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Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

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

OMB No 1545-0047

2010Open to Public
Inspection**A** For the 2010 calendar year, or tax year beginning

and ending

B Check if applicable

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization

PUBLIC DEFENDER OF MARION COUNTY, INC.

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

198 COMMERCIAL ST SE, STE 240

Room/suite

City or town, state or country, and ZIP + 4

SALEM, OR 97301

F Name and address of principal officer: THOMAS SERMAK
SAME AS C ABOVE**D** Employer identification number

20-5797920

E Telephone number

503/480-0521

G Gross receipts \$

1,403,382.

H(a) Is this a group return

for affiliates?

☐ Yes ☒ No**H(b)** Are all affiliates included?☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c)() (insert no) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ WWW.PDMARION.ORG**K** Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation 2006 **M** State of legal domicile OR**Part I Summary**

Activities & Governance		Revenue		Expenses		Net Assets or Fund Balances	
1 Briefly describe the organization's mission or most significant activities: TO PROVIDE HIGH QUALITY, COST EFFECTIVE LEGAL SERVICES TO POOR PEOPLE ACCUSED OF CRIMES WHILE							
2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.							
3	Number of voting members of the governing body (Part VI, line 1a)	3		7			
4	Number of independent voting members of the governing body (Part VI, line 1b)	4		7			
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5		19			
6	Total number of volunteers (estimate if necessary)	6		4			
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a		0.			
7b	Net unrelated business taxable income from Form 990-T, line 34	7b		0.			
		Prior Year		Current Year			
8	Contributions and grants (Part VIII, line 1h)	8	0.	8	0.		
9	Program service revenue (Part VIII, line 2g)	9	971,940.	9	1,402,412.		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10	1,215.	10	970.		
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11	3,491.	11	0.		
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12	976,646.	12	1,403,382.		
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	13	0.	13	0.		
14	Benefits paid to or for members (Part IX, column (A), line 4)	14	0.	14	0.		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	15	861,857.	15	948,244.		
16a	Professional fundraising fees (Part IX, column (A), line 11e)	16a	0.	16a	0.		
b	Total fundraising expenses (Part IX, column (D), line 25)	b	0.	b	0.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	17	201,469.	17	236,269.		
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18	1,063,326.	18	1,184,513.		
19	Revenue less expenses. Subtract line 18 from line 12	19	<86,680.>	19	218,869.		
		Beginning of Current Year		End of Year			
20	Total assets (Part X, line 16)	20	219,941.	20	443,334.		
21	Total liabilities (Part X, line 26)	21	23,899.	21	28,423.		
22	Net assets or fund balances. Subtract line 21 from line 20	22	196,042.	22	414,911.		

Part II Signature Block

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

Sign
Here

Signature of officer

Date

THOMAS SERMAK, EXECUTIVE DIRECTOR

Type or print name and title

Paid

Print/Type preparer's name

JOHN D. HAWKINS, JD, CPA

Preparer's signature

Date

11/18/11

Check
if
self-employed

PTIN

Preparer

Firm's name

GROVE, MUELLER & SWANK, P.C.

Firm's EIN

Use Only

Firm's address

475 COTTAGE STREET NE, SUITE 200
SALEM, OR 97301

Phone no (503) 581-7788

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

032001 02-22-11

LHA For Paperwork Reduction Act Notice, see the separate instructions.

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SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

P 15A

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	200.	1	1,403.
	2 Savings and temporary cash investments	191,954.	2	415,593.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 31,287.		
	b Less: accumulated depreciation	10b 13,769.	18,967.	10c 17,518.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	8,820.	15	8,820.
16 Total assets. Add lines 1 through 15 (must equal line 34)	219,941.	16	443,334.	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D	23,899.	25	28,423.
	26 Total liabilities. Add lines 17 through 25	23,899.	26	28,423.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	196,042.	27	414,911.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	196,042.	33	414,911.
	34 Total liabilities and net assets/fund balances	219,941.	34	443,334.

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Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,403,382.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,184,513.
3	Revenue less expenses Subtract line 2 from line 1	3	218,869.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	196,042.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	414,911.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

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