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032001 02-22-11

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)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α	For the	2010 calendar year, or tax year beginning and end	ling						
В	Check if applicable	C Name of organization		D Employer identif	ication number				
	Addres	THE PUBLIC FORUM INSTITUTE							
	Name change	Doing Business As		52-2	315929				
+	∏initial retum ∏Termin- ated		m/suite O	E Telephone numb	er -467–2777				
	Amend			G Gross receipts \$ 849,774					
	Applica	WASHINGTON, DC 20037		H(a) Is this a group	return				
	pending	F Name and address of principal officer JUNATHAN URTHANS		for affiliates?	Yes X No				
		2300 M STREET, NW, SUITE 900, WASHINGTON	, DC	H(b) Are all affiliates in	cluded? Yes No				
		mpt status: X 501(c)(3) 501(c) ()	527	If "No," attach	a list. (see instructions)				
J	<u>Website</u>	e: ► WWW.PUBLICFORUMINSTITUTE.ORG		H(c) Group exempti					
		organization X Corporation Trust Association Other ►	L Year	of formation 2001	M State of legal domicile DC				
P		Summary							
Activities & Governance		Briefly describe the organization's mission or most significant activities: $\overline{\text{CITIZE}}$: PUBLIC UNDERSTANDING OF NATIONAL ISSUES.	N EN	GAGEMENT:	TO IMPROVE				
rus	2 (Check this box If the organization discontinued its operations or disposed	of more	than 25% of its net a	issets.				
Š	3 1	Number of voting members of the governing body (Part VI, line 1a)	3	7					
<u>ن</u> ھ	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	5				
es	5	otal number of individuals employed in calendar year 2010 (Part V, line 2a)		5	8				
<u>₹</u>	6	Total number of volunteers (estimate if necessary)		6					
Act	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a					
	1 6	Net unrelated business taxable income from Form 990-T, line 34		7t	0.				
				Prior Year	Current Year				
e		Contributions and grants (Part VIII, line 1h)		1,674,700					
Revenue		Program service revenue (Part VIII, line 2g)		0.					
Re.		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	23,128						
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		82,351					
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,780,179						
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<u> </u>	0.					
	1	Benefits paid to or for members (Part IX, column (A), line 4)	806,410						
ses	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0,410					
Expenses	100 1	Professional fundraising fees (Part IX, column (A), line 11e)			0.				
X	17	Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	: D	481,009	345,042.				
	1	Fotal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		01,287,419					
		1011	n., 📑	0 492,760					
200	<u> </u>	JUNE A 1	011	ding of Current Year					
Net Assets or	20 1	Total assets (Part X, line 16)		896,360	1,560,045.				
ASS	21	Fotal liabilities (Part X, line 26)	UT	68,152					
E SE	22 1	Net assets or fund balances. Subtract line 21 from line 20		1,828,208					
	art II	Signature Block							
Und	ier penal	ties of perjury, I declare that I have examined this return, including accompanying schedules an	d statem	ents, and to the best of r	ny 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					
	Į.	Man A. Mini		, 6/27	1/2011				
Sig	jn	Signature of officer		Date *	1				
He	re	MARK MARICH, EXECUTIVE VICE PRESIDENT Type or print name and title		 -					
		Print/Type preparer's name Preparer's signature	10	Date Check	PTIN				
Pai	1	Clinton L. Lehman Clinton 2 7hm		6/14/2011 self-emplo	yed				
Pre	parer	Firm's name SQUIRE, LEMKIN + COMPANY LLP		Firm's EIN	 				
Use	Only	Firm's address 111 ROCKVILLE PIKE, SUITE 475			 				
_		ROCKVILLE, MD 20850		Phone no	301-424-6800				
Ма	v the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No				

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

Form **990** (2010)

orm	990 (2010) THE PUBLIC FORUM INSTITUTE 52-2315929 Page 2
	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	TO ENGAGE CITIZENS IN KEY NATIONAL ISSUES DISCUSSIONS IN AN
	INDEPENDENT AND IMPARTIAL FASHION TO CREATE A MORE INFORMED PUBLIC.
2	Did the organization undertake any significant program services during the year which were not listed on
•	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
•	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
•	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and
	allocations to others, the total expenses, and revenue, if any, for each program service reported
4-	
4a	(Code:) (Expenses \$83,425. Including grants of \$) (Revenue \$) OUTREACH TO THE PUBLIC. PROVIDE OPPORTUNITIES FOR CITIZENS TO
	PARTICIPATE IN IMPARTIAL DIALOGUES IN AN INDEPENDENT SETTING.
	PARTICIPATE IN IMPARTIAL DIALOGUES IN AN INDEPENDENT SETTING.
	064 064
4b	(Code) (Expenses \$864,864. including grants of \$) (Revenue \$48,924.
	PLANNING AND ORGANIZING IMPARTIAL, INDEPENDENT PUBLIC FORUMS THAT BRING
	TOGETHER PUBLIC OFFICIALS, SPECIALISTS, AND THE GENERAL PUBLIC.
	·
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶ 948,289.
	Form 990 (2015

Form 990 (2010) THE PUBLIC FORUM INSTITUTE

Part IV Checklist of Required Schedules

If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII d Did the organization report an amount for other assets in Part X, line 15? If "Yes," complete Schedule D, Part X III d Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization is liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 110 III X 1110 X 1110 X 1111 X 1112 X 1113 X 1120 III X 113 X 1140 X 115 III X 115 X 116 X 117 X 118 X 119 X 119 X 110 X 110 X 110 X 111 X 110 X 111 X 111 X 111 X 112 X 113 X 114 X 115 X 116 X 117 X 118 X 119 X 119 X 119 X 110 X 110 X 111 X 110 X 111 X 111 X 112 X 113 X 114 X 115 X 116 X 117 X 118 X 119 X 119 X 110 X 110 X 111 X 111 X 111 X 112 X 113 X 114 X 115 X 116 X 117 X 118 X 118 X 119 X 119 X 110 X 110 X 111 X 111 X 111 X 112 X 113 X 114 X 115 X 116 X 117 X 118 X 118 X 119 X 119 X 119 X 110 X 110 X 111 X 111 X 111 X 112 X 113 X 114 X 115 X 116 X 117 X 117 X 118 X 119 X 119 X 110 X 111 X 111 X 112 X 111 X 112 X 113 X 114 X 115 X 116 X 117 X 118 X 118 X 119 X 119 X 110 X 111 X 111 X 112 X 112 X 113 X 114 X				Yes	No_
2 is the organization required to complete Schedule 6, Schedule of Contributors? Old the organization engage in direct or indirect confidence organization space in direct or indirect or public office? If "Yes," complete Schedule C, Part II Section 501(6) organizations. Did the organization engage in lobbying activities, or have a section 501(fit) election in effect during the tax year? If "Yes," complete Schedule C, Part II is the organization as action 501(6)(4), 501(6)(5), or 501(6)(6), organization that receives membership dues, assessments, or similar amounts as defined in Revieure Procedule C, Part II by the organization assetion she review of the section of the section of the complete Schedule C, Part II de the organization manifam any donor advised funds or any similar funds or accounts where donors have the right to provide active on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II de the organization receive or hold a conservation assement, including assements to preserve open space, the environment, historic land areas, or historic articuries? If "Yes," complete Schedule D, Part II bid the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit courseling, debt management, credit repairs, or debt inapolation services? If "Yes," complete Schedule D, Part IV bid the organization report an amount for environment of assessing the part X, line 10? If "Yes," complete Schedule D, Part IV If the organization sample and amount for environment in Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X, line 10? If Yes, complete Schedule D, Part X, li	1				
3 Dd 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 Section 501(p)(5) organizations. Did the organization engage in lobbying activities, or have a section 501(p)(6) election in effect during the tax year? If "Yes," complete Schedule C, Part II is the organization a section 501(p)(6)(p), 501(p)(5), 607(p)(6)) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-191 If "Yes," complete Schedule C, Part II is 10 Dd the organization newton any donor advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II is 10 Dd the organization maintain collections of works of an international content of the organization maintain collections of works of an international resistance, or other similar assets? If "Yes," complete Schedule D, Part II is 10 Dd the organization maintain collections of works of an international resistance, or other similar assets? If "Yes," complete Schedule D, Part II is 10 Dd the organization international maintain collections of works of an international services? If "Yes," complete Schedule D, Part II is 10 Dd the organization international maintain collections of works of an international services? If "Yes," complete Schedule D, Part IV is 10 Dd the organization international resistance organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part IV is 10 Dd the organization report an amount for lead organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part IV is 10 Dd the organization report an amount for works and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 15' If "Yes," complete Schedule D, Part X is 10 Dd the organization report an amount for the habitities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16' If "Yes,					
public office? If "Yes," complete Schedule C, Part II Section 501(i)(3) organization. Did the organization engage in lobbying activities, or have a section 501(ii) election in effect during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(i)(4), 501(i)(5), or 501(i)(8) or 501(2	Х	<u> </u>
4 Section 501(s)(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 is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership diues, assessments, or similar amounts as defined in Revenue Procedure 98-1917 "Yes," complete Schedule C, Part II Did the organization markinal any doors advesed funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation assement, including assements to be preserve open apace, the environment, historic land areas, or historic attriuctures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counselling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for lengal, or debt negotiation, hold assets in term, permanent, or quase-endowments? If "Yes," complete Schedule D, Part V, II If the organization report an amount for lend, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V, II Did the organization report an amount for investments - program related 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 X V Did the organization report an amount for investments - program related in Part X, line 18? If "Yes," complete Schedule D, Part X V Did the organization report an amount for investments - program related in Part X, line 18? If "Yes," complete Schedule D, Part X V Did the organization report	3	·	_	Ì	v
during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section S01(c)(a), S01(c)(6), or S01(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 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advised on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization receive or hold a conservation essement, including essements to preserve open space, the environment, historical areas, or historical streasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments or their 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 Did the organization report an amount for investments or other securities 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 Did the organization report an amount for other assets 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 X Did the organization report an amount for other isostitutes of the Tax year include a footnote that addresses the organization report an amount for other isostitutes of the t			3_		
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8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V, II If the organization answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 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 VIII The Did the organization report an amount for unsestments - organization 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 The 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 X The Did the organization report an amount for other labilities 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 X The Did the organization report an amount for other labilities 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 X X The Did the organization obtain separate, independent audited financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedul			7		Х
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Schedule D, Parts XI, XII, and XIII 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, XII, and XIII is optional Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts III and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 15 X 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1 cand 8a? If "Yes," complete Schedule G, Part II 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 II 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 19 Vita organization operate one or more hospitals? If "Yes," complete Schedule H 19 Vita organization operate one or more hospitals must attach audited financial statements (see instructions)		the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
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Form 990 (2010) THE PUBLIC FORUM INSTITUTE

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	_X_	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			.,
	Schedule K If "No", go to line 25	24a		X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
_	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			.,
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			.,
••	Schedule L, Part III	27		X
28	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).	:		v
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	,,,,,,,,	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
00	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
04	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
20	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			Х
22	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			v
35	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		
d	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			
36	· · · · · · · · · · · · · · · · · · ·			
30	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	20		v
37	·	36		X
31	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	2~		Х
38	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_
55	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
	A CONTRACTOR AND SOCIAL SECTION OF THE SECTION OF T			2010)

THE PUBLIC FORUM INSTITUTE Form 990 (2010) Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V Yes 3 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming X (gambling) winnings to prize winners? 1c 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, 8 filed for the calendar year ending with or within the year covered by this return Х b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3ь 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)? X 4a **b** If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible? 6a **b** If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b Organizations that may receive deductible contributions under section 170(c). Х a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? X 7c d If "Yes," indicate the number of Forms 8282 filed during the year Х e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting 8 organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make a distribution to a donor, donor advisor, or related person? 9ъ 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 10a 10ь b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders 11a b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b

Form **990** (2010)

Х

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

13c

Part VI Governance, Management, and Disclosure For each "Yes" response to line 82 through 7b below, and for a "No" response to line 82 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions			
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion 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 7			
ь	Enter the number of voting members included in line 1a, above, who are independent 5			
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		X
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		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Χ_
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		X
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	_X_	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			٠,,
	taxable entity during the year?	16a		X
þ	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and the second s	nd fina	ncıal	
	statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	ion: 🕨	· —	
	THE ORGANIZATION - 202-467-2777			
	2300 M STREET, NW, STE 900, WASHINGTON, DC 20037			

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See 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, and 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 organizat (A)	(B)			(C	2)			(D)	(E)	(F)		
Name and Title	Average hours per	(6)	Positio (check all that					Reportable	Reportable compensation	Estimated amount of		
	week (describe hours for related (organizations in Schedule O)	ustee or director	institutional frustee	Officer		Highest compensated Complexed Comple		compensation from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations		
JONATHAN ORTMANS			 									
PRESIDENT/DIRECTOR	45.00	Х		Х				401,472.	0.	0.		
ANNE NEEL								•	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
DIRECTOR	1.00	Х				,		1,588.	0.	_ 0.		
NEIL DHILLON		Г	· · ·		Γ-			•	1			
DIRECTOR	1.00	Х	}					0.	0.	0.		
MARK MARICH												
EXECUTIVE VICE PRESIDENT	40.00	Х		Х				145,531.	0.	0.		
TOM SULLIVAN												
DIRECTOR	1.00	X						0.	0.	0.		
ROBERT MEAGHER	-											
DIRECTOR	1.00	X						0.	0.	0.		
GEORGE GROB												
DIRECTOR	1.00	X				ļ		0.	0.	0.		
	_	_			-							
		-			_							
		-		<u> </u>	-							
		-										

	Section A. Onicers, Directors, Th		iipic	yee			nign	cal								
	(A)	(B) Average		(C) Position					(D)	(E)		(F)				
	' Name and title	hours per	(cl				ı app	ly)	Reportable Reportable compensation compensation			Estimated amount of				
	•	week	<u> </u>		<u> </u>	_ .	,,,,	<u> </u>	from	from related			other			
		(describe	Individual trustee or director				_		the	organizations			pensa			
		hours for related	5 8	聚			rsated	1	organization	(W-2/1099-MIS	7)		om th			
		organizations	frust	ᆵ		8	отре		(W-2/1099-MISC)			-	anızat d relat			
		ın Schedule	widua	Institutional trustee	Officer	Кеу етріоуее	Highest compensated employee	Former					ınızatı			
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				İ		}										
1 b	Sub-total					<u> </u>	▶	L	548,591.		0.			0.		
С	Total from continuation sheets to Part V	II, Section A					▶		0.		0.			0.		
<u>d</u>	Total (add lines 1b and 1c)								548,591.		0.			0.		
2	Total number of individuals (including but	not limited to th	ose	liste	ed a	bov	e) w	ho r	eceived more than \$100	,000 in reportable				^		
	compensation from the organization												V	No No		
_	Delaber and the second second second							1			٦		Yes	NO		
3	Did the organization list any former officer line 1a? If "Yes," complete Schedule J for s			е, ке	y en	npio	yee,	or r	nignest compensated er	npioyee on		3		х		
4	For any individual listed on line 1a, is the s			omo	ens	atioi	n an	d of	her compensation from	the organization	f			-		
7	and related organizations greater than \$15	•							•	the organization		4	Х	1		
5	Did any person listed on line 1a receive or									idual for services	Ī		,			
	rendered to the organization? If "Yes," con											5		X		
Sec	tion B. Independent Contractors															
1	Complete this table for your five highest co	ompensated in	dep	ende	ent c	ont	racto	ors t	that received more than	\$100,000 of comp	ensa	ation f	rom			
	the organization. NONE															
	(A) Name and busines:	s address						- [(B) Description of s	services	C	O) Samo	رز nsatio	on		
									200011011011011							
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								_	<u> </u>							
										į						
																
2	Total number of independent contractors	(including but r	not li		ed to	the	nse li	ster	d above) who received n	nore than	- -					
-	\$100,000 in compensation from the organ	_					0	J. 651	- aboro, who received t	ioro triari						
	The state of the s												000	(2010)		

52-2315929

		,		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1 1	a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and	1a 1b 1c 1d 1e				
Contrik and otl		similar amounts not included above Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f	784,925.	784,925.			
			Business Code	104,323.		 	
Program Service Revenue	'	b					
Progra Re		e f All other program service revenue					
		g Total. Add lines 2a-2f	<u> </u>				
	3 4 5	Investment income (including dividend other similar amounts) Income from investment of tax-exempt Royalties	•	15,925.			15,925.
		() F	leal (II) Personal				
		a Gross Rents b Less: rental expenses c Rental income or (loss)					
		d Net rental income or (loss) a Gross amount from sales of (i) Sec	urities (ii) Other				
		assets other than inventory b Less: cost or other basis	unities (ii) Other				
	۰	and sales expenses Gain or (loss) Net gain or (loss)	•				
Revenue	8 a	Gross income from fundraising events including \$ o contributions reported on line 1c). See	f				
Other Reven	t	Part IV, line 18 Less: direct expenses	ab				
		 Net income or (loss) from fundraising e Gross income from gaming activities. S Part IV, line 19 					
		Less: direct expensesNet income or (loss) from gaming activities	b				
	10 a	Gross sales of inventory, less returns and allowances Less: cost of goods sold	a b				
	c	Net income or (loss) from sales of inver Miscellaneous Revenue	Business Code				
	11 a	REIMBURSED EXPENSES	900099	32,949. 8,425.	32,949. 8,425.		
	c	INCREASE IN CASH SU		7,550.	7,550.		
		d All other revenue Total. Add lines 11a-11d		48,924.			
03200 12-21	12 9 -10	Total revenue. See instructions	>	849,774.	48,924.	0.	15,925. Form 990 (2010)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

1 2 3 4 5	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21		expenses	general expenses	expenses
3 4 5	organizations in the U.S. See Part IV, line 21				
3 4 5					
4 5	Grants and other assistance to individuals in				
4 5	the U.S. See Part IV, line 22				
5	Grants and other assistance to governments,				
5	organizations, and individuals outside the U.S				
5	See Part IV, lines 15 and 16				
	Benefits paid to or for members				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
6	Compensation of current officers, directors,				
6	trustees, and key employees	548,591.	424,168.	85,296.	39,127
	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	224,622.	173,677.	34,925.	16,020
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	31,200.	26,208.	2,496.	2,496
9	Other employee benefits				
10	Payroll taxes	42,527.	32,882.	6,612.	3,033
11	Fees for services (non-employees):				
а	Management				
b	Legal				
c	Accounting	13,520.		13,520.	-
d	Lobbying				
е	Professional fundraising services See Part IV, line 17			, , , , , , , , , , , , , , , , , , , ,	
f	Investment management fees				
9	Other	497.	497.		
12	Advertising and promotion				
13	Office expenses	19,062.	18,383.	221.	458
14	Information technology	5,653.	5,517.	136.	
15	Royalties				·
16	Occupancy	142,337.	119,111.	12,239.	10,987
17	Travel	30,347.	30,347.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,704.	3,952.	376.	376
23	Insurance	35,227.	29,629.	2,780.	2,818
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule 0)				
	MEDIA CONSULTANTS AND P	48,024.	48,024.		
b	OTHER EXPENSES	26,455.	17,951.	8,504.	
C	WRITING AND RESEARCH	8,297.	8,297.	,	
_	MEALS	5,852.	5,852.	-	
е	ROOMS	3,623.	3,623.		
f	All other expenses	1,444.	171.	1,273.	· -
25	Total functional expenses. Add lines 1 through 24f	1,191,982.	948,289.	168,378.	75,315
26	Joint costs. Check here if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet (A) Beginning of year End of year 564,520. 67,805. 1 1 Cash · non-interest-bearing 1,428,406. 509,789. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 30,000. Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L 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 Inventories for sale or use 8 3,381. 15,094. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 23,963. 10a basis. Complete Part VI of Schedule D 17,764 6,472. 316,219. 6,199. 352,816. b Less accumulated depreciation 10b 10c 11 11 Investments · publicly traded securities 12 12 investments - other securities. See Part IV, line 11 13 investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 74,077. 81,627. 15 15 Other assets. See Part IV, line 11 1,896,360. 68,152. 1,560,045. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 55,453. 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities. Complete Part X of Schedule D 68,152. 55,453. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,828,208. 1,504,592. 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds

> 1,560,045. Form 990 (2010)

1,504,592.

31

32

33

1,828,208.

1,896,360.

31

32

33

Paid-in or capital surplus, or land, building, or equipment fund

Total net assets or fund balances

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

F <u>orm</u>	990 (2010) THE PUBLIC FORUM INSTITUTE	52-231	5929	Pag	ge 12		
Pa	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI				X		
	•						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	84	9,7	74.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,19	1,9	82.		
3	Revenue less expenses. Subtract line 2 from line 1	3	-34	2,2	08.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,82	8,2	08.		
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1	8,5	92.		
6_	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						
Pa	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990. Cash X 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?		2a		X		
b	Were the organization's financial statements audited by an independent accountant?		2b	Х			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audıt,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X		
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O		,			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a					
	separate basis, consolidated basis, or both:						
	X 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 Sir	ngle Audit					
	Act and OMB Circular A-133?		3a		X		
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3ь				

Form **990** (2010)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2010

Open to Public Inspection

Name of the organization

THE PUBLIC FORUM INSTITUTE

Employer identification number 52-2315929

Schedule A (Form 990 or 990-EZ) 2010

			PLIC FOROM IN						<u> </u>	<u>-2313</u>	263	
Part I	Reason	for Public Cha	ity Status (All organiz	ations mu	st complet	e this part	t.) See inst	ructions.				
he organ	ization is not a	a private foundation	because it is: (For lines 1	1 through 1	1, check	only one b	ox.)					
1 🔲	A church, cor	nvention of churche	s, or association of chure	ches desci	ribed in se	ction 170	(b)(1)(A)(i)	•				
2	A school des	cribed in section 17	70(b)(1)(A)(ii) . (Attach Sc	hedule E)								
3 🔛	A hospital or	a cooperative hosp	ital service organization o	described i	n section	170(b)(1)	(A)(iii).					
4 📖	A medical res	search organization	operated in conjunction	with a hos	pıtal desci	ibed in se	ction 170	(b)(1)(A)(ii	ii). Enter th	e hospital	's nam	e,
	city, and state	e:										
5 🔲	An organizati	on operated for the	benefit of a college or ur	niversity ov	vned or op	erated by	a governr	mental uni	t described	d In		
	section 170	(b)(1)(A)(iv). (Compl	ete Part II.)									
6	A federal, sta	ite, or local governm	ent or governmental uni	t described	ın sectio	n 170(b)(1	I)(A)(v).					
7 X	An organizati	on that normally red	eives a substantial part	of its supp	ort from a	governme	ental unit o	r from the	general pu	ublic desc	rıbed ı	n
	section 170(b)(1)(A)(vi). (Comple	ete Part II.)									
8 📙	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II)							
9 📖	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from											
	activities rela	ted to its exempt fu	nctions - subject to certa	ain exception	ons, and (2	2) no more	than 33 1	/3% of its	support fr	om gross	ınvest	ment
			axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization af	ter June 3	0, 197	5.
		509(a)(2). (Complet	•									
10	_	•	perated exclusively to te	•	•			•			_	
11 []	_	-	perated exclusively for the		•		•		•	•		or
		• • •	ations described in section	, , ,	•		2). See se c	etion 509((a)(3). Chec	K the box	tnat	
		_ · · · _ _	organization and comple		_				٠	Type III - (346	
	a Type I		」Type II cat the organization is not		e III • Func	•	-	ara dia		• •		_
e	,	•	than one or more publicly		•	•	•		•			11
f		-	tten determination from t		-				3(a)(1) 01 St	schon sos	(a)(z).	
•	-	rganization, check t		ine ino inc	шизату	pe i, Type	ii, or Type	3 III				
g	• • •	- ·	organization accepted ar	av alft ar co	antribution	from any	of the follo	owing per	eone?			
9	=		directly controls, either al			•					Yes	No
		· · · · · · · · · · · · · · · · · · ·	upported organization?		O.,,,O., W.	porouno c		(, ۵., ۵	(, 20.011,	11g(i)	1.55	
	_	- ·	n described in (i) above?	,						11g(ii)		
		•	a person described in (i) o		∍?					11g(iii)	T .	
h	1 1	-	about the supported or	* *								
		J	••	_	•							
(ı) Name	of supported	(ii) EIN	(III) Type of	(iv) is the o	rganization	(v) Did you	u notify the	(vi) is		(vii) An	nount o	f
	anization	(, 2	organization (described on lines 1-9	, , ,	sted in your			organizati (i) organiz	on in col zed in the		port	•
			above or IRC section	governing	document?	(I) of you	r support?	Ϋ́υs	5 2			
			(see instructions))	Yes	No	Yes	No	Yes	No			
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Γotal												

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

52-2315929 Page 2 Schedule A (Form 990 or 990-EZ) 2010 THE PUBLIC FORUM INSTITUTE Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2006 **(b)** 2007 (c) 2008(d) 2009 (e) 2010 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 784,925 2,131,403 1,343,567 1,649,525 1,674,700 7,584,120. 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 3 784,925 2,131,403 1,343,567. 1,649,525. 1,674,700 7,584,120. 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 5,985,465. 6 Public support. Subtract line 5 from line 4 1,598,655. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2006 (b) 2007 (c) 2008(d) 2009 (e) 2010 (f) Total 1,343,567 7 Amounts from line 4 784,925. 2,131,403. 1,649,525 1,674,700 7,584,120. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 37,525. 51,130. 26,211. 23,128. 15,932. 153,926. 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 171,574. 269,916 82,351 assets (Explain in Part IV.) 40,252 638,679. 25.

Section C. Computation of Public Support Percentage								
	organization, check this box and stop here					▶ [
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section	n 501	(c)(3)					
12	Gross receipts from related activities, etc. (see instructions)	12						
• •	Total Support: Add lines / tillough 10	Ĺ		.1	8,376	772		

14	Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f))	14	19.08
15	Public support percentage from 2009 Schedule A, Part II, line 14	15	19.36
16a	33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or m	ore, c	check this box and
	stop here. The organization qualifies as a publicly supported organization		▶□

b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization $\triangleright X$

b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2010

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 fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose					_	
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to	ı					
	or expended on its behalf	1			-		
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and	1					
	3 received from disqualified persons	I				1	
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
•	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6						
10	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
ì	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
•	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
	Total support (Add lines 9, 10c, 11, and 12)	<u> </u>		L	<u> </u>	.L	<u></u>
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3) organi	zation,
_	check this box and stop here						
	ction C. Computation of Publ	_				~	
15	Public support percentage for 2010 (I	•		column (f))		15	<u> </u>
16	Public support percentage from 2009					<u> 16_ </u>	<u>%</u>
<u>Se</u>	ction D. Computation of Inves	stment Incom	<u>ie Percentage</u>	<u> </u>			
17	Investment income percentage for 20	10 (line 10c, colu	mn (f) divided by li	ne 13, column (f))		17	
18	Investment income percentage from 2	2009 Schedule A,	Part III, line 17			18	%
19	a 33 1/3% support tests - 2010. If the	organization did i	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a	nd stop here. The	e organization qua	lifies as a publicly	supported organiz	zation	
ı	33 1/3% support tests - 2009. If the						
	line 18 is not more than 33 1/3%, che						▶ 🛄
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	▶ □

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

PART II, SECTION C, LINE 17A, FACTS AND CIRCUMSTANCES TEST:

THE PUBLIC FORUM INSTITUTE QUALIFIES AS A PUBLIC CHARITY UNDER THE "FACTS AND CIRCUMSTANCES" TEST OF 1.170A-9T(F)(3) OF THE TREASURY REGULATIONS,

BASED ON THE FOLLOWING:

- 1. THE PUBLIC FORUM INSTITUTE'S SUPPORT, AS REPORTED FOR 2010, IS 19.08%, THEREBY MEETING THE REQUIREMENT OF 1.170A-9T(F)(3)(I).
- 2. THE PUBLIC FORUM INSTITUTE IS ORGANIZED AND OPERATED TO ATTRACT NEW AND ADDITIONAL PUBLIC AND GOVERNMENT FUNDING ON A CONTINUOUS BASIS. SINCE 2004, THE INSTITUTE HAS CONTINUOUSLY AND AGGRESSIVELY SOUGHT PUBLIC SUPPORT FROM A VARIETY OF SOURCES. THESE DEVELOPMENT EFFORTS ARE GUIDED BY A FULL-TIME DEVELOPMENT DIRECTOR. THE MOST SIGNIFICANT VEHICLE FOR GARNERING PUBLIC SUPPORT HAS PROVEN TO BE DRIVEN AROUND THE INSTITUTE'S PUBLIC FORUMS THAT ENGAGE CITIZENS, THEREBY MEETING THE REQUIREMENT OF 1.170A-9T(F)(3)(II).
- 3. THE INSTITUTE FROM 2006 TO 2010 HAD SUCCEEDED IN RAISING \$2,254,298
 FROM PUBLIC SOURCES, WHICH CONSTITUTE APPROXIMATELY 27.44% OF ITS TOTAL
 REVENUE DURING THAT TIME FRAME AND IS ALMOST THREE TIMES THE MINIMUM 10%
 PUBLIC SUPPORT REQUIREMENT. THE INSTITUTE IS CURRENTLY PURSUING A

 COMPREHENSIVE PLAN TO CONTINUE TO INCREASE THIS LEVEL OF PUBLIC SUPPORT TO
 KEEP IT WAY OVER THE 10% MINIMUM, THEREBY MEETING THE REQUIREMENTS OF

 1.170A-9T(F)(3)(III)(A).
- 4. THE INSTITUTE ENJOYS SUPPORT FROM A BROAD SPECTRUM OF INDIVIDUALS,
 ORGANIZATIONS AND COMPANIES. IN 2007, NEARLY 50 SUPPORTERS PROVIDED
 SUPPORT OF \$10,000 OR LESS, TO THE INSTITUTE. THE INSTITUTE CONTINUES TO
 SEEK MONEY FROM THESE AND OTHER CORPORATE SOURCES WITH A NUMBER OF
 COMPANIES CONSISTENTLY PROVIDING ANNUAL SUPPORT TO THE INSTITUTE. IN
 2006, THE INSTITUTE RECEIVED \$1.1 MILLION IN REVENUE FROM FEDERAL
 AGENCIES, INCLUDING THE DEPARTMENT OF HEALTH AND HUMAN SERVICES. IN

Schedule A (Form 990 or 990-EZ) 2010 THE PUBLIC FORUM INSTITUTE	52-2315929 Page 4
Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line and Part III, line 12. Also complete this part for any additional information. (See instructions).	
THIS RESPECT, THE INSTITUTE MEETS THE REQUIREMENTS OF	
1.17A-9T(F)(3)(III)(B).	
5. THE INSTITUTE'S BOARD OF DIRECTORS IS COMPOSED OF A SM	MALL GROUP OF
DISTINGUISHED REPRESENTATIVES FROM THE WORLDS OF BUSINESS I	NCLUDING FORMER
GOVERNMENT AND NON-PROFIT LEADERS. HOWEVER, THE INSTITUTE	RELIES ON
SUPPORT FROM SEVERAL ADVISORS NOT ON THE BOARD AND CONDUCTS	ALL ITS PUBLIC
ENGAGEMENT WORK WITH THE PARTICIPATION OF LOCAL COMMUNITY O	RGANIZATIONS.
ALMOST ALL FORUMS AND ACTIVITIES GAIN THE INPUT AND NON-FIN	ANCIAL SUPPORT
FROM A WIDE RANGE OF LOCAL NON-PROFIT ORGANIZATIONS THAT SE	RVE AS PARTNERS
OR NON-FINANCIAL CO-SPONSORS, THEREBY MEETING THE REQUIREME	NTS OF
1.170A-9T(F)(3)(III)(C).	
6. THE INSTITUTE IS DEDICATED TO IMPROVING PUBLIC DISCOUR	RSE ABOUT ISSUES
OF THE DAY. OVER THE PAST 6 YEARS, THE INSTITUTE HAS CONDU	CTED MORE THAN
60 EVENTS, FORUMS AND ACTIVITIES ALONG WITH 8 PUBLIC OFFICI	ALS. ALL
EVENTS AND ACTIVITIES ARE DESIGNED EXCLUSIVELY TO ENABLE TH	OSE WHO WOULD
OTHERWISE NOT HAVE AN OPPORTUNITY TO ENGAGE THEIR VOICE IN	PUBLIC
DISCOURSE TO DO SO AND ARE ALL OPEN TO THE PUBLIC AND OFFER	ED AT NO
CHARGE, THEREBY MEETING THE REQUIREMENTS OF 1.17A-9T(F)(3)(III)(D).
	
	· · · · · · · · · · · · · · · · · · ·
	_

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization

Employer identification number

	THE PUBLIC FORUM I		52-2315929
Par	Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or I	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	nds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor		
_	impermissible private benefit?		Yes No
Par	I Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Part IV	/, line 7.
1	Purpose(s) of conservation easements held by the organizat	tion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of an historica	ally important land area
	Protection of natural habitat	Preservation of a certified i	nistoric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form of a c	conservation easement on the last
	day of the tax year		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the orga	anization during the tax
	year ▶		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
_	violations, and enforcement of the conservation easements		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting	-	
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo	eve satisfy the requirements of section 170(h)(4)(
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organiza	ation's financial statements that describes the o	rganization's accounting for
Da	conservation easements. t III Organizations Maintaining Collections of	of Art Historical Traceuras or Other	Similar Assats
1 61	Complete if the organization answered "Yes" to Form	•	Olilliai Assets.
12	If the organization elected, as permitted under SFAS 116 (A)		and balance sheet works of art
10	historical treasures, or other similar assets held for public ex	·	
	the text of the footnote to its financial statements that descri		public service, provide, in Fart XIV,
h	If the organization elected, as permitted under SFAS 116 (A		halance sheet works of art, historical
U	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	saddation, or research in farther affect of paolic s	civios, provide the lonowing amounts
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial dain	
-	the following amounts required to be reported under SFAS		, p
а	Revenues included in Form 990, Part VIII, line 1	(a and	▶ \$
	Assets included in Form 990, Part X		► \$ ► \$
			·

	edule D (Form 990) 2010 THE PUB	LIC FORUM	INSTITUT	E		52	2-23	15929	Pa	age 2
Pa	rt III Organizations Maintaining C	collections of A	rt, Historical	Treasures, o	or Other	Similar	Asset	s (conti	nued)	
3	Using the organization's acquisition, access	on, and other record	ds, check any of	the following tha	it are a sigi	nificant use	of its	collection	Item	s
	(check all that apply):									
а	Public exhibition	c	i Loan or	exchange progra	ams					
b	Scholarly research	•	e 🔲 Other_					_		
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how they furth	er the organizati	on's exem	pt purpose	ın Part	XIV.		
5	During the year, did the organization solicit of	r receive donations	of art, historical t	reasures, or oth	er sımılar a	ssets				
	to be sold to raise funds rather than to be m							Yes		No
Pa	rt IV Escrow and Custodial Arran				"Yes" to Fo	orm 990. P	art IV. I			
	reported an amount on Form 990, Pa	rt X, line 21.	•					.,,		
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for contribu	tions or other as	sets not in	cluded				
	on Form 990, Part X?			none or other do		oluded		Yes	Γ.	No
b		and complete the fo	llowing table:					165	L	, 140
_		and complete the ic	mowing table.					AA		
С	Beginning balance					4		Amount		
d	Additions during the year					1c				
	Distributions during the year					1d	-	·		
•	Ending balance					1e				
2a	-	000 D4 V I	040			1f		1		1
	Did the organization include an amount on F		21?				Ŀ	Yes	L	No
	If "Yes," explain the arrangement in Part XIV. TY Endowment Funds. Complete it									
F-61	TV Endowment Funds. Complete									
		(a) Current year	(b) Prior year	(c) Two year	s back (d) Three year	s back	(e) Four	years l	back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses	· · · · · · · · · · · · · · · · · · ·				-: //				
d	Grants or scholarships									
e	Other expenditures for facilities			ĺ						
	and programs									
f	Administrative expenses									
g	End of year balance								,	
2	Provide the estimated percentage of the year	r end balance held a	ıs							
а	Board designated or quasi-endowment		%							
b	Permanent endowment >	%	_							
С	Term endowment ▶	%								
За	Are there endowment funds not in the posse	ssion of the organiza	ation that are hel	d and administe	red for the	organizatio	on			
	by:	_				J		[·	Yes	No
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
þ	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Schedule R?					3b	_	
4	Describe in Part XIV the intended uses of the							00		
Par	t VI Land, Buildings, and Equipm						·			
	Description of investment	(a) Cost or o		ost or other	(a) Aaa	umulated		(d) Dest	volue	
	2 south the invocation	basis (investr		sis (other)		eciation		(d) Book	value)
1a	Land	2230 (1110011)	Das	(01/10/)	Jepie	Ciation				
	Buildings				•••••	••••••	-	-		
	Leasehold improvements						-			
				22 062	1	7 764			1.0	10
	Equipment			23,963.		7,764	•	6	,19	, 9 .
	Other						_			
. vial	. Add lines 1a through 1e. (Column (d) must e	uuai rorm 990, Part	л, coiumn (B). lin	e 1U(c).)		▶	٠ ۱	6	, 19	19.

Schedule D (Form 990) 2010

Part VII Investments - Other Securities.	See Form 990, Part X, line	12.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation: t or end-of-year market va	alue
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other			· · · · · · · · · · · · · · · · · · ·	
(A)			· · · · · · · · · · · · · · · · · · ·	
(B)			-	.
(C)				
(D)				
(E) (F)				
(G)				
(H)				
(I)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	>			
Part VIII Investments - Program Related		13.		
(a) Description of investment type	(b) Book value		(c) Method of valuation: t or end-of-year market va	alue
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
	· · · · · · · · · · · · · · · · · · ·			
(8)				
(10)				
Total (Col (b) must equal Form 990, Part X, col (B) line 13)	>			
Part IX Other Assets. See Form 990, Part X,				
	(a) Description			(b) Book value
(1) SECURITY DEPOSITS				1,155
(2) SURRENDER VALUE LIFE IN	SURANCE			80,472
(3)				
(4)	··			
(5)				
(6)				
(7)				
(8)		·		
(9)		 		
(10)	L = 45)	· · · · · · · · · · · · · · · · · · ·		81,627
Total. (Column (b) must equal Form 990, Part X, col (B) Part X Other Liabilities. See Form 990, Part		 		01,027
1 (a) Description of liability	(7, 1110 25.	(b) Amount	•	······································
(1) Federal Income taxes				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11) Table (2) / (2) / (3) / (4) / (5) / (6) / (7) / (7)	(, 05)			
Total. (Column (b) must equal Form 990, Part X, col (B) FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote. FIN 48 (ASC 740)	line 25) ote to the organization's financial sta	tements that reports the organi	ation's liability for uncertain tax p	positions under
2. FIN 48 (ASC 740)			•	
12-20-10	_		Schedule	D (Form 990) 201

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

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

See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

THE PUBLIC FORUM INSTITUTE

Attach to Form 990.

Employer identification number 52-2315929

P,	art I Questions Regarding Compensation		-	
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,		, , ,	1.10
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	46	•	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,	1b		
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?			
	the Rent of Case Cooking Director, regarding the Rents Checked III line 12:	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
		1		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a		Х
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	an additional an additional an additional an additional an additional an additional an additional an additional an additional an additional an additional an additional an additional an additional and additional an additional and additional additional additional and additional	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of.			
а	The organization?	5a		Х
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	ļ	X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	اها	ı	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2010

Page 2

Schedule J (Form 990) 2010

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

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

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

		(B) Breakdown of W-2	W-2 and/or 1099-MIS	and/or 1099-MISC compensation	(0)	(Q)	(E)	(F)	
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	Retirement and other deferred compensation	Nontaxable benefits	Total of columns (B)(I)-(D)	Compensation reported in prior Form 990 or Form 990-EZ	
	8	401,472.	0	0	0	0	401,472.	0	
1 JONATHAN ORTMANS	: 🗉	0	0	0	0	0	0	0	
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	(ii)							9_	
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Schedule J (Form 990) 2010

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

FORM 990, PART VI, SECTION A, LINE 8B: THE ORGANIZATION HAS NO COMMITTEES.

2010 Open to Public Inspection

Name of the organization

THE PUBLIC FORUM INSTITUTE

Employer identification number 52-2315929

FORM 990, PART VI, SECTION B, LINE 11: THE DIRECTORS, PRESIDENT,

TREASURER, AND EXECUTIVE VICE PRESIDENT ARE PROVIDED WITH THE 990 BEFORE IT

IS FILED, AND ARE ENCOURAGED TO REVIEW IT CAREFULLY.

FORM 990, PART VI, SECTION B, LINE 12C: NOT ONLY HAVE BOARD MEMBERS,

OFFICERS, AND KEY EMPLOYEES SIGNED THE CONFLICT OF INTEREST POLICY STATING

THAT THEY AGREE TO NOTIFY THE BOARD OF ANY CONFLICT OF INTEREST, BUT THEY

ARE REMINDED OF THE POLICY AT EACH BOARD MEETING. FUTHERMORE, THE POINT

PERSON EMPLOYEE FOR THE WHISTLEBLOWER POLICY ENCOURAGES EMPLOYEES TO

DISCLOSE INFORMATION ABOUT ANY ACTIVITIES THAT MIGHT BE REVIEWED AS

POTENTIAL CONFLICTS OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15: THERE HAVE BEEN NO REVIEWS OR

ADJUSTMENTS TO SENIOR MANAGEMENT COMPENSATION. ANY FURTHER COMPENSATION

REVIEWS, WHICH FALL WITHIN THE BOARD ADOPTED POLICY WILL BE LED BY AN

INDEPENDENT BOARD MEMBER, WILL NOT INVOLVE THE PERSON CONCERNED, AND WILL

BE BASED ON CONTEMPORANEOUS COMPARABILITY DATA.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S MAIN GOVERNING

DOCUMENTS, INCLUDING ITS POLICIES AND FINANCIAL STATEMENTS ARE MADE

AVAILABLE FOR INSPECTION AT THE OFFICES OF THE PUBLIC FORUM INSTITUTE BY

THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization THE PUBLIC FORUM INSTITUTE	Employer identification number 52-2315929
NET UNREALIZED GAINS ON INVESTMENTS:	18,592.
	_
	

Form **8868**

(Rev January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

	nplete only Pa	rt I and check this box			ightharpoons
If you are filing for an Additional (Not Automatic) 3-Mont	h Extension, c	complete only Part II (on page 2 of this	form).		
Oo not complete Part II unless you have already been gran	ited an automat	tic 3-month extension on a previously fi	ed For	m 8868.	
lectronic filing (e-file). You can electronically file Form 886	38 if you need a	a 3-month automatic extension of time t	o file (6	months for a c	orporation
equired to file Form 990-T), or an additional (not automatic)					
f time to file any of the forms listed in Part I or Part II with th					
ersonal Benefit Contracts, which must be sent to the IRS in					
isit www.irs.gov/efile and click on e-file for Charities & Nonp		,			,
Part I Automatic 3-Month Extension of 1		bmit original (no copies needed).	•		
corporation required to file Form 990-T and requesting an			plete		
art I only					▶ □
Il other corporations (including 1120-C filers), partnerships, o file income tax returns.	REMICs, and tr	rusts must use Form 7004 to request ar	exten:	sion of time	
ype or Name of exempt organization			Empl	oyer identifica	tion number
THE PUBLIC FORUM INSTITU			5	2-231592	9
ue date for ing your strum See Number, street, and room or suite no. If a P.O. b		tions.			
City, town or post office, state, and ZIP code. For WASHINGTON, DC 20037	or a foreign add	lress, see instructions.			
nter the Return code for the return that this application is for	or (file a separat	te application for each return)			0 1
pplication	Return	Application			Return
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