130 996,130	589,578,439 3,336,200 3,336,200
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	93,236,815 593,896	103,421,488 515,785	119,253,797 632,362	132,280,439	141,385,900 996,130	589,578,439 3,336,200 3,336,200
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	93,236,815 593,896 593,896	103,421,488 515,785 515,785	119,253,797 632,362 632,362	132,280,439 598,027 598,027	141,385,900 996,130 996,130	589,578,439 3,336,200 3,336,200
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9,	93,236,815 593,896 593,896	103,421,488 515,785 515,785	119,253,797 632,362 632,362	132,280,439 598,027 598,027	141,385,900 996,130 996,130	589,578,439 3,336,200 3,336,200 3,336,200
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	93,236,815 593,896 593,896 490,378 94,321,089	103,421,488 515,785 515,785 -603,002 103,334,271	119,253,797 632,362 632,362 -567,066 119,319,093	132,280,439 598,027 598,027 413,403 133,291,869	141,385,900 996,130 996,130 -426,313	589,578,439 3,336,200 3,336,200 3,336,200 3,336,200 592,600
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12)	93,236,815 593,896 593,896 490,378 94,321,089	103,421,488 515,785 515,785 -603,002 103,334,271	119,253,797 632,362 632,362 -567,066 119,319,093	132,280,439 598,027 598,027 413,403 133,291,869	141,385,900 996,130 996,130 -426,313	589,578,439 3,336,200 3,336,200 3,336,200 3,336,200 592,600
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is	93,236,815 593,896 593,896 490,378 94,321,089 for the organizat	103,421,488 515,785 515,785 -603,002 103,334,271	119,253,797 632,362 632,362 -567,066 119,319,093	132,280,439 598,027 598,027 413,403 133,291,869	141,385,900 996,130 996,130 -426,313	589,578,439 3,336,200 3,336,200 3,336,200 3,336,200 592,600
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	93,236,815 593,896 593,896 490,378 94,321,089 for the organizat	103,421,488 515,785 515,785 -603,002 103,334,271 Ion's first, second	-567,066 119,319,093 , third, fourth, or fi	132,280,439 598,027 598,027 413,403 133,291,869	141,385,900 996,130 996,130 -426,313	589,578,439 3,336,200 3,336,200 3,336,200 3,336,200 592,600
9 10a b c 11 12 13 14	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here	93,236,815 593,896 593,896 490,378 94,321,089 for the organizat blic Support F 5 (line 8, column	103,421,488 515,785 515,785 -603,002 103,334,271 Ion's first, second Percentage (f) divided by line	-567,066 119,319,093 , third, fourth, or fi	132,280,439 598,027 598,027 413,403 133,291,869	141,385,900 996,130 996,130 -426,31: 141,955,71: section 501(c)	589,578,439 3,336,200 3,336,200 3,336,200 592,222,039 (3) organization,
9 10a b c 11 12 13 14 Se 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pu Public support percentage from 20 ection D. Computation of In	93,236,815 593,896 593,896 490,378 94,321,089 for the organizat blic Support F 5 (line 8, column)14 Schedule A, livestment Incoverse	103,421,488 515,785 515,785 -603,002 103,334,271 ton's first, second Percentage (f) divided by line Part III, line 15 ome Percenta	119,253,797 632,362 632,362 -567,066 119,319,093 , third, fourth, or fi	132,280,439 598,027 598,027 413,403 133,291,869 fth tax year as a	141,385,900 996,130 996,130 -426,313 141,955,713 section 501(c)	589,578,439 3,336,200 3,336,200 3,336,200 3,336,200 3,336,200 592,222,039 (3) organization, 98 820 %
9 10a b c 11 12 13 14 Se 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pu Public support percentage from 20	93,236,815 593,896 593,896 490,378 94,321,089 for the organizat blic Support F 5 (line 8, column)14 Schedule A, livestment Incoverse	103,421,488 515,785 515,785 -603,002 103,334,271 ton's first, second Percentage (f) divided by line Part III, line 15 ome Percenta	119,253,797 632,362 632,362 -567,066 119,319,093 , third, fourth, or fi	132,280,439 598,027 598,027 413,403 133,291,869 fth tax year as a	141,385,900 996,130 996,130 -426,313 141,955,713 section 501(c)	589,578,439 3,336,200 3,336,200 3,336,200 3,336,200 3,336,200 592,222,039 (3) organization, 98 820 %
9 10a b c 11 12 13 14 Se 15 16 Se	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pu Public support percentage from 20 ection D. Computation of In	93,236,815 593,896 593,896 490,378 94,321,089 for the organizat blic Support F 5 (line 8, column 014 Schedule A, westment Incorr 2015 (line 10 c, or	103,421,488 515,785 515,785 -603,002 103,334,271 Ion's first, second Percentage (f) divided by line Part III, line 15 Come Percentage column (f) divided	119,253,797 632,362 632,362 -567,066 119,319,093 , third, fourth, or fi	132,280,439 598,027 598,027 413,403 133,291,869 fth tax year as a	141,385,900 996,130 996,130 -426,313 141,955,713 section 501(c)	589,578,439 3,336,200 3,336,200 3,336,200 592,222,039 (3) organization, 98 820 % 99 220 %
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ection C. Computation of Pu Public support percentage from 20 ction D. Computation of In Investment income percentage from 31/3% support tests—2015. If the	93,236,815 593,896 593,896 490,378 94,321,089 for the organizat blic Support F 5 (line 8, column) 14 Schedule A, l vestment Inc. r 2015 (line 10c, com 2014 Schedule ne organization did	103,421,488 515,785 515,785 -603,002 103,334,271 Ion's first, second Percentage (f) divided by line Part III, line 15 Dime Percenta column (f) divided et A, Part III, line 1 d not check the bo	119,253,797 632,362 -567,066 119,319,093 , third, fourth, or fi 13, column (f)) ge by line 13, colum. 7 x on line 14, and	132,280,439 598,027 598,027 413,403 133,291,869 fth tax year as a significant formula in the control of the con	141,385,900 996,130 -426,313 141,955,713 section 501(c) 15 16 17 18 lan 33 1/3%, ar	589,578,439 3,336,200 3,336,200 3,336,200 3,336,200 592,222,039 3) organization, 98 820 % 99 220 % 0 560 % 0 530 % dd line 17 is not
9 10a b c 11 12 13 14 Se 15 16 Se 17 18 19a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pu Public support percentage from 20 ction D. Computation of In Investment income percentage from	93,236,815 593,896 593,896 490,378 94,321,089 for the organizat blic Support F 5 (line 8, column 014 Schedule A, I vestment Inc. or 2015 (line 10c, or com 2014 Schedule de organization die and stop here. T	103,421,488 515,785 515,785 -603,002 103,334,271 Ion's first, second Percentage (f) divided by line Part III, line 15 Ome Percenta column (f) divided e A, Part III, line 1 d not check the bo	119,253,797 632,362 -567,066 119,319,093 , third, fourth, or fi 13, column (f)) ge by line 13, colum .7 x on line 14, and ualifies as a publi	132,280,439 598,027 598,027 413,403 133,291,869 fth tax year as a second or the color of the col	141,385,900 996,130 996,130 -426,313 141,955,713 section 501(c) 15 16 17 18 lan 33 1/3%, aranization	589,578,439 3,336,200 3,336,200 3,336,200 3,336,200 592,222,039 (3) organization, 98 820 % 99 220 % 0 560 % 0 530 % d line 17 is not

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and complete Part V.)

_	I, complete Sections A and D, and complete Part V)			
Se	ection A. All Supporting Organizations	1	Voc	No.
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1	Yes	No
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	3 c		
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use	1	ı	
	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
D	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?			
	If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported	4c		
5a	organization was used exclusively for section 170(c)(2)(B) purposes Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9 c		
	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10b		
.1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI

11c

Par	rt IV Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions restrictions, if any, applied to such powers during the tax year			
2	Did the organization operate for the benefit of any supported organization other than the supported organization that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) to operated, supervised or controlled the supporting organization	`		
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors of trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same per that controlled or managed the supported organization(s)			
Se	ection D. All Type III Supporting Organizations			
	·		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prictax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies the organization's governing documents in effect on the date of notification, to the extent not previously provided.	of		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard			
	ection E. Type III Functionally-Integrated Supporting Organizations			
1 b	The organization is the parent of each of its supported organizations. Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
а	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how to organization determined that these activities constituted substantially all of its activities			
Ь	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement			
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or truster each of the supported organizations? <i>Provide details in Part VI</i>	es of 3a		
ь	• Did the organization exercise a substantial degree of direction over the policies, programs and activities of ear of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b		

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

	heck here if the organization satisfied the Integral Part Test as a qualifying t	rust on N	ov 20,1970 See inst	ructions. All other
Т	ype III non-functionally integrated supporting organizations must complete	Sections	A through E	Г
				(B) Current Year
	Section A - Adjusted Net Income		(A) Prior Year	(optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
	Other expenses (see instructions)	7		
	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	A verage monthly value of securities	1a		
b	A verage monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
	A cquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable A mount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	heck here if the current year is the organization's first as a non-functionally- estructions)	integrate	d Type III supporting o	organization (see

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Section D - Distributions			Current Year					
1 Amounts paid to supported organizations to accom	plish exempt purposes							
2 Amounts paid to perform activity that directly furth excess of income from activity	ers exempt purposes of supp	ported organizations, in						
3 Administrative expenses paid to accomplish exemp	ot purposes of supported org	anızatıons						
4 Amounts paid to acquire exempt-use assets								
5 Qualified set-aside amounts (prior IRS approval rec	auıred)							
6 Other distributions (describe in Part VI) See instru	. ,							
<u> </u>	30013							
7 Total annual distributions. Add lines 1 through 6								
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide						
9 Distributable amount for 2015 from Section C, line	6							
10 Line 8 amount divided by Line 9 amount								
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015					
Distributable amount for 2015 from Section C, line 6								
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)								
3 Excess distributions carryover, if any, to 2015								
a								
b								
d From 2013								
e From 2014								
f Total of lines 3a through e								
g Applied to underdistributions of prior years								
h Applied to 2015 distributable amount								
i Carryover from 2010 not applied (see instructions)								
j Remainder Subtract lines 3g, 3h, and 3i from 3f								
4 Distributions for 2015 from Section D, line 7								
\$								
a Applied to underdistributions of prior years								
b Applied to 2015 distributable amount								
c Remainder Subtract lines 4a and 4b from 4								
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)								
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)								
7 Excess distributions carryover to 2016. Add lines 31 and 4c								
8 Breakdown of line 7								
a								
c Excess from 2013								
d From 2014								
e From 2015								

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

Facts And Circumstances Test	

Return Reference

Explanation Schedule A. Part III, Line

12,

Explanation of Other Income

Foreign Exchange Gain Loss - 2011 Amount \$ 490,378 2012 Amount \$ -604,502 2013 Amount \$ -567,066 2014 Amount \$ 413,403 2015 Amount \$ -426,313 Other Revenue Loss - 2012 Am ount \$ 1.500

990 Schedule A, Supplemental Information

Schedule A (Form 990 or 990-EZ) 2015

DLN: 93493198018707

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public

Inspection

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

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

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

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

Na	Section 501(c)(4), (5), or (6) orga me of the organization			Employer ide	entification number
CIE	E Inc			13-403890	7
ar	t I-A Complete if the or	ganization is exempt unde	r section 501(c	c) or is a section 52	?7 organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect pol	ıtıcal campaıgn act	ivities in Part IV	
2	Political expenditures			•	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt unde	r section 501(c	c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization i	under section 4955	•	\$
2	Enter the amount of any excise	e tax incurred by organization man	agers under sectior	n 4955 >	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 4	720 for this year?		Yes No
4 a	Was a correction made?				⊤Yes
b	If "Yes," describe in Part IV				, ,
Par	t I-C Complete if the or	ganization is exempt unde	r section 501(c	c), except section 5	01(c)(3).
1	Enter the amount directly expe	ended by the filing organization for	section 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to	other organizations	for section 527 ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter hei	e and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file F	orm 1120-POL for this year?			Yes No
5	organization made payments amount of political contribution	nd employer identification number For each organization listed, enter ns received that were promptly and political action committee (PAC)	the amount paid fro didirectly delivered	m the filing organization's to a separate political or	s funds Also enter the ganızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	contributions received
2					
3					
1					
5					
5					1

Scl	nedule C (Form 990 or 990-EZ) 2015					Page 2
P	complete if the organization under section 501(h)).	n is exempt under	section 501(c)(3) and file	ed Form 5768	
A	Check ► ☐ If the filing organization belongs to expenses, and share of excess lo		d list in Part IV e	ach affiliated gro	oup member's nam	ne, address, EIN,
В	Check ▶ ☐ If the filing organization checked	box A and "limited contr	ol" provisions ap	ply		
	Limits on Lobl (The term "expenditures"	oying Expenditures means amounts paid or i			(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public	opinion (grass roots				
b	lobbying) Total lobbying expenditures to influence a legi	slative body (direct lobb	ying)	-		
c	Total lobbying expenditures (add lines 1a and	1b)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines	1c and 1d)				
f	Lobbying nontaxable amount Enter the amoun	t from the following table	ın both columns			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxa	ble amount is:			_
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of th	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	0,000				
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
	Over \$17,000,000	\$1,000,000		 		
g h i	Grassroots nontaxable amount (enter 25% of Subtract line 1g from line 1a If zero or less, e Subtract line 1f from line 1c If zero or less, er If there is an amount other than zero on either reporting section 4911 tax for this year?	nter -0- iter -0-	_	Form 4720 Yes No	0	
	(Some organizations that made a columns below. See	the separate instr	ection do not uctions for li	have to com nes 2a throu		ne five
	Lobbying Ex	penditures During	4-Year Avera ⊤	ging Period	1	
	Calendar year (or fiscal year beginning in)	(a)2012	(b) 2013	(c) 2014	(d) 2015	(e) Total
2a	Lobbying nontaxable amount					
b 	Lobbying ceiling amount (150% of line 2a, column(e))					

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c)2014	(d)2015	(e) Total
Lobbying nontaxable amount					
Lobbying ceiling amount (150% of line 2a, column(e))					
Total lobbying expenditures					
Grassroots nontaxable amount					
Grassroots ceiling amount (150% of line 2d, column (e))					
Grassroots lobbying expenditures				d.l. 6 (5 000	
	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e))	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e))	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount (150% of line 2d, column (e))	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount (150% of line 2d, column (e))	Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount (150% of line 2d, column (e))

	dule C (Form 990 or 990-EZ) 2015					Р	age 3
Pa		ation is exempt under section 501(c)(3) and has Non under section 501(h)).					
For e	ach "Yes" response on lines 1a through 1i bei	low, provide in Part IV a detailed description of the lobbying	(a)		(b)		
activ	ity		Yes	No		A mour	nt
1		n attempt to influence foreign, national, state or local ence public opinion on a legislative matter or referendum,	163				
а	Volunteers?			No			
b	Paid staff or management (include compe	ensation in expenses reported on lines 1c through 1i)?		No			
c	Media advertisements?			No			
d	Mailings to members, legislators, or the p	-		No			
e	Publications, or published or broadcast s	F		No			
f	Grants to other organizations for lobbying	· · · <u>-</u>		No			
g		fs, government officials, or a legislative body?		No			
h	·	entions, speeches, lectures, or any similar means?	V	No			02.026
i	Other activities?	-	Yes				83,926
j	Total Add lines 1c through 1i	anization to be not described in section E01/c)(2)2		No.			83,926
2a b	If "Yes," enter the amount of any tax incu	anization to be not described in section 501(c)(3)?		No	-		
c	•	urred by organization managers under section 4912					
d		on 4912 tax, did it file Form 4720 for this year?					
		ation is exempt under section 501(c)(4), section 5	501(c	1(5).	or s	ectio	n
	501(c)(6).			/(-//			
						Yes	No
1	Were substantially all (90% or more) due	·		L	1		
2	- · · · · · · · · · · · · · · · · · · ·	lobbying expenditures of \$2,000 or less?		L	2		
3		obbying and political expenditures from the prior year?			3		
Par		ation is exempt under section 501(c)(4), section 5 (a) BOTH Part III-A, lines 1 and 2, are answered " "					
1	Dues, assessments and similar amounts	from members	1				
2	Section 162(e) nondeductible lobbying a expenses for which the section 527(f) ta	nd political expenditures (do not include amounts of political ix was paid).					
a	Current year		2a				
Ь	Carryover from last year		2b				
c	Total	122/ \/4\/4\	2c				
3		133(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4		ne 2c exceeds the amount on line 3, what portion of the excess to the reasonable estimate of nondeductible lobbying and	4				
5	Taxable amount of lobbying and political	expenditures (see instructions)	5				
Pa	art IV Supplemental Informati	on					
		, line 1, Part l-B, line 4, Part l-C, line 5, Part II-A (affiliated grou o, complete this part for any additional information	ıp lıst)	, Part I	I-A,	ınes 1	and
	Return Reference	Explanation					
Part	· · · · · · · · · · · · · · · · · · ·	B, Line 1(i) - Total represents fees paid to a consulting group whess on issues relevant to the Organization	ııch lot	bied th	ie Un	ited St	ates

SCHEDULE D

(Form 990)

Department of the

DLN: 93493198018707

Supplemental Financial Statements

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

OMB No 1545-0047

Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service **Employer identification number** Name of the organization CIFE Inc 13-4038907 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or Preservation of an historically important land area education) Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) **2**c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4) (B)(I) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

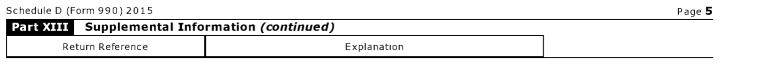
a light conjugation and control and cession, and other records, check any of the following that are a significant use of ics collections trees (cacked that apply) b Scholarly research C C C C C C C C c Preservation for future generations c Preservation for future generations C C C C C parx XIII T T T T T T parx XIII T T T T T parx XIII T T T T T parx XIII T T T	Par	t III	Organizations Maintaining (continued)	Collections of <i>I</i>	Art, His	storical	Treasu	res, or (Othe	er Similar A	ssets	
Scholarly research College College College Preservation for future generations	3			ssion, and other re	cords, cl	nec k any o	of the follo	wing that	are a	sıgnıficant us	e of its	
Scalarly research Freework a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII buting the year, all dithe organization collections and explain how they further the organization's exempt purpose in Part XIII buting the year, all dithe organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, ine 21. 1a Is the organization an agent, trustee, custodian or other intermediately for contributions or other assets to be used to raise films drate than to be minitarized as part of the organization's collection? 1a Is the organization an agent, trustee, custodian or other intermediately for contributions or other assets to the current and the part XIII and complete the following table 1a Is the organization and the year 1b If "Yes," explain the arrangement in Part XIII and complete the following table 2c Beginning balance 1c Is distinct during the year 1 India	а		Public exhibition		d	☐ Lo	an or exc	hange pro	gram	S		
Provide a cescination of the organization's collections and explain how they further the organization's exempt purpose in Part XIII	b		Scholarly research		е	┌ Ot	her					
Part XIII Substitution Substit	C		Preservation for future generations									
No No No No No No No No	4			collections and ex	plain ho	w they furt	her the o	rganızatıo	n's ex	xempt purpose	ın	
	5										s ⊏No	•
Included on Form 990, Part X? Manual	Pai	rt IV	Complete if the organization a		n Form	990, Par	t IV, line	9, or re	port	<u>'</u>		n 990,
d Additions during the year d Additions during the year 1 Id 4 Additions during the year 1 Id 4 Distributions during the years back (e)Four years back (d)Three years back (e)Four years back (e)Four years back (e)Four years back (d)Three years back (e)Four years	1a			todian or other inte	rmediary	for contri	butions o	r other as	sets	_	5 No	•
Martin	b	If"	Yes," explain the arrangement in Pa	rt XIII and comple	te the fo	llowing tab	ole			Am	ount	
Ending balance Tending ba	c	Вед	ginning balance					10	: [
The content of the	d	A d	ditions during the year					10	1			
Description of property Description of	е	Dis	tributions during the year					16	•			
2a Did the organization include an amount on Form 990, Part X, line 21, for escriber or custodial account liability? Yes No	f		<i>y</i> ,					11				
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Table Part	2 a		=	n Form 990, Part X,	line 21,	for escrow	vorcusto	dial acco	unt lia	ability? Yes	s No)
1												
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? 3a(ii) a a a a a a a a a			·						-			ars back
C Net investment earnings, gains, and losses	1 a	Begir	nning of year balance									
Ioses	b	Contr	ributions									
d Grants or scholarships	c											
The percentages on lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization by If "yes" on 3a(ii), are the related organizations listed as required on Schedule R? The percentages on lines 2a, 2b, and 2c should equal 100% T	d											
Portion of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the set of the percentage of the percentage of the organization that are held and administered for the percentage of the percentage of the organization that are held and administered for the percentage of the perc	e	Othe	r expenditures for facilities									
Portion of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Provide the set of the percentage of the percentage of the organization that are held and administered for the percentage of the percentage of the organization that are held and administered for the percentage of the perc		· Admi	nustratura expenses									
Board designated or quasi-endowment Parametric endowment Para	g		•									
Board designated or quasi-endowment Parametric endowment Para	2	Provid	de the estimated percentage of the o	current vear end bal	l lance (lir	ne 1a. colu	ımn (a)) h	eld as				
Temporarily restricted endowment ► Temporarily restricted endowment Form percentages on lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations			, -	, ,			(4//					
The percentages on lines 2a, 2b, and 2c should equal 100% The percentages on lines 2a, 2b, and 2c should equation 100% The percentages on lines 2c, 2b, and 2c, 2b, and 2c,			,									
The percentages on lines 2a, 2b, and 2c should equal 100% Since Part X The percentages on lines 2a, 2b, and 2c should equal 100% Since Part X The percentages on lines 2a, 2b, and 2c should equal 100% Since Part X The percentages on Schedule R? Since Sin												
Part	С	The p	ercentages on lines 2a, 2b, and 2c	·								
Table Tabl	3a	organ	ization by	_			eld and ad	dministere	ed for			No
This is a second to the component of the content			_									
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (c) depreciation (c	b		3									
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property (a) Cost or other basis (ninvestment) Cost or other basis (ninvestment) (b) Cost or other basis (other) (c) depreciation (d) Book value (e) Description of property (d) Description of property (d) Description of property (d) Description of property (e) Description of other basis (other) (d) Description of the passes (other) (d) Description of the passes (other) (d) Description of property (d) Description of the passes (other) (d) Descri	4	Desci	ribe in Part XIII the intended uses o	f the organization's	endowm	ent funds						
Image: Control of property (a) Cost or other basis (investment) (b) Cost or other basis (other) Accumulated (c) depreciation (d) Book value 1a Land	Pai	rt VI			_							
Land Cost or other basis (investment) Cost or other basis (other) Cost or other ba				nswered 'Yes' to	Form 9		IV, line		Forn			
b Buildings 16,439,853 4,242,514 12,197,339 c Leasehold improvements 3,852,114 1,774,901 2,077,213 d Equipment 525,117 413,242 111,875 e Other 17,271,679 6,137,073 11,134,606			Description of property		Co	st or other b		or other ba	SIS		(4)800	
c Leasehold improvements	1 a	Land			· · _						1	
d Equipment 525,117 413,242 111,875 e Other 17,271,679 6,137,073 11,134,606	b	Buildin • •	gs 					16,439,8	353	4,242,51	1 1	2,197,339
e Other	c	Leaseh	nold improvements					3,852,	114	1,774,90	1	2,077,213
	d	Equipm	nent		· [525,	117	413,24	2	111,875
	е	Other						17 071 4	570	6 127 n7	,	1 134 606
	Tota	 I. A dd I			rt X. colu	mn (B). lın	<u> </u>				_	

(a) Description of security or categor (including name of security)	ТУ	(b)Book value		1ethod of valuation end-of-year market value
(1)Financial derivatives				
(2)Closely-held equity interests				
(3) 0 ther				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•			
Part VIII Investments—Program Related.	L			
Complete if the organization answere	ed 'Yes' on Form 990,			
(a) Description of investment		(b) Book value		1ethod of valuation nd-of-year market value
				,
			1	
Tabel (Calumn (h) must a real form 000 (but V cal (0) (m. 13))				
	ion answered 'Yes' on F	orm 990, Part IV, line	11d See Form	990, Part X, line 15
Part IX Other Assets. Complete if the organizat (a) Des	ion answered 'Yes' on F	orm 990, Part IV, line	11d See Form	(b) Book value
Part IX Other Assets. Complete if the organizat (a) Des (1) Security Deposit	ion answered 'Yes' on F	orm 990, Part IV , line	11d See Form	(b) Book value 1,352,000
Part IX Other Assets. Complete if the organizat (a) Des (1) Security Deposit (2) Program Advances	ion answered 'Yes' on F	orm 990, Part IV, line	11d See Form	(b) Book value 1,352,000 4,115,800
Part IX Other Assets. Complete if the organizat (a) Des (1) Security Deposit (2) Program Advances	ion answered 'Yes' on F	orm 990, Part IV, line	11d See Form	(b) Book value 1,352,000 4,115,800
Part IX Other Assets. Complete if the organizat (a) Des (1) Security Deposit (2) Program Advances	ion answered 'Yes' on F	orm 990, Part IV, line	11d See Form	(b) Book value 1,352,000 4,115,800
Part IX Other Assets. Complete if the organizat (a) Des (1) Security Deposit (2) Program Advances	ion answered 'Yes' on F	orm 990, Part IV , line	11d See Form	(b) Book value 1,352,000 4,115,800
Part IX Other Assets. Complete if the organizat (a) Des (1) Security Deposit (2) Program Advances	ion answered 'Yes' on F	orm 990, Part IV, line	11d See Form	(b) Book value 1,352,000 4,115,800
Part IX Other Assets. Complete if the organizat (a) Des (1) Security Deposit (2) Program Advances	ion answered 'Yes' on F	orm 990, Part IV , line	11d See Form	(b) Book value 1,352,000 4,115,800
Part IX Other Assets. Complete if the organizat (a) Des (1) Security Deposit (2) Program Advances	ion answered 'Yes' on F	orm 990, Part IV, line	11d See Form	(b) Book value 1,352,000 4,115,800
Part IX Other Assets. Complete if the organizat (a) Des (1) Security Deposit (2) Program Advances	ion answered 'Yes' on F	orm 990, Part IV , line	11d See Form	(b) Book value 1,352,000 4,115,800
Part IX Other Assets. Complete if the organizat (a) Des (1) Security Deposit (2) Program Advances	ion answered 'Yes' on F	orm 990, Part IV, line	11d See Form	(b) Book value 1,352,000 4,115,800
(a) Des (1) Security Deposit (2) Program Advances (3) Due from Affiliates Total. (Column (b) must equal Form 990, Part X, col (B) line	cion answered 'Yes' on F cription			(b) Book value 1,352,000 4,115,800 6,343,088
(a) Des (1) Security Deposit (2) Program Advances (3) Due from Affiliates Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the or	cion answered 'Yes' on F cription			(b) Book value 1,352,000 4,115,800 6,343,088
(a) Des (1) Security Deposit (2) Program Advances (3) Due from Affiliates Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Limbbilities. Complete if the or See Form 990, Part X, line 25.	cion answered 'Yes' on F cription			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Assets. Complete if the organizate (a) Des (1) Security Deposit (2) Program Advances (3) Due from Affiliates Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	e 15) ganization answered			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Assets. Complete if the organizate (a) Des (1) Security Deposit (2) Program Advances (3) Due from Affiliates Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the or See Form 990, Part X, line 25. (a) Description of liability	e 15) ganization answered			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities of liability Total. (a) Description of liability Federal income taxes	e 15) ganization answered			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities of liability Total. (a) Description of liability Federal income taxes	e 15)			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities of liability Total. (a) Description of liability Federal income taxes	e 15)			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities of liability Tederal income taxes	e 15)			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities Complete if the organizate in the organi	e 15)			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities Complete if the organizate in the organi	e 15)			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities Complete if the organizate in the organi	e 15)			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities Complete if the organizate in the organi	e 15)			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities Complete if the organizate in the organi	e 15)			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities Complete if the organizate of the organi	e 15)			(b) Book value 1,352,000 4,115,800 6,343,088
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the organizate Other Liabilities Complete if the organizate in the organi	e 15)			(b) Book value 1,352,000 4,115,800 6,343,088
(1) Security Deposit (2) Program Advances (3) Due from Affiliates Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. Complete if the or See Form 990, Part X, line 25.	e 15)	Yes' on Form 990,		(b) Book value 1,352,000 4,115,800 6,343,088

	Total revenue, gains, and other support per audited financial statements	1	
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
)	Donated services and use of facilities	1	
	Recoveries of prior year grants	1	
t	Other (Describe in Part XIII)	1	
	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
1	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
)	Other (Describe in Part XIII)		
	Add lines 4a and 4b	4c	
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
	Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	J per ke	
		1 1	
	·	1	
	A mounts included on line 1 but not on Form 990, Part IX, line 25	1	
	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	1	
)	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	1	
) :	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	1	
) :	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	1	
) : :	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	-	
) :	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities		
) 	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities		
) : !	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities		
a a c c c c c c c c c c c c c c c c c c	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities		

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

Return Reference Explanation



Schedule D (Form 990) 2015

efile GRAPHIC print - D	O NOT PROCESS	As Filed Dat	ta -	DLN:	93493198018707
SCHEDULE F (Form 990)			Outside the Unit		OMB No 1545-0047
Department of the Treasury		Part IV, line 1 ► Attach to	n answered "Yes" to Form 14b, 15, or 16. o Form 990. nd its instructions is at w		2015 Open to Public
internal Revenue Service	mormation about Schedu	ile i (i oilii 990) ai	nd its instructions is at w	www.ms.gov/10mm990.	Inspection
Name of the organization CIEE Inc				' '	ntification number
Part I General Infor	mation on Activiti	es Outside th	ne United States.	13-4038907	
•			orm 990, Part IV, line		
1 For grantmakers. Doe	=				
and other assistance, used to award the gra		lity for the gran	its or assistance, and	the selection criteria	
used to award the gra	iits or assistance				✓ Yes No
2 For grantmakers. Des assistance outside the		rganızatıon's pı	rocedures for monitori	ng the use of its grai	nts and other
3 Activites per Region (Th	ne following Part I, line	3 table can be du	uplicated if additional spa	ace is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a (f) Total expenditures for and investments in region
(1) See Add'l Data			g,		
(2)					
(3)					
(4)					
(5)					
3a Sub-total	64	346			64,144,010
b Total from continuation s to Part I					15,358,018
c Totals (add lines 3a and For Paperwork Reduction Act Not	· · ·			No 50082W Sche	79,502,028

Schedule F (Form 990)	2015							Page 2
Complete		sistance to Organ ation answered "Ye ded.				eived more than \$5,	000. Part II can be	duplicated if
1 (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	(i) Method of valuation (book, FMV, appraisal, other)
(1)		Europe (Including Iceland & Greenland)	Student scholarship	5,825	Wire Transfer	0		
(2)								
(3)								

(4)

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

	ther Assistance duplicated if addit			ed States. Complete	if the organization a	nswered "Yes" to Form	990, Part IV, line 16.
(a) Type of grant or assistance	(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)							
(2)							
(3)							
(4)							
(5)							
(6)							

(2)				
(3)				
(4)				
(5)				
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(8)				
(9)				
(10)				
(11)				
(12)				
(42)				

(4)				
(5)				
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(11)				
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(13)				
(14)				
(15)				
(16)				
(17)				
(18)				
			Schedu	lle F (Form 990) 2015

(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)							,	
(17)								
(18)								
	Schedule F (Form 990) 2015							

this part to provide any additional information (see instructions).

. so additional monitoring of funds is not deemed necessary

990 Schedule F, Supp	plemental Information	
Return Reference	Explanation	
Part I, Line 2	Amounts aw arded as grants or scholarships are paid directly to the educational institution	1

Additional Data

Software ID: Software Version:

EIN: 13-4038907

Name: CIEE Inc

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas,	5	22	Program Services	Study abroad programs for students	2,704,358
East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	12	100	Program Services	Study abroad programs for students	10,238,369
Europe (Including Iceland & Greenland) - Albania, Andorra, Austria, Belgium	23	136	Program Services	Study abroad programs for students	34,587,398

(a) Degree (b) Number of (c) Number of (d) A ctivities

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region
			_	

	located in the region)		
Middle East and North Africa 4 19 Program Services Study abroad programs - Algeria, Bahrain, Djibouti, Egypt, - Students	19 Program Services Study abroad programs for students	1 4	9

for students	
Study abroad programs	

for students

Russia & the Newly Independent States - Armenia, Azerbijan, Belarus,	5	13	3	Study abroad programs for students	

Program Services

_	Study abroad programs for students	2,007,689

Study abroad programs

(f) Total expenditures for region

2,875,703

5,447,170

Egypt,				
Russia & the Newly	5	13	J	St
Independent States -				lfor

South America - Argentina,

Bolivia, Brazil, Chile,

Columbia, Ecuador,

(b) Number of (c) Number of (a) Region (d) A ctivities offices in region

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

East Asia and the Pacific -

Australia, Brunei, Burma,

Cambodia,

E1 01	(c) Number of	(u) Activities
the	employees or	conducted in region (by
1	agents in	type) (ı e , fundraısıng,
	region	program services,
		grants to recipients
		located in the region)

lInvestments

type) (I e , fundraising, program services, grants to recipients located in the region)	service, describe specific type of service (s) in region	
	Study abroad programs for students	

(e) If activity listed in

(d) is a program

			located in the region)	(s) in region
South Asia - Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal,	2	4	1 2	Study abroad programs for students
Sub-Saharan Africa - Angola, Benin, Botswana, Burkina, Faso,	6	22		Study abroad programs for students



5,091,747

(f) Total expenditures

for region

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of offices in the region

of	(c) Number of	(d) A ctivities
9	employees or	conducted in region (by
	agents in	type) (i e , fundraising)
	region	program services,
		grants to recipients

(e) If activity listed in (f) Total expenditures (d) is a program service, describe specific type of service (s) in region

10,158,481

for region

39,073

Investments

11,933

Europe (Including Iceland &

- Algeria, Bahrain, Djibouti,

Greenland) - Albania, Andorra, Austria, Belgium Russia & the Newly

Independent States -

Egypt,

Investments

located in the region)

(a) Region (b) Number of (c) Number of (e) If activity listed in (d) Activities (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, agents in service, describe region specific type of service region program services,

56,784

		located in the region)	(s) in region	
Central America and the		Investments		

Caribbean - Antigua &

Barbuda, Aruba, Bahamas,

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

efile GRAPHIC print - DO NOT PROCESS As Filed Data -Schedule I (Form 990) Department of the Treasury

Internal Revenue Service Name of the organization

CIEE Inc

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

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

DLN: 93493198018707

Open to Public Inspection

Employer identification number

13-4038907

						13 1030307	
Part I General Informat	tion on Grants an	d Assistance					
 Does the organization mainta the selection criteria used to Describe in Part IV the organ 	award the grants or a	ssistance?				stance, and	√ Yes
				plete if the organization	answered "Yes" on F	Form 990, Part IV, line 21	, for any recipient
(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)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Enter total number of sectionEnter total number of other or	rganizations listed in t	the line 1 table				•	
For Paperwork Reduction Act Notice, s	see the Instructions foi	· Form 990.		Cat No 50055P		Schedu	le I (Form 990) 2015

Additional Data

this grant was created to help students overcome major barriers to study abroad, namely costs and curriculum requirements

Software ID: Software Version: **EIN:** 13-4038907 Name: CIEE Inc

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals. (a)Type of grant or assistance (b)Number of (c)A mount of (d)A mount of

· / //	recipients	cash grant	non-cash assistance
Global Access Initiative (GAIN) Reward -	665	1.135.640	

FMV, appraisal, other)

(e)Method of valuation (book, (f)Description of non-cash assistance

(a) Type of grant or assistance
(b) Number of recipients
(c) A mount of non-cash assistance
(d) A mount of non-cash assistance
(e) Method of valuation (book, FMV, appraisal, other)

CIEE's Language Intensive Focus Track
(LIFT) - Scholarship Program commits
\$100,000 annually to help fund the extended study of single world language by

for students to access each year

\$100,000 allitually to field tall the			
extended study of single world language by			
today's top college and university students			
At CIEE, we believe that extended language			
development plays a critical role in			
students' preparation for living and working			
ın an ıncreasıngly globalızed and			
ınterdependent world Our goal for the LIFT			
Scholarship Program is to enable dedicated			
students to study abroad for a full year, an			
ımportant element ın language acquisition			
and an option that is becoming more difficult			

(a) Type of grant or assistance (b) Number of (c) A mount of (d) A mount of recipients cash grant non-cash assistance FMV, appraisal, other)

Global Architecture and Design Scholarship	5	48,000	0	
- For students of architecture, design, or				
engineering who want to attend an				
architecture and design program in				
Barcelona, Berlin, Prague, or New York City				
Recipients are granted up to \$2,500 each				

(a) Type of grant or assistance
(b) Number of recipients
(c) A mount of non-cash assistance
(b) Number of recipients
(c) A mount of non-cash assistance
(d) A mount of non-cash assistance
(e) Method of valuation (book, f) Description of non-cash assistance
(FMV, appraisal, other)

were established in memory of John E			
Bowman, Executive Director of CIEE from			
1952 to 1979 These awards provide			
assistance and help defray the costs of			
travel to students from CIEE and CIEE			
Academic Consortium member institutions			
participating in CIEE study abroad			
programs in non-traditional locations and			
who demonstrate academic excellence and			
financial need. The regions which are			
currently eligible are Africa, Asia, Eastern			
Europe and Latin America			

(a) Type of grant or assistance (b) Number of (c) A mount of (d) A mount of recipients cash grant non-cash assistance FMV, appraisal, other)

Robert B Bailey Scholarship - Scholarships	7	14,000	0	
intended to promote participation in study				
abroad programs for individuals or members				
of groups that have traditionally been				
underrepresented in study abroad, and who				
demonstrate academic exellence and				
financial need				

(a) Type of grant or assistance (b) Number of (c) A mount of (d) A mount of recipients cash grant non-cash assistance (e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)



areas

(a) Type of grant or assistance
(b) Number of recipients
(c) A mount of cash grant
(d) A mount of non-cash assistance
(e) Method of valuation (book, f) Description of non-cash assistance
FMV, appraisal, other)

Peter Wollitzer Scholarship for study in Asia Scholarships provided to students for a

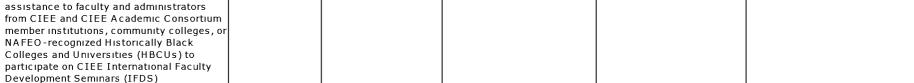
study abroad program in Asia Students		
must demonstrate academic excellence and		
financial need, and must attend a CIEE		
A cademic Consortium Board member		
institution For this year the institutions		
ıncluded Brown University, Fordham		
University, Indiana University, Oberlin		
College, Pacific Lutheran University,		
Princeton University, Purdue University,		
Reed College, University of North Carolina		
at Charlotte, University of Tulsa, and		
Washington University		

(a)Type of grant or assistance (b)Number of (c)A mount of (d)A mount of (e)Method of valuation (book, (f)Description of non-cash assistance FMV, appraisal, other)

				1
Jennifer Ritzmann Scholarship - Scholarship	2	5,000	0	
for Studies in Tropical Biology is awarded to				
students accepted to CIEE's study center				
tropical ecology and conservation program				
ın Monteverde, Costa Rıca				1

(a) Type of grant or assistance (b) Number of recipients (c) A mount of cash grant non-cash assistance (e) Method of valuation (book, f) Description of non-cash assistance FMV, appraisal, other)

IFDS A wards - A wards that provide 4 13,000 0



(a)Type of grant or assistance (b)Number of recipients (c)A mount of cash grant non-cash assistance (d)A mount of non-cash assistance (e)Method of valuation (book, FMV, appraisal, other)

Kathleen McDermott Scholarship - A wards 3 7,500 0

Kathleen McDermott Scholarship - Awards	3	7,500	0	
to students participating in a community				
public health study abroad program				
Students must demonstrate financial need				
and be either a public health or nursing				
major				

(a) Type of grant or assistance (b) Number of recipients (c) A mount of non-cash assistance (e) Method of valuation (book, recipients of non-cash assistance (f) Description o



background

(a)Type of grant or assistance (b)Number of (c)A mount of (d)A mount of (e)Method of valuation (book, (f)Description of non-cash assistance FMV, appraisal, other)

to campus

1	ı		I	1	I .
Alumnı Ambassadors Scholarshıp -	158	242,962	0		
A warded to motivate students who are					
eager to share the many transformative					
benefits of studying abroad when they return					

(a)Type of grant or assistance (b)Number of recipients (c)A mount of cash grant non-cash assistance (e)Method of valuation (book, FMV, appraisal, other)

Global Navigator Scholarship - Scholarship 608 2,587,781 0

Global Navigator Scholarship - Scholarship	608	2,587,781	0	
program for high school students to learn a				
second language, experience and embrace				
another culture, and develop global				
competencies through participation in a				
structured summer abroad program				

(a)Type of grant or assistance (b)Number of (c)A mount of (d)A mount of (e)Method of valuation (book, (f)Description of non-cash assistance recipients cash grant non-cash assistance FMV, appraisal, other)

Open Campus Grant - Scholarship awarded to students who attend CIFF's Open	146	880,938	0	

Campus Program

(a)Type of grant or assistance (f)Description of non-cash assistance **(b)**Number of (c)A mount of (d)A mount of (e)Method of valuation (book. cash grant non-cash assistance FMV, appraisal, other) recipients



awarded to students attending environmental programs

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(a) Type of grant or assistance

(b) Number of recipients

(c) A mount of non-cash assistance

(b) Number of recipients

(c) A mount of non-cash assistance

(d) A mount of non-cash assistance

FMV, appraisal, other)

CIC Scholarship - Scholarship awarded to	112	115.000	0	

students from CIC schools

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(a) Type of grant or assistance

(b) Number of recipients

(c) A mount of non-cash assistance

recipients

(c) A mount of non-cash assistance

non-cash assistance

FMV, appraisal, other)

HBCU Scholarship - Scholarship awarded to students from historically black colleges	28	42,000	0	

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals. (f)Description of non-cash assistance (a)Type of grant or assistance (b)Number of (c)A mount of (d)A mount of (e)Method of valuation (book. recipients cash grant non-cash assistance FMV, appraisal, other)

IR Discretionary Scholarship - Scholarship	55	102.753	0	

awarded to students with financial need

(a) Type of grant or assistance (b) Number of (c) A mount of (d) A mount of recipients cash grant non-cash assistance FMV, appraisal, other)

Passport Caravan Scholarship -	4	2,000	0	
Scholarship awarded to students who attend				

CIEE's passport caravan event

(a)Type of grant or assistance (b)Number of (c)A mount of (d)A mount of (e)Method of valuation (book, (f)Description of non-cash assistance recipients cash grant non-cash assistance FMV, appraisal, other)

Academic Excellence Scholarship -	45	109,000	0	
Scholarship awarded to students				

demonstrating high academic achievement

DLN: 93493198018707

Compensation Information

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

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

2015

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

Schedule J (Form 990)

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization **Employer identification number** CIEE Inc

			13-4038907					
Pa	rt I Questions Regarding Compensation							
					Yes	No		
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III							
	First-class or charter travel		Housing allowance or residence for personal use					
	▼ Travel for companions		Payments for business use of personal residence					
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees					
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)		 			
b	If any of the boxes in line 1a are checked, did the org reimbursement or provision of all of the expenses des			1b	Yes			
2	Did the organization require substantiation prior to redirectors, trustees, officers, including the CEO/Executive control of the certain			2	Yes			
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all the used by a related organization to establish compensation	at apply	Do not check any boxes for methods					
	✓ Compensation committee	▽	Written employment contract					
	✓ Independent compensation consultant	▽	Compensation survey or study					
	▼ Form 990 of other organizations	✓	Approval by the board or compensation committee					
4	During the year, did any person listed on Form 990, For a related organization	Part VII	, Section A , line $1a$ with respect to the filing organization					
а	Receive a severance payment or change-of-control p	ayment	7	4a		Νo		
b	Participate in, or receive payment from, a supplement	tal nonq	jualified retirement plan?	4b	Yes			
c	Participate in, or receive payment from, an equity-based compensation arrangement?							
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III							
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizati	ions mu	st complete lines 5-9.					
5	For persons listed on Form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a	, did the organization pay or accrue any					
а	The organization?			5a		Νo		
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III			5b		No		
6	For persons listed on Form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any					
а	The organization?			6 a		Νo		
b	Any related organization?			6b		Νo		
	If "Yes," on line 6a or 6b, describe in Part III							
7	For persons listed on Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," de			7	Yes			
8	Were any amounts reported on Form 990, Part VII, p subject to the initial contract exception described in in Part III			8		No		
9	If "Yes" on line 8, did the organization also follow the section 53 4958-6(c)?	rebutta	ible presumption procedure described in Regulations	9				

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	• •
	_	(ii)	(iii)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	Base	Bonus & incentive	Other reportable	compensation			as deferred on prior
	(I) compensation	compensation	compensation	·			Form 990

FUIIII 990 See Additional Data Table

Schedule J (Form 990) 2015	Page 3				
Part III Supplemental Infor	mation				
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference	Explanation				
	In certain circumstances, spouses are required to travel with applicable members of the Organization due to certain business/cultural requirements. The spouses participate in the activities of the Organization when traveling				
	James P Pellow, President & CEO, participates in a supplemental non-qualified retirement plan as described in the Internal Revenue Code Section 457 (f) During calendar 2015, \$18,000 was deferred on his behalf to the plan A payout of \$189,436 was made in 2015 in accordance with the terms of the plan, and \$135,500 of this payout had been reported as deferred compensation on prior year Forms 990				
Part I, Line 7	The organization has a discretionary bonus program that is based on the achievement of a combination of financial and non-financial goals				

Schedule J (Form 990) 2015

Software ID: **Software Version:**

> **EIN:** 13-4038907 Name: CIEE Inc

Form 990, Schedule J,	Part	II - Officers, Dire	ctors, Trustees, K	ey Employees, an	d Highest Compen	sated Employees	5	T
(A) Name and Title		(B) Breakdown o (i) Base Compensation	f W-2 and/or 1099-MIS (ii) Bonus & Incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1James P Pellow President & CEO	(1)	409,845	187,500	196,619	31,250	23,564	848,778	135,500
	(11)	0	0	0	0	- 0	o	0
1Timothy ProppCOO & CFO	(1)	253,384	90,000	0	2,250	22,508	368,142	0
	(11)	0	0	0	0	-	- 0	0
2Jorge BarrossoPast CIO	(1)	251,068	60,000	0	6,625	22,430	340,123	0
	(11)	o	0	0	0			0
3 Brenda J Majeski Senior Vice President	(1)	194,499	50,000	0	10,000	22,430	276,929	0
	(11)	0	0	0	0			0
4 Nancy Kittredge Vice President	(1)	179,859	45,000	0	9,333	25,247	259,439	0
	(11)	0	0	0	0			0
Executive Vice President	(1)	202,645	0	0	10,368	22,198	235,211	0
	(11)	0	0	0	0			
6 Philip SimonVice President	(1)	157,517	7.500	0	6 275	0	100.007	
	(11)	0	7,500 		6,375	27,495 	198,887	
7 Cathanne Scruggs Past Executive Director	(1)	152,217	-			0	0	
	(1)		0	0	6,541	18,765	177,523	0
			U	0	U	0	0	U
8 Adriana UribePast Director	(1)		10,000	0	0	15,894	176,924	0
	(11)	0	0	0	0	0	0	0
9 Anna Fincke Past Vice President	(1)		35,000	0	6,788	28,861	194,453	0
	(11)	0	0	0	0	- 0	o	0
10 Tuan Huynh Executive Director	(1)	146,631	10,000	0	1,629	24,584	182,844	0
	(11)	0	0	0	0	0	0	0
11Elizabeth O'Neill Former Executive Vice President	(1)	79,712	50,000	0	3,973	3,084	136,769	0
	(11)	o	0	0	0	- n	_	0
12David Fougere Former Senior Vice President	(1)	142,588	90,000	0	4,509	5,776	242,873	0
	(11)	0	0	0	0	-	-	0
		l				0	1 0	

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DLN: 93493198018707

SCHEDULE M (Form 990)

Intellectual property . .

Securities-Publicly traded .

9

Noncash Contributions

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

► Attach to Form 990.

Χ

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047 2015

> Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization **Employer identification number** CIEE Inc 13-4038907 **Types of Property** Part I (b) (d) (a) (c) Check Number of contributions Noncash contribution Method of determining ıf or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1 g Art—Works of art Art—Historical treasures Art—Fractional interests Books and publications Clothing and household Cars and other vehicles . . Boats and planes

Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities-Miscellaneous . . **13** Qualified conservation contribution—Historic structures **14** Oualified conservation contribution-Other . . . Real estate—Residential .

3

16 Real estate—Commercial . . 17 Real estate—Other . . . 18 Collectibles **19** Food inventory . . 20 Drugs and medical supplies .

21 Taxidermy 22 Historical artifacts 23 Scientific specimens . . 24 Archeological artifacts . . .

25 Other ► (__ **26** Other ▶ (_____) **27** Other ▶ (_____

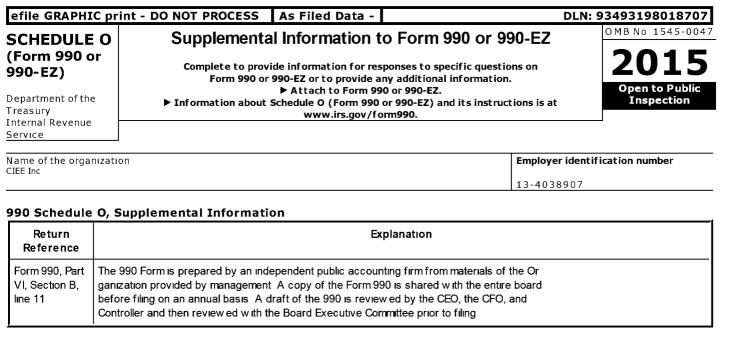
28 Other ▶ (_____) Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

1,868,548 FMV

Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a Νo **b** If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Νo 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Νo b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,

Schedule M (Form 990) (2015)



990 Schedule O. Supplemental Information Return Explanation Reference Form 990. Part The Board of Directors, officers and key employees are required to sign and date, on an an VI. Section B. nual basis, a Conflict of Interest Statement which discloses any potential conflicts of in

terest As of this writing, no such conflicts exist

line 12c

990 Schedule O. Supplemental Information Return Explanation Reference Form 990, Part The Organization commissions a compensation study at least every five years regarding comp

VI. Section B. ensation paid to the CEO as well as other officers and key employees. This study is compreline 15 hensive in nature and includes comparative data. There is also an annual goal setting and

performance appraisal process for all officers and key employees. These are discussed and reviewed by the Executive Committee of the Board of Directors

990 Schedule O, Supplemental Information

Return
Reference

Explanation

Form 990, Part | The Organization's governing documents, conflict of interest policy & financial statements are made available to the public

VI, Section C.

line 19

upon request

990 Schedule O, Supplemental Information Return Explanation Reference Form 990. Part Section 1 263(a)-3(n) Election CIEE, Inc 300 Fore Street Portland, ME 04101 EIN 13-40389 X, Line 10 07 CIEE. Inc. is electing to capitalize repair and maintenance costs under Regulation Sect. Land. ion 1 263(a)-3(n)

Buildings, and Equipment

990 Schedule O, Supplemental Information Return Explanation Reference

Form 990, Part Change in Investment in Joint Venture -379,601 Net Assets Related to Foreign Entities 923,459

XI, line 9

 DLN: 93493198018707OMB No 1545-0047

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

Employer identification number Name of the organization CIEE Inc 13-4038907 Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33. Part I (f) Name, address, and EIN (if applicable) of disregarded entity Direct controlling Primary activity Legal domicile (state Total income End-of-year assets or foreign country) entity (1) CIEE Real Estate Holdings LLC Real Estate Holding DE 0 10,202,978 CIEE Inc 300 Fore Street Company Portland, ME 04101 (2) International Exchange Travel Insurance Company LLC VT 7,167,405 CIEE Inc International Educational 5,864,876 300 Fore Street and Work Exchange Portland, ME 04101 Program Insurance 20-4458471 (3) Montreal Street Realty LLC Student Housing ME 0 0 CIEE Inc 300 Fore Street Portland, ME 04101 51-0414702 0 CIEE Inc (4) Quebec Street Realty LLC Student Housing ME 0 300 Fore Street Portland, ME 04101 51-0474702 (5) Academic Internship Council ME 0 0 Provide intercultural 300 Fore Street educational opportunities to Portland, ME 04101 students around the world Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (c) (d) (f) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) (13) controlled entity entity? Yes No See Additional Data Table

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

((Legal Dire domicile contro (state or ent foreign	y activity Legal	controlling in entity	income(related, unrelated, excluded from tax under sections 512-	Predominant g income(related, unrelated, excluded from tax under	(f) Share of total income e	(g) Share of end-of-year assets	(h) Disproprtionat [,] allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana partr	ral or iging	(k) Percentage ownership
			514)			Yes	No		Yes	No			
	Corner	Corneration	Corneration or Trust (Corneration or Trust Complete of th	Corneration or Trust Complete of the organiza	Corneration or Trust Complete of the organization answ	Corporation or Trust Complete of the organization answered	Corporation or Trust Complete of the erganization assurand "Vec"	Corporation or Trust Complete of the organization answered "Vos" on Form 9	Corporation or Trust Complete of the organization assured "Ves" on Form 900.	Corporation or Trust Complete of the organization answered "Yes" on Form 990, Part I		

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
G A11: 10: T11								Yes	No
See Additional Data Table									

chedule k (Form 990) 2013					Ра	ge 3	
Part V Transactions With Related Organizations Complete if the organization ans	wered "Yes" on Form	990, Part IV, line	: 34, 35b, or 36.				
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No	
f L During the tax year, did the orgranization engage in any of the following transactions with one or more	e related organizations li	sted in Parts II-IV?					
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No	
b Gift, grant, or capital contribution to related organization(s)				1b	Yes		
${f c}$ Gıft, grant, or capital contribution from related organization(s)				1 c		No	
f d Loans or loan guarantees to or for related organization(s)				1d	Yes		
f e Loans or loan guarantees by related organization(s)				1e	Yes		
f Dividends from related organization(s)				1f		No	
g Sale of assets to related organization(s)				1 g		No	
h Purchase of assets from related organization(s)							
i Exchange of assets with related organization(s)				1i		No	
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No	
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No	
l Performance of services or membership or fundraising solicitations for related organization(s)				11	Yes		
m Performance of services or membership or fundraising solicitations by related organization(s) .				1m	Yes		
${f n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes		
o Sharing of paid employees with related organization(s)				10		No	
p Reimbursement paid to related organization(s) for expenses				1 p		No	
q Reimbursement paid by related organization(s) for expenses				1 q		No	
${f r}$ Other transfer of cash or property to related organization(s)				1r	Yes		
f s Other transfer of cash or property from related organization(s)				1 s	Yes		
If the answer to any of the above is "Yes," see the instructions for information on who must comple		overed relationships	and transaction threshol	ds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining	amount i	nvolved	i	
e Additional Data Table							

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section i01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1 I	
													<u> </u>



Software ID: Software Version:

EIN: 13-4038907 Name: CIEE Inc

Council on International Educational Exchange Inc 300 Fore Street Portland, ME 04101 13-5619649 Exchange programs NL Solic)(3) Exchange programs NL Solic)(3) Exchange programs NL Solic)(3) Exchange programs NL Solic)(3) Line 9 CIEE Inc CIEE Inc Council on International Educational Exchange Inc 300 Fore Street Portland, ME 04101 13-5619649 Exchange programs NL Solic)(3) Line 9 CIEE Inc C	Section (b)(: contrium entity Yes Yes Yes	n 512 13) olled
Council on International Educational Exchange Inc 300 Fore Street Portland, ME 04101 13-5619649 Exchange programs NL S01(c)(3) Line 9 CIEE Inc VIEE Inc VIEE Inc VIEE Foundation (Bonaire) Kaya Gobernador Debrot 26 Kralendijk, Bonaire NL Programa de Intercambio Estudiantil Council Avenida Portugal 24 Oficina Santiago CI Consejo de Intercambios Educativos con el Extranjero CIEE Mendez Nunez 17 2 planta Seville 41001	Yes Yes	No
CIEE Foundation (Bonaire) Kaya Gobernador Debrot 26 Kralendijk, Bonaire NL Programa de Intercambio Estudiantil Council A venida Portugal 24 Oficina Santiago CI Consejo de Intercambios Educativos con el Extranjero CIEE Mendez Nunez 17 2 planta Seville 41001 Exchange programs NL 501(c)(3) Line 9 CIEE Inc Y Solico)(3) Line 9 CIEE Inc Y Consejo de Intercambios Educativos con el Extranjero CIEE Mendez Nunez 17 2 planta Seville 41001	Yes	
Programa de Intercambio Estudiantil Council Avenida Portugal 24 Oficina Santiago CI Exchange programs SP SP SO1(c)(3) Line 9 CIEE Inc Mendez Nunez 17 2 planta Seville 41001		
Consejo de Intercambios Educativos con el Extranjero CIEE Mendez Nunez 17 2 planta Seville 41001	Yes	
Council International Study Programs France 37 bis rue du Sentier 75002 Paris FR	Yes	
CIEE Toulouse 11 rue Pharaon 31000 Toulouse FR	Yes	
exchange programs GH 501(c)(3) Line 9 CIEE Inc Yellow the state of	Yes	
Council on International Educational Exchange AC Positos 46A Col Centro Guanajuato, Gto 36000 MX Exchange programs MX 501(c)(3) Line 9 CIEE Inc Yellow the second of	Yes	
Stichting CIEE Amsterdam Roetersstraat 8 HS 1018 WC Amsterdam NL	Yes	
CIEE Peru Consejo De Educacion E Intercambio Internacional Av Universitaria 1801 San Miguel, Lima 32 PE	Yes	
CIEE - Associacao Portugesa Do Council on International Education Exchange Av Berna 26C Torre B Gab 605 Lisbon 1069-061 PO	Yes	
CIEE Germany gGmbH DBA Global Institute Berlin Gneisenstrase 27 Berlin 10961 GM	Yes	
Council on International Educational Exchange Israel Ltd Council on International Educationa Haifa, Mount Carmel IS Exchange Programs IS 501(c)(3) Line 9 CIEE Inc Yellow 19 CIEE Inc	Yes	

Form 990, Schedule R, Part IV - Ic	I I						1 75	Ι,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	Sect 512(b) contro entit	ction b)(13) rolled city?
300 Fore Street Portland, ME 04101 36-4528417	Inactive	DE	CIEE Inc	С			100 000 %	Yes	
Cosmos Aoyama 5-53-67 Jingumae Shibuya-ku,Tokyo 150-8355 JA	Language Testing Programs & Exchange Programs	JA	Council on International Educational Exchanges	С	5,660,279	11,776,964			No
(2) CIEE Information Consulting Co LTD	Exchange	СН	CIEE Inc	С	22,411	341,516	100 000 %	Yes	,
(3) Custom House Square Condo Association 1 Canal Plaza Portland, ME 04101	Property Management	ME	CIEE Inc	С			100 000 %		No
	Exchange Programs	CI	CIEE Inc	С		61,889	100 000 %	Yes	
• • • • •	Exchange Programs	SW	CIEE Inc	С	85,408	114,033	100 000 %	Yes	
	Exchange Programs	SF	CIEE Inc	С		465,074	100 000 %	Yes	
	Exchange Programs	UK	CIEE Inc	С		1,292,698	100 000 %	Yes	
	Exchange Programs	CS	CIEE Inc	С	74,386	55,534	100 000 %	Yes	
	Exchange Programs	TU	CIEE Inc	С	170,294	-26,087	100 000 %	Yes	
	Exchange Programs	AS	CIEE Exchanges Inc	С	241,544	65,056			No
Council on International Educational (11) Exchange LLC 24 A Moika River Embankment Off 6 St Petersburg 191186 RS	Exchange Programs	RS	CIEE Inc	С	447,173	308,820	100 000 %	Yes	
	Exchange Programs	EI	CIEE Inc	С	94,961	33,374	100 000 %	Yes	
	Exchange Programs	JA	Council on International Educational Exchanges	С	30	102,027			No
(14) CIEE Educational Information Consulting (Hong Kong) Co Ltd 6th Floor Alexandra House Chater Ro Central HK	Exchange Programs	нк	CIEE Inc	С		9,025	100 000 %	Yes	

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust (b) (d) (h) (a) (c) (e) (g) (i) Name, address, and EIN of Primary activity Direct controlling Type of entity Share of total Share of end-of-Percentage Section Legal related organization domicile entity 512(b)(13) (C corp, S income vear ownership (state or foreign assets controlled corp, entity? country) or trust) Yes No (16) CIEE Exchanges EU Gmbh Exchange GM CIEE Exchanges 223,905 138,348 Nο Gneisenstrase 27 Inc Programs Berlin 10961 GΜ Yes (1) CIEE (Italia) Exchange ΙT CIEE Inc 71,861 100 000 % Vıa Aldıghıerı 10 Programs Ferrara 44121 CIEE Inc 4,935 Yes (2) CIEE Study Abroad Ltd Exchange FΤ 100 000 % Queens University Belfast BT7 1NF Programs Belfast

<u>Form</u>	990, Schedule R, Part V - Transactions With Related Organizations			
	(a) Name of related organization	(b) Transaction type(a-s)	(c) A mount Involved	(d) Method of determining amount involved
(1)	CIEE Information Consulting Co LTD	E	450,856	Cash value
(1)	Custom House Square Condo Association	М	326,392	Cash value
(2)	CIEE Foundation (Bonaire)	R	670,000	Cash value
(3)	Programa de Intercambio Estudiantil Council Ltda	R	678,416	Cash value
(4)	Consejo de Intercambios Educativos con el Extranjero CIEE	R	11,805,505	Cash value
(5)	Council International Study Programs France	R	2,098,300	Cash value
(6)	CIEE Toulouse	R	410,817	Cash value
(7)	CIEE (Ghana)	R	380,000	Cash value
(8)	CIEE (Italia)	R	1,151,942	Cash value
(9)	Council on International Educational Exchange AC	R	330,353	Cash value
(10)	Stichting CIEE Amsterdam	R	1,072,534	Cash value
(11)	CIEE Study Abroad	R	45,675	Cash value
(12)	CIEE Peru Consejo De Educacion E Intercambio Internacional	R	120,000	Cash value
(13)	CIEE-Associacao Portuguesa Do Council on International Education Exchange	R	478,935	Cash value
(14)	CIEE Programas de Intercambio e Investigación Ltda	R	532,376	Cash value
(15)	CIEE Study Abroad AB	R	169,753	Cash value
(16)	Council on International Educational Exchange NPC	R	1,331,346	Cash value
(17)	CIEE Study Abroad London Ltd	R	1,388,389	Cash value