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Form 990-EZ

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form. Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning 01-01-2013, and ending 12-31-2013

- B Check if applicable: Address change, Name change, Initial return, Terminated, Amended return, Application pending

C Name of organization: THE PUBLIC SECTOR CONSORTIUM INC. Number and street: 58 FAYERWEATHER STREET. City or town: CAMBRIDGE, MA 02138

D Employer identification number: 20-5201451. E Telephone number: (617) 547-8448. F Group Exemption Number

G Accounting Method: Cash, Accrual, Other (specify)

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: WWW.PUBLIC-SECTOR.ORG

J Tax-exempt status (check only one): 501(c)(3), 501(c)(), (insert no), 4947(a)(1), 527

K Form of organization: Corporation, Trust, Association, Other

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ. \$124,649

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

Table with 21 rows and 2 columns. Rows include Revenue (1-9), Expenses (10-17), and Net Assets (18-21). Values range from 67,089 to 233,380.

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	227,263	22	247,039
23 Land and buildings		23	
24 Other assets (describe in Schedule O)	0	24	175
25 Total assets	227,263	25	247,214
26 Total liabilities (describe in Schedule O)	22,996	26	13,834
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	204,267	27	233,380

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? REINVENT PRACTICE OF PUBLIC LEADERSHIP	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)	
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title		
28 WE PROVIDE HIGH QUALITY MANAGEMENT AND LEADERSHIP LEARNING OPPORTUNITIES TO PUBLIC LEADERS AND NON- PROFIT COMMUNITY LEADERS (SOCIAL SECTOR) FOR THE PURPOSE OF HELPING TO IMPROVE THEIR PERFORMANCE AND SERVICE TO US CITIZENS WE HAVE A TEAM OF VIRTUAL CONTRACTORS WHO SERVE AS FACULTY, PROGRAM MANAGERS AND SUPPORT SPECIALISTS TO KEEP OUR OVERHEAD LOW WE CONSISTENTLY REVIEW AND UPGRADE OUR PROGRAM CONTENT TO ASSURE RELEVANCY TO PUBLIC LEADERS WE STRIVE TO PROVIDE THE HIGHEST POSSIBLE QUALITY LEARNING OPPORTUNITIES AT AFFORDABLE PRICES TO PUBLIC LEADERS (LOCAL STATE AND FEDERAL) WE ADDED SEVERAL NEW OFFERINGS TO OUR CURRICULUM THIS YEAR OVER THE YEARS WE HAVE PROVIDED FACILITATION STRATEGIES FOR PUBLIC LEADERS AND SYSTEMS THINKING FOR PUBLIC LEADERS TO THE PUBLIC AND COMMUNITY LEADERS IN THE CITIES OF PAWTUCKET, MIDDLETOWN AND NEWPORT, RI AS WELL AS ADMINISTRATORS AT EMMANUEL AND SALVE REGINA UNIVERSITIES WE HAVE ALSO WORKED WITH LEADERS WHO ARE NASA SYSTEM ENGINEERS, US DEPARTMENT OF VETERANS AFFAIRS LEADERS IN THE SENIOR EXECUTIVE PREP PROGRAM, STUDENTS AT THE FLETCHER SCHOOL OF LAW AND DIPLOMACY AS WELL AS LEADERS FROM BRIGHAM AND WOMEN'S HOSPITAL WITH THE HARVARD SCHOOL OF PUBLIC HEALTH LEADERS, IN 2012 THE PUBLIC SECTOR CONSORTIUM BEGAN A PROGRAM "LEADERSHIP MATTERS" WITH THE PELL CENTER AT SALVE REGINA UNIVERSITY TARGETED AT LOCAL AND STATE GOVERNMENT LEADERS, CIVIC/COMMUNITY LEADERS, RI LEGISLATORS, AND ACADEMIC LEADERS THE (SOCIAL SECTOR IN RHODE ISLAND) THE PUBLIC SECTOR IS ALSO BEGINNING WORK WITH UNIVERSITIES IN THE AREA OF CIVIC ENGAGEMENT AND CIVIC LEADERSHIP FOR UNDERGRADUATES OUR ANNUAL PRO BONO OFFERING OF A TWO DAY TRAINING PROGRAM AT NO COST TO PUBLIC LEADERS CONTINUED IN 2013 THIS YEAR'S PROGRAM WAS SYSTEMS THINKING FOR PUBLIC LEADERS WHICH WAS HOSTED BY MULTIPLE PUBLIC SECTOR GROUPS IN CHICAGO ILLINOIS THE TARGET GROUP OF LEADERS ARE PART OF A LARGE COMMISSION TASKED WITH DEVELOPING ONE OF THE LARGEST PARCELS OF PUBLIC LAND INSIDE A MAJOR CITY THE GROUP WAS CREATED BY THE GOVERNOR AND IS CALLED THE MILLENNIUM RESERVE STATE AGENCY "STEERING COMMITTEE" THE TASK GROUP INCLUDED LEADERS FROM DEPARTMENT OF NATURAL RESOURCES, DEPARTMENT OF COMMERCE AND ECONOMIC OPPORTUNITY, DEPARTMENT OF TRANSPORTATION, ILLINOIS HISTORIC PRESERVATION AGENCY ILLINOIS ENVIRONMENTAL PROTECTION AGENCY WE CONTINUE TO PROVIDE A NO COST MONTHLY TELECONFERENCE AS AN OPPORTUNITY FOR PUBLIC LEADERS TO SHARE BEST PRACTICES AND LEARN TOGETHER ON TOPICS SUCH AS ETHICS FOR PUBLIC LEADERS AND THE NEW FINDINGS OF NEUROSCIENCE AND THE IMPACT ON LEADERSHIP PRACTICES WE WORK TO DEVELOP NEW APPROACHES TO LEARNING AND TO OFFER RELEVANT TOPICS THAT ARE ON THE FRONTIER OF PUBLIC LEADERSHIP PRACTICES SUCH AS SUSTAINABLE LEADERSHIP PRACTICES AND TRANSITIONS SKILLS FOR LEADERS WE HAVE UPGRADED THE FREE LEARNING AVAILABLE ON OUR WEBSITE WITH THE LEADERSHIP TIPS TAB ON OUR HOME PAGE WE CONTINUE TO EXPAND OUR PARTNERSHIPS WITH OTHER LIKE- MINDED NONPROFITS AND UNIVERSITIES WHO SHARE OUR MISSION THE TARGET AUDIENCE FOR OUR WORK IS VAST (LOCAL, STATE AND FEDERAL PUBLIC LEADERS) WE REALIZE THAT WE CANNOT POSSIBLY PROVIDE LEARNING OPPORTUNITIES TO ALL THE PUBLIC LEADERS WHO NEED OUR SERVICES WITHOUT STRONG PARTNERSHIPS OUR WEB SITE WWW.PUBLIC-SECTOR.ORG PROVIDES PUBLICATIONS AND LEARNING RESOURCES TO LEADERS WHO WANT TO CONTINUE THEIR EDUCATION ON THEIR OWN OUR BIBLIOGRAPHY FOR PUBLIC LEADERS IS UPDATED ANNUALLY AND IS ORGANIZED BY ESSENTIAL AREAS OF PRACTICE WE WILL OFFER LEARNING OPPORTUNITIES THROUGHOUT 2014 AS WE CONTINUE TO WORK ON WAYS TO LOWER OUR COSTS AND KEEP OUR QUALITY HIGH OUR GOAL IS THAT LEADERS AT ALL LEVELS OF GOVERNMENT CAN ACCESS IMPORTANT MANAGEMENT AND LEADERSHIP PRACTICES THAT SUPPORT A RE-INVENTED MODEL OF PUBLIC LEADERSHIP THAT SERVES THE PUBLIC GOOD (Grants \$ 17,832) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	62,740
29 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	
30 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31 Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a) <input checked="" type="checkbox"/>	32	62,740

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
See Additional Data Table				

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the

instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year?
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year?
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II and enter the total amount involved
39 Section 501(c)(7) organizations Enter
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
40b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ?
40c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization
40e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
41 List the states with which a copy of this return is filed
42a The organization's books are in care of
42b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country?
42c At any time during the calendar year, did the organization maintain an office outside the U S ?
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041?
44a Did the organization maintain any donor advised funds during the year?
44b Did the organization operate one or more hospital facilities during the year?
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes," to line 44c, has the organization filed a Form 720 to report these payments?
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?

	Yes	No
46		No

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47		No
48		No
49a		No
49b		

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000.

52 Did the organization complete Schedule A? **NOTE:** All Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A Yes No

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

Sign Here *****
 Signature of officer _____ Date 2014-05-09
 GEORGIANNA BISHOP PRESIDENT
 Type or print name and title _____

Paid Preparer Use Only
 Print/Type preparer's name MATTHEW HUTT CPA Preparer's signature _____ Date 2014-05-09 Check if self-employed PTIN P01070603
 Firm's name ALEXANDER ARONSON FINNING & CO PC Firm's EIN 04-2571780
 Firm's address 21 EAST MAIN STREET Phone no (508) 366-9100
 WESTBORO, MA 01581

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Additional Data

Software ID:

Software Version:

EIN: 20-5201451

Name: THE PUBLIC SECTOR CONSORTIUM INC

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
GEORGIANNA BISHOP PRESIDENT	29 00	20,788	0	0
PAT SPITZIG DIRECTOR	3 90	1,063	0	0
BETTE NOVAK VP & SECRETARY	3 00	1,338	0	0
KIRKE HARPER DIRECTOR	0 70	0	0	0
TONY ROLLINS DIRECTOR	0 90	0	0	0
ELEANOR M SEAMANS DIRECTOR	2 50	0	0	0
ELIZABETH MCDANIEL DIRECTOR	1 00	0	0	0
PATRICIA J GUARD VP & TREASURER	2 00	0	0	0

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

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

- ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.
- ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
THE PUBLIC SECTOR CONSORTIUM INC

Employer identification number
20-5201451

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
- 8 A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
- 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
 h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
Total									

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage for 2012 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	56,264	56,264	70,904	70,589	67,089	321,110
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	49,460	55,581	13,500	35,050	57,047	210,638
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	105,724	111,845	84,404	105,639	124,136	531,748
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	50,000	50,000	50,000	50,000	50,000	250,000
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b	50,000	50,000	50,000	50,000	50,000	250,000
8 Public support (Subtract line 7c from line 6)						281,748

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	105,724	111,845	84,404	105,639	124,136	531,748
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,565	1,056	873	552	513	4,559
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	1,565	1,056	873	552	513	4,559
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	107,289	112,901	85,277	106,191	124,649	536,307
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	52.530 %
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	56.930 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	0.850 %
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	0.860 %

- 19a 33 1/3% support tests—2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization.
- b 33 1/3% support tests—2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization.
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.

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

Facts And Circumstances Test

Return Reference

Explanation

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization
THE PUBLIC SECTOR CONSORTIUM INC

Employer identification number

20-5201451

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990-EZ, PART I, LINE 4 - OTHER INVESTMENT INCOME	DESCRIPTION INTEREST INCOME AMOUNT 513
FORM 990-EZ, PART I, LINE 10 - GRANTS AND SIMILAR AMOUNTS PAID	ACTIVITY CLASSIFICATION GRANTEE NAME PROBONO TRAINING PROGRAM AMOUNT GIVEN 17,832
FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES	DESCRIPTION INSURANCE AMOUNT 1,760 DESCRIPTION OFFICE SUPPLIES, PRINTING AND POSTAGE AMOUNT 2,326 DESCRIPTION CLIENT VISITS AND MARKETING TRIPS AMOUNT 4,774 DESCRIPTION BANK CHARGES AND REGISTRATION FEES AMOUNT 89 TOTAL TO FORM 990-EZ, LINE 16 8,949
FORM 990-EZ, PART II, LINE 24 - OTHER ASSETS	DESCRIPTION PREPAID EXPENSES BEG OF YEAR AMOUNT 0 END OF YEAR AMOUNT 175
FORM 990-EZ, PART II, LINE 26 - OTHER LIABILITIES	DESCRIPTION ACCOUNTS PAYABLE BEG OF YEAR AMOUNT 18,799 END OF YEAR AMOUNT 13,834 DESCRIPTION DEFERRED REVENUE BEG OF YEAR AMOUNT 4,197 END OF YEAR AMOUNT 0

TY 2013 Transfers Personal Benefits Contracts Declaration

Name: THE PUBLIC SECTOR CONSORTIUM INC

EIN: 20-5201451

Declaration: THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY, OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT. THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY, OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.