

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



For Paperwork Reduction Act Notice, see the separate instructions.

Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2012

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

Open to Public

Inte	nai Kever	nue Service The organization may have to use a copy of this return to satisfy state	reporting requ	rements.	inspection	
A	For the	e 2012 calendar year, or tax year beginning 1/1 , 2012, and en	ding 1	2/31	, 20 12	
В	Check if	applicable C Name of organization COMITE OLIMPICO DE PUERTO RICO, INC.		D Employer identification number		
	Address	change Doing Business As COMITE OLIMPICO DE PUERTO RICO, INC.			66-0319546	
	Name c	hange Number and street (or P O box if mail is not delivered to street address) Room	/suite	E Telephoi	ne number	
	Initial re	turn PO BOX 8			787-723-3890	
	Termina	ted City, town or post office, state, and ZIP code				
$\overline{\Box}$		ed return SAN JUAN, PR 00902		G Gross re	eceipts \$ 12,311,316	
\Box		tion pending F Name and address of principal officer	H(a) is thus		for affiliates? Yes No	
	Applicat	SARA ROSARIO, PO BOX 8 SAN JUAN, PR 00902	1		ncluded? Yes Vo	
_	T-1/ -1/-				ı list, (see instructions)	
÷	Website					
<u>-</u>				p exemption		
_		organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of for	mation: 1966	M State	of legal domicile PR	
ŀ	art I	Summary				
	1	Briefly describe the organization's mission or most significant activities: TO				
ø		DELEGATION OF PUERTO RICO ON OLYMPIC AND REGIONAL TOURNAMENTS,	AND TO PROM	OTE THE	ORGANIZED	
au c		AMATEUER SPORT DICIPLINES THROUGH THEIR RELATED FEDERATIONS.				
Ë						
Activities & Governance	2	Check this box ▶ ☐ if the organization discontinued its operations or dispose	d of more tha	n 25% of	its net assets.	
G	3	Number of voting members of the governing body (Part VI, line 1a)		. 3	7	
S	4	Number of independent voting members of the governing body (Part VI, line 1	b)	. 4		
įţį	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		. 5	37	
Ę	6	Total number of volunteers (estimate if necessary)		6		
ĕ	7a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	····	
	b	Net unrelated business taxable income from Form 990-T, line 34		7b		
	5	Net unrelated business taxable income from Form 990-1, life 34	Prior Y		Current Year	
		O-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				
ē	8	Contributions and grants (Part VIII, line 1h)		9,086,690	12,110,105	
Revenue	9	Program service revenue (Part VIII, line 2g)				
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)				
-	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		184,476	201,211	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,271,166	12,311,316	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1			
	14	Benefits paid to or for members (Part IX, column (A), line 4)				
s	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		813,718	854,351	
3Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)				
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) ▶	Н . г		.,	
Щ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1 P	8,332,438	10,369,348	
	18	Total expenses. Add lines 13–17 (must equal Raft (X) column (A) line 25)		9,146,156		
	19				11,223,699	
		Revenue less expenses. Subtract line 18 from-line 12	Posinging of C	125,010	1,087,617 End of Year	
ets or		191 4 2042 101	Beginning of C			
Net Asset Fund Balar	20			1,345,689	28,813,898	
et A	21			1,319,466	472,466	
		Net assets or fund balances. Subtract line 21 from line 20	<u> </u>	26,223	28,341,432	
	art II	Signature Block				
		ilties of pendry, I declare that I have examined this return, including accompanying schedules and st			ny knowledge and belief, it is	
tru	e, correc	t, and complete Declaration of preparer (other than officer) is based on all information of which prepared	arer has any know	ledge		
		1 alt two		7.8	19	
Sig	yn 💮	Signature of officer/	Di	ate		
He						
	_	Type or print name and title				
_		Print/Type preparer's name Preparer's signature	Date		PTIN	
Pa		CARRIEL A MORENO CANTIAGO ATA	7/1/13	Check [
	epare	I MODENO CANTIACO O CO (DA)- COD		self-emp	<u> </u>	
Us	e On	y Firm's name ► MORENO SANTIAGO & CO. 6PA's CSP	Fin	n's EIN ▶	66-0625340	
		Firm's address ► R7 COLONIAL ST. PARK GARDEN SAN JUAN, PR 00926	Ph	one no	787-283-8937	
Ma	v the li	RS discuss this return with the preparer shown above? (see instructions)			☑ Yes ☐ No	

917

Form **990** (2012)

Cat. No. 11282Y

Form 991	0 (2012) Page 2
Part I	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: TO APPROVE AND CERTIFY THE PUERTO RICO OLYMPIC DELEGATION ON OLYMPIC AND REGIONAL TOURNAMENTS, AND TO PORMOTE THE ORGANIZED AMATEUR SPORT DECIPLINES THROUGH THEIR RELATED FEDERATIONS. THE PR OLYMPIC COMMITTEE ALSA PROVIDES FINANCIAL ASISTANCE TO ATHELETES AND THEIR FEDERATIONS AND PROVIDE FACILITIES FOR THEIR TRAINING.
	Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 4,942,271 including grants of \$) (Revenue \$ 4,942,271) SPORTS DELEGATIONS RECEIVED ECONOMIC SUPPORT FROM THE ORGANIZATION TO COVER THEIR OPERATING AND ADMINISTRATIVE EXPENSES, INCLUDING TRANSPORTATION, TRAINING AND MEALS ON THEIR DIFFERENT TOURNAMENTS.
	TRAINING FACILITIES WERE ALSO PROVIDED TO ATHLETES AND FEDERATION.
	······
	•••••••••••••••••••••••••••••••••••••••
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	
	<u></u>
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
	······
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 4,942,271

Page 2

Part	Checklist of Required Schedules			
	In the constant of a continue for the co		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	,	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		~
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		~
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		•
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		,
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 "Yes," complete Schedule D, Part II</i>	7		v
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
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		v
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		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	~	
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		,
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		,
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		,
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	~	
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		~
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	v	
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		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14 a		14a		~
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			
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	14b		~
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		,
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		,
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			~
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	18		~
20 a	The state of the s	20a	 	V
b	and the control of th	20b		V

enu	Checklist of Required Schedules (Continued)			
04	Did the assessmentian waves then \$5,000 of greate and other applicance to any government or organization		Yes	No
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? If "Yes," complete Schedule I, Parts I and II	21		~
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		~
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		,
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		
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		v v
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		V
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
26	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		~
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		~
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		~
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		,
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		~
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		V
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		,
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		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		,
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		,
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
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		~
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	-	~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u> </u>	ļ	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		,
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	v	
				_

Part				_
	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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		ľ
	reportable gaming (gambling) winnings to prize winners?	1c		~
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
_	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		~
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		~
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?			,
b	If "Yes," enter the name of the foreign country: ▶	4a		ř
_	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	`	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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		~
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).		,	
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?	<u> </u>		
		7a		<i>V</i>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7b		, v
Ŭ	required to file Form 8282?	7c		,
d	If "Yes," indicate the number of Forms 8282 filed during the year	- 10		_
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1
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		1
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		<u>. </u>	
	organization, have excess business holdings at any time during the year?	8		~
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>	`	
a	Did the organization make any taxable distributions under section 4966?	9a		-
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		~
а	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
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:	1		
a	Gross income from members or shareholders		'	
b	Gross income from other sources (Do not net amounts due or paid to other sources	1 1		
	against amounts due or received from them.)	1	'	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		~
	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	4.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		V
D	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

romi 99				rage U
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S	ee ins	truct	ions.
Saction	Check if Schedule O contains a response to any question in this Part VI	• •	• •	<u>. ப</u>
<u> </u>	or 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			. 1
	If there are material differences in voting rights among members of the governing body, or			ŀ
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b N/A			
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?			لبا
3	Did the organization delegate control over management duties customarily performed by or under the direct	2		
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		/
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	~	_
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		~
6	Did the organization have members or stockholders?	6	-	V
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		<u></u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			V
_	stockholders, or persons other than the governing body?	7b		ļ <u>,</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		. 	
_	the year by the following:		~	 J
a b	The governing body?	8a 8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	OD		\vdash
_	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.))
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		,
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		~
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		~
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		~
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		V
13	Did the organization have a written whistleblower policy?	13		~
14	Did the organization have a written document retention and destruction policy?	14		~
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		,	
а	The organization's CEO, Executive Director, or top management official	15a		~
b	Other officers or key employees of the organization	15b		~
40-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	, ,	, '	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		-
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	<u> </u>	V
Section	on C. Disclosure			1
17	List the states with which a copy of this Form 990 is required to be filed ▶ N/A		••••	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website		_	,.
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict o	ınte	rest p	oolicy,
20	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		
20	organization: ► MR. CARLOS VAZQUEZ, AVE PONCE DE LEON PDA. 1 SAN JUAN, PR 00902	J. 1116	•	

Pa	•	0	7

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

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

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

☐ Check this box if neither the organization no	r any relate	d orga	aniz	atio	n c	ompe	nsa	ited any curren	t officer, director	, or trustee.
(A) Name and Title	(B) Average hours per week (list any	(do n	ot ch	Pos neck as pe d a d	c) Ition more	than one that the that the that the that the that the that the the that the the that the that the that the the that the the that the the the that the the the the the the the the the th	one n an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) SARA ROSARIO										
PRESIDENT (2) VIOTOR BUILT	40	-	-		<u> </u>			65,824		
(2) VICTOR RUIZ 1ST VICEPRESIDENT		~								
(3) VICTOR LOPEZ	ļ		ļ							
2ND VICEPRESIDENT		~								
(4) CARLOS J. BELTRAN SECRETARY		,								
(5) IVAN SANTOS ORTEGA ASSIT SECRETARY		,								
(6) HUMBERTO TORRES TREASURER		~								
(7) GLORIA ROSA ASSIT TREASURER		~								
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C)											
(A) Name and title		(B) Average hours per week (list any	box, i	unles er and	Pos leck is pe d a d	rtion more rson rect	than on the state of the state	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	oth	ated nt of er
		hours for related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		the zation lated
(15)												
(16)												
(17)												
(18)												
(19)												
(20)												
(21)												
(22)										<u> </u>		
(23)												
(24)							·					
(25)												
1b c	Sub-total	VII, Sectio				 	•	<u> </u>	65,824			
d	Total (add lines 1b and 1c)	not limited						e) w	65,824 ho received m	l	,000 of	
3	Did the organization list any former of employee on line 1a? If "Yes," complete to	ficer, direc									F	res No
4	For any individual listed on line 1a, is the organization and related organizations individual	greater th	an \$ ⁻	150, ·)? <i>l</i> : 	f "Ye.	s," ·	complete Sch	nedule J for	such 4	~
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or indiv	27	V
Section	on B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Repyear.											n's tax
	(A) Name and business add	ress							(B) Description of s	ervices	(C) Compensa	tion
2	Total number of independent contractor							th	nose listed ab	ove) who		

Part	VIII	Statement of Reve						
		Check if Schedule O	contains a res	ponse to any ques			<u></u>	<u></u> <u>.</u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated campaigns	1a	a				
ran	b	Membership dues .		5				•
s, G	С	Fundraising events .	10	3		-	Ϊ	
Contributions, Gifts, Grants and Other Similar Amounts	d	Related organizations		± t]	
imil	е	Government grants (con		5,500,178				
tior er S	f	All other contributions, gi			'		1	
흕		and similar amounts not inc	<u></u>		, .	,		[
ig de	g	Noncash contributions include		·	+ 	• j]
	h	Total. Add lines 1a-1	<u>f </u>	<u> ▶</u>	12,110,105	<u> </u>		
J.	_			Business Code	<u> </u>	 		
eve	2a							
E	Ь							-
eΖį	C d							
Š	e			L				
Program Service Revenue	f	All other program sen						·
5	g	Total. Add lines 2a-2						
	3	Investment income	(including div	idends, interest,			1	
		and other similar amo		🕨				
	4	Income from investment	t of tax-exempt	bond proceeds ►				
	5	Royalties	<u> </u>	<u></u> ▶				
			(i) Real	(II) Personal				
	6a	Gross rents	201,2	11			1	
	b	Less rental expenses			,	i i	1	
	С	Rental income or (loss)						
	d	Net rental income or (<u> ▶ </u>	201,211			
	7a	Gross amount from sales of	(i) Securities	(ii) Other	[. "		
	١.	assets other than inventory	ļ		.,	,		
	Ь	Less: cost or other basis and sales expenses .			٠,			
		•				1		
	C	Gain or (loss) Net gain or (loss) .						
	d	iver gain or (ioss) .		·	<u> </u>	-		
e	8a	Gross income from fu	ındraising] .	ý		
venue	"	events (not including \$	indialing				ľ	
ě		of contributions reporte	ed on line 1c).			j	1	
7		See Part IV, line 18 .		а	,		1	
Other Re	b	Less: direct expenses	3	b	ļ	į		
U		Net income or (loss) f						
	9a	Gross income from ga	aming activities					
		See Part IV, line 19 .		а	<u> </u> :	ļ.		,,
		Less: direct expenses				ς		
		Net income or (loss) f						
	10a	Gross sales of in	ventory, les	S		,		ľ
	ĺ	returns and allowance				<u>.</u>		4
		Less: cost of goods s		b	ļ .	-	<u> </u>	
	С	Net income or (loss) f						· _
	44-	Miscellaneous H	noveriue	Business Code	 	 -	 	
	11a			-			-	
	b			·		 	 	
	C	All other revenue		·	 			
	d	All other revenue . Total. Add lines 11a-						 -
	12	Total revenue. See II			12,311,316			
						1		

ruiii 98					rage 10
	IX Statement of Functional Expenses			· · · · · · · · · · · · · · · · · · ·	
Sectio	n 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon				
	t include amounts reported on lines 6b, 7b, , 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	_		,	
2	Grants and other assistance to individuals in the United States. See Part IV, line 22			ì	
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	791,376		791,376	
9	Other employee benefits				
10	Payroll taxes	62,975		62,975	
11	Fees for services (non-employees):	,			
а	Management				
b	Legal			'	
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	,			
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	1,732,064	934,966	797,098	
12	Advertising and promotion	53,549		53,549	
13	Office expenses	81,187	9,005	72,182	
14	Information technology				
15	Royalties				
16	Occupancy	99,172	50,182	48,990	
17	Travel	7,568	7,568		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings . Interest				
21	Payments to affiliates	983,201	983,201		
22	Depreciation, depletion, and amortization .	42,757		42,757	
23	Insurance	108,253	74,296	33,957	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If	5		: 	
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)			} •	
а	SEE SCHEDULE O	7,261,597	3,088,101	4,173,496	
b					
C					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	11,223,699	5,147,319	6,076,380	
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)				

P	art X	Balance Sheet			
		Check if Schedule O contains a response to any question in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	635,782	1	925,756
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net	500,000	3	27,727,592
	4	Accounts receivable, net	35,000	4	
	5	Loans and other receivables from current and former officers, directors,	\$		
		trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	÷ :	6	
šet	7	Notes and loans receivable, net	••	7	
Assets	8	Inventories for sale or use		8	
•	9	Prepaid expenses and deferred charges	11,681	9	14,501
	10a	Land, buildings, and equipment. cost or	n h	,	. ,
	_	other basis. Complete Part VI of Schedule D 10a 902,943	101.000		
	b	Less: accumulated depreciation 10b 758,767	161,353		144,176
	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	1,873		1,873
	16	Total assets. Add lines 1 through 15 (must equal line 34)	1,345,689		28,813,898
	17	Accounts payable and accrued expenses	627,953		460,694
	18	Grants payable	<u>.</u>	18	
	19	Deferred revenue	25,000		
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and	, ,		`
ģ		disqualified persons. Complete Part II of Schedule L	•	22	
Ë	23	Secured mortgages and notes payable to unrelated third parties [23	
	24	Unsecured notes and loans payable to unrelated third parties	650,000	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	16,513		11,772
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	1,319,466	26	472,466
_		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
ë		complete lines 27 through 29, and lines 33 and 34.			
Net Assets or Fund Balances	27	Unrestricted net assets	(473,777)	27	613,840
3a	28	Temporarily restricted net assets	500,000	28	27,727,592
ᅙ	29	Permanently restricted net assets		29	
٦		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and	15 14		'
ž		complete lines 30 through 34.		-	
Š	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds .		32	
ē	33	Total net assets or fund balances	26,223	33	28,341,432
~	34	Total liabilities and net assets/fund balances	1,345,689	34	28,813,898

		Pa	ge 12
		12,31	
		11,22	
-			7,617 6,223
-			0,223
_		28,31	5,209
		28,34	1,432
		Yes	No
	•	, ,	
	2a		
		ĺ	
		•	,
	2b	~	
- 1			

Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI Total revenue (must equal Part VIII, column (A), line 12) 2 2 3 3 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . . . 5 5 6 6 8 8 a Other changes in net assets or fund balances (explain in Schedule O) 9 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 10 Part XII Financial Statements and Reporting Accounting method used to prepare the Form 990:
Cash
Accrual 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? . . . If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis **b** Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in За b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form 990 (2012)

Form **990** (2012)

SCHÈDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Employer identification number

66-0319546

COM	IITE OLIMPICO DE F	PUETO RICO, INC							66-03	319546
Pai	t Reason f	or Public Cha	rity Status (All orga	nizations	s must c	omplete	this par	t.) See i	nstruction	ons.
The 6	☐ A church, con☐ A school desc☐ A hospital or a	vention of churcl ribed in section a cooperative hos	ition because it is: (Fo hes, or association of 170(b)(1)(A)(ii). (Attac spital service organiza	churches th Scheduation desc	describe ule E.) cribed in s	ed in sec section 1	tion 170(170(b)(1)(b)(1)(A)(i A)(iii).		
4	 ☐ A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 									
5	section 170(b)(1)(A)(iv). (Com _l	plete Part II.)						vernmen	tal unit described in
6 7	An organization	on that normally	nment or government receives a substantia (A)(vi). (Complete Par	l part of					nit or fror	m the general public
8	☐ A community t	trust described i	n section 170(b)(1)(A)	(vi). (Cor	nplete Pa	ırt II.)				
9	receipts from support from acquired by th	activities related gross investme le organization a	receives: (1) more that to its exempt funct nt income and unrel fter June 30, 1975. Se	ions—sul lated bus ee sectio	oject to d siness tax n 509(a) (certain exable ince 2). (Comp	ceptions come (les olete Part	s, and (2) ss section t III.)	no mor n 511 ta	e than 331/3% of its
10 11	An organization purposes of one 509(a)(3). Che	on organized and one or more publick the box that one or the box that one or the box that of t	operated exclusively ad operated exclusive blicly supported organ describes the type of	ely for th nizations supportin	e benefit described ig organiz	t of, to p d in sect zation and	perform to ion 509(a dicomple	the funct a)(1) or se te lines 1	ions of, ection 50 1e throu	9(a)(2). See section gh 11h.
e		indation manage	II c Type III that the organization ers and other than one	is not co	ntrolled d	lirectly or	indirectly	y by one	or more	
f	organization, o	check this box .								pe III supporting
g	Since August following pers		he organization accep	oted any	gift or co	ontributio	n from a	ny of the)	
			ndirectly controls, eitlody of the supported o							nd Yes No
	•		on described in (i) abd a person described in							11g(ii)
h			on about the support				• • •	• • •	• • •	
(i)	Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document? (v) Did you notify the organization in col. (i) of your support?			nization in of your			(vii) Amount of monetary support
				Yes	No	Yes	No	Yes	No	
(A)										
(B)										
(C)										
(D)										
(E)										
Tota	 I]:			, , , , , , , , , , , , , , , , , , ,			

Schedulè A (Form 990 or 990-EZ) 2012 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts. grants, contributions, membership fees received. (Do not include any "unusual grants.") . . . 4,802,593 9,932,919 8,389,240 4,918,584 11,412,655 39,455,991 revenues levied organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 697,450 697,450 697,450 697,450 697.450 3,487,250 5,500,043 5,616,034 10,630,369 9,086,690 12,110,105 42,943,241 Total. Add lines 1 through 3. . . . The portion of total contributions by 5 each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 42,943,241 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2008 (b) 2009 (c) 2010 (e) 2012 (f) Total (d) 2011 5,500,043 5,616,034 10,630,369 9,086,690 12,110,105 42,943,241 Amounts from line 4 Gross income from interest, dividends. payments received on securities loans. rents, royalties and income from sımılar Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 132,258 134,603 164,555 184,476 201,211 817,103 Total support. Add lines 7 through 10 43,760,344 11 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 99 % Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 14 Public support percentage from 2011 Schedule A, Part II, line 14 15 15 % 16a 331/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this ~ b 331/3% support test - 2011, If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization \checkmark 17a 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test-2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

	le A (Form 990 or 990-EZ) 2012						Page 3
Part	Support Schedule for Organiza	tions Descr	ibed in Sect	ion 509(a)(2)			
	(Complete only if you checked th						der Part II.
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	II.)	
	on A. Public Support	() 0000	4-1-0000	1-1-0040	(-I) 0044	(-) 0010	(A) Total
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise			 			
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b			•			
Secti	on B. Total Support		<u> </u>	<u> </u>	<u> </u>	L	
	idar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	(u) 200 <u>0</u>	(5) 2000	(6) 2010	(4) 2011	(0) 2012	(i) Total
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.		:				
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b				ļ		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop her	re		nd, third, fourth			
	ion C. Computation of Public Suppor		·	10 ash (0)		45	
15	Public support percentage for 2012 (line 8						<u>%</u> %
16 Sect	Public support percentage from 2011 School D. Computation of Investment Inc.					10	90
17	Investment income percentage for 2012 (by line 13 colu	mn (fl)	. 17	%
18	Investment income percentage from 2011			-		18	% %
19a	331/3% support tests—2012. If the organ						

17 is not more than 331/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 331/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

20

P	an	4

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
PART II LII	NE 10
THE COMI	TE OLIMPICO DE PUERTO RICO, INC IS AUTHORIZED BY LAW TO RENT SPACES FOR OFFICES AND COFERENCE ROOMS FOR
MAINTENA	ANCE AND REPAIRS OF THE HISTORIAL FACITIES WHERE IS LOCATED.
•••••	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047 2012

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Maille U	i ule organización		Employer identification number
COMIT	TE OLIMPICO DE PUERTO RICO, INC.		66-0319546
Par		or Advised Funds or Other Similar I	Funds or Accounts. Complete if the
	organization answered "Yes" to F		, ,,,
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and	donor advisors in writing that the asset	ts held in donor advised
J	funds are the organization's property, subje-	9	
6	Did the organization inform all grantees, do	-	
·	only for charitable purposes and not for the		
	conferring impermissible private benefit?		
Par		plete if the organization answered "Ye	
1	Purpose(s) of conservation easements held		
•	Preservation of land for public use (e.g.,		
	Protection of natural habitat	·	on of a certified historic structure
	Preservation of open space	Fleservatio	on of a certified historic structure
2	Complete lines 2a through 2d if the organization	ation held a qualified conservation contrib	oution in the form of a conservation
~	easement on the last day of the tax year.	ation held a qualified conservation continu	oution in the form of a conservation
	discribit on the last day of the tax your.		Held at the End of the Tax Year
_	Total number of conservation easements		
a	Total acreage restricted by conservation eas		
b	Number of conservation easements on a ce		
c d	Number of conservation easements on a ce		
u	historic structure listed in the National Regis		I I
3	Number of conservation easements modifie		
Ŭ	tax year ▶	a, transferred, released, extinguished, or	terminated by the organization during the
4	Number of states where property subject to	conservation easement is located	
5	Does the organization have a written po		inspection handling of
•	violations, and enforcement of the conserva		
6	Staff and volunteer hours devoted to monitor		
•		mily, mapocing, and emoroning conserva	non casemonts during the year
7	Amount of expenses incurred in monitoring,	inspecting and enforcing conservation (easements during the year
•	▶ \$	more and officially defice value.	sassification during the year
8	Does each conservation easement reported	on line 2(d) above satisfy the requiremen	nts of section 170(h)(4)(B)
_	(i) and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization re	enorts conservation easements in its reve	
	balance sheet, and include, if applicable, the		
	organization's accounting for conservation		
Pari		ections of Art, Historical Treasures	. or Other Similar Assets.
		vered "Yes" to Form 990, Part IV, line	
1a			
	works of art, historical treasures, or other	similar assets held for public exhibition	, education, or research in furtherance of
	public service, provide, in Part XIII, the text		
b	If the organization elected, as permitted u	nder SFAS 116 (ASC 958), to report in	its revenue statement and balance sheet
	works of art, historical treasures, or other		
	public service provide the following amount	te relating to those stome:	
	(i) Revenues included in Form 990, Part VII (ii) Assets included in Form 990, Part X.	. line 1	> \$
	(ii) Assets included in Form 990. Part X		\$
2	If the organization received or held works	of art, historical treasures, or other sin	nilar assets for financial gain, provide the
_	following amounts required to be reported u		
-	- · · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , , ,	
a	Revenues included in Form 990, Part VIII, lin		· · · · · · · · · · · · · · · · · · ·

_			^
Pa	a	e	~

3 Using the organization's acquesition, accession, and other records, check any of the following that are a significant use of its collection learns (check all that apply): a □ Public exhibition b □ Scholarly research c □ Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . □ Yes □ No Part IV	Part	III Organizations Maintaining	Colle	ections of	Art. His	torical 1	Treasures	. or Ot	her Similar As	ssets (continued)
collection items (check all that apply): a										
a Public exhibition d Loan or exchange programs b Scholarly research e Other c Preservation for future generations d Other c Preservation for future generations d Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5				·		·	•		J	ū
b	а				d	☐ Loan	or exchang	e progi	rams	
c	b	Scholarly research								
A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization an assets to the sold to raise funds rather than to be maintained as part of the organization an assets to the sold to raise funds rather than to be maintained as part of the organization an assets to the sold to raise funds rather than to be maintained as part of the organization is excellentially assets to the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?. It is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part X! in e. 2. Beginning balance	С	_ *	S							••••••
XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	_			collections a	and expla	ain how t	hey further	the org	janization's exei	npt purpose in Part
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?										
Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV. line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No Yes No Yes No Yes	5									
line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Seginning balance		assets to be sold to raise funds rather	r than	to be mainta	ained as p	part of the	e organızatı	on's co	llection?	☐ Yes ☐ No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	Part	IV Escrow and Custodial Arra	anger	ments. Co	mplete i	f the org	anization	answei	red "Yes" to F	orm 990, Part IV,
included on Form 990, Part X?		line 9, or reported an amour	nt on I	Form 990, I	Part X, li	ne 21.				
included on Form 990, Part X?	1a	Is the organization an agent, trustee	, cust	odian or oth	ner intern	nediary fo	or contribut	tions or	other assets n	ot
C Additions during the year 1d		included on Form 990, Part X?								
C Additions during the year 1d	b	If "Yes," explain the arrangement in Pa	art XII	I and comple	ete the fo	llowing to	able:			
d Additions during the year Distributions during the year 1d 1e									A	mount
bustributions during the year f Ending balance 20 Did the organization include an amount on Form 990, Part X, line 21?	С	Beginning balance						1c	:	
f Ending balance Did the organization include an amount on Form 990, Part X, line 21?	d	Additions during the year						1d		
Did the organization include an amount on Form 990, Part X, line 21?	e	Distributions during the year						1e		
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e)	f	Ending balance						1f		
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (e)	2a	Did the organization include an amoun	nt on I	Form 990, P	art X, line	21? .				☐ Yes ☐ No
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (d) Three years back (e) Four years back (e)	b	If "Yes," explain the arrangement in P	art XII	I. Check her	e if the ex	kplanatio	n has been	provide	ed in Part XIII .	🗖
Beginning of year balance	Part									
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accumulated depreciation b Buildings c Leasehold improvements d Equipment 746,946 Cother 155,997 155,997 155,997			(a) (Current year	(b) Pri	or year	(c) Two year	rs back	(d) Three years bac	k (e) Four years back
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment % b Permanent endowment % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (c) Accumulated depreciation b Buildings c Leasehold improvements d Equipment 746,946 Cother 155,997 155,997 155,997	1a	Beginning of year balance					· · · · · · · · · · · · · · · · · · ·			
c Net investment earnings, gains, and losses	b								 '	
d Grants or scholarships	С									
e Other expenditures for facilities and programs			ļ							
e Other expenditures for facilities and programs	d	Grants or scholarships								
f Administrative expenses		•								-
f Administrative expenses	_									
g End of year balance	f	· =								
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: Board designated or quasi-endowment ▶ % Permanent endowment ▶ % Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations		•								
a Board designated or quasi-endowment b Permanent endowment c Temporarily restricted endowment 6	_	-	the cu	rrent vear er	nd balanc	e (line 1c	r column (a	n) held :	28'	
b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations				-		91 3111) 3	, column (c	y noa e	43.	
Temporarily restricted endowment ► % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	_	•	. •							
The percentages in lines 2a, 2b, and 2c should equal 100%. Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations										
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	·	•			100%					
organization by: (i) unrelated organizations (ii) related organizations (iii) related	3a					zation th	at are held	and ad	ministered for ti	10
(i) unrelated organizations	ou		o pos	36331011 01 11	ie organi	Zadon di	at are ricia	and ad	illinistered for ti	
(ii) related organizations		,								
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book v		••						• •		
4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (other) (other) (c) Equipment (d) Book value (d) Boo	h	• •				 on Cabad	· · · ·	• •		
Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value (other) (e) Cost or other basis (e)								• • •		SD
Description of property (a) Cost or other basis (other) (b) Cost or other basis (other) (d) Book value								-		
tall Land (investment) (other) depreciation b Buildings c Leasehold improvements d Equipment e Other	Fall		Jillell					(-)	A	/-A. Danie vielen
b Buildings		Description of property								(a) book value
c Leasehold improvements	1a	Land						ų.	,	
d Equipment	b	Buildings	. [
e Other	С	Leasehold improvements	. [
100,000	d	Equipment	.		746,946				602,770	144,176
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ 114,176	е	Other	<u>. </u>		155,997				155,997	0
	Total.	Add lines 1a through 1e. (Column (d) r	nust e	qual Form 9	90, Part 2	X, columi	n (B), line 10	O(c).)		114,176

Part VII	Investments—Other Securities	See Form 990, Part X. I	ine 12.	- Lugo G
	a) Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year n	
(1) Financia	Il derivatives			
(2) Closely-	held equity interests			
(0) (0)				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I)				
	(b) must equal Form 990, Part X, col. (B) line 12.) ▶		·	,
Part VIII	Investments-Program Related	d. See Form 990, Part X,	line 13.	
	(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year n	
(1)				
(2)				
(3)				
(4)				
(5)				<u> </u>
(6)				
(7)		•		
(8)				
(9)				
(10)				
	(b) must equal Form 990, Part X, col (B) line 13) ▶		, , , , , , , , , , , , , , , , , , ,	
Part IX	Other Assets. See Form 990, Pa			
		a) Description		(b) Book value
(1)				
(2)				····
(3)				
(4)				
(5)				
(6)				
(7)		· · · · · · · · · · · · · · · · · · ·		
(8)				
(9)				
(10)	umn (b) must equal Form 990, Part X, c	not (P) line 15)		
Part X	Other Liabilities. See Form 990		<u> </u>	
1.	(a) Description of liability	(b) Book value	1	· · · · · · · · · · · · · · · · · · ·
	I income taxes	(b) Dook value	1` _ ∥	
	ATION UNDER CAPITAL LEASE	11,772	 	'
(3)	ATION UNDER CAPITAL LEAGE	11,772	∜ . ,	
(4)			√,	
(5)			 	
(6)			- ' ,	
(7)				
(8)			 	
(9)			-{`	
(10)			 	
(11)			1 . • 1 •	
	(b) must equal Form 990, Part X, col. (B) line 25.)	44 770	1	
	SC 740) Footnote. In Part XIII, provide the			t reports the erassization's
Lability for u	incertain tax positions under FIN 48 (ASC	740) Check here if the text of	the footnote has been provided in F	Part XIII
nability lof u	moortain tax positions under 1 in 40 (AGC	, TO). OTHEOR THEIR II WIE LEXI OF	and receipted has been provided in r	WILL

Page 4		4
--------	--	---

Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue po	er Return	
1	Total revenue, gains, and other support per audited financial statements		. 1	12,311,316
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	⊣ .]	
C	Recoveries of prior year grants	2c	 1	
d	Other (Describe in Part XIII.)	2d	\dashv \dashv	
e	Add lines 2a through 2d		. 2e	
3	Subtract line 2e from line 1		. 3	12,311,316
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	. 5	12,311,316
Part	XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses	per Return	-
1	Total expenses and losses per audited financial statements		. 1	11,223,699
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a	<u> </u>	
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	⊣ , ,	
е	Add lines 2a through 2d		. 2e	
3	Subtract line 2e from line 1		. 3	11,223,699
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
С	Add lines 4a and 4b		. 4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	. 5	11,223,699
Part	XIII Supplemental Information			
	lete this part to provide the descriptions required for Part II, lines 3, 5, and , line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b atton.			

Schedule D (Fo	rm 990) 2012	Page 5
Part XIII	Supplemental Information (continued)	
		•

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

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.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

COMITE OLIMPICO DE PUERTO RICO, INC.

Employer identification number 66-0319546

FORM 990 PART V LINE 3B
THE ORGANIZATION IT'S NOT REQUIRED TO FILE FORM 990-T BECAUSE IT DOES NOT HAVE UNRELATED INCOME OF \$ 1,000 OR MORE
FORM 990 PART VI, LINE 11
AFTER COMPLETING THE 990 FORM, IT IS SUBMITTED TO THE FINANCIAL DIRECTOR FOR REVIEW BEFORE SIGNING BY A MEMBER
OF THE GOVERMENTAL BODY. THE FINANCE DEPARTMENT MAIL IT TO IRS AFTER APPROVAL AND SIGN.
FORM 990 PART VI SECTION C, LINE 19
THE ORGANIZATION IS REQUIRED TO PROVIDE COPIES OF THE ANNUAL AUDITED FINANCIAL STATEMENT TO THE DIFFERENT
COMMONWEALTH OF PUERTO RICO GOVERNMENTAL UNITS, ENTITIES AND AGENCIES. OTHER THIRD PARTIES, LIKE FINANCIAL
INSTITUTIONS RECEIVED COPIES FOR ANALYSIS.

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization	Employer identification number
	·····
······································	

COMITE OLIMPICO DE PUERTO RICO 660-31-9546 2012 RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX FOR THE YEAR ENDED DECEMBER 31, 2012

SCHEDULE OF MISCELLANEOUS EXPENSES PAGE 10, PART IX, LINE 24F

DESCRIPTION		A TOTAL EXPENSES		B PROGRAM SERVICES EXPENSES		C MANAGEMENT & GENERAL EXPENSES	
FINANCIAL HELP TO ATHLETES AND OTHERS DUES NON CAPITALIZABLE SPORT EQUIPMENT REPAIR & MAINTENANCE TRANSPORTATION UNIFORMS MEDICAL SERVICES UTILITIES COMMUNICATION MEAL AND OTHER RELATED COSTS FINES OTHER EXPENSES	\$	3,807,374.00 45,604.00 122,094.00 144,350.00 1,106,906.00 142,499.00 250,020.00 192,267.00 41,210.00 68,873.00 8,360.00	\$	1,357,066.00 42,621.00 104,715 00 38,174.00 1,005,348.00 96,232.00 225,000.00	\$	2,450,308.00 2,983.00 17,379 00 106,176.00 101,558 00 46,267.00 25,020.00 192,267.00 41,210.00 41,244.00 8,360.00	
OTHER EAF ENGLS	\$	1,332,040.00 7,261,597.00	\$	191,316.00 3,088,101.00	\$	1,140,724.00 4,173,496.00	