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DLN: 93493224004476

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 private foundations)

► Do not enter social security numbers on this form as it may be made public ► Information about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

Open to Public Inspection

A F	or the	2015 ca	lendar year, or tax year begin	ning 01-01-2015 , and ending 12-3	l-2015			
		pplicable	C Name of organization PROJECT MANAGEMENT INSTITU	TE		D Empl	oyer ident	tification number
_	dress ch	-				23-1	887442	
	me cha	_	Doing business as					
	ial retu	ım	Number and street (or D.O. boy i	f mail is not delivered to street address) Roo	om/cuito	E Telepl	none numb	er
⊢ Fin		mınated	14 CAMPUS BOULEVARD	Tillali is not delivered to street address) Roc	mi suite	(610)356-46	500
┌ Am	ended	return		ountry, and ZIP or foreign postal code				
┌ _{Apı}	olication	n pending	NEWTOWN SQUARE, PA 19073			G Gross	receipts \$	347,011,660
			F Name and address of p	rincipal officer	H(a)	Is this a grou	p return f	or
			MARK A LANGLEY 14 CAMPUS BOULEVARI	2		subordinates '	2	ΓYes Γ Νο
			NEWTOWN SQUARE, PA			Are all subord included?	dinates	□Yes □No
							halıst (see instructions)
I Ta	x-exem	npt status	501(c)(3) 501(c)(6)	◀ (insert no)	H(c)	Group exemp	tion num	ber ► 3735
J W	ebsite	e: 🟲 WW	W PMI ORG					
K For	n of org	ganızatıon	Corporation Trust Associa	ition Cther ►	L Year	r of formation 1	.969 M S	State of legal domicile PA
Pa	rt I	Sum	mary					
Governance	0	ONSCIC RGANIZ	OUS AND PROACTIVÉ MANN ATIONS WILL EMBRACE, V	ICE AND PROFESSION OF PROJECT NER PMI'S ENVISIONED GOAL AS ALUE, AND UTILIZE PROJECT MAN discontinued its operations or dispose	STATED IN NAGEMENT A	ITS STRATE	GIC PLA JTE THE	N IS WORLDWIDE, IR SUCCESS TO IT
		check th	is box F) If the organization	arscontinued its operations of dispos	sea of more th	Idii 25 /0 01 it.	ilet ass	et3
Activities &	3 1	Number	of voting members of the gove	rnıng body (Part VI, line 1a)			3	15
Ě			·	s of the governing body (Part VI, line			4	15
₽ E	1			n calendar year 2015 (Part V, line 2			5	429
•				f necessary)			6 7a	8,100
	1			from Form 990-T, line 34			7a 7b	5,481,162 -260,674
	-			,		Prior Year	1 1	Current Year
	8	Contri	butions and grants (Part VIII	, line 1h)		51	,269	0
E E	9	Progra	ım service revenue (Part VIII	, line 2g)	ne 2 g)			
Revenue	10			mn (A), lines 3, 4, and 7d)		15,304		26,260,519
ш.	11		, , , , ,	A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11,357	,795	10,439,248
	12	10tair	revenue—add lines 8 through	11 (must equal Part VIII, column (A), line	180,337	,851	210,585,862
	13	Grants	and similar amounts paid (Pa	art IX, column (A), lines 1–3)...		4,022	,787	5,264,030
	14			t IX, column (A), line 4)			0	0
83	15	Saları 5-10)		oyee benefits (Part IX, column (A), li	nes	37,489	,268	43,030,812
ž T	16a	•		IX, column (A), line 11e)			0	0
Expenses	ь	Total fu	ndraising expenses (Part IX, column	(D), line 25) ► 0				
	17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		95,735	,041	103,511,090
	18			nust equal Part IX, column (A), line 2		137,247		151,805,932
Not Assets or Fund Balances	19	Reven	ue less expenses Subtract lii	ne 18 from line 12		43,090 ning of Current		58,779,930 End of Year
SS et	20	Totala	assets (Part X, line 16)			414,337	,290	445,945,408
P. P	21					56,605	,016	59,299,885
	22	Netas	sets or fund balances Subtra	ct line 21 from line 20		357,732	,274	386,645,523
Unde my k	nowled arer ha	alties of p dge and b as any kr **** Signa	oelief, it is true, correct, and c nowledge ** ature of officer	examined this return, including accor omplete Declaration of preparer (oth				
		Туре	or print name and title					
							F	
	4		rint/Type preparer's name HRISTOPHER M PEKULA	Preparer's signature CHRISTOPHER M PEKULA	Date 2016-08-11	Check If self-employed	PTIN P007349	065
Paid		C					P007349	
Pre	d pare	e r	HRISTOPHER M PEKULA	CHRISTOPHÉR M PEKULA		self-employed	P007349 42-071432	5

BLUE BELL, PA 19422

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

. ▼Yes 「No

Form	990 (2015)			Page 3
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I = 100$	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I $\ \ \ \ \ \ \ \ \ \ \ \ \ $	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
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			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 🖼	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
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 (see instructions)	17		No
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		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20b

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
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 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	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	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, 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	Yes	
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		
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	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

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Pal	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this		v			
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	1a	219			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
	Did the organization comply with backup withholding rules for reportable payments to gaming (gambling) winnings to prize winners?	vend •	lors and reportable	1 c	Yes	
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	429			
b	If at least one is reported on line 2a, did the organization file all required federal emp Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file	loyme	ent tax returns?	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation	n in S	Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a sign over, a financial account in a foreign country (such as a bank account, securities account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country ►IN, CH, BE, AS, AE, UK, SN See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank (FBAR)	and	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time durin	g the	tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited t	ax sh	elter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?					
.	Donath and a second to the sec		0 4	5c		NI -
	Does the organization have annual gross receipts that are normally greater than \$10 organization solicit any contributions that were not tax deductible as charitable cont If "Yes," did the organization include with every solicitation an express statement the	ributi	ons?	6a		No
7	were not tax deductible?		· · · ·	6b		
_	Did the organization receive a payment in excess of \$75 made partly as a contribution services provided to the payor?		d partly for goods and	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services pr		d?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal proper	ty for	which it was required to	_		
d	file Form 8282?	7d		7c		
		I				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a p	erson	al benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a perso	nal b	enefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the or required?		ation file Form 8899 as	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles Form 1098-C?	, dıd 1	the organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess bus during the year?	siness	s holdings at any time			
•				8		
	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or rela			9a 9b		
10	Section 501(c)(7) organizations. Enter	ccu p	C. 3011: 1 1	<i>J</i> .		
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
	facilities					
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11a				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıe	u of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the		u 011 01111 10 11	124		
13	year Section 501(c)(29) qualified nonprofit health insurance issuers.	12b				
	Is the organization licensed to issue qualified health plans in more than one state $^{\gamma}N_0$ additional information the organization must report on Schedule O	o te. S	ee the instructions for	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax		·	14a		Νo
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explana	tion in	Schedule O	14b		

Part VI Governance, Management, and Disclosure

interest policy, and financial statements available to the public during the tax year

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below,	
describe the circumstances, processes, or changes in Schedule O. See instructions.	
Check if Schedule O contains a response or note to any line in this Part VI	

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 15			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Yes	
·	ın Schedule O how thıs was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of			

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

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso	tion (han d in is l	one b both	ox, an c	heck unless officer stee)	i	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organization and related organizations
See Additional Data Table										
										Form 990 (2015)

	(A) Name and Tıtle	(B) A verage hours per week (list any hours	more t	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				1	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of ot compensati from the	ated of other sation the
San A		for related organizations below dotted line)	Individual trustaa or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organizai rela organiz	ted
See .	Additional Data Table											
1b				•			<u> </u>					
c d	Total from continuation she Total (add lines 1b and 1c)				٠.	٠.	•		3,870,167	0		387,229
2	Total number of individuals \$100,000 of reportable con							e) wl	no received more th	nan		
_	2.11						i				Yes	No
3	Did the organization list any on line 1a? If "Yes," complete							yee, •	or highest compen		3	No
4	For any individual listed on organization and related org											

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νo

Section B. Independent Contractors

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) Name and business address	(B) Description of services	(C) Compensation
PROMETRIC	EXAM DELIVERY & PSYCHOMETRIC SERVICES	14,919,093
PO BOX 223608		
PITTSBURGH, PA 152512608		
	FULLY MANANGED HOSTING AND DATABASE SERV	1,677,847
1 FANATICAL PLACE CITY OF WINDCRES		
SAN ANTONIO, TX 78218		
PBD INC	BOOK FULFILLMENT SERVICES	1,656,489
1650 BLUEGRASS LAKES PARKWAY		
ALPHARETTA, GA 30004		
	EMEA REGIONAL GOVERNMENT & BUSINESS RELA	1,639,359
RUE DU LUXEMBOURG 22-24		
BRUSSEL		
BE		
IMAGINATION PUBLISHING	CONTENT MARKETING AGENCY	1,442,816
600 W FULTON ST		
CHICAGO, IL 60661		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization F 61

Part V	* • • •	Statement o			th Dt \/III			_
		Check if Schedi	ule O contains a respor	nse or note to any II	(A)	(B)	(C)	(D)
					Total revenue	Related or	Unrelated	Revenue
						exempt function	business revenue	excluded from tax under
						revenue	revenue	sections
								512-514
ह ह	1a	Federated cam	paigns 1a					
ani	ь	Membership du	es 1b					
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising eve	ents 1c					
ffs, r A	d	Related organiz	zations 1d					
Gř ila		-						
ns, Sim	е	Government grants	s (contributions) 1e					
tio er S	f	All other contribution similar amounts no	ons, gifts, grants, and 1f					
ibu Fr	q		ons included in lines	-				
Contributio and Other	9	1a-1f \$						
Co an	h	Total. Add lines	s 1a-1f	· · ·				
- Cu				Business Code				
inu.	2a	CERTIFICATION		611600	98,883,640	98,883,640		
же	ь	MEMBERSHIP		541900	57,600,428	57,600,428		
eВ	c	SEMINARS/SYMPOS	SIUM	611430	12,292,553	12,292,553		
ነዣር	d	REP MEMBERSHIP		900099				
æ		GLOBAL EXECUTIVE			3,863,124	3,863,124		
Program Serwde Revenue	e •			900099	1,074,100	1,074,100		
₽Do.	f	An other progra	am service revenue		172,250	172,250		
<u>Ā</u>	g	Total. Add lines	s 2a-2f		173,886,095			
	3		ome (including dividen		12,885,451			12,885,451
	١.		ar amounts) stment of tax-exempt bond	ŀ	12,003,431			12,003,431
	4 5				1,151,512			1,151,512
	3	Royalties	(ı) Real	(II) Personal	1,101,011			1,101,012
	6a	Gross rents	(I) Keal	(II) F ersonar				
		0.000.000						
	ь	Less rental expenses	226,290					
	С	Rental income	-226,290					
	d	or (loss) Net rental incoi	me or (loss)		-226,290			-226,290
			(ı) Securities	(II) O ther				
	7a	Gross amount						
		from sales of assets other	146,115,408	800				
		than inventory						
	ь	Less cost or						
		other basis and sales expenses	132,736,111	5,029				
	С	Gaın or (loss)	13,379,297	-4,229				
	d	Net gain or (los	ss)		13,375,068			13,375,068
e	8a	Gross income f	_					
Other Revenue		events (not inc	luding					
eν		\$ of contributions	reported on line 1c)					
÷		See Part IV, lin						
the			a					
Ö	b		penses b					
	c 9a		(loss) from fundraising (events p -				
	5 4	See Part IV, lin	rom gaming activities ne 19					
		•	а					
	b	Less direct ex	penses b					
			(loss) from gamıng actı	vities				
	10a	Gross sales of						
		returns and allo	owances . a	7,317,950				
	ь	Less costofa	oods sold b	3,458,368				
	c		(loss) from sales of inve		3,859,582	3,859,582		
		Miscellaneous		Business Code				
	11a	DIGITAL ADVI		541800	4,341,104		4,341,104	
	ь	ADVERTISING		541800	1,065,570		1,065,570	
	c	MEMBERSHIP	_	900099	160,488			160,488
	d	All other revenu	_		87,282		74,488	12,794
	e	Total. Add lines		-	·		,	
					5,654,444			
	12	iotal revenue.	See Instructions .		210,585,862	177,745,677	5,481,162	27,359,023

Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must complete all columns	All other organiza	tions must com	plete column (A)	
	Check if Schedule O contains a response or note to any line in t				
	ot include amounts reported on lines 6b, o, 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 domestic organizations and domestic governments See Part IV, line 21	4,701,105			
2	Grants and other assistance to domestic individuals See Part IV, line 22	119,009			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	443,916			
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	3,702,320			
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	30,019,745			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,898,192			
9	Other employee benefits	4,199,830			
10	Payroll taxes	3,210,725			
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,913,874			
С	Accounting	838,334			
d	Lobbying	340,082			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	1,234,390			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	18,894,427			
12	Advertising and promotion	7,667,879			
13	Office expenses	9,969,756			
14	Information technology	5,090,548			
15	Royalties	13,545			
16	Occupancy	2,697,682			
17	Travel	7,412,258			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	13,343,658			
20	Interest	657			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,634,996			
23	Insurance	402,783			
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	23,420,916			
b	MARKET RESEARCH	1,251,641			
c	PURCHASED ONLINE CONTEN	476,079			
d	BAD DEBT	348,850			
e	All other expenses	558,735			
25	Total functional expenses. Add lines 1 through 24e	151,805,932			
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 (2015) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 1 13,291,242 15.008.473 Cash-non-interest-bearing 1 2 Savings and temporary cash investments . . 593,344 2 808,957 3 3 Pledges and grants receivable, net . . . 5,846,855 9,177,859 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other 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) Complete Part II of Schedule L 6 1,131,958 7 2,045,662 7 1,061,318 8 521,490 8 Inventories for sale or use 9 2,951,510 9 2,309,451 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis 39,988,971 Complete Part VI of Schedule D 10a 10b 22,426,879 18,180,969 10c 17,562,092 b Less accumulated depreciation . 314.939.979 343.433.791 11 11 52,470,925 51,526,519 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . 14 2,501,410 14 2,214,019 1,367,780 1.337.095 15 15 Other assets See Part IV, line 11 414,337,290 Total assets.Add lines 1 through 15 (must equal line 34) . . 16 445,945,408 16 18.153.046 **17** 18.518.844 **17** Accounts payable and accrued expenses . . 18 18 Grants payable 37,051,059 19 19 39,773,042 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 1,400,911 25 1,007,999 56,605,016 59.299.885 26 26 **Total liabilities.**Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete **Fund Balances** lines 27 through 29, and lines 33 and 34. 27 357.732.274 386.645.523 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Net Assets or 30 30 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 386,645,523 33 357,732,274 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 414.337.290 34 445.945.408

Dat	t XI Reconcilliation of Net Assets			'	age 1
Fe	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		210,	585,862
2	Total expenses (must equal Part IX, column (A), line 25)	2		151,8	305,932
3	Revenue less expenses Subtract line 2 from line 1	3		58,7	779,930
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		357,7	732,274
5	Net unrealized gains (losses) on investments	5		-29,8	366,68
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			(
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		386,6	545,523
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. ୮</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revia separate basis, consolidated basis, or both	ewed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepbasis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign of the audit, review, or compilation of its financial statements and selection of an independent accountant		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	he	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Additional Data

Software ID: Software Version:

EIN: 23-1887442

Name: PROJECT MANAGEMENT INSTITUTE

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	including grants of \$) (Revenue \$)
KNOWLEDGE AVAI	LABLE TO ORGANIZATIONS A NETWORK, IS DISTRIBUTED M	RCH PAPERS, AND A QUARTERLY TEC ND INDIVIDUALS IN THE FIELD OF P ONTHLY TO OVER 478,000 MEMBERS	ROJECT MANAGEMENT PMI'S	PREMIER
(Code) (Expenses \$	including grants of \$) (Revenue \$)
AROUND THE WOR SUBMIT THEIR INP BODY OF KNOWLED OTHER STANDARD PROGRAM MANAGE THIRD EDITION) C ORGANIZATIONS I	LD HAVE THE OPPORTUNITY TO THE LEAST OF THE STANDER OF THE STANDER OF THE LEAST OF	ELOPER OF PROJECT MANAGEMENT S TO VOLUNTEER FOR THE STANDARDS ANDARDS THE FIFTH EDITION OF A G DING GLOBAL STANDARDS FOR PROJ DARD FOR PORTFOLIO MANAGEMENT THE ORGANIZATIONAL PROJECT MA HENSIVE SET OF STANDARDS AVAIL NAGEMENT PMI ALSO PUBLISHES PR CHNIQUES, OR PROCESSES IDENTIF	S DEVELOPMENT PROCESS AN GUIDE TO THE PROJECT MAN. ECT MANAGEMENT, ALONG W (THIRD EDITION), THE STAN ANAGEMENT MATURITY MODE ABLE FOR INDIVIDUALS AND RACTICE STANDARDS AND PR	ND TO AGEMENT /ITH THREE IDARD FOR EL (OPM3

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$ including grants of \$) (Revenue \$)
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

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Inde	ependent Co		rs			,		I	1	1 1
(A) Name and Title	(B) Average hours per week (list any hours	Position (do not check Reportable compensation person is both an officer from the		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the				
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee		Key employee		Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
			σ.			ě				
AL ZEITOUN	3 50	x						0	0	0
DIRECTOR AT LARGE CATERINA LA TONA	3 50									
DIRECTOR AT LARGE		x						0	0	0
CHERYL J WALKER WAITE	3 50									
DIRECTOR AT LARGE		X						0	0	0
J DAVIDSON FRAME	3 50	х						0	0	0
DIRECTOR AT LARGE		^						Ů,		
JENNIFER THARP	3 50	×						0	0	o
DIRECTOR AT LARGE	3 50									
MARGARETH CARNEIRO		x						0	0	О
DIRECTOR AT LARGE RICHARDO TRIANA	3 50									
DIR AT LARGE, IMMED PAST CHAIR		х						0	0	О
TODD HUTCHISON	3 50									
DIRECTOR AT LARGE		X						0	0	0
VICTORIA S KUMAR	3 50	V							0	0
DIRECTOR AT LARGE		X						0	0	0
WAGNER MAXSEN JOSE DE OLIVERIA	3 50	x						0	0	0
DIRECTOR AT LARGE									-	
WILLIAM SAWLE	3 50	x						0	0	0
DIRECTOR AT LARGE	3 50									
DEENA GORDON PARLA DIRECTOR AT LARGE		х						0	0	0
STEVE DELGROSSO	3 50									
CHAIR				Х				0	0	0
ANTONIO NIETO-RODRIQUEZ VICE CHAIR	3 50			х				0	0	0
MARK DICKSON	3 50			х				0	0	0
SECRETARY/TREASURER										
MARK A LANGLEY	60 00			Х				1,441,906	0	48,286
PRESIDENT AND CEO	5 00 50 00									
JOSEPH J CAHILL VP FINANCE & ADMINISTRATION				Х				85,635	0	15,345
JOHN J DOYLE	50 00									
VP FINANCE & ADMINISTRATION				Х				225,332	0	29,575
BRIAN WEISS	50 00				х			244.075	0	22.125
VP PRACTITIONER MARKETS								244,975	0	33,125
CINDY ANDERSON	50 00				x			207,597	0	23,070
VP BRAND MANAGEMENT	50 00									
ROBERT CRAIG KILLOUGH					х			250,460	0	34,169
VP ORGANIZATION MARKETS TODD KLEINMAN	50 00									
VP INFORMATION TECHNOLOGY					Х			163,456	0	17,944
DAVID GARRETT DIRECTOR DIGITAL PRESENCE	37 50					x		290,061	0	46,997
DOROTHY MCKELVY	50 00					.,		221		22
VP HUMAN RESOURCES	27.50					X		234,955	0	30,814
GINA P JONES	37 50					×		271,683	0	24,569
ADVERSTISING SALES EXECUTIVE	1							<u> </u>		<u> </u>

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				nless ficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-1413C)	related organizations
MICHAEL DEPRISCO VP ACADEMIC & EDUCATIONAL PROGRAM	30 00 					х		202,787	0	40,323
WILLIAM SCARBOROUGH VP LEGAL	50 00					х		251,320	0	43,012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

OMB No 1545-0047

DLN: 93493224004476

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ►Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

If the organization answered "Yes" on 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

Did the filing organization file Form 1120-POL for this year?

If the organization answered "Yes" on 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

	n 501(c)(4), (5), or (6) organizations Complete Part III	Frankrick and Continue and A
	the organization ANAGEMENT INSTITUTE	Employer identification number
		23-1887442
art I-A	Complete if the organization is exempt under section 501(c) or is a s	section 527 organization.
L Prov	ide a description of the organization's direct and indirect political campaign activities in Par	tIV
2		
olitical ex	penditures	
la-		
-		\$
3		*
olunteer	nours	
art I-B	Complete if the organization is exempt under section 501(c)(3).	
	r the amount of any excise tax incurred by the organization under section 4955	d.
Linco	F	₽
2 Ente	r the amount of any excise tax incurred by organization managers under section 4955	\$
If the	e organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
la		
as a corr	ection made?	
	_	
,	No	
	es," describe in Part IV	section FO1(a)(2)
art I-C		
. Ente ⊫-	r the amount directly expended by the filing organization for section 527 exempt function ac	tivities \$
<u>-</u>		
nter the a	mount of the filing organization's funds contributed to other organizations for section 527 ction activities	
cempt fur		
kempt fur ►		
kempt für ┣-		\$
•	l exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line :	\$

	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.							
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-			
r	Paperwork Reduction Act Notice, se	e the instructions for Form 990 or 990)- EZ . C	at No 50084S Schedule C (F	Form 990 or 990-EZ) 2015			

Schedule C (F	Pag	je ∡
Part II-A	Complete if the organization is exempt under section $501(c)(3)$ and filed Form 5768 (election under section $501(h)$).	ī

A Check ▶ 🗔 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ► If the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures	(a) Filing	(b) Affiliated
(The term "expenditures" means amounts paid or incurred.)	organization's totals	group totals

Total lobbying expenditures to influence public opinion (grass roots

1a lobbying)

- $oldsymbol{b}$ Total lobbying expenditures to influence a legislative body (direct lobbying)
- Total lobbying expenditures (add lines 1a and 1b)
- $oldsymbol{d}$ O ther exempt purpose expenditures
- Total exempt purpose expenditures (add lines 1c and 1d)

f Lobbying nontaxable amount. Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-

Subtract line 1f from line 1c If zero or less, enter -0-

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 i reporting section 4911 tax for this year?

Yes 🗆

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total		
2a	Lobbying nontaxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))							
С	Total lobbying expenditures							
d	Grassroots nontaxable amount							
e	Grassroots ceiling amount (150% of line 2d, column (e))							
f	Grassroots lobbying expenditures							

	filed Form 5768 (election under section 501(h)).	(a)	(b)
For each "Yes" i activity.	esponse on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	No	Amount
	ne year, did the filing organization attempt to influence foreign, national, state or local on, including any attempt to influence public opinion on a legislative matter or referendum,	Yes	
	the use of		
olunteers?			
b Paid sta	f or management (include compensation in expenses reported on lines 1c through 1i)?		
c		1	
ledia advertis i	ements?		
d	<u> </u>		
ailings to me	mbers, legislators, or the public?		
e Publicat	ons, or published or broadcast statements?		<u> </u>
f Grants to	oother organizations for lobbying purposes?		
g Direct co	ntact with legislators, their staffs, government officials, or a legislative body?		
h Rallies, o	demonstrations, seminars, conventions, speeches, lectures, or any similar means?		
i) ther activitie	c 2	1	
iner activitie			
j	<u></u>		
otal Add line	s 1c through 1:		
	enter the amount of any tax incurred under section 4912		4
	enter the amount of any tax incurred by organization managers under section 4912		
	ng organization incurred a section 4912 tax, did it file Form 4720 for this year?	'	
Part III-A	Complete if the organization is exempt under section 501(c)(4), section	501(c)(5).	or section
	501(c)(6).		Yes No
1 Were sub	ostantially all (90% or more) dues received nondeductible by members?		1 No
2 Did the o	rganization make only in-house lobbying expenditures of \$2,000 or less?		2 No
3 Did the o	rganization agree to carry over lobbying and political expenditures from the prior year?		3 No
Part III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes."		
ues, assessn	nents and similar amounts from members		
1	57,600,428		
	162(e) nondeductible lobbying and political expenditures (do not include amounts of political s for which the section 527(f) tax was paid).		
a			
urrent year			
2a b	340,082		
arryover from	last year		
2b			
otal			
2c	340,082		
3 Aggrega 4	te amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
oes the organ	sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess ization agree to carryover to the reasonable estimate of nondeductible lobbying and diture next year?		
4	0		
	amount of lobbying and political expenditures (see instructions)	5	340,082
Part IV	Supplemental Information	oun lict\ Dawt	II-A lines 1 and
E HIVIOR TOP O	escriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gr	oup list), Part .	II-M, IIIIeS I and
	ctions), and Part II-B, line 1 Also, complete this part for any additional information		

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DLN: 93493224004476

OMB No 1545-0047

2015

SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

	ment of the Treasury I Revenue Service	Information about Schedule D	FATTACH TO FORM 9! (Form 990) and its instr		s.gov/form990.	Inspection
Na	me of the organi	zation	<u> </u>		Employer ident if	
	DJECT MANAGEMENT				23-1887442	
Pa		izations Maintaining Donor				ts.
		ete if the organization answere				
L	Total numbe	rat end of year	(a) Donor advised fun	ds	(b) Funds and o	ther accounts
2	Aggregate v year)	alue of contributions to (during				
3	Aggregate v	alue of grants from (during year)				
ŀ	Aggregate v	alue at end of year				
5		ation inform all donors and donor a rganization's property, subject to t			nor advised	┌ Yes ┌ No
;	used only for c conferring impe	ration inform all grantees, donors, a haritable purposes and not for the ermissible private benefit?	benefit of the donor or d	onor advisor, or for a	ny other purpose	┌ Yes ┌ No
Pai	rt III Conse	rvation Easements. Comple	ete if the organization	n answered "Yes" o	on Form 990, Pari	t IV, line 7.
•	Preservation Protection	conservation easements held by the on of land for public use (e g , recresof natural habitat	_	Preservation of ar	n historically import certified historic str	
2	Complete lines	2a through 2d if the organization	held a qualified conserv	ation contribution in 1	the form of a conser	vation
		ne last day of the tax year	•			
						he End of the Year
а		f conservation easements			2a	
b	_	restricted by conservation easeme			2b	
С		servation easements on a certified		` '	2c	
d	historic structi	servation easements included in (our properties of the listed in the National Register (control of the listed in the lis			2d	
3		servation easements modified, trai	nsferred, released, extir	nguished, or terminate	ed by the organization	on during the
	tax year ►					
ŀ	Number of stat	es where property subject to cons	ervation easement is lo	cated ►		
5		nization have a written policy regar enforcement of the conservation e		oring, inspection, han		Yes No
5	Staff and volun year	teer hours devoted to monitoring,	inspecting, handling of v	violations, and enforc	ing conservation ea	sements during the
	A mount of expe	 enses incurred in monitoring, inspe	ecting, handling of violat	tions, and enforcing c	onservation easem	ents during the year
7	►\$		g, nananing of viola	, and emoreing c	z ration caseiiii	zaling the year
3		servation easement reported on lii on 170(h)(4)(B)(ii)?	ne 2(d) above satisfy th	e requirements of sec		Yes No
)	balance sheet,	escribe how the organization repor and include, if applicable, the text n's accounting for conservation ea	of the footnote to the o		•	•
ar	t IIII Organ	izations Maintaining Collect ete if the organization answere	tions of Art, Histo		or Other Simila	r Assets.
la	works of art, hi	tion elected, as permitted under SF storical treasures, or other similar e, in Part XIII, the text of the footi	assets held for public e	exhibition, education,	or research in furth	
b	works of art, hi	tion elected, as permitted under SF storical treasures, or other similar e the following amounts relating to	assets held for public e	•		
((i) Revenue inclu	uded on Form 990, Part VIII, line 1	1		► \$	
		ed in Form 990, Part X			<u></u>	
<u> </u>	If the organizat	tion received or held works of art, h nts required to be reported under S				vide the
	=	•	•			

Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Par	Organizations Maintaining (continued)	Collections of Ar	t, His	stori	cal Tr	easures,	or Ot	her Similar As	sets
3	Using the organization's acquisition, according to the collection items (check all that apply)	ession, and other reco	rds, cl	heck a	iny of th	ne following	that ar	e a significant use	of its
а	Public exhibition		d	Γ	Loan o	rexchange	progra	ms	
b	Scholarly research		е	Γ	Other				
c	Preservation for future generations								
4	Provide a description of the organization'	s collections and expl	ain ho	w thev	, furthei	r the organiz	ation's	: exemnt nurnose i	n
•	Part XIII	·				_			
5	During the year, did the organization solid assets to be sold to raise funds rather th								□ No
Ра	rt IV Escrow and Custodial Arra		s part	or the	organiz	ation's cone	CLIOII	, 103	, 140
	Complete if the organization a Part X, line 21.		Form	990,	Part I\	V, line 9, o	r repo	orted an amount	on Form 990,
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?	todian or other interm	nediary	/ for co	ontribut	cions or othe	rasse	ts not	┌ No
b	If "Yes," explain the arrangement in Pa	art XIII and complete	the fo	llowing	g table			Amo	unt
c	Beginning balance	·		•			1c		
d	Additions during the year						1d		
e	Distributions during the year						1e		
f	Ending balance						1f		
2a	Did the organization include an amount o	n Form 990 Part X Ju	ne 21	fores	crowor	r custodial a	ccount	liability? F Vee	□ No
	Dia the organization menade an amount o		,	101 05	0101101	custourur u	cccam	masine, , 105	,
b	If "Yes," explain the arrangement in Part								Г
Pa	rt V Endowment Funds. Comple							•	
_	Deginning of year halance	(a)Current year	(b) Pi	nor yea	r b	(c) I wo years	раск (d)Three years back	(e)Four years back
.a	Beginning of year balance								
b	Contributions								
c	Net investment earnings, gains, and losses								
d	Grants or scholarships								
e	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the	current vear end balar	nce (lır	ne 1a.	columr	n (a)) held as		<u>l</u>	
а	Board designated or quasi-endowment	•	•	5,		. ,,			
ь	Permanent endowment -								
c									
	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c	should equal 100%							
За	Are there endowment funds not in the pos		zation	that a	re held	and adminis	tered	for the	
_	organization by	occorrence and organii	Lucion	ciiac a		ana aannin	70,04		Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
	If "Yes" on 3a(II), are the related organiz							<u>3</u> 1	
1	Describe in Part XIII the intended uses of		ndowm	nent fu	inds				
Pa	Tt VI Land, Buildings, and Equip Complete if the organization a		orm 9	90 P	art IV	line 11a 9	See Fo	orm 990 Part X	line 10
	Description of property	movered res to re	Co	(a	her basis	(b)	er basıs	Accumulated (c) depreciation	(d)Book value
La	Land					<u> </u>	792,689		792,68
	Buildings						,		,,,,,,
						3,9	928,185	1,562,086	2,366,09
c	Leasehold improvements					6,	776,039	5,443,604	1,332,43
d	Equipment					5,4	185,445	2,608,059	2,877,38
е	Other					23,0	006,613	12,813,130	10,193,48

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

17,562,092

See Form 990, Part X, line 12. (a) Description of security or categor (including name of security)	у	(b) Book value	(c)Method of valuation Cost or end-of-year market valu
(1)Financial derivatives			Cost of elia-of-year market valu
(2)Closely-held equity interests (3)Other		4,148,52	25 C
(A) ISHARES CORE S&P ETF		39,305,02	.6 F
(B) PIMCO LOW DURATION		8,072,96	58 F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	*	51,526,51	.9
Part VIII Investments—Program Related. Complete if the organization answere	d 'Yes' on Form 9		
(a) Description of investment	.u 163 0111011113	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
Part IX Other Assets. Complete if the organizat (a) Description		n Form 990, Part IV, line	11d See Form 990, Part X, line 15 (b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15)		<u> </u>
Part X Other Liabilities. Complete if the org			
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Book val	ue	
Federal income taxes			
DEFERRED RENT LIABILITY	98!	5,820	
DEFERRED TAX LIABILITY	2:	2,179	

3,354,774

151,805,932

4c

5

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per F	Return
1	Total revenue, gains, and other support per audited financial statements	1	186,416,607
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a -29,866,681		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	-24,342,790
3	Subtract line 2e from line 1	3	210,759,397
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	-173,535
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	210,585,862
Part	Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s pei	Return.
1	Total expenses and losses per audited financial statements	1	157,786,987
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	9,335,829
3	Subtract line 2e from line 1	3	148,451,158
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
			1

Part XIII Supplemental Information

5

ADJUSTMENTS

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Return Reference	Explanation
Return Reference PART X, LINE 2	THE INSTITUTE IS EXEMPT FROM U S FEDERAL INCOME TAXES UNDER SECTION 501(C)(6) INTERNAL REVENUE CODE AND ALSO EXEMPT FROM PENNSYLVANIA INCOME TAXES REVENUE GENERATED FROM THE INSTITUTE'S ADVERTISING AND SALES OF MEMBERSHIP MAILING LISTS ARE NOT CONSIDERED PROGRAM ACTIVITY REVENUE BY THE INTERNAL REVENUE SERVICE THIS TYPE OF INCOME 1S CLASSIFIED AS UNRELATED BUSINESS INCOME AND MAY BE SUBJECT TO INCOME TAX FOR THE YEARS ENDED 31 DECEMBER 2015 AND 2014, THERE WAS NO UNRELATED BUSINESS INCOME TAX DUE MANAGEMENT EVALUATED THE INSTITUTE STAX POSITIONS AND CONCLUDED THAT THE INSTITUTE HAIL TAKEN NO UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS CONSEQUENTLY, NO ACCRUAL FOR INTEREST AND PENALTIES WAS DEEMED NECESSARY FOR THE YEARS ENDED 31 DECEMBER 2015 AND 2014 THE INSTITUTE IS NO LONGER SUBJECT TO INCOME TAX EXAMINATION BY THE U S FEDERAL OR STATE TAX AUTHORITIES FOR YEARS BEFORE 2012 THE INSTITUTE'S FOR-PROFIT SUBSIDIARIES THAY ARE SUBJECT TO INCOME TAXES, INCLUDE INCOME TAX EXPENSE AND DEFERRED TAX ASSETS AND LIABILITIES WHICH ARE CALCULATED USING MANAGEMENT'S BEST ASSESSMENT OF ESTIMATED FUTURE TAXES TO BE PAID AS PART OF THE PROCESS OF PREPARING THE CONSOLIDATED FINANCIAL STATEMENTS, THE INSTITUTE IS REQUIRED TO ESTIMATE INCOME TAXES IN EACH OF THE TAX JURISDICTIONS IN WHICH IT OPERATES THIS PROCESS INVOLVES ESTIMATING THE ACTUAL CURRENT TAX OBLIGATIONS TOGETHER WITH ASSESSING TEMPORARY DIFFERENCES RESULTING FROM DIFFERENCES RESULTING FROM DIFFERENCES RESULTING FROM DIFFERENCES RESULTING FROM DIFFERENCES FOR SESSULT IN DEFERRED TAX AND ACCOUNTING PURPOSES THESE TEMPORARY DIFFERENCES RESULT IN DEFERRED TAX AND ACCOUNTING PURPOSES THESE TEMPORARY DIFFERENCES RESULT IN DEFERRED TAX AND ACCOUNTING PURPOSES THESE TEMPORARY DIFFERENCES RESULT IN DEFERRED TAX AND ACCOUNTING PURPOSES THESE TEMPORARY DIFFERENCES RESULT IN DEFERRED TAX AND ACCOUNTING PURPOSES THESE TEMPORARY DIFFERENCES RESULT IN DEFERRED TAX AND ACCOUNTING PURPOSES THESE TEMPORARY DIFFERENCES FOR THE LIKELIHOOD THAT THE DEFERE
	THOSE SUBSIDIARY EARNINGS SHOULD THE INSTITUTE DECIDE TO REPATRIATE THE FOREIGN EARNINGS, THE INSTITUTE WOULD NEED TO ADJUST THE INCOME TAX PROVISION IN THE PERIOD THAT IT WAS DETERMINED THAT THE EARNINGS WILL NO LONGER BE INDEFINITELY INVESTED OUTSIDE THE UNITED STATES
PART XI, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 3,458,368 INCOME FROM CONSOLIDATED AFFILIATES (PMI EUROPELL LTD AND SUBSIDIARIES) 1,250,030 INCOME FROM CONSOLIDATED AFFILIATE (PMI EDUCATIONAL FOUNDATION) 815,493
PART XI, LINE 4B - OTHER ADJUSTMENTS	RENTAL EXPENSES -226,290 SERVICE FEE REVENUE CONSOLIDATED SUBSIDIARIES 37,786 INTEREST INCOME FROM CONSOLIDATED SUBSIDIARIES 10,339 ACTIVITY RELATED TO CONSOLIDATED SUBSIDIARIES 4,630
PART XII, LINE 2D - OTHER ADJUSTMENTS	RENTAL EXPENSES 226,290 COST OF GOODS SOLD 3,458,368 EXPENSES FROM CONSOLIDATED AFFILIATES (PMI EUROPE LTD AND SUBSIDIARIES) 2,506,754 EXPENSE FROM CONSOLIDATED AFFILIATE (PMI EDUCATIONAL FOUNDATION) 3,144,417
PART XII, LINE 4B - OTHER ADJUSTMENTS	EXPENSE TO CONSOLIDATED AFFILIATE (PMI EDUCATIONAL FOUNDATION) 3,167,210

ACTIVITY RELATED TO CONSOLIDATED SUBSIDIARIES 187,564

Part XIII Supplemental Information (continued)								
Return Reference	Explanation							

Schedule D (Form 990) 2015

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As Filed Data -

DLN: 93493224004476

SCHEDULE F (Form 990)

Department of the Treasury

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.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Internal Revenue Service					Inspection
Name of the organization PROJECT MANAGEMENT INSTITUT				Employer ident	ification number
				23-1887442	
Part I General Information Complete if the organ				14b.	
1 For grantmakers. Does the	organization m	naıntaın record	s to substantiate the	amount of its grants	
and other assistance, the gr	antees' eligibil	ity for the grar	nts or assistance, and	the selection criteria	
used to award the grants or	assistance? .				✓ Yes
2 For grantmakers. Describe assistance outside the Unite		ganızatıon's p	rocedures for monitori	ng the use of its grant	ts and other
3 Activites per Region (The follow	wing Part I, line 3	3 table can be d	uplicated if additional sp	ace is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	9	39			10,159,898
b Total from continuation sheets to Part I	6	10			18,456,679
c Totals (add lines 3a and 3b)	15	49			28,616,577

Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who 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) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

1

14

Schedule F (Form 990) 2015 Page **3** 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 Part III can be duplicated if additional space is needed (c) Number of (e) Manner of cash (d) A mount of (a) Type of grant or (b) Region (f) A mount of (g) Description (h) Method of assistance recipients cash grant disbursement non-cash of non-cash valuation (book, FMV, assistance assistance appraisal, other) (1) EDUCATIONAL - FOR CENTRAL AMERICA 14 21,000 CHECK N/A INDIVIDUALS TO ANDTHE ATTEND THE PMI CARIBBEAN LEADERSHIP INSTITUTE MEETING AND TO SUPPORT THE PMI REGIONAL MENTOR PROGRAM AND REGIONAL MEETINGS 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 REGIONAL MEETING SUPPORT PROVIDES FINANCIAL SUPPORT TO PMI CHAPTERS TO CONDUCT REGIONAL **MEETINGS THAT** EXPAND GLOBAL KNOWLEDGE SHARING AT THE LOCAL LEVEL THROUGH LEADERSHIP INSTITUTE INVOLVEMENT WHILE MAINTAINING THE INDIVIDUALITY OF THE REGION (2) EDUCATIONAL - FOR EAST ASIA AND THE 28,000 CHECK 19 N/A N/A INDIVIDUALS TO PACIFIC ATTEND THE PMI LEADERSHIP INSTITUTE MEETING AND TO SUPPORT THE REGIONAL MENTOR PROGRAM AND REGIONAL MEETINGS 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 REGIONAL MEETING SUPPORT PROVIDES FINANCIAL SUPPORT TO PMI CHAPTERS TO CONDUCT REGIONAL MEETINGS THAT EXPAND GLOBAL KNOWLEDGE SHARING AT THE LOCAL LEVEL THROUGH LEADERSHIP INSTITUTE INVOLVEMENT WHILE MAINTAINING THE INDIVIDUALITY OF THE REGION (3) EDUCATIONAL - FOR EUROPE 36,000 CHECK 28 N/A N/A **INDIVIDUALS TO** ATTEND THE PMI LEADERSHIP INSTITUTE MEETING AND TO SUPPORT THE REGIONAL MENTOR PROGRAM AND REGIONAL MEETINGS 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 REGIONAL MEETING SUPPORT PROVIDES FINANCIAL SUPPORT TO PMI CHAPTERS TO CONDUCT REGIONAL MEETINGS THAT EXPAND GLOBAL KNOWLEDGE SHARING AT THE LOCAL LEVEL THROUGH LEADERSHIP INSTITUTE INVOLVEMENT WHILE MAINTAINING THE INDIVIDUALITY OF THE REGION (4) EDUCATIONAL - FOR MIDDLE EAST & 14,000 CHECK N/A **INDIVIDUALS TO** NORTH AFRICA 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 ENHANCEMENT (5) EDUCATIONAL - FOR RUSSIA & THE 7,000 CHECK 5 N/A N/A **INDIVIDUALS TO** NEWLY ATTEND THE PMI INDEPENDENT LEADERSHIP STATES INSTITUTE MEETING AND TO SUPPORT THE REGIONAL MENTOR PROGRAM AND REGIONAL MEETINGS THE PMI LEADERSHIP INSTITUTE MEETING **PROVIDES AN** INVALUABLE OPPORTUNITY TO ACCESS LEADERSHIP AND PROFESSIONAL DEVELOPMENT, NETWORKING OPPORTUNITIES AND ENHANCEMENT THE PMI REGIONAL MENTOR ROGRAM FACILITATES THE **DEVELOPMENT AND** ENHANCEMENT OF **PROJECT** MANAGEMENT REGIONAL MEETING SUPPORT PROVIDES FINANCIAL SUPPORT TO PMI CHAPTERS TO CONDUCT REGIONAL MEETINGS THAT EXPAND GLOBAL KNOWLEDGE SHARING AT THE LOCAL LEVEL THROUGH LEADERSHIP INSTITUTE INVOLVEMENT WHILE MAINTAINING THE INDIVIDUALITY OF THE REGION (6) EDUCATIONAL - FOR SUB-SAHARAN 20,000 CHECK 15 N/A N/A INDIVIDUALS TO AFRICA ATTEND THE PMI LEADERSHIP INSTITUTE MEETING AND TO SUPPORT THE REGIONAL MENTOR PROGRAM AND REGIONAL MEETINGS 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 REGIONAL MEETING SUPPORT PROVIDES FINANCIAL SUPPORT TO PMI CHAPTERS TO CONDUCT REGIONAL MEETINGS THAT EXPAND GLOBAL KNOWLEDGE SHARING AT THE LOCAL LEVEL THROUGH LEADERSHIP INSTITUTE INVOLVEMENT WHILE MAINTAINING THE INDIVIDUALITY OF THE REGION 16,348 CHECK (7) EDUCATIONAL - FOR NORTH AMERICA 10 N/A N/A INDIVIDUALS TO ATTEND THE PMI LEADERSHIP INSTITUTE MEETING AND TO SUPPORT THE REGIONAL MENTOR PROGRAM AND REGIONAL MEETINGS 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 REGIONAL MEETING SUPPORT PROVIDES FINANCIAL SUPPORT TO PMI CHAPTERS TO CONDUCT REGIONAL MEETINGS THAT **EXPAND GLOBAL** KNOWLEDGE SHARING AT THE LOCAL LEVEL THROUGH LEADERSHIP INSTITUTE INVOLVEMENT WHILE MAINTAINING THE INDIVIDUALITY OF THE REGION (8) EDUCATIONAL - FOR SOUTH AMERICA 52 79,000 CHECK N/A N/A INDIVIDUALS TO ATTEND THE PMI LEADERSHIP INSTITUTE MEETING AND TO SUPPORT THE PMI REGIONAL MENTOR PROGRAM AND REGIONAL MEETINGS 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 REGIONAL MEETING SUPPORT PROVIDES FINANCIAL SUPPORT TO PMI CHAPTERS TO CONDUCT REGIONAL MEETINGS THAT EXPAND GLOBAL KNOWLEDGE SHARING AT THE LOCAL LEVEL THROUGH LEADERSHIP INSTITUTE INVOLVEMENT WHILE MAINTAINING THE INDIVIDUALITY OF THE REGION (9) EDUCATIONAL - FOR SOUTH ASIA 17,968 CHECK 9 N/A N/A INDIVIDUALS TO ATTEND THE PMI LEADERSHIP INSTITUTE MEETING THE PMI LEADERSHIP INSTITUTE MEETING PROVIDES AN INVALIJABLE OPPORTUNITY TO ACCESS LEADERSHIP AND PROFESSIONAL DEVELOPMENT, NETWORKING OPPORTUNITIES AND ENHANCEMENT (10) (11) (12) (13) (14) (15) (16)

Schedule F (Form 990) 2015

(17)

(18)

Part IV Foreign Forms

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 Yes Νo Instructions for Form 926) 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 √ No Yes Forms 3520 and 3520-A; do not file with Form 990) 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 $\overline{\mathbf{v}}$ Yes Νo Corporations. (see Instructions for Form 5471) 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 Yes Νo 8621) 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. Yes Νo (see Instructions for Form 8865) 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; do not file with Form 990) Yes Νo

Schedule F (Form 990) 2015

Schedule F (Form 990) 2015 Page **5**

Part V

Supplemental Information

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 (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	PMI HAS A PROJECT MONITORING SYSTEM IN PLACE TO MONITOR THE USE OF GRANT FUNDS THE GUIDEL INES 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

Additional Data

Software ID: Software Version:

EIN: 23-1887442

Name: PROJECT MANAGEMENT INSTITUTE

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	3	12		CHAPTER DEVELOPMENT AND OUTREACH	2,201,914
EAST ASIA AND THE PACIFIC	4	18		CHAPTER DEVELOPMENT AND OUTREACH	3,066,919
MIDDLE EAST AND NORTH AFRICA	1	4		CHAPTER DEVELOPMENT AND OUTREACH	484,027

Form 990 Schedule F	<u>Part I - Activi</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE	1	5	PROGRAM SERVICE	GLOBAL CONGRESS EMEA & LEADERSHIP INSTITUTE MEETING	1,751,169
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	LEADERSHIP INSTITUTE MEETING	199,150
EUROPE	0	0	PROGRAM SERVICES	CHAPTER DEVELOPMENT AND OUTREACH	958,973

Form 990 Schedule F	Part I - Activi	<u>ties Outside T</u>	he United States	_	
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	PROGRAM SERVICES	PROGRAM SUPPORT AND OUTREACH	869,654
SOUTH AMERICA	0	0	PROGRAM SERVICES	CHAPTER DEVELOPMENT AND OUTREACH	628,092
EUROPE	0	0	PROGRAM SERVICES	OUTREACH AND ADVOCACY	1,639,359

Form 990 Schedule F Part I - Activities Outside The United States							
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
EUROPE	1	1	PROGRAM SERVICES	MARKETING	1,123,178		
EUROPE	1	1	PROGRAM SERVICES	LICENSING FEE	86,390		
CENTRAL AMERICA AND THE CARIBBEAN	0	0		CERTIFICATION EXAM DELIVERY	219,754		

Form 990 Schedule F Part I - Activities Outside The United States							
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
EAST ASIA AND THE PACIFIC	0	0		CERTIFICATION EXAM DELIVERY	6,308,547		
EUROPE	0	0	l	CERTIFICATION EXAM DELIVERY	2,842,759		
MIDDLE EAST AND NORTH AFRICA	0	0	PROGRAM SERVICES	CERTIFICATION EXAM DELIVERY	795,109		

Form 990 Schedule F Part I - Activities Outside The United States							
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
RUSSIA & THE NEWLY INDEPENDENT STATES	0	0		CERTIFICATION EXAM DELIVERY	92,966		
NORTH AMERICA	0	0		CERTIFICATION EXAM DELIVERY	925,060		
SOUTH AMERICA	0	0		CERTIFICATION EXAM DELIVERY	768,346		

Form 990 Schedule F	Form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region							
SOUTH ASIA	0	0		CERTIFICATION EXAM DELIVERY	945,890							
SUB-SAHARAN AFRICA	0	0		CERTIFICATION EXAM DELIVERY	451,195							
EAST ASIA & THE PACIFIC	0	0		CERTIFICATION EXAM DEVELOPMENT	206,617							

Form 990 Schedule F I	Form 990 Schedule F Part I - Activities Outside The United States											
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region							
EUROPE	0	0	PROGRAM SERVICES	CERTIFICATION EXAM DEVELOPMENT	344,665							
CENTRAL AMERICA AND THE CARIBBEAN	0	0	PRO GRAM SERVICES	CERTIFICATION EXAM DEVELOPMENT	78,142							
NORTH AMERICA	1	1	PROGRAM SERVICES	BUSINESS & GOVERNMENT OUTREACH	301,328							

Form 990	Schedule F	<u> Part I - Activi</u>	<u>ties Outside T</u>	he United States		
(a)) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE		1	1	PROGRAM SERVICES	GLOBAL EXECUTIVE COUNCIL MEETING	299,014
EUROPE		0	0	PROGRAM SERVICE	CERTIFICATION EXAM DEVELOPMENT	143,670
EUROPE		1	1	PROGRAM SERVICE	SEMINARS WORLD	381,134

Form 990 Schedule	F Part I - Activit	<u>ies Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	PRO GRAM SERVICE	SEMINARS WORLD	99,762
EUROPE	0	0	PROGRAM SERVICE	ACADEMIC WORKSHOP	6,992
NORTH AMERICA	0	0	PROGRAM SERVICE	ACADEMIC WORKSHOP	12,951

Form 990 Schedule F	<u>Part I - Activi</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE	0	0	PROGRAM SERVICE	CERTIFICATION EXAM DEVELOPMENT	72,805
EUROPE	1	5	PROGRAM SERVICE	CHAPTER DEVELOPMENT & OUTREACH	311,046

, Form 990 Scheau	orm 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)			
	1	EAST ASIA & THE PACIFIC	RESEARCH GRANT	20,000	CHECK		N/A	N/A			
		EUROPE	RESEARCH GRANT	16,667	CHECK		N/A	N/A			
		EUROPE	RESEARCH GRANT	8,645	CHECK		N/A	N/A			
		EUROPE	RESEARCH GRANT	16,667	CHECK		N/A	N/A			

Form 990 Scheau	ile F Part II	- Grants or Entitie	es Outside i ne Un	ited States				
(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE	RESEARCH GRANT	16,666	CHECK		N/A	N/A
		EUROPE	RESEARCH GRANT	16,666	CHECK		N/A	N/A
			CHAPTER DEVELOPMENT	22,043	CHECK		N/A	N/A
			CHAPTER DEVELOPMENT	20,580	CHECK		N/A	N/A

Form 990 Schedule F Part II - Grants or Entities Outside The United States										
(a) Name of organization	(b) IRS code section and EIN(if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuatıon (book, FMV, appraısal, other)		
		EUROPE	RESEARCH GRANT	33,333	CHECK	1		N/A		
		EUROPE	RESEARCH GRANT	16,667	CHECK			N/A		
		EUROPE	RESEARCH GRANT	16,667	CHECK			N/A		

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Schedule I (Form 990)

Department of the

Treasury

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

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

Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493224004476

2015

Open to Public Inspection

ame of the organization						Employer identific	cation number
ROJECT MANAGEMENT INST						23-1887442	
Does the organization main the selection criteria used Describe in Part IV the org Part II Grants and Other As	ntain records to subs to award the grants ganization's procedur ssistance to Domesti	tantiate the amount of or assistance? res for monitoring the u c Organizations and Do		United States Complete if the organi		,	Yes Ce 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PMI EDUCATIONAL (1) FOUNDATION 14 CAMPUS BOULEVARD NEWTOWN SQUARE, PA 19073	23-2630701	501(C)(3)	4,363,643	256,688	FMV	IN-KIND CONTRIBUTIONS - FACILITIES	TO PROMOTE PROJECT MANAGEMENT PRINCIPLES GLOBALLY TO COMMUNITIES INCLUDING STUDENTS, NON- PROFIT ORGANIZATIONS AND SOCIETY AT LARGE
MASSACHUSETTS (2) MARITIME ACADEMY 101 ACADEMY DRIVE BUZZARDS BAY,MA 02532	04-6002284	501(C)(3)	25,400		N/A	N/A	GLOBAL RESEARCH GRANT
(3) PDMA FOUNDATION 330 N WEBASH AVENUE CHICAGO,IL 60611	22-3761455	501(C)(3)	10,000		N/A	N/A	GLOBAL RESEARCH GRANT
PORTLAND STATE (4) UNIVERSITY PO BOX 751 PORTLAND,OR 97207	93-6001786	501(C)(3)	15,727		N/A	N/A	GLOBAL RESEARCH GRANT
WOUNDED WARRIOR (5) PROJECT 4899 BELFORT ROAD JACKSONVILLE,FL 32256	20-2370934	501(C)(3)	16,500		N/A	N/A	TO HELP INJURED SOLIDERS RETURNING HOME FROM COMBAT
(6) UNIVERSITY OF HOUSTON - CLEAR LAKE 2700 BAY AREA BLVD HOUSTON,TX 77058	e organization maintain records to substantiate the amount of the graction criteria used to award the grants or assistance? e in Part IV the organization's procedures for monitoring the use of grants and Other Assistance to Domestic Organizations and Domestic at received more than \$5,000 Part II can be duplicated if additional and address of anization vernment Column	8,495		N/A	N/A	GLOBAL RESEARCH GRANT	

0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on 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) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) 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 ENHANCEMENT	37	39,009		N/A	N/A
(2) EDUCATIONAL - PROVIDE FINANCIAL SUPPORT TO PMI CHAPTERS TO CONDUCT REGIONAL MEETINGS THAT EXPAND GLOBAL KNOWLEDGE SHARING AT THE LOCAL LEVEL THROUGH LEADERSHIP INSTITUTE INVOLVEMENT WHILE MAINTAINING THE INDIVIDUALITY OF THE REGION	40	80,000		N/A	N/A
Dart TV Supplemental Informat	Droude the infer	mation required in D	art I lua 2 Dart III	column (b) and any other	ur additional information

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
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

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DLN: 93493224004476

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

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

► Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

2015 Open to Public

Inspection

Name of the organization PROJECT MANAGEMENT INSTITUTE **Employer identification number**

23-1887442

Pa	rt I Questions Regarding Compensatio	n	1			
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	▼ Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the o reimbursement or provision of all of the expenses d			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exe		- · · · · · · · · · · · · · · · · · · ·	2	Yes	
3	Indicate which, if any, of the following the filing orga organization's CEO/Executive Director Check all t used by a related organization to establish compen	hat apply				
	Compensation committee	굣	Written employment contract			
	Independent compensation consultant	<u> </u>	Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990 or a related organization	, Part VI	I, Section A, line ${ t 1a}$ with respect to the filing organization			
а	Receive a severance payment or change-of-control	l paymen	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-b	pased co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and p	rovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiza	ations mu	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section of compensation contingent on the revenues of	A, line 1a	a, did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a	a, did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section Apayments not described in lines 5 and 6? If "Yes,"			7		
8	Were any amounts reported on Form 990, Part VII, subject to the initial contract exception described in Part III			8		
9	If "Yes" on line 8, did the organization also follow the section 53 4958-6(c)?	he rebutt	able presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported on 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

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2015

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Tovide the information, explanation	, or descriptions required for railty, mies 1a, 1b, 5, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 6, and for railty and required fins part for any additional information
Return Reference	Explanation
PART I, LINE 1A	LISTED PERSONS WHO INCUR TRAVEL EXPENSES ARE RESPONSIBLE FOR COMPLYING WITH THE TRAVEL POLICY ALL INDIVIDUALS SUBMITTING EXPENSES NOT IN COMPLIANCE WITH THIS POLICY RISK DELAY IN PAYMENT AND/OR PARTIAL OR FORFEITED REIMBURSEMENT REGIONAL AIR TRAVEL WILL BE IN COACH CLASS INTERNATIONAL AIR TRAVEL THAT IS GREATER THAN 8 HOURS TO THE DESTINATION (NOT CALCULATING LAYOVERS INTO THIS NUMBER, BUT POINT TO POINT TRAVEL), WILL BE IN BUSINESS CLASS FOR INTERNATIONAL TRAVEL UNDER 8 HOURS, PMI WILL ABSORB THE DIFFERENCE BETWEEN THE LOWEST APPLICABLE FARE AND THE NEXT FARE NEEDED TO UPGRADE TO A HIGHER CLASS OF SERVICE IF THE AMOUNT IS NOMINAL SHOULD A TRAVELER DESIRE FIRST CLASS, ANY ADDITIONAL EXPENSES FROM THIS TYPE OF REQUEST WILL BE PAID BY THE TRAVELER AND MUST BE PAID TO PMI AT THE TIME OF CONFIRMATION A LIST OF ATTENDEES AUTHORIZED TO TRAVEL ON PMI-RELATED BUSINESS MUST BE GIVEN TO PMI'S IN-HOUSE TRAVEL CONSULTANT IN ADVANCE BY THE MEETING HOST TRAVEL FOR COMPANIONS THE PRESIDENT AND CEO'S EMPLOYMENT AGREEMENT INCLUDES REIMBURSEMENT FOR LIMITED, QUALIFIED SPOUSAL TRAVEL THESE BENEFITS ARE INCLUDED AS COMPENSATION AND REPORTED BY THE ORGANIZATION ON FORM W2 HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES PMI REQUIRES THAT EXECUTIVES SUBMIT THEIR EXPENSE WITH DOCUMENTATION OF A RECEIPT SHOWING PAYMENT FOR A WELLNESS BENEFIT (EX. GYM MEMBERSHIP, WEIGHT LOSS PROGRAM, PERSONAL TRAINER, ETC.) PMI RETAINS SUPPORTING DOCUMENTATION FOR THESE FEES AND ALL BENEFITS ARE INCLUDED IN THE RESPECTIVE EMPLOYEE'S W-2 WAGES
PART I, LINE 4B	MARK LANGLEY, PRESIDENT & CEO - \$562,500 - 457F DISTRIBUTION REPRESENTING COMPENSATION UNDER PLAN FOR 2014 AND 2015

Schedule J (Form 990) 2015

Software ID: Software Version:

EIN: 23-1887442

Name: PROJECT MANAGEMENT INSTITUTE

(A) Name and Title					(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1MARK A LANGLEY PRESIDENT AND CEO	(1)	642,833	201,825	597,248	18,550	29,736	1,490,192	276,413
	(11)			0	0	0	0	
1JOHN J DOYLE VP FINANCE &	(1)	206,737	17,092	1,503	11,810	17,765	254,907	0
ADMINISTRATION	(11)	0			- 0	- - 0		
2BRIAN WEISS VP PRACTITIONER MARKETS	(1)	225,033	19,467	475	17,535	15,590	278,100	0
	(11)		-			-		
3CINDY ANDERSON VP BRAND MANAGEMENT	(1)	186,993	18,250	1	11,849	11,221	230,667	0
	(11)	0			- 0	- 0		C
4ROBERT CRAIG KILLOUGH VP ORGANIZATION MARKETS	(1)	227,205	19,467	3,788	13,165	21,004	284,629	0
	(11)	-	1		-	-		, , ,
5TODD KLEINMAN VP INFORMATION	(1)	161,538	0	1,918	10,722	7,222	181,400	0
TECHNOLOGY	(11)	0		0	- 0			
6DAVID GARRETT DIRECTOR DIGITAL	(1)	179,054	110,150	857	18,550	28,447	337,058	0
PRESENCE	(11)					- - 0	_	(
7DOROTHY MCKELVY VP HUMAN RESOURCES	(1)	213,835	18,184	2,936	14,391	16,423	265,769	C
	(11)		-		0	0	- 0	
8GINA P JONES ADVERSTISING SALES	(1)	251,750	19,566	367	18,550	6,019	296,252	C
EXECUTIVE	(11)			_!	-	_ _ 0	_	
9MICHAEL DEPRISCO VP ACADEMIC &	(1)	182,469	18,250	2,068	14,422	25,901	243,110	C
EDUCATIONAL PROGRAM	(11)				-	-		0
10WILLIAM SCARBOROUGH VP LEGAL	(1)	226,386	19,647	5,287	14,690	28,322	294,332	(
	(11)				-	-		

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DLN: 93493224004476

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Supplemental Information to Form 990 or 990-EZ

► 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.

Name of the organization **Employer identification number** PROJECT MANAGEMENT INSTITUTE 23-1887442

Return Reference	Explanation
FORM 990, PART I,	8,100 DEDICATED VOLUNTEERS SUPPORT PMI GLOBALLY THROUGH THEIR ACTIVITIES AS CHAPTER LEADERS, AS
LINE 6	BOARD MEMBERS OR ON BOARD SUPPORT COMMITTEES, ON MEMBER ADVISORY GROUPS, THROUGH
DESCRIPTION OF	CONTRIBUTIONS TO EXAM QUESTION DEVELOPMENT AND THE DEVELOPMENT OF PROFESSIONAL STANDARDS THAT
ESTIMATE	SHAPE THE FUTURE OF THE PROFESSION, BY WRITING AND PUBLISHING WHITE PAPERS AND REVIEWING PROJECT
PROCESS	MANAGEMENT MANUALS, BOOKS AND PERIODICALS, OR OTHER IMPORTANT WORK PMI UTILIZES ITS VOLUNTEER
	RELATIONSHIP MANAGEMENT SYSTEM (VRMS) AS A RESOURCE FOR ITS MEMBERS TO SEARCH FOR VOLUNTEER
	OPPORTUNITIES THROUGHOUT THE WORLD, AND USES THIS SYSTEM TO TRACK VOLUNTEER ACTIVITIES AND
	STATISTICS, INCLUDING THE NUMBER OF ACTIVE VOLUNTEERS

Return Reference	Explanation
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 BY LAWS 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

PART VI, SECTION A, LINE 7A RIGHTS AI HAS BEEN EMPLOY M MEMBER C ACCREDIT MEMBERS INSTITUTE GRANTED LIMITED PF SHALL NO	TUTE MAINTAINS THE FOLLOWING CLASSES AND QUALIFICATIONS OF MEMBERSHIP, EACH CLASS WITH THE EREINAFTER PROVIDED 1 MEMBER - REGULAR ANY PERSON WHO IS INTERESTED IN, OR ENGAGED IN, THE I, TEACHING, OR OTHER APPLICATION OF PROJECT MANAGEMENT, INCLUDING RESEARCH CONCERNING PROJECT MENT, MAY QUALIFY AS A REGULAR MEMBER OF THE INSTITUTE REGULAR MEMBERS SHALL HAVE VOTING ND MAY HOLD ANY ELECTED OR APPOINTED OFFICE IN THE INSTITUTE 2 MEMBER - RETIREE ANY PERSON WHO I A PMI MEMBER IN GOOD STANDING FOR FIVE (5) CONSECUTIVE YEARS, AND WHO HAS RETIRED FROM ACTIVE EINT, QUALIFIES FOR PMI RETIREE MEMBERSHIP RETIREE MEMBERS SHALL HAVE ALL RIGHTS OF THE REGULAR CLASS 3 MEMBER - STUDENT ANY PERSON CURRENTLY REGISTERED IN A DEGREE GRANTING PROGRAM AT AN ED, OR GLOBALLY EQUIVALENT, COLLEGE/UNIVERSITY, MAY QUALIFY FOR PMI STUDENT MEMBERSHIP STUDENT SHALL NOT BE ENTITLED TO EXERCISE ANY VOTING RIGHTS, AND SHALL NOT HOLD ANY ELECTED OFFICE IN THE , EXCEPT THAT STUDENT MEMBERS MAY HOLD OFFICE AND VOTE WITHIN A PMI COMPONENT, AS MAY BE IN THE COMPONENT BY LAWS 4 MEMBER - ASSOCIATE ANY PERSON WHO JOINS THE INSTITUTE TO ACCESS RIVILEGES PURSUANT TO POLICIES DULY ADOPTED BY THE PMI BOARD OF DIRECTORS MEMBER - ASSOCIATE DIT BE ENTITLED TO EXERCISE ANY VOTING RIGHTS, AND SHALL NOT BE A CANDIDATE FOR, NOR HOLD ANY DIT BE ENTITLED OFFICE IN THE INSTITUTE

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	GOVERNANCE DECISIONS OF THE ORGANIZATION ARE RESERVED TO OR SUBJECT TO THE APPROVAL OF MEMBERSHIP UNDER THE ORGANIZATIONS BY LAWS, CERTAIN CHANGES TO THE BY LAWS REQUIRE MEMBERSHIP APPROVAL

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	A DRAFT OF THE FORM 990 IS PREPARED BY PMI'S ACCOUNTING DEPARTMENT THAT DRAFT IS FIRST REVIEWED BY PMI'S FINANCE AND LEGAL STAFF THE FOLLOWING DRAFT IS PRESENTED FOR REVIEW TO PMI'S PRESIDENT AND CHIEF EXECUTIVE OFFICER AND THEN TO THE BOARD'S AUDIT AND PERFORMANCE OVERSIGHT COMMITTEE. THE FINAL DRAFT OF THE FORM 990 IS THEN PRESENTED TO THE FULL BOARD. THE FORM 990 WAS DISTRIBUTED ELECTRONICALLY TO THE BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING. THE PROCESS INCLUDES THE OPPORTUNITY FOR MEMBERS OF THE BODY OF THE BOARD OF DIRECTORS TO SUBMIT QUESTIONS/COMMENTS ELECTRONICALLY.

Return	Explanation
Reference	DMI MEMBERS AND NON MEMBERS MADRING ON DMINATOR COOLING A DE DOLING DA TURO DOLINA DE DATAS DE DATAS
FORM 990, PART VI,	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
SECTION B,	CHARTERED BY THE PMI BOARD (AS DEFINED IN THE RULES OF THE BOARD), MEMBER ADVISORY GROUPS (MAG), PROJECT
LINE 12C	ACTION TEAMS (PATS), 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 1 AUTHORITY THE PMI CODE OF ETHICS AND PROFESSIONAL CONDUCT REQUIRES THAT INDIVIDUALS WILL ABIDE BY
	THE BY LAWS, POLICIES, RULES, REQUIREMENTS, AND PROCEDURES OF PMI, AND WILL NOT KNOWINGLY ENGAGE OR
	ASSIST IN ACTIVITIES INTENDED TO COMPROMISE THE INTEGRITY, REPUTATION, PROPERTY, AND/OR LEGAL RIGHTS OF THE INSTITUTE 2 DISCLOSURE INDIVIDUALS ACCOUNTABLE UNDER THIS POLICY MUST IDENTIFY THOSE SITUATIONS WHERE
	THEY HAVE A CONFLICT OF INTEREST OR 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 MEMBER'S SUPERIOR OR THE GROUP LEADER IN THE CASE OF VOLUNTEERS 3 PMI
	CONFLICT OF INTEREST QUESTIONNAIRE. ALL VOLUNTEERS PARTICIPATING IN A PMI VOLUNTEER GROUP AND ALL SENIOR
	STAFF, INCLUDING KEY EMPLOYEES, MUST FILL OUT THE QUESTIONNAIRE ANNUALLY THIS IS TO ENSURE THAT NO
	CONFLICTS OF INTERESTS THAT HAVE ARISEN AFTER THE PERSONS INITIAL INVOLVEMENT ARE DISCLOSED 4 DISCLOSURE
	REVIEW THE CONFLICT OF INTEREST QUESTIONNAIRE, TO BE COMPLETED BY THE INDIVIDUAL PARTICIPATING ON A PMI
	VOLUNTEER GROUP, WILL BE REVIEWED BY THE RESPONSIBLE GROUP LEADER FOR HIS/HER KNOWLEDGE 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. 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 THE PMI GENERAL COUNSEL WILL REVIEW THE CONFLICT OF INTEREST
	QUESTIONNAIRES OF ALL KEY EMPLOYEES AND BRING CONFLICTS OF INTEREST AND POSSIBLE CONFLICTS OF INTEREST TO
	THE ATTENTION OF THE PMI CHIEF EXECUTIVE OFFICER FOR RESOLUTION. THE CHIEF EXECUTIVE OFFICER WILL REVIEW THE
	QUESTIONNAIRE OF THE GENERAL COUNSEL 5 POSSIBLE REMEDIES REMEDIAL ACTION FOR DISCLOSED CONFLICTS OR
	POSSIBLE CONFLICTS OF INTEREST MAY INCLUDE BUT ARE NOT LIMITED TO THE FOLLOWING RECUSAL FROM ANY DECISION DEVELOPED BY THE GROUP RECUSAL FROM THE PART OF THE PROCESS WHERE A CONFLICT EXISTS, SUCH AS NOT
	REVIEWING A COMPETITIORS AWARD SUBMITTAL REPLACEMENT ON THE GROUP PARTICIPATION AS A SUBJECT MATTER
	EXPERT BUT NOT IN DISCUSSIONS OR DELIBERATIONS 6 POLICY USAGE CARE MUST BE USED TO AVOID OVERUSE OR
	MISUSE OF THIS POLICY THE INSTITUTE REQUIRES INTEGRITY TO FUNCTION PROPERLY BUT OVER-USE OF THE REQUIREMENT
	TO COMPLETE THE CONFLICT OF INTEREST QUESTIONNAIRE MAY DISCOURAGE PARTICIPATION BY OTHERWISE QUALIFIED
	VOLUNTEERS 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 SIGN THE
	PMI 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
	I TO USE THE ATTACHED FORM FOR GROUPS THEY SPONSOR THIS 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

Return Reference	Explanation
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 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

Return Reference	Explanation
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 STATEMENTS WILL BE PROVIDED ON REQUEST, BUT ARE ALSO INCLUDED IN PMI'S ANNUAL REPORT THAT IS POSTED ON THE PMI ORG WEBSITE

Return Reference	Explanation
	GENERAL CONSULTING 6,784,857 TEMPORARY STAFF 1,089,293 REGIONAL SERVICE CENTER 2,608,301 CONTRACT LABOR 6,095,369 TRANSLATION SERVICES 448,505 EMPLOYEE SEARCH FEES 322,652 EDITORIAL SERVICE 1,545,450

DLN: 93493224004476

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

23-2630701

Name of the organization PROJECT MANAGEMENT INSTITUTE

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. ► Attach to Form 990.

Employer identification number

23-1887442

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33

(a) Name, address, and EIN (if applicable) 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 AUSTRALASIA PTY LIMITED VEL 20 TOWER 2 DARLING PARK 201 DNEY NSW 2001 -0607905	CONDUCT PROJECT MANAGEMENT ADVOCACY PROGRAMS WITH REGIONAL ORGANIZATIONS	AS	17,165	201,536	PROJECT MANAGEMENT INSTITUT	E	
O PMI (BEIJING)PROJECT MANAGEMENT TECHNOLOGY CO LTD OM 1107 11TH FLOOR BEIJING SUN AOYANG DISTRICT, BEIJING 100080	REGIONAL MARKETING SUPPORT, CONDUCT PROJECT MANAGEMENT OUTREACH AND ADVOCACY	СН	2,635,281	1,895,290	PROJECT MANAGEMENT INSTITUT	E	
) PROJECT MANAGEMENT INSTITUTE KHALEEJI FZ-LLC OCK NO 6 FIRST FLOOR F-07 DUBA JBAI 1162223	REGIONAL CHAPTER DEVELOPMENT AND SUPPORT, TRAINING PROGRAMS	AE	574,441	177,831	1 PMI AUSTRALASIA PTY LIMITED		
) PMI MANAGEMENT SINGAPORE PTE LTD VEL 39 10 MARINA BLVD MARINA BA 018983 -1174043	REGIONAL CHAPTER DEVELOPMENT AND SUPPORT	SN	622,684	224,379	PROJECT MANAGEMENT INSTITUT	E	
) PMI MANAGEMENT EUROPE JUARE DE MEEUS 35 3RD FLOOR AT S JUSSELS -1219090	REGIONAL CHAPTER DEVELOPMENT AND SUPPORT, OUTREACH TO ACADEMIA	BE	303,238	181,173	PROJECT MANAGEMENT INSTITUT	E	
				- F 000 P	17V 1-24 1-24 1-4	_ 1	
Part II Identification of Related Tax-Exempt Or or more related tax-exempt organizations dui		e organization and	swered Yes or	1 FORM 990, Par	t IV, line 34 because it n	ad one	3
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sectio	(e) Public charity sta (if section 501(c))		Section (b) contri	g) on 512 (13) rolled tity?
1)PROJECT MANAGEMENT INSTITUTE EDUCATION FOUNDATION 4 CAMPUS BOULEVARD IEWTOWN SQUARE, PA 190733299	EXPANDING EDUCATIONAL OPPORTUNITIES FOR FUTURE PROJECT MANAGERS	PA	501(C)(3)	LINE 11A, I	PROJECT MANAGEMENT INSTITUTE	Yes	No

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	,	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end- of-year assets	(h Disprop alloca	ortionate ations?	amount in	mana parti	ral or aging	(k) Percentage ownership
							Yes	No		Yes	No	
MUMBAI 400051 IN	CONDUCT PROJECT MANAGEMENT OUTREACH AND ADVOCACY WITH REGIONAL ORGANIZATIONS		PROJECT MANAGEMENT INSTITUTE	RELATED	151,866	1,868,695		No		Yes		99 900 %
Part IV Identification of Polated Organizations Tayable as a Corporation or Trust Complete of the organization answered "Vos" on Form 000, Part IV, Inc.												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on 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	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section (b)(1 contro entit	on 512 (13) rolled
(1)PMI EUROPE LIMITED 1 ST ANDREWS HILL LONDON WC1R 4JS UK	HOLDING COMPANY	UK	PROJECT MANAGEMENT INSTITUTE	С	-171,372	7,029,379	100 000 %	Yes	No
HUMAN SYSTEMS ASIA (2)PACIFIC PTY LIMITED LEVEL 2 66 CLARENCE STREET SYDNEY NSW 2000 AS	BENCHMARKING & ASSESSMENT	AS	PMI HOLDINGS PTY LIMITED	С	-653,993	539,065	100 000 %	Yes	
HUMAN SYSTEMS EUROPE (3)LIMITED 1 ST ANDREWS HILL LONDON W1T 4DU UK	BENCHMARKING & ASSESSMENT	UK	PMI EUROPE LIMITED	С	-1,238		100 000 %	Yes	
HUMAN SYSTEMS (4)INTERNATIONAL LIMITED 1 ST ANDREWS HILL LONDON W1T 4DU UK	BENCHMARKING & ASSESSMENT	UK	HUMAN SYSTEMS EUROPE LIMITED	С	-319,542	609,504	100 000 %	Yes	
(5)HUMAN SYSTEMS LIMITED 1 ST ANDREWS HILL LONDON W1T 4DU UK	BENCHMARKING & ASSESSMENT	UK	INTERNATIONAL LIMITED	С	-11,431		100 000 %	Yes	
(6) PMI HOLDINGS PTY LIMITED LEVEL 18 420 GEORGE STREET SYDNEY NSW 2000 AS	HOLDING COMPANY	AS	PMI EUROPE LIMITED	С	-67,899	1,663,377	100 000 %	Yes	
		1		1	1	1 '	1	1 '	1 - 1

Part V Transactions With Related Organizations Complete if the organization answe	red "Yes" on Form	990, Part IV, line	34, 35b, or 36.				
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No	
1 During the tax year, did the orgranization engage in any of the following transactions with one or more re	lated organizations li	sted in Parts II-IV?					
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a	Yes		
b Gift, grant, or capital contribution to related organization(s)				1b	Yes		
c Gift, grant, or capital contribution from related organization(s)				1c	Yes		
d Loans or loan guarantees to or for related organization(s)				1d	Yes		
e Loans or loan guarantees by related organization(s)				1e		No	
f Dividends from related organization(s)				1 f		No	
g Sale of assets to related organization(s)				1g		No	
f h Purchase of assets from related organization(s)				1h		No	
i Exchange of assets with related organization(s)				1i		No	
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No	
k Lease of facilities, equipment, or other assets from related organization(s)				1k		No	
l Performance of services or membership or fundraising solicitations for related organization(s)							
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m		No	
${f n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes		
o Sharing of paid employees with related organization(s)				1o	Yes		
p Reimbursement paid to related organization(s) for expenses				1 p		No	
q Reimbursement paid by related organization(s) for expenses				1q	Yes		
r Other transfer of cash or property to related organization(s)				1r	Yes		
s Other transfer of cash or property from related organization(s)				1s		No	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete							
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount in	volved		
ee Addıtıonal Data Table							

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section i01(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations'	ı	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	Ī

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2015

Additional Data

Software ID: Software Version:

EIN: 23-1887442

Name: PROJECT MANAGEMENT INSTITUTE

Form 990, Schedule R, Part V - Transactions With Related Organizations

Form 990, Schedule R, Part V - Transactions with Related Organizations									
	(a) Name of related organization	(b) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved					
(1)	PROJECT MANAGEMENT INSTITUTE EDUCATIONAL FOUNDATION	В	4,620,331	CASH/NON-CASH(FMV)					
(1)	PROJECT MANAGEMENT INSTITUTE EDUCATIONAL FOUNDATION	Q	1,453,121	CASH					
(2)	HUMAN SYSTEMS ASIA PACIFIC PTY LTD	D	290,986	LOAN					
(3)	PMI ORGANIZATION CENTRE PVT LTD	R	2,027,000	CASH					
(4)	PMI HOLDINGS PTY LTD	D	290,683	LOAN					
(5)	PMI EUROPE LIMITED	А	10,106	SECTION 482					
(6)	HUMAN SYSTEMS INTERNATIONAL LTD	D	506,559	LOAN					
(7)	PMI HOLDINGS PTY LTD	А	7,748	SECTION 482					
(8)	HUMAN SYSTEMS ASIA PACIFIC PTY LTD	А	18,295	SECTION 482					
(9)	HUMAN SYSTEMS INTERNATIONAL LTD	А	12,015	SECTION 482					
(10)	HUMAN SYSTEMS LIMITED	R	86,390	CASH					