Form 990

Return of Organization Exempt From Income Tax

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

2010

2010

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

The Silver Institute, Inc. Sale 16th Street, NW #303 Washington, DC 20006-4103 E Institute Terrenote: Amonder status Terrenote: Amonder status Terrenote: Amonder status Terrenote: Amonder status Silver Terrenote: Sale 2	Α	For the 2	010 calen	dar year, or tax year beginning , 2010, and ending	3		,
Remarkable Rem	В	Check if app	licable			D Employer le	dentification Number
Washington, DC 20006-4103 (202) 835-0185 (202) 835-		Address	s change	The Silver Institute, Inc.		23-71	08453
Tearmatists		Name o	change	888 16th Street, NW #303		E Telephone	number
Amended return Amen		⊢	•	Washington, DC 20006-4103		(202)	835-0185
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Tax-exempt status		Applica	ition pending			- ·	. = =
Website: www.silverinstitute.org	_			Salile AS C Above			1.03 1.00
Part Summary	<u> </u>						
Benefity describe the organization's mission or most significant activities	<u>J</u>						
1 Briefly describe the organization's mission or most significant activities. The Silver Institute's purpose is that of promoting the welfare of the silver industry by increasing the knowledge of and demand for silver products across all end users. The Silver Institute had 23 members as of year end 2010. 2 Check this box P if if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of independent voting members of the governing body (Part VI, line 1a) 6 Total number of independent voting members of the governing body (Part VI, line 1b) 7 Total unrelated business revenue from Part VIII, column (C), line 12 7 Total unrelated business revenue from Part VIII, column (C), line 12 8 Contributions and grants (Part VIII, line 1h) 9 Priogram service revenue (Part VIII, line 1h) 9 Priogram service revenue (Part VIII, line 1h) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 12 Total levenue (Part VIII, column (A), lines 3, 4, and 7d) 13 Grant and similar amounts paid (Part X, column (A), lines 1-3) 14 Benefit (Spald to or for members of Spal (Part X, column (A), line 1b) 5 Salare and similar amounts paid (Part X, column (A), line 1b) 10 Total expenses (Part IX, column (A), line 1b) 11 Total expenses (Part IX, column (A), line 2b) 12 Total level (Spald to for for members (Part X, column (A), line 2b) 13 Total expenses (Part X, line 26) 14 Benefit (Spald to for for members (Part X, column (A), line 2b) 15 Salare and similar amounts paid (Part X, column (A), line 2b) 16 Total level (Part X, line 2b) 17 Other expenses (Part X, line 2b) 17 Other expenses (Part X, line 2b) 18 Total expenses (Part X, line 2b) 19 Revenue less expenses Subtract line 12 from line 20 17 (12 / 11) 18 Signature Block 19 Preparer 19 John M. Kosciw					on 197.	M State	e of legal domicile NY
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Under penalties of perjury. We lare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of perparer has any knowledge Sign Here Michael DiRienzo Type or print name and title Print/Type preparer's name John M. Kosciw CPA Firm's name Firm's name Firm's address Firm's addre	žž	22 Ne	t assets o	fund balances Subtract line 21 from line 20		176,254	4. 320,617.
Sign Here Michael DiRienzo	Pa	art II	Signatu	rg Block			
Sign Here Michael DiRienzo	Ųne	der penalties	of perjury,	estare that I have examined this return, including accompanying schedules and statements, and to	the best of	my knowledge ar	nd belief, it is true, correct, and
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BAA For Paperwork Reduction Act Notice, see the separate instruction

	1990 (2010) The Silver Institute, Inc.	23-7108453	Page 2
<u>₽ar</u>	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission		
	The Silver Institute's purpose is that of promoting the welfare industry by incresing the knowledge of and demand for silver prousers. The Silver Institue had 23 members as of year end 2010.		l end
2	Did the organization undertake any significant program services during the year which were not listed of	on the prior	
-	Form 990 or 990-EZ? If 'Yes,' describe these new services on Schedule O	Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program self 'Yes,' describe these changes on Schedule O	ervices? Yes	X No
4	Describe the exempt purpose achievements for each of the organization's three largest program service and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a expenses, and revenue, if any, for each program service reported	es by expenses Section nd allocations to others,	501(c)(3) the total
4 8	The Silver Institute publishes and disseminates to members, anal government officials and the public, its annual report, World Si serves as the Industry's core annual statistical analysis of wor demand and remains the most widely cited work on the global mark	lver Survey, wh ld silver suppl et.	
41	The Silver Institute's General Program provides a variety of ser industry including: development of a Silver Promotion Service(for Marketing Initiative), an industry program to boost demand for severe jewelry and tableware; increasing awareness and education about	rmerly Silver terling silver silver through	the
	Silver Institute's web site, press releases and newsletters that the silver marketplace and fostering research of silver related		
,4¢	The Silver Institute's Industrial Program provides a forum for read and significant industry uses of silver and education of regulation on the positive benefits of silver. The Silver Institute monitoring program to work with members and regulators regarding nanotechnology and as a general microbial.	ulators and the put in place a	
40	d Other program services (Describe in Schedule O)		
71	(Expenses \$ including grants of \$) (Revenue \$		`
	e Total program service expenses ►		
44	e rotal brodram service exhemses		

Form 990 (2010) The Silver Institute, Inc.

Rart IV | Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Χ Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 X Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Х 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If 'Yes,' complete Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If 'Yes,' complete Schedule L. Part III 27 Х 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV X 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV Х 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M X 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M30 Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N. Part I X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes.' complete Schedule N, Part II 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 X No Yes Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is 37 treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37 X

38 BAA

Form 990 (2010)

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

Note. All Form 990 filers are required to complete Schedule O

Form 990 (2010) The Silver Institute, Inc.	23-7108453	F	Page !
Part V Statements Regarding Other IRS Filings and Tax Compliance			_
Check if Schedule O contains a response to any question in this Part V		1	
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	3	Yes	No
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
<u></u>			1
c Did the organization comply with backup withholding rules for reportable payments to vendors and report (gambling) winnings to prize winners?	1c	Х	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-			
ments, filed for the calendar year ending with or within the year covered by this return	0		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns	5 ⁷ 2b		<u> </u>
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			,,
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	-	X
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	<u>3b</u>		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other auf financial account in a foreign country (such as a bank account, securities account, or other financial account.)	thority over, a 4a		X
b If 'Yes,' enter the name of the foreign country ▶	,		
See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Acc	counts		ĺ
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	on? 5b		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the o	rganization		,,
solicit any contributions that were not tax deductible?	_ 6a		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions not tax deductible?	or gifts were 6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goo	ods and		
services provided to the payor?			
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 <u>b</u>	<u> </u>	ļ
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was r Form 8282?	required to file 7c		
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit cont	ract? 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 as required?			
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	n file a		
Form 1098-C?	7h		<u> </u>
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations	tions. Did the		
supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess holdings at any time during the year?	business 8		
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		1
b Did the organization make a distribution to a donor, donor advisor, or related person?	9 b		
10 Section 501(c)(7) organizations. Enter			
a Initiation fees and capital contributions included on Part VIII, line 12		i.	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11 Section 501(c)(12) organizations. Enter			
a Gross income from members or shareholders 11a		1	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041	⁷ 12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	
Note. See the instructions for additional information the organization must report on Schedule O			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		}	
c Enter the amount of reserves on hand		-	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q	14b		
RAA		. 000	(0010

Form 990 (2010) The Silver Institute, Inc. 23-7108453 Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a 20 **b** Enter the number of voting members included in line 1a, above, who are independent 1 b 19 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х 2 officer, director, trustee or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents 4 Х since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Does the organization have members or stockholders? See Schedule O 6 Х 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? See Schedule 0 Х 7 a b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Х 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following 8a a The governing body? Х **b** Each committee with authority to act on behalf of the governing body? 8b Х Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O q Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Does the organization have local chapters, branches, or affiliates? 10a Х b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 10b 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? Х 11 a b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts' 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c 13 Does the organization have a written whistleblower policy? Х 13 14 Does the organization have a written document retention and destruction policy? 14 Х Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official See Schedule O Х 15a **b** Other officers of key employees of the organization Х 15b If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) **16a** Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? Х 16a b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed None Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website |X|X Upon request Another's website Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization <u>► Michael DiRienzo 888 16th Street</u>, NW Washington DC 20006-4103 (202) 835-0185

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23-7108453

Page 7

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

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

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

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

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

Compensation from Compensation Compensation from Compensation Compensat	(A)	(B)			•	C)			(D)	(E)	(F)
Characteristics	Name and title	Average		_		k all	that app		Reportable	Reportable	Estimated
Director		per week (describe hours for related organiza	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(2) Phillips Baker, Jr. 0 X 0. 0. (3) Peter Barnes 0 X 0. 0. (4) Roque G. Benavides 0 X X 0. 0. President 0 X X 0. 0. (5) Paul Buchanan 0 X X 0. 0. (6) Geoffrey Burns 0 X X 0. 0. Vice President 0 X 0. 0. 0. (7) Michael Carabini 0 X 0. 0. 0. (8) Hugh Carke 0 0 0. 0. 0. (9) Patricia Cauley 0 0. 0. 0. Objector 0 X 0. 0. 0. (10) Jerry Gill 0 0. 0. 0. 0. Director 0 X 0. 0. 0. (11) Terry Hanlon 0 0. 0. 0. 0. Director 0 X 0. 0. 0. <	(1) Fernando Alanis										
(2) Phillips Baker, Jr. 0 X 0. 0. (3) Peter Barnes 0 X 0. 0. (4) Roque G. Benavides 0 X X 0. 0. President 0 X X 0. 0. (5) Paul Buchanan 0 X X 0. 0. (6) Geoffrey Burns 0 X X 0. 0. Vice President 0 X 0. 0. 0. (7) Michael Carabini 0 X 0. 0. 0. (8) Hugh Carke 0 0 0. 0. 0. (9) Patricia Cauley 0 0. 0. 0. Objector 0 X 0. 0. 0. (10) Jerry Gill 0 0. 0. 0. 0. Director 0 X 0. 0. 0. (11) Terry Hanlon 0 0. 0. 0. 0. Director 0 X 0. 0. 0. <	Director	-	Х						0.1	0.	0.
(3) Peter Barnes Director O X O O O O											
(3) Peter Barnes Director O X O O O O		-	X						0.	0.	0.
Director O X O O O											
President 0		- ¬ 0	X						0.	0.	0.
President 0											
Director		0	X		Х				0.	0.	0.
Director	(5) Paul Buchanan										
Vice President	Director	-	X						0.	0.	0.
Michael Carabini	(6) Geoffrey Burns										
Director	Vice President	0	X		Χ		}		0.	0.	0.
(8) Hugh Carke 0 X 0. 0. Director 0 X 0. 0. (9) Patricia Cauley 0 X 0. 0. Director 0 X 0. 0. (10) Jerry Gill 0 0. 0. 0. Director 0 X 0. 0. (11) Terry Hanlon 0. 0. 0. Director 0 X 0. 0. (12) Osamu Ikeda 0. 0. 0. Director 0 X 0. 0. (13) Jaime Lomelin 0. 0. 0. Director 0 X 0. 0. (14) Mike Moran 0. 0. 0. Director 0 X 0. 0. (15) Paul LaFontaine 0. 0. 0. Director 0 X 0. 0. (16) Satoshi Terashita 0. 0. 0. (17) Rohan Hazelton 0 0. 0. <td>(7) Michael Carabini</td> <td></td>	(7) Michael Carabini										
Director	Director	0	_ X_						0.	0.	0.
Column	(8) Hugh Carke										
Director	Director	0	_ X						0.	0.	0.
Column C	(9) Patricia Cauley					ļ					·· — —
Director O X O O O O	Director	0	_ X_						0.	0.	0.
(11) Terry Hanlon 0 X 0. 0. (12) Osamu Ikeda 0 X 0. 0. Director 0 X 0. 0. (13) Jaime Lomelin 0. 0. 0. Director 0 X 0. 0. (14) Mike Moran 0. 0. 0. Director 0 X 0. 0. (15) Paul LaFontaine 0. 0. 0. Director 0 X 0. 0. (16) Satoshi Terashita 0. 0. 0. (17) Rohan Hazelton 0 0. 0.	(10) Jerry Gill										
Director	Director	0	X						0.	0.	0.
(12) Osamu Ikeda 0	(11) Terry Hanlon										
Director		0	X						0.	0.	0.
(13) Jaime Lomelin 0 X 0. 0. Director 0 X 0. 0. (14) Mike Moran 0 0. 0. Director 0 X 0. 0. (15) Paul LaFontaine 0 0. 0. 0. Director 0 X 0. 0. 0. (16) Satoshi Terashita 0 X 0. 0. 0. (17) Rohan Hazelton 0 X 0. 0. 0.	(12) Osamu Ikeda										
Director		0	X						0.	0.	0.
(i4) Mike Moran Director 0 X 0. 0. (15) Paul LaFontaine 0 X 0. 0. Director 0 X 0. 0. (16) Satoshi Terashita 0. 0. 0. Director 0 X 0. 0. (17) Rohan Hazelton 0. 0. 0.											
Director		0	Х						0.	0.	0.
Columbia											
Director	Director	0	Х	_					0.	0.	0.
(16) Satoshi Terashita Director 0 X 0. 0. (17) Rohan Hazelton											
Director		0	X			<u>_</u>			0.	0.	0.
(17) Rohan Hazelton											
		0_	X						0.	0.	0.
	(17) Rohan Hazelton	- 🚽									
Director 0 X 0. 0. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.	Director	0	Х						0.	0.	0.

(A)	(B)	ley	Em		oye c)	es,	and	(D)	ipensated Emj (E)	Joyee	<u>s (coi</u> (F)	<u> 11)</u>
Name and title	Average	Posi	tion (•		that a	pply)	Reportable	Reportable	E	stimated	
	hours per week (describe hours for related organi- zations in Sch O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099 MISC)	compensation from related organizations (W-2/1099-MISC)	amo con org	unt of oth npensation rom the ganization of related anization	her on n d
(18) Dennis Wheeler Director	0	Х						0.	0.			0.
(19) David Wolfin Director	0	X						0.	0.	-		0.
(20) Michael DiRienzo Exec Dir & Secy	20	X		Х				0.	0.			0.
(21) Thomas Angelos Treasurer	0			Х				0.	0.			0.
(22) Ken Koski Asst Treasurer	0			X				0.	0.			0.
(23)												<u> </u>
(24)								-	· <u>-</u> ,			
(25)												
(26)				-								
(27)			_									
(28)												
(29)						_		-				
1 b Sub-total	<u> </u>	<u> </u>	I	L	L	l	_	0.	0.			0.
c Total from continuation sheets to Part VII, Section	Α						•	0.	0.			0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limite	d to tho	se li	stec	lab	ove)) wh	o re	0. ceived more than	0 . \$100,000 in repor	table co	mpens	0. atıon
from the organization 0											Yes	No
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such ii	or trust ndıvıdua	ee,	key	emp	oloy	ee,	or hi	ghest compensate	ed employee	3	1.03	Х
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t	portable han \$15	e cor 50,00	npe	nsa If 'Y	tıon ′es′	and com	l oth	er compensation e Schedule J for	from			
 such individual Did any person listed on line 1a receive or accrue of for services rendered to the organization? If 'Yes,' or accrue to the organization of the organization of the organization of the organization of the organization. 	ompens	satio	n fro	om a	any	unre	elate	d organization or	ındıvıdual	5		X
Section B. Independent Contractors	Jonipie	- 30	neu	uie	3 10	7 500	cri p	erson				Х
Complete this table for your five highest compensation from the organization	ed inde	pen	dent	cor	ntra	ctors	tha	t received more t	han \$100,000 of	•		
(A) Name and business addres	s							(B) Description (of services	Compe	C) ensatio	n
KSG, LLC 888 16th Street, NW, Suite 303 Wash	ington	, D	C 2	000	6-1	403		Management Fe	es			
								<u> </u>			_	
2 Total number of independent contractors (including \$100,000 in compensation from the organization ►		lımı	ted	to th	nose	e list	ed a	above) who receiv	ed more than		.	

F.al	t viii Statement of Revenue					
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
8.0	1a Federated campaigns 1a		11			
ANTS	b Membership dues 1 b					
중	c Fundraising events.					
₹ AN	-					
동물	d Related organizations 1d					
S S	e Government grants (contributions) 1 e					
HER	f All other contributions, gifts, grants, and similar amounts not included above 1 f					
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	g Noncash contributions included in lns 1a-1f \$_					
3	h Total. Add lines 1a-1f	>				
2	•	Business Code	1 400 676	1 100 555		
2	2a Membership Dues & Assessments		1,420,676.	1,420,676.		
بب بب	b Publications		170,352.			170,352.
2	c Silver Promotion/Research		16,040.	16,040.		
SER	d					
¥	e					
8	f All other program service revenue					
盗	g Total. Add lines 2a-2f	•	1,607,068.			
	3 Investment income (including dividends	interest and				<u> </u>
	other similar amounts)	, interest and	2,957.			2,957.
	4 Income from investment of tax-exempt	bond proceeds				
	5 Royalties	▶			·-· - · · · · · · · · · · · · · · · · ·	
	(ı) Real	(ii) Personal				
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					ł
	To Company to the control of (1055)	(ii) Other				
	7a Gross amount from sales of assets other than inventory	(ii) Other				
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
		•				
	d Net gain or (loss)8a Gross income from fundraising events		·			
NUE	(not including \$	ļ				
E E	of contributions reported on line 1c)					
8	See Part IV, line 18					
OTHER REVEN	b Less direct expenses b					
٥	c Net income or (loss) from fundraising ev	vents ►				
	9a Gross income from gaming activities See Part IV, line 19				-	
	b Less direct expenses b					
	c Net income or (loss) from gaming activi	ties •				
	10a Gross sales of inventory, less returns		· <u>-</u>	- "		*
	and allowances a b Less cost of goods sold b					
	c Net income or (loss) from sales of inver	ntory				
	Miscellaneous Revenue	Business Code				
	11a					
	b ,					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	>				
	12 Total revenue. See instructions	· ▶	1,610,025.	1,436,716.	0.	172 200
	12 TOTAL TEVELINE. SEE HISTINCHOUS	1	1,010,025.	1,430,/10.	U.	173,309.

Part IX | Statement of Functional Expenses

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

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	0.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
a	Management	450,000.			
t	Legal				
c	Accounting	4,800.			
C	Lobbying	<u>. </u>			
e	Professional fundraising services See Part IV, line 17				<u> </u>
f	Investment management fees				
ç) Other				
12	Advertising and promotion				
13	· ·	<u>25,752.</u>			
14	Information technology				
15	Royalties				
16	Occupancy	 			
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings Interest	50,506.			
	Payments to affiliates				
	Depreciation, depletion, and amortization	· _ ·			
23	Insurance		, , , , ,		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	Silver Promotion Service	405,517.			
t	World Silver Survey	241,645.			
c	Peru Consumer Marketing	86,138.			
c	Publications, Newsletter, Web	50,073.			
6	Technical Monitoring	45,253.			
f	All other expenses	105,978.			
25	Total functional expenses Add lines 1 through 24f	1,465,662.			
	Joint costs. Check here SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
$\square \wedge \wedge$					Form 990 (2010)

<u>?art X</u>	Balance Sheet			
		(A) Beginning of year		(B) End of year
1	Cash – non-interest-bearing	176,254.	1	320,617
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	· <u>-</u>
4	Accounts receivable, net		4	<u>-</u>
5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
8 7 8 8 7 8 9	Notes and loans receivable, net		7	
8	Inventories for sale or use	· · ·	8	
[9	Prepaid expenses and deferred charges		9	
10 a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D			
b	Less accumulated depreciation 10b		10 c	
11	Investments – publicly traded securities.	-	11	
12	Investments – other securities See Part IV, line 11		12	
13	Investments – program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	· · · · · · · · · · · · · · · · · · ·	15	
16	Total assets Add lines 1 through 15 (must equal line 34)	176,254.	16	320,617
17	Accounts payable and accrued expenses		17	
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	·
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
23	of Schedule L		22	
	Secured mortgages and notes payable to unrelated third parties		23	
24	' '		24	
25	Other liabilities Complete Part X of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	0.	26	0
!	Organizations that follow SFAS 117, check here ► X and complete lines			
.	27 through 29 and lines 33 and 34.	176 054		200 617
27 28 29	Unrestricted net assets	176,254.	27	320,617
28	Temporarily restricted net assets		28	
	Permanently restricted net assets		29	
2	Organizations that do not follow SFAS 117, check here ▶ □ and complete			
30	lines 30 through 34.			
	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds	15005	32	222 5
BA 31 32 32 33 33 34	Total net assets or fund balances	176,254.	33	320,617
^S 34 ΔΔ	Total liabilities and net assets/fund balances	176,254.	34	320,617

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Form 990 (2010)

Form 996 (2010) The Silver Institute, Inc. 23	-7108453		Pa	ge 12		
Part XI Reconciliation of Net Assets						
Check if Schedule O contains a response to any question in this Part XI						
1 Total revenue (must equal Part VIII, column (A), line 12)	1		10,0			
2 Total expenses (must equal Part IX, column (A), line 25)	2	1,4	65,6	62.		
3 Revenue less expenses Subtract line 2 from line 1	3		<u>44,3</u>			
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1	76,2	254.		
5 Other changes in net assets or fund balances (explain in Schedule O) 5						
6 Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	3	20,6	517.		
Part XII Financial Statements and Reporting			-			
Check if Schedule O contains a response to any question in this Part XII						
			Yes	No		
1 Accounting method used to prepare the Form 990 X Cash Accrual Other						
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O						
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
b Were the organization's financial statements audited by an independent accountant?		2b	Х			
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	the audit,	2c	Х			
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O						
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were iss separate basis, consolidated basis, or both	ued on a					
X Separate basis Consolidated basis Both consolidated and separate basis						
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	Single	3a		<u> </u>		
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the recor audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired audit	3 b				
BAA		Form	990 (2010)		

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2010

OMB No 1545 0047

Open to Public Inspection

Employer identification number 23-7108453

Department of the Treasury Internal Revenue Service Name of the organization

The Silver Institute, Inc.

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. Part I (c) Corrected? (a) Name of disqualified person (b) Description of transaction 1 Yes (1) (2)(3) (4)(5) (6) 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 **►**\$ 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ► S Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a (g) Written agreement? (f) Approved by board or committee? (a) Name of interested person and purpose (b) Loan to or from (c) Original principal amount (d) Balance due (e) In default the organization? From Yes Yes No Yes No (1) (2)(3) (4)(5) (6)(7) (8) (9) (10)Total Grants or Assistance Benefitting Interested Persons. Part III Complete if the organization answered 'Yes' on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and (c) Amount and type of assistance (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule L (Form 990 or 990-EZ) 2010

	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sha organiz rever	arıng i zation
	J. January I.			Yes	No
(1) KSG, LLC	Shared Officer	450,000.	Management Fee		Х
(2)					
(3)					
(4)					
(5)					ļ
(6)					
(7) (8)					
(9)				-	
(10)					
Part V Supplemental Information			·		
Complete this part to provide add	itional information for responses	s to questions on Sched	dule L (see instructions)		
	·		-		
		- 			
	· 				·
			- 		
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	·				· - -
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

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.

The	Silver Institute, Inc.	23-7108453
	Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	
	The Silver Institute draws its membership from across the bread	th of the silver
	industry. This includes leading silver mining houses, refiners,	_bullion_suppliers,
r	manufacturers of silver products and wholesalers of silver inve	stment products
اا	Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Bod	У
:	There is one class of membership. Each member in good standing	is entitled to one
	vote on any and all matters whhich shall properly come before a	meeting of the
r	nembers.	
	Form 990, Part VI, Line 11b - Form 990 Review Process	
	The Form 990 is made available upon request to the Board of Dir	ectors for their
	review. The Form 990 is reviewed in detail by the Institute's E	xecutive Director.
اا	Form 990, Part VI, Line 15a - Compensation Review & Approval Process for CEO, Ex	kec. Dir., or Top Mgtment
	The Silver Institute does not have any employees. The Silver In	stitute is managed
1	under contract by KSG, LLC. The Silver Institute's Executive D	irector is an
	employee of and is paid by KSG LLC. The management fee is deter	mined by the Silver
	Institute's Executive Committee annually.	
	Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
	The organization structure of the Silver Institute is described	on its web site.
I	Financial statements and detailed governing documents are avail	able upon written
-	request. The Form 990 is available upon request and is availabl	e from the GuideStar
	web site.	~ -
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2010	Federal Supporting Det	ail	Page ²
	The Silver Institute, Inc.		23-710845
Stmt. of Functional Ex Conferences, conven	kpenses (990) tions, etc		
Industry Dinner Financial Times I	nvestment Conference	\$ Total <u>\$</u>	22,957. 27,549. 50,506.
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