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Department of the Treasury Internal Revenue Service

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

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

OMB No 1545-0047 Open to Public Inspection

	<u> </u>	or the	2011 calendar year, or tax year beginning and end	ding				
Ī	B Cr	neck if	C Name of organization		D Employer ider	ntification r	umber	
		Addre	PROJECT MANAGEMENT INSTITUTE					
		Name chang	CAME AC ADOVE		23-	-18874	42	
		Initial return	Number and street (or P O box if mail is not delivered to street address)	om/suite	E Telephone nun	nber		
		Termii	14 CHILOS BOOLEVAND		610	<u>356.</u>		
	느	Amen	City or town, state or country, and ZIP + 4		G Gross receipts \$		,658,	<u>905.</u>
	L_	Application pendi	NEWTOWN BOOKKE, FA 19073		H(a) Is this a grou			
			F Name and address of principal officer: PLARK A. LANGUE I		for affiliates?	_	Yes [	
-			SAME AS C ABOVE	1507	H(b) Are all affiliates		Yes L	No
			empt status:501(c)(3)X501(c)(6) ◀ (Insert no ) 4947(a)(1) or	527				
•			organization X Corporation Trust Association Other ►	I Voor	H(c) Group exempt 1969			
ſ		rt I	Summary	L Teal (	oriormation 150.	2 IVI State U	i legal dollii	CHELL
L		1	Briefly describe the organization's mission or most significant activities: THE IN	STIT	UTE HAS B	EEN FO	UNDED	<del></del>
	Governance	•	AS AN AUTONOMOUS, NON-PROFIT, TAX-EXEMPT,					
	Ē	2	Check this box  If the organization discontinued its operations or disposed					
	o e		Number of voting members of the governing body (Part VI, line 1a)			3		15
	8 6	4	Number of independent voting members of the governing body (Part VI, line 1b)			4		15
	Activities &	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)			5		294
	ixiti	6	Total number of volunteers (estimate if necessary)			6		<u>8000</u>
	Act	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		ļ		,386,	
		b	Net unrelated business taxable income from Form 990-T, line 34			7b		0.
			- · · · · · · · · · · · · · · · · · · ·		Prior Year	0.	urrent Yea	
	e	8	Contributions and grants (Part VIII, line 1h)	} <u> </u>	15,154,90		$\frac{202,}{,119,}$	
	Revenue	9	Program service revenue (Part VIII, line 2g)  RECEIVED  Received	<u> </u>	5,848,25		,344,	
	В	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)  Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-	4,104,62		,451,	
		11	Total revenue - add lines 8 through 11 (must equal flart Milhoolumn (A), line 12)	1	25,107,78		,118,	
		13	Grants and similar amounts paid (Part IX column M lines 1-3)		623,44		,010,	
		14	Benefits paid to or for members (Part IX, column (A), line (BDEN, UT)	1		0.	<u> </u>	0.
	Ş	15	Salaries, other compensation, employee benefits (Part-IX, column (A), lines 5-10)		24,398,26	3. 27	,308,	282.
	nse	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.		0.
	Expenses	ь	Total fundraising expenses (Part IX, column (D), line 25)	<u>).</u>				
	ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	71,555,52		,285,	
		18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	96,577,22		,604,	
	. (0	19	Revenue less expenses. Subtract line 18 from line 12		28,530,55		,513,	
	Net Assets or Fund Balances				ginning of Current Y		End of Yea	
-	SSE	20	Total assets (Part X, line 16)		02,224,26		,323,	
<b>₹</b>		21	Total liabilities (Part X, line 26)	<del>                                     </del>	42,444,00 59,780,25		,658, ,665,	
7	<b>b</b> .	22 171	Net assets or fund balances Subtract line 21 from line 20 Signature Block		33,700,23	0.1 1.52	,005,	024.
, ,			alties of perjury, I declare that I have examined this return, including accompanying schedules a	nd statem	ents, and to the best	of my knowle	dge and be	lief. it is
			ct, and complete. Declaration of preparer (other than officer) is based on all information of which			oy	ago ana bo	,
MAR								
	Sig	n	Signature of officer		Date			
Ī	Her		MARK A. LANGLEY, PRESIDENT & CEO					
É			Type or print name and title					
ζ			Print/Type preparer's name Preparer's signature		Date Chec		PTIN	
<b>.</b>	Paid		COLLEEN COOKE-VARALLO, CPCOLLEEN COOKE-VAR	RALL 0			14612	
		arer	Firm's name ELKO & ASSOCIATES, LTD	10	Firm's EIN	<u>23-</u>	-30633	93
	Use	Only	Firm's address 2 WEST BALTIMORE AVENUE, SUITE 23	ΤΛ	D	610 5	65-39	30
			MEDIA, PA 19063		Phone no		Yes [	$\overline{}$
	Mav	/ the i	RS discuss this return with the preparer shown above? (see instructions)				⊾_ res L	No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

4e

(Expenses \$

Other program services (Describe in Schedule O.)

including grants of \$

Form \$90 (2011) PROJECT MANAGEMENT INSTITUTE

Part IV Checklist of Required Schedules

		_	Yes	No
_	to the experience described in costion FO1/o1/2) or 4047/o1/1) (other than a private foundation)?		163	-110
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		Х
,	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
J	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		
	during the tax year? If "Yes," complete Schedule C, Part II	-		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5	х	
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	3		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			Х
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		-
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		Х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<del></del>		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			х
^	Schedule D, Part III	8		
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			х
40	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	40	Х	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable.	ŀ		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		Х	
<b>L</b>	Part VI  Did the organization report an amount for investments · other securities in Part X, line 12 that is 5% or more of its total	11a		<b></b>
D		446		х
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	-	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	44.	Ì	Х
ч	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c	<del>                                     </del>	<del></del>
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	<del></del>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		х
12a		├ <del>``</del>		
	Schedule D, Parts XI, XII, and XIII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		<del> </del>	
-	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<del></del>	X
		14a	Х	<del></del>
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
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		Х
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		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			T -
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (	2011)

Part IV   Checkli	t of Required Sch	nedules (continued)
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21 bill 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), the 17 if "Yes," complete Schedule I, Parts I and II 2 22 bill the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), the 27 if "Yes," complete Schedule I, Parts I and III 2 23 bill the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), the 27 if "Yes," complete Schedule I, Parts I and III 2 24 bill the organization answer "Yes" to Part IX, its extention A, it is a 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 K, if "No", go to Inte 25 Schedule V, If "No", go to Interest V, If "No", go Inte				· · ·	NI.
United States on Part IX, column (A), line 17 lf "Yes," complete Schedule I, Parts I and II 2 Did the organization report more than \$5.00 of grants and other assistance to individuals in the United States on Part IX, column (A), line 27 lf "Yes," complete Schedule I, Parts I and III 2 Did the organization answer "Yes" to Part IVI, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, fustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 24 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 assisted after December 31, 2002? If "Yes," answer lines 24 bit through 24d and complete Schedule J. Part I is the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception?  Did the organization aware that a degree of any of the organization engage in an excess benefit than a refunding any time during the year?  Did the organization aware that engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with	04	Did the executation report mere than \$5,000 of grants and other assistance to any government or organization in the		Yes	No
Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX.  22	21		21	x	
column (A), line 27 ii "Yes," complete Schedule I, Parts I and III 2  Did the organization answer 'Yes' to Part IVI, 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 I 2  24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the tast day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule III I'mo", go to line 25  bid the organization invest any proceeds of tax-exempt bonds beyond a temporary penid exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penid exception?  Did the organization invest any proceeds of tax-exempt bonds outstanding at any time during the year of the decay any tax-exempt bonds?  Did the organization are as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization are as an "on behalf of" issuer for bonds outstanding age in an excess benefit transaction with a disqualified person outline the year? If "Yes," complete Schedule I., Part II  bis the organization waves that if engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction bas not been reported on any of the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization prior forms 990 or 990-EZ? If "Yes," complete Schedule I., Part II  Was a loen to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outlined parts of the organization's tax year? If "Yes," complete Schedule I., Part IV  a Name of a part of the end of the organization's tax year? If "Yes," complete Schedule I., Part IV  was the organization aparty to a business transaction with one of the follow	22		-		
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 employes, and highest compensated employees? If "Yes," complete Schedule Last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", 9 to line 25  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", 9 to line 25  Did the organization maintain an escrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Did the organization aware that it engaged in an excess benefit transaction with a disqualified person during the year? If "Se", "complete Schedule L, Part II"  Is the organization aware that it engaged in an excess benefit transaction with a disqualified person under the properties of the organization prompts of prompts of the properties Schedule L, Part III  Was as too not 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 pror Forms 990 or 990-E72 If "Yes," complete Schedule L, Part IV  Did the organization provide a grant or other assistance to an officer, director, trustee, or employee thread, a grant selection committee member, or to a 55% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV  Was the organization behalf of current officer, director, t	22		22	х	1
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule I. I. I' No", go to him 25  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part I  is the organization waver that it engaged in an excess benefit transaction with a florid person outstanding as of the end of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule I., Part II  Was at lean 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 I., Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule I., Part III and the organization of comment of fromer officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part III and the organization of current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part III and the organization receive more than \$250,000 in non-cash contributions of 1" "Yes," complete Schedule I., Part III and the organization receive more than \$250,000 in non-cash contributions of 1" "Y	23		-=-		
Schedule J.  24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25  25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  26 Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  26 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  27 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  28 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule person during the year? If "Yes," complete Schedule organization and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II  28 Was the organization provide a grant or other assistance to an 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 IV  29 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee or a family member of any of these persons? If "Yes," complete Schedule L, Part IV  28 A family member of a current of former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule L, P					
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24d			23	X	1
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Schedule K. If "No", go to line 25 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization mixes any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization mixes any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization and an escore account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d  25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization proved and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization related to any tax-exempt or discussive and ease experted from the organ					
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Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  34  X  35a  Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b  Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36  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  37  Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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	32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete		l	
sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  33 X  Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  34 X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b 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 X  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 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37 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 X		Schedule N, Part II	32		X
Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b 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 X  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 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37 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	33				
If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36 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  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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	_		33	<u> X</u>	<b></b>
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b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36 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  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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 X					<u> </u>
section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  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  37  Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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  X		- · · · · · · · · · · · · · · · · · · ·	35a	_ <u></u>	<del></del>
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  37  Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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  X	D	· · · · · · · · · · · · · · · · · · ·		v	
If "Yes," complete Schedule R, Part V, line 2  36  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  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 X	26		35b	<u> ^</u>	<del> </del>
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37 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 X	50	•	00	1	
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 X	37		30		<del>                                     </del>
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 X	٠,		27		v
Note. All Form 990 filers are required to complete Schedule O	38		131	$\vdash$	<del>  ^</del>
	- <b>-</b>		38	x	
					(2011)

<u>Form</u>	990 (2011) PROJECT MANAGEMENT INSTITUTE		<u>23–1887</u>	<u>442</u>	Pa	age <b>5</b>	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance						
	Check if Schedule O contains a response to any question in this Part V						
					Yes	No	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	129				
b	Enter the number of Forms W-2G included in line 1a. Enter ·0· if not applicable	1b	0				
c	Did the organization comply with backup withholding rules for reportable payments to vendors and r	eporta	ble gaming				
	(gambling) winnings to prize winners?			1c_			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return	2a	294				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	s)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a_	X		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b_	X		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a			}	
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a	X		
b	If "Yes," enter the name of the foreign country: ► INDIA, CHINA, BELGIUM, AU	STR	ALIA				
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			_5a_		X	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transfer	action?		5b_		Х	
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		<u> </u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he orga	anızatıon solicit				
	any contributions that were not tax deductible?			6a	ļ	X	
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	tions o	r gifts				
_	were not tax deductible?			6b	ļ		
7	Organizations that may receive deductible contributions under section 170(c).			_	1	[	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and so	rvices p	provided to the payor?	7a_			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		<del>-</del> -	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	as req	uirea				
	to file Form 8282?	7d	l	7c	<del> </del>	<del> </del>	
	If "Yes," indicate the number of Forms 8282 filed during the year		<u> </u>	7.	1	İ	
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control or indirectly.		31 <i>r</i>	7e_ 7f	╁┈	├	
, 9	If the organization received a contribution of qualified intellectual property, did the organization file F		200 as required?	7g			
_	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		·	79 7h			
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.			<del>- ′ ′′</del> -			
•	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings a			8		İ	
9	Sponsoring organizations maintaining donor advised funds.	,	io daring the your	-			
а	Did the organization make any taxable distributions under section 4966?			9a	ĺ	İ	
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	t —	<b>-</b>	
10	Section 501(c)(7) organizations. Enter:					1	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				ŧ	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				-	
11	Section 501(c)(12) organizations. Enter:					Ī	
а	Gross income from members or shareholders	11a				1	
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1		{	
	amounts due or received from them.)	11b				ŧ	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	n 1041	?	12a	ļ	<u> </u>	
_	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		1		1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>	<b> </b>	<b>!</b>	
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	<u> </u>	<u> </u>	
	Note. See the instructions for additional information the organization must report on Schedule O.					1	
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ı	i			I	
	organization is licensed to issue qualified health plans	13b	ļ <u> </u>	-		1	
	Enter the amount of reserves on hand	13c	<u> </u>	ļ	<del> </del>	<del>I</del>	
	Did the organization receive any payments for indoor tanning services during the tax year?			14a	-	X	
<u> </u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedu	ile O		14b	<u> </u>		

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		
Sec	tion A. Governing Body and Management				,			
				· <del></del>	Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15	<u> </u>				
	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	b Enter the number of voting members included in line 1a, above, who are independent 15							
2	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?							
3	Did the organization delegate control over management duties customarily performed by or under the	he dire	ct supervision					
	of officers, directors, or trustees, or key employees to a management company or other person?							
4								
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		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 a	nioga	one or					
	more members of the governing body?	•		7a	X			
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, 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	ear by ti	ne followina					
а	The governing body?	···· - <b>,</b> ··		8a	x			
	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 re	ached	at the					
_	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal I	Revenu	e Code.)					
					Yes	No		
10a	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 of	chapte	rs, affiliates,					
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	_ X	<u></u>		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy bef	ore filing the form?	11a	X			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	se to co	nflicts?	12b	X			
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "	Yes," c	lescribe			ľ		
	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 appro-	val by ı	ndependent					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?						
а	The organization's CEO, Executive Director, or top management official			15a	<u>X</u>	<u> </u>		
b	Other officers or key employees of the organization			15b	X			
	if "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement	with a			į .		
	taxable entity during the year?			16a	ļ	X		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu		•					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anızatı	on's			İ		
	exempt status with respect to such arrangements?			16b		Ц		
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► NONE		··					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	·T (Sec	tion 501(c)(3)s only)	availat	ole			
	for public inspection. Indicate how you made these available. Check all that apply.							
	Own website Another's website X Upon request							
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	of interest policy, a	nd fina	ncıal			
	statements available to the public during the tax year.			_				
20	State the name, physical address, and telephone number of the person who possesses the books	and re	cords of the organiz	ation.	<b>-</b>			
	PROJECT MANAGEMENT INSTITUTE - 610-356-4600	00						
13200	14 CAMPUS BOULEVARD, NEWTOWN SQUARE, PA 19073-32	<u> </u>						

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) ·	(B)			(C Pos				(D)	(E)	(F)
Name and Title	Average		not c	heck	more	than		Reportable	Reportable	Estimated
	hours per week					is bot or/trus		compensation from	compensation from related	amount of other
	(describe	臣						the	organizations	compensation
	hours for	or director				D S		organization	(W-2/1099-MISC)	from the
	related	[ <b>8</b> ]	ESE			Serve	l	(W·2/1099·MISC)	18	organization
	organizations in Schedule	ᆵ	la la		e old	15 98 E G				and related
	O)	Individual	institutional trustae	) Jeger	Key employee	Highest compensated employee	ome			organizations
(1) BETH PARTLETON										
CHAIR	3.50	X						0.	0.	0
(2) PETER MONKHOUSE										
VICE CHAIR	3.50	X	_			_		0.	0.	0
(3) DEANNA LANDERS										
SECRETARY/TREASURER	3.50	X			_		_	0.	0.	0
(4) EUGENE BOUNDS								_	_	_
DIRECTOR AT LARGE	3.50	X	ļ	_	<u> </u>	ļ	ļ	0.	0.	0
(5) STEVE DELGROSSO	2.50				İ					
DIRECTOR AT LARGE	3.50	X	<u> </u>	ļ	<u> </u>	ļ	<u> </u>	0.	0.	0
(6) SHIRLEY EDWARDS	2.50	١,,								
DIRECTOR AT LARGE	3.50	X	<b>├</b>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	0.	0.	0
(7) JANE FARLEY	2 50				Į	ł				,
DIRECTOR AT LARGE	3.50	X	┢	<b>├</b> -	_	├	<u> </u>	0.	0.	0
(8) HERMAN GONZALEZ	2.50	X					1		_	_
DIRECTOR AT LARGE	3.50	^	┼	-	-	├—	⊢	0.	0.	0
(9) LOUIS J. MERCKEN	3.50	x						0.	0.	0
DIRECTOR AT LARGE (10) JOHN MIHALIC	3.30	^	-	├	├	+	-	· · · · · ·	- 0.	<u>_</u>
DIRECTOR AT LARGE	3.50	×		ļ	i			0.	0.	0
(11) WILLIAM MOYLAN	3.30	1	1-	┢	├─	$\vdash$	-	<del>                                     </del>		
DIRECTOR AT LARGE	3.50	X				1		0.	0.	0
(12) FRANK PARTH		1	1	<b>-</b>	┪	+-	$\vdash$		ļ	<u> </u>
DIRECTOR AT LARGE	3.50	X		1	1	Ì	Ì	0.	0.	o
(13) VIJAY PRASAD		1			t-	十一	╁┈			
DIRECTOR AT LARGE	3.50	X						0.	0.	l o
(14) RICARDO TRIANA						$\dagger \top$				
DIRECTOR AT LARGE	3.50	X						0.	0.	О .
(15) DIANE WHITE		Τ	1			$\dagger \top$				
DIRECTOR AT LARGE	3.50	X			1		1	0.	0.	0
(16) GREGORY BALESTRERO						$\top$				
CEO EMERITUS	3.50	$\perp$		X				1,424,624.	0.	3,807
(17) MARK LANGLEY										
PRESIDENT AND CEO	50.00			Х	L		L	1,519,656.	0.	103,815

FORM 990 (2011)								<del></del>				9.
Part VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	уее	s, a	nd l	ligh	est	Compensated Employ	ees (continued)			
(A)	(B)			(0	C)			(D)	(E)	(F)		
Name and title	Average hours per week	ю́ох	not c , unle	ss pe	more rson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other		
	(describe hours for related organizations in Schedule O)	Individual trustae or director	Institutional trustae	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fr org and	pensa om the anizati d relate anizatio	ed
(18) WILLIAM SCARBOROUGH												
VP LEGAL	50.00	L.				X		215,416.	0.	3	3,5	<u>57.</u>
(19) JOHN DOYLE  VP FINANCE & ADMINISTRATION	50.00					x		216,632.	0.	3	5,3	73.
(20) DOROTHY MCKELVY									_			
VP HUMAN RESOURCES	50.00	<u> </u>	<u> </u>	ļ	<u> </u>	X	<u> </u>	201,285.	0.	3	1,3	<u>47.</u>
(21) FRANCISCO SCHETTINI VP INFORMATION TECHNOLOGY	50.00					х		196,847.	0.	3	5,1	09.
(22) BRIAN WEISS	1	Ì	1		Ì				_	]		
VP PRACTITIONER MARKETS	50.00					X		194,742.	0.	_ 2	9,4	98.
		<u> </u>	<u> </u>	<u> </u>	<u> </u>	Ļ.	<u> </u>	3,969,202.	0.	27	2,5	<u> </u>
1b Sub-total	m o							3,969,202.	0.	21	2,3	00.
c Total from continuation sheets to Part V	II, Section A							3,969,202.	0.	27	2,5	
d Total (add lines 1b and 1c)			link		<u> </u>		<u> </u>		·	21	2,3	00.
2 Total number of individuals (including but i	not iimited to ti	iose	ıısı	eo a	DOV	e) w	no re	eceived more than \$100	J,000 of reportable			47
compensation from the organization							_				Yes	No
3 Did the organization list any former officer line 1a? If "Yes," complete Schedule J for			e, k	эу е	mplo	oyee	, or	highest compensated e	mployee on	3	103	х
4 For any individual listed on line 1a, is the s			ome	ene.	atio	n ar	d at	her compensation from	the organization	-		
and related organizations greater than \$15	50,000? If "Yes	, " cc	mpi	ete :	Sch	edul	e J t	for such individual		4	х	<u> </u>
5 Did any person listed on line 1a receive or rendered to the organization? If "Yes," cor							reiat —	ted organization or indiv	igual for services	5		х

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
	EXAM DELIVERY &	
	PSYCHOMETRIC SERVICE	14,102,600.
	SHIPMENT OF PMI	
AVENUE, BUILDING #24, FOLCROFT, PA 19032	PUBLICATIONS	2,266,886.
BRANDYWINE OPERATING PARTNERSHIP, LLP		
PO BOX 11951, NEWARK, NJ 07101-4951	OFFICE RENT	2,074,900.
IMAGINATION PUBLISHING, 600 W. FULTON	WEBSITE CONTENT	
STREET, SUITE 600, CHICAGO, IL 60661	SERVICES/CREATIVE SE	1,617,596.
MCI GROUP ASIA PACIFIC PRIVATE LTD., 20	OUTREACH AND	
BENDEMEER ROAD, SINGAPORE, SLOVENIA 339914	MARKETING SUPPORT SE	1,533,226.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization > 88		

23-1887442 PROJECT MANAGEMENT INSTITUTE Page 9 Form 990 (2011) Statement of Revenue Part VIII (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b b Membership dues c Fundraising events 1c 202,267. 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f 202,267. Business Code 2 a CERTIFICATION Program Service Revenue 541900 75179635. 75179635 **b** MEMBERSHIP DUES 541900 45050010. 45050010. SEMINARS/SYMPOSIUM 541900 10775939. 10775939. d PUBLICATIONS 541900 9,113,816.9,113,816. All other program service revenue 140119400. g Total. Add lines 2a-2f ▶ Investment income (including dividends, interest, and 6,057,615 other similar amounts) 6057615. Income from investment of tax-exempt bond proceeds 862,444 5 Royalties 862,444. (i) Real (ii) Personal 623,045. 6 a Gross rents 465,365. b Less: rental expenses 57,680. c Rental income or (loss) 157,680. d Net rental income or (loss) 157,680. 7 a Gross amount from sales of (I) Securities (II) Other 33362421 assets other than inventory b Less: cost or other basis |31075003| 494 and sales expenses -494 2287418. c Gain or (loss) 2,286,924. d Net gain or (loss) 2286924. 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events ▶ 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses 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 11 a ADVERTISING 541800 3,223,575. 3223575 b MAILING LISTS AND RENT 900099 162,856. 162,856. c MISCELLANEOUS 900099 45,282. 45,282.

3,431,713.

153118043.140119400. 3386431.

d All other revenue

e Total. Add lines 11a-11d Total revenue. See instructions

#### 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).

	Check if Schedule O contains a response to any question in this Part IX									
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and									
	organizations in the United States See Part IV, line 21	729,510.								
2	Grants and other assistance to individuals in									
	the United States. See Part IV, line 22	22,405.								
3	Grants and other assistance to governments,									
	organizations, and individuals outside the									
	United States. See Part IV, lines 15 and 16	259,024.								
4	Benefits paid to or for members									
5	Compensation of current officers, directors,									
	trustees, and key employees	_3,051,902.								
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	18,716,558.								
8	Pension plan accruals and contributions (include									
	section 401(k) and section 403(b) employer contributions)	1,123,540.								
9	Other employee benefits	2,664,097.								
10	Payroll taxes	1,752,185.								
11	Fees for services (non-employees):									
а	Management									
b	Legal	1,863,928.								
C	Accounting	359,398.								
d	Lobbying		······································							
е	Professional fundraising services See Part IV, line 17	0.70								
f	Investment management fees	878,929.								
g	Other	11,854,961.		 						
12	Advertising and promotion	5,873,070.			<del></del>					
13	Office expenses	16,625,105.	<del></del>							
14	Information technology	648,650.			<u> </u>					
15	Royalties	22,963. 2,323,586.								
16	Occupancy	6,263,240.	- <del></del>							
17 18	Travel	0,203,240.		<u></u>	<del> </del>					
10	Payments of travel or entertainment expenses for any federal, state, or local public officials									
19	Conferences, conventions, and meetings	8,829,613.			<del></del>					
20	Interest	0,025,015.								
21	Payments to affiliates		<del></del>		<del>                                     </del>					
22	Depreciation, depletion, and amortization	7,018,139.		<del></del>						
23	Insurance	234,908.		<del></del>	<del></del>					
24	Other expenses Itemize expenses not covered									
	above (List miscellaneous expenses in line 24e if line									
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)									
а	CERTIFICATION ADMINISTR	16,303,175.								
b	MARKET RESEARCH	587,915.								
c	SUBSCRIPTIONS	421,073.								
d	TAXES	304,492.		· · · · · · · · · · · · · · · · · · ·	<del></del>					
e	All other expenses	872,271.								
25_	Total functional expenses. Add lines 1 through 24e	109,604,637.								
26	Joint costs. Complete this line only if the organization									
	reported in column (B) joint costs from a combined									
	educational campaign and fundraising solicitation									
	Check here If following SOP 98-2 (ASC 958-720)		_							

Form 990 (2011)

Part X **Balance Sheet** Beginning of year End of year 19,471,692. 12,076,296. 1 1 Cash · non-interest-bearing 158,344. 171,924. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 1,556,237. 3,757,304. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 Assets 7 Notes and loans receivable, net 7 661,151. 836,059. 8 Inventories for sale or use 8 1,782,748. 2,068,040. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 54,511,580. basis. Complete Part VI of Schedule D 10a 37,381,952. 18,768,445. 17,129,628. b Less: accumulated depreciation 10b 10c 190,078,564. 162,552,038. 11 Investments - publicly traded securities 11 4,387,512. 4,474,914. 12 Investments · other securities. See Part IV, line 11 12 13 Investments · program-related. See Part IV, line 11 13 14 Intangible assets 14 349,232. 267,913. 15 Other assets. See Part IV. line 11 15 202,224,264. 238,323,777. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 Accounts payable and accrued expenses 9,594,105. 17 12,851,571 18 Grants payable 18 28,063,837. 30,287,747. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 iabilities. 22 Payables to current and former officers, directors, trustees, key employees. highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 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 4,786,064. 25 2,518,835. 26 42,444,006. 45,658,153. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here 

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 159,780,258. 27 Unrestricted net assets 192,665,624. 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 159,780,258. 33 Total net assets or fund balances 192,665,624. 33 202,224,264. 238,323,777. Total liabilities and net assets/fund balances

Form 990 (2011)

Form	990 (2011) PROJECT MANAGEMENT INSTITUTE	23-18	87442	Pag	ge <b>12</b>		
Pa	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI				X		
1	Total revenue (must equal Part VIII, column (A), line 12)		.53,11				
2	Total expenses (must equal Part IX, column (A), line 25)	2 1	09,60				
3	Revenue less expenses. Subtract line 2 from line 1	3	43,51	3,4	06.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4 1	159,780,2				
5	Other changes in net assets or fund balances (explain in Schedule O)		-10,62	_ <del></del>			
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 ]	92,66	5,6	24.		
Pa	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII	<u> </u>			X		
				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.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
b	Were the organization's financial statements audited by an independent accountant?		2b	X_	<u> </u>		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	<b>X</b> _			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	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:			-			
	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 Si	ngle Audıt					
	Act and OMB Circular A-133?		3a		<u>X</u>		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3ь				

. . . 2

#### SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Open to Public Inspection

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

- 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) organiza	tions: Complete Part III.			
Nan	ne of organization			Empl	oyer identification number
-		MANAGEMENT INST		<u> </u>	23-1887442
PE	rt I-A Complete if the or	ganization is exempt und	der section 501(c)	or is a section 527 of	rganization.
2	Provide a description of the organi Political expenditures Volunteer hours	zation's direct and indirect politi	cal campaign activities	ın Part IV. ▶\$	
•					
Pa	rt I-B Complete if the or	ganization is exempt und	der section 501(c	)(3).	
1	Enter the amount of any excise tax			▶\$	
2	Enter the amount of any excise tax	incurred by organization manag	gers under section 495	5 ▶\$	
3	If the organization incurred a section	on 4955 tax, did it file Form 4720	) for this year?		Yes No
48	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
P	ert I-C Complete if the or	<del></del>	·		<del></del>
1			•	· ·	
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for s	_	
	exempt function activities			▶\$	
3	Total exempt function expenditure	s. Add lines 1 and 2. Enter here	and on Form 1120-POI	•	
	line 17b			▶\$	
4	Did the filing organization file Form	•			└ Yes
5	Enter the names, addresses and e				
	made payments. For each organize contributions received that were p				
	political action committee (PAC). If				te segregated fullo of a
_	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(0) 2114	filing organization's	contributions received and
		}		funds. If none, enter -0	promptly and directly
					delivered to a separate political organization.
			j		If none, enter -0
				<del></del>	
		<u> </u>			
					1

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 P	ROJECT MAN	AGEMENT INS	TITUTE	23-1	887442 Page 2
Part II-A Complete if the orga	nization is exen	npt under sectio	n 501(c)(3) and file	ed Form 5768	
(election under secti					
A Check  if the filing organization	on belongs to an affili	ated group (and list in	Part IV each affiliated	group member's nan	ne, address, EIN,
expenses, and share					
B Check 🕨 🔲 if the filing organization			ovisions apply.		
	on Lobbying Exper			(a) Filing organization's	(b) Affiliated group totals
(The term "expendit	tures" means amou	nts paid or incurred.	)	totals	
1a Total lobbying expenditures to influe	nce public opinion (g	grass roots lobbying)			
b Total lobbying expenditures to influe	nce a legislative bod	y (direct lobbying)			
c Total lobbying expenditures (add line	es 1a and 1b)				
d Other exempt purpose expenditures			ļ		
<ul> <li>Total exempt purpose expenditures</li> </ul>	•	•	}		
f Lobbying nontaxable amount. Enter					
If the amount on line 1e, column (a) or	(b) is: The lob!	oying nontaxable am	ount is:		
Not over \$500,000		the amount on line 1e			1
Over \$500,000 but not over \$1,000,		0 plus 15% of the exc			ļ
Over \$1,000,000 but not over \$1,50		0 plus 10% of the exc			
Over \$1,500,000 but not over \$17,0		0 plus 5% of the exce	ess over \$1,500,000		
Over \$17,000,000	\$1,000,0	000.			1
<del></del>					<del></del>
g Grassroots nontaxable amount (ente					<del> </del>
h Subtract line 1g from line 1a. If zero			-	<del></del>	<u> </u>
i Subtract line 1f from line 1c. If zero	•				.i
j If there is an amount other than zero		line 11, did the organiz	ation file Form 4720		
reporting section 4911 tax for this y			0 11 . 504(1)		Yes No
(Sama arganiza		raging Period Under	r Section 501(h) n do not have to comp	late all of the five	
•			es 2a through 2f on pa		
		nditures During 4-Ye	<u>-</u>		
Calendar year (or fiscal year beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	(e) Total
(c. needs year beginning my	·				
On Labburga partayable assaurt					
2a Lobbying nontaxable amount	······································				<del></del>
b Lobbying ceiling amount (150% of line 2a, column(e))					1
(100 % of life Zaj ooldfiii(o))			<del></del>		
c Total lobbying expenditures					
C rotal loopying expenditures			<u> </u>		
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))			1		
				<u></u>	

f Grassroots lobbying expenditures

## Schedule C (Form 990 or 990-EZ) 2011 PROJECT MANAGEMENT INSTITUTE 23-188744 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)).

For each "Yes" response to lines 1a through 1i below, provide	In Part IV a detailed description	(a	1)	(b	)
of the lobbying activity.	mr attv a astalea acception	Yes	No	Amo	
<ul> <li>During the year, did the filing organization attempt to inflocal legislation, including any attempt to influence public or referendum, through the use of:</li> <li>Volunteers?</li> <li>Paid staff or management (include compensation in expose Media advertisements?</li> <li>Mailings to members, legislators, or the public?</li> </ul>	c opinion on a legislative matter				
e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government of Rallies, demonstrations, seminars, conventions, speech i Other activities?  j Total. Add lines 1c through 11	es, lectures, or any similar means?				
2a Did the activities in line 1 cause the organization to be n b If "Yes," enter the amount of any tax incurred under sec c If "Yes," enter the amount of any tax incurred by organiz d If the filing organization incurred a section 4912 tax, did Part III-A Complete if the organization is exe 501(c)(6).	tion 4912 ration managers under section 4912 it file Form 4720 for this year?	ion 501(c)	(5), or se	ection	
1 Were substantially all (90% or more) dues received none 2 Did the organization make only in-house lobbying expen 3 Did the organization agree to carry over lobbying and por Part III-B Complete if the organization is exe 501(c)(6) and if either (a) BOTH Part	ditures of \$2,000 or less?  blitical expenditures from the prior year?  mpt under section 501(c)(4), sect				No X X X x e 3, is
answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) note 4 If notices were sent and the amount on line 2c exceeds does the organization agree to carryover to the reasonal expenditure next year? 5 Taxable amount of lobbying and political expenditures ( Part IV Supplemental Information	ces of nondeductible section 162(e) dues the amount on line 3, what portion of the ex ble estimate of nondeductible lobbying and	cess	2a 2b 2c 3	111	0,332. 1,459. 1,459.
Complete this part to provide the descriptions required for Pathis part for any additional information.  THE ORGANIZATION INADVERTENTLY					·
EXPENSES ON FORM 990 SCHEDULE OF DERIVED FROM THE QUARTERLY LDA				D WERI	
THE LDA HAS A COMPLETELY DIFFER					
TO SECTION 162(E) AND AS SUCH;  OVER-STATED. THE LOBBYING EXPR					

Schedule C (Form	n 990 or 990-EZ <b>pplemental</b>	) 2011 <b>Infor</b> i	PROJEC	ontinuea	ANA(	SEMENT II	NST.	LTOTI	<u> </u>	23-188/442 Page
•									6033(E).	
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#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

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

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

PROJECT MANAGEMENT INSTITUTE

Employer identification number 23-1887442

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	96.	
		(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	funds
	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 a	<del>-</del>	ed only
	for charitable purposes and not for the benefit of the donor of	• •	
	Impermissible private benefit?		Yes No
Par		ganization answered "Yes" to Form 990, Part	IV, line 7.
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (e.g., recreation or e	<del></del>	ically important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form of a	a conservation easement on the last
	day of the tax year.		
	•		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	` '	<del></del>
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the or	
	year▶		<b>3</b>
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		ng the year
7	Amount of expenses incurred in monitoring, inspecting, and	_	<del></del>
8	Does each conservation easement reported on line 2(d) above		_ <del></del>
	and section 170(h)(4)(B)(ii)?	, , ,	Yes No
9	In Part XIV, describe how the organization reports conservat	ion easements in its revenue and expense st	atement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements		
Pa	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Other	er Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statemer	nt and balance sheet works of art.
	historical treasures, or other similar assets held for public ex		
	the text of the footnote to its financial statements that descr		, , , , , , , , , , , , , , , , , , , ,
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement ar	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial or	an provide
_	the following amounts required to be reported under SFAS 1		, p. 5100
а	Revenues included in Form 990, Part VIII, line 1	C	<b>▶</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$
	, · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·

Par	t III Organizations Maintaining C	ollections of Art	t, Historical 1	reasures. c	r Othe	er Simila	r Asse	ts (conti	nued)
3	Using the organization's acquisition, accession								
-	(check all that apply):		•	-					
а	Public exhibition	d	Loan or e	change progra	ıms				
b	Scholarly research	е	Other_						
c	Preservation for future generations						· · · · · · · · · · · · · · · · · · ·		
4	Provide a description of the organization's co	llections and explain	how they further	the organization	on's exe	mpt purpo	se in Parl	t XIV.	
5	During the year, did the organization solicit or								
•	to be sold to raise funds rather than to be ma							Yes	☐ No
Par	t IV Escrow and Custodial Arrang				'Yes" to	Form 990	, Part IV, I		
1	reported an amount on Form 990, Par		<b>3</b>					·	
1a	Is the organization an agent, trustee, custodi		ary for contributi	ons or other as	sets not	included			
-	on Form 990, Part X?		•					Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the foll	owing table:						
_		<b>-</b>						Amount	
С	Beginning balance					1c			
	Additions during the year					1d			
	Distributions during the year					1e			
f	Ending balance					1f			
	Did the organization include an amount on Fo	orm 990. Part X. line 2	21?					Yes	□ No
	If "Yes," explain the arrangement in Part XIV.							_	
Par			swered "Yes" to	Form 990, Part	IV, line	10.			
		(a) Current year	(b) Prior year	(c) Two year		(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance	1,417,666.	1,307,23		3,683.		13,082.	1.32	
b	Contributions	278,218.	277,76		3,910.		75,900.		
_	Net investment earnings, gains, and losses	-10,713.	85,57		1,599.		82,799.	<b></b>	***************************************
	Grants or scholarships	185,310.	252,90		5,958.		42,500.		
	Other expenditures for facilities			<del>' </del>	, , , , ,	<del></del>			
-	and programs								
f	Administrative expenses								
g	End of year balance	1,499,861.	1,417,66	6 1 30	7,234.	8	63,683.		
2	Provide the estimated percentage of the curr				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	<u></u>	
	Board designated or quasi-endowment		%	(4), 110,0 40.					
	Permanent endowment ► 100.00	%							
	Temporarily restricted endowment ▶	% %							
	The percentages in lines 2a, 2b, and 2c should								
За	Are there endowment funds not in the posse		ition that are held	l and administe	red for t	the organiz	etion		
	by:	out of the organiza	orr triat are from	. and administr	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ine organiz	ation	-	Yes No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations							3a(ii)	X
ь	If "Yes" to 3a(ii), are the related organizations	s listed as required or	n Schedule R?					3b	X
4	Describe in Part XIV the intended uses of the	·						<u> </u>	
Pai									
<u> </u>	Description of property	(a) Cost or ot		st or other	(c) A	ccumulate	ed	(d) Bool	k value
		basis (investm		is (other)		preciation	~	(4, 500.	· · · · · · · · · · · · · · · · · · ·
1a	Land			92,689.		<del></del>		79	2,689.
b	Buildings			28,185.	1.	169,2	67.		8,918.
c	Leasehold improvements			61,655.		640,3			1,302.
d	Equipment			88,751.		320,6			8,087.
	Other	<del></del>		40,300.		251,6			8,632.
	. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part					<b>▶</b> 1		9,628.
			,						990) 2011

' (a) Description of security or category (including name of security)	(b) Book value		d of valuation: f-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other	<del></del>		<del></del>
(A)			
(B)		<del></del>	
(C) (D)	+		
(E)	- <del></del>		
(F)			
(G)			
(H)			
(l)			
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII Investments - Program Related.	See Form 990, Part X, Iir		
(a) Description of investment type	(b) Book value		d of valuation: f-year market value
(1)			<u> </u>
(2)			
(3)			
(4)			
<u>(5)</u>			
(6) (7)	<u> </u>		
(8)			
(9)			
(10)	<del></del>		
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, II			
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)		<del></del>	
(6)			
(7)			
(8)			
<u>(9)</u> (10)	<del></del>		
Total. (Column (b) must equal Form 990, Part X, col (B)	line 15 )		
Part X Other Liabilities. See Form 990, Part			
1. (a) Description of liability		(b) Book value	
(1) Federal income taxes			
(2) DEFERRED RENT LIABILITY		2,406,263.	
(3) SECURITY DEPOSITS		44,000.	
(4) DEFERRED COMPENSATION		68,572.	
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)		2.510.035	
Total. (Column (b) must equal Form 990, Part X, col (B) FIN 48 (ASC 740) F∞tnote In Part XIV, provide the text of the footnote.  1. FIN 48 (ASC 740)	line 25.)	2,318,835.	ity for uncertain tax positions under
132053 01-23-12			Schedule D (Form 990) 20

che	Sule D (Form 990) 2011 PROJECT MANAGEMENT INSTITUTE			188/442	Page <b>4</b>
Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Fi	nancial S	<u>tatemen</u>		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		153,118	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		109,604	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		43,513	
4	Net unrealized gains (losses) on investments	4		<u>-10,628</u>	,040.
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		-10,628	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	or Dotum	32 <u>,</u> 885	<u>,366.</u>
	t XII Reconciliation of Revenue per Audited Financial Statements With R	evenue pe			267
1	Total revenue, gains, and other support per audited financial statements		1	142,955	,307.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	(20 0/			
а	<del></del>	,628,04	***		
b	Donated services and use of facilities 2b				
C	Recoveries of prior year grants	465 36	- 4		
d	Other (Describe in Part XIV.)	465,36		10 160	676
е	Add lines 2a through 2d		2e	-10,162	,6/6.
3	Subtract line 2e from line 1		3	153,118	,043.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			1	
а	investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV.)				_
С	Add lines 4a and 4b		4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	153,118	<u>,043.</u>
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With E	xpenses			
1	Total expenses and losses per audited financial statements		1	110,070	,001.
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				
C	Other losses 2c				
d	Other (Describe in Part XIV.)	465,36	54.		
е	Add lines 2a through 2d		2e		,364.
3	Subtract line 2e from line 1		3	109,604	,637.
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				
b	Other (Describe in Part XIV.)				
C	Add lines 4a and 4b		4c	1	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		_5	109,604	,637.
Pa	t XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4; Part IV, III	nes 1b and	2b; Part V, line	e 4; Part
K, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part t	o provide an	y addition	al information.	
PAI	RT V, LINE 4: TO PROVIDE GRANTS AND SCHOLARSHIPS	TO ORGA	ANIZAT	'IONS_	
			-		
<u>ANI</u>	O INDIVIDUALS IN ORDER TO EXPAND EDUCATIONAL OPPORT	RTUNIT:	IES FO	R FUTUR	E
				_	
PR(	DJECT MANAGERS, PREPARE STUDENTS FOR SUCCESS BY U	SING P	ROJECT	S TO TE	ACH
<u>rhi</u>	EM CRITICAL APPLIED SKILLS, AND SUPPORT DISASTER	RELIEF	AND I	EVELOPM	ENT.
PAI	RT XII, LINE 2D - OTHER ADJUSTMENTS:			_	_
<u>RE</u> l	NTAL EXPENSES			465	,364.

Schedule D (Form 990) 2011 PROJECT MANAGEMENT INSTITUTE  Part XIV Supplemental Information (continued)	23-1887442 Page 5
Part XIV Supplemental Information (continued)	
PART XIII, LINE 2D - OTHER ADJUSTMENTS:	
PART ATTI, EINE 2D - OTHER ADOUGHEMID:	
RENTAL EXPENSES	465,364.
	<del></del>
	<del></del>
	<del></del>
	<del> </del>

#### **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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

**Employer identification number** 

23-1887442 PROJECT MANAGEMENT INSTITUTE General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the

			an be duplicated if additional space is		(0.T.)
(a) Region	(b) Number of offices	(c) Number of employees, agents, and independent	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to	(e) If activity listed in (d) is a program service, describe specific type	(f) Total expenditures for and
		contractors	recipients located in the region)	of service(s) in region	Investments In region
				TO CARRY ON THE BUSINESS	
				IN INDIA AND ABROAD OF	
				COORDINATING PROJECT	
SOUTH ASIA	3	99	PROGRAM SERVICES	MANAGEMENT SERVICES AND	2,455,775
-		-	-	TO CARRY ON THE BUSINESS	] _
				IN CHINA AND AUSTRALIA	
EAST ASIA AND THE				AND ABROAD OF	
PACIFIC	2	11_	PROGRAM SERVICES	COORDINATING PROJECT	2,397,940
				THE PMI GLOBAL CONGRESS	
				EMEA AND LEADERSHIP	
				INSTITUTE MEETING WERE	
EUROPE			PROGRAM SERVICES	HELD IN DUBLIN, IRELAND.	1,214,138
				MCI IS PMI'S THIRD PARTY	
				REPRESENTATIVE IN	
		•		BRUSSELS, BELGIUM	
EUROPE	1	11	PROGRAM SERVICES	CONTRACTED TO CARRY ON	1,079,782
		İ		MCI IS A THIRD PARTY	
		!		REPRESENTATIVE IN	
EAST ASIA AND THE				SINGAPORE CONTRACTED BY	
PACIFIC	1	11	PROGRAM SERVICES	PMI TO CARRY ON THE	1,533,226
				INTEREL IS A CONSULTING	
				FIRM IN EUROPE ASSISTING	
		ļ	1	PMI CONDUCT OUTREACH TO	
EUROPE	1	. 1_	PROGRAM SERVICES	GOVERNMENT AND	660,825
				PROMETRIC IS A THIRD	
	1			PARTY REPRESENTATIVE	
CENTRAL AMERICA AND				CONTRACTED BY PMI TO	
THE CARIBBEAN	1	. 1_	PROGRAM SERVICES	PROVIDE EXAM DELIVERY	140,319
				PROMETRIC IS A THIRD	
	İ			PARTY REPRESENTATIVE	
EAST ASIA AND THE				CONTRACTED BY PMI TO	
PACIFIC	1	1	PROGRAM SERVICES	PROVIDE EXAM DELIVERY	5,076,291
3 a Sub-total	10	25			14,558,296
<b>b</b> Total from continuation					
sheets to Part I	8	8		<b>!</b>	6,849,584
c Totals (add lines 3a				<u> </u>	1
and 3b)	18	33		1	21,407,880

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

Schedule F (Form 990) 2011

Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) Part I (e) If activity listed in (d) (f) Total (a) Region (b) Number of (c) Number of (d) Activities conducted in region expenditures employees or is a program service, offices (by type) (i.e., fundraising, for region describe specific type in the region agents in program services, grants to of service(s) in region region recipients located in the region) PROMETRIC IS A THIRD PARTY REPRESENTATIVE CONTRACTED BY PMI TO PROVIDE EXAM DELIVERY PROGRAM SERVICES 2,246,829. EUROPE PROMETRIC IS A THIRD PARTY REPRESENTATIVE MIDDLE EAST AND CONTRACTED BY PMI TO NORTH AFRICA PROGRAM SERVICES PROVIDE EXAM DELIVERY 703,199. PROMETRIC IS A THIRD PARTY REPRESENTATIVE RUSSIA & THE NEWLY CONTRACTED BY PMI TO INDEPENDENT STATES PROGRAM SERVICES PROVIDE EXAM DELIVERY 77,216. PROMETRIC IS A THIRD PARTY REPRESENTATIVE CONTRACTED BY PMI TO SOUTH AMERICA PROGRAM SERVICES PROVIDE EXAM DELIVERY 658,628. PROMETRIC IS A THIRD PARTY REPRESENTATIVE CONTRACTED BY PMI TO SOUTH ASIA PROGRAM SERVICES PROVIDE EXAM DELIVERY 666,387. PROMETRIC IS A THIRD PARTY REPRESENTATIVE CONTRACTED BY PMI TO SUB-SAHARAN APRICA PROGRAM SERVICES PROVIDE EXAM DELIVERY 318,331. PMI HELD A MEGA ITEM WRITING MEETING IN THE EAST ASIA AND THE MELBOURNE, AUSTRALIA, PACIFIC PROGRAM SERVICES DURING WHICH REGIONAL 208,717. PMI HELD A MEGA ITEM WRITING MEETING IN WARSAW, POLAND, DURING EUROPE PROGRAM SERVICES WHICH REGIONAL 147,571. PMI HELD A MEGA ITEM WRITING MEETING IN TORONTO, CANADA, DURING NORTH AMERICA WHICH REGIONAL PROGRAM SERVICES 89,376. PMI HELD A MEGA ITEM WRITING MEETING IN SANTIAGO, CHILE, DURING SOUTH AMERICA PROGRAM SERVICES WHICH REGIONAL 246,237. **Totals** 

Continuation of Activities per Region. (Schedule F (Form 990), Part I, line 3) (c) Number of (a) Region (b) Number of (d) Activities conducted in region (e) If activity listed in (d) (f) Total offices employees or (by type) (i.e., fundraising, is a program service, expenditures in the region agents in program services, grants to describe specific type for region region recipients located in the region) of service(s) in region PMI SUPPORTED REGIONAL CONGRESS EVENTS THROUGHOUT LATIN AMERICA PROGRAM SERVICES SOUTH AMERICA DURING 2011 IN ADDITION 214,769. PMI SUPPORTED REGIONAL CONGRESS EVENTS AND EAST ASIA & THE FORUMS THROUGHOUT THE PACIFIC PROGRAM SERVICES ASIA PACIFIC REGION 207,493. LILIANA BUCHTIK IS A THIRD PARTY REPRESENTATIVE SOUTH AMERICA PROGRAM SERVICES CONTRACTED BY PMI TO 162,710. JULIANO FERRAZ REIS IS A THIRD PARTY REPRESENTATIVE SOUTH AMERICA PROGRAM SERVICES CONTRACTED BY PMI TO 152,333. PMI HELD A GLOBAL EXECUTIVE COUNCIL MEETING IN VANCOUVER, NORTH AMERICA PROGRAM SERVICES CANADA, DURING WHICH 229,558. PMI HELD A GLOBAL EXECUTIVE COUNCIL MEETING IN VANCOUVER NORTH AMERICA PROGRAM SERVICES CANADA, DURING WHICH 120,156. PMI OFFERED SEMINARSWORLD IN DUBLIN LONDON, AND BERLIN. EUROPE PROGRAM SERVICES SEMINARSWORLD ARE 400,074. Totals 8 6,849,584.

23-1887442

PROJECT MANAGEMENT INSTITUTE

Schedule F (Form 990) 2011

Page 2

Part II 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 recipient who 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 of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of. valuation (book, FMV, appraisal, other)
		EUROPE	RESEARCH GRANT	16,000,CHECK	HECK	0.N/A	/A	N/A
***************************************		NOKIR AMERICA	KESEARCH GRANT	90,000.CHECK	HECK	0 .N/A	/A	N/A
					-			
		EUROPE	RESEARCH GRANT	42,167.	CHECK	2.0	N/A	N/A
		EUROPE	RESEARCH GRANT	16,667.CHECK	HECK	0 .N.A	4	N/A
		NORTH AMERICA	RESEARCH GRANT	16,667.CHECK	HECK	0.N/A	<b>4</b> )	N/A
	2	NORTH AMERICA	CHAPTER CHARTERING COSTS	1,774.0	CHECK	\N. 0	A/A	K/N
	М	EUROPE	RESEARCH GRANT	11 667 CHRCK	M U	0		4
	Pi	IA AND THE						
And an include the state of the			RESEARCH GRANT	4,000,CHECK	HECK	0.N/A		N/A

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 Q

Enter total number of other organizations or entities

Schedule F (Form 990) 2011

က

Page 2		(i) Method of valuation (book, FMV, appraisal, other)	N/A				
	(1)	(h) Description of non-cash assistance	N/A				
87442	90), Part II, line	(g) Amount of non-cash assistance	0				
23-1887442	Schedule F (Form 9	(f) Manner of cash disbursement	HECK				
	United States.	(e) Amount of cash grant	10,000.CHECK				
INSTITUTE	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	(d) Purpose of grant	RESEARCH GRANT				
PROJECT MANAGEMENT	Assistance to Organizat	(c) Region	EAST ASIA AND THE				
PROJE	Grants and Other	(b) IRS code section and EIN (if applicable)					
யு	Part II Continuation of	1 (a) Name of organization					

23-1887442

Page 3

PROJECT MANAGEMENT INSTITUTE

Schedule F (Form 990) 2011

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.

Part III can be duplicated if additional space is needed.	dditional space is needed	ī					
(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)
EDUCATIONAL - FOR INDIVIDUALS							
TO ATTEND THE PMI LEADERSHIP							
INSTITUTE MEETING. THE PMI	CENTRAL AMERICA						
LEADERSHIP INSTITUTE MEETING	AND THE CARIBBEAN	1	900.	CHECK	0.	N/A	N/A
EDUCATIONAL - FOR INDIVIDUALS							
TO ATTEND THE PMI LEADERSHIP							
INSTITUTE MEETING AND THE	EAST ASIA AND THE						
REGIONAL MENTOR PROGRAM. THE	PACIFIC	24	31,080.	CHECK	0.	N/A	N/A
EDUCATIONAL - FOR INDIVIDUALS							
TO ATTEND THE PMI LEADERSHIP		_					
INSTITUTE MEETING AND THE							
REGIONAL MENTOR PROGRAM. THE	EUROPE	5	4,603.	CHECK	0.	N/A	N/A
EDUCATIONAL - FOR INDIVIDUALS							
TO ATTEND THE PMI REGIONAL							
MENTOR PROGRAM. THE PMI	MIDDLE EAST &						
REGIONAL MENTOR PROGRAM	NORTH AFRICA	1	565.	CHECK	0.	N/A	N/A
EDUCATIONAL - FOR INDIVIDUALS							
TO ATTEND THE PMI LEADERSHIP							
INSTITUTE MEETING. THE PMI							
LEADERSHIP INSTITUTE MEETING	NORTH AMERICA	1	900.	CHECK	0.	N/A	N/A
EDUCATIONAL - FOR INDIVIDUALS	_						
TO ATTEND THE PMI LEADERSHIP				_			
INSTITUTE MEETING. THE PMI	•	_					
LEADERSHIP INSTITUTE MEETING	SOUTH AMERICA	5	1,930.	CHECK	0	N/A	N/A
EDUCATIONAL - FOR INDIVIDUALS							
TO ATTEND THE PMI LEADERSHIP							
INSTITUTE MEETING. THE PMI	-						-
LEADERSHIP INSTITUTE MEETING	SOUTH ASIA	12	10,105.	CHECK	0.	N/A	N/A
				_			
				-			

Schedule F (Form 990) 2011

Schedu	ule F (Form 990) 2011 PROJECT MANAGEMENT INSTITUTE	23-1887442	Page 4
Part	IV Foreign Forms	<u> </u>	
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)	X Yes	☐ 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

Page 5

#### Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: PMI HAS A PROJECT MONITORING SYSTEM IN PLACE

TO MONITOR THE USE OF GRANT FUNDS. THE GUIDELINES ARE OUTLINED IN BOTH

THE RESEARCH AGREEMENT AND A DOCUMENT DETAILING THE ROLE OF THE PROJECT

LIAISON. PMI REQUIRES ALL GRANTEES TO SUBMIT DETAILED PERIODIC PROJECT

REPORTS TO THEIR ASSIGNED LIAISON AND TO THE PMI ACADEMIC RESOURCES TEAM.

PART I, LINE 3, COLUMN (E):

REGION: SOUTH ASIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO CARRY ON THE BUSINESS IN

INDIA AND ABROAD OF COORDINATING PROJECT MANAGEMENT SERVICES AND ACT AS A

LIAISON BETWEEN THE MEMBERS AND CHAPTERS IN INDIA AND PROJECT MANAGEMENT

INSTITUTE, INC., (PMI), AND CARRY OUT MARKETING, PROMOTIONAL AND SALES

SUPPORT SERVICES FOR THE PRODUCTS AND SERVICES PROVIDED BY PMI AND TO

CONDUCT OUTREACH TO GOVERNMENT AND BUSINESSES TO PROMOTE THE USE OF BEST

PRACTICES IN THE FIELD OF PROJECT MANAGEMENT.

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: TO CARRY ON THE BUSINESS IN

CHINA AND AUSTRALIA AND ABROAD OF COORDINATING PROJECT MANAGEMENT

SERVICES AND ACT AS A LIAISON BETWEEN THE MEMBERS AND CHAPTERS AND

PROJECT MANAGEMENT INSTITUTE, INC., (PMI), AND CARRY OUT MARKETING,

PROMOTIONAL AND SALES SUPPORT SERVICES FOR THE PRODUCTS AND SERVICES

PROVIDED BY PMI AND TO CONDUCT OUTREACH TO GOVERNMENT AND BUSINESSES TO

PROMOTE THE USE OF BEST PRACTICES IN THE FIELD OF PROJECT MANAGEMENT.

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: THE PMI GLOBAL CONGRESS EMEA

Page 5

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information

AND LEADERSHIP INSTITUTE MEETING WERE HELD IN DUBLIN, IRELAND. THE

GLOBAL CONGRESS WAS A PROFESSIONAL DEVELOPMENT EVENT THAT PROVIDED A

OPPORTUNITY FOR HUNDREDS OF PROFESSIONALS ACROSS ALL INDUSTRIES TO

EXCHANGE IDEAS ON TODAY'S PROJECT CHALLENGES AND EMERGING TRENDS. THE

LEADERSHIP INSTITUTE MEETING PROVIDED AN INVALUABLE OPPORTUNITY TO ACCESS

LEADERSHIP AND PROFESSIONAL DEVELOPMENT, NETWORKING OPPORTUNITIES, AND

SKILL ENHANCEMENT.

REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: MCI IS PMI'S THIRD PARTY

REPRESENTATIVE IN BRUSSELS, BELGIUM CONTRACTED TO CARRY ON THE BUSINESS

IN EUROPE OF COORDINATING PROJECT MANAGEMENT SERVICES AND ACT AS A

LIAISON BETWEEN THE MEMBERS AND CHAPTERS IN EUROPE AND PROJECT MANAGEMENT

INSTITUTE, INC. (PMI). MCI ALSO PROVIDES MARKETING, PROMOTIONAL AND

SALES SUPPORT SERVICES FOR THE PRODUCTS AND SERVICES PROVIDED BY PMI AND

CONDUCTS OUTREACH TO GOVERNMENT AND BUSINESSES TO PROMOTE THE USE OF BEST

PRACTICES IN THE FIELD OF PROJECT MANAGEMENT.

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: MCI IS A THIRD PARTY

REPRESENTATIVE IN SINGAPORE CONTRACTED BY PMI TO CARRY ON THE BUSINESS OF

COORDINATING PROJECT MANAGEMENT SERVICES AND ACT AS A LIAISON BETWEEN THE

MEMBERS AND CHAPTERS IN SINGAPORE AND PROJECT MANAGEMENT INSTITUTE, INC.

(PMI). MCI ALSO PROVIDES MARKETING, PROMOTIONAL AND SALES SUPPORT

SERVICES FOR THE PRODUCTS AND SERVICES PROVIDED BY PMI AND CONDUCTS

OUTREACH TO GOVERNMENT AND BUSINESSES TO PROMOTE THE USE OF BEST

PRACTICES IN THE FIELD OF PROJECT MANAGEMENT.

Part V Supplemental Information	ormation
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Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information

#### REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: INTEREL IS A CONSULTING FIRM IN EUROPE ASSISTING PMI CONDUCT OUTREACH TO GOVERNMENT AND BUSINESSES TO PROMOTE THE USE OF BEST PRACTICES IN THE FIELD OF PROJECT MANAGEMENT.

#### REGION: CENTRAL AMERICA AND THE CARIBBEAN

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROMETRIC IS A THIRD PARTY REPRESENTATIVE CONTRACTED BY PMI TO PROVIDE EXAM DELIVERY SERVICES TO CERTIFICATION APPLICANTS.

#### REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROMETRIC IS A THIRD PARTY REPRESENTATIVE CONTRACTED BY PMI TO PROVIDE EXAM DELIVERY SERVICES TO CERTIFICATION APPLICANTS.

#### REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROMETRIC IS A THIRD PARTY REPRESENTATIVE CONTRACTED BY PMI TO PROVIDE EXAM DELIVERY SERVICES TO CERTIFICATION APPLICANTS AND CUSTOMER SERVICE SUPPORT FOR REGIONAL MEMBERS AND CHAPTERS.

#### REGION: MIDDLE EAST AND NORTH AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROMETRIC IS A THIRD PARTY REPRESENTATIVE CONTRACTED BY PMI TO PROVIDE EXAM DELIVERY SERVICES TO CERTIFICATION APPLICANTS.

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information

REGION: RUSSIA & THE NEWLY INDEPENDENT STATES

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROMETRIC IS A THIRD PARTY

REPRESENTATIVE CONTRACTED BY PMI TO PROVIDE EXAM DELIVERY SERVICES TO

CERTIFICATION APPLICANTS.

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROMETRIC IS A THIRD PARTY
REPRESENTATIVE CONTRACTED BY PMI TO PROVIDE EXAM DELIVERY SERVICES TO
CERTIFICATION APPLICANTS.

REGION: SOUTH ASIA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROMETRIC IS A THIRD PARTY

REPRESENTATIVE CONTRACTED BY PMI TO PROVIDE EXAM DELIVERY SERVICES TO

CERTIFICATION APPLICANTS, AND CUSTOMER SERVICE SUPPORT FOR REGIONAL

MEMBERS AND CHAPTERS.

REGION: SUB-SAHARAN AFRICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PROMETRIC IS A THIRD PARTY

REPRESENTATIVE CONTRACTED BY PMI TO PROVIDE EXAM DELIVERY SERVICES TO

CERTIFICATION APPLICANTS.

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: PMI HELD A MEGA ITEM WRITING

MEETING IN THE MELBOURNE, AUSTRALIA, DURING WHICH REGIONAL VOLUNTEERS

COLLABORATED WITH PMI STAFF TO DEVELOP AND WRITE CERTIFICATION

EXAMINATION QUESTIONS FOR PMI'S VARIOUS CREDENTIALS.

Page 5

#### Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

#### REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: PMI HELD A MEGA ITEM WRITING MEETING IN WARSAW, POLAND, DURING WHICH REGIONAL VOLUNTEERS COLLABORATED WITH PMI STAFF TO DEVELOP AND WRITE CERTIFICATION EXAMINATION QUESTIONS FOR PMI'S VARIOUS CREDENTIALS.

#### REGION: NORTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PMI HELD A MEGA ITEM WRITING MEETING IN TORONTO, CANADA, DURING WHICH REGIONAL VOLUNTEERS COLLABORATED WITH PMI STAFF TO DEVELOP AND WRITE CERTIFICATION EXAMINATION QUESTIONS FOR PMI'S VARIOUS CREDENTIALS.

#### REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PMI HELD A MEGA ITEM WRITING MEETING IN SANTIAGO, CHILE, DURING WHICH REGIONAL VOLUNTEERS COLLABORATED WITH PMI STAFF TO DEVELOP AND WRITE CERTIFICATION EXAMINATION QUESTIONS FOR PMI'S VARIOUS CREDENTIALS.

#### REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PMI SUPPORTED REGIONAL CONGRESS EVENTS THROUGHOUT LATIN AMERICA DURING 2011 IN ADDITION TO A LEADERSHIP INSTITUTE MEETING & MASTER CLASS IN BRAZIL. THE REGIONAL CONGRESS EVENTS ARE PROFESSIONAL DEVELOPMENT EVENTS THAT PROVIDE AN OPPORTUNITY FOR PROJECT MANAGEMENT PROFESSIONALS IN EACH COUNTRY/REGION TO EXCHANGE IDEAS ON TODAY'S PROJECT CHALLENGES AND EMERGING TRENDS. THE LEADERSHIP INSITUTE MEETING & MASTER CLASS PROVIDED INVALUABLE

OPPORTUNITIES TO ACCESS LEADERSHIP AND PROFESSIONAL DEVELOPMENT

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

NETWORKING OPPORTUNITIES, AND SKILL ENHANCEMENT.

REGION: EAST ASIA & THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: PMI SUPPORTED REGIONAL

CONGRESS EVENTS AND FORUMS THROUGHOUT THE ASIA PACIFIC REGION DURING

2011. THE REGIONAL CONGRESS EVENTS AND FORUMS ARE PROFESSIONAL

DEVELOPMENT EVENTS THAT PROVIDE AN OPPORTUNITY FOR PROJECT MANAGEMENT

PROFESSIONALS IN EACH COUNTRY/REGION TO EXCHANGE IDEAS ON TODAY'S PROJECT

CHALLENGES AND EMERGING TRENDS.

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: LILIANA BUCHTIK IS A THIRD

PARTY REPRESENTATIVE CONTRACTED BY PMI TO MAINTAIN CONTENT IN PMI'S LOCAL

WEB PORTAL AND SUPPORT REGIONAL RELATIONSHIP MANAGEMENT FOR THE PURPOSE

OF GROWING & MAINTAINING PMI'S MEMBERSHIP, CREDENTIAL HOLDER & CHAPTER

BASE IN LATIN AMERICA (EXCLUDING BRAZIL).

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: JULIANO FERRAZ REIS IS A THIRD

PARTY REPRESENTATIVE CONTRACTED BY PMI TO MAINTAIN CONTENT IN PMI'S LOCAL

WEB PORTAL AND SUPPORT REGIONAL RELATIONSHIP MANAGEMENT FOR THE PURPOSE

OF GROWING & MAINTAINING PMI'S MEMBERSHIP, CREDENTIAL HOLDER & CHAPTER

BASE IN BRAZIL.

REGION: NORTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PMI HELD A GLOBAL EXECUTIVE

COUNCIL MEETING IN VANCOUVER, CANADA, DURING WHICH MEMBERS OF THE

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

INSTITUTE'S ELITE COMMUNITY OF INDUSTRY AND GOVERNMENT PROJECT MANAGEMENT DIRECTORS AND THOUGHT LEADERS WHO INFLUENCE AND ADVANCE THE PROJECTC AND PROGRAM MANAGEMENT PROFESSIONS EXCHANGE IDEAS ON TODAY'S PROJECT CHALLENGES AND EMERGING TRENDS.

REGION: NORTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: PMI HELD A GLOBAL EXECUTIVE COUNCIL MEETING IN VANCOUVER, CANADA, DURING WHICH MEMBERS OF THE INSTITUTE'S ELITE COMMUNITY OF INDUSTRY AND GOVERNMENT PROJECT MANAGEMENT DIRECTORS AND THOUGHT LEADERS WHO INFLUENCE AND ADVANCE THE PROJECTC AND PROGRAM MANAGEMENT PROFESSIONS EXCHANGE IDEAS ON TODAY'S PROJECT CHALLENGES AND EMERGING TRENDS.

### REGION: EUROPE

(E) SPECIFIC TYPES OF SERVICES IN REGION: PMI OFFERED SEMINARSWORLD IN DUBLIN, LONDON, AND BERLIN. SEMINARSWORLD ARE PROFESSIONAL DEVELOPMENT OPPORTUNITIES THAT ALLOW PMI'S MEMBERS AND CERTIFICATE HOLDERES TO DEEPEN THEIR KNOWLEDGE ON SPECIFIC PROJECT MANAGEMENT TOPICS VIA FACE-TO-FACE SEMINARS WHERE SKILLED SEMINAR LEADERS BRING THE VALUE OF THEIR REAL-WORLD PROJECT EXPERIENCES.

### PART III, COLUMN (A):

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(A) TYPE OF GRANT OR ASSISTANCE: EDUCATIONAL - FOR INDIVIDUALS TO ATTEND THE PMI LEADERSHIP INSTITUTE MEETING. THE PMI LEADERSHIP INSTITUTE MEETING PROVIDES AN INVALUABLE OPPORTUNITY TO ACCESS LEADERSHIP AND PROFESSIONAL DEVELOPMENT, NETWORKING OPPORTUNITIES AND SKILLS

### Part V | Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

### ENHANCEMENT.

REGION: EAST ASIA AND THE PACIFIC

(A) TYPE OF GRANT OR ASSISTANCE: EDUCATIONAL - FOR INDIVIDUALS TO ATTEND

THE PMI LEADERSHIP INSTITUTE MEETING AND THE REGIONAL MENTOR PROGRAM.

THE PMI LEADERSHIP INSTITUTE MEETING PROVIDES AN INVALUABLE OPPORTUNITY

TO ACCESS LEADERSHIP AND PROFESSIONAL DEVELOPMENT, NETWORKING

OPPORTUNITIES AND SKILLS ENHANCEMENT. THE PMI REGIONAL MENTOR PROGRAM

FACILITATES THE DEVELOPMENT AND ENHANCEMENT OF PROJECT MANAGEMENT.

### REGION: EUROPE

(A) TYPE OF GRANT OR ASSISTANCE: EDUCATIONAL - FOR INDIVIDUALS TO ATTEND

THE PMI LEADERSHIP INSTITUTE MEETING AND THE REGIONAL MENTOR PROGRAM.

THE PMI LEADERSHIP INSTITUTE MEETING PROVIDES AN INVALUABLE OPPORTUNITY

TO ACCESS LEADERSHIP AND PROFESSIONAL DEVELOPMENT, NETWORKING

OPPORTUNITIES AND SKILLS ENHANCEMENT. THE PMI REGIONAL MENTOR PROGRAM

FACILITATES THE DEVELOPMENT AND ENHANCEMENT OF PROJECT MANAGEMENT.

### REGION: MIDDLE EAST & NORTH AFRICA

(A) TYPE OF GRANT OR ASSISTANCE: EDUCATIONAL - FOR INDIVIDUALS TO ATTEND

THE PMI REGIONAL MENTOR PROGRAM. THE PMI REGIONAL MENTOR PROGRAM

FACILITATES THE DEVELOPMENT AND ENHANCEMENT OF PROJECT MANAGEMENT.

### REGION: NORTH AMERICA

(A) TYPE OF GRANT OR ASSISTANCE: EDUCATIONAL - FOR INDIVIDUALS TO ATTEND

THE PMI LEADERSHIP INSTITUTE MEETING. THE PMI LEADERSHIP INSTITUTE

MEETING PROVIDES AN INVALUABLE OPPORTUNITY TO ACCESS LEADERSHIP AND

**Employer identification number** 2 23-1887442 Open to Public OMB No 1545-0047 Inspection X Yes 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 Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. INSTITUTE PROJECT MANAGEMENT General Information on Grants and Assistance criteria used to award the grants or assistance? Name of the organization Department of the Treasury Internal Revenue Service SCHEDULEI (Form 990) Part II Part

℧ GLOBALLY TO COMMUNITIES MANAGEMENT PRINCIPLES SLOBAL RESEARCH GRANT GLOBAL RESEARCH GRANT SLOBAL RESEARCH GRANT (h) Purpose of grant or assistance EW CHAPTER START-UP EW CHAPTER START-UP INCLUDING STUDENTS NO PROMOTE PROJECT Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any FUNDS FUNDS 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 ame and address of organization

(b) EIN

(c) IRC section or cash grant assistance or government assistance or government assistance or government assistance other) CONTRIBUTIONS PACILITIES N-KIND 125,251.FMV 0.N/A ö ó 0 667. 000 550,000. 4,000. 2,769 1,656 30 10 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 501(C)(3) 501(C)(3) 501(c)(3) 501(C)(6) 501(C)(3) 501(C)(6) Enter total number of other organizations listed in the line 1 table 56-6049503 23-2630701 22-1487354 90-0712893 27-4236739 74-6041411 1 (a) Name and address of organization CHAPTER - 2015 E. SHIELDS STREET STEVENS INSTITUTE OF TECHNOLOGY PMI CENTRAL MISSISSIPPI CHAPTER NORTH CAROLINA STATE UNIVERSITY PMI CALIFORNIA CENTRAL VALLEY PMI EDUCATIONAL FOUNDATION NEWTOWN SQUARE, PA 19073 CASTLE POINT ON HUDSON UNIVERSITY OF HOUSTON 1401 LIVINGSTONE LANE 14 CAMPUS BOULEVARD HOBOKEN, NJ 07030 HOUSTON, TX 77227 JACKSON, MS 32913 RALEIGH, NC 27695 FRESNO, CA 93726 PO BOX 27405 PO BOX 7204 Q က

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) (2011)

132101 01-27-12

23-1887442 Page 1	(h) Purpose of grant or assistance	GLOBAL RESEARCH GRANT	CHARITABLE CONTRIBUTION					Schedule I (Form 990)
	(g) Description of non-cash assistance	N/A	N/A					
edule I (Form 990). Pa	(f) Method of valuation (book, FMV, appraisal, other)	N/A	N/A					
oited States (Sch	(e) Amount of non-cash assistance	0.	0			-	-	
izations in the []	(d) Amount of cash grant	4,667.	500.					
INSTITUTE	(c) IRC section if applicable	501(C)(3)	<b>501</b> (C)(3)					
ANAGEMENT	(b) EIN	53-0196584	23-6272827					
Schedule I (Form 990) PROJECT MANAGEMENT INSTITUTE    Dart 11   Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule   Form 990). Part 11)	1	THE GEORGE WASHINGTON UNIVERSITY 20101 ACADEMIC WAY ASHBURN, VA 20147	NEWTOWN SQUARE FIRE COMPANY 8 N NEWTOWN STREET ROAD NEWTOWN SQUARE, PA 19073					

23-1887442

Page 2

Schedule I (Form 990) (2011) PROJECT MANAGEMENT INSTITUTE

Part (III

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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of hon- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
DUCATIONAL - FOR INDIVIDUALS TO ATTEND THE PMI RADERSHIP INSTITUTE MEETING. THE PMI LEADERSHIP NSTITUTE MEETING PROVIDES AN INVALUABLE		1			
PPORTUNITY TO ACCESS LEADERSHIP AND PROFESSIONAL	15	12,889.	0.		
			_		
EGIONAL MENTOR PROGRAM. THE PMI REGIONAL MENTOR	•		= =		
ROGRAM FACILITATES THE DEVELOPMENT AND					
NHANCEMENT OF PROJECT MANAGEMENT.	7	9,516.	0.		
Part IV Supplemental Information. Complete this part to provide the		required in Part I, I	ine 2, and any other	information required in Part I, line 2, and any other additional information.	
		CT MONITO	RING SYSTE	PROJECT MONITORING SYSTEM IN PLACE TO	
IONITOR THE USE OF GRANT FUNDS. TH	THE GUIDELINES	ARE	OUTLINED IN	N ВОТН ТНЕ	:
ESEARCH AGREEMENT AND A DOCUMENT DETAILING THE ROLE OF THE	DETAILING	THE ROLE	OF THE PR	PROJECT	
IAISON. PMI REOUIRES ALL GRANTEES	TO	IIT DETAIL	SUBMIT DETAILED PERIODIC PROJECT	C PROJECT	

PART II, LINE 1, COLUMN (H):

THE PMI ACADEMIC RESOURCES TEAM.

TO THEIR ASSIGNED LIAISON AND TO

REPORTS

NAME OF ORGANIZATION OR GOVERNMENT: PMI EDUCATIONAL FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: TO PROMOTE PROJECT MANAGEMENT

132102 01-27-12

Schedule I (Form 990) 2011 PROJECT MANAGEMENT INSTITUTE 23-188/442 Page 2
Part IV Supplemental Information
PRINCIPLES GLOBALLY TO COMMUNITIES INCLUDING STUDENTS, NON-PROFIT
ORGANIZATIONS AND SOCIETY AT LARGE.
PART III, COLUMN (A):
(A) TYPE OF GRANT OR ASSISTANCE: EDUCATIONAL - FOR INDIVIDUALS TO ATTEND
THE PMI LEADERSHIP INSTITUTE MEETING. THE PMI LEADERSHIP INSTITUTE
THE PHI DEADERSHIP INSTITUTE MEETING: THE PHI DEADERSHIP INSTITUTE
MEETING PROVIDES AN INVALUABLE OPPORTUNITY TO ACCESS LEADERSHIP AND
PROFESSIONAL DEVELOPMENT, NETWORKING OPPORTUNITIES AND SKILLS
ENHANCEMENT.

### **SCHEDULE J** (Form 990)

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

► See separate instructions.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990.

Inspection Employer identification number

23-1887442

	PROJECT MANAGEMENT INSTITUTE	23-188	744	2	
Pa	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.				Ī
	X First-class or charter travel Housing allowance or residence for person	nal use			I
	Travel for companions Payments for business use of personal re				1
	Tax indemnification and gross-up payments Health or social club dues or initiation fee				Ī
	Discretionary spending account Personal services (e.g., maid, chauffeur, o				Ī
	<u> </u>	,			ŧ
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or				<u> </u>
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain		1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, di	ectors.			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?		2	Х	<b> </b>
		1			
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization	ation's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization				
	establish compensation of the CEO/Executive Director. Explain in Part III.				
	Compensation committee X Written employment contract	į.	•		
	Independent compensation consultant  Independent compensation consultant  Independent compensation consultant	ľ			1
	X Form 990 of other organizations	committee			ŧ
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	Ì	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	ĺ	4b	X	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	-	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	İ			
					1
	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	on			1
	contingent on the revenues of:				ł
а	The organization?		5a		
b	Any related organization?		5b		
	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	on			ŧ
	contingent on the net earnings of:				-
а	The organization?		6a		
b	Any related organization?		6b	<u> </u>	
	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 payment	s			
	not described in lines 5 and 6? If "Yes," describe in Part III		7	L _	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t	he			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in				

Regulations section 53.4958-6(c)?

PROJECT MANAGEMENT INSTITUTE Schedule J (Form 990) 2011

Part 11 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	3C compensation	(3)	( <u>Q</u> )	(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
1	6	166,13	1 .1	1,258,489.	0	3,807.	1,428,431.	1,258,489.
1 GREGORY BALESTRERO	▣		0	- 1		0	- 1	0.
	8	443,92		1,075,728.	68,572.	35,243.	1,623,471.	697,327.
2 MARK LANGLEY	₿				0	0	0	0
	Θ	191,17	19,88	4,363.	0	33,557.	248,973.	0
3 WILLIAM SCARBOROUGH	(II)			0.	0	- 1	0	0
	(3)	193,70	19,86	3,066.	0	35,373.	252,005.	0.
4 JOHN DOYLE	<u>(ii)</u>			0.	0	0		0
	ε	178,52	21,55	1,209.	0	31,347.	232,632.	0
5 DOROTHY MCKELVY	(ii)			0	0	0	- 1	0
	Ξ	176,62	18,205.	2,018.	0	35,109.	231,956.	0
6 FRANCISCO SCHETTINI	Ξ		0	0	0			0
	ε	176,196.	18,205.	341.	0	29,498.	224,240.	0
7 BRIAN WEISS	(E)	0	0	0	0	• 0	• 0	0.
	€							
8	▣							
	Ξ							
6	▣							
	Ξ							
10	(ii)							
	€							
11	(3)							
	Θ							
12	▣							
	Ξ							
13	(E)							
	€			;				
14	(1)							
	Θ							
15	(3)							
	Θ							
16	9							

Schedule J (Form 990) 2011

OF

Ø FIRST CLASS, ANY ADDITIONAL EXPENSES FROM THIS TYPE OF REQUEST WILL BE PAID THE AMOUNT IS NOMINAL. SHOULD A TRAVELER DESIRE OL L THE DESTINATION POINT TRAVEL), BETWEEN THE LOWEST APPLICABLE FARE AND THE NEXT FARE NEEDED TO UPGRADE FOR INTERNATIONAL TRAVEL UNDER 8 HOURS, PMI WILL ABSORB THE DIFFERENCE BY THE TRAVELER AND MUST BE PAID TO PMI AT THE TIME OF CONFIRMATION 5 BUT POINT TO 8 HOURS INTERNATIONAL AIR TRAVEL THAT IS GREATER THAN (NOT CALCULATING LAYOVERS INTO THIS NUMBER, SERVICE IF WILL BE IN BUSINESS CLASS HIGHER CLASS OF

### SCHEDULE O (Form 990 or 990-EZ)

Form 990 or 990-EZ or to provide any additional information.

Department of the Treasury Internal Revenue Service

132211 01-23-12

Name of the organization

Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on

► Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public Inspection

PROJECT MANAGEMENT INSTITUTE

**Employer identification number** 23-1887442

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

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
DEDICATED TO ADVANCING THE PRACTICE, SCIENCE AND PROFESSION OF PROJECT
MANAGEMENT THROUGHOUT THE WORLD IN A CONSCIOUS AND PROACTIVE MANNER.
PMI'S ENVISIONED GOAL AS STATED IN ITS STRATEGIC PLAN IS: WORLDWIDE,
ORGANIZATIONS WILL EMBRACE, VALUE, AND UTILIZE PROJECT MANAGEMENT AND
ATTRIBUTE THEIR SUCCESS TO IT.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
STATED IN ITS STRATEGIC PLAN IS: WORLDWIDE, ORGANIZATIONS WILL
EMBRACE, VALUE, AND UTILIZE PROJECT MANAGEMENT AND ATTRIBUTE THEIR
SUCCESS TO IT.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
SEMINARS AND CONGRESSES: PMI HOSTS ANNUAL CONGRESSES IN EUROPE, AFRICA
AND THE MIDDLE EAST (EMEA) AND NORTH AMERICA REGIONS TO BRING PROJECT
MANAGEMENT PRACTITIONERS AROUND THE WORLD TOGETHER TO ENHANCE THEIR
KNOWLEDGE OF PROJECT MANAGEMENT. PMI ALSO HOSTS SMALLER REGIONAL
EVENTS THROUGHOUT THE YEAR IN THE ASIA/PACIFIC AND LATIN AMERICA
REGIONS. PMI ALSO HOSTS SEMINARSWORLD AND VIRTUAL EDUCATIONAL
OFFERINGS THAT HELP PRACTITIONERS ENHANCE THEIR KNOWLEDGE OF PROJECT
MANAGEMENT.
MEMBERSHIP: PMI IS THE WORLD'S LEADING NOT-FOR-PROFIT MEMBERSEHIP
ASSOCIATION FOR THE PROJECT MANAGEMENT PROFESSION, WITH MORE THAN
352,000 MEMBERS IN 184 COUNTRIES. PMI PROVIDES ITS MEMBERS WITH ACCESS
TO KNOWLEDGE, NETWORKS, AND RESOURCES THAT CAN HELP THEM IMPROVE THEIR

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

PROJECT MANAGEMENT INSTITUTE

Employer identification number 23–1887442

WORK AND ADVANCE THEIR CAREER IN PROJECT MANAGEMENT, INCLUDING TOOLS TO

ASSESS THEIR SKILLS AND PLAN THEIR CAREER PATH, ONLINE AND DIGITAL

RESOURCES INCLUDING THE PMBOK GUIDE, ARTICLES & PAPERS, AND WEBINARS,

LEADERSHIP & VOLUNTEER OPPORTUNITIES, QUALITY PUBLICATIONS TO KEEP THEM

INFORMED, AND DISCOUNTS ON PMI CREDENTIAL EXAMS AND RENEWALS.

FORM 990, PART VI, SECTION A, LINE 6: MEMBER RIGHTS ARE DEFINED AS THE OPPORTUNITY TO VOTE ON INSTITUTE MATTERS AND TO HOLD ELECTED OR APPOINTED OFFICE, AS DEFINED IN THE BYLAWS. PRIVILEGES ARE DEFINED AS THOSE TANGIBLE AND INTANGIBLE BENEFITS, PRODUCTS, AND SERVICES OFFERED WITH MEMBERSHIP IN THE INSTITUTE. THE PMI BOARD OF DIRECTORS SHALL ESTABLISH THE PRIVILEGES ASSOCIATED WITH MEMBERSHIP.

FORM 990, PART VI, SECTION A, LINE 7A: THE INSTITUTE MAINTAINS THE FOLLOWING CLASSES AND QUALIFICATIONS OF MEMBERSHIP, EACH CLASS WITH THE RIGHTS HEREINAFTER PROVIDED:

- 1. MEMBER REGULAR. ANY PERSON WHO IS INTERESTED IN, OR ENGAGED IN, THE PRACTICE, TEACHING, OR OTHER APPLICATION OF PROJECT MANAGEMENT, INCLUDING RESEARCH CONCERNING PROJECT MANAGEMENT, MAY QUALIFY AS A REGULAR MEMBER OF THE INSTITUTE. REGULAR MEMBERS SHALL HAVE VOTING RIGHTS AND MAY HOLD ANY ELECTED OR APPOINTED OFFICE IN THE INSTITUTE.
- 2. MEMBER RETIREE. ANY PERSON WHO HAS BEEN A PMI MEMBER IN GOOD

  STANDING FOR FIVE (5) CONSECUTIVE YEARS, AND WHO HAS RETIRED FROM ACTIVE

  EMPLOYMENT, QUALIFIES FOR PMI RETIREE MEMBERSHIP. RETIREE MEMBERS SHALL

  HAVE ALL RIGHTS OF THE REGULAR MEMBER CLASS.

PROJECT MANAGEMENT INSTITUTE

**Employer identification number** 23-1887442

- MEMBER STUDENT. ANY PERSON CURRENTLY REGISTERED IN A DEGREE GRANTING PROGRAM AT AN ACCREDITED, OR GLOBALLY EQUIVALENT, COLLEGE/UNIVERSITY, MAY QUALIFY FOR PMI STUDENT MEMBERSHIP. STUDENT MEMBERS SHALL NOT BE ENTITLED TO EXERCISE ANY VOTING RIGHTS, AND SHALL NOT HOLD ANY ELECTED OFFICE IN THE INSTITUTE, EXCEPT THAT STUDENT MEMBERS MAY HOLD OFFICE AND VOTE WITHIN A PMI COMPONENT, AS MAY BE GRANTED IN THE COMPONENT BYLAWS.
- MEMBER ASSOCIATE. ANY PERSON WHO JOINS THE INSTITUTE TO ACCESS LIMITED PRIVILEGES PURSUANT TO POLICIES DULY ADOPTED BY THE PMI BOARD OF DIRECTORS. MEMBER - ASSOCIATE SHALL NOT BE ENTITLED TO EXERCISE ANY VOTING RIGHTS, AND SHALL NOT BE A CANDIDATE FOR, NOR HOLD ANY ELECTED OR APPOINTED OFFICE IN THE INSTITUTE.

FORM 990, PART VI, SECTION B, LINE 11: A DRAFT OF THE FORM 990 IS PREPARED INITIALLY BY PMI'S INDEPENDENT AUDITORS. THAT DRAFT IS THEN REVIEWED BY PMI'S FINANCE AND LEGAL STAFF AND PMI'S OUTSIDE LEGAL CONSULTANTS. THE NEXT DRAFT IS THEN PRESENTED FOR REVIEW TO PMI'S PRESIDENT AND CHIEF EXECUTIVE OFFICER AND THE BOARD'S PERFORMANCE OVERSIGHT COMMITTEE. FINAL DRAFT OF THE FORM 990 IS THEN PRESENTED TO THE FULL BOARD. 990 WAS DISTRIBUTED ELECTRONICALLY TO THE GOVERNING BODY FOR REVIEW PRIOR TO FILING. THE PROCESS INCLUDED THE OPPORTUNITY FOR MEMBERS OF THE GOVERNING BODY TO SUBMIT QUESTIONS/COMMENTS ELECTRONICALLY.

FORM 990, PART VI, SECTION B, LINE 12C: PMI MEMBERS AND NON-MEMBERS WORKING ON PMI VOLUNTEER GROUPS ARE BOUND BY THIS POLICY, INCLUDING BUT NOT LIMITED TO: MEMBERS OF THE PMI BOARD, BOARD SUPPORTING COMMITTEES, TASK FORCES AND OTHER GROUPS CHARTERED BY THE PMI BOARD (AS DEFINED IN THE RULES OF THE BOARD), MEMBER ADVISORY GROUPS (MAG), PROJECT ACTION TEAMS (PATS), Schedule O (Form 990 or 990-EZ) (2011)

**Employer identification number** 23-1887442

PROJECT MANAGEMENT INSTITUTE

AWARDS COMMITTEES, EDITORIAL BOARDS, STANDARDS PROGRAM PROJECT TEAMS, CERTIFICATION DEPARTMENT ITEM WRITING SESSIONS, RESEARCH GROUPS AND OPEN WORKING SESSIONS.

KEY EMPLOYEES AND OTHER STAFF OF THE INSTITUTE ARE ALSO COVERED UNDER THE POLICY. WHILE STAFF MEMBERS, OTHER THAN KEY EMPLOYEES DEFINED IN THIS POLICY, ARE NOT REQUIRED TO SIGN ANNUAL CONFLICT OF INTEREST QUESTIONNAIRES, THEY ARE SUBJECT TO THE OTHER REQUIREMENTS OF THIS POLICY AS WELL AS THE STAFF CODE OF CONDUCT.

PARTICIPATION ON A PMI VOLUNTEER GROUP CONSTITUTES ACCEPTANCE OF THE TERMS OF THIS POLICY AND ITS REQUIREMENTS. UNLESS OTHERWISE SPECIFIED, AT LEAST ONCE A YEAR OR AT THE BEGINNING OF PARTICIPATION ON ANY PMI VOLUNTEER GROUP, PARTICIPATING INDIVIDUALS WILL COMPLETE THE PMI CONFLICT OF INTEREST QUESTIONNAIRE. INDIVIDUALS JOINING A SECOND, AND EACH SUBSEQUENT, GROUP WILL NOT NEED TO FILL OUT ANOTHER QUESTIONNAIRE IF THE PRIOR ONE IS STILL CURRENT AND PARTICIPATION IN AN ADDITIONAL PMI VOLUNTEER GROUP DOES NOT REQUIRE THE DISCLOSURE OF ADDITIONAL INFORMATION. HOWEVER, THE INDIVIDUAL WILL INSTEAD COMPLETE THE INFORMATION RELEASE PORTION OF THE QUESTIONNAIRE. THE INFORMATION RELEASE PORTION OF THE FORM PROVIDES SUBSEQUENT SPONSORS THE NAME OF THE GROUP THE INDIVIDUAL WAS PARTICIPATING ON WHEN THEY FILLED OUT THEIR QUESTIONNAIRE AND WILL ALLOW THE GROUP LEADER TO ACCESS THE QUESTIONNAIRE FROM THE LEGAL DEPARTMENTS FILES.

THE PMI CODE OF ETHICS AND PROFESSIONAL CONDUCT REQUIRES AUTHORITY: THAT INDIVIDUALS WILL ABIDE BY THE BYLAWS, POLICIES, RULES, REQUIREMENTS, AND PROCEDURES OF PMI, AND WILL NOT KNOWINGLY ENGAGE OR ASSIST IN

ACTIVITIES INTENDED TO COMPROMISE THE INTEGRITY, REPUTATION, PROPERTY,

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Schedule O (Form 990 or 990-EZ) (2011)	Page
Name of the organization PROJECT MANAGEMENT INSTITUTE	Employer identification number 23–1887442
AND/OR LEGAL RIGHTS OF THE INSTITUTE.	
2. DISCLOSURE: INDIVIDUALS ACCOUNTABLE UNDER THIS POLIC	Y MUST IDENTIFY
THOSE SITUATIONS WHERE THEY HAVE A CONFLICT OF INTEREST O	R WHERE A
REASONABLE PERSON MIGHT CONCLUDE THAT THEY HAD A CONFLICT	OF INTEREST IN
THE ACTIVITY IN WHICH THEY ARE PARTICIPATING OR ABOUT TO	PARTICIPATE. SUCH
DISCLOSURE SHOULD BE MADE IMMEDIATELY TO THAT STAFF MEMBE	R'S SUPERIOR OR
THE GROUP LEADER IN THE CASE OF VOLUNTEERS.	
3. PMI CONFLICT OF INTEREST QUESTIONNAIRE. ALL VOLUNTEER	S PARTICIPATING IN
A PMI VOLUNTEER GROUP AND ALL SENIOR STAFF, INCLUDING KEY	EMPLOYEES, MUST
FILL OUT THE QUESTIONNAIRE ANNUALLY. THIS IS TO ENSURE TH	AT NO CONFLICTS OF
INTERESTS THAT HAVE ARISEN AFTER THE PERSONS INITIAL INVO	LVEMENT ARE
DISCLOSED.	
4. DISCLOSURE REVIEW: THE CONFLICT OF INTEREST QUESTION	NAIRE, TO BE
COMPLETED BY THE INDIVIDUAL PARTICIPATING ON A PMI VOLUNT	EER GROUP, WILL BI
REVIEWED BY THE RESPONSIBLE GROUP LEADER FOR HIS/HER KNOW	LEDGE AND
UNDERSTANDING AND THEN FORWARDED TO THE PMI STAFF MEMBER	WHO IS RESPONSIBLE
FOR THE GROUP, OR IN THE CASE OF A BOARD SPONSORED GROUP,	TO THE PMI
GENERAL COUNSEL.	
	<del></del>

THE PMI GENERAL COUNSEL WILL REVIEW THE CONFLICT OF INTEREST QUESTIONNAIRES OF ALL PMI BOARD MEMBERS AND MEMBERS OF BOARD CHARTERED COMMITTEES AND BRING CONFLICTS OF INTEREST AND POSSIBLE CONFLICTS OF INTEREST TO THE ATTENTION OF THE PMI CHAIR AND CHIEF EXECUTIVE OFFICER FOR RESOLUTION.

Name of the organization PROJECT MANAGEMENT INSTITUTE	Employer identification number 23-1887442
OF ALL KEY EMPLOYEES AND BRING CONFLICTS OF INTEREST AND	POSSIBLE CONFLICTS
OF INTEREST TO THE ATTENTION OF THE PMI CHIEF EXECUTIVE O	FFICER AND CHIEF
OPERATING OFFICER FOR RESOLUTION.	
THE CHIEF EXECUTIVE OFFICER OR THE CHIEF OPERATING OFFICE	R WILL REVIEW THE
QUESTIONNAIRE OF THE GENERAL COUNSEL.	
5. POSSIBLE REMEDIES: REMEDIAL ACTION FOR DISCLOSED CON	
CONFLICTS OF INTEREST MAY INCLUDE BUT ARE NOT LIMITED TO	THE FOLLOWING:
DEGUCAL EDON ANY DEGLETON DEVELOPED BY MUE CROWN	
RECUSAL FROM ANY DECISION DEVELOPED BY THE GROUP.	
RECUSAL FROM THE PART OF THE PROCESS WHERE A CONFLICT EXT	ISTS, SUCH AS NOT
REVIEWING A COMPETITORS AWARD SUBMITTAL.	
REPLACEMENT ON THE GROUP.	
PARTICIPATION AS A SUBJECT MATTER EXPERT BUT NOT IN DISCU	JSSIONS OR
DELIBERATIONS.	
6. POLICY USAGE: CARE MUST BE USED TO AVOID OVERUSE OR	MISUSE OF THIS
POLICY. THE INSTITUTE REQUIRES INTEGRITY TO FUNCTION PROJ	PERLY BUT OVER-USE
OF THE REQUIREMENT TO COMPLETE THE CONFLICT OF INTEREST (	QUESTIONNAIRE MAY
DISCOURAGE PARTICIPATION BY OTHERWISE QUALIFIED VOLUNTEEN	RS AND RESULT IN
VOLUNTEERS PERCEIVING THEY ARE BEING HARASSED.	
7. FORMS: ALL INDIVIDUAL PMI MEMBERS, NON-MEMBERS, AND	STAFF MEMBERS
PARTICIPATING IN PMI VOLUNTEER GROUPS WILL COMPLETE AND STATE OF 132212 School	SIGN THE PMI
acite	

CONFLICT OF INTEREST QUESTIONNAIRE. THE BOARD OF DIRECTORS, CHIEF EXECUTIVE OFFICER, AND VICE PRESIDENTS (FOR PROGRAMS THEY ARE RESPONSIBLE FOR), OTHER GROUP LEADERS OF PMI VOLUNTEER GROUPS ARE AUTHORIZED TO USE THE ATTACHED FORM FOR GROUPS THEY SPONSOR. IT IS ANTICIPATED THAT THE STANDARD FORM ATTACHED WILL APPLY IN MOST CASES, HOWEVER, IF A LEADER BELIEVES THAT MODIFICATION WOULD SERVE THE INTERESTS OF PMI TO MAKE THEIR GROUP MORE PRODUCTIVE THE FORM MAY BE TAILORED WITH THE EXPLICIT CONCURRENCE OF THE PMI GENERAL COUNSEL OR THE DESIGNATED REPRESENTATIVE FROM THE PMI LEGAL DEPARTMENT.

- 8. RETENTION OF CONFLICT OF INTEREST FORMS: THE PMI OPERATING DEPARTMENT WHICH SPONSORS, SUPPORTS OR MANAGES A PMI VOLUNTEER GROUP, AFTER COMPLETING THEIR REVIEW OF THE SUBMITTED QUESTIONNAIRES, WILL FORWARD THE QUESTIONNAIRES TO THE PMI LEGAL DEPARTMENT FOR RETENTION IN ACCORDANCE WITH PMI'S RECORDS MANAGEMENT POLICY. THE LEGAL DEPARTMENT WILL RETAIN THE QUESTIONNAIRES DURING THE LIFE OF THE GROUP AND THE QUESTIONNAIRES WILL BE ARCHIVED WHEN THE GROUP IS DISBANDED.
- 9. VIOLATIONS: APPARENT VIOLATIONS OF THIS POLICY, INCLUDING BUT NOT

  LIMITED TO THE FAILURE TO MAKE ADEQUATE AND FULL DISCLOSURE, WILL BE

  FORWARDED TO THE APPROPRIATE INDIVIDUAL AS DESCRIBED IN PMI'S POLICY ON

  COMPLAINT, DISPUTE, AND GRIEVANCE RESOLUTION AND MAY BE FURTHER REFERRED TO

  THE ETHICS REVIEW COMMITTEE UNDER PMI'S MEMBER ETHICS CASE PROCEDURES.

FORM 990, PART VI, SECTION B, LINE 15: PMI UTILIZES BROAD PAY RANGES THAT

ENCOURAGE GROWTH AND DEVELOPMENT WITHIN POSITIONS OVER TIME. BROAD BANDS

ARE REVIEWED ANNUALLY WITH MARKET INFORMATION AND MAY BE ADJUSTED IF

WARRANTED WITHIN THE FINANCIAL CONDITION OF THE ORGANIZATION AND TO SUSTAIN

Name of the organization
PROJECT MANAGEMENT INSTITUTE

Employer identification number 23-1887442

COMPETITIVENESS. APPLICABLE MARKET DATA IS USED IN THE DETERMINATION OF

BASE SALARIES, WITH ATTENTION TO MARKET SENSITIVE TECHNICAL COMPETENCIES

AND PMI AS A WHOLE.

COMPENSATION REVIEW IS PART OF THE ORGANIZATION PRACTICE TO REGULARLY
ASSESS COMPENSATION PROGRAMS AND SYSTEMS. PMI ENGAGES THE ASSISTANCE OF
EXTERNAL CONSULTING RESOURCES TO CONDUCT ASSESSMENTS OF COMPENSATION.

COMPREHENSIVE STUDIES HAVE BEEN UNDERTAKEN EVERY TWO TO THREE YEARS WITH
ANNUAL REVIEW OF BASE SALARY AND TOTAL CASH COMPENSATION FOR SELECT
POSITIONS. THE CEO ACTIVELY REVIEWS COMPENSATION PHILOSOPHY, ASSESSES
SALARY DATA ON AN ANNUAL BASIS, AND HAS CONDUCTED COMPREHENSIVE STUDIES OF
COMPENSATION EVERY TWO TO THREE YEARS. THE ASSESSMENTS INCLUDE DIRECT AND
INDIRECT COMPENSATION, AS WELL AS MARKET-BASED COMPARISONS TO COMPARABLE
PROFESSIONAL SOCIETIES AND ORGANIZATIONS, BROAD NON-PROFIT INDUSTRY DATA
AND OTHER SURVEY INFORMATION ALIGNED WITH THE NATURE OF THE POSITIONS.

SIMILAR SIZE, SCOPE OPERATIONS, INTERNATIONAL ACTIVITIES AND/OR SIMILAR
MEMBER PROGRAMS ARE INCLUDED ALONG WITH GEOGRAPHIC INFORMATION RELATED TO
THE MARKET IN WHICH THE ORGANIZATION COMPETES FOR TALENT.

FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS, CONFLICT

OF INTEREST POLICY, AND AUDITED FINANCIAL STATEMENTS ARE AVAILABLE TO THE

PUBLIC. THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE POSTED

ON THE WEBSITE (WWW.PMI.ORG) AND COPIES WILL BE PROVIDED ON REQUEST. THE

AUDITED FINANCIAL STATEMENT WILL BE PROVIDED ON REQUEST.

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

NET UNREALIZED LOSSES ON INVESTMENTS:

-10,628,040.

Schedule O (Form 990 or 990 EZ) (2011)  Name of the organization  PROJECT MANAGEMENT INSTITUTE	Employer identification number 23–1887442
FORM 990, PART XII, LINE 2C:	
THE PERFORMANCE OVERSIGHT COMMITTE IS REPSONSIBLE FOR THE	OVERSIGHT OF
THE AUDIT OF THE FINANCIAL STATEMENTS. THE BOARD OF DIREC	TORS IS
RESPONSIBLE FOR THE SELECTION OF THE INDEPENDENT ACCOUNTA	NT WHO
PERFORMS THE AUDIT.	
	<del></del>

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

Name of the organization

## Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► See separate instructions.

2011 Open to Public Inspection

OMB No 1545-0047

Employer identification number 23-1887442

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Part t

PROJECT MANAGEMENT INSTITUTE

	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
PMI AUS LEVEL 2	- 98-0607905 ARK, 201 SUSSEX S	COORDINATING PROJECT	ATTEMPATTA	384 490	179 401	PROJECT MANAGEMENT
PMI (BE	PMI (BEIJING) PROJECT MANAGEMENT TECHNOLOGY	CORDINATING PROJECT				PROJECT MANAGEMENT
16/F I			CHINA	2,042,450.	1,403,789.INSTITUTE	INSTITUTE
	Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt	tions (Complete if the organization ans	swered "Yes" to Form 990, Part	IV, line 34 because	it had one or more r	elated tax-exempt
Part	organizations during the tax year.)					

(a)	(q)	(c)	(p)	(e)	(t)	(g) Section 512(b)(13)	2(b)(13)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section	Direct controlling entity	controlled entrty?	. pa ~
,				501(c)(3))		Yes	٥ ۷
PROJECT MANAGEMENT INSTITUTE EDUCATION	EXPANDING EDUCATIONAL				PROJECT		
FOUNDATION - 23-2630701, 14 CAMPUS	OPPORTUNITIES FOR FUTURE			509(A)(3) -	MANAGEMENT		
73-3299	PROJECT MANAGERS	PENNSYLVANIA	501(C)(3)	TYPE 1	INSTITUTE	×	
		-					

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

Schedule R (Form 990) 2011

132161 01-23-12 LHA

SEE PART VII FOR CONTINUATIONS

23-1887442

Page 2

Schedule R (Form 990) 2011 PROJECT MANAGEMENT INSTITUTE

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

3	Perc	\$06°66		re related	(h) Percentage ownership			
0		×		e or mo	e of year	2		
	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	N/A		secause it had or	(g) total Share of end-of-year	Decep		
3	Ron- Jons?	×		t IV, line 34 t	(f) Share of total income			
[3]	of year ts	1 115 011.		to Form 990, Par	(e) Type of entity (C corp., S corp.	line in the second seco		
9	Share of total	2 492 523.		n answered "Yes"	(d) Direct controlling entity			
[9]	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Q		rf the organizatio	(c) Legal domicile (state or foreign	(Vanuary)		
_		RELATED		omplete	ivity		i	
5	Direct controlling entity	PROJECT MANAGEMENT INSTITUTE		ration or Trust (C ear.)	(b) Primary activity			
3	Legal domicile (state or foreign			s a Corpo				
, 4	Primary activity	COORDINATING PROJECT MANAGEMENT SERVICES		janizations Taxable ar poration or trust during	<u>Z</u> c			
(5)	Name, address, and EIN of related organization	LTD 98-056940, #1031, REGUS, BANDRA KURLA COMPLEX (E) MUMBAI INDIA 400051		part ty Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(a) Name, address, and EIN of related organization			

Schedule R (Form 990) 2011

Page•3

Yes

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# Schedule R (Form 990) 2011 PROJECT MANAGEMENT INSTITUTE

### Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Part V

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

- During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
- Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
  - **b** Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- Sale of assets to related organization(s)

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- Purchase of assets from related organization(s)
- h Exchange of assets with related organization(s)
- i Lease of facilities, equipment, or other assets to related organization(s)
- j Lease of facilities, equipment, or other assets from related organization(s)
- Performance of services or membership or fundraising solicitations for related organization(s) 1 Performance of services or membership or fundraising solicitations by related organization(s)
  - m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

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- Sharing of paid employees with related organization(s)
- o Reimbursement paid to related organization(s) for expenses
- Reimbursement paid by related organization(s) for expenses
- q Other transfer of cash or property to related organization(s)
- 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. r Other transfer of cash or property from related organization(s)

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
PROJECT MANAGEMENT INSTITUTE EDUCATIONAL (1) FOUNDATION	В	675,251.	675,251.CASH/NON-CASH(FMV)
PROJECT MANAGEMENT INSTITUTE EDUCATIONAL (2) FOUNDATION	P	404,422.CASH	CASH
(3) PMI ORGANIZATION CENTRE PVT., LTD.	Ö	2,178,135.CASH	САЅН
(4) PMI AUSTRALASIA PTY LIMITED	ŏ	383,247.CASH	CASH
PMI (BEIJING) PROJECT MANAGEMENT (5) TECHNOLOGY CO., LTD.	õ	2,037,881.CASH	ЗАЅН

6 SPECIAL INTEREST GROUPS (SIGS) 132163 01-23-12

Schedule R (Form 990) 2011

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23-1887442

Page 4

Schedule R (Form 990) 2011 PROJECT MANAGEMENT INSTITUTE

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

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

(k)	arship			!				į	2011
Perce	OWI	_							066 u
G) neral or	rtner?								F
	8- 토리 2								
(i) Code V-UBI	amount in box 20 managing ownership of Schedule K-1 partner/ (Form 1065)								Schedule R (Form 990) 2011
(F)	allocations?								
S S	\$ 8 \$			-				-	
(g) Share of	end-of-year assets								
(f) Share of					-				
Are all	10 K	2							
- F				. !					
(d)	(related, unrelated, 5016/3) excluded from tax					,			
(c)	(state or foreign country)	1					:		
(b)	רוווומן מכוועונץ								
(a) (b) (c) (d) (d) (d) (d) Mare address and FIN Primary activity Legal dominile Predominant income	name, address, and Ein of entity								

Schedule R (Form 990) 2011 PROJECT MANAGEMENT INSTITUTE 23-188/442 Page
Part VII Supplemental Information  Complete this part to provide additional information for responses to questions on Schedule R (see instructions).
PART I, IDENTIFICATION OF DISREGARDED ENTITIES:
NAME, ADDRESS, AND EIN OF DISREGARDED ENTITY:
PMI (BEIJING) PROJECT MANAGEMENT TECHNOLOGY CO., LTD.
EIN: 98-0609885
RM. 16054-1605A, 16/F, IDEAL INTERNATIONAL PLAZA, NO. 58 NORTHWEST 4TH RIN
HAIDAN DISTRICT, BEIJING, CHINA 100080
HAIDAN DISTRICT, BEISING, CHINA 100000