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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury

▶ The organization may have to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service 2012, and ending For the 2012 calendar year, or tax year beginning 20 C Name of organization UNIVERSITY OF PR LAW SCHOOL TRUST D Employer identification number Check if applicable 66-6012387 Address change Doing Business As E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite Name change **BOX 23349 UPR STATION** 787-764-0000 Initial return City, town or post office, state, and ZIP code Terminated 445,656 SAN JUAN, PR 00931 G Gross receipts \$ Amended return Application pending F Name and address of principal officer MARIA A. GARAY H(a) Is this a group return for affiliates? Yes No C/O CORPORATION If "No," attach a list (see instructions) 501(c)(3)) ◀ (insert no) ☐ 4947(a)(1) or Tax-exempt status 」501(c) (Website: ▶ H(c) Group exemption number ▶ Form of organization Corporation I Trust M State of legal domicile Association L Year of formation Part I To promote the advancement of the highest Briefly describe the organization's mission or most significant activities: excellence in legal education with legal education with legal training offered to PR attorneys and candidates for examination thru Activities & Governance seminars and conferences; and legal training offered to groups of Latin American students judicial system representatives. Check this box ► if the organization discontinued its operations or disposed of more than 25% of Number of voting members of the governing body (Part VI, line 1a) . 3 2 2 Number of independent voting members of the governing body (Part VI, line-1b) 4 0 Total number of individuals employed in calendar year 2012 (Part V, line 2a) 5 0 6 0 Total number of volunteers (estimate if necessary) 0 Total unrelated business revenue from Part VIII, column (C), line 12 7a Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** 45,007 65,351 Contributions and grants (Part VIII, line 1h) . 411,188 353.371 Program service revenue (Part VIII, line 2g) 23,249 15,611 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 1,600 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 11,323 11 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) 481.044 445,656 12 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . 36,660 39,475 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . Total fundraising expenses (Part IX, column (D), line 25) ▶ 351,317 344,151 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 380,811 390,792 18 Total expenses, Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12 100.233 54,864 19 **Beginning of Current Year** End of Year 20 1,103,638 1,164,499 Total assets (Part X, line 16) 9,748 15,745 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 1,093,890 1,148,754 Signature Block Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge ্র Sign Hereی Print/Type preparer's name r's signature Paid self-employed P01473531 OMAYRA L NEGRON **₽reparer** 66-0365844 ► ZAYAS, MORAZZANI & CO Firm's name Firm's EIN ▶

PO BOX 366225 SAN JUAN, PR 00936-6225

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)

✓ Yes
☐ No

787-753-7025

Phone no

1	Check if S	chequie O contains	a response to any question in this Part	tIII <u></u>	<u></u> [
	Promoting the a		ission: agest Excellence in Legal Education		
2			significant program services during the year		
3	Did the organiz	e these new services zation cease conduc	cting, or make significant changes in h	now it conducts, any progran	n
		· · · · · · · · · · · · · · · · · · ·			☐ Yes 🗹 No
4	Describe the orgenses. Section	ganization's program on 501(c)(3) and 501	service accomplishments for each of its (c)(4) organizations are required to repor ny, for each program service reported.		
4a	(Code:) (Expenses \$	220,665 including grants of \$) (Revenue \$	208,313)
	training offered group of Latin A	to PR attorneys and ca merican students judi	the Educational Programs were the advance andidates for examination thru seminars an cial systems representatives.	d conferences and legal training	offered to a
4b	(Code.) (Expenses \$	101,243 including grants of \$ the Examination Review were the advacement) (Revenue \$	145,058) egal Education,
	group of Latin A	merican students judi	cial systems representatives.		
					·
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
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4 c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code:) (Expenses \$	including grants of \$) (Revenue \$)

Part I	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	~	ļ <u>.</u>
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			ر ا
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		V
•	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? If "Yes," complete Schedule D, Part II	_		
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		~
b	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			
Ū	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	1	
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	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.	SARLES	A Co	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
h	complete Schedule D, Part VI	11a	~	
b	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		/
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	110		_
	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		~
T	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 .			
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		~
	Schedule D, Parts XI and XII	12a	~	
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		~
	Did the organization maintain an office, employees, or agents outside of the United States?	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	14b		_
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	13		
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	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			
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		~
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			
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		<u> </u>
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	,,	A
			n 990	(2012)

Form 99	90 (2012)		1	Page 4
Part	Checklist of Required Schedules (continued)		· -	,
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	No V
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		v
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		~
	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
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		v
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		V
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		v
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		v
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		,
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		<i>V</i>
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		v
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		v
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		v
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 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	35b		v
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	36		
38	Part VI	37		v
	19? Note. All Form 990 filers are required to complete Schedule O	38	~	

N/A

14a

14b

Form **990** (2012)

13c

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Part	V Statements Regarding Other IRS Filings and Tax Compliance			•
	Check if Schedule O contains a response to any question in this Part V	<u>.</u> .		. \square
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a -0-	⊣ 1		ĺ
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<u>.</u>		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			ļ
_	reportable gaming (gambling) winnings to prize winners?	1c	υ	A
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 -0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	Щ	A
٥	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	4	A
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country: ▶	44		
D	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		V
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	V
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	10	A
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		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			,
	gifts were not tax deductible?	6b	لد	A
7	Organizations that may receive deductible contributions under section 170(c).		ı	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		1
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	_4	A
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		,	1.
	required to file Form 8282?	7c		~
d	If "Yes," indicate the number of Forms 8282 filed during the year	 -		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f	1/	. ~
g h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h	_ע	A
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	/11	M	1
J	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		V
9	Sponsoring organizations maintaining donor advised funds.			Ť
а	Did the organization make any taxable distributions under section 4966?	9a		V
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		~
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12	<u>.</u>		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b N/A	.]		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	4 1		ļ
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)	J		}
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	14	A
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b N/A	4	١	
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	-4	A
ь	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which		[
U	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand	- 1		
-				

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes Check if Schedule O contains a response to any question in this Part VI	s ın Schedule O. S	ee ins	truct	ions.
Secti	on A. Governing Body and Management		<u> </u>		,
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 2		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
ь 2	Enter the number of voting members included in line 1a, above, who are independent. Did any officer, director, trustee, or key employee have a family relationship or a business rany other officer, director, trustee, or key employee?		2		V
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other		3		v
4	Did the organization make any significant changes to its governing documents since the prior Form 99		4		~
5	Did the organization become aware during the year of a significant diversion of the organization		5		V
6	Did the organization have members or stockholders?		6		~
7a	Did the organization have members, stockholders, or other persons who had the power to 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 stockholders, or persons other than the governing body?		7b		•
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:	dertaken during			
а	The governing body?		8a	~	
b	Each committee with authority to act on behalf of the governing body?		8b	~	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		,
Secti	on B. Policies (This Section B requests information about policies not required by the			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 affiliates, and branches to ensure their operations are consistent with the organization's exemple.		10b	13/	A
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before		11a	~~	7
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		12b		1
С	Did the organization regularly and consistently monitor and enforce compliance with the pascribe in Schedule O how this was done	oolicy? If "Yes,"	12c		,
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 independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a		~
b	Other officers or key employees of the organization		15b		~
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or simi	lar arrangement			
	with a taxable entity during the year?		16a		V
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	o safeguard the	16b		
Secti	on C. Disclosure	· · ·			1
17 18	List the states with which a copy of this Form 990 is required to be filed N/A Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a available for public inspection. Indicate how you made these available. Check all that apply.	nd 990-T (Section	501(c)(3)s	only)
19	Own website Another's website Upon request Other (explain in Science Describe in Schedule O whether (and if so, how), the organization made its governing document and financial statements available to the public during the tax year.	•	f intei	est p	oolicy,
20	State the name, physical address, and telephone number of the person who possesses the borganization:			•	

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ane	•

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	a org:	anız	atio	n c	ompe	nsa	ited any currer	it officer, directo	r, or trustee.	
		(C)									
(A)	(B)	Position				(D)	(E)	(F)			
Name and Title	Average	(do not check more than one box, unless person is both an				Reportable	Reportable	Estimated			
	hours per					or/trus		compensation	compensation from		
	week (list any hours for	익	J.	Q.	6	육,	77	from the	related organizations	other compensation	
	related	dire	Ē	Officer	y eq	ples	Former	organization	(W-2/1099-MISC)	from the	
	organizations below dotted	ctor	ion		Key employee	e co		(W-2/1099-MISC)		organization and related	
	line)	Individual trustee or director	al tr		ě	퓛				organizations	
		ee	Institutional trustee			Highest compensated employee					
			е			Ē					
						,					
(1) ANTONIO ESCUDERO		i									
PRESIDENT					_			0	0		0
(2) VIVIAN NEPTUNE	ļ				İ						
DEAN								7,275	0		0
(3) IRENE CORDOVA							ļ		ļ i		
SECRETARY							<u> </u>	0	0	<u>. </u>	0
(4) MARIA GARAY											
EXECUTIVE DIRECTOR								32,200	0		0
(5)											
			_		<u> </u>						
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(13)	ļ								į į		
(4.4)							_				
(14)	 -										
									. 1		

	(A) Name and title	(B) Average hours per week (list any	box, ι	ot ch unles	(C) Position check more than ess person is both and a director/trus			an ee)	(D) Reportable compensation from	(E) Reportable compensation fr	om	Esti amo	(F) Estimated amount of other	
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		composition from the compositi	ensation in the nization related nizations	
(15)													_	
(16)														
(17)								-			-			
(18)														
(19)														
(20)														
(21)			:											
(22)														
(23)										·				
(24)														
(25)														
С	Sub-total	VII, Sectio	n A				•	>	39,475					
<u>d</u>	Total (add lines 1b and 1c)	not limited	l to th					e) w	39,475 ho received mo	ore than \$100	,000 c	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete s	ficer, direc	tor, o								ated	3		No
4	For any individual listed on line 1a, is the organization and related organizations	sum of re	oortal	ole d	com	per	nsatio	n a	nd other comp	ensation fron				
5	individual											4		_
Section	for services rendered to the organization on B. Independent Contractors	? If "Yes," c	ompi	ete .	Scr	edu	ile J f	or s	such person	· · · · ·	·	5		<u> </u>
1	Complete this table for your five highest compensation from the organization. Repyear.													
	(A) Name and business add	ress							(B) Description of s	ervices	C	(C) ompens	ation	
N/A														
											-			_
	Total number of independent contractor													_

Part	VIII	Statement of Reve			5 410			
<u> </u>		Check if Schedule O c	contains a respo	nse to any quest	(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	Revenue excluded from tax under sections
क्ष क	1a	Federated campaigns	1a			revenue	revenue	512, 513, or 514
ran	b	Membership dues .						
S, E	С	Fundraising events .	1c					
Sift.	d	Related organizations	1d				,	
imi	е	Government grants (conf	· ——					
tior er S	f	All other contributions, gr)
ję ją		and similar amounts not inc		65,351				
Contributions, Gifts, Grants and Other Similar Amounts	9	Noncash contributions includ						-
	<u>h</u>	Total. Add lines 1a-1f		Business Code	65,351			
Program Service Revenue	•	EVALUATION DEVIEW	••		445.050			
eve	2a	EXAMINATION REVIEW	.,	611710 611710	145,058 208,313			
8	b	EDUCATIONAL PROGI	KAIVI	011710	200,313	 		
ž	d					<u></u>		<u> </u>
Š	e							
graf	f	All other program serv						
Po	g	Total. Add lines 2a-21		•	353,371		<u> </u>	<u> </u>
	3	Investment income (<u></u>	<u> </u>
		and other similar amo	unts)	•	15,611			
	4	Income from investment	t of tax-exempt bo	ond proceeds ►				
	5	Royalties			,			
			(i) Real	(II) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
,	C.	Rental income or (loss)						
	d 7a	Net rental income or (Gross amount from sales of	(i) Securities	▶				ļ
	, a	assets other than inventory		(17 0 11 10 1				
	ь	Less. cost or other basis						
:		and sales expenses .						
į	С	Gain or (loss)						
	d	Net gain or (loss) .						
Φ.	0-	Out to the same from the						
Other Revenue	oa	Gross income from fu events (not including \$	noraising					
ě		of contributions reporte	ed on line 1c)		i			
<u> </u>		See Part IV, line 18 .						
the	ь	Less direct expenses					0	
0		Net income or (loss) fr						
	1	Gross income from ga	•			· · · · · · · · · · · · · · · · · · ·		
		See Part IV, line 19 .		ļ				
	b	Less: direct expenses	b					
		Net income or (loss) fr		vities ▶				
	10a	Gross sales of in						
		returns and allowance	_					
	l	Less: cost of goods se						
	<u>_</u>					·······		ļ
	-	Miscellaneous Re	evenue	Business Code	40.500			
		SPECIAL EVENT		611710	10,500			
	b	OTHER INCOME		011710	823		 	
	d	All other revenue .						
	e	Total. Add lines 11a-		<u> </u>	11,323			1
	12				44E GEG			

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must com	·			
	Check if Schedule O contains a respons			<u> </u>	
	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				
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	39,475		39,475	
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 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 10 11 a	Other employee benefits				
b c	Legal	2,800		2,800	
d e f	Lobbying				
9	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	15,071		15,071	
12	Advertising and promotion				
13	Office expenses	9,839		9,839	
14	Information technology				
15	Royalties				
16	Occupancy				
17 18	Travel				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	703		703	
23	Insurance	751		751	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Symposium & Other Activities	33,725	33,725		
b	Examination Review	101,243	101,243		
C	Educational Program	107,252	107,252		
d	Law School improvements	68,341	68,341		
е	All other expenses Bank charges & other	11,592	11,347	245	
25	Total functional expenses. Add lines 1 through 24e	390,792	321,908	68,884	
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 following SOP 98-2 (ASC 958-720)				

33

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Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X . . . (A) (B) Beginning of year End of year 304,376 1 366,291 792,757 2 794,181 2 3 3 4 4,140 4 2,365 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 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 6 7 8 9 Prepaid expenses and deferred charges . . 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 6.452 4.790 Less: accumulated depreciation 10b 2,365 10c 1,662 b 11 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 Other assets. See Part IV, line 11 15 15 1,164,499 16 Total assets. Add lines 1 through 15 (must equal line 34) 1,103,638 16 17 Accounts payable and accrued expenses 8,958 17 15,135 18 18 19 19 20 20 21 790 21 610 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 . . . 26 9,748 26 15,745 Organizations that follow SFAS 117 (ASC 958), check here ▶ **Net Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 831,870 27 866,184 28 126,203 28 146,753 135,817 29 135,817 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds .

1,148,754

1,164,499

1,093,890

1,103,638

33

34

	•	
Form	990	(2012)

Page **12**

Part	XI Reconciliation of Net Assets				
,	Check if Schedule O contains a response to any question in this Part XI		<u> </u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		44	5,656
2	Total expenses (must equal Part IX, column (A), line 25)	2		39	0,792
3	Revenue less expenses. Subtract line 2 from line 1	3		5	4,864
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,09	3,890
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		1,14	8,754
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		<u> </u>		
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain ir	ו		
	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 com-	piled o	r		
	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?		2b	~	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audit	ed on a	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 o				
	of the audit, review, or compilation of its financial statements and selection of an independent account			~	L
	If the organization changed either its oversight process or selection process during the tax year, ex	kplain ir	ו		
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set		l l		
	the Single Audit Act and OMB Circular A-133?		3a		~
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits?		1		'n
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b	N/	4
			For	n 990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2012

Open to Public

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

Inspection

UNIV	NIVERSITY OF PR LAW SCHOOL TRUST 66-6012387										
Par	tl Reaso	n f	or Public Cha	rity Status (All orga	nizations	s must c	omplete	this par	rt.) See ii	nstructio	ons.
The o	organization is	not	a private founda	tion because it is: (Fo	r lines 1 t	hrough 1	1, check	only one	box.)		
1	A church,	con	vention of churc	hes, or association of	churches	describe	ed in sec t	tion 170((b)(1)(A)(i).	
2	_			170(b)(1)(A)(ii). (Attac		•					
3	☐ A hospital	or a	cooperative hos	spital service organiza	ition desc	cribed in s	section 1	70(b)(1)(A)(iii).		
4	_		_	on operated in conjunc	ction with	a hospit	al descrit	ed in se	ction 170)(b)(1)(A)	(iii). Enter the
	•		e, city, and state								
5			on operated for a (Comp.) (1)(A)(iv).	the benefit of a collect plete Part II.)	ge or uni	versity ov	wned or (operated	by a go	vernment	tal unit described in
6	A federal,	state	e, or local goven	nment or government	al unit de:	scribed in	section	170(b)(1)(A)(v).		
7	An organiz	zatio	n that normally	receives a substantia	l part of	its suppo	ort from a	governr	nental un	ut or fron	n the general public
	described	in s	ection 170(b)(1)	(A)(vi). (Complete Par	t II.)						
8	A commun	nity t	rust described i	n section 170(b)(1)(A)	(vi). (Con	nplete Pa	ırt II.)				
9	☐ An organiz	zatio	n that normally	receives: (1) more that	an 331/3%	of its su	apport fro	m contri	butions,	members	ship fees, and gross
				d to its exempt functi							
				nt income and unrel						n 511 ta	x) from businesses
	-	-	•	fter June 30, 1975. Se							
10				operated exclusively							
11				d operated exclusive							
				olicly supported organ							
				describes the type of		-		<u> </u>			=
	a 🗌 Typ		b 🗌 Type								ionally integrated
е				that the organization ers and other than one							
	or section		_	as and other than one	e or more	publicly	Supporte	o organi	izations c	iescribed	i iii section sostaj(1)
f				a written determination	on from 1	the IRS 1	that it is	a Type	I Type I	I or Tyr	e III supporting
•			check this box								
g	<u> </u>	•		he organization accep	oted anv	aift or co	ontributio	n from a	nv of the		
9	following p			o.gaa	,	3 • .			,		
	• .			ndirectly controls, eith	her alone	or toget	her with	persons	described	d in (11) at	nd Yes No
				ody of the supported							11g(i)
	(ii) A fami	lv m	ember of a pers	on described in (i) abo	ve?						
				a person described in							11g(iii)
h				on about the support							
(i)	Name of supporte	d	(ii) EIN	(iii) Type of organization		rganization		ou notify		s the	(vii) Amount of monetary
	organization			(described on lines 1-9 above or IRC section		in col. (i) listed in your governing document? the organization in col (i) of your				ion in col. zed in the	support
				(see instructions))				oort?	Ü Ü	S ?	
					Yes	No	Yes	No	Yes	No	
(A)											
(B)									•		
					 -						
(C)											
(D)											
					-				-		
(E)						<u> </u>				ļ	
Tota	ıl										

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	•						_
	e A (Form 990 or 990-EZ) 2012			4500 1/41	(A)(F)	70/13/43/43/	Page 2
Part							
	(Complete only if you checked the						ality under
Pooti	Part III. If the organization fails to	quality unde	Time tests iis	ted below, pi	ease comple	te Part III.)	
	on A. Public Support	(a) 2009	(b) 2000	(a) 2010	(d) 2011	(e) 2012	(6) Total
	dar year (or fiscal year beginning in) ► Gifts, grants, contributions, and	(a) 2008	(b) 2009	(c) 2010	(u) 2011	(6) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")	25,711	361	27,457	45,007	65,351	163,887
2	Tax revenues levied for the	29,711	301	21,431	45,007	03,331	103,887
_	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
•	furnished by a governmental unit to the						
	organization without charge						
4	Total. Add lines 1 through 3	25,711	361	27,457	45,007	65,351	163,887
5	The portion of total contributions by				· · .		
•	each person (other than a			i			
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						130,000
6	Public support. Subtract line 5 from line 4.						33,887
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4	25,711	361	27,457	45,007	65,351	163,887
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources	29,859	11,513	22,110	23,249	15,611	102,342
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets (Explain in Part IV.)	40.040	600	44.050	4 600	44 222	27.702
11	· ·	10,010	600	14,250	1,600	11,323	37,783
12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc	(see instruction	ne)		····	12	304,012
13	First five years. If the Form 990 is for the	-	•				1,988,715 n. 501(c)(3)
	organization, check this box and stop he	_			•		
Secti	on C. Computation of Public Suppor						<u> </u>
14	Public support percentage for 2012 (line 6			1. column (f))		14	11.15 %
15	Public support percentage from 2011 Sch	• • •	-			15	14.53 %
16a	331/3% support test-2012. If the organiz	•	•				
	box and stop here. The organization qua	lifies as a publi	cly supported	organization			. ▶ 🗆
b	331/3% support test-2011. If the organ	nization did no	t check a box	on line 13 or	16a, and line	15 is 331/3%	
	check this box and stop here. The organ						
17a	10%-facts-and-circumstances test - 20	012. If the orga	nization did no	t check a box	on line 13, 16	a, or 16b, and	line 14 is
	10% or more, and if the organization me						
	Part IV how the organization meets the "f			•		as a publicly s	upported
	organization						. ▶ ☑
b	10%-facts-and-circumstances test-20	011. If the orga	nızatıon did no	t check a box	on line 13, 16	a, 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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

	ii tile organization lails to quality	under the te	sta listed bei	ow, please co	omplete i ait	11./	
	on A. Public Support						
Calen	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		1				
	furnished by a governmental unit to the						1
	organization without charge						<u> </u>
6	Total. Add lines 1 through 5						
7a	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		1				
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year				ļ		<u> </u>
	Add lines 7a and 7b				ļ		<u> </u>
8	Public support (Subtract line 7c from		-				}
	line 6.)		<u> </u>				
	on B. Total Support	•					· · · · · · · · · · · · · · · · · · ·
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less			1			
	section 511 taxes) from businesses						
	acquired after June 30, 1975		 				
	Add lines 10a and 10b						
11	Net income from unrelated business						1
	activities not included in line 10b, whether						1
	or not the business is regularly carried on						
12	Other income. Do not include gain or						1
	loss from the sale of capital assets						1
44	(Explain in Part IV.)		ļ				
13	Total support. (Add lines 9, 10c, 11,						1
	and 12.)	<u> </u>			F.61	L <u> </u>	<u> </u>
14	First five years. If the Form 990 is for the	•			•		
	organization, check this box and stop he			<u>· · · · · · · · · · · · · · · · · · · </u>	<u> </u>		<u> ▶ [</u>
	on C. Computation of Public Suppor		·			1.5	
15	Public support percentage for 2012 (line						9/
16	Public support percentage from 2011 Sci			· · · · ·	· · · · ·	16	9
	on D. Computation of Investment In						
17	Investment income percentage for 2012 (9/
18	Investment income percentage from 201					18	9
19a	331/3% support tests—2012. If the organ						
	17 is not more than 331/2%, check this box					•	_
b	331/3% support tests – 2011. If the organization 18 is not more than 331 n%, check this						
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	ia not check a	DOX ON line 14	. туа. or 19b. «	cneck this box	and see instri	uctions 🕨 I

ı	D _a	_	_	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-LI	NE 10
Other Inco	me of \$11,323 received during year 2012 was derived from donations to special event.
PART II- LI	INE 17a:
The Trust	has been receiving contributions from various professional organizations. As described in Form 990, Part I, line 1, the Trust was
created to	promote, enhance and advance the excellence in legal education and also for the benefit of the University of Puerto Rico
School of	Law. The Trust has been committed with various programs related with legal education in order to help with administration;
solicitation	n of funds (from organizations and individuals); coordination of conferences, symposiums, seminars and
examinatio	on reviews offered to Puerto Rico attorneys and candidates for examination.
••••	

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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

lame o	f the organization		Employ	er identification number
UNIVE	RSITY OF PR LAW SCHOOL TRUST			66-6012387
Par	Organizations Maintaining Dono organization answered "Yes" to Fo	r Advised Funds or Other Similar Fur orm 990, Part IV, line 6.	nds or	Accounts. Complete if the
		(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 funds are the organization's property, subject			
6	Did the organization inform all grantees, dor	-		
•	only for charitable purposes and not for the			
	· · · · · · · · · · · · · · · · · · ·		_	
Par	Conservation Easements. Comp			
1	Purpose(s) of conservation easements held to			
•	Preservation of land for public use (e.g., i		of an his	torically important land area
	Protection of natural habitat	·		fied historic structure
	☐ Preservation of open space		n a certi	ned historic structure
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contributi	on in the	e form of a conservation
-	easement on the last day of the tax year.		O	
			Г	Held at the End of the Tax Year
а	Total number of conservation easements .		1	2a
b	Total acreage restricted by conservation eas			2b
C	Number of conservation easements on a cer		r	2c
d	Number of conservation easements includ	,	-	20
ŭ	historic structure listed in the National Regis			2d
3	Number of conservation easements modified tax year ▶		L	
4		agneration accoment is located		
4 5	Number of states where property subject to Does the organization have a written poli		spection	handling of
3	violations, and enforcement of the conservat	ion easements it holds?		· · · · 🗌 Yes 🗎 No
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservation	n easem	ents during the year
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation eas	ements	during the year
	▶ \$			
8	Does each conservation easement reported			
	(i) and section 170(h)(4)(B)(ii)?			· · · · 🗌 Yes 🗌 No
9	In Part XIII, describe how the organization re	ports conservation easements in its revenue	e and ex	pense statement, and
	balance sheet, and include, if applicable, the		nancial s	statements that describes the
	organization's accounting for conservation e			
Part		ctions of Art, Historical Treasures, o		Similar Assets.
	· · · ·	ered "Yes" to Form 990, Part IV, line 8.		
1a	If the organization elected, as permitted und			
	works of art, historical treasures, or other public service, provide, in Part XIII, the text of			
	•			
b	If the organization elected, as permitted ur works of art, historical treasures, or other public service, provide the following amount	similar assets held for public exhibition, e s relating to these items:	ducation	n, or research in furtherance of
	(i) Revenues included in Form 990, Part VIII,	line 1		. ▶ \$
	(i) Revenues included in Form 990, Part VIII, (ii) Assets included in Form 990, Part X			. ▶ \$
2	If the organization received or held works	of art, historical treasures, or other simila	r assets	for financial gain, provide the
	following amounts required to be reported u	nder SFAS 116 (ASC 958) relating to these	rtems:	•
а	Revenues included in Form 990, Part VIII, lin Assets included in Form 990, Part X	e1		. ▶ \$
b	Assets included in Form 990, Part X			> \$

Part	Use Organizations Maintaining	Collections of A	Art, Historical 1	reasures, or O	ther Similar Ass	ets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	ner records, chec	k any of the follow	wing that are a sig	inificant use of its
а	☐ Public exhibition		d □ Loan	or exchange prog	rams	
b	☐ Scholarly research					
c	☐ Preservation for future generations		0 00.			
4	Provide a description of the organizat		nd evalsia bow t	hav further the ar	ranization's evem	at nurnose in Bart
4	XIII.	ion s conections a	nd explain now t	ney luither the ort	gariization 5 exemp	or purpose in Fait
_						
5	During the year, did the organization					
	assets to be sold to raise funds rather					
Part	line 9, or reported an amoun	t on Form 990, P	art X, line 21.			
1a	Is the organization an agent, trustee, included on Form 990, Part X?					✓ Yes 🗆 No
b	If "Yes," explain the arrangement in Pa					
					Am	ount
C	Beginning balance			10	;	790
d	Additions during the year			<u>1</u> 0	i	
е	Distributions during the year			16		180
f	Ending balance			11		610
2a	Did the organization include an amour					✓ Yes □ No
b	If "Yes," explain the arrangement in Pa					
Par						
		(a) Current year	(b) Prior year	(c) Two years back	, ' ' 	
1a	Beginning of year balance	276,970	261,798	253,528		383,938
b	Contributions	25,000	25,000			18,998
C	Net investment earnings, gains, and	25,000	25,000	1,200		10,330
U	losses					
	<u> </u>					
d	Grants or scholarships					
е	Other expenditures for facilities and		,			
	programs			4,000		
f	Administrative expenses	19,400	9,828	<u> </u>		17,292
g	End of year balance	285,570	276,970			385,644
2	Provide the estimated percentage of the			, column (a)) held	as:	
а	Board designated or quasi-endowmer	nt 🕨	_%			
b	Permanent endowment ▶	48 %				
C	Temporarily restricted endowment ▶	52 %				
	The percentages in lines 2a, 2b, and 2	c should equal 100	0%.			
3a	Are there endowment funds not in the	possession of the	e organization tha	at are held and ad	lministered for the	
	organization by:					Yes No
	(i) unrelated organizations					3a(i) 🗸
	(ii) related organizations					3a(ii)
b	If "Yes" to 3a(ii), are the related organia					3b /U/A
4	Describe in Part XIII the intended uses					104.1
Part						
, are	Description of property	(a) Cost or oth			Accumulated	(d) Book value
		(investme	1 ' '		epreciation	(u) Book value
1a	Land					
b	Buildings					
C	Leasehold improvements	4,361			699	1,662
d	Equipment	2,091		2,0)91	- 0-
е	Other					
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 99	0, Part X, column	(B), line 10(c).)	>	1,662

Part VII	Investments—Other Securities	See Form 990, Part X,	line 12.
(8	Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financia	I derivatives		
	held equity interests		
(3) Other			
(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	I. See Form 990, Part X,	line 13.
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)	(b) must equal Form 990, Part X, col. (B) line 13.)	-	
Part IX	Other Assets. See Form 990, Pa	rt X. line 15.	
) Description	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)			
(10)	ımn (b) must equal Form 990, Part X, co	ol (R) line 15)	
Part X	Other Liabilities. See Form 990,		
1.	(a) Description of liability	(b) Book value	
(1) Federal	income taxes		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			_
(8)			
(9)			_
(10)			_
(11)	(h) must a mind Form 000 Dest V and (D) to a 051 h		1
	(b) must equal Form 990, Part X, col. (B) line 25.)	out of the factorie to the	
2. FIN 48 (A)	50.740) roothote. In Part XIII, provide the 1	ext of the foothote to the org	panization's financial statements that reports the organization's

liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

· Part	XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenue per	Retu	rn
1	Total revenue, gains, and other support per audited financial statements		1	445,656
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b	7	
C	Recoveries of prior year grants	2c	7	
d	Other (Describe in Part XIII.)	2d	7	
е	Add lines 2a through 2d		2e	1
3	Subtract line 2e from line 1		3	445,656
4	Amounts included on Form 990, Part VIII, line 12, 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	1	
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5	445,656
Part	XII Reconciliation of Expenses per Audited Financial Statem	ents With Expenses p	er Re	turn
1	Total expenses and losses per audited financial statements		1	390,792
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			-
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b	1	
С	Other losses	2c	7	
d	Other (Describe in Part XIII.)	2d	7.	
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	390,792
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	1	
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	390,792
Part	XIII Supplemental Information	•		· · · · · · · · · · · · · · · · · · ·
Part V inform PART Justic	IV- LINE 2b- The Trust acts as fiscal and disbursing agent of funds provided by a property of the Governor of Puerto Rico in 2001	o. Also complete this part t	o prov	ide any additional Administration of ures. The Program
perma	V- LINE 4- The Trust receives contributions from various professional organization of clinics, programs, projects and activities held for legal knowledge	R Law School curriculum, li		

Schedule D (Fo	om 990) 2012	Page 5
Part XIII	Supplemental Information (continued)	
<u>-</u>		
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		•••••

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2012

Open to Public Inspection

66-6012387

Department of the Treasury Internal Revenue Service Name of the organization

UNIVERSITY OF PR LAW SCHOOL TRUST

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. **Employer identification number**

PART VI- SECTION C- LINE 19			
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS			
AVAILABLE TO THE PUBLIC UPON REQUEST AT THE PHYSICAL ADDRESS: UPR LAW SCHOOL- RIO PIEDRAS CAMPUS			
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