See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization
(see instructions)

<table>
<thead>
<tr>
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<tbody>
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</tr>
</tbody>
</table>

Totals: 0

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income
(see instructions)

<table>
<thead>
<tr>
<th>1. Description of exploited activity</th>
<th>2. Gross unrelated business income from trade or business</th>
<th>3. Expenses directly connected with production of unrelated business income</th>
<th>4. Net income (loss) from unrelated trade or business (column 2 minus column 3) if a gain, compute cols 5 through 7</th>
<th>5. Gross income from activity that is not unrelated business income</th>
<th>6. Expenses attributable to column 5</th>
<th>7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

Totals: 0

Schedule J - Advertising Income (see instructions)

Part I | Income From Periodicals Reported on a Consolidated Basis

<table>
<thead>
<tr>
<th>1. Name of periodical</th>
<th>2. Gross advertising income</th>
<th>3. Direct advertising costs</th>
<th>4. Advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7</th>
<th>5. Circulation income</th>
<th>6. Readership costs</th>
<th>7. Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td>(4)</td>
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<td></td>
</tr>
</tbody>
</table>

Totals (carry to Part II, line (5)): 0

Part II | Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line by line basis.)

<table>
<thead>
<tr>
<th>1. Name of periodical</th>
<th>2. Gross advertising income</th>
<th>3. Direct advertising costs</th>
<th>4. Advertising gain or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7</th>
<th>5. Circulation income</th>
<th>6. Readership costs</th>
<th>7. Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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<tr>
<td>(2)</td>
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<td>(3)</td>
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<td>(4)</td>
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<td></td>
</tr>
</tbody>
</table>

(5) Totals from Part I

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter here and on page 1, Part I, line 11, col (A)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Totals, Part II (lines 1-5): 0

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

<table>
<thead>
<tr>
<th>1. Name</th>
<th>2. Title</th>
<th>3. Percent of time devoted to business</th>
<th>4. Compensation attributable to unrelated business</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total: Enter here and on page 1, Part II, line 14

<p>| | | | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter here and on page 1, Part II, line 14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Form 990-T Schedule E - Depreciation Deduction

<table>
<thead>
<tr>
<th>Description</th>
<th>Activity Number</th>
<th>Amount</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depreciation</td>
<td></td>
<td>437,919</td>
<td>437,919</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total of Form 990-T, Schedule E, Column 3(A)</strong></td>
<td></td>
<td></td>
<td>437,919</td>
</tr>
</tbody>
</table>

### Form 990-T Schedule E - Other Deductions

<table>
<thead>
<tr>
<th>Description</th>
<th>Activity Number</th>
<th>Amount</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Audit Services</td>
<td></td>
<td>23,585</td>
<td></td>
</tr>
<tr>
<td>Amortization Expense</td>
<td></td>
<td>36,584</td>
<td></td>
</tr>
<tr>
<td>Miscellaneous/Other</td>
<td></td>
<td>-1,179</td>
<td></td>
</tr>
<tr>
<td>Admin Expenses</td>
<td></td>
<td>87,954</td>
<td></td>
</tr>
<tr>
<td>Contract Services</td>
<td></td>
<td>147,283</td>
<td></td>
</tr>
<tr>
<td>R&amp;M Supply</td>
<td></td>
<td>144,260</td>
<td></td>
</tr>
<tr>
<td>Payroll &amp; Overhead</td>
<td></td>
<td>101,386</td>
<td></td>
</tr>
<tr>
<td>Utilities</td>
<td></td>
<td>282,214</td>
<td></td>
</tr>
<tr>
<td>Mortgage Interest</td>
<td></td>
<td>166,480</td>
<td></td>
</tr>
<tr>
<td>Taxes</td>
<td></td>
<td>523,161</td>
<td></td>
</tr>
<tr>
<td>Non Oper Expenses</td>
<td></td>
<td>47,012</td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>1</td>
<td></td>
<td>1,558,740</td>
</tr>
<tr>
<td><strong>Total of Form 990-T, Schedule E, Column 3(B)</strong></td>
<td></td>
<td></td>
<td>1,558,740</td>
</tr>
</tbody>
</table>

### Form 990-T Schedule E - Average Acquisition Debt on or Allocable to Debt-Financed Property

<table>
<thead>
<tr>
<th>Description</th>
<th>Activity Number</th>
<th>Amount</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average Acquisition Indebtedness</td>
<td></td>
<td>17,324,000</td>
<td>17,324,000</td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total of Form 990-T, Schedule E, Column 4</strong></td>
<td></td>
<td></td>
<td>17,324,000</td>
</tr>
<tr>
<td>DESCRIPTION</td>
<td>ACTIVITY NUMBER</td>
<td>AMOUNT</td>
<td>TOTAL</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>-----------------</td>
<td>--------------</td>
<td>-------------</td>
</tr>
<tr>
<td>AVERAGE ADJUSTED BASIS</td>
<td></td>
<td>21,332,822</td>
<td>21,332,822</td>
</tr>
<tr>
<td>- SUBTOTAL</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TOTAL OF FORM 990-T, SCHEDULE E, COLUMN 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>21,332,822</td>
</tr>
</tbody>
</table>
Application for Extension of Time To File an Exempt Organization Return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print

Name of exempt organization

POPLATION SERVICES INTERNATIONAL

Employer identification number

56-0942853

Number, street, and room or suite no. If a P.O. box, see instructions

1120 NINETEENTH STREET, NW, NO. 600

City, town or post office, state, and ZIP code For a foreign address, see instructions

WASHINGTON, DC 20036

Enter the Return code for the return that this application is for (file a separate application for each return)

07

Application Is For Return Code Application Is For Return Code
Form 990 01 Form 990-T (corporation) 07
Form 990-BL 02 Form 1041-A 08
Form 990-EZ 03 Form 4720 09
Form 990-PF 04 Form 5227 10
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11
Form 990-T (trust other than above) 06 Form 8870 12

KIM SCHWARTZ - 1120 NINETEENTH STREET, NW, NO. 600 -

Telephone No. 516-466-6834 FAX No.

If the organization does not have an office or place of business in the United States, check this box.

If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____________ If this is for the whole group, check this box _____________ If it is for part of the group, check this box _____________ and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until________

NOVEMBER 15, 2011
to file the exempt organization return for the organization named above. The extension is for the organization's return:

- [X] calendar year 2010 or
- [ ] tax year beginning _____________ , and ending _____________

2 If the tax year entered in line 1 is for less than 12 months, check reason

- [ ] Initial return
- [ ] Final return

- [ ] Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions

3a $ 0

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit

3b $ 0

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions

3c $ 0

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

LHA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)
**Exempt Organization Business Income Tax Return**

Form 990-T

Department of the Treasury
Internal Revenue Service

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

For calendar year 2010 or other tax year beginning and ending

**A. Check box if name and address changed**

Name of organization: POPULATION SERVICES INTERNATIONAL

**B. Exempt under section 501(c) ( )**

Print or Type

Number, street, and room or suite no. If a P.O. box, see instructions.

1120 NINETEENTH STREET, NW, NO. 600

City or town, state, and ZIP code

WASHINGTON, DC 20036

**C. Book value of all assets at end of year**

435, 968, 588.

**D. Unrelated business activity codes (See instructions.)**

56-0942853

**E. Unrelated business activity codes (See instructions.)**

531120

**H. Describe the organization's primary unrelated business activity.**

REAL ESTATE RENTAL

**I. During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group?**

Yes [X] No

**J. The books are in care of: KIM SCHWARTZ**

Telephone number: 202-785-0072

### Part I Unrelated Trade or Business Income

<table>
<thead>
<tr>
<th>Description</th>
<th>(A) Income</th>
<th>(B) Expenses</th>
<th>(C) Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Gross receipts or sales</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Less returns and allowances</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Balance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cost of goods sold (Schedule A, line 7)</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross profit. Subtract line 2 from line 1c</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a Capital gain net income (attach Schedule D)</td>
<td>4a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)</td>
<td>4b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4c Capital loss deduction for trusts</td>
<td>4c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Income (loss) from partnerships and S corporations (attach statement)</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Rent income (Schedule C)</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Unrelated debt-financed income (Schedule E)</td>
<td>7</td>
<td>1,667,908</td>
<td>1,621,487</td>
</tr>
<tr>
<td>8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)</td>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Exploited exempt activity income (Schedule I)</td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Advertising income (Schedule J)</td>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income (See instructions; attach schedule.)</td>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total. Combine lines 2 through 12</td>
<td>13</td>
<td>1,667,908</td>
<td>1,621,487</td>
</tr>
</tbody>
</table>

### Part II Deductions Not Taken Elsewhere

(See instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income)

<table>
<thead>
<tr>
<th>Description</th>
<th>(C) Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>14 Compensation of officers, directors, and trustees (Schedule K)</td>
<td>14</td>
</tr>
<tr>
<td>15 Salaries and wages</td>
<td>15</td>
</tr>
<tr>
<td>16 Repairs and maintenance</td>
<td>16</td>
</tr>
<tr>
<td>17 Bad debts</td>
<td>17</td>
</tr>
<tr>
<td>18 Interest (attach schedule)</td>
<td>18</td>
</tr>
<tr>
<td>19 Taxes and licenses</td>
<td>19</td>
</tr>
<tr>
<td>20 Charitable contributions (See instructions for limitation rules)</td>
<td>20</td>
</tr>
<tr>
<td>21 Depreciation (attach Form 4562)</td>
<td>21</td>
</tr>
<tr>
<td>22 Less depreciation claimed on Schedule A and elsewhere on return</td>
<td>22</td>
</tr>
<tr>
<td>23 Depletion</td>
<td>23</td>
</tr>
<tr>
<td>24 Contributions to deferred compensation plans</td>
<td>24</td>
</tr>
<tr>
<td>25 Employee benefit programs</td>
<td>25</td>
</tr>
<tr>
<td>26 Excess exempt expenses (Schedule I)</td>
<td>26</td>
</tr>
<tr>
<td>27 Excess readership costs (Schedule J)</td>
<td>27</td>
</tr>
<tr>
<td>28 Other deductions (attach schedule)</td>
<td>28</td>
</tr>
<tr>
<td>29 Total deductions. Add lines 14 through 28</td>
<td>29</td>
</tr>
<tr>
<td>30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13</td>
<td>30</td>
</tr>
<tr>
<td>31 Net operating loss deduction (limited to the amount on line 30)</td>
<td>31</td>
</tr>
<tr>
<td>32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30</td>
<td>32</td>
</tr>
<tr>
<td>33 Specific deduction (Generally $1,000, but see instructions for exceptions.)</td>
<td>33</td>
</tr>
<tr>
<td>34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32</td>
<td>34</td>
</tr>
</tbody>
</table>
### Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) *(see instructions)*

1. **Description of property**

   (1)  
   (2)  
   (3)  
   (4)  

2. **Rent received or accrued**

<table>
<thead>
<tr>
<th>(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)</th>
<th>(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)</th>
<th>3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong> 0</td>
<td><strong>Total</strong> 0</td>
<td></td>
</tr>
</tbody>
</table>

(c) **Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A).**

| (b) **Total deductions.** Enter here and on page 1, Part I, line 6, column (B). | 0 |

### Schedule E - Unrelated Debt-Financed Income *(see instructions)*

1. **Description of debt-financed property**

<table>
<thead>
<tr>
<th>2. Gross income from or allocable to debt-financed property</th>
<th>3. Deductions directly connected with or allocable to debt-financed property</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a) Straight line depreciation (attach schedule)</td>
<td>(b) Other deductions (attach schedule)</td>
</tr>
<tr>
<td>SEE STATEMENT 2</td>
<td>SEE STATEMENT 3</td>
</tr>
<tr>
<td>----------------------------------------------------------</td>
<td>----------------------------------------------------------</td>
</tr>
<tr>
<td>(1) COMMERCIAL OFFICE BUILDING, WASHINGTON, DC</td>
<td>2,053,821</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
</tbody>
</table>

4. **Amount of average acquisition debt on or allocable to debt-financed property (attach schedule).**

<table>
<thead>
<tr>
<th>5. Average adjusted basis of or allocable to debt-financed property (attach schedule)</th>
<th>6. Column 4 divided by column 5</th>
<th>7. Gross income not taxable (column 2 x column 6)</th>
<th>8. Allocatable deductions (column 6 x total of columns 3(a) and 3(b))</th>
</tr>
</thead>
<tbody>
<tr>
<td>SEE STATEMENT 4</td>
<td>SEE STATEMENT 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------------------</td>
<td>----------------------------------------------------------</td>
<td>----------------------------------------------------------</td>
<td>----------------------------------------------------------</td>
</tr>
<tr>
<td>(1) 17,324,000</td>
<td>21,332,822</td>
<td>81.21%</td>
<td>1,667,908</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Enter here and on page 1, Part I, line 7, column (A).**

**Enter here and on page 1, Part I, line 7, column (B).**

**Total dividends-received deductions included in column 8**

### Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations *(see instructions)*

1. **Name of controlled organization**

<table>
<thead>
<tr>
<th>2. Employer identification number</th>
<th>3. Net unrelated income (loss) (see instructions)</th>
<th>4. Total of specified payments made</th>
<th>5. Part of column 4 that is included in the controlling organization's gross income</th>
<th>6. Deductions directly connected with income in column 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Nonexempt Controlled Organizations**

7. **Taxable Income**

<table>
<thead>
<tr>
<th>8. Net unrelated income (loss) (see instructions)</th>
<th>9. Total of specified payments made</th>
<th>10. Part of column 9 that is included in the controlling organization's gross income</th>
<th>11. Deductions directly connected with income in column 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).**

**Add columns 6 and 11. Enter here and on page 1, Part I, line 6, column (B).**

**Totals**

0 0
Form 990-T (2010)

Page 2

Part III  Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation.
   Controlled group members (sections 1561 and 1563) check here □ See instructions and:
   a. Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order):
   (1) $   □
   (2) $   □
   (3) $   □
   b. Enter organization's share of: (1) Additional 5% tax (not more than $17,750)
   (2) Additional 3% tax (not more than $100,000)
   c. Income tax on the amount on line 34
   35c  □ 0.

36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from:
   □ Tax rate schedule or  □ Schedule D (Form 1041)
   □ 36

37 Proxy tax. See instructions
   □ 37

38 Alternative minimum tax
   □ 38

39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies
   □ 39
   □ 0.

Part IV  Tax and Payments

40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)
   □ 0.

40b Other credits (see instructions)
   □ 0.

40c General business credit. Attach Form 3800
   □ 0.

40d Credit for prior year minimum tax (attach Form 8801 or 8827)
   □ 0.

40e Total credits. Add lines 40a through 40d
   □ 0.

41 Subtract line 40e from line 39
   □ 39
   □ 0.

42 Other taxes. Check if from: □ Form 4255 □ Form 8611 □ Form 8697 □ Form 8866 □ Other (attach schedule)
   □ 42

43 Total tax. Add lines 41 and 42
   □ 43
   □ 0.

44a Payments: A 2009 overpayment credited to 2010
   □ 0.

44b 2010 estimated tax payments
   □ 0.

44c Tax deposited with Form 8868
   □ 0.

44d Foreign organizations: Tax paid or withheld at source (see instructions)
   □ 0.

44e Backup withholding (see instructions)
   □ 0.

44f Credit for small employer health insurance premiums (Attach Form 8941)
   □ 0.

44g Other credits and payments: □ Form 2439 □ Form 4136 □ Other □ Total
   □ 44g

45 Total payments. Add lines 44a through 44g
   □ 45

46 Estimated tax penalty (see instructions). Check if Form 2220 is attached □
   □ 46

47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed
   □ 47
   □ 0.

48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid
   □ 48
   □ 0.

49 Enter the amount of line 48 you want. Credited to 2011 estimated tax □ Refunded □
   □ 49

Part V  Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2010 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? Yes □ No □
   X

2 During the tax year, did the organization receive a distribution from, or was it the grantor of, a trust that is a foreign trust? Yes □ No □
   X

3 Enter the amount of tax-exempt interest received or accrued during the tax year □

Schedule A - Cost of Goods Sold. Enter method of inventory valuation □ N/A

1 Inventory at beginning of year
   □ 1

2 Purchases
   □ 2

3 Cost of labor
   □ 3

4a Additional section 263A costs
   □ 4a

4b Other costs (attach schedule)
   □ 4b

5 Total. Add lines 1 through 4b
   □ 5

Sign Here

Signature of officer

Date

CFO Title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check if self-employed

PTIN

Firm's EIN

Phone no.

Firm's address

Form 990-T (2010)

111

08321115 755908 187569 2010.04020 POPULATION SERVICES INTERNATIONAL 187569_2