Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

DLN: 93493084006783 OMB No 1545-0047

Open to Public Inspection

0

429,570

337,848

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

A Fo	r the 20	12 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31	2012								
	eck if appl Iress chan	The Silver Institute Inc		D Employ 23-71		tification number					
	me chang	Doing Business As		23-71	30433						
Init	ıal return	Number and street (or P O box if mail is not delivered to street address) Room/suit	:e	E Telephor	ne numb	per					
Ter	mınated	1400 I Street NW		(202) 8	335-0	185					
┌ Am	ended ret	urn City or town, state or country, and ZIP + 4 Washington, DC 20005		(202)	333 0	100					
☐ App	lication p	ending		G Gross re	ceipts \$	1,931,987					
		F Name and address of principal officer	H(a) Is the	ıs a group	return	for					
		Michael DiRienzo 1400 I Street NW Suite 550	affilia			┌ Yes 🗸 No					
		Washington, DC 20005	Н(Ь) д	. II - 66 . I 4		ded?					
						(see instructions)					
I Ta	x-exempt	status									
J W	ebsite: I	www silverinstitute org	H(c) Grou	ıp exemptı	on num	nber ►					
K Forn	n of orgar	nization Corporation Trust Association Other ►	L Year of fo	rmation 197	1 M:	State of legal domicile NY					
Pa	rt I	Summary									
e Se	Τh	efly describe the organization's mission or most significant activities e Silver Institute's purpose is that of promoting the welfare of the silver indus ver products across all end users The Silver Institue had 25 members as of y			wledg	e of and demand for					
<u>ē</u>											
<u>ē</u>]	Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets									
Governance	2 Cn	eck this box 🛐 II the organization discontinued its operations or disposed o	more than 2	.5% OF ICS	net ass	sets					
	 3 Nu	imber of voting members of the governing body (Part VI, line 1a)		. 1	з	23					
Activities &	1	imber of independent voting members of the governing body (Part VI, line 1b)			4	22					
톧		tal number of individuals employed in calendar year 2012 (Part V, line 2a) .			5	0					
্ব	6 To	tal number of volunteers (estimate if necessary)			6						
	7a ⊤o	tal unrelated business revenue from Part VIII, column (C), line 12			7a	0					
	b Ne	t unrelated business taxable income from Form 990-T, line 34			7b						
			Pric	r Year		Current Year					
	8	Contributions and grants (Part VIII, line 1h)				0					
를	9	Program service revenue (Part VIII, line 2g)		1,773,1	72	1,929,872					
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,5	68	2,115					
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				0					
		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		1,774,7	4.0	1,931,987					
		12)	+	1,// 7,/	+ -	1,551,567					
		Benefits paid to or for members (Part IX, column (A), line 4)			+	0					
		Salaries, other compensation, employee benefits (Part IX, column (A), lines			\dashv						
8		5–10)				0					
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)				0					
ਡੌ	Ь	Total fundraising expenses (Part IX, column (D), line 25) \blacktriangleright 0									
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,757,5	09	1,840,265					
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	1,75		09	1,840,265					
	19	Revenue less expenses Subtract line 18 from line 12		17,2	31	91,722					
seets or afances				g of Curren 'ear	t	End of Year					
9 W	20	Total assets (Part X, line 16)		337,8	48	429,570					

Signature Block

Under penalties of perjury, I declare that I have examined this return, including my knowledge and belief, it is true, correct, and complete Declaration of prepar preparer has any knowledge

Net assets or fund balances Subtract line 21 from line 20

Total liabilities (Part X, line 26)

Sign Here

Signature of officer Michael DiRienzo Executive Director Type or print name and title

Paid Preparer **Use Only**

Print/Type preparer's name Preparer's signature John M Kosciw CPA Firm's address 🟲 4515 N 39th Street ARLINGTON, VA 222072928

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

) (Revenue \$

Other program services (Describe in Schedule O)

Total program service expenses ►

including grants of \$

4d

(Expenses \$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section $501(c)(3)$ or $4947(a)(1)$ (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170 (b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1^2 If "Yes," complete Schedule I, Parts I and II	21		No
22	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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Νo
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		No
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		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
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		No
29	Did the organization receive more than $\$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Par				_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 4		. 00	110
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
c	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			
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)	2b		Νo
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No
	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		No
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 Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u> </u>		
•	The system in the significant in	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
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		1	
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		
C	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	<i>,</i> c		
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 and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
_	Sponsoring organizations maintaining donor advised funds.	8		No
9	Did the organization make any taxable distributions under section 4966?	9a		No
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
10	Section 501(c)(7) organizations. Enter	90		110
	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			
L1	Section 501(c)(12) organizations. Enter			
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)			
L2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		No
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		Νo
	If "Ves " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Form 990 (2012) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. 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			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3	Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
		evenu	re Cod	e.) No
	Did the organization have local chapters, branches, or affiliates?	10a		
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a		No No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b		No No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c		No No No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes	No No No No No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14		No No No No No No No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10a 10b 11a 12a 12b 12c 13 14	Yes	No No No No No No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes	No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►Michael DiRienzo 1400 I Street NW Washington, DC (202)835-0185

<u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

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

		Ι								
(A) Name and Title	(B) Average	Pos	ition	(C)		chec	k	(D) Reportable	(E) Reportable	(F) Estimated
	hours per	more than one box, unless			ess	compensation	compensation	amount of		
	week (list any hours		person is both an officer and a director/trustee)				from the organization	from related organizations	other compensation	
	for related	//				(W- 2/1099-	(W- 2/1099-	from the		
	organizations	걸릴	5	Office	<u> </u>	屬真	Former	MISC)	MISC)	organization
	below dotted line)		<u>\$</u>	ğ	9	DE E	her			and related organizations
	docted lille)	호텔	<u>≅</u>		흥	88				organizations
		Individual trustee or director	9		Key employee	흥				
		8	Institutional Trustee			≘				
			g.			Highest compensated employee				
(1) Harriett Hunnable	0 00					<u> </u>				
		х						0	0	0
Director (2) John Smith	0 00									
		х						0	0	0
Director (3) Michael DiRienzo	20 00									
Exec Dir & Secy	0 00	Х		Х				0	0	0
(4) Michael Floskis	0 00									
Director	0 00	X						0	0	0
(5) Joseph Conway	0 00									
Director	0 00	X						0	0	0
(6) Michael P O'Neill	0 00							_	_	
Director	0 00	X						0	0	0
(7) David Wolfin	0 00									
Director	0 00	X						0	0	0
(8) Phillips Baker Jr	0 00	х						0	0	0
Director	0 00	_ ^						U	0	0
(9) Rohan Hazelton	0 00	x						0	0	0
Director	0 00							Ŭ	0	
(10) Mitchell Krebs	0 00	x						0	0	0
Director	0 00							ŭ		
(11) Stephen Orr	0 00	×						0	0	0
Director	0 00							_	-	
(12) Peter Torn	0 00	x						0	0	0
Director	0 00									
(13) Grant Angwin	0 00	x						0	0	0
Director (14) Oceani Heads	0 00									
(14) Osamu Ikeda	0 00	х						0	0	0
Director (15) Terry Hanlon	0 00	-								
		x						0	0	0
Director (16) Patrick Drouin	0 00	-			_	-				
		x						0	0	0
Director (17) Octavio Alvidrez Ortega	0 00	-								
		х						0	0	0
Director	0 00	<u> </u>								Form 990 (2012)
										FUIIII 990 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	note box	checl c, unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estim amount of compen from	ated of other isation the
		for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organiz and re organiz	lated
(18)	Satoshı Terashıta	0 00					_		_			
Direct	or	0 00	Х						0	0		0
(19) I	Michael Carabini	0 00	x						0	0		0
Direct		0 00	^					Ш				
(20)	Geoffrey Burns	0 00	x		×				0	0	ı	0
Presid		0 00				_		\vdash				
, ,	Paul Buchanan	0 00	х						0	0		0
Direct (22) I	or Roque G Benavides	0 00						H				
` ,	President	0 00	х		×				0	0	ı	0
	Jeff Clevenger	0 00										
Direct	or	0 00	X						0	0		0
(24) I	Lana McCray	0 00	х						0	0		0
Direct		0 00										
(25) I	Fernando Alanıs	0 00	x		×				0	0	ı	0
	Director Ken Koski	0 00						\square				
` ,		0 00			×				0	0		0
	reasurer Thomas Angelos	0 00			\vdash	\vdash		\vdash				
Treas	urer	0 00			×				0	0		0
								\vdash				
					_	-		\vdash				
1b	Sub-Total			•	•		•					
c	Total (and lines the and to)	-			•							
	Total (add lines 1b and 1c) Total number of individuals (including b					م ر م ما						
2	\$100,000 of reportable compensation				u a	DUVE	e) WIIO	160	erved more than			
											1	
3	Did the organization list any former offi	car director or	tructor	, ka		anlas		r bia	hast compansata	d amplayes	Yes	No
,	on line 1a? If "Yes," complete Schedule J			., KC)	•	•	• •	· •		· · · 3		No
4	For any individual listed on line 1a, is the organization and related organizations (om the		1
_	ındıvıdual			•	•		•	•		4		No
5	Did any person listed on line 1a receive services rendered to the organization?								_			
	22.7.000 .2aarea to the organization.				. , 01	240	puis	,,		5		No
Se	ection B. Independent Contracto	ors										
1	Complete this table for your five highes											
	compensation from the organization Re	(A)	Lion for	tne	cale	enda	ryear	end		(B)	tax year (C	
KCC .	Name and b	usiness address							Description	on of services	Comper	
VOG [LC 1400 I Street NW Suite 550 Washington DC 20	UUO							Management Fe	c>		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►0

		Check if Schedule O contains a response to any question i	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
£	1a	Federated campaigns 1a				
Other Similar Amounts	b	Membership dues 1b				
Αm	С	Fundraising events 1c				
lar	d	Related organizations 1d				
<u> </u>	е	Government grants (contributions) 1e				
S	f	All other contributions, gifts, grants, and similar amounts not included above				
튄	g	Noncash contributions included in lines				
and	h	1a-1f \$ ———————————————————————————————————	0			
- 		Business Code				
	2a	Silver Promotion/Research				
	ь	Publications	252,782			252,78
	c	Membership Dues & Assessments	1,677,090	1,677,090		
	d					
	e					
5	f	All other program service revenue				
•	g	Total. Add lines 2a-2f	1,929,872			
	3	Investment income (including dividends, interest, and other similar amounts)	2,115			2,11
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	0			
	6a	(1) Real (11) Personal Gross rents				
	b	Less rental expenses				
	c	Rental income				
	d	or (loss) Net rental income or (loss)	О			
		(I) Securities (II) Other				
	7a	Gross amount from sales of				
		assets other than inventory				
	Ь	Less cost or other basis and				
	c	sales expenses Gain or (loss)				
	d	Net gain or (loss)	0			
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18				
	h	a				
	b C	Net income or (loss) from fundraising events	o			
		Gross income from gaming activities See Part IV, line 19				
	b	Less direct expenses b				
	c	Net income or (loss) from gaming activities	0			
	10a	Gross sales of inventory, less returns and allowances .				
	b	Less cost of goods sold b				
		Net income or (loss) from sales of inventory	0			
		Miscellaneous Revenue Business Code				
	11a					
	Ь					
	c d	All other revenue				
- 1	u	An odici revenue i i i				
	е	Total. Add lines 11a−11d	0			1

Part IX Statement of Functional Expenses

	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All	other organizat	ions must comr	olete column (A)	
	Check if Schedule O contains a response to any question in this Pa				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
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	0			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			
LO	Payroll taxes	0			
1 1	Fees for services (non-employees)				
а	Management	482,000			
b	Legal	6,050			
c	Accounting	5,565			
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	0			
.2	Advertising and promotion	0			
3	Office expenses	23,101			
4	Information technology	0			
5	Royalties	0			
6	Occupancy	0			
7	Travel	0			
8	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
9	Conferences, conventions, and meetings	2,418			
0	Interest	0			
1	Payments to affiliates	0			
2	Depreciation, depletion, and amortization	0			
3	Insurance	0			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Technical Monitoring	50,618			
b	Peru Consumer Marketing	90,000			
c	World Silver Survey	319,963			
d	Silver Promotion Service	678,978			
e	All other expenses	181,572			
25	Total functional expenses. Add lines 1 through 24e	1,840,265	0	0	
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)				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	337,848	1	429,570
	2	Savings and temporary cash investments	,	2	0
	3	Pledges and grants receivable, net		3	0
	4	Accounts receivable, net		4	0
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			0
Assets	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		5	0
	_	Notes and loans receivable, net		7	0
	7			8	0
	8 9	Inventories for sale or use		9	0
	10a	Prepaid expenses and deferred charges		9	
	ь	Less accumulated depreciation		10c	0
	11	Investments—publicly traded securities		11	0
	12	Investments—other securities See Part IV, line 11		12	0
	13	Investments—program-related See Part IV, line 11		13	0
	14	Intangible assets		14	0
	15	Other assets See Part IV, line 11		15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	337,848	16	429,570
	17	Accounts payable and accrued expenses	367,510	17	120,070
	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	
Ilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabilit		persons Complete Part II of Schedule L		22	
∄	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
ማ d)		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	337,848	27	429,570
<u>ದ</u>	28	Temporarily restricted net assets	007,040	28	420,570
<u></u>	29	Permanently restricted net assets		29	
r Fund Balance	23	Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.		29	
S O.	30	Capital stock or trust principal, or current funds		30	
şet	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
ž	33	Total net assets or fund balances	337,848	33	429,570
2	34	Total liabilities and net assets/fund balances	337,848	34	429,570

Par	rt XI Reconcilliation of Net Check if Schedule O contain	Assets is a response to any question in this Part XI			୮
1	Total revenue (must equal Part VII	I, column (A), line 12)		1,9	31,987
2	Total expenses (must equal Part IX	K, column (A), line 25)		1,8	340,265
3	Revenue less expenses Subtract II	ine 2 from line 1			91,722
4	Net assets or fund balances at begi	inning of year (must equal Part X, line 33, column (A)) 4		3	337,848
5	Net unrealized gains (losses) on inv	vestments			
6	Donated services and use of faciliti	ies			
7	Investment expenses				
8	Prior period adjustments				
9	Other changes in net assets or fund	d balances (explain in Schedule O)			
10	Net assets or fund balances at end column (B))	of year Combine lines 3 through 9 (must equal Part X, line 33,		4	129,570
Par	rt XII Financial Statements	and Reporting			
	Check if Schedule O contair	ns a response to any question in this Part XII			. $ abla$
				Yes	No
1		e the Form 990			
2a	a Were the organization's financial sta	atements compiled or reviewed by an independent accountant?	2a		Νo
	If 'Yes,' check a box below to indica a separate basis, consolidated basi	ate whether the financial statements for the year were compiled or reviewed on is, or both			
	☐ Separate basis ☐ Conso	olidated basis			
b	• Were the organization's financial sta	atements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indica basis, consolidated basis, or both	ate whether the financial statements for the year were audited on a separate			
	✓ Separate basis ✓ Conso	olidated basis			
C		organization have a committee that assumes responsibility for oversight of the inancial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either it Schedule O	ts oversight process or selection process during the tax year, explain in			
За	As a result of a federal award, was t Single Audit Act and OMB Circular	the organization required to undergo an audit or audits as set forth in the A-133?	3a		No
b		go the required audit or audits? If the organization did not undergo the required	3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493084006783

JEN. 93493084000783

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 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.

2012

Open to Public Inspection

Name of the orga The Silver Institute Ir								Em	ploye	r ident i	fication	number	
			/			<u>_</u> _			-7108				
						and section 5						106	
1 (a) Name (between dis	Part IV, line 25	(c) Descri					(d) Corre	cted?
1 (a) itame (or albquall	nea pers			d organizati		(4) 5 6 5 6 1 1	p (1011 0	· cranz	Jaction		Yes	No
2 Enter the am	ount of ta	x ıncurre	d by organiza	ation mana	gers or disc	qualified perso	ns during the	yearι	ınders	ection			
4958									•	F \$			
3 Enter the am	ount of ta	x, if any,	on line 2, ab	ove, reimb	ursed by th	e organization			•	F \$			
Part II Loai	ns to an	d/or F	rom Inter	ested P	ersons.								
Comp	olete if the	organız	atıon answere	ed "Yes" o	n Form 990	-EZ, Part V, lı	ine 38a, or Fo	rm 99	0,Par	t IV, lın	e 26, o	rıfthe	
			n amount on l				T		_	I		1	
(a) Name of interested	(b) Relativith orga		(c) Purpose of loan	(d) Loar		(e)Original principal	(f)Balance due	1) In ault?	Appro		(i)Wri	
person	With orga	mzacion	Oriodii	organizat		amount	""	"	iuic.	by boa		agreen	iciic.
									,	commi	ttee?		
				То	From			Yes	No	Yes	No	Yes	No
												_	
											-	_	
											-	_	
												_	
												_	
 Total				<u> </u>						 		٦ .	
	tc or 0	cicton	ce Benefit		aractad I	Porconc							
						rm 990, Part	t IV. line 27.						
(a) Name of inte			ationship bet			f assistance	(d) Type o		tance	(e)	Purpos	e of assi	stance
person	.,		ted person ar		, , , , , , , , , , , , , , , , , , ,	, assistance	(4) 1 , pe o	. 45515	cance		. ч.роз	c 0, 455.	o came o
		(organization										
							_						

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.						
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?		
				Yes	No	
(1) KSG LLC	Shared Officer	482,000	Management Fee		Νo	
		·				

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Ident if ier	Return Reference	Explanation
		Schedule I (Form 990 or 990-F7) 2012

Schedule L (Form 990 or 990-EZ) 2012

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493084006783

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047
2012
Open to Public

Inspection

Name of the organization The Silver Institute Inc	Employer identif	ication number
	23-7108453	

ldentifier	Return Reference	Explanation				
VI, Line 19 Organization Documents Publicly		The organization structure of the Silver Institute is described on its wieb site. Financial statements and detailed governing documents are available upon written request. The Form 990 is available upon request and is available from the GuideStar wieb site.				
Form 990, Part VI, Line 15a	Form 990, Part VI, Line 15a Compensation Review & Approval Process - CEO, Top Management	The Silver Institute does not have any employees. The Silver Institute is managed under contract by KSG, LLC. The Silver Institute's Executive Director is an employee of and is paid by KSG LLC. The management fee is determined by the Silver Institute's Executive Committee annually.				
Form 990, Part VI, Line 11b	Form 990, Part VI, Line 11b Form 990 Review Process	The Form 990 is made available upon request to the Board of Directors for their review The Form 990 is reviewed in detail by the Institute's Executive Director				
Form 990, Part VI, Line 6	Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	The Silver Institute draws its membership from across the breadth of the silver industry This includes leading silver mining houses, refiners, bullion suppliers, manufacturers of silver products and wholesalers of silver investment products				