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efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493243005197 OMB No 1545-0047 **Return of Organization Exempt From Income Tax** Form **990**

foundations)

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

2016

			IT ▶ Information at					C	Open to Public Inspection		
Fo	or the	2016 c		ginning 01-01-2016 $$, and ending 1	2-31-20	16					
□ Add	dress c	change		TE					cation number		
□ Init Fin	tıal reti al	urn	Doing business as								
⊐ Am	ended	return	14 CAMPUS BOULEVARD	then about Form 990 and its instructions is at www.RS.gov/form990 Par beginning 01-01-2016 , and ending 12-31-2016 INSTITUTE D Employer iden							
— Арі	piicatio	ni penanig	City or town, state or province, on NEWTOWN SQUARE, PA 19073	ountry, and ZIP or foreign postal code			G Gross re	ceipts \$ 33	31.916.541		
			F Name and address of princ	ipal officer	H/:	a) Ic thu		· ·			
			MARK A LANGLEY 14 CAMPUS BOULEVARD	,		subor	dinates?		□Yes ☑No		
Tax	k-exem	npt status	<u> </u>		`	includ	led?		Yes No		
W	ebsite	Domg business as Domg business as Domg business as Domg business as E Telephone number of individual CAMFUS BOLLEVARD (610) 356-460 (610) 356				•					
Forn	n of or	ganızatıon	✓ Corporation ☐ Trust ☐ A	ssociation Other ►	L Ye	ar of form	ation 1969	M State	of legal domicile PA		
Pa	rt I	Sum	marv								
	1 B T P	Briefly des O ADVAN ROACTIV	scribe the organization's mission NCE THE PRACTICE, SCIENCE A 'E MANNER PMI'S ENVISIONED	ND PROFESŠION OF PROJECT MANAGEN GOAL AS STATED IN ITS STRATEGIC P	LAN IS \						
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		- Tree dilici	ated business taxable income i	101111 101111 330 1, mile 34 1 1 1 1 1	<u> </u>	 Dri	or Vear	1,2	Current Year		
	g .	Contribut	none and grants (Part VIII line	1h)			OI I Cai	0	Current real		
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ďΛċ		-	•						3,947,577		
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Expenses				, , , , , , , , , , , , , , , , , , , ,	.0)		43,030,0	0	45,511,025		
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3	l		- · · · · · · · · · · · · · · · · · · ·	· -	-		102 511 (200	113,397,253		
			, , , , , , , , , , , , , , , , , , , ,	•	-			_	163,755,902		
	l			from the 12	-			_	19,314,620		
S e S		Kevenue	less expenses Subtract line 10	nom me 12 i i i i i i i	В	Beginning			End of Year		
Fund Balances	20	Total ass	ets (Part X, line 16)		-		445,945,4	108	481,169,693		
2	21	Total liab	ulities (Part X, line 26)		.		59,299,8	385	57,045,540		
FE	22	Net asset	s or fund balances Subtract lin	ne 21 from line 20			386,645,5	523	424,124,153		
Par	t II	Signa	ature Block								
nowl	edge	and belie									
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		Signati	* ure of officer								
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			rint/Type preparer's name YNNE JOHNSON		Date		Check ☐ If P00757336				
Paic		_ -	irm's name RSM US LLP	l				0714325			
	oare	ĭ ı ⊢	irm's address ► 751 ARBOR WAY SU	JITE 200		-					

BLUE BELL, PA 19422

Use Only

Form	990 (2016)				Page 2
Par	t IIII Statement	of Program Service Acc	complishments		
	Check if Sched	dule O contains a response or	note to any line in this Part III		🗹
1		organization's mission			
MAN	NER PMI'S ENVISIONE		N OF PROJECT MANAGEMENT THROUG TRATEGIC PLAN IS WORLDWIDE, ORG S TO IT		
2	Did the organization	undertake any significant pro	gram services during the year which w	ere not listed on	
	the prior Form 990 or	r 990-EZ?			🗌 Yes 🗹 No
	If "Yes," describe the	ese new services on Schedule	0		
3	Did the organization	cease conducting, or make si	gnificant changes in how it conducts, a	ny program	
	services?				🗌 Yes 🗹 No
	If "Yes," describe the	ese changes on Schedule O			
4	Section 501(c)(3) and		nplishments for each of its three larges required to report the amount of gran service reported		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	See Additional Data				
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	ORGANIZATIONS AND IT		RS, AND A QUARTERLY TECHNICAL JOURNAL DJECT MANAGEMENT PMI'S PREMIER PUBLIC RIES INTERNATIONALLY		
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	OPPORTUNITY TO VOLUI EDITION OF A GUIDE TO ALONG WITH THREE OTI MANAGEMENT (THIRD E COMPREHENSIVE SET O	NTEER FOR THE STANDARDS DEV O THE PROJECT MANAGEMENT BOI HER STANDARDS WHICH INCLUDI SUITION), AND THE ORGANIZATIO OF STANDARDS AVAILABLE FOR IN AND PRACTICE GUIDES THAT DES	OF PROJECT MANAGEMENT STANDARDS PRO- ELOPMENT PROCESS AND TO SUBMIT THEIR DY OF KNOWLEDGE (PMBOK GUIDE), THE LE- E THE STANDARD FOR PORTFOLIO MANAGEM NAL PROJECT MANAGEMENT MATURITY MOD DIVIDUALS AND ORGANIZATIONS IN THE FII CRIBE THE USE OF TOOLS, TECHNIQUES, OF	INPUT IN DEVELOPING PMI'S STA ADING GLOBAL STANDARDS FOR I ENT (THIRD EDITION), THE STAN EL (OPM3 THIRD EDITION) COMPR ELD OF PROJECT MANAGEMENT P	NDARDS THE FIFTH PROJECT MANAGEMENT, DARD FOR PROGRAM RISE THE MOST MI ALSO PUBLISHES
	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	PROJECT MANAGEMENT SMALLER REGIONAL EVE	PRACTITIONERS AROUND THE WOENTS THROUGHOUT THE YEAR IN	GRESSES IN EUROPE, AFRICA AND THE MIDD DRLD TOGETHER TO ENHANCE THEIR KNOWL THE ASIA/PACIFIC AND LATIN AMERICA REG NHANCE THEIR KNOWLEDGE OF PROJECT MA	.EDGE OF PROJÉCT MANAGEMENT IONS PMI ALSO HOSTS SEMINAR	PMI ALSO HOSTS
4d	Other program service	ces (Describe in Schedule O)			
	/Function programm service	ces (Describe in Schedule O)		Davienus d	`

Yes

or X as applicable

Section 501(c)(3) organizations.

Checklist of Required Schedules 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . . .

Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

b Was the organization included in consolidated, independent audited financial statements for the tax year?

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

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

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🛸 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX,

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 🛸 . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 💆

If "Yes." complete Schedule C, Part III 💆

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Yes

3

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11a

11b

11c

11d

11e

11f

12a

12b

13

14a

14h

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16

17

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Yes

Yes

Yes

Yes

Yes

Yes

Yes

No

Page 3

No

No

No

No

Nο Nο No No

Νo

Nο

Nο

No

No

Nο

Νo

Form **990** (2016)

29

Part IV Checklist of Required Schedules (continued) Yes 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . 20a Nο b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Yes 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, 22 Yes column (A), line 2? If "Yes," complete Schedule I, Parts I and III

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees, If "Yes,"

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 🔧

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🛸

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

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

Yes 23 24a

25a

25b

26

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28a

28b

28c

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33

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35a

35b

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Yes

Yes

Yes

Yes

Form 990 (2016)

24b 24c 24d

Nο

Nο

Nο

No

Nο

Νo

Νo

Nο

No

Nο

Nο

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orm	990 (2016)			Page
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V			✓
_			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 203			
	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 vendors and reportable gaming (gambling) winnings to prize winners?	1c	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	2b	Yes	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	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 and Financial Accounts (FBAR)		, , , ,	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	50		
	2. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	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 facilities 10b	1		
1	Section 501(c)(12) organizations. Enter	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	-		
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
b	additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in	13a		
	which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 to 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched			" respo	nse to lı	nes
		Check if Schedule O contains a response or note to any line in this Part VI					✓
Se	ction	A. Governing Body and Management					
				İ		Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax year	1a	15			
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or ar committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are independent	1b	15			
2		l ny officer, director, trustee, or key employee have a family relationship or a busine r, director, trustee, or key employee?	ss rela	tionship with any other	2		No
3		ne organization delegate control over management duties customarily performed by icers, directors or trustees, or key employees to a management company or other p			3		No
4		ne organization make any significant changes to its governing documents since the	prior F		4		No
5	Did +	ne organization become aware during the year of a significant diversion of the organ	-	n's assets?	5		No
6		ne organization have members or stockholders?	IIZatio	11 5 d35et3. •	6	Yes	110
		ne organization have members of stockholders, or other persons who had the power t	n elec	t or appoint one or more		163	
	mem	bers of the governing body?			7a	Yes	
b		ny governance decisions of the organization reserved to (or subject to approval by) ns other than the governing body?		bers, stockholders, or	7b	Yes	
8		ne organization contemporaneously document the meetings held or written actions bllowing	undert	aken during the year by			
а	The g	overning body?			8a	Yes	
		committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is the orgar	ere any officer, director, trustee, or key employee listed in Part VII, Section A, who nization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i> C	canno	t be reached at the	9		No
Se	ction	B. Policies (This Section B requests information about policies not requ	ıred b	y the Internal Revenue	e Code		
						Yes	No
		ne organization have local chapters, branches, or affiliates?			10a	Yes	
	and b	es," did the organization have written policies and procedures governing the activities iranches to ensure their operations are consistent with the organization's exempt pi	urpose	s?	10b	Yes	
	form?		•		11a	Yes	
		ibe in Schedule O the process, if any, used by the organization to review this Form					
		ne organization have a written conflict of interest policy? If "No," go to line 13.			12a	Yes	
b		officers, directors, or trustees, and key employees required to disclose annually int	erests	that could give rise to	12b	Yes	
С		ne organization regularly and consistently monitor and enforce compliance with the dule O how this was done	policy •	? If "Yes," describe in	12c	Yes	
13	Did th	ne organization have a written whistleblower policy?	•		13	Yes	
14		ne organization have a written document retention and destruction policy?			14	Yes	
15		ne process for determining compensation of the following persons include a review and its process for detailing and contemporaneous substantiation of the deliberation and compensation are compensation of the deliberation and compensation of the compensation of the following persons include a review of the compensation of the com					
а	The c	rganization's CEO, Executive Director, or top management official			15a	Yes	
b		officers or key employees of the organization			15b	Yes	
	If "Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a		ne organization invest in, contribute assets to, or participate in a joint venture or sii le entity during the year?	milar a	rrangement with a	16a		No
b	ın joli	s," did the organization follow a written policy or procedure requiring the organizat nt venture arrangements under applicable federal tax law, and take steps to safegu s with respect to such arrangements?	ard th		16b		
		C. Disclosure					
17		ne States with which a copy of this Form 990 is required to be filed		000 T (F04) \(\frac{1}{2} \)			
18	avaıla —	on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990 able for public inspection. Indicate how you made these available. Check all that applicable in the control of the co	oly				
		Own website 🔲 Another's website 💆 Upon request 🔲 Other (explain in So		•			
19	policy	ribe in Schedule O whether (and if so, how) the organization made its governing do r, and financial statements available to the public during the tax year					
20		the name, address, and telephone number of the person who possesses the organ A MAGEE MANAGER ACCOUNTING 14 CAMPUS BOULEVARD NEWTOWN SQUARE,					

compensated employees, and former such persons

(A)

Name and Title

(F)

Estimated

Form 990 (2	2016) Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors
	Check if Schedule O contains a response or note to any line in this Part VII
Section	A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
year ● Lıst all	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount ation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
• List all o	of the organization's current key employees, if any See instructions for definition of "key employee "
who receive	organization's five current highest compensated employees (other than an officer, director, trustee or key employee) In reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the In and any related organizations
• List all o	of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000

(C)

Position (do not check more

(D)

Reportable

(E)

Reportable

organiza List 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

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

(B)

Average

hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation organization (Wany hours director/trustee) organizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest compensat employee Individual trustee or director Officer Former organizations MISC) related Institutional Trustee below dotted organizations employee line) See Additional Data Table

Page **8**

Part VII Section A. Officers, Direct	ors, Trustees	, Key l	Empl	loye	es,	and I	High	nest Cor	npens	ate	d Employees	(con	tinued)	rage o
(A) Name and Title	(B) Average hours per week (list any hours	Position than o	on (de	(C) o not ox, u n off	che inles	eck moss pers	ore son	Repo compe from organiz	(D) (E) Reportable In Reportable In Reportable In Reportable In Compensation In From relate In Granization (W- In Compensation In From relate In Granization (W- In Compensation In From relate In Granization In Compensation				(F Estima amount of compen from organizat	ated of other sation the
	for related organizations below dotted line)	Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or director				Former	2/109	9-MISC		2/1099-MISC		related organizations		
See Additional Data Table														
												+		
												+		
												_		
												+		
				\vdash						\dashv		\dashv		
4h Colo Total									1			\dashv		
1b Sub-Total						▶						+		
d Total (add lines 1b and 1c)	<u> </u>					▶		3,4	475,766			0		709,721
2 Total number of individuals (including of reportable compensation from the			e list	ed al	oove	e) who	rece	eived mo	re than	\$10	0,000			
													Yes	No
3 Did the organization list any former of line 1a? If "Yes," complete Schedule 3	for such individ	dual .	•	•	•		•			•		3		No
For any individual listed on line 1a, is organization and related organization individual	greater than \$	150,00	0? <i>If</i>	"Yes	," c	omplet	te Sc	hedule J	for suc	h		4	Yes	
5 Did any person listed on line 1a receive services rendered to the organization?									tion or	ındıv •	ridual for	5		No
Section B. Independent Contract														
Complete this table for your five higher from the organization Report comper	est compensate sation for the c	d indepo alendar	ender vear	nt co end	ntra Ina	actors t	that r wit	received	more t	han ition	\$100,000 of co 's tax vear	mpen	sation	
	(A)		,								(B) ption of services		((
PROMETRIC Name a	nd business addre	:55							EXAM DI	ELIVE	ERY & PSYCHOME	ΓRIC	Compe 18	1,307,570
PO BOX 223608									SERVICE	- S				
PITTSBURGH, PA 152512608 RACKSPACE MANAGED HOSTING									FULLY M	IANAI	NGED HOSTING A	ND	1	,599,551
1 FANATICAL PLACE CITY OF WINDCRES									DATABA	SE S	ERV			
SAN ANTONIO, TX 78218 ASENDIA USA INC									INTERNA	OITA	NAL ECOMMERCE	AND	1	,566,352
701C ASHLAND AVENUE									MAIL SH			,	-	,,500,552
FOLCROFT, PA 19032 PBD INC									BOOK E	II ET'	LMENT SERVICES			,553,603
									BOOK FO	JLFIL	LMENT SERVICES	ı		.,333,003
1650 BLUEGRASS LAKES PARKWAY ALPHARETTA, GA 30004														
INTEREL		EMEA REGIONAL GOVERNMEN' BUSINESS RELA							1&		,401,739			
RUE DU LUXEMBOURG 22-24 BRUSSEL BE						1				1	11 11	00 -		
2 Total number of independent contractor compensation from the organization ▶ 4		not lim	ited t	o the	ose	ıısted	apov	/e) who r	eceived	mo	re tnan \$100,0	υ∪ of	Form 99	0 (2015)

	90 (2016)										Page 9
Part	VIII Statement of										
	Check if Schedul	e O contains a re	sponse or	note to any	(A) Total reven		Rela exe fun	B) ted or empt ction enue	(C) Unrela busine reven	ted ess	(D) Revenue excluded from tax under sections 512-514
10	1a Federated campaig	ns 1	а	<u> </u>			100	chiac			312 314
ints unt	b Membership dues	1	ь								
Gra mo	c Fundraising events	1	c								
ffs. r A	d Related organizatio	ns 1	d								
ons, Gifts, Grants Similar Amounts	e Government grants (co	ontributions) 1	e								
Contributions, Gifts, Grants and Other Similar Amounts	f All other contributions, and similar amounts n above	ot included	f								
Contribution and Other	g Noncash contribution in lines 1a-1f \$	ons included									
ة ت	h Total.Add lines 1a-1	lf				_					
RIE	3			Business	611600	02.27	1 001	02.22	1 901		
i e Ve	b MEMBERSHIP DUES				541900	-	21,891 51,006	92,32 58,55	-		+
بر R	c SEMINARS/SYMPOSIUM				611430		19,371	14,54	-		<u> </u>
er vic	d REP MEMBERSHIP FEES				900099	2,97	8,475	2,97	8,475		
Š	e GLOBAL EXECUTIVE CO	UNCIL DUES			900099		20,100		0,100		
Program Service Revenue	f All other program se	rvice revenue				25	59,724	25	9,724		
Æ	gTotal.Add lines 2a-2f	f	>	169,6	80,567						
	3 Investment income (ii				11	304,710					11,304,710
	similar amounts) . 4 Income from investment	ent of tay-eyemr		eeds ►	11,	304,710					
	5 Royalties	•		. •	1,	710,846					1,710,846
	,	(ı) Real		Personal							
	6a Gross rents										
	b Less rental expenses	223,	321								
	c Rental income or (loss)	-223,	321								
	d Net rental income o	r (loss)		· •	-	223,321					-223,321
		(ı) Securities	(11) Other							
	7a Gross amount from sales of										
	assets other than inventory										
	b Less cost or										
	other basis and sales expenses	145,571,	578	142							
	C Gain or (loss)	-7,356,	991	-142	_						
	d Net gain or (loss)			>	-7,	357,133					-7,357,133
<u>a</u>	8a Gross income from for (not including \$	undraising event: of	5								
eun	contributions reporte See Part IV, line 18		a								
}e^	b Less direct expense		ь								
er F	c Net income or (loss)			· •	J						
Other Revenue	9a Gross income from g										
0	See Part IV, line 19		a								
	b Less direct expense	s	ь								
	c Net income or (loss)	from gaming act	ivities .	· •							
	10aGross sales of invent returns and allowand										
			а	6,758,099							
	b Less cost of goods s	sold	b	3,050,978]						
	c Net income or (loss)				3,	707,121		3,707,121			
	Miscellaneous		Busir	ness Code 541800	,	604,005				3,604,005	0
	11aDIGITAL ADVERTIS	ING		241800	3,	JU4,003				5,504,005	U
	h		_	541800		622,020				622,020	0
	b ADVERTISING			241000		522,020				JZZ,UZU	Ü
	SUPPORT FEES		+	323100		11,302					11,302
	~ SUPPUKT FEES			323100		_1,552					11,502
	d All other revenue .					10,405					10,405
	e Total. Add lines 11a			>							
	12 Total revenue. See	Instructions .			,	247,732					
					183,	070,522		173,387,688		4,226,025	5,456,809 Form 990 (2016)

IV. line 22

and 16

Form 990 (2016)

Part IX Statement of Functional Expenses

domestic governments See Part IV, line 21

4 Benefits paid to or for members

section 4958(c)(3)(B) . 7 Other salaries and wages

9 Other employee benefits .

11 Fees for services (non-employees) a Management . . .

d Lobbying

f Investment management fees .

12 Advertising and promotion .

13 Office expenses .

15 Royalties .

17 Travel .

16 Occupancy .

20 Interest . . .

23 Insurance .

b BAD DEBT

14 Information technology

10 Payroll taxes . . .

b Legal .

c Accounting

key employees .

Grants and other assistance to domestic individuals. See Part

3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15

Compensation of current officers, directors, trustees, and

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in

8 Pension plan accruals and contributions (include section 401

(k) and 403(b) employer contributions) .

e Professional fundraising services See Part IV, line 17

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

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

25 Total functional expenses. Add lines 1 through 24e 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)

19 Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O) a CERTIFICATION ADMINISTR

c MARKET RESEARCH

e All other expenses

d PURCHASED ONLINE CONTEN

g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX

(B) (C)

(A) Program service Management and Total expenses expenses

lacksquareDo not include amounts reported on lines 6b, (D) Fundraisingexpenses 7b, 8b, 9b, and 10b of Part VIII.

111,540

588.448

4,240,423

31,738,340

2,183,736

4,428,368

2,720,158

1,577,227

750.978

534,258

1,086,187

20,424,476

7,430,138

9,385,375

5,342,643 24,354

2,599,043

7.653.868

14,308,717

7,010,279

26,346,249

3.188.833

2,193,629

851,253

2,334,187 163,755,902

354,912

647

general expenses 4,347,636 1 Grants and other assistance to domestic organizations and

Cash-non-interest-bearing . .

II of Schedule L

Assets

11

12

13

14

15

16

17

18

19

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21

23

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26

27

28

29

31

32

33

34

Liabilities 22

Fund Balances

Assets or 30

Net

Part II of Schedule L

Savings and temporary cash investments

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part

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

10a 10b

Pledges and grants receivable, net . . .

Notes and loans receivable, net

Inventories for sale or use

10a Land, buildings, and equipment cost or other

Investments—publicly traded securities .

Accounts payable and accrued expenses . . .

persons Complete Part II of Schedule L . .

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . .

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.

Capital stock or trust principal, or current funds

Retained earnings, endowment, accumulated income, or other funds

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

basis Complete Part VI of Schedule D

b Less accumulated depreciation

Grants payable . . .

Deferred revenue

Complete Part X of Schedule D

Temporarily restricted net assets . Permanently restricted net assets

Total net assets or fund balances .

Unrestricted net assets

Prepaid expenses and deferred charges . .

Investments—other securities See Part IV, line 11 . . .

Total assets.Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

Investments—program-related See Part IV, line 11 .

550 (2010)											
art X	Balance Sheet											
	Check if Schedule O contains a response or note to any line in this Part IX $$.											
			Beg	jinn	(A) ling	of ye	ear			Ene	(B)	/ea

44,555,598

29.126.956

Beginning of year		End of year
15,008,47	^{'3} 1	14,4
808,95	7 2	7

Page **11**

8,661,994

506.136

3.776.929

15,428,642

363.892.327

71.281.341

1.926,628

481,169,693

18,508,796

38,015,151

521.593

57,045,540

424,124,153

424,124,153

481.169.693

Form **990** (2016)

446,922

		End of year
15,008,473	1	14,481,776
808,957	2	766,998
	3	_

4

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10c

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26

27

28

29

30

31 32

33

34

9,177,859

2.045.662

2.309.451

17.562.092

343,433,791

51.526.519

2,214,019

1.337.095

445,945,408

18,518,844

39,773,042

1.007.999

59,299,885

386.645.523

386,645,523

445.945.408

521,490

Yes

Nο

Form 990 (2016)

2c

3a

3b

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

Audit Act and OMB Circular A-133?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

Additional Data

Software ID:

Software Version:

EIN: 23-1887442

Name: PROJECT MANAGEMENT INSTITUTE

Form 990 (2016)

Form 990, Part III, Line 4a: CERTIFICATIONS PMI IS THE LEADING CERTIFIER OF PROJECT MANAGERS GLOBALLY ITS CERTIFICATIONS ARE RECOGNIZED BY BUSINESS AND GOVERNMENT AND PROVIDE THE OPPORTUNITY FOR PRACTITIONERS OF PROJECT MANAGEMENT TO DEMONSTRATE THEIR ACCOMPLISHMENTS THROUGH THE RIGOROUS EXAMINATION PROCESS PMI'S PROJECT MANAGEMENT PROFESSIONAL (PMP) CERTIFICATION IS THE MOST IMPORTANT GLOBALLY-RECOGNIZED AND INDEPENDENTLY VALIDATED CREDENTIAL FOR PROJECT MANAGERS, WITH OVER 745,000 CERTIFIED PMPS AROUND THE WORLD AS OF DECEMBER 2016 PMI ALSO OFFERS CERTIFICATION SPECIFIC AREAS OF PROJECT MANAGEMENT, INCLUDING CERTIFICATION FOR PROJECT RISK (PMI-RP), PROJECT SCHEDULING (PMI-SP), AGILE METHODOLOGY (PMI-ACP), PORTFOLIO MANAGEMENT (PFMP), PROGRAM MANAGEMENT (PGMP), AND BUSINESS ANALYSIS (PMI-PBA) PMI ALSO CERTIFIES NEWER PROJECT MANAGEMENT PRACTITIONERS THROUGH ITS CERTIFIED ASSOCIATE IN PROJECT MANAGEMENT (CAPM)

MEMBERSHIP PMI IS THE WORLD'S LEADING NOT-FOR-PROFIT MEMBERSHIP ASSOCIATION FOR THE PROJECT MANAGEMENT PROFESSION, WITH MORE THAN 472,000 MEMBERS IN 207 COUNTRIES PMI PROVIDES ITS MEMBERS WITH ACCESS TO KNOWLEDGE, NETWORKS, AND RESOURCES THAT CAN HELP THEM IMPROVE THEIR WORK AND ADVANCE THEIR CAREER IN PROJECT MANAGEMENT, INCLUDING TOOLS TO ASSESS THEIR SKILLS AND PLAN THEIR CAREER PATH, ONLINE AND DIGITAL

RESOURCES INCLUDING THE PMBOK GUIDE, ARTICLES & PAPERS, WEBINARS, LEADERSHIP & VOLUNTEER OPPORTUNITIES, OUALITY PUBLICATIONS TO KEEP THEM

Form 990, Part III, Line 4b:

INFORMED, AND DISCOUNTS ON PMI CREDENTIAL EXAMS AND RENEWALS

SEMINARS AND SYMPOSIUMS PMI HOSTS ANNUAL CONGRESSES IN THE 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 TO HELP PRACTITIONERS ENHANCE THEIR KNOWLEDGE OF PROJECT MANAGEMENT PMI ANNUALLY HOSTS IT'S PMO SYMPOSIUM, AT WHICH ATTENDEES HAVE

THE OPPORTUNITY TO LEARN IMPORTANT INSIGHTS FROM GLOBAL INDUSTRY LEADERS VIA INFORMATIVE SESSIONS, PRESENTATIONS, INTERACTIVE SESSIONS, AND

Form 990, Part III, Line 4c:

UNIQUE LEADERSHIP EXCURSIONS

Compensated Employees, and Independent, Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless hours per compensation compensation person is both an officer from related week (list from the any hours organizations and a director/trustee) organization for related (W-2/1099-(W- 2/1099organizations MISC) MISC)

(F)

Estimated

amount of other

compensation

from the

organization and

related

0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	below dotted line)	fredual trustee director	stitutional Trustee	<u> </u>	y employee	jhest compensated plovee	inier	·		organizations
STEVE DELGROSSO CHAIR	12 00	x		×				0	0	
ANTONIO NIETO-RODRIGUEZ VICE CHAIR	6 00	x		×				0	0	
MARK DICKSON SECRETARY/TREASURER	6 00	х		х				0	0	

CHAIR					_	_	
ANTONIO NIETO-RODRIGUEZ	6 00	V	V		0	0	
VICE CHAIR		_ ^	^		٥	0	
MARK DICKSON	6 00	V	v		0	0	
SECRETARY/TREASURER		^	^			0	
DEENA CORDON BARLA	6 00						

MARK DICKSON	0 00	v		¥			0	
SECRETARY/TREASURER		^		^		0	Ü	
DEENA GORDON PARLA	6 00	Х		x		0	0	
SDOC CHAIR		^		^		0	Ŭ	
MARGARETH CARNEIRO	6 00	V			·	0	0	
		^	l	1		١	l "I	

6 00

6 00

6 00

6 00

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DIRECTOR AT LARGE

DIRECTOR AT LARGE

VICTORIA S KUMAR

DIRECTOR AT LARGE

DIRECTOR AT LARGE

DIRECTOR AT LARGE

WAGNER MAXSEN

WILLIAM SAWLE

TODD HUTCHISON

		l X	X I		1 (1	()	
SECRETARY/TREASURER		^	^			5	
DEENA GORDON PARLA	6 00	x	X		0	0	
SDOC CHAIR		^	^			3	
MARGARETH CARNEIRO	6 00	x			0	0	
DIRECTOR AT LARGE						,	
	C 00						

DEENA GORDON PARLA		×	Y		n	0	0
SDOC CHAIR		^	^			0	, , ,
MARGARETH CARNEIRO	6 00	×			0	0	0
DIRECTOR AT LARGE		^			3	,	v
J DAVIDSON FRAME	6 00						
		l X			I 0	0	0

Compensated Employees, and Independent Contractors (D) (E) Name and Title Average Position (do not check more Reportable Reportable hours per than one box, unless compensation amount of other compensation week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations for related (W-2/1099-(W-2/1099organization and Highest compensat Former MISC) MISC) organizations

(F)

Estimated

from the

related

347,432

52,219

38,843

33,338

24,410

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

6 00

6 00

6.00

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884,926

252,734

274,521

266,371

240,659

	organizations below dotted line)	Individual trustee or director	Institutional Trustee
JENNIFER THARP	6 00		
		X	

DIRECTOR AT LARGE

CATERINA LA TONA

DIRECTOR AT LARGE

DIRECTOR AT LARGE

DIRECTOR AT LARGE

DIRECTOR AT LARGE

PRESIDENT AND CEO

VP FINANCE & ADMINISTRATION

ROBERT CRAIG KILLOUGH

VP ORGANIZATION MARKETS

MARK A LANGLEY

JOSEPH J CAHILL

BRIAN WEISS

CINDY ANDERSON

VP BRAND MANAGEMENT

AL ZEITOUN

CHERYL J WALKER WAITE

......

VP PRACTITIONER CAREER DEVELOPMENT

RICARDO TRIANA

Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable hours per than one box, unless compensation amount of other compensation week (list person is both an officer from the from related and a director/trustee) organizations any hours organization

(F)

Estimated

compensation

from the

25,311

48,862

34,060

54,393

2,958

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	£							(11/ 2/1000	(14) 3 (4 000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
MICHAEL DEPRISCO	30 00				x			235,761	0	47,895
VP ACADEMIC & EDUCATIONAL	20 00							233,761	0	17,033
TODD KLEINMAN	50 00									

				_			
MICHAEL DEPRISCO	30 00						
VP ACADEMIC & EDUCATIONAL	20 00		Х		235,761	0	
TODD KLEINMAN	50 00			v	251,761	0	
VP INFORMATION TECHNOLOGY				^	251,701		
WILLIAM SCARBOROUGH	50 00			¥	275.227	0	

				X	251,761	i 01	1
VP INFORMATION TECHNOLOGY				^	231,701	Ĭ	
WILLIAM SCARBOROUGH VP LEGAL	50 00			Х	275,227	0	,
DOROTHY MCKELVY	50 00			Х	255,401	0	

Х

300,617

237,788

WILLIAM SCARBOROUGH	30 00			v	275,227	0	
VP LEGAL				^	273,227		
DOROTHY MCKELVY	50 00			×	255.401	0	
VP HUMAN RESOURCES				^	255,401		

DOROTHY MCKELVY	50 00			Х	255.401	0	
VP HUMAN RESOURCES					255,151		

......

38 00

DIRECTOR DIGITAL PRESENCE

ADVERSTISING SALES EXECUTI

GINA P JONES

DOROTHY MCKELVY	50 00			х	255.401	اه	
/P HUMAN RESOURCES				,,	200,101	1	ı
DAVID GARRETT	38 00						

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Political Campaign and Lobbying Activities

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.

OMB No 1545-0047

DLN: 93493243005197

Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

SCHEDULE C (Form 990 or 990-

EZ)

•	rtment of the Treasury al Revenue Service	71110111	www.irs.gov/		cs mscruc	ctions is at		Inspe	ction
f the	Section 501(c)(3) org Section 501(c) (other Section 527 organize e organization ans Section 501(c)(3) organization source section 501(c)(3) organization ans xy Tax) (see separ Section 501(c)(4), (4)	ganizations Coner than section 5 zations Complet wered "Yes" or rganizations that ganizations that wered "Yes" or rate instructions 5), or (6) organizations	n Form 990, Part IV, Line 4, or Form have filed Form 5768 (election unde have NOT filed Form 5768 (election n Form 990, Part IV, Line 5 (Proxy T	ete Part I-C rts I-A and C below 1990-EZ, Part VI, IIr r section 501(h)) Co under section 501(h	Do not co ne 47 (Lob emplete Pa)) Comple	mplete Part I-fobying Activite II-A Do not ete Part II-B D	3 ies), t comp o not	then blete Part II-E complete Pa	3 art II-A
	me of the organizat DJECT MANAGEMENT IN					Employer id	entifi	ication num	ıber
Par	t I-A Complet	e if the orga	nization is exempt under sect	ion 501(c) or is	a sectio		nizat	tion.	
1	Political expenditu		ızatıon's dırect and ındırect political c	ampaign activities ir	Part IV	•	\$_		
3 • • • •	Volunteer hours t I-B Complet	o if the organ	nization is exempt under sect	ion 501(c)(2)					
			-						
1 2		•	ix incurred by the organization under ix incurred by organization managers				\$_ \$		
3			tion 4955 tax, did it file Form 4720 fo			•	Ψ_	☐ Yes	
4a	Was a correction			,				□ Yes	⊔ No □ No
b									
Par	t I-C Complet	e if the orga	nization is exempt under sect	ion 501(c), exce	ept secti	on 501(c)(3	3).		
1			ed by the filing organization for section	•			\$_		
2	Enter the amount function activities		anızatıon's funds contributed to other	organizations for se	ection 527	exempt •	\$_		
3	Total exempt fund	ction expenditure	es Add lines 1 and 2 Enter here and	on Form 1120-POL,	lıne 17b	>	\$		
4	Did the filing orga	anızatıon file Forr	n 1120-POL for this year?					☐ Yes	□ No
5	organization made of political contrib	e payments For outions received	employer identification number (EIN) each organization listed, enter the ai that were promptly and directly deliv se (PAC) If additional space is neede	mount paid from the ered to a separate p	filing orga olitical org	anızatıon's fund Janızatıon, sucl	ds Al	the filing so enter the	amount
	(a) Nam	e	(b) Address	(c) EIN	filing	ount paid from organization's If none, enter -0-		(e) Amount of contributions and promp directly delived separate programmer and content of the co	received only and vered to a political If none,
2									
3									
1									
5									
5									

Schedule C (Form 990 or 990-EZ) 2016

Total lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots nontaxable amount

Grassroots lobbying expenditures

activity

Volunteers?

Media advertisements?

1

1 2

> С Total

Part IV

3

Current year

Carryover from last year

expenditure next year?

Return Reference

(b)

Amount

Yes

1

2

No

Nο

No

534,258

534,258

534,258

Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912

If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) Part III-A (6).

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Were substantially all (90% or more) dues received nondeductible by members?

Did the organization make only in-house lobbying expenditures of \$2,000 or less?

expenses for which the section 527(f) tax was paid).

Supplemental Information

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

2a

2b

2c

3

4 5

Schedule C (Form 990 or 990EZ) 2016

(a)

Yes

No

3	bid the organization agree to carry over lobbying and political expenditures from the prior year?						
Pai	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part I answered "Yes."			. , .)		
1	Dues, assessments and similar amounts from members	1		58,551,0	06		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political						

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

SCHEDULE D

For Paperwork Reduction Act Notice, see the Instructions for 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.

DLN: 93493243005197 OMB No 1545-0047

(Form 990)

► Attach to Form 990. Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** PROJECT MANAGEMENT INSTITUTE 23-1887442 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 20 C Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X Schedule D (Form 990) 2016

Cat No 52283D

 ${f d}$ Equipment .

e Other .

	edule D (Form 990) 2016									Page 2
Par	t IIII Organizations Maintaining Co	ollections of A	rt, Histori	cal Tr	easure	es, or (Other Si	milar As	sets (cont	tinued)
3	Using the organization's acquisition, accessintems (check all that apply)	on, and other rec	ords, check	any of t	he follo	wing tha	it are a si	gnıfıcant u	se of its co	llection
а	Public exhibition		d		Loan or	r exchan	ge progra	ms		
b	Scholarly research		е		Other					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and exp	lain how the	ey furth	er the o	organizat	ion's exer	npt purpos	se in	
5	During the year, did the organization solicit assets to be sold to raise funds rather than							r	☐ Yes	□ No
Pai	rt IV Escrow and Custodial Arrang Complete if the organization and X, line 21.		Form 990	, Part :	IV, line	e 9, or r	eported	an amou	nt on Forr	n 990, Part
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?	dian or other inter	mediary for	contrib	utions o	or other	assets no	t	☐ Yes	□ No
						_				
b	If "Yes," explain the arrangement in Part XI	III and complete t	he following	table		<u> </u>	_	Aı	mount	
C	Beginning balance					_	1c			
d	Additions during the year					<u> </u>	ld le			
e	Distributions during the year					<u> </u>	1f			
f -	Ending balance									
2 a	Did the organization include an amount on	Form 990, Part X,	line 21, for	escrow	or custo	odial acc	ount liabi	lity?	☐ Yes	□ No
b	If "Yes," explain the arrangement in Part XI	II Check here if t	he explanat	on has	been pr	rovided i	n Part XII	I		
Pa	rt V Endowment Funds. Complete	ıf the organızat	ion answer	ed "Ye	s" on F	Form 99	0, Part I	IV, line 1	0.	
		(a)Current yea		rıor year)Two year	s back (1) Three yea		Four years back
1a	Beginning of year balance		0		0		0		0	0
b	Contributions		0		0		0		0	0
С	Net investment earnings, gains, and losses		0		0		0		0	0
d	Grants or scholarships		0		0		0		0	0
е	Other expenditures for facilities and programs		0		0		0		0	0
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cui	rrent year end bal	ance (line 1	g, colun	nn (a)) l	held as				
а	Board designated or quasi-endowment >									
b	Permanent endowment ▶									
С	Temporarily restricted endowment ▶									
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%								
3a	Are there endowment funds not in the poss organization by	ession of the orga	nization tha	t are he	ld and a	admınıst	ered for t	he		Yes No
	(i) unrelated organizations			•					3a(i)	+
L	(ii) related organizations If "Yes" on 3a(ii), are the related organizati	one listed as we are	rod or Cal-	e e		•			3a(ii) 3b	<u> </u>
ь 4	Describe in Part XIII the intended uses of the								30	
	rt VI Land, Buildings, and Equipm Complete if the organization ans	ent.			V line	11a S4	e Form	990 Part	t X line 1	
	Description of property (a) Cost or of (investre	other basis (b)	Cost or other				ulated depi			o. Book value
1a	Land			79:	2,689					792,689
	Buildings				8,185		:	1,660,290		2,267,895
	Leasehold improvements				9,861			5,128,633		651,228

6,587,829

26,467,034

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

2,877,479

8,839,351

15,428,642

3,710,350

17,627,683

Part VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	ie organization an	swered 'Yes' on	Form 990, Part	IV, line 11b.
(a) Description of security or category (including name of security)	(b)Book value	Cos	(c)Method of val t or end-of-year m	
(1)Financial derivatives	4 4 4 0 5 3			
(2)Closely-held equity interests	4,148,52 39,894,23		C F	
(B) DEUTSCHE X-TRACKERS MSCI EUR	27,238,57			
(B)	27,230,37	<u>'</u>	·	
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. Complete if the second of the secon			n Form 990 Par	t IV line 11c
See Form 990, Part X, line 13.				
(a) Description of investment	(b) Book valu		(c) Method of val t or end-of-year m	
(1)				
(2)				
(3)				
(4)				
(5) (6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)				
Part IX Other Assets. Complete if the organization answered		Part IV, line 11d	See Form 990, Par	
(1) (a) Description	1			(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)			•	4.0
Part X Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.			IV, line IIe or I	11.
1. (a) Description of liability (1) Federal income taxes	(6)	Book value		
DEFERRED RENT LIABILITY (2)		521,593		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9) Tatal (Column (h) must equal Form 000, Part V, col (P) line 35.)	. 1	 ·		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provide the text of	► f the footnote to the	521,593 organization's fina	 ancial statements t	
organization's liability for uncertain tax positions under FIN 48 (ASC 7	'40) Check here if t	ne text of the foot	note has been pro	vided in Part XIII 🗹

Part XI

2

b

c

d

3

4

5

1

2

b

d

е 3

а

b

c

Part XIII

5

4

b

Part XII

Schedule D (Form 990) 2016

Page 4

22,826,260

183,203,340

-132,818

12,707,672

157.440.373

6,315,529

163,755,902

Schedule D (Form 990) 2015

Donated services and use of facil	•			
Recoveries of prior year grants				
Other (Describe in Part VIII)				

Net unrealized gains (losses) on investments .

2c 2d

Other (Describe in Part XIII)

Add lines 2a through 2d е Subtract line 2e from line 1 . Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Other (Describe in Part XIII)

Total expenses and losses per audited financial statements .

Donated services and use of facilities .

Prior year adjustments

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Other losses .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Other (Describe in Part XIII)

Supplemental Information

Add lines 4a and 4b . . .

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)

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

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

4a Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4b

2a

2b 2c

2d

4b

Explanation

2a

2b

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

-132.818

336,850

12,370,822

6.315.529

18,500,860

4,325,400

4c

2e

3

4c

5

2e

3

183,070,522 170,148,045

Page 5	Schedule D (Form 990) 2015							
	Part XIII Supplemental Information (continued)							
planation		Return Reference						

Schedule D (Form 990) 2016

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	INCOME TAXES THE INSTITUTE IS EXEMPT FROM U S FEDERAL INCOME TAXES UNDER SECTION 501(C)(6) INTERNAL REVENUE CODE (IRC) AND ALSO EXEMPT FROM PENNSYLVANIA INCOME TAXES REVENUE GEN ERATED FROM THE INSTITUTE'S ADVERTISING AND SALES OF MEMBERSHIP MAILING LISTS ARE NOT CONS IDERED PROGRAM ACTIVITY REVENUE BY THE INTERNAL REVENUE SERVICE THIS TYPE OF INCOME IS CL ASSIFIED AS UNRELATED BUSINESS INCOME AND MAY BE SUBJECT TO INCOME TAX FOR THE YEARS ENDDE D 31 DECEMBER 2016 AND 2015, THERE WAS NO UNRELATED BUSINESS INCOME TAX DUE MANAGEMENT EV ALUATED THE INSTITUTE'S TAX POSITIONS AND CONCLUDED THAT THE INSTITUTE HAD TAKEN NO UNCERT AIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS CONSEQUENTLY, NO AC CRUAL FOR INTEREST AND PENALTIES WAS DEEMED NECESSARY FOR THE YEARS ENDED 31 DECEMBER 2016 AND 2015. THE INSTITUTE FILE TAX RETURNS IN THE U.S FEDERAL JURISDICTION GENERALLY, THE INSTITUTE IS NO LONGER SUBJECT TO INCOME TAX EXAMINATION BY THE U.S FEDERAL OR STATE TAX AUTHORITIES FOR YEARS BEFORE 2013. THE INSTITUTE'S FOR-PROFIT SUBSIDIARIES THAT ARE SUBJECT TO INCOME TAXES INCLUDE PROVISIONS FOR INCOME TAX EXPENSE AND DEFERRED TAX ASSETS AND L IABILITIES WHICH ARE CALCULATED USING MANAGEMENT'S BEST ASSESSMENT OF ESTIMATED FUTURE TAX ES 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 WHI CH IT OPERATES THIS PROCESS INVOLVES ESTIMATING THE ACTUAL CURRENT TAX BURISDICTIONS IN WHI CH IT OPERATES THIS PROCESS INVOLVES ESTIMATING THE ACTUAL CURRENT TAX BURISDICTIONS TOGETH ER WITH ASSESSING TEMPORARY DIFFERENCES RESULTING FROM DIFFERING TREATMENT OF CERTAIN ITEM S FOR TAX AND ACCOUNTING PURPOSES THESE TEMPORARY DIFFERENCES RESULT IN DEFERRED TAX ASSETS TO THE EXT ENTO THE INSTITUTE THEN ASSESSES THE LIKELIHOOD THAT THE DEFERRED TAX ASSETS WILL BE RECOVERED FROM PUTURE TAXABLE INCOME THE INSTITUTE RECOGNIZES DEFERED TAX ASSETS TO THE EXT ENTO THAT THE INSTITUTE BELIEVES THESE ASSETS ARE

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	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 DE TERMINED THAT THE EARNINGS WILL NO LONGER BE INDEFINITELY INVESTED OUTSIDE THE UNITED STAT ES

_ _ _

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 3,050,978 INCOME FROM CONSOLIDATED AFFILIATE - PMI EDUCATIONAL FOUNDATION 795,348 INCOME FROM CONSOLIDATED AFFILIATES - PMI EUROPE AND SUBSIDIARIES 479,074

S

Supplemental Information	
Return Reference	Explanation
	RENTAL EXPENSE -223,321 INTEREST INCOME FROM CONSOLIDATED SUBSIDIARIES 79,202 SOFTWARE LICENSE/SUPPORT REVENUE FROM CONSOLIDATED SUBS 11,301

Supplemental Information Return Reference Explanation PART XII, LINE 2D - OTHER RENTAL EXPENSES 223,321 COST OF GOODS SOLD 3,050,978 EXPENSES FROM CONSOLIDATED AFFILIATES ADJUSTMENTS -PMI EUROPE AND SUBSIDIARIES 5.453,154 EXPENSE FROM CONSOLIDATED AFFILIATE - PMI EDUCATIONAL FOUNDATION 3.643.369

Supplemental Information Return Reference Explanation PART XII, LINE 4B - OTHER EXPENSE TO CONSOLIDATED AFFILIATE - PMI EDUCATIONAL FOUNDATION 2,923.442 INTERCOMPANY BAD ADJUSTMENTS DEBT 3,297,087 ACTIVITY RELATED TO CONSOLIDATED SUBSIDIARIES 95,000

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493243005197 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2016 ► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. Open to Public ► Attach to Form 990. ► See separate instructions. Department of the Treasury Inspection ▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization Employer identification number PROJECT MANAGEMENT INSTITUTE 23-1887442 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) 3 (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the region (by type) (e.g., program service, describe for and investments employees, agents, fundraising, program and independent specific type of in region region contractors in services, investments, grants service(s) in region to recipients located in the region region) See Add'l Data 731,438 3a Sub-total 10 60 26,555,200 **b** Total from continuation sheets to Part I 10 60 27,286,638 c Totals (add lines 3a and 3b) Cat No 50082W For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule F (Form 990) 2016

and EIN (if applicable)	grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, othe

Schedule F (Form 990) 2016							Page 3			
				ed States. Complete if	the organization ar	nswered "Yes" to Form 9				
Part III can be duplicated if additional space is needed.										
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
See Add'l Data										
		+				<u> </u>				
		+			+	 	 			
				 	 	 	 			
					<u> </u>					
					<u></u> '					
			+							
		+				<u> </u>				
		-		 	 	 	 			
ı				 '	 '	!	<u> </u>			
					<u> </u>	<u> </u>				

Sche	dule F (Form 990) 2016		Page 4
Par	t 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 Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)		
	Instructions for Forms 5520 and 5520 Pry	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign		
	Corporations (see Instructions for Form 5471)	✓ Yes	□No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)		
	(See Instructions for Form 6005)	✓ Yes	□No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the		
	organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)	✓ Yes	□No

scheaule F (Foi	rm 990) 2016 Page 5
P a m	upplemental Information rovide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; mounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting nethod); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide ny additional information (see instructions).
Return Reference	Explanation

Additional Data

AFRICIA

SOUTH AMERICA

Software ID: Software Version:

EIN: 23-1887442

263,558

Name: PROJECT MANAGEMENT INSTITUTE

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

0

(a) Region	offices in the region	employees or agents in region	in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	is a program service, describe specific type of service(s) in region	for region
EUROPE	0	0	PROGRAM SERVICE	GLOBAL SEMINARSWORLD	268,373
MIDDLE EAST AND NORTH	n	0	PROGRAM SERVICE	GLOBAL SEMINARSWORLD	37,946

0 PROGRAM SERVICE

LEADERSHIP INSTITUTE

MEETING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) CENTRAL AMERICA AND THE 0 PROGRAM SERVICE ACADEMIC WORKSHOP 5.491 CARIBBEAN **EUROPE** 0 PROGRAM SERVICE ACADEMIC WORKSHOPS 29.403 EAST ASIA AND THE PACIFIC 0 PROGRAM SERVICE IACADEMIC WORKSHOPS 16,787

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) SOUTH AMERICA 0 PROGRAM SERVICE ACADEMIC WORKSHOPS 58.698 EUROPE 0 PROGRAM SERVICE IACADEMIC WORKSHOPS 51,182 FUROPE 0 PROGRAM SERVICE GLOBAL CONGRESS EMEA 2,662,736 AND LEADERSHIP INSTITUTE MEETING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) **EUROPE** 0 PROGRAM SERVICE GLOBAL EXECUTIVE 529.340 COUNCIL SOUTH AMERICA 0 PROGRAM SERVICE CERTIFICATION EXAM 198.290 DEVELOPMENT NORTH AMERICA 0 PROGRAM SERVICE CERTIFICATION EXAM 22,637 DEVELOPMENT

Form 990 Schedule F Part I - Activities Outside The United States (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures (a) Region in region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) **EUROPE** 0 PROGRAM SERVICE CERTIFICATION EXAM 355.809 DEVELOPMENT EAST ASIA AND THE PACIFIC 0 PROGRAM SERVICE CERTIFICATION EXAM 231.872 DEVELOPMENT EAST ASIA AND THE PACIFIC PROGRAM SERVICE MEMBER AND CHAPTER 1.055.264 SUPPORT

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) **EUROPE** PROGRAM SERVICE REGIONAL MARKETING 255.359 SUPPORT SOUTH AMERICA PROGRAM SERVICE CHAPTER DEVELOPMENT 543.704 IAND SUPPORT **EUROPE** 1 PROGRAM SERVICE OUTREACH AND 1,401,739 ADVOCACY

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 1 PROGRAM SERVICE SOFTWARE SUPPORT 80.000 EUROPE **EUROPE** 1 PROGRAM SERVICE HONORARIA 66,880 FAST ASIA AND THE PACIFIC 1 SUPPORT SERVICE 23,076

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i e , is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) 1 SUPPORT SERVICE 247.360 EUROPE EAST ASIA AND THE PACIFIC 1 SUPPORT SERVICE 19,711 SOUTH ASIA 1 SUPPORT SERVICE 6.724

Form 990 Schedule F Par	t I - Activities	Outside The U	Inited 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
CENTRAL AMERICA AND THE CARIBBEAN	0	1	PROGRAM SERVICE	CERTIFICATION EXAM DELIVERY	144,800
EAST ASIA AND THE PACIFIC	0	1	PROGRAM SERVICE	CERTIFICATION EXAM DELIVERY	6,528,737
EUROPE	0	1	PROGRAM SERVICE	CERTIFICATION EXAM DELIVERY	2,260,781

Form 990 Schedule F Par	t I - Activities	Outside The U	Jnited 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
MIDDLE EAST AND NORTH AFRICIA	0	1		CERTIFICATION EXAM DELIVERY	762,918
NORTH AMERICA	0	1		CERTIFICATION EXAM DELIVERY	725,786
RUSSIA & NEWLY INDEPENDENT STATES	0	1		CERTIFICATION EXAM DELIVERY	69,094

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures in region (by type) (i e , offices in the employees or is a program service, for region fundraising, program describe specific type of agents in region service(s) in region services, grants to region recipients located in the region) PROGRAM SERVICE CERTIFICATION EXAM 624.848 SOUTH AMERICA DELIVERY SOUTH ASIA PROGRAM SERVICE CERTIFICATION EXAM 571.506 DELIVERY SUB-SAHARAN AFRICIA 1 PROGRAM SERVICE CERTIFICATION EXAM 430.290 DELIVERY

Form 990 Schedule F Par	t I - Activities	Outside The L	Jnited 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	PROGRAM SERVICE	CHAPTER DEVELOPMENT AND OUTREACH	2,208,267
EAST ASIA AND THE PACIFIC	4	20		CHAPTER DEVELOPMENT & OUTREACH	3,416,067
MIDDLE EAST AND NORTH AFRICIA	1	4		CHAPTER DEVELOPMENT & OUTREACH	487,111

Form 990 Schedule F Part	t I - Activities	Outside The U	Inited 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		CHAPTER DEVELOPMENT & OUTREACH	624,494

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement appraisal, assistance applicable) assistance other) **IEAST ASIA &** RESEARCH 25,000 CHECK N/A N/A THE PACIFIC IGRANT IEUROPE RESEARCH 16.666 CHECK N/A N/A IGRANT

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (g) Amount of (f) Manner of valuation (d) Purpose of I (e) Amount of (a) Name of section (c) Region cash non-cash (book, FMV. and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) INORTH RESEARCH 50,000 CHECK IN/A IN/A AMERICA IGRANT EUROPE RESEARCH 16.666 CHECK IN/A IN/A IGRANT

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (q) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region non-cash (book, FMV, cash and EIN(If cash grant organization grant non-cash disbursement appraisal, assistance applicable) assistance other) **IEAST ASIA &** RESEARCH 16,666 CHECK N/A N/A THE PACIFIC IGRANT **IEAST ASIA &** RESEARCH 16.467 CHECK N/A N/A THE PACIFIC IGRANT

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (book, FMV, (c) Region non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** RESEARCH 16,668 CHECK N/A N/A IGRANT IEUROPE RESEARCH 33,334 CHECK N/A N/A IGRANT

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description (b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (book, FMV, (c) Region non-cash cash and EIN(If cash grant organization grant non-cash disbursement assistance appraisal, applicable) assistance other) **IEUROPE** RESEARCH 16,667 CHECK N/A N/A IGRANT IEUROPE RESEARCH 50,000 CHECK N/A N/A IGRANT

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description . l(b) IRS codel (f) Manner of (a) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, cash non-cash and EIN(If organization arant cash grant non-cash disbursement assistance appraisal, applicable) assistance other) RESEARCH 16.666 CHECK **IEAST ASIA &** N/A N/A THE PACIFIC IGRANT

Form 990 Schedule F	Part III - Gra	nts and Ass	sistance to I	ndividuals Outsi	de The U S		
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
EDUCATIONAL- FOR INDIVIDUALS TO ATTEND THE PMI LEADERSHIP INSTITUTE MEETING 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 SKILLSENHANCEMENT THE PMI REGIONAL MENTOR PROGRAM FACILITATES THE DEVELOPMENTAND ENHANCEMENT REGIONAL MEETING SUPPORT PROVIDESFINANCIAL SUPPORT PROVIDESFINANCIAL SUPPORT TO PMI CHAPTERS TO CONDUCT REGIONAL MEETINGS THATEXPAND GLOBAL KNOWLEDGE SHARING AT THE LOCAL LEVEL THROUGH LEADERSHIPINSTITUTE INVOLVEMENT WHILE MAINTAINING THE REGION	CENTRAL AMERICA AND THE CARIBBEAN	13	20,000	CHECK		N/A	N/A
EDUCATIONAL- FOR 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 THE PMI REGIONAL MENTOR PROGRAM FACILITATES THE DEVELOPMENT AND ENHANCEMENT 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	EAST ASIA AND THE PACIFIC	33	48,000	CHECK		N/A	N/A

Form 990 Schedule	F Part III - (Grants and	Assistance to	Individuals Out	side The U S		
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
EDUCATIONAL- FOR INDIVIDUALS TO ATTEND THE PMI LEADERSHIP INSTITUTE MEETING 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 TREGIONAL 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	EUROPE	33	50,701	CHECK		N/A	N/A
INDIVIDUALS TO	MIDDLE EAST & NORTH AFRICA	10	15,000	CHECK		N/A	N/A

Form 990 Schedule	e F Part III - Gr	ants and A	ssistance to	Individuals Outs	ide The U S		
(a) Type of grant or assistance	(b) Region	(c)Number of	(d) Amount of cash grant	(e) Manner of cash	(f) Amount of non-cash	(g) Description of non-cash	(h) Method of valuation (book,
assistance		recipients	or cash grant	disbursement	assistance	assistance	FMV, appraisal,
EDUCATIONAL- FOR		16	25,000	CHECK		N/A	other) N/A
INDIVIDUALS TO	NORTH AMERICA	10	25,000	CHECK		IN/A	IN/A
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							
EDUCATIONAL- FOR INDIVIDUALS TO	RUSSIA & THE NEWLY	10	14,814	CHECK		N/A	N/A
ATTEND THE PMI LEADERSHIP	INDEPENDENT						
INSTITUTE MEETING	STATES						
AND TO SUPPORT THE PMI REGIONAL							
MENTORS 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							

Form 990 Schedule F	Part III - Gra	ants and As	sistance to 1	Individuals Outs	ide The U S		
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
EDUCATIONAL- FOR INDIVIDUALS TO ATTEND THE PMI LEADERSHIP INSTITUTE MEETING 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 SKILLSENHANCEMENT THE PMI REGIONAL MENTOR PROGRAM FACILITATES THE DEVELOPMENTAND ENHANCEMENT OF PROJECT MANAGEMENT REGIONAL MEETING SUPPORT PROVIDESFINANCIAL SUPPORT TO PMI CHAPTERS TO CONDUCT REGIONAL MEETINGS THATEXPAND GLOBAL KNOWLEDGE SHARING AT THE LOCAL LEVEL THROUGH LEADERSHIPINSTITUTE INVOLVEMENT WHILE MAINTAINING THE INDIVIDUALITY OF THE REGION	SOUTH AMERICA	47		CHECK			N/A
EDUCATIONAL - FOR INDIVIDUALS TO ATTENDTHE PMI LEADERSHIP INSTITUTE MEETING THE PMI LEADERSHIP INSTITUTEMEETING PROVIDES AN INVALUABLE OPPORTUNITY TO ACCESS LEADERSHIP ANDPROFESSIONAL DEVELOPMENT, NETWORKING OPPORTUNITIES AND SKILLSENHANCEMENT	SOUTH ASIA	24	34,978	CHECK		N/A	N/A

Form 990 Schedule	F Part III - C	rants and	Assistance to	Individuals Out	side The U S		
(a) Type of grant or assistance	(b) Region	(c)Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
TRIDTI (TDIIALC TO	SUB-SAHARAN AFRICA	14	21,000	CHECK		N/A	N/A

efile GRAPHIC print - DO N	NOT PROCESS	As Filed Data -					DLN: 93493243005197
Schedule I (Form 990)	(Frante and Other Accietance to Organizations						OMB No 1545-0047 2016
Department of the Treasury Internal Revenue Service	► Inform		Open to Public Inspection				
Name of the organization PROJECT MANAGEMENT INSTITUT						23-188	er identification number 7442
Part I General Informa 1 Does the organization maint			he grants or assistance, t	he grantees' eligibility	for the grants or assistan	ce, and	
the selection criteria used to Describe in Part IV the orga						,	✓ Yes □ No
		estic Organizations an can be duplicated if addi		nts. Complete if the o	ganızatıon answered "Yes	" on Form 990, Pa	art IV, line 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descrip non-cash ass	
(1) PMI EDUCATIONAL FOUNDATION 14 CAMPUS BOULEVARD NEWTOWN SQUARE, PA 19073	23-2630701	501(C)(3)	4,338,641		N/A	N/A	TO PROMOTE PROJECT MANAGEMENT PRINCIPLES GLOBALLY TO COMMUNITIES INCLUDING STUDENTS, NON-PROFIT ORGANIZATIONS AND SOCIETY AT LARGE
(2) UNIVERSITY OF HOUSTON CLEAR LAKE 2700 BAY AREA BLVD HOUSTON, TX 77058	74-6001399	501(C)(3)	8,495		N/A	N/A	RESEARCH GRANT
2 Enter total number of section		-					2
3 Enter total number of other For Paperwork Reduction Act Notice				Cat No 50055		<u></u>	Schedule I (Form 990) 2016

76.000

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

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Schedule I (Form 990) 2016

Schedule I (Form 990) 2016

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

Part III

(1)

(3)

NETWORKING OPPORTUNITIES AND SKILLS ENHANCEMENT			
(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	35,540	N/A	N/A
(2)			

N/A

N/A

(4)

(5)

(6)

(7)

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

PMI HAS A PROJECT MONITORING SYSTEM IN PLACE TO MONITOR THE USE OF GRANT FUNDS THE GUIDELINES ARE OUTLINED IN BOTH THE RESEARCH AGREEMENT PART I, LINE 2 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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493243005197 **Compensation Information** OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest 2016 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 Open to Public Department of the Treasury www.irs.gov/form990. Inspection Internal Revenue Service **Employer identification number** Name of the organization PROJECT MANAGEMENT INSTITUTE 23-1887442 Questions Regarding Compensation Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use **✓** Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e g , maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain **1**b Yes 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III $\overline{\mathbf{v}}$ Compensation committee Written employment contract $\overline{\mathbf{v}}$ Independent compensation consultant Compensation survey or study $\overline{\mathbf{v}}$ Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a No 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Yes 4c Participate in, or receive payment from, an equity-based compensation arrangement? No If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a 5b Any related organization? If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any 6 compensation contingent on the net earnings of The organization? 6a 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 A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 8 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2016 Cat No 50053T

Schedule J (Form 990) 2016

Part III Supplemental Inform	nation
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
Return Reference	Explanation
	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 EXPENSES FROM THIS TYPE OF REQUIEST WILL BE PAID BY THE TRAVELER AND MUST BE PAID TO PMI AT THE TIME OF CONFIRMATION

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Schedule J (Form 990) 2016

Schedule J (Form 990) 2016

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 IA 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 ISPOUSAL 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

Additional Data

(A) Name and Title

1MARK A LANGLEY

1JOSEPH J CAHILL

VP ORGANIZATION MARKETS 3BRIAN WEISS

4CINDY ANDERSON

5MICHAEL DEPRISCO

VP ACADEMIC & EDUCATIONAL

6TODD KLEINMAN

7WILLIAM SCARBOROUGH

8DOROTHY MCKELVY

9DAVID GARRETT

10GINA P JONES

EXECUTI

ADVERSTISING SALES

DIRECTOR DIGITAL PRESENCE

VP HUMAN RESOURCES

VP INFORMATION TECHNOLOGY

VP LEGAL

VP BRAND MANAGEMENT

VP FINANCE & ADMINISTRATION

DEVELOPMENT

PRESIDENT AND CEO

2ROBERT CRAIG KILLOUGH (1)

VP PRACTITIONER CAREER

(ı)

(1)

(II)

(II)

(1)

(1)

(II)

(i)

 $|(\Pi)|$

(1)

(II)

(1)

(II)

(1)

(III)

(i) Base Compensation

615,602

231,943

226,795

224,473

204,208

199,792

216,300

226,094

213,273

176,702

127,851

Software Version:

Software ID:

(ii)

Bonus & incentive

compensation

EIN: 23-1887442

(iii)

Other reportable

compensation

42,271

2,706

6,577

749

2,997

2,516

3,138

7,401

3,505

897

381

(F) Compensation in

column (B)

reported as deferred on

prior Form 990

benefits

34,212

34,174

25,146

14,788

11,266

31,491

9,904

33,732

18,937

36,959

2,958

other deferred

compensation

313,220

18,045

13,697

18,550

13,144

16,404

15,407

15,130

15,123

17,434

(B)(i)-(D)

1,232,358

304,953

313,364

299,709

265,069

283,656

277,072

324,089

289,461

355,010

240,746

	Name: F	PROJECT MANAGEME	ENT INSTITUTE		
00, Schedule J,	Part II - Officers, Directors, Trustees, Key	y Employees, and h	lighest Compensate	d Employees	

m 990, Schedule J,	Part II - Officers,	Directors, Trustee	es, Key Employees, ar	nd Highest Compensate	ed Employees

n 990, Schedule J,	Part II - Officers, Directors, Trustees, Key Employees, and	Highest Compensate	d Employees	
Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns

								_
orm 990, Schedule J,	Part II - Officers,	Directors,	Trustees,	Key Emplo	yees, and Hid	ghest Com	pensated Emp	loyees

227,053

18,085

41,149

41,149

33,454

33,453

32,323

41,732

38,623

123,018

109,556

Form 990	, Scneaule J,	Part II - Officers,	Directors,	Trustees, Key	r Empioyees, an	ia Hignest Com	pensated	Employees	
(0) 11	1	(5) 5	6144.0	1/ 1000 14700		(6) 5 .		453 N	

efile GRAPHIC	print - DO NOT PROCESS	As Filed Data -		DLN	l: 93493243005197
SCHEDULE (Form 990 or 99 EZ)	Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.			2016 Open to Public Inspection	
Name of the organiz PROJECT MANAGEMEN	ation TINSTITUTE , Supplemental Informatio	n		Employer iden 23-1887442	tification number
Return Reference			Explanation		
FORM 990, PART I, LINE 6 DESCRIPTION OF ESTIMATE PROCESS	9,020 DEDICATED VOLUNTEEL BOARD MEMBERS OR ON BOARD MEMBERS OR ON BOARD THAT SHAPE THE FUTURE OF PROJECT MANAGEMENT MAN VOLUNTEER RELATIONSHIP IN VOLUNTEER OPPORTUNITIES ACTIVITIES AND STATISTICS,	ARD SUPPORT COM JESTION DEVELOPN THE PROFESSION, IUALS, BOOKS AND MANAGEMENT SYST THROUGHOUT THE	MITTEES, ON MEMBER ADVIS MENT AND THE DEVELOPMEN BY WRITING AND PUBLISHING PERIODICALS, OR OTHER IMF EM (VRMS) AS A RESOURCE IS E WORLD, AND USES THIS SYS	ORY GROUPS, T OF PROFESS G WHITE PAPEI PORTANT WORI FOR ITS MEMBI STEM TO TRAC	THROUGH IONAL STANDARDS RS AND REVIEWING K PMI UTILIZES ITS ERS TO SEARCH FOR

990 Schedule O, Supplemental Information

Return

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

Explanation

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	THE INSTITUTE MAINTAINS THE FOLLOWING CLASSES AND QUALIFICATIONS OF MEMBERSHIP, EACH CLASS WITH THE RIGHTS HEREINAFTER PROVIDED 1 MEMBER - REGULAR ANY PERSON WHO IS INTERESTED IN, OR ENGAGED IN, THE PRACTICE, TEACHING, OR OTHER APPLICATION OF PROJECT MANAGEMENT, INCLUDING RESEARCH CONCERNING PROJECT MANAGEMENT, MAY QUALIFY AS A REGULAR MEMBER OF THE INSTITUTE REGULAR MEMBERS SHALL HAVE VOTING RIGHTS AND MAY HOLD ANY ELECTED OR APPOINTED OFFICE IN THE INSTITUTE 2 MEMBER - RETIREE ANY PERSON WHO HAS BEEN A PMI MEMBER IN GOOD STANDING FOR FIVE (5) CONSECUTIVE YEARS, AND WHO HAS RETIRED FROM ACTIVE EMPLOYMENT, QUALIFIES FOR PMI RETIREE MEMBERSHIP RETIREE MEMBERS SHALL HAVE ALL RIGHTS OF THE REGULAR MEMBER CLASS 3 MEMBER - STUDENT ANY PERSON CURRENTLY REGISTERED IN A DEGREE GRANTING PROGRAM AT AN ACCREDITED, OR GLOBALLY EQUIVALENT, COLLEGE/UNIVERSITY, MAY QUALIFY FOR PMI STUDENT MEMBERSHIP STUDENT MEMBERS SHALL NOT BE ENTITLED TO EXERCISE ANY VOTING RIGHTS, AND SHALL NOT HOLD ANY ELECTED OFFICE IN THE INSTITUTE, EXCEPT THAT STUDENT MEMBERS MAY HOLD OFFICE AND VOTE WITHIN A PMI COMPONENT, AS MAY BE GRANTED IN THE COMPONENT BYLAWS 4 MEMBER - ASSOCIATE ANY PERSON WHO JOINS THE INSTITUTE TO ACCESS LIMITED PRIVILEGES PURSUANT TO POLICIES DULY ADOPTED BY THE PMI BOARD OF DIRECTORS MEMBER - ASSOCIATE SHALL NOT BE ENTITLED TO EXERCISE ANY VOTING RIGHTS, AND SHALL NOT BE A CANDIDATE FOR, NOR HOLD ANY ELECTED OR APPOINTED OFFICE IN THE INSTITUTE

Return Explanation

990 Schedule O, Supplemental Information

FORM 990, PART VI, SECTION A, LINE 7B

990 Schedule O, Supplemental Information

Return Explanation

Reference

FORM 990,	A DRAFT OF THE FORM 990 IS PREPARED BY PMI'S ACCOUNTING DEPARTMENT. AFTER REVEIW BY PMI'S EXTERNAL
PART VI,	TAX CONSULTANTS, THE DRAFT IS REVIEWED BY PMI'S FINANCE AND LEGAL STAFF THE FOLLOWING DRAFT IS
SECTION B,	PRESENTED FOR REVIEW TO PMI'S PRESIDENT AND CHIEF EXECUTIVE OFFICER AND THEN TO THE BOARD'S AUDIT
LINE 11B	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
Return Reference FORM 990, PART VI, SECTION B, LINE 12C	PMI MEMBERS AND NON-MEMBERS WORKING ON PMI VOLUNTEER GROUPS ARE BOUND BY THIS POLICY, INCL UDING BUT NOT LIMITED TO MEMBERS OF THE PMI BOARD, BOARD SUPPORTING COMMITTEES, TASK FORC ES AND OTHER GROUPS CHARTERED BY THE PMI BOARD (AS DEFINED IN THE RULES OF THE BOARD), MEM BER ADVISORY GROUPS (MAG), PROJECT ACTION TEAMS (PATS), AWARDS COMMITTEES, EDITORIAL BOARD S, STANDARDS PROGRAM PROJECT TEAMS, CERTIFICATION DEPARTMENT ITEM WRITING SESSIONS, RESEAR CH GROUPS AND OPEN WORKING SESSIONS KEY EMPLOYEES AND OTHER STAFF OF THE INSTITUTE ARE AL SO 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 SUB JECT TO THE OTHER REQUIREMENTS OF THIS POLICY AS WELL AS THE STAFF CODE OF CONDUCT PARTIC IPATION ON A PMI VOLUNTEER GROUP
	CONSTITUTES ACCEPTANCE OF THE TERMS OF THIS POLICY AND IT S REQUIREMENTS UNLESS OTHERWISE SPECIFIED, AT LEAST ONCE A YEAR OR AT THE BEGINNING OF PA RTICIPATION ON ANY PMI VOLUNTEER GROUP, PARTICIPATING INDIVIDUALS WILL COMPLETE THE PMI CO NFLICT 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 PAR TICIPATION IN AN ADDITIONAL PMI VOLUNTEER GROUP DOES NOT REQUIRE THE DISCLOSURE OF ADDITIO NAL INFORMATION HOWEVER, THE INDIVIDUAL WILL INSTEAD COMPLETE THE INFORMATION RELEASE POR TION 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 T HEIR QUESTIONNAIRE AND WILL ALLOW THE GROUP LEADER TO ACCESS THE QUESTIONNAIRE FROM THE LE GAL DEPARTMENTS FILES 1 AUTHORITY THE PMI CODE OF ETHICS AND PROFESSIONAL CONDUCT REQUI RES THAT INDIVIDUALS WILL ABIDE BY THE BYLAWS, POLICIES, RULES, REQUIREMENTS, AND PROCEDUR ES OF PMI, AND WILL NOT KNOWINGLY ENGAGE OR ASSIST IN ACTIVITIES INTENDED TO COMPROMISE THE INTERGRITY, REPUTATION, PROPERTY, AND/OR LEGAL RIGHTS OF THE INSTITUTE 2 DISCLOSURE IN DIVIDUALS ACCOUNTABLE UNDER THIS POLICY MUST IDENTIFY THOSE SITUATIONS WHERE THEY HAVE A C ONFLICT 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 D ISCLOSURE 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 PARTIC IPATING 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 DISCLOSUPA 4 DISCLOSURE REVIEW THE CON FLICT OF INTEREST QUESTIONNAIRE, TO BE COMPLETED BY THE INDIVIDUAL PARTICIPATING ON A PMI VOLUNTEER

Return Reference	Explanation
Reference	
FORM 990, PART VI, SECTION B, LINE 12C	ROED TO THE PMI STAFF MEMBER WHO IS RESPONSIBLE FOR THE GROUP, OR IN THE CASE OF A BOARD S PONSORED 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 COMM ITTEES 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 G ENERAL COUNSEL 5 POSSIBLE REMEDIES REMEDIES REMEDIAL ACTION FOR DISCLOSED CONFLICTS OR POSSIBLE CONFLICTS OF INTEREST MAY INCLUDE BUT ARE NOT LIMITED TO THE FOLLOWING RECUSAL FROM ANY D ECISION DEVELOPED BY THE GROUP RECUSAL FROM THE PART OF THE PROCESS WHERE A CONFLICT EXIS TS, SUCH AS NOT REVIEWING A COMPETITORS AWARD SUBMITTAL REPLACEMENT ON THE GROUP PARTICI PATION AS A SUBJECT MATTER EXPERT BUT NOT IN DISCUSSIONS OR DELIBERATIONS OF POLICY USAGE CARE MUST BE USED TO AVOID OVERUSE OR MISUSE OF THIS POLICY THE INSTITUTE REQUIRES INTE GRITY TO FUNCTION PROPERLY BUT OVER-USE OF THE REQUIREMENT TO COMPLETE THE CONFLICT OF INT EREST QUESTIONNAIRE MAY DISCOURAGE PARTICIPATION BY OTHERWISE QUALIFIED VOLUNTEERS AND RES ULT IN VOLUNTEERS PERCEIVING THEY ARE BEING HARASSED 7 FORMS ALL INDIVIDUAL PMI MEMBERS, NON-MEMBERS, AND STAFF MEMBERS PARTICIPATION BY OTHERWISE QUALIFIED VOLUNTEERS AND RES ULT IN VOLUNTEERS PERCEIVING THEY ARE BEING HARASSED 7 FORMS ALL INDIVIDUAL PMI MEMBERS, NON-MEMBERS, AND STAFF MEMBERS PARTICIPATION BY OTHERWISE QUALIFIED VOLUNTEER GROUPS WILL COMPLETE AND S IGN THE PMI CONFLICT OF INTEREST QUESTIONNAIRE THE BOARD OF DIRECTORS, CHIEF EXECUTIVE OF FICER, AND VICE PRESIDENTS (FOR PROGRAMS THEY ARE RESPONSIBLE FOR), OTHER GROUP SHEY SPONSOR IT IS ANTICIPATED THAT THE STANDARD FORM ATTERES

Return Explanation
Reference

LINE 12C

FORM 990, COMMITTEE UNDER PMI'S MEMBER ETHICS CASE PROCEDURES PART VI, SECTION B.

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

LINE 19

Reference	
FORM 990,	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS ARE
PART VI,	AVAILABLE TO THE GENERAL PUBLIC FOR THE SAME PERIOD OF DISCLOSURE AS SET FORTH IN SECTION 6104(D)
SECTION C,	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

Explanation

Return Explanation

Reference	
FORM 990,	GENERAL CONSULTING 8,680,507 TEMPORARY STAFF 1,279,038 REGIONAL SERVICE CENTERS 2,113,577 CONTRACT
DADTIV	LABOR FOCCOS TRANSLATION SERVICES SAASAS EMPLOYEE SEARON FEED ASS SAS EDITORIAL SERVICE A AFA ASS

PART IX. LABOR 5,866,086 TRANSLATION SERVICES 611,846 EMPLOYEE SEARCH FEES 422,019 EDITORIAL SERVICE 1,451,403

990 Schedule O, Supplemental Information

LINE 11G

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R**

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

DLN: 93493243005197

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

► Attach to Form 990.

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

Inspection

Name of the organization PROJECT MANAGEMENT INSTITUTE				Employer iden	tification number		
PROJECT MANAGEMENT INSTITUTE				23-1887442			
Part I Identification of Disregarded Entities Complete	ıf the organization answere	ed "Yes" on Form	990, Part IV, line 3	33.			
(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (stat or foreign country)		(e) End-of-year assets	(f) Direct controlling entity		
(1) PMI AUSTRALASIA PTY LIMITED LEVEL 20 TOWER 2 DARLING PARK 201 SYDNEY NSW 2001 AS 98-0607905	CONDUCT PROJECT MANAGEMENT ADVOCACY PROGRAMS WITH REGIONAL ORGANIZATIONS	AS	18,416	203,404	PROJECT MANAGEMENT INSTITUTE		_
(2) PMI (BEIJING)PROJECT MANAGEMENT TECHNOLOGY CO LTD ROOM 1107 11TH FLOOR BEIJING SUN CHAOYANG DISTRICT, BEIJING 100080 CH 98-0609885	REGIONAL MARKETING SUPPORT, CONDUCT PROJECT MANAGEMENT OUTREACH AN ADVOCACY		3,042,100	2,104,260	PROJECT MANAGEMENT INST	TTUTE	
(3) PROJECT MANAGEMENT INSTITUTE KHALEEJI FZ-LLC BLOCK NO 6 FIRST FLOOR F-07 DUBA DUBAI AE 98-1162223	REGIONAL CHAPTER DEVELOPMENT AND SUPPORT TRAINING PROGRAMS	ΛE	606,777	202,260	PMI AUSTRALASIA PTY LIMIT	ED	
(4) PMI MANAGEMENT SINGAPORE PTE LTD LEVEL 39 10 MARINA BLVD MARINA BA 018983 SN 98-1174043	REGIONAL CHAPTER DEVELOPMENT AND SUPPORT	SN	565,488	267,041	PROJECT MANAGEMENT INST	TTUTE	
(5) PMI MANAGEMENT EUROPE SQUARE DE MEEUS 35 3RD FLOOR AT S BRUSSELS BE 98-1219090	REGIONAL CHAPTER DEVELOPMENT AND SUPPORT OUTREACH TO ACADEMIA	BE	629,641	248,189	PROJECT MANAGEMENT INST	TTUTE	
							_
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year		zation answered	"Yes" on Form 990	, Part IV, line 34	because it had one or	more	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (b)(continue)	g) on 512 (13) rolled tity?
(1)PROJECT MANAGEMENT INSTITUTE EDUCATION FOUNDATION	EXPANDING EDUCATIONAL	PA	501(C)(3)	LINE 12A, I	PROJECT MANAGEMENT	Yes	No
14 CAMPUS BOULEVARD NEWTOWN SQUARE, PA 190733299 23-2630701	OPPORTUNITIES FOR FUTURE PROJECT MANAGERS				INSTITUTE		
		<u> </u>					<u></u>
For Paperwork Reduction Act Notice, see the Instructions for Form	n 990.	Cat No 5013	5Y		Schedule R (Form	990) 20	J16

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controllin entity	(e) Predomina Income(rela unrelated excluded fi tax unde sections 5 514)	ated, total incom d, rom er	(g) Share of end- e of-year assets	Disprop alloca	tions?	(i) Code V-UB amount in box 20 of Schedule K- (Form 1065	Gen mai pai -1	(1) neral or naging rtner?	(k) Percentage ownership
(1) PMI ORGANIZATION CENTRE DVT LTD		CONDUCT PROJECT	IN	PROJECT	RELATED	186,650	2,165,700	Yes	No No	 	Yes	\rightarrow	99 900 9
(1) PMI ORGANIZATION CENTRE PVT LTD 302-305 3RD FLOOR BALARAMA PLOT MUMBAI 400051 IN 98-0566940		MANAGEMENT OUTREACH AND ADVOCACY WITH REGIONAL ORGANIZATIONS		MANAGEMENT INSTITUTE		,							
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											_		
											+		
												نسلا	
Part IV Identification of Related Organ because it had one or more related (a) Name, address, and EIN of related organization		ated as a corpor		trust during			nswered "Yes (f) Share of total Income	Share	(g) e of endyear assets	-of- Pe	(h) rcentag	ge	(i) Section 512 (b)(13) controlled entity?
because it had one or more related (a) Name, address, and EIN of related organization	l organizations trea (b) Primary activit	y d (state	ation or (c) Legal lomicile e or foreigiountry)	trust during Direc	the tax ye (d) tt controlling entity	(e) Type of entity (C corp, S corp,	(f) Share of total Income	Share	(g) e of end- year assets	-of- Pe	(h) rcentae vnersh	ge lip	Section 512 (b)(13) controlled entity?
because it had one or more related (a) Name, address, and EIN of related organization (1)PMI EUROPE LIMITED 82 ST JOHN STREET LONDON EC1M 4JN	l organizations trea (b)	y d (state	ation or (c) Legal lomicile e or foreigi	Direct	the tax ye (d) tt controlling entity CT GEMENT	(e) Type of entity (C corp, S corp,	(f) Share of total	Share	(g) e of end- year	-of- Pe	(h) rcenta	ge lip	Section 512 (b)(13) controlled entity?
Decause it had one or more related (a) Name, address, and EIN of related organization (1)PMI EUROPE LIMITED 82 ST JOHN STREET LONDON EC1M 4JN UK (2)HUMAN SYSTEMS ASIA PACIFIC PTY LIMITED LEVEL 2 66 CLARENCE STREET SYDNEY NSW 2000	l organizations trea (b) Primary activit	y d (state	ation or (c) Legal lomicile e or foreigiountry)	Direct n PROJEMANA INSTIT	the tax ye (d) It controlling entity CT GEMENT TUTE DLDINGS PTY	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	Share	(g) e of end- year assets	-of- Pe ov	(h) rcentae vnersh	ge IIP %	Section 512 (b)(13) controlled entity?
(a) Name, address, and EIN of related organization (1)PMI EUROPE LIMITED 82 ST JOHN STREET LONDON EC1M 4JN UK (2)HUMAN SYSTEMS ASIA PACIFIC PTY LIMITED LEVEL 2 66 CLARENCE STREET SYDNEY NSW 2000 AS (3)HUMAN SYSTEMS INTERNATIONAL LIMITED 82 ST JOHN STREET LONDON EC1M 4JN	HOLDING COMPANY BENCHMARK &	y d (state	ation or (c) Legal lomicile e or foreigountry) UK	Direct n PROJE MANA INSTITE PMI H LIMITE	the tax ye (d) It controlling entity CT GEMENT FUTE DLDINGS PTY ED	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income -2,548,434	Share	(g) e of end- year assets 4,089,1	-of- Pe ov 135 100	(h) rcentag vnersh	ge IIP %	Section 512 (b)(13) controlled entity? Yes No Yes
Decause it had one or more related (a) Name, address, and EIN of related organization (1)PMI EUROPE LIMITED 82 ST JOHN STREET LONDON EC1M 4JN UK (2)HUMAN SYSTEMS ASIA PACIFIC PTY LIMITED LEVEL 2 66 CLARENCE STREET SYDNEY NSW 2000 AS (3)HUMAN SYSTEMS INTERNATIONAL LIMITED 82 ST JOHN STREET LONDON EC1M 4JN UK (4)HUMAN SYSTEMS LIMITED 82 ST JOHN STREET LONDON EC1M 4JN UK	HOLDING COMPANY BENCHMARK & ASSESSMENT	y d (state	ation or (c) Legal omicile e or foreig ountry) UK AS	DIFECTOR OF THE PROJECT OF THE PROJE	the tax ye (d) It controlling entity CT GEMENT FUTE DLDINGS PTY ED N SYSTEMS NE LIMITED N SYSTEMS NATIONAL	ar. (e) Type of entity (C corp, S corp, or trust) C	(f) Share of total Income -2,548,434 1,295,264	Share	(g) e of end- year assets 4,089,1	-of- Pe ov 135 100 1314 100 1214 100	(h) rcentagy vnersh	ge IIP %	Section 51: (b)(13) controlled entity? Yes No Yes Yes
because it had one or more related (a) Name, address, and EIN of	HOLDING COMPANY BENCHMARK & ASSESSMENT BENCHMARK & ASSESSMENT	eted as a corpor	ation or (c) Legal lomicile e or foreig ountry) UK AS	DIFECT IN THE PROJECT	the tax ye (d) It controlling entity CT GEMENT FUTE DLDINGS PTY ED N SYSTEMS NATIONAL ED JROPE	ar. (e) Type of entity (C corp, S corp, or trust) C	(f) Share of total income -2,548,434 1,295,264	Share	(g) e of end- year assets 4,089,1 341,3	-of- Pe ov 135 100 135 100 100 100 100 100 100 100 100 100 10	(h) rcentage whersh	ge 	Section 51: (b)(13) controlled entity? Yes No Yes Yes

Schedule R (Form 990) 2016

Part V Transactions With Related Organizations Complete if the organization answered "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 organization engage in any of the following transactions with one or more related organizations listed 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)	1f		No
g Sale of assets to related organization(s)	1 g		No
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)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
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)	10		No
	Ш		

k Lease of facilities, equipment, of other assets from related organization(3).	I I	- 1	
Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
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)	10		No
p Reimbursement paid to related organization(s) for expenses	1р		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	

1s No 2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds See Additional Data Table (d)

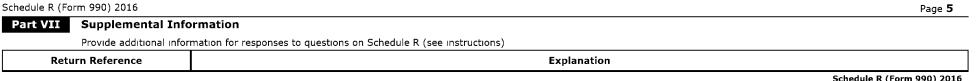
(a) Name of related organization (b) Transaction (c) Amount involved Method of determining amount involved

type (a-s)

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

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(a) Name, address, and EIN of entity	(b) Primary activity	l domicilo l	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	Ar or	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite)	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General o managin partner	or Ig ?	(k) Percentage ownership
			514)	Yes	No			Yes	No	1	Yes	No	
										Schedul	e R (Forn	1 99	0) 2016



Additional Data

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Software ID: **Software Version: EIN:** 23-1887442

Name: PROJECT MANAGEMENT INSTITUTE

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1,460,198

520,572

1,943,426

12,990

330,457

233,824

14,528

15,000

5,902

80,000

6,021

21,726

30,251

Orm 000	Schedule P	Part V - Trans	actions With P	elated Organiz	ations	

PROJECT MANAGEMENT INSTITUTE EDUCATIONAL FOUNDATION

HUMAN SYSTEMS ASIA PACIFIC PTY LTD

PMI ORGANIZATION CENTRE PVT LTD

HUMAN SYSTEMS INTERNATIONAL LTD

HUMAN SYSTEMS ASIA PACIFIC PTY LTD

HUMAN SYSTEMS INTERNATIONAL LTD

HUMAN SYSTEMS ASIA PACIFIC PTY LTD

HUMAN SYSTEMS INTERNATIONAL LTD

HUMAN SYSTEMS ASIA PACIFIC PTY LTD

HUMAN SYSTEMS LIMITED

PMI EUROPE LIMITED

PMI EUROPE LIMITED

PMI HOLDINGS PTY LTD

	(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1)	PROJECT MANAGEMENT INSTITUTE EDUCATIONAL FOUNDATION	В	4,652,955	CASH/NON-CASH(FMV)