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Form **990**

Department of the Treasury Internal Revenue Service

A For the 2011 calendar year, or tax year beginning

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.

and ending

2011

Open to Public Inspection

B CI	neck if	C Name of organization		D Employer identifi	cation number
ar 	Addre				
<u> </u>	chang Name	PEN AMERICAN CENTER, INC.			4.47000
<u> </u>	Jchang Jinitial				447888
:]return]Termir	, , ,	Room/suite	E Telephone numbe	
:	lated Amend	300 BROADWAI	303)334-1660
_ =	Jreturn Applic	City or town, state or country, and ZIP + 4		G Gross receipts \$	4,970,414.
	Jtion pendir	NEW TORK, NY 10012-5246		H(a) Is this a group r	
		F Name and address of principal officer: STEVEN ISENBERG		for affiliates?	Yes X No
.,		SAME AS C ABOVE		H(b) Are all affiliates in	
		empt status X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) (or 527	1 ′	list. (see instructions)
		e: WWW.PEN.ORG	1	H(c) Group exemption	
	rt I	organization: X Corporation	<u> L Year</u>	of formation: 1985	M State of legal domicile: NY
Га			AMEDIC	LANT CENTED	TNG TO AN
8		Briefly describe the organization's mission or most significant activities: PEN 2			INC. IS AN
Governance		ASSOCIATION OF WRITERS AND OTHERS IN THE			
er		Check this box fithe organization discontinued its operations or dispos	sed of more	_	
30		Number of voting members of the governing body (Part VI, line 1a)		<u>3</u>	33
		Number of independent voting members of the governing body (Part VI, line 1b)		<u>4</u>	33
ies		Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	20
₽ <u>₹</u>	6	Total number of volunteers (estimate if necessary)		<u> 6</u>	140
∌ৡ∣	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
SCANNIED JAN 1 0 2013 Activities &	b	Net unrelated business taxable income from Form 990-T-line 34	<u></u>	<u>.</u> 7b	0.
25		RECEIVED		Prior Year	Current Year
⊸್ರಿ ∣		Contributions and grants (Part VIII, Ine 1h)		<u>1,270,316.</u>	3,231,682.
<u></u>	9	Program service revenue (Part VIII, line 2g) DEC 2 2012	. L	24,925.	134,138.
# \$	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		27,593.	57,150.
缓		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,585.	5,281.
₹		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A) line 12)		1,326,419.	3,428,251.
8		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		190,407.	277,288.
		Benefits paid to or for members (Part IX, column (A), line 4)	-	0.	0.
S		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		662,427.	1,496,640.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
e l		Total fundraising expenses (Part IX, column (D), line 25) 452,7	86.		
Ä		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	426,034.	1,359,157.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	·	1,278,868.	
		Revenue less expenses. Subtract line 18 from line 12	• • -	47,551.	295,166.
<u> </u>	19	nevenue less expenses. Subtract line 16 from line 12		ginning of Current Year	
as se	20	Total assets (Part X, line 16)	Ве	2,698,125.	End of Year
Bass			· ···		2,823,685.
Net Assets or Fund Balances		Total liabilities (Part X, line 26)	-	320,182.	249,532.
褞	<u>22</u> rt II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		2,377,943.	2,574,153.
		· · · · · · · · · · · · · · · · · · ·			
		lties of perjury, I declare that I have examined this return, including accompanying schedule			ly knowledge and belief, it is
true,	correc	t, and complete, Declaration of preparer (other than officer) is based on all information of wi	hich preparei		
		Econotive of the Company of the Comp		12/14/12	
Sign)	Signature of officer		Date	
Here	9	ROBYN DESHOTEL DIRECTOR OF FINANCE &	ADMIN		
		Type or print name and title			
		Print/Type preparer's name Preparer's significate		Date Check [PTIN
Paid		FREDERICK MARTENS		Mill sett-employ	
Prep		Firm's name LUTZ AND CARR, CPAS LLP		Firm's EIN	13-1655065
Use	Only	Firm's address 300 EAST 42ND STREET			
		NEW YORK, NY 10017		Phone no. 2	12-697-2299
May	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
13200	1 01-2	3-12 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form 990 (2011)

Form	m 990 (2011) PEN AMERICAN CENTER, INC. 13-34	47888 F	Page 2
Par	art III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		X
1	Briefly describe the organization's mission:		
	PEN AMERICAN CENTER, INC. IS AN ASSOCIATION OF WRITERS AND OT	HERS IN	
	THE LITERARY COMMUNITY WORKING TO DEFEND FREE EXPRESSION, ADV	ANCE	
	LITERATURE, AND FOSTER INTERNATIONAL LITERARY FELLOWSHIP.		
2	Did the organization undertake any significant program services during the year which were not listed on		_
	the prior Form 990 or 990-EZ?	Yes 🖸	X No
	If "Yes," describe these new services on Schedule O	П. Б	
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 organization's program service accomplishments for each of its three largest program services, as measured		
	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	
40	others, the total expenses, and revenue, if any, for each program service reported.	70,92	21 \
4a	(Code) (Expenses \$ 769,322. including grants of \$) (Revenue \$) PEN_WORLD_VOICES_FESTIVAL	10,32	<u>41.</u>)
	FEM WORLD VOICES FESTIVAL		
	TO FURTHER PEN'S MISSION TO ADVANCE LITERATURE, DEFEND FREE B	YDDFGGT	ONT
	AND FOSTER INTERNATIONAL LITERARY FELLOWSHIP, FOR ONE WEEK EA		
	THE PEN WORLD VOICES FESTIVAL OF INTERNATIONAL LITERATURE SHO		
	WORK OF INTERNATIONAL WRITERS FROM ACROSS THE GLOBE IN CONVER		
	READINGS, PERFORMANCES, AND PANELS TOGETHER WITH THEIR AMERIC		
	COUNTERPARTS FOR AN EXCITING CROSS-CULTURAL AND TRULY INTERNA		
		THE	
	FESTIVAL HAS FEATURED SUCH LUMINARIES AS NADINE GORDIMER, TON	II	
	MORRISON, ORHAN PAMUK, UMBERTO ECO, IAN MCEWAN, AND MARIO VAL	GAS LLO	SA.
_			
4b		3,0	<u>77.</u>)
	FREEDOM TO WRITE		
	MUDOUGU THE TRADON HO LITTER DOCEDING DOWN AND TOLL COMMED THE		
	THROUGH ITS FREEDOM TO WRITE PROGRAM, PEN AMERICAN CENTER FIG CENSORSHIP IN THE U.S. AND ABROAD AND ACTS TO SECURE THE LIB		
	CENSORSHIP IN THE U.S. AND ABROAD AND ACTS TO SECURE THE LIBE SAFETY OF IMPRISONED AND PERSECUTED WRITERS AND JOURNALISTS V		
	THROUGH OUR RAPID ACTION NETWORK, PEN HAS THE EXCEPTIONAL ABI		• •
	MOBILIZE, ALMOST INSTANTLY, AN INTERNATIONAL ADVOCACY NETWORK		
	CHALLENGE HUMAN RIGHTS VIOLATIONS AGAINST WRITERS AS THEY ARE		
	HAPPENING. PEN'S RAPID ACTIONS HAVE LITERALLY STOPPED THE HA		
	TORTURERS, PREVENTED DISAPPEARANCES, AND FORCED FAIR AND OPEN		•
	AT ANY GIVEN MOMENT, PEN IS MONITORING THE CASES OF MORE THAN		
	WRITERS IN PRISON, ON TRIAL, OR UNDER THREAT IN MORE THAN 90	COUNTRI	ES.
4c	(Code) (Expenses \$276,666. Including grants of \$146,480.) (Revenue \$	30,6	5 4.)
	LITERARY AWARDS		
	THE PEN LITERARY AWARDS IS THE MOST COMPREHENSIVE AWARDS PROG		THE
	COUNTRY, OFFERING OVER \$130,000 EACH YEAR TO FICTION WRITERS,		
	TRANSLATORS, CHILDREN'S AUTHORS, BIOGRAPHERS, NONFICTION WRIT		<u> </u>
	PLAYWRIGHTS. EACH PRIZE IS CONFERRED BY A PANEL OF PEN MEMBER		
	BRING TO THE TASK A FAMILIARITY WITH THE SOLITARY TASK OF CRE		_
	GREAT LITERATURE. IN JULY 2011, OUR TRANSLATION FUND GRANTS V		
	PRESENTED TO 11 TRANSLATORS TO SUPPORT THE TRANSLATION OF BOO		п
	WORKS. IN FALL 2011, 26 ADDITIONAL LITERARY AWARDS IN A VARIE GENRES WERE PRESENTED TOTALING \$113,480.	III OF	
	GENALO WEAR FARSENIED ICHAUING \$113,400.		
	Other program services (Describe in Schedule O)		
-ru	(Expenses \$ 928, 243 • including grants of \$ 111, 097 •) (Revenue \$ 29, 48	36.)	
 4e	Total program service expenses ► 2,473,059.	· • • ,	
		Form 990	(2011)
132002 02-09-			. ,

Form 990 (2011) PEN AMERICAN CENTER, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?]		
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2_	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	dunng the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6_		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
_	Schedule D, Part III	8_		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			x
10	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	10		
	as applicable.		:	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
_	Part VI	11a	х	
ь	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	. ,		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u>X</u>	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	ļ		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X_
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	annual of NVan Namanalita Ophodula E. Burtal and NV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		<u> </u>
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
-	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17_		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18_	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19_		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2011)

Form 990 (2011) PEN AMERICAN CENTER, INC.
Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization 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	X	
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	i		
	Schedule K. If "No", go to line 25	24a		<u>X</u>
b	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	1		
	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	l		
	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 employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27_		<u>X</u>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	1	ļ	1
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a_		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	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,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	77	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			37
	contributions? If "Yes," complete Schedule M	30	-	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
20	If "Yes," complete Schedule N, Part I	31	-	X
32	October 1 M Books	20		X
22	Schedule N, Part II	32		
33	continue 201 7701 0 and 201 7701 00 K SVan Flagmalate Cabadula D. Both	33	1	x
34	Was the organization related to any tax-exempt or taxable entity?	33		
•	15 Was I complete Cabadyla D. Douts H. H. N. and V. Ing. 5	34		x
35a		35a		X
Ь	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	-		
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	}	х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	ļ	X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u> </u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	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	
		Eorm	990	2011)

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

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14b

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 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				
<u>Sec</u>	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 1a 33							
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent 1b 33							
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	\mathbf{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		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6	Did the organization have members or stockholders?	6	Х					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a	х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b	х					
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_				
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)							
			Yes	No				
	Did the organization have local chapters, branches, or affiliates?	10a	_X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		х					
12a	2a Did the organization have a written conflict of interest policy? If "No," go to line 13							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
	in Schedule O how this was done	12c	X					
13	Did the organization have a written whistleblower policy?	13	X					
14	Did 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?		:					
a	The organization's CEO, Executive Director, or top management official	15a	X					
b	Other officers or key employees of the organization	15b	Х					
46 -	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
103	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	.		v				
L	taxable entity during the year?	16a		<u> </u>				
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	401						
Sec	tion C. Disclosure	16b	!					
17	List the states with which a copy of this Form 990 is required to be filed NY, MA							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	wallah	lo					
.5	for public inspection. Indicate how you made these available. Check all that apply.	vandu	16					
	Own website Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finan	cial					
	statements available to the public during the tax year.	וומוויייייייייייייייייייייייייייייייייי	UIQI					
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizar	ion: 🕨	•					
	ROBYN DESHOTEL - (212) 334-1660							
	588 BROADWAY, SUITE 303, NEW YORK, NY 10012			-				
132006) 1-23-		Form	990 (2011)				

		•	
Form	990	(2011)	

13-3447888

Form 990 (2011) PEN AMERICAN CENTER, INC. 13-3 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

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 organization		orga I	ınıza			nper	nsat			
(A)	(B)		(C) Position					(D)	(E)	(F)
Name and Title	Average		not c	heck	more	than		Reportable	Reportable	Estimated
	hours per week		nor and a director/twistee\					from	compensation from related	amount of other
	(describe	ţo						the	organizations	compensation
	hours for	direc			ļ	8			(W-2/1099-MISC)	from the
	related	stee o	uste		_	ensat		(W-2/1099-MISC)		organization
	organizations	al tru	on at tr		oloyee	S S				and related
	in Schedule O)	individual trustee or director	Institutional trustee	Officer	Key em	Highest compensated employee	Former			organizations
(1) KWAME ANTHONY APPIAH										
PRESIDENT	4.00	X		X				0.	0.	0.
(2) LAURENCE J. KIRSHBAUM			İ							
EXECUTIVE VICE-PRESIDENT	1.00	X		X				0.	0.	0.
(3) VICTORIA REDEL						-				
VICE-PRESIDENT	1.00	X		X	ļ			0.	0.	0.
(4) JESSICA HAGEDORN		İ	İ							
VICE-PRESIDENT (UNTIL 3/11)	1.00	X		X				0.	0.	0.
(5) MARIA CAMPBELL										
TREASURER	1.00	X	<u> </u>	X		<u> </u>		0.	0.	0.
(6) ROXANA ROBINSON			ŀ							
SECRETARY	1.00	X		Х				0.	0.	0.
(7) SUSANNA REICH									_	_
TRUSTEE-COMMITTEE CHAIR	1.00	Х						0.	0.	0.
(8) HANNAH PAKULA	1								_	
TRUSTEE-COMMITTEE CHAIR	1.00	Х		<u> </u>	ļ. —			0.	0.	0.
(9) CLAUDIA MENZA	1 00									
TRUSTEE-COMMITTEE CHAIR	1.00	X					 -	0.	0.	0.
(10) MICHAEL F. MOORE	1 00	,,								•
TRUSTEE-COMMITTEE CHAIR	1.00	Х	_		_		_	0.	0.	0.
(11) ESMERALDA SANTIAGO	1 00									•
TRUSTEE-COMMITTEE CHAIR	1.00	X		_				0.	0.	0.
(12) SUSAN BERNOFSKY	1 00	.							_	•
TRUSTEE	1.00	X	-		H			0.	0.	0.
(13) EDWARD BURLINGAME	1.00	x						0.	0.	
TRUSTEE	1.00	Δ	┢		\vdash	ļ		0.	0.	0.
(14) ANN BURT TRUSTEE	1.00	v						0.	^	0
(15) RON CHERNOW	1.00	Δ	\vdash	_	-			0.	0.	0.
TRUSTEE	1.00	X						0.	0.	0.
(16) MORGAN ENTREKIN	1.00	77						0.	<u> </u>	<u> </u>
TRUSTEE	1.00	x						0.	0.	0.
(17) WENDY GIMBEL					l	 		- 0.	0.	<u>.</u>
TRUSTEE	1.00	х						0.	0.	0.
132007 01-23-12									<u> </u>	Form 990 (2011)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) (B)					C)			(D)	(E)		(F)		
Name and title	Average	Position (do not check more than one					000	Reportable	Reportable	1	Estimated		
	hours per	box	, unle	ss pe	erson	is bot or/trus	th an	compensation	compensation				
	week (describe	\vdash		l a	T	374 ds	lee)	from	from related		other		
	hours for	diect						the organization	organizations (W-2/1099-MISC)	- 1	mpensation from the		
	related	5 0 0 0	ste			rsate		(W-2/1099-MISC)	(** 2/ 1033 141100)	- 1	rganization		
	organizations	trust	ag ta		ye	ad mo		(2)		- 1	and related		
	ın Schedule	Individual trustee or director	Institutional trustee	, p.	Key employee	Highest compensated employee	<u> </u>			or	ganizations		
	0)	重	霊	Officer	<u>\$</u>	皇皇	퉏						
(18) PETER GODWIN						•							
TRUSTEE	1.00	X	<u> </u>	_	<u> </u>	<u> </u>	L	0.	0	•			
(19) BETH GUTCHEON		ļ							_		_		
TRUSTEE	1.00	X	ļ	_	_	ļ	ļ	0.	0	•	<u> </u>		
(20) JERI LABER		İ							_		_		
TRUSTEE	1.00	X		_	-	<u> </u>	ļ	0.	0	•	0.		
(21) JHUMPA LAHIRI		l									•		
TRUSTEE	1.00	X	 -	_	-	\vdash	 	0.	0	•	0.		
(22) JOANNE LEEDOM-ACKERMAN	1 00		1	1							•		
TRUSTEE	1.00	X	-		-	╀	-	0.	0	+	0.		
(23) JAIME MANRIQUE	1 00	٦,									0		
TRUSTEE	1.00	X		├	╁	┼	-	0.	0	-	0.		
(24) JOHN OAKES	1 00	v		l				0.	C	.	0		
TRUSTEE	1.00	^	├	 	-	╁	╁			╬	0.		
(25) CHRISTIAN OBERBECK	1.00	v						0.	c	.	. 0.		
TRUSTEE	1.00	┢┻	\vdash	-	+-	+	╁╌	ļ <u>U.</u>	ļ <u> </u>	+			
(26) TESS O'DWYER	1.00	v						0.	l		0.		
TRUSTEE 1b Sub-total	1 1.00	14	<u>. </u>	٠	1	_	1	0.			0.		
to Total from continuation sheets to Part V	 Il Section A				•			555,845.			91,039.		
d Total (add lines 1b and 1c)	ii, occiloii A	-			• •			555,845.					
Total number of individuals (including but n	ot limited to th	nose	liste	ed a	bov	e) w	ho r			•	91,039.		
compensation from the organization						-,			,,000 01 10 10 11 11 11 11		5		
											Yes No		
3 Did the organization list any former officer,	director, or tru	uste	e, ke	у е	mple	oyee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete Schedule J for s										з	X		
4 For any individual listed on line 1a, is the su									the organization				
and related organizations greater than \$15	0,000? If "Yes,	° co	mpl	ete	Sch	edul	e J	for such individual		. 4	x		
5 Did any person listed on line 1a receive or a	accrue compe	nsat	ion 1	fron	n any	y un	relat	ted organization or indivi	idual for services				
rendered to the organization? If "Yes," com	plete Schedul	e J 1	for s	uch	per	son	. .			. 5	X		
Section B. Independent Contractors													
1 Complete this table for your five highest co										nsatio	n from		
the organization. Report compensation for	the calendar y	ear	endı	ng v	with	or w	<u>/ithi</u> i	n the organization's tax	year.				
(A) Name and business	a de de a a a			_				(B)			(C)		
Name and business	address	N	INC	<u> </u>				Description of s	services	Comp	pensation		
							ļ						
													
							-						
								<u> </u>					
2 Total number of independent contractors (includina but r	ot li	mite	d to	the	se li	ster	d above) who received n	nore than				
\$100,000 of compensation from the organi	_					0		2 22010/ 11 10001100 11					
SEE PART VII SECTION		ודיו	NITI	ል ጥ			СH	ਸੂਸਾ ਂ		For	m 990 (2011)		

132008 01-23-12

Part VII Section A. Officers, Directors, Tru		nplo	yee			ligh	est				
(A) Name and title	(B) Average hours	(C) Position (check all that apply)					iy)	(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(27) WALTER POZEN TRUSTEE	1.00	x						0.	0.	0.	
(28) THERESA REBECK TRUSTEE	1.00							0.	0.	0.	
(29) HAMILTON ROBINSON, JR. TRUSTEE	1.00							0.	0.	0 .	
(30) ELISSA SCHAPPELL TRUSTEE	1.00							0.	0.	0.	
(31) CLINTON IVES SMULLYAN TRUSTEE	1.00	X						0.	_0.	0.	
(32) ROSE STYRON TRUSTEE	1.00	x						0.	0.	0	
(33) ANNETTE TAPERT TRUSTEE	1.00	x						0.	0.	0	
(34) LYNNE TILLMAN TRUSTEE	1.00	x						0.	0.	0	
(35) JOHN TROUBH TRUSTEE	1.00							0.	0.	0	
(36) MONIQUE TRUONG TRUSTEE	1.00							0.	0.	0	
(37) DANIELLE TRUSCOTT TRUSTEE	1.00							0.	0.	0	
(38) JACOB WEISBERG TRUSTEE	1.00							0.	0.	0	
(39) DAVIS WEINSTOCK TRUSTEE	1.00							0.	0.	0	
(40) LEON FRIEDMAN GENERAL COUNSEL	1.00	x					i	0.	0.	0	
(41) STEVEN ISENBERG EXECUTIVE DIRECTOR	40.00			x				208,434.	0.	27,764	
(42) ROBYN DESHOTEL DIRECTOR OF FINANCE	40.00			x	-			130,906.	0.	27,375	
(43) LARRY SIEMS DIRECTOR OF INTERNATIONAL PROGRAMS	40.00		-			x		114,336.	0.	25,246	
(44) JAKAB ORSOS DIRECTOR OF PUBLIC PROGRAMS	40.00					x		102,169.	0.	10,654	
		-									
Total to Part VII, Section A, line 1c		L	L	I	<u>!</u>	!	<u> </u>	555,845.		91,039	

Part VIII Statement of Revenue (D) Revenue (B) (C) (A) Related or Unrelated Total revenue excluded from exempt function business tax under sections 512, revenue revenue 513, or 514 Contributions, Giffs, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 243,395. 1b 762,101. c Fundraising events , . . 1c d Related organizations 1d 138,740. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 11 2,087,446 50,735 g Noncash contributions included in lines 1a-1f \$_ h Total. Add lines 1a-1f \triangleright 3,231,682 Business Code 2 a TICKET SALES 900099 134,138. 134,138. Program Service Revenue f All other program service revenue 134,138. g Total, Add lines 2a-2f Investment income (including dividends, interest, and 27,541. 27,541. other similar amounts)..... 4 Income from investment of tax-exempt bond proceeds (i) Real (ii) Personal 6 a Gross rents b Less. rental expenses c Rental income or (loss) . . d Net rental income or (loss) (i) Securities 7 a Gross amount from sales of (ii) Other 1405677. assets other than inventory b Less: cost or other basis 1376068. and sales expenses c Gain or (loss) ... 29,609. 29,609. 29,609. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$762,101. of contributions reported on line 1c). See a 166,095 Part IV, line 18 ь 166,095 **b** Less: direct expenses ... c Net income or (loss) from fundraising events 9 a Gross income from garning activities See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 900099 5,281. 5,281. 11 a MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d 5,281. 428,251. 0. 62,431.

134,138

Total revenue. See instructions.

Form 990 (2011)

Form 990 (2011) PEN AMERICAN CENTER, INC. Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

COITIE	olete columns (B), (C), and (D). Check if Schedule O contains a response	se to any question in this	Part IX	<u></u>	
Do I	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
•	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22	208,161.	208,161.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the	Ì			
	United States See Part IV, lines 15 and 16	69,127.	69,127.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	394,480.	235,130.	81,331.	78,019
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	841,891.	674,550.	43,410.	123,931
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	64,518.	52,878.	2,437.	9,203
9	Other employee benefits	106,419.	80,328.	9,018.	17,073
10	Payroll taxes	89,332.	66,200.	8,645.	14,487
11	Fees for services (non-employees):				_
а	Management				
	Legal				
	Accounting	67,850.	46,768.	5,782.	15,300
d	Lobbying	67,688.	67,688.		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	9,945.		9,945.	
g	Other	203,882.	155,832.	2,658.	45,392
12	Advertising and promotion				
13	Office expenses	257,005.	203,120.	8,996.	44,889
14	Information technology				
15	Royalties				
16	Occupancy	199,260.	145,451.	19,971.	33,838
17	Travel	220,873.	217,178.	1,858.	1,837
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	234,010.	181,700.	3,411.	48,899
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	51,440.	37,036.	5,659.	8,745
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	PROGRAM EXPENSE	21,283.	11,468.	1,217.	8,598
b	ADMINISTRATIVE EXPENSE	20,098.	14,621.	2,902.	2,575
C	BOOK PURCHASE/DISTRIB	5,823.	5,823.		
d					
	All other expenses				
25	Total functional expenses Add lines 1 through 24e	3,133,085.	2,473,059.	207,240.	452,786
<u></u> 26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	, 🗂				
13201					Form 990

Pa	rt X	Balance Sheet		
	•		(A) Beginning of year	(B) End of year
	1	Cash - non-interest-bearing	392,809.	310,749.
	2	Savings and temporary cash investments		158,432.
	3	Pledges and grants receivable, net	537,391. 3	
	4	Accounts receivable, net		19,441.
	5	Receivables from current and former officers, directors, trustees, key		
		employees, and highest compensated employees. Complete Part II		ł
		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	3
ets	7	Notes and loans receivable, net	7	
Assets	8	lavorate manafactura in the control of the control		3
⋖	9	Drawed oversee and deferred above		74,562.
	i -	Land, buildings, and equipment: cost or other	30,301.	71/3021
		basis. Complete Part VI of Schedule D 10a 602,707.		
	Ь		185,033. 10	oc 134,097.
	11	Investments with the Andrews		$\frac{1}{1}$ 1,312,201.
	12	Investments - publicly traded securities		2
	13	Investments - program-related. See Part IV, line 11		3
	14	Intangible assets		4
	15	Other assets. See Part IV, line 11		5 49,488.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		6 2,823,685.
$\overline{}$	17	Accounts payable and accrued expenses		7 90,332.
	18	Grants payable		8 81,175.
	19	Deferred revenue		9
	20	Tax-exempt bond liabilities		0
ιn.	21	Escrow or custodial account liability. Complete Part IV of Schedule D		1
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,		·
Бi		highest compensated employees, and disqualified persons. Complete Part II		
Ë		of Schedule L.	9	2
	23	Secured mortgages and notes payable to unrelated third parties		3
	24	Unsecured notes and loans payable to unrelated third parties		4
	25	Other liabilities (including federal income tax, payables to related third		
		parties, and other liabilities not included on lines 17-24). Complete Part X of		
		Schedule D	96,010. 2	5 78,025.
	26	Total liabilities. Add lines 17 through 25	320,182. 2	
		Organizations that follow SFAS 117, check here		2 2 7 7 0 0 0 0
s		lines 27 through 29, and lines 33 and 34.		
ည	27	Unrestricted net assets	289,001. 2	228,739.
<u>a</u>	28	Temporanly restricted net assets	1,092,512. 2	1
20	29	Permanently restricted net assets	996,430. 2	1
Ĕ		Organizations that do not follow SFAS 117, check here	230,1200,2	0_0,100.
۲. ۳		complete lines 30 through 34.		
ţ	30	Capital stock or trust principal, or current funds	3	o l
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		1
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		2
Š	33	Total net assets or fund balances	2,377,943.3	
	34	Total liabilities and net assets/fund balances	2,698,125. 3	
		Total habilities and het assets/fulla balances	2,000,1200	2,023,003.

Form **990** (2011)

<u>-</u> orm	990 (2011) PEN AMERICAN CENTER, INC.	13-344	7888	<u>P</u> ag	_{1e} 12
	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				\mathbf{X}
			_		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,42	8,2	<u>51.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,13	3,0	<u>85.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	29	5,1	66.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,37	7,9	43.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	<9	8,9	<u>56.</u> >
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	2,57		
Pa	rt XII Financial Statements and Reporting			-	
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>			
				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	0.	1.	_	_
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	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:		1		
	Separate basis X Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	igle Audit	-		
	Act and OMB Circular A-133?		3a		X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
			Form	990 (2011)

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.

OMB No 1545-0047

Inspection

Name of	the organizat	ion							Employer i	dentificati	on nur	mber
		PEN AME	RICAN CENTER	INC	•				13	<u>-3447</u>	888	
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t) See ins	tructions				
The organ	iization is not a	a private foundation	because it is. (For lines	1 through	11, check	only one b	ox)					
1 🖳	A church, co	nvention of churches	s, or association of chur	ches desc	nbed in se	ection 170	(b)(1)(A)(i)).				
2 📙	A school des	scribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3 🖳	A hospital or	a cooperative hospi	tal service organization	described	ın section	170(b)(1)	(A)(iii).					
4 📖	A medical res	search organization (operated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)	iii). Enter th	ne hospital	s nam	e,
	city, and stat											
5 📖	An organizat	on operated for the	benefit of a college or u	niversity o	wned or op	perated by	a governi	mental u	nit describe	d in		
		(b)(1)(A)(iv). (Comple	·-									
6 🖳			ent or governmental uni									
7 📖	An organizat	ion that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from th	e general p	ublic desci	nbed ir	n
_		(b)(1)(A)(vi). (Comple	•									
8 🖳	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 X	An organizat	on that normally rec	eives: (1) more than 33 ⁻	1/3% of its	support f	rom contr	butions, n	nembersł	nip fees, and	d gross rec	eipts f	from
	activities rela	ited to its exempt fur	nctions - subject to certa	ain excepti	ons, and (2) no more	than 33 1	1/3% of r	ts support f	rom gross	invest	ment
			axable income (less sec	tion 511 ta	x) from bu	isinesses a	acquired b	y the org	janization a	fter June 3	0, 197	5.
		509(a)(2). (Complete	•									
10			perated exclusively to te		_			-				
11 📖			perated exclusively for the						-	-		or
			ations described in secti		-		2). See se e	ction 509	9(a)(3). Che	ck the box	that	
			organization and compl		•							
<u></u>	a Type		- ·	* -	e III - Fund	-	-			Type III - C		
e			it the organization is not		-	-	-		-			n
			han one or more publicl		=				09(a)(1) or s	ection 509	(a)(2).	
f			ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				_
_	• • •	rganization, check th	•									. L
g			organization accepted ar			_				ĺ		
			irectly controls, either al	one or tog	etner with	persons o	escribed	ın (II) and	(III) below,		Yes	No
	=		upported organization?							11g(i)		-
		•	n described in (i) above?	•	- 0			•		11g(ii)		
			person described in (i) o				• •		•	11g(iii)		
h	Provide trie i	ollowing information	about the supported or	ganization	(S).							
			(iii) Type of	(iv) lo the c		(v) Did vo	. notificatho	(vi)	Is the			
• •	of supported	(ii) EIN	organization	in col. (i) he	organization sted in your	ornanizat	u nouny une non in col	organiza	tion in col. I	(vii) Am		f
Urga	anızatıon		(described on lines 1-9 above or IRC section		document?			(i) organ U.	ized in the S.?	supj	JUIL	
			(see instructions)	Yes	No	Yes	No	Yes	No			
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	Paperwork Re	duction Act Notice	, see the Instructions f	or	•			Schedu	ıle A (Form	990 or 99	0-EZ)	2011

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or	r if the organization failed to qualify under Part III. If the organization
fails to qualify under the tests listed below, please complete Part I	II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and			i			
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ızatıon'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						
	The portion of total contributions						
Ū	by each person (other than a	ļ					
	governmental unit or publicly	ļ					
	supported organization) included						
	on line 1 that exceeds 2% of the			ļ			
	amount shown on line 11,			İ			
	column (f)						
6	Public support. Subtract line 5 from line 4						
	ction B. Total Support				1	<u> </u>	·
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 4	(4) 2001	(5) 2000	(0) 2003	(4) 2010	(e) Zoii	ij i otal
-	Gross income from interest,				 		
Ü	dividends, payments received on				ļ		
	securities loans, rents, royalties						
	and income from similar sources						
^	Net income from unrelated business				 		
9							
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain	ļ					
	or loss from the sale of capital						
	assets (Explain in Part IV.)				<u> </u>		
	Total support. Add lines 7 through 10 [40	
	Gross receipts from related activities,	•				12	
13	First five years. If the Form 990 is for	•	s first, second, thi	ra, tourth, or tilth t	ax year as a section	on 501(c)(3)	. □
Sec	organization, check this box and stop ction C. Computation of Publi		rcentage	· · · · · · · · · · · · · · · · · · ·		·	
	Public support percentage for 2011 (li			noluma (fi)	·-·	44	
	Public support percentage from 2010				•	15	<u>%</u> %
	· · · · · · · · · · · · · · · · · · ·				14 : 22 1/20/		
108	33 1/3% support test - 2011. If the o					nore, check this be	ox and ⊾ □
	stop here. The organization qualifies a					· · · · · · · · · · · · · · · · · · ·	
	33 1/3% support test - 2010. If the o			-4			nis dox
	and stop here. The organization quali						
1/8	10% -facts-and-circumstances test	-					•
	and if the organization meets the "fact			<u>-</u>	<u>-</u>	ıπ IV now the orga	nization
	meets the "facts-and-circumstances"	•	•		•		▶∟
b	10% -facts-and-circumstances test	_					
	more, and if the organization meets th				•		9
	organization meets the "facts-and-circ		=	•	• • • •		▶⊨
<u>18</u>	Private foundation. If the organization	n did not check a	box on line 13, 16	a, 16b, 17a, or 17			
					Sch	edule A /Form 99/	1 or 000_F7\ 2011

Schedule A (Form 990 or 990-EZ) 2011 PEN AMERICAN CENTER, INC. 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

Sec	qualify under the tests listed better A. Public Support	elow, please comp	lete Part II.)				
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	2414473.	2769192.	2080072.	1270316.	3231682.	11765735.
	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	229,739.	96,220.	134,268.	24,925.	134,138.	619,290.
	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	2644212.	2865412.	2214340.	1295241.	3365820.	12385025.
78	Amounts included on lines 1, 2, and			400 -40			440000
	3 received from disqualified persons	276,819.	248,851.	180,710.	64,523.	359,489.	1130392.
I	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
	Add lines 7a and 7b	276,819.	248,851.	180,710.	64,523.	359,489.	
	Public support (Subtract line 7c from line 6)						11254633.
	ction B. Total Support						<u> </u>
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	2644212.	2865412.	2214340.	1295241.	3365820.	12385025.
10	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	110,582.	48,938.	28,718.	18,401.	27,541.	234,180.
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
,	Add lines 10a and 10b	110,582.	48,938.	28,718.	18,401.	27,541.	234,180.
11		110/302.	10/3301	20,710.	10, 101.	21,321.	231/100.
12	Other income. Do not include gain						
	or loss from the sale of capital assets (Explain in Part IV.)	20,877.	27,220.	6,099.	3,585.	5,281.	63,062.
13	Total support (Add lines 9, 10c, 11, and 12)	2775671.	2941570.	2249157.	1317227.	3398642.	12682267.
14	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ex year as a sectio	n 501(c)(3) organiz	zation,
	check this box and stop here	in Commant Day	······································	·	<u> </u>	·	
	ction C. Computation of Publ					T T	00 74
	Public support percentage for 2011 (-	column (f))		15	88.74 %
<u>16</u>	Public support percentage from 2010 ction D. Computation of Investigation					16	<u>87.50 %</u>
	Investment income percentage for 20			ne 13 column (fl)		17	1.85 %
17 18	Investment income percentage from			ie 13, Column (i))	•	18	2.57 %
	a 33 1/3% support tests - 2011. If the				 15 is more than 3		
	- ·	-					
	more than 33 1/3%, check this box a	nd stop here. The	organization gual	rfies as a publicly s	supported organiza	ation	▶! X !
	more than 33 1/3%, check this box a 33 1/3% support tests - 2010. If the line 18 is not more than 33 1/3%, check	organization did n	ot check a box on	line 14 or line 19a	ı, and line 16 is mo	ore than 33 1/3%,	

Schedule A (Form 990 or 990-EZ) 2011

132023 01-24-12

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

See separate instructions.

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

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

 Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B. Section 527 organizations: Complete Part I-A only If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer identification number PEN AMERICAN CENTER, INC. 13-3447888 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. 2 Political expenditures 3 Volunteer hours Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? No 4a Was a correction made? b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities > \$ _ 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (c) EIN (b) Address (d) Amount paid from (e) Amount of political filing organization's contributions received and funds If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2011

LHA

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Schedule C (Form 990 or 990-EZ) 2011	PEN A	MERICA	N CENTER. I	NC.	13-3	447888 Page 2
Part II-A Complete if the org	anizatio	n is exe	mpt under section	n 501(c)(3) and fil	ed Form 5768	
(election under sec	tion 501	l(h)).				
A Check ► I if the filing organiza	tion belon	gs to an affi	liated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and shar			· ·			
B Check ▶ if the filing organiza	tion check	ed box A ar	nd "limited control" pro	visions apply.		
Limit	ts on Lob	bying Expe	nditures		(a) Filing	(b) Affiliated group
			ints paid or incurred.)	ı	organization's totals	totals
1a Total lobbying expenditures to influ	ence pub	lic opinion (grass roots lobbying)		33,844.	
b Total lobbying expenditures to influ	ience a le	gislative boo	dy (direct lobbying)		33,844.	
c Total lobbying expenditures (add li	nes 1a an	d 1b)			67,688.	
d Other exempt purpose expenditure	es	•	•••		3,099,241.	
e Total exempt purpose expenditure	s (add line	s 1c and 1c	d)		3,166,929.	
f Lobbying nontaxable amount. Ente	er the amo	unt from the	e following table in both	h columns.	308,346.	
If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable amo	ount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000		00 plus 5% of the exce			
Over \$17,000,000		\$1,000,0	000			
g Grassroots nontaxable amount (en	ter 25% c	f line 1f)			77,087.	
h Subtract line 1g from line 1a. If zero	o or less, e	enter -0			0.	
i Subtract line 1f from line 1c. If zero	or less, e	nter -0-			0.	
j If there is an amount other than ze	ro on erthe	er line 1h or	line 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this	year? .				<u> [</u>	Yes No
			eraging Period Under			
			ection 501(h) election			
C0			e instructions for line		ige 4.)	
	Lobi	ying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginnıng ın)	(a)	2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
						
2a Lobbying nontaxable amount	29	6,797.	283,052.	202,887.	308,346.	1,091,082.
b Lobbying ceiling amount						
(150% of line 2a, column(e))						1,636,623.
	_					
c Total lobbying expenditures	2	7,972.	29,484.	14,588.	67,688.	139,732.
	_			-		
d Grassroots nontaxable amount	7	4,199.	70,763.	50,722.	77,087.	272,771.
e Grassroots ceiling amount						466 45-
(150% of line 2d, column (e))						409,157.
	a		11 501	F 004	22 244	66.046
f Grassroots lobbying expenditures	1	3,986.	11,794.	7,294.	33,844.	66,918.

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 PEN AMERICAN CENTER, INC. 13-344788 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1: 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	Yes	No	Amo	ount
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1: 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
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2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			1	
b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
a in the hilling organization incomed a coolien to 12 tax, did it me form the four.				
Part III-A Complete if the organization is exempt under section 501(c)(4), section	501(c)	(5). or se	ction	-
501(c)(6).		(-),		
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		. 1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		ı
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?		з		
answered "Yes." 1 Dues, assessments and similar amounts from members		. 1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	l			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		. 2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	_	. 3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	s			
	itical			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poli	ilicai			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and policy expenditure next year?	ilicai	4		
• • •		. 4		<u>.</u>

SCHEDULE 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

Employer identification number

	PEN AMERICAN CENTER, INC.	13-3447888
Pai	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 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 full	nds
_	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confe	
	impermissible private benefit?	Yes No
Pai	rt II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	<u></u>
	Preservation of land for public use (e.g., recreation or education)	ally important land area
	Protection of natural habitat Preservation of a certified h	
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a contribution in t	conservation easement on the last
_	day of the tax year.	
		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
C	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
_	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organic	
_	year >	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during	the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the y	
8	Does each conservation easement reported on line 2(d) above 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 conservation easements in its revenue and expense state	ement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements that describes the organization.	
_	conservation easements	
Pa	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of	f public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education, or research in furtherance of public so	ervice, provide the following amounts
	relating to these items:	
	(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 treasures, or other similar assets for financial gain	, provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	•
а	Revenues included in Form 990, Part VIII, line 1	▶ \$
b	Assets included in Form 990, Part X	. > \$
,		

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

Schedule D (Form 990) 2011

Sche	dule D (Form 990) 2011 PEN AME	RICAN CENTE	ER, INC.		13	-3447888 Page 2
Par	rt III Organizations Maintaining C			easures, or		
3	Using the organization's acquisition, accession (check all that apply).					
а	Public exhibition	d	Loan or exch	nange program	s	
b	Scholarly research	e	Other	iango program	•	
c	Preservation for future generations	·				
4	Provide a description of the organization's co	illactions and avalain	how thou further th	o organization	'a avampt purpaga	in Doct VIV
5	During the year, did the organization solicit or					III Fait AIV.
•	to be sold to raise funds rather than to be ma				Similar assers	
Par	t IV Escrow and Custodial Arran	gements. Comple			es" to Form 990, Pa	Yes No
	reported an amount on Form 990, Par					
1a	Is the organization an agent, trustee, custodi	an or other intermedi	ary for contribution	s or other asse	ts not included	
	on Form 990, Part X?				•	Yes No
b	If "Yes," explain the arrangement in Part XIV	and complete the foll	owing table:		٠	
						Amount
С	Beginning balance			••	1c	
d	Additions during the year				. 1d	
е	Distributions during the year				1e	
f	Ending balance				. 1f	
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21?			Yes No
<u>b</u>	If "Yes," explain the arrangement in Part XIV.					
Par	rt V Endowment Funds. Complete f	the organization ans	wered "Yes" to For	m 990, Part IV,	, line 10.	
		(a) Current year	(b) Pnor year	(c) Two years t	ack (d) Three years	s back (e) Four years back
1a	Beginning of year balance	1,117,857,	998.584.	949	474. 1,250	599.
b	Contributions					
С	Net investment earnings, gains, and losses	<46,537,	119,273,	49	110 <282	260,>
	Grants or scholarships		===,,=,=,			500
	Other expenditures for facilities					,500,
	and programs	37,400.			16	365.
f	Administrative expenses	37,400.	-			, 303 .
g	End of year balance	1,033,920.	1,117,857,	998.	504 040	474.
2	Provide the estimated percentage of the curr				304. 343	, 19.19.
	Board designated or quasi-endowment	• 00	%	n neid as.		
	Permanent endowment ► 78.96	%				
C	The percentages in lines 2a, 2b, and 2c should be a sh					
22	Are there endowment funds not in the posse	· ·	tion that are hold o	ad administrat	d for the even-metic	
Ou	by:	SSION OF THE Organiza	tion that are neigraf	na administered	u for the organization	Yes No
	(i) unrelated organizations					
	(ii) related organizations					
L	If "Yes" to 3a(ii), are the related organizations				• • • • •	3a(ii) X
4	Describe in Part XIV the intended uses of the	•		• ••		3b
	t VI Land, Buildings, and Equipm					
	Description of property	(a) Cost or other	<u> </u>	or other	(a) A country loted	(d) Dook volve
	Description of property	basis (investm	' '		(c) Accumulated depreciation	(d) Book value
10	Land		,	,		
	Buildings		· · · · · · · · · · · · · · · · · · 	-		
			2 5	7,369.	2// 752	112 516
	Leasehold improvements	•		8,751.	244,753 109,474	
	Equipment			6,587.	114,383	
	I. Add lines 1a through 1e (Column (d) must e	aual Form 000 Do-t			TT#'202	134,097.
·	er real mice ra amought to footunin faltinast 6	quai i VIIII 33U, Fall /	<u>, columni (b), line i</u>	U(U).)		1 134,03/

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011

	dule D (Form 990) 2011 PEN AMERICAN CENTER, INC.				<u> 13-</u>	3447888	Page 4
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to	<u>Audited</u>	Financ	ial State	men	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		3,428,3	
2	Total expenses (Form 990, Part IX, column (A), line 25)		. [2		3,133,0	085.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		[3		295,3	166.
4	Net unrealized gains (losses) on investments	•	. [4		<98,	956 <u>.</u> >
5	Donated services and use of facilities		[5			
6	Investment expenses		[6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV)		[8			
9	Total adjustments (net). Add lines 4 through 8			9		<98,9	9 <u>56.</u> >
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and			10		196,	210.
Par	t XII Reconciliation of Revenue per Audited Financial Statemer	nts With	Reven	ue per R	eturr		
1	Total revenue, gains, and other support per audited financial statements				1	3,319,	<u>350.</u>
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains on investments	2a	<98	3,956.	>	i	
b	Donated services and use of facilities	2b					
С	Recovenes of pnor year grants	2c					
d	Other (Describe in Part XIV)	2d					
е	Add lines 2a through 2d				2e	<98,	956 <u>.</u> >
3	Subtract line 2e from line 1				3	3,418,	306.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		9,945.		ļ	
b	Other (Describe in Part XIV.)	4b					
С	Add lines 4a and 4b				4c	9,	945.
_5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	3,428,	<u> 251.</u>
Pa	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents Witl	h Expei	nses per	Retu	ırn	
1	Total expenses and losses per audited financial statements				1	3,123,	140 <u>.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a					
b	Prior year adjustments	2b			1		
С	Other losses	2c			1		
d	Other (Describe in Part XIV)	2d			1		
е	Add lines 2a through 2d				2e		0.
3	Subtract line 2e from line 1	•			3	3,123,	140.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			•••			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	9	9,945.			
		4b			1		
	Add lines 4a and 4b				4c	ي و	945.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			• •	5	3,133,	
	t XIV Supplemental Information	_					
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,	, lines 1a a	and 4; Par	t IV, lines 1	b and	2b; Part V, line 4	Part
	e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also compl						
	RT V, LINE 4: THE ORGANIZATION'S ENDOWMENT	-		-			
DES	SIGNATED ENDOWMENTS TO FUND SPECIFIC LITERA	ARY AW	VARDS				
PAI	RT X, LINE 2: MANAGEMENT HAS EVALUATED ALL	INCOM	E TA	X POSI	TIO	NS,	
IN	CLUDING THE POSITION THAT THE ORGANIZATION	IS EX	EMPT	FROM	INC	OME TAXE	S
<u>OR</u>	NOT SUBJECT TO INCOME TAXES OR UNRELATED E	BUSINE	ESS II	NCOME,	AN	D CONCLU	DED_
ייית	M NO DIGOLOGIDAG DALAMINO MO INICARMATIS MIS	, pogt	- m - ^	ממג ה	טבים	ייד חיים דוי	
<u> 1 H/</u>	AT NO DISCLOSURES RELATING TO UNCERTAIN TAX	7 FORT	TION	5 AKE	ĸĔŲ	OTKED IN	
THI	FINANCIAL STATEMENTS.						
					Sched	dule D (Form 99	0) 2011

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

➤ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

Name of the organization					Employer identi	fication number
PEN AMERICAN CE	NTER, IN	C.			13-34478	88
			tside the United States. Comp	ete if the organ		
to Form 990, Par	t IV, line 14b		·			
			ds to substantiate the amount of its gr			_
the grantees' eligibility f	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assi	stance? X	Yes No
	nbe in Part V the	e organization's	procedures for monitoring the use of it	s grants and ot	her assistance ou	tside the
United States. 3 Activities per Region, (T	he following Pad	t Lline 3 table o	an be duplicated if additional space is	noodod)		
(a) Region	(b) Number of		(d) Activities conducted in region		vity listed in (d)	(f) Total
(4)	offices	employees, agents, and	(by type) (e.g., fundraising, program	1 ''	gram service,	expenditures
	in the region	Independent	services, investments, grants to	1	specific type	for and investments
		contractors in region	recipients located in the region)	of service	e(s) in region	in region
		1				
	•]				
EUROPE (INCLUDING		_	GRANTS TO RECIPIENTS IN			
ICELAND & GREENLAND)	0	0_	REGION			23,000.
				DUES PAID T	0	
EUROPE (INCLUDING	1			ł	AL UMBRELLA	1
ICELAND & GREENLAND)	1 0		PROGRAM SERVICES	ORGANIZATIO		31,116,
RUSSIA & THE NEWLY			GRANTS TO RECIPIENTS IN			
INDEPENDENT STATES	c	0	REGION			4,500.
			GRANTS TO RECIPIENTS IN			İ
SUB-SAHARAN AFRICA		0_	REGION			511.
NORTH AMERICA			GRANTS TO RECIPIENTS IN			
(NON-U,S,)	- 0	0	REGION			2.000.
		:				
EAST ASIA AND THE			GRANTS TO RECIPIENTS IN			
PACIFIC	L c	0	REGION	1		3,000,
			GRANTS TO RECIPIENTS IN			
SOUTH ASIA	0	0	REGION			5,000.
	ļ			\		1
3 a Sub-total		0				69,127.
b Total from continuation						
sheets to Part I		0				0.
c Totals (add lines 3a	_	_				
207 301		и Л	1	1		60 127

132071 01-23-12 Schedule F (Form 990) 2011

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

(i) Method of valuation (book, FMV, appraisal, other) Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any (h) Description of non-cash assistance (g) Amount of non-cash assistance 0 ٥, 13-3447888 cash disbursement 31,116, WIRE TRANSFER 12,500, WIRE TRANSFER (f) Manner of : of cash grant (e) Amount recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 MERELLA ORGANIZATION DUES TO INTERNATIONAL UMBRELLA ORGANIZATION (d) Purpose of grant INTERNATIONAL PEN AMERICAN CENTER, INC. SUPPORT FOR (c) Region Part II can be duplicated if additional space is needed. SUROPE EUROPE (b) IRS code section and EIN (if applicable) Schedule F (Form 990) 2011 (a) Name of organization Part II

		.0	Schedule F (Form 990) 2011
pt by	- :		
ж-ехеш			
recognized as ta			
foreign country,			
recognized as charities by the	1501(c)(3) equivalency letter		
ns listed above that are	I has provided a section	or entities	
recipient organizatio	he grantee or counse	other organizations c	
2 Enter total number of	the IRS, or for which t	Enter total number of	
	2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by	2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 3 Enter total number of other organizations or entities

13-3447888

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

PEN AMERICAN CENTER, INC.

Schedule F (Form 990) 2011

Part III can be duplicated if additional space is needed.	fadditional space is neede	٠q.					1
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
שאנם שמסממונס אטאמטממשם	6 C C C C C C C C C C C C C C C C C C C	•	C C	NO PER VICE DES			
EMERCENCY CIDDORY CRANT	E TOWNER IN THE REAL PROPERTY OF THE REAL PROPERTY	-		MESTERN UNION			
EMERGENCY SUPPORT GRANT	SUB-SAHARAN AFRICA	-	511	WESTERN UNION	0		
EMERGENCY SUPPORT GRANT	NORTH AMERICAN	1	2.000,CHECK	ЭНВСК	0		
LITERARY AWARDS	EUROPE	5	,000 9	6.000, WIRE TRANSFER	0		
LITERARY AWARDS	EUROPE	H	000 €	СНЕСК	0		
LITERARY AWARDS	EAST ASIA AND THE PACIFIC		3,000,CHECK	ЭНЕСК	0		
LITERARY AWARDS	SOUTH ASIA	, -1	3,000,5	WIRE TRANSFER	0		

Schedule F (Form 990) 2011

, Schedi	ule F (Form 990) 2011 PEN AMERICAN CENTER, INC.	13-3447888	Page 4
Part			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	. Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	· Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2011

SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Inspection

Internal Revenue Service Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization **Employer identification number** PEN AMERICAN CENTER, INC. 13-3447888 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events С In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or □ No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? _ Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser (v) Amount paid (vi) Amount paid (i) Name and address of individual fundraiser have custody or control of (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) contributions? Yes 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

LHA Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2011

		of fundraising event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events	pts greater than \$5,000
				PEN AUTHOR'S	NONE	(d) Total events
- 1					NONE	(add col. (a) through
1			GALA (event type)	EVENINGS (avent type)	(total number)	col. (c))
Aniiaaa			(event type)	(event type)	(total number)	
	1	Gross receipts	724,810.	203,386.		928,196
	2	Less: Chantable contributions	563,785.	198,316.		762,101
4	3	Gross income (line 1 minus line 2)	161,025.	5,070.		166,095
	4	Cash prizes				
	5	Noncash prizes			·····	
200	6	Rent/facility costs	26,650.			26,650
	7	Food and beverages	100,145.	5,070.		105,215
	8	Entertainment				
	9	Other direct expenses	34,230.			34,230
	10	Direct expense summary Add lines 4 through		<u> </u>		(166,095
	11	Net income summary Combine line 3, colum				0
a	rt I	II Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or re	ported more than	
_		\$15,000 on Form 990-EZ, line 6a.		· · · · · · · · · · · · · · · · · · ·		
			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col. (c)
20101	1	Gross revenue				
	2	Cash prizes				
-	3	Noncash prizes				
	4	Rent/facility costs				-
	5	Other direct expenses				
1		Volunteer labor	Yes% No	Yes%	Yes % No	
	7	Direct expense summary. Add lines 2 throug	h 5 ın column (d)		•	(
	8	Net gaming income summary. Combine line	1, column d, and line 7			
					-	
		er the state(s) in which the organization opera			····	
		he organization licensed to operate gaming ad No," explain:		, , , , , , , , , , , , , , , , , , , ,		Yes No
	_					·
		re any of the organization's gaming licenses ri Yes," explain:	•	,	ear? .	Yes No
	II.					
			12.			
	— —					

Schedule G (Form 990 or 990-EZ) 2011 PEN AMERICAN CENTER, INC.	13-3447888 Page 3
11 Does the organization operate gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other ent	· — —
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity operated in:	40-
a The organization's facility b An outside facility	405
b An outside facility	
14 Lines the fiame and address of the person who prepares the organization's gaming/special events both	oks and records.
Name	
Address >	
15a Does the organization have a contract with a third party from whom the organization receives gaming	revenue? Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ► \$ of gaming revenue retained by the third party ► \$	and the amount
c If "Yes," enter name and address of the third party:	
Name	
Address ▶	
16 Gaming manager information:	
Name	
Gaming manager compensation > \$	
Described for	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions.	
a is the organization required under state law to make charitable distributions from the gaming proceed.	s to
retain the state gaming license?	Yes No
b Enter the amount of distributions required under state law to be distributed to other exempt organizat	ions or spent in the
organization's own exempt activities during the tax year ▶ \$	
Supplemental Information. Complete this part to provide the explanations required by Part lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any	

SCHEDULE 1 (Form 990) Department of the Treasury Internal Revenue Service

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

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

2

X Yes

Employer identification number 13-3447888 Inspection 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection INC. PEN AMERICAN CENTER, General Information on Grants and Assistance Name of the organization Part I

2 							
X Yes	line 21, for any	A	(h) Purpose of grant or assistance				A A
	es" to Form 990, Part IV,	ddıtional space ıs neede	(g) Description of non-cash assistance				
	anization answered "Y	can be duplicated if a	(f) Method of valuation (book, EMV, appraisal, other)				-
States	omplete if the orga	an \$5,000. Part II	(e) Amount of non-cash assistance				
 funds in the United	United States, C	t received more th	(d) Amount of cash grant				line 1 table
 oring the use of grant	Organizations in the	box if no one recipien	(c) IRC section if applicable				anizations listed in the table
tance? cedures for monite	sovernments and	5,000. Check this	(b) EIN				id government org
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	[E	recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed	1 (a) Name and address of organization or government				 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2011)

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

Schedule I (Form 990) (2011)-(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. HALF OF THE GRANT IS FUNDED UPFRONT AND THE Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. ARE AWARDED SINCE THE AWARDS AND PRIZES ARE ORGANIZATION DOES NOT MONITOR THE EXPENDITURES OF THE RECIPIENTS. AWARDS \mathtt{THE} 5 F LINE 2: THE ORGANIZATION AWARDS LITERARY PRIZES THE RECIPIENTS INDIVIDUALS BASED ON ARTISTIC MERIT IN RECOGNITION OF SIGNIFICANT TO INDIVIDUALS OF PROVEN MERIT FOR THEIR PERSONAL USE. (d) Amount of non-cash assistance 0, ୕ Ö INCLUDED AS PART OF LITERARY AWARDS, BASED ON A PROPOSAL AND SAMPLE TRANSLATION INTO ENGLISH OF 55,454, 3,200 NOT MADE TO FUND SPECIFIC PROJECTS OR ACTIVITIES OF 149,507 (c) Amount of cash grant 58 38 (b) Number of recipients THEREFORE, PREVIOUSLY-UNTRANSLATED WORK. ACCOMPLISHMENTS IN THE FIELD. ENDANGERED WRITERS FUNDS - FREEDOM TO WRITE EMERGENCY SUPPORT GRANTS - WRITERS FUND (a) Type of grant or assistance TRANSLATION FUND GRANTS, PART I, SCHEDULE I, LITERARY AWARDS ARE GIVEN 132102 01-27-12 Part III

Page 2

13-3447888

INC.

PEN AMERICAN CENTER

Schedule I (Form 990) (2011)

Schedule I (Form 990) 2011 PEN AMERICAN CENTER, INC. Part IV Supplemental Information	13-3447888 Page 2
REMAINDER IS FUNDED AT THE COMPLETION OF THE TRANSLATION.	
EMERGENCY GRANTS ARE MADE TO WRITERS, WITH WHOM PEN SHARES	
IMMEDIATE CASH NEEDS THAT ARE DOCUMENTED IN A WRITTEN APPLI ORGANIZATION'S WRITER'S FUND COMMITTEE MEETS QUARTERLY TO R	
APPLICATIONS FROM WRITERS IN NEED. GRANTS ARE PROVIDED TO T	
IMMEDIATE, SUBSTANTIATED NEED. THE WRITER'S FUND COMMITTEE RECORDS OF APPLICATIONS.	MAINTAINS

SCHEDULE J (Form 990)

Compensation Information

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

INC

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

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions.

PEN AMERICAN CENTER,

Employer identification number 13-3447888

Ра	rt 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,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			1
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			l
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
			-	ĺ
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,		1	
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
			ŀ	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			l
	establish compensation of the CEO/Executive Director. Explain in Part III.			1
	Compensation committee X Written employment contract			1
	Independent compensation consultant X Compensation survey or study			1
	Form 990 of other organizations X Approval by the board or compensation committee			
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?	4a		x
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	i	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		X
	Any related organization?	5b		Х
_	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	ŀ	1	
а	The organization?	6a		х
	Any related organization?	6b		Х
_	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	1		
•	not described in lines 5 and 62 If "Ves." describe in Dart 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	<u> </u>	·	
•	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	_ <u></u>		
J	Regulations section 53.4958-6(c)?	9		
	riogulations decition society of the second		Ь	

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

Schedule J (Form 990) 2011

Schedule J (Form 990) 2011

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 VII.

Note. The sum of columns (B)(i)-{iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(0)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	retifement and other deferred compensation	Nontaxable benefits	(B)(I) (D)	Compensation reported as deferred in prior Form 990
	Ξ	208,434.	0	0	21,000.	6,764.	236,198.	0
1 STEVEN ISENBERG	Ξ	0	0		0.	0.	0	0
	€	130,90	0.		13,917.	13,458.	158,281.	0
2 ROBYN DESHOTEL	▣	0	0.	0.	0.	0	0	0
	ε							
3	(E)							
	Ξ							
4	<u>(ii</u>							
	Ξ							
5	Ξ							
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9	(ii)							
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	€							
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6	(ii)							
	(i)							
10	(ii)							
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13	(ii)							
	Ξ							
14	<u>(ii)</u>							
	Ξ							
15	(i)							
	Ξ							
16	⊞							

Schedule J (Form 990) 2011

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

PEN AMERICAN CENTER INC. 13-3447888 Part I Types of Property (a) (b) (c) (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable noncash contribution amounts tems contributed Form 990, Part VIII, line 1g Art - Works of art 2 Art - Historical treasures 3 Art - Fractional interests Books and publications Clothing and household goods 5 Cars and other vehicles 6 Boats and planes ... 7 Intellectual property 8 50,735. FAIR MARKET VALUE X 9 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or 11 trust interests Securities - Miscellaneous ... 12 Qualified conservation contribution -13 Historic structures ... Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 17 Real estate - Other Collectibles ... 18 19 Food inventory 20 Drugs and medical supplies Taxidermy 21 Historical artifacts . 22 Scientific specimens ... 23 24 Archeological artifacts 25 Other Other 26 27 Other 28 Other 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? Х 30a b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? Х 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? X 32a b If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, 33

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

Schedule M (Form 990) (2011)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

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.

2011
Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number PEN AMERICAN CENTER. 13-3447888 INC FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: TO DEFEND FREE EXPRESSION, ADVANCE LITERATURE, AND FOSTER INTERNATIONAL LITERARY FELLOWSHIP. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: THE SEVENTH ANNUAL PEN WORLD VOICES FESTIVAL, HELD APRIL 25-MAY 1, 2011, BROUGHT TOGETHER MORE THAN 150 WRITERS FROM 30 COUNTRIES REPRESENTING 27 LANGUAGES. PEN ALSO HOSTS PUBLIC LITERARY PROGRAMS WHICH GIVE A PUBLIC FACE TO THE ORGANIZATION AND OFFER OPPORTUNITIES TO SEE THE WORLD'S MOST DISTINGUISHED AUTHORS AND RISING LITERARY STARS PARTICIPATE IN A VARIETY OF EVENTS. SEVENTEEN SUCH EVENTS WERE HELD DURING 2011. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: WE ARE ACTIVELY CAMPAIGNING ON BEHALF OF MORE THAN 150 WRITERS IN PRISON, CAMPAIGNS THAT BEGIN THE DAY OF ARREST AND END ONLY WHEN THE WRITERS HAVE BEEN RELEASED. ONE HUNDRED AND FOUR WRITERS AND JOURNALISTS ON PEN'S CASE LIST WERE RELEASED FROM PRISON IN THE PAST YEAR, ONE OF THE MOST REMARKABLE YEARS YET IN PEN AMERICAN CENTER'S 50-YEAR HISTORY OF ORGANIZED FREE EXPRESSION ADVOCACY. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: READERS & WRITERS; TRANSLATION FUND; PUBLIC PROGRAMS; INTERNATIONAL PROGRAM; OPEN BOOK PROGRAM; PRISON WRITING PROGRAM; WRITERS' FUND; LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011) 132211 01-23-12

PUBLICATIONS (WEBSITE, PEN AMERICA JOURNAL); MEMBERSHIP; BRANCHES

EXPENSES \$ 928,243. INCLUDING GRANTS OF \$ 111,097. REVENUE \$ 29,486.

FORM 990, PART VI, SECTION A, LINE 2: ROXANA ROBINSON AND HAMILTON

ROBINSON, TRUSTEES - FAMILY RELATIONSHIP

FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION IS A MEMBERSHIP
ORGANIZATION. THE MEMBERSHIP OF PEN IS COMPOSED OF POETS, PLAYWRIGHTS,

EDITORS, ESSAYISTS, NOVELISTS, SHORT STORY WRITERS, BIOGRAPHERS,
HISTORIANS, PHILOSOPHERS, CRITICS, TRANSLATORS, AND OTHERS SIMILARLY
ENGAGED. THE QUALIFICATION FOR MEMBERSHIP IS ACKNOWLEDGED ACHIEVEMENT IN
THE LITERARY FIELD OR OTHER DISTINGUISHED SERVICE TO THE LITERARY
COMMUNITY. A SEPARATE ASSOCIATE MEMBERSHIP CATEGORY IS CONFERRED UPON
STUDENTS, NON-QUALIFYING WRITERS, AND INDIVIDUALS WHO SUPPORT PEN'S GOALS.
ASSOCIATE MEMBERSHIP CARRIES NO VOTING RIGHTS.

FORM 990, PART VI, SECTION A, LINE 7A: PEN AMERICAN CENTER IS A MEMBERSHIP

ORGANIZATION WITH APPROXIMATELY 2700 CURRENT MEMBERS. THE MEMBERSHIP, IN

ITS ANNUAL MEETING GENERALLY HELD IN MARCH OF EACH YEAR, ELECTS PEN'S

GOVERNING BODY. ACCORDING TO OUR BY-LAWS:

- "THE AFFAIRS AND PROPERTY OF PEN SHALL BE MANAGED BY ITS GOVERNING BOARD,

 THE BOARD OF TRUSTEES, WHO ARE LEGALLY RESPONSIBLE AS FIDUCIARIES TO SEE

 THAT PEN CARRIES OUT ITS PROGRAMS IN FULFILLMENT OF ITS CHARITABLE

 PURPOSES..."
- "THE ANNUAL MEETING OF PEN MEMBERS, FOR THE ELECTION OF TRUSTEES, OF

 CORPORATE OFFICERS, AND OF MEMBER COMMITTEE CHAIRS, THE RECEIPT OF REPORTS

 AND THE CONDUCT OF SUCH OTHER BUSINESS AS MAY COME BEFORE THE MEETING,

 132212
 101-23-12
 Schedule O (Form 990 or 990-EZ) (2011)

Page 2 Schedule O (Form 990 or 990-EZ) (2011) Name of the organization Employer identification number PEN AMERICAN CENTER, INC. 13-3447888 SHALL BE HELD DURING THE FIRST SIX MONTHS OF THE FISCAL YEAR." FORM 990, PART VI, SECTION A, LINE 7B: ONLY TO THE EXTENT OF BY-LAW CHANGES. FORM 990, PART VI, SECTION B, LINE 11: DIRECTOR OF FINANCE REVIEWED FORM 990 WITH EXECUTIVE DIRECTOR AND OBTAINED APPROVAL. DIRECTOR OF FINANCE AND EXECUTIVE DIRECTOR PROVIDED A DRAFT COPY OF FORM 990 TO EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES ALONG WITH A SUMMARY MEMO HIGHLIGHING CHANGES AND IMPORTANT NOTICES. FORM 990, PART VI, SECTION B, LINE 12C: AT EACH MARCH BOARD MEETING (FIRST MEETING OF THE YEAR), THE CONFLICT OF INTEREST POLICY IS CIRCULATED PRIOR TO THE MEETING AND RETURNED BY EACH TRUSTEE TO THE EXECUTIVE DIRECTOR. IN ADDITION, EACH DIRECTOR-LEVEL STAFF MEMBER MUST SIGN A CONFLICT OF INTEREST FORM. ANY TRUSTEE WHO IS UNCERTAIN ABOUT A POSSIBLE CONFLICT SHOULD REQUEST THE BOARD TO MAKE A DETERMINATION, AND THE BOARD SHALL RESOLVE THE OUESTION BY MAJORITY VOTE. TRUSTEES WHO HAVE BEEN FOUND TO HAVE A CONFLICT IN ANY MATTER PENDING BEFORE THE BOARD SHALL REFRAIN FROM PARTICIPATING IN CONSIDERATION OF THE MATTER. THE BOARD MAY REQUEST INFORMATION OR INTERPRETATION FROM THE PERSON(S) INVOLVED IN THE CONFLICT. THE TRUSTEE INVOLVED IN THE CONFLICT

FORM 990, PART VI, SECTION B, LINE 15: A COMMITTEE OF THE BOARD OF

Schedule O (Form 990 or 990-EZ) (2011)

59739071

SHALL NOT VOTE ON SUCH MATTERS.

Form **8868**

(Rev. January 2012)

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

If you	are filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box		•	· [X]
	are filing for an Additional (Not Automatic) 3-Month Ext			his form).		
	complete Part II unless you have already been granted a					
	nic filing (e-file). You can electronically file Form 8868 if y		•	•		oration
	I to file Form 990-T), or an additional (not automatic) 3-mor					
	to file any of the forms listed in Part I or Part II with the exc					
	al Benefit Contracts, which must be sent to the IRS in pap					
	w irs gov/efile and click on e-file for Chanties & Nonprofits		goo mondonomo, r or moro dotallo o		Jaconio Illing Or Line	
Part			ubmit original (no copies nee	eded).		
A corpo	ration required to file Form 990-T and requesting an auton					
Part I or						. 🗀
	r corporations (including 1120-C filers), partnerships, REM	 ICs, and tr	usts must use Form 7004 to reques	t an exter	ision of time	
	come tax returns.		·			
Type or	Name of exempt organization or other filer, see instru	ctions.		Employe	r identification num	ber (EIN) or
print						
	PEN AMERICAN CENTER, INC.			X	13-34478	88
File by the due date for		ee instruct	nons.	Social se	cunty number (SSI	۷)
filing your return See	588 BROADWAY, NO. 303					
instruction		reign add	ress, see instructions.			
	NEW YORK, NY 10012-5246					
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			01
Applica	ation	Return	Application			Return
Is For	idon	Code	Is For			Code
Form 99	30	01	Form 990-T (corporation)			07
Form 99		02	Form 1041-A	-		08
Form 99		01	Form 4720			09
Form 99		04	Form 5227			10
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	90-T (trust other than above)	06	Form 8870			12
	ROBYN DESHOTEL		1 01111 0010			
• The	books are in the care of 588 BROADWAY ,	SUTTE	303 - NEW YORK, N	Y 100	112	
	phone No. ► (212) 334-1660		FAX No. ▶			_
	e organization does not have an office or place of business	s in the Un	· ———			-
	s is for a Group Return, enter the organization's four digit		•	f this is fo	or the whole group.	check this
box 🕨	If it is for part of the group, check this box	1	ch a list with the names and EINs of		= -	
	request an automatic 3-month (6 months for a corporation					
			tion return for the organization name		The extension	
ıs	for the organization's return for:	_	· ·			
>	X calendar year 2011 or					
>	tax year beginning	, an	d ending		•	
			· ·			
2 If	the tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retui	m	
[Change in accounting period					
	·					
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
n	onrefundable credits. See instructions	_		За	\$	0.
_	this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
6	stimated tax payments made Include any prior year overp	ayment al	lowed as a credit.	3b	\$	0.
с В	alance due. Subtract line 3b from line 3a Include your pa	yment wit	h this form, if required,			
<u>b</u>	y using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions	3c	\$	0.
Cautio	n. If you are going to make an electronic fund withdrawal v	with this Fo	orm 8868, see Form 8453-EO and Fe	orm 8879	EO for payment ins	tructions.

123841 01-04-12

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2012)

Form 8868 (Rev 1-2012))					Page 2	
 If you are filing for an 	Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	s box		→ X	
• •	rt II if you have already been granted an a			iled Form	8868		
	Automatic 3-Month Extension, comple						
Part II Addition	onal (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	nal (no c	opies nee	eded).	
			Enter filer's			see instructions	
Type or Name of exe	empt organization or other filer, see instru	ctions	1	Employe	r identification	on number (EIN) or	
print	DIGIN COMPO THE			[1]	12 24	47000	
	RICAN CENTER, INC.			X		47888	
filma valif	eet, and room or suite no If a P O. box, s ADWAY, NO. 303	ee instruc	tions	Social se	curity numb	er (55N)	
	r post office, state, and ZIP code For a fo	oroign add	ress, see instructions				
NEW YOR		oreigir add	ress, see instructions				
	N, NI 10012-3240						
Enter the Return code for	or the return that this application is for (file	a senara	te application for each return)			0 1	
enter the riotality dods it	in the retain that this application is for this	o a dopara	to application for each return,		•	(3.12)	
Application		Return	Application			Return	
ls For		Code	Is For			Code	
Form 990		01					
Form 990-BL		02	Form 1041-A			80	
Form 990-EZ		01	Form 4720			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069						11	
Form 990-T (trust other t	than above)	06	Form 8870			12	
STOP! Do not complete	Part II if you were not already granted	an auton	natic 3-month extension on a prev	iously file	ed Form 886	<u> </u>	
	ROBYN DESHOTEL		202 3777 77077 37	100	10		
	care of ► 588 BROADWAY, \$	SOLLE		X IUU	12		
	212) 334-1660	45 - 11.	FAX No. ▶			. —	
	es not have an office or place of busines		·	f ab.oo. f.m	thathala	. P L	
·	Return, enter the organization's four digit	-	ch a list with the names and EINs of			_	
			BER 15, 2012	anment	ers the exte	rision is ior.	
•		O V EM		a			
	For calendar year 2011, or other tax year beginning, and ending, and ending, for less than 12 months, check reason Initial return Final return						
	Change in accounting period						
•	State in detail why you need the extension						
-	L TIME IS NEEDED TO	COMPI	LE THE INFORMATION	NECE	SSARY	TO	
	THE RETURN.						
8a If this application i	s for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any	Ì			
nonrefundable cre	dits. See instructions			8a	\$	0.	
b If this application	s for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated				
tax payments mad	de. Include any prior year overpayment al	lowed as a	a credit and any amount paid				
previously with Fo				8b	\$	0.	
	ptract line 8b from line 8a Include your pa	-	h this form, if required, by using			•	
EFTPS (Electronic	Federal Tax Payment System). See instr			8c	\$	0.	
	_		st be completed for Part II o	•			
Under penalties of perjury, it is true, correct, and come	I declare that I have examined this form, includ lete, and that I am authorized to prepare this fo	ing accomp orm.	panying schedules and statements, and to	o the best o	it my knowled	ge and belief,	
_			TIM DIDDOMAN		_		
Signature >	Intle > J	ロスピしひ	TIVE DIRECTOR	Date			

Form 8868 (Rev. 1-2012)