Return of Organization Exempt From Income Tax

orm **990**

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

20 19
Open to Public Inspection

A F	or th	e 201	9 calendar year, or tax year begin	ning	, 2019	, and er	nding	_			, 20)		
B c	heck if ap	pplicable:	C Name of organization THE UNITED STATES OLYM	MPIC ENDOWMENT				D E	mployer id	entific	ation num	ber		
	Addre		Doing Business As					74-2327838						
	┪ `	e change	Number and street (or P.O. box if mail is a	not delivered to street address)	Room/su	ıite	E Telephone number						
	+	return 10 LAKE CIRCLE (71									251			
	+	inated	City or town, state or province, country, a	H	-									
	Amer	nded	colorado springs, co 80906							ts \$	87,	955	,928.	
	Applie pendi	cation	F Name and address of principal officer:	WALTER R. GLO	VER			H(a)	ls this a gro	up retui	n for	Yes	X No	
	pendi	ing	10 LAKE CIRCLE, COLORA	ADO SPRINGS, CO	80906			1	subordinates Are all subord		cluded?	Yes	☐ No	
ī	Tax-ex	empt st	atus: X 501(c)(3) 501(c) () (insert no.)	4947(a)(1)	or	527	1 ` ′			. (see instruc	tions)		
J	Websi	ite: 🕨	WWW.USOLYMPICENDOWMENT.	ORG				H(c)	Group exem	ption nu	umber >			
K	Form	of organ	nization: X Corporation Trust	Association Other		L Ye	ear of format	tion: 1	.984 M	State	of legal do	micile:	CO	
P	art I		mmary			'			•					
	1	Briefly	y describe the organization's mission or	most significant activities:	PROVII	DE FIN	VANCIAL	SUI	PPORT	TO '	THE UN	ITEI)	
e			TES OLYMPIC & PARALYMPIC											
Jan		THA'	T DEVELOP AMATEUR ATHLET	ES FOR NATIONAL	& INTE	ERNAT	CONAL C	COMPI	ETITIO	N				
veri	2	Check	k this box 🕨 🔃 if the organization di	scontinued its operations	or dispose	ed of mor	e than 25%	6 of its	net asset	s.				
Governance	3	Numb	per of voting members of the governing	body (Part VI, line 1a)						3			10.	
•ඊ ග	4	Numb	per of independent voting members of the	he governing body (Part V	I, line 1b)					4			9.	
itie	5		number of individuals employed in cale							5			2.	
Activities &	6		number of volunteers (estimate if necess							6			10.	
Ă	7a	Total	unrelated business revenue from Part VI	III, column (C), line 12						7a		-255	,616.	
			nrelated business taxable income from I							7b		-263	,520	
								Pric	or Year		Curr	ent Ye	ar	
Ф	8	Contri	ibutions and grants (Part VIII, line 1h)		000		\neg L		1,91	19.		1	,120	
eun	9	Progra	am service revenue (Part VIII, line 2g)		PUBLIC IN	Y FOR				0.			0	
Revenue	10		tment income (Part VIII, column (A), line		PUBLIC IN	NSPECTI	ON	6,	402,38	35.	11	,852	,950.	
	11	Other	revenue (Part VIII, column (A), lines 5,	6d, 8c, 9c, 10c, and 11e)						0.			0	
	12	Total	revenue - add lines 8 through 11 (must	equal Part VIII, column (A), line 12) .				404,30				,070.	
	13	Grant	s and similar amounts paid (Part IX, colu	ımn (A), lines 1-3)				9,	965,22	22.	10	,562	,464.	
	14	Benef	its paid to or for members (Part IX, colu	mn (A), line 4)						0.			0	
es	15		es, other compensation, employee bene						221,35	_		236	,176	
Expenses	16a	Profes	ssional fundraising fees (Part IX, column	(A), line 11e)						0.			0	
ă.	b	Total	fundraising expenses (Part IX, column ([O), line 25) ▶	0	·								
	17		expenses (Part IX, column (A), lines 11						071,90				,948	
			expenses. Add lines 13-17 (must equal						258,48				<u>,588</u> .	
. 10	19	Rever	nue less expenses. Subtract line 18 from	line 12					854,18			-123	,518	
s or									f Current			of Yea		
sset	20		assets (Part X, line 16)						385,33	_			,523.	
Net Assets or Fund Balances	21		liabilities (Part X, line 26)				• •		298,61	_	137,993,499.			
			ssets or fund balances. Subtract line 21	from line 20			-	185,	086,71	.6.	209	,826	,024.	
	rt II		gnature Block											
			of perjury, I declare that I have examined thi complete. Declaration of preparer (other than							t my k	nowledge	and be	lief, it is	
		Ι.												
Sig	ın		Signature of officer						Date					
He			org.natare or omoo.						24.0					
			Type or print name and title											
			Type or print name and time (Type preparer's name	Preparer's signature		Date		Ι.		., F	PTIN			
Paid	d		M R SMITH CPA	opaioi o oigilatale			/15/202		Check L self-employ	」"	P00958	2066		
Pre	parer		D11D 11D			1 + + /	12/202				016026			
Use	Only			200 GOLODADO CERTIFICA	70 00000 0	10.40) L V		$\frac{010020}{471-4}$			
May	the !		saddress > 111 SOUTH TEJON, SUITE 8 cuss this return with the preparer shown					Phon			37			
			Reduction Act Notice, see the separate	,									No (2019)	
1 01	ape	. W OI K	readelien Act Notice, see the separate	au uvuviio.							LOU		(4019)	

Cumulative e-File History 2019

FED

Tax Return Return Type 990

17373G

Taxpayer

The United States Olympic Endowment

Submitted Date	2020-04-13 17:53:37
Acknowledgement Date	2020-04-13 18:26:39
Status	Accepted
Submission ID	84022720201045000018

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Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III										
1	Briefly describe the organization's mission: ATTACHMENT 1										
2	id the organization undertake any significant program services during the year which were not listed on the ior Form 990 or 990-EZ? Yes," describe these new services on Schedule O.										
	id the organization cease conducting, or make significant changes in how it conducts, any program ervices?										
 If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe the total expenses, and revenue, if any, for each program service reported. 											
	Code:) (Expenses \$10,562,464. including grants of \$10,562,464.) (Revenue \$) HE BOARD OF DIRECTORS AUTHORIZED A GRANT TO THE UNITED STATES										
	OLYMPIC AND PARLYMPIC COMMITTEE ON DECEMBER 11, 2019 IN THE AMOUNT OF \$10,162,464 AND A GRANT TO THE US OLYMPIC AND PARALYMPIC MUSEUM OF \$400,000, PAYABLE DURING THE FIRST QUARTER OF 2020.										
	N ADDITION TO SUPPORTING THE UNITED STATES OLYMPIC AND PARALYMPIC DMMITTEE ("COMMITTEE"), THE ENDOWMENT PROVIDES SUPPORT TO SECTION D1(C)(3) PUBLIC CHARITY SPORTS ORGANIZATIONS THAT ARE MEMBERS OF HE UNITED STATES OLYMPIC AND PARALYMPIC COMMITTEE AND HOLDS AND NVESTS THEIR FUNDS SOLELY AS AGENT IN FURTHERANCE OF THE NDOWMENT'S SUPPORT TO THE COMMITTEE.										
4b	Code:) (Expenses \$including grants of \$) (Revenue \$)										
4c	Code:) (Expenses \$including grants of \$) (Revenue \$)										
	ther program services (Describe on Schedule O.) Expenses \$ including grants of \$) (Revenue \$)										
4e	otal program service expenses ► 10,562,464.										

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Par	t IV Checklist of Required Schedules		Yes	No
	Is the conveniention described in section FOA(s)(2) on AOA7(s)(A) (athen there a principle foundation)(2) if II)(s)		162	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Х	
•	complete Schedule A	1	Λ	X
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			Х
	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)			v
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	_		Х
•	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			Х
7	"Yes," complete Schedule D, Part I.	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		Х
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		Х
9	complete Schedule D, Part III	-		21
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		
••	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
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	Х	
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		X
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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		X
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	Х	
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	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
4.5	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.5		7.7
4.0	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			v
00	If "Yes," complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	24	Х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		

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Part	IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
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	Х	
24 a	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			
	, , , , , , , , , , , , , , , , , , , ,	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	, , , , , , , , , , , , , , , , , , , ,	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	, , , , , , , , , , , , , , , , , , , ,	25a		X
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?			
	, , , , , , , , , , , , , , , , , , , ,	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	21		21
20	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
_		28a		X
b		28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
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		X
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		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,		v	
	or IV, and Part V, line 1	34	X	X
	, , , , , , , , , , , , , , , , , , , ,	35a		
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	256		
26	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	35b		
36	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	30		
31	and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	٠.		<u> </u>
	19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
	, , , , , , , , , , , , , , , , , , , ,		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		

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Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
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 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
74	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
h	If "Yes," enter the name of the foreign country \[\bigs_{			
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5.2	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
oa		6a		Х
	organization solicit any contributions that were not tax deductible as charitable contributions?	- Ou		
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6b		
_	gifts were not tax deductible?	OD		
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	7.		Х
	and services provided to the payor?	7a		- 21
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	- -		v
	required to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year	_		3.7
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring 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			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11				
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule</i> O · · · · · ·	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			

THE UNITED STATES OLYMPIC ENDOWMENT 74-2327838 Page 6 Form 990 (2019) Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No 10 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar

Enter the number of voting members included on line 1a, above, who are independent

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with

	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	X	
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	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	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	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
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	Х	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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		X
b	Other officers or key employees of the organization	15b		X
	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		Х
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		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T	(Sec	tion 5	01(c)

State the name, address, and telephone number of the person who possesses the organization's books and records MALTER R. GLOVER 10 LAKE CIRCLE COLORADO SPRINGS, CO 80906 719-633-3251 20

Upon request

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

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X Own website

Another's website

and financial statements available to the public during the tax year.

committee, explain on Schedule O.

Other (explain on Schedule O)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, **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. See instructions for the order in which to list the persons above.

(C) Position

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

(A) Name and title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Former Highest compensated employee Key employee Officer Institutional trustee Individual trustee		organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations			
(1)SARAH D. HIRSHLAND, DIRECTOR	1.00									
(CEO OF USOPC)	54.00	Х						0.	785,716.	31,962.
(2) WALTER GLOVER	24.00									
EVP/COO	0.			Х				120,147.	0.	8,298.
(3) DANA KUHLMAN	35.00									
ASSISTANT SECRETARY	0.			Х				76,048.	0.	7,877.
(4)WILLIAM J. HYBL	2.00									
CHAIRMAN OF THE BOARD AND CEO	0.	Х		Х				0.	0.	0.
(5) PAULA WELCH	1.00									
TREASURER	0.	X		Х				0.	0.	0.
(6) GABE GARDNER	1.00									
SECRETARY	0.	Х		Х				0.	0.	0.
(7) MICHAEL MCMANUS	1.00									
VICE CHAIRMAN	0.	Х		Х				0.	0.	0.
(8) RICH BENDER	1.00									
DIRECTOR	0.	Х						0.	0.	0.
(9) BRIAN OLSON	1.00									
DIRECTOR	0.	Х						0.	0.	0.
(10) MAX COBB	1.00									
DIRECTOR	0.	Х						0.	0.	0.
(11)R. THAYER TUTT	1.00							_	_	
DIRECTOR	0.	X						0.	0.	0.
(12) SUSANNE D. LYONS	1.00	_						_	_	_

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(14)

JSA

DIRECTOR

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_	1 990 (2019)												age o
Pa	rt VII Section A. Officers, Directors, Tru	ustees, Ke	y En	plo	ye	es,	and F	ligi	hest Compensat	ed Employees (c	ontinue	ed)	
	(A)	(B)			(0	C)			(D)	(E)	ì	(F)	
	Name and title	Average	Position						Reportable	Reportable		timated	
		hours per	(do not check more than one box, unless person is both an						compensation	compensation from		ount of	
		week (list any hours for	office				or/trust		from the	related organizations		other pensatio	on
		related	Individual trustee or director	Ins	Q:	Ke.	Hig em	Fo	organization	(W-2/1099-MISC)		om the	
		organizations	dire	titu	Officer	Key employee	plo	Former	(W-2/1099-MISC)	(** =, ************************	_	anizatio	
		below dotted line)	ual	tion		oldu	st co	_				d related Inization	
		ilite)	trus	Institutional truste		yee	mpe				orga	iiiiZalioi	13
			lee	ıste			Highest compensated employee				ì		
				Ф			ated				i		
		†									i		
		†									i		
		†									ì		
		†									i		
		†									i		
		†									ì		
		 									ì		
		 	1								i		
		 	1								i		
		 									i		
		 									i		
	Sub-total								196,195.	785,716.		48,1	L37.
	Sub-total Total from continuation sheets to Part VII, S			• •		• •			0.	0.		,-	0.
	Total (add lines 1b and 1c)	-		• •	• •	• •			196,195.	785,716.		48,1	
	Total number of individuals (including but not) ro					
_	reportable compensation from the organization		11036		u ai	DOVE	s) will	J 16	ceived inore man	φ100,000 oi			
	Toportable compensation from the organization											Yes	No
•	Did the consciention list one former office			4		_			lavaa au biabaa			162	NO
3	Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu										3		X
											3		
4	For any individual listed on line 1a, is the	sum of rep	ortab	le d	com	pen	sation	n ai	nd other compens	sation from the			
	organization and related organizations gro										4	Х	
_	individual										4	Λ	
5	Did any person listed on line 1a receive or										_		v
	for services rendered to the organization? If "Ye	es," comple	te Sch	iedi	iie J	tor	such	per	son		5		X
	ction B. Independent Contractors								hat are 2 - 2	U 0400 000	,		
1	Complete this table for your five highest com- compensation from the organization. Report of												
	compensation from the organization. Report of	ompensati	011 101	me	: Ud	IGIIC	ıaı ye	aı E	maing with or with	iii tile organizatio	115 lax		

year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2		

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶ 6

Page 9

Part VIII Statement of Revenue

- ai	t VIII	Statement of Revenue Check if Schedule O contains a respon	nse or note to an	y line in this Part \	/III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
S, C	С	Fundraising events 1c					
a it	d	Related organizations 1d					
S,E	е	Government grants (contributions) 1e					
Sign	f	All other contributions, gifts, grants,					
e ti		and similar amounts not included above . 1f	1,120.				
불팅	g	Noncash contributions included in					
lg o		lines 1a-1f 1g	\$				
S E	h	Total. Add lines 1a-1f	▶	1,120.			
			Business Code				
ප	2a						
ا ہ ∑	b						
מ בו	c						
Program Service Revenue	Д						
Pg	ے ا						
<u>ہ</u>	f	All other program service revenue					
	g	Total. Add lines 2a-2f		0.			
	3	Investment income (including dividends,					
	•	other similar amounts)	′	1,837,119.		-255,616.	2,092,735
	4	Income from investment of tax-exempt bond		0.			
	5	Royalties		0.			
		(i) Real	(ii) Personal				
	6a	Gross rents 6a	.,				
	١.	Less: rental expenses 6b					
	b	·					
	C	Rental income or (loss) 6c		0.			
	d 70	Net rental income or (loss)	(ii) Other	0.			
	7a	Grood amount from	(ii) Other				
		sales of assets other than inventory 7a 86,117,689.					
_		their than inventory ru					
evenue	b	Less: cost or other basis and sales expenses 76,101,858.					
Ne		and sales expenses 1 1 10					
		Gain or (loss)		10,015,831.			10,015,831
er	d	Net gain or (loss)		10,015,631.			10,015,831
Other R	8a	Gross income from fundraising					
		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a	0.				
	b	Less: direct expenses 8b	0.				
	С	Net income or (loss) from fundraising events.		0.			
	9a	Gross income from gaming					
		activities. See Part IV, line 19 9a	0.				
		Less: direct expenses 9b	0.				
	С	Net income or (loss) from gaming activities.		0.			
	10a	Gross sales of inventory, less					
		returns and allowances10a	0.				
		Less: cost of goods sold 10b	0.				
	С	Net income or (loss) from sales of inventory.		0.			
sn			Business Code				
e e	11a						
lan en	b						
e e	С						
Miscellaneous Revenue	d	All other revenue					
2	е	Total. Add lines 11a-11d	.	0.			
		Total revenue. See instructions		11,854,070.		-255,616.	12,108,566

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to any line in this Part IX										
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21	10,562,464.	10,562,464.								
2	Grants and other assistance to domestic										
	individuals. See Part IV, line 22	0.									
3	Grants and other assistance to foreign										
	organizations, foreign governments, and foreign										
	individuals. See Part IV, lines 15 and 16	0.									
4	Benefits paid to or for members	0.									
5	Compensation of current officers, directors,										
	trustees, and key employees	211,354.		211,354.							
6	Compensation not included above to disqualified										
	persons (as defined under section 4958(f)(1)) and	0 510		0 510							
	persons described in section 4958(c)(3)(B)	9,713.		9,713.							
7	Other salaries and wages	0.									
8	Pension plan accruals and contributions (include	0									
	section 401(k) and 403(b) employer contributions)	0.									
	Other employee benefits	15,109.		15,109.							
	Payroll taxes	13,109.		13,109.							
	Fees for services (nonemployees):	0.									
	Management	120,942.		120,942.							
	Legal	40,710.		40,710.							
	Accounting	0.									
	Lobbying Professional fundraising services. See Part IV, line 17	0.									
	Investment management fees	872,102.		872,102.							
	Other. (If line 11g amount exceeds 10% of line 25, column										
9	(A) amount, list line 11g expenses on Schedule O.)	2,400.		2,400.							
12	Advertising and promotion	0.									
	Office expenses	13,159.		13,159.							
	Information technology	0.									
15	Royalties	0.									
	Occupancy	6,529.		6,529.							
	Travel	0.									
	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials	0.		= 5							
19	Conferences, conventions, and meetings	56,106.		56,106.							
	Interest	0.									
	Payments to affiliates.	0.		2 200							
	Depreciation, depletion, and amortization	2,206. 21,125.		2,206. 21,125.							
	Insurance	41,145.		41,145.							
24	Other expenses. Itemize expenses not covered										
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column										
	(A) amount, list line 24e expenses on Schedule O.)										
_	STATE UBIT	4,709.		4,709.							
	STEINBRENNER & OTHER AWARDS	38,960.		38,960.							
C		, , .		,							
d											
	All other expenses										
	Total functional expenses. Add lines 1 through 24e	11,977,588.	10,562,464.	1,415,124.							
	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)	0.									

Form 990 (2019)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this P	art X		
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	0.	1	0.
	2	Savings and temporary cash investments	8,519,795.	2	10,537,506.
	3	Pledges and grants receivable, net	43,750.	3	0.
	4	Accounts receivable, net	0.	4	0.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0.	5	0.
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).	0.	6	0.
ts	7	Notes and loans receivable, net	0.	7	0.
Assets	8	Inventories for sale or use	0.	8	0.
Ą	9	Prepaid expenses and deferred charges	21,412.	9	25,615.
	10 a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 20,779.			
	b	Less: accumulated depreciation	3,125.	10c	2,263.
	11	Investments - publicly traded securities	117,326,664.	11	161,841,482.
	12	Investments - other securities. See Part IV, line 11	169,394,363.	12	175,290,848.
	13	Investments - program-related. See Part IV, line 11.	0.	13	0.
	14	Intangible assets	0.	14	0.
	15	Other assets. See Part IV, line 11	76,225.	15	121,809.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	295,385,334.	16	347,819,523.
	17	Accounts payable and accrued expenses	239,869.	17	209,865.
	18	Grants payable	9,965,222.	18	10,162,464.
	19	Deferred revenue	0.	19	0.
	20	Tax-exempt bond liabilities	0.	20	0.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	100,093,527.	21	127,534,429.
S	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
abi		controlled entity or family member of any of these persons	0.	22	0.
Ĩ	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.
	24	Unsecured notes and loans payable to unrelated third parties.	0.	24	0.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	0.	25	86,741.
	26	Total liabilities. Add lines 17 through 25	110,298,618.	26	137,993,499.
ces		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
alar	27	Net assets without donor restrictions	72,313,116.	27	97,051,304.
ä	28	Net assets with donor restrictions	112,773,600.	28	112,774,720.
Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ and complete lines 29 through 33.			
Assets or	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund.		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds.		31	
∋t A	32	Total net assets or fund balances	185,086,716.	32	209,826,024.
Net	33	Total liabilities and net assets/fund balances	295,385,334.	33	347,819,523.
_			, ,	. 55	Form 990 (2019)

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Part	XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		11,8		
2	Total expenses (must equal Part IX, column (A), line 25)	2		11,9		
3	Revenue less expenses. Subtract line 2 from line 1	3			23,5	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		85,0		
5	Net unrealized gains (losses) on investments	5		24,8	62,8	26.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10	2	09,8	26,0	24.
Part	·					
	Check if Schedule O contains a response or note to any line in this Part XII				<u></u>	
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in in			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	piled	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?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	n a			
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis X Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over	rsigh	t of			
	the audit, review, or compilation of its financial statements and selection of an independent accounta	nt?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, ex	крlain	on			
	Schedule O.					
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	th in	the			
	Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	udits .		3b		

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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.

OMB No. 1545-0047 Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

THI	E UNITED STATES OLYMPIC	C ENDOWMENT				74-232783	38
Pa	rt I Reason for Public Cha	rity Status (All o	rganizations must c	omplet	e this pa	art.) See instructions	
Γhe	organization is not a private four	ndation because it	is: (For lines 1 through	gh 12, ch	eck only	one box.)	
1	A church, convention of chu	irches, or associat	tion of churches descr	ribed in s	ection 1	70(b)(1)(A)(i).	
2	A school described in section	on 170(b)(1)(A)(ii)	. (Attach Schedule E	(Form 99	90 or 990)-EZ).)	
3	A hospital or a cooperative	hospital service of	rganization described i	n sectio	n 170(b)	(1)(A)(iii).	
4	A medical research organiz	ation operated in	conjunction with a hos	spital de	scribed ir	section 170(b)(1)(A)	(iii). Enter the
	hospital's name, city, and st	ate:					
5	An organization operated f	or the benefit of	a college or universit	y owned	d or ope	rated by a governme	ntal unit described in
	section 170(b)(1)(A)(iv). (C	omplete Part II.)					
6	A federal, state, or local go	vernment or gover	rnmental unit describe	d in sect	ion 170(b)(1)(A)(v).	
7	An organization that norma	ally receives a sub	stantial part of its su	pport fro	om a go	vernmental unit or fro	om the general public
	described in section 170(b)	(1)(A)(vi). (Comple	ete Part II.)				
8	A community trust describe	d in section 170(b	o)(1)(A)(vi). (Complete	Part II.)			
9	An agricultural research org	anization describe	ed in section 170(b)(1)(A)(ix)	operated	I in conjunction with a	land-grant college
	or university or a non-land-o	grant college of ag	riculture (see instruct	ions). Ei	nter the r	name, city, and state of	f the college or
	university:						
0	An organization that normal receipts from activities relat support from gross investm	ly receives: (1) mo	ore than 331/3 % of its	support	from co	ntributions, membersh	nip fees, and gross
	support from gross investm	ent income and u	nrelated business tax	able inco	me (less	s section 511 tax) from	businesses
	acquired by the organization						
1 2	An organization organized a X An organization organized a			-			orry out the nurnees
12	of one or more publicly sup	-	-	-			
	Check the box in lines 12a th						
_	V	-			-	· ·	=
а	the supported organizatio	•	•	•		. , ,	
	supporting organization. Y	. , .	• • • • • • • • • • • • • • • • • • • •		ajority or	the directors of truste	es of the
b		•			with its	supported organization	on(s) by having
	control or management o	•					
	organization(s). You must						
С	Type III functionally integ	•		ited in co	onnectio	n with, and functional	ly integrated with,
	its supported organization	(s) (see instruction	s). You must comple	te Part I	V, Sectio	ons A, D, and E.	
d	Type III non-functionally	integrated. A sup	porting organization o	perated	in conne	ection with its support	ted organization(s)
	that is not functionally inte	grated. The organ	nization generally mus	t satisfy	a distrib	ution requirement and	d an attentiveness
	requirement (see instructi	ons). You must co	omplete Part IV, Sect	ions A a	nd D, and	d Part V.	
е	Check this box if the orga	nization received	a written determinatio	n from t	he IRS th	nat it is a Type I, Type I	I, Type III
	functionally integrated, or	Type III non-funct	ionally integrated sup	porting o	organizat	ion.	
f	Enter the number of supported	-					2
g			` ' '	I			
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10		organization ur governing	(v) Amount of monetary support (see	(vi) Amount of other support (see
7	A TITA CIIMENTE 1		above (see instructions))	docui	ment?	instructions)	instructions)
F	ATTACHMENT 1			Yes	No		
A)							
B)							
C)							
<u>.</u>							
D)							
E)							
Γota	al					10,162,464.	
						10,104,404.	İ

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2019

Page 2 Schedule A (Form 990 or 990-EZ) 2019

Par	Support Schedule for Orga (Complete only if you checke Part III. If the organization fai	ed the box on	line 5, 7, or 8	of Part I or if t	he organization	on failed to qua	
Sec	tion A. Public Support				•	,	
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the 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						
5	The portion of total contributions by each person (other than a 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						
6	''·						
	tion B. Total Support	(a) 2015	(b) 2016	(a) 2017	(4) 2019	(a) 2010	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 8	Amounts from line 4						
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 VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years. If the Form 990 is f organization, check this box and stop here	<u> </u>	<u> </u>				
	tion C. Computation of Public Sup						
14	Public support percentage for 2019 (li						<u>%</u>
15	Public support percentage from 2018						<u>%</u>
16a	331/3% support test - 2019. If the or						
L	box and stop here . The organization q 331/3% support test - 2018. If the organization						
D	this box and stop here. The organizati						
172	10%-facts-and-circumstances test - 2						
114	10% or more, and if the organization						
	Part VI how the organization meets torganization	he "facts-and-o	circumstances" t	est. The organ	ization qualifies	as a publicly s	supported
b	10%-facts-and-circumstances test - 2	2018. If the or	ganization did r	ot check a box	x on line 13, 16	Sa, 16b, or 17a,	and line
	15 is 10% or more, and if the orga						-
	Explain in Part VI how the organization supported organization						>
18	Private foundation. If the organization	did not check	a box on line 13	s, 16a, 16b, 17a	a, or 17b, check	this box and see	•

Schedule A (Form 990 or 990-EZ) 2019

Part III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 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.)

Public support percentage from 2018 Schedule A, Part III, line 15	Sec	tion A. Public Support					,	
1 Gille, guarte. contributions, and membership tess received, thor on lincake any numerical grants.] 2 Gross receipts from activates the stress of a services performed, or facilities sturnished in any activity and it related to the organization's tax-eventy purpose. 3 Gross receipts from activities that are not an unrelated tax or business under socion of 3. 4 Tax revenues leveled for the organization's benefit and either paid to or expended on its behalf. 5 The value of services or facilities for turnished by a governmental unit to the organization without charge. 5 The value of services or facilities. 6 Total. Add lines 1 through 5. 6 Total Add lines 11 through 5. 7 a Amounts included on lines 2 and 3. persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year. 6 Add lines 10 amount on line 13 for the year. 7 a Public support. (Subtract line 7 of from line 6.) 8 Public support. (Subtract line 7 of from line 6.) 9 Amounts from linesex, dividends, payments received or securises lours, rearts, royalises, and noome from similar sources. 9 Amounts from linesex, dividends, payments received or securises lours, rearts, royalises, and noome from similar sources. 9 Add lines 10 and 10 b. 9 Amounts from linesex is dividends, payments received or securises lours, rearts, royalises, and noome from similar sources. 9 Add lines 10 and 10 b. 9 Amounts from lineded in line 10 by, whether or not the business is regularly carried on line 2 in 10 and 10 b. 10 Total support percentage from 2018 Scheduke A, Part III, line 17. 11 Not simple proper percentage from 2018 Scheduke A, Part III, line 17. 12 Public support percentage from 2018 Scheduke A, Part III, line 17. 13 Investment income percentage for 2019 (line 6, column (f), divided by line 13, column (f)). 15 Public support percentage for 2019 (line 10, column f), divided by line 13, column (f)). 16 Investment income percentage for 2019 (line 10, column f), divided by line 13, column (f)). 17 Investment income percentage for 2019 (line 6, column f),			(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
2 Gross recepts from admissions, mechanises undor services performed, or fedibles furnished in any activity that is related to the organizations tax-exempt purpose								
2 Gross recepts from admissions, mechanises undor services performed, or fedibles furnished in any activity that is related to the organizations tax-exempt purpose		received. (Do not include any "unusual grants.")						
trunished in any activity that is related to the organization's tine-exempt purpose	2	· · · · · · · · · · · · · · · · · · ·						
organization's tise-exemply purpose organization's tise-exemply purpose unrelated trade or business under section 513 . 4 Tax revenues levided 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 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 persons that exceed the greater of \$5.000 or 1% of the amount on line 18 for the year c Add lines 7a and 7b . 8 Public support (Subtract line 7c from line 6). Section B. Total Support Catendar year (or fiscal year beginning in) ▶ a Gross income from interest, disclands, person, section 51 transpl from businesss as each of the section		sold or services performed, or facilities						
3 Gress receipts from auchities that are not an unrelated trade or business under section 513 . 4 Tax reverues 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 Total. Add lines 1 through 5 . 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons . 9 Amounts included on lines 1, 2, and 3 received from other than disqualified persons . 9 Amounts included on lines 1, 2, and 3 received from other than disqualified persons . 9 Amounts included on lines 1, 2, and 3 received from other than disqualified persons . 9 Add lines 7a and 7b . 9 Amounts from fine 6 . 10 Add lines 7a and 7b . 11 Add lines 7a and 7b . 12 Other income from included on line 10 for the year of the lines of th		furnished in any activity that is related to the						
3 Gress receipts from auchities that are not an unrelated trade or business under section 513 . 4 Tax reverues 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 Total. Add lines 1 through 5 . 7 a Amounts included on lines 1, 2, and 3 received from disqualified persons . 9 Amounts included on lines 1, 2, and 3 received from other than disqualified persons . 9 Amounts included on lines 1, 2, and 3 received from other than disqualified persons . 9 Amounts included on lines 1, 2, and 3 received from other than disqualified persons . 9 Add lines 7a and 7b . 9 Amounts from fine 6 . 10 Add lines 7a and 7b . 11 Add lines 7a and 7b . 12 Other income from included on line 10 for the year of the lines of th								
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or expended on its behalf								
5 The value of services or facilities furnished by a governmental unit to the organization without charge								
furnished by a governmental unit to the organization without charge	5	·						
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or 1% of the amount on line 13 for the year c Add lines 7a and 7b								
c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 8.)								
8 Public support. (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 9 Amounts from line 6.) 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 section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 122 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 13 Total support. (Add lines 9, 10c, 11, and 12.) 14 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) organization, check this box and stop here. Section C. Computation of Public Support Percentage 15 Public support percentage from 2018 Schedule A, Part III, line 15 9 Public support percentage from 2018 Schedule A, Part III, line 15 16 Public support percentage from 2018 Schedule A, Part III, line 17 18 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	_	, L						
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section 511 taxes) from businesses acquired after June 30, 1975	b							
acquired after June 30, 1975	-	,						
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line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization	h			_				
	D	• • • • • • • • • • • • • • • • • • • •						
	20			•				

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- 10 a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, t determine whether the organization had excess business holdings.)

		Yes	No
g y			
	1	Х	
is ed			
	2		X
er	3a		Х
id ie			
	3b		
3)	0-		
	3с		
If	4a		X
n on	44		
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s," N n;			
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o d or			
	6	X	
or :y	7		X
?			
•	8		Х
e d			37
	9a		X
h	9b		X
it			
	9с		X
n d			
to	10a		X
	10b		

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Part	IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		Х
b	A family member of a person described in (a) above?	11b		X
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		X
Sect	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			77
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		X
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2	Х	
Sect	ion C. Type II Supporting Organizations		21	
Jeel	1011 0. Type ii oupporting organizations		Yes	No
4	Ware a majority of the argenizations directors or trustees during the toy year also a majority of the directors		103	110
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
	71 11 5 5		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.			
	.,	3		
	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structi	ons).	
a	The organization satisfied the Activities Test. Complete line 2 below.			
b c	The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	inotru	otions)	
C	The organization supported a governmental entity. Describe in Fait vi now you supported a government entity (see	IIISIIU	Yes	
2	Activities Test. Answer (a) and (b) below.		103	140
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	5			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Page 6 Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nization	S	<u> </u>
1 Check here if the organization satisfied the Integral Part Test as a qualifying	g trust or	n Nov. 20, 1970 (expla	in in Part VI). See
instructions. All other Type III non-functionally integrated supporting organization	zations r	nust complete Sectio	ns A through E.
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
	Iu		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):	2		
2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d.	3		
	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	5		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)			
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions 8 Minimum Asset Amount (add line 7 to line 6)	7		
Section C - Distributable Amount	8		Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	y integra	ited Type III supporting	g organization (see
instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)								
Secti	on D - Distributions			Current Year				
1	Amounts paid to supported organizations to accomplish ex							
2	Amounts paid to perform activity that directly furthers exer							
	organizations, in excess of income from activity							
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations					
4	Amounts paid to acquire exempt-use assets							
5	Qualified set-aside amounts (prior IRS approval required)							
6	Other distributions (describe in Part VI). See instructions.							
7	Total annual distributions. Add lines 1 through 6.							
8	Distributions to attentive supported organizations to which	the organization is resp	onsive					
	(provide details in Part VI). See instructions.							
9	Distributable amount for 2019 from Section C, line 6							
10	Line 8 amount divided by line 9 amount	T						
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019				
_1	Distributable amount for 2019 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2019							
	(reasonable cause required - explain in Part VI). See							
	instructions.							
3	Excess distributions carryover, if any, to 2019							
a	From 2014							
b	From 2015							
C	From 2016							
d	From 2017							
e	From 2018							
f	Total of lines 3a through e							
<u>g</u>	Applied to underdistributions of prior years							
<u>h</u>	Applied to 2019 distributable amount							
<u>i</u>	Carryover from 2014 not applied (see instructions)							
	Remainder. Subtract lines 3g, 3h, and 3i from 3f. Distributions for 2019 from							
4	Section D, line 7:							
a	Applied to underdistributions of prior years							
b	Applied to 2019 distributable amount							
	Remainder. Subtract lines 4a and 4b from 4.							
5	Remaining underdistributions for years prior to 2019, if							
•	any. Subtract lines 3g and 4a from line 2. For result							
	greater than zero, explain in Part VI. See instructions.							
6	Remaining underdistributions for 2019. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2020. Add lines 3j							
	and 4c.							
8	Breakdown of line 7:							
а	Excess from 2015							
b	Excess from 2016							
С	Excess from 2017							
d	Excess from 2018							
	Excess from 2019							

Schedule A (Form 990 or 990-EZ) 2019

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE, A, PART IV, SECTION A, LINE 6

IN 2019, IN ADDITION TO FUNDS GRANTED TO THE UNITED STATES OLYMPIC AND PARALYMPIC COMMITTEE, THE UNITED STATES OLYMPIC ENDOWMENT ALSO GRANTED FUNDS TO THE US OLYMPIC AND PARALYMPIC MUSEUM, ANOTHER 501(C) (3) CHARITY THAT SUPPORTS THE PURPOSES OF THE UNITED STATES OLYMPIC AND PARALYMPIC COMMITTEE.

SCHEDULE, A, PART IV, SECTION B, LINE 1

DESCRIBE HOW THE SUPPORTED ORGANIZATION EFFECTIVELY OPERATED, SUPERVISED,

OR CONTROLLED THE ORGANIZATION'S ACTIVITIES:

THREE MEMBERS ARE APPOINTED AS DIRECTORS BY THE USOPC (SUPPORTED ORGANIZATION). IN ADDITION, THE CEO AND THE CHAIRMAN OF THE USOPC SERVE AS DIRECTORS. THE USOPC CFO AND CHIEF DEVELOPMENT OFFICER SERVE AS EX OFFICIO, NON-VOTING MEMBERS. THE USOPC CAN DISSOLVE THE USOE UPON THE APPROVAL OF TWO-THIRDS OF THE VOTES CAST AT TWO SUCCESSIVE REGULARLY CALLED MEETINGS OF THE USOPC BOARD OF DIRECTORS AT WHICH A QUORUM IS PRESENT.

SCHEDULE, A, PART IV, SECTION B, LINE 2

OPERATIONS FOR THE BENEFIT OF SUPPORTED ORGANIZATIONS OTHER THAN THE ORGANIZATION THAT OPERATED, SUPERVISED, OR CONTROLLED THE SPORTING ORGANIZATION:

IN ADDITION TO SUPPORTING THE UNITED STATES OLYMPIC AND PARALYMPIC

COMMITTEE ("COMMITTEE"), THE ENDOWMENT PROVIDES SUPPORT TO SECTION

501(C)(3) PUBLIC CHARITY SPORTS ORGANIZATIONS THAT ARE MEMBERS OF THE

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

UNITED STATES OLYMPIC AND PARALYMPIC COMMITTEE AND HOLDS AND INVESTS

THEIR FUNDS SOLELY AS AGENT IN FURTHERANCE OF THE ENDOWMENT'S SUPPORT TO

THE COMMITTEE.

				ATTACHMENT :	1
SCHEDULE A, PART I - INFORMATION ABOUT	SUPPORTED (ORGANIZATIO	NS		
		(III) TYPE OF	(IV)	(V) AMOUNT OF	(VI) OTHER
(I) NAME OF SUPPORTED ORGANIZATION	(II) EIN	ORGANIZATION	YES NO	SUPPORT	SUPPORT AMOUNT
UNITED STATES OLYMPIC AND PARALYMPIC COMMITTEE	13-1548339	7	Х	10,162,464.	0.
TOTAL AMOUNT OF SUPPORT				10,162,464.	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information. Employer identification number

THE	UNITED STATES OLYMPIC ENDOWMENT	74-2327838
Par	t I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	r Accounts.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of 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 assets held	in donor advised
	funds are the organization's property, subject to the organization's exclusive legal control? .	Yes L No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant for	
	only for charitable purposes and not for the benefit of the donor or donor advisor, or for a	
	conferring impermissible private benefit?	Yes No
Pai	t II Conservation Easements.	
1	Complete if the organization answered "Yes" on Form 990, Part IV, line 7.	
'	Purpose(s) of conservation easements held by the organization (check all that apply).	of a historically important land area
		of a historically important land area of a certified historic structure
	Preservation of open space	of a certified historic structure
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the form of a conservation
_	easement on the last day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
	Total acreage restricted by conservation easements	2b
	Number of conservation easements on a certified historic structure included in (a)	2c
	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	
<u>.</u>	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or term	inated by the organization during the
	tax year	, , ,
	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspect	tion, handling of
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing	conservation easements during the year
	>	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing c	onservation easements during the year
	> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of sections and the conservation easement reported on line 2(d) above satisfy the requirements of sections and the conservation easement reported on line 2(d) above satisfy the requirements of sections and the conservation easement reported on line 2(d) above satisfy the requirements of sections and the conservation easement reported on line 2(d) above satisfy the requirements of sections and the conservation easement reported on line 2(d) above satisfy the requirements of sections and the conservation easement reported on line 2(d) above satisfy the requirements of sections and the conservation easement reported on line 2(d) above satisfy the requirements of sections and the conservation easement reported on line 2(d) above satisfy the requirements of sections and the conservation easement reported on line 2(d) above satisfy the requirements of sections and the conservation easement reported on the conservation easement reported on the conservation end to the co	
•	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue an balance sheet, and include, if applicable, the text of the footnote to the organization's finance	
	organization's accounting for conservation easements.	iai statements that describes the
Par	t III Organizations Maintaining Collections of Art, Historical Treasures, or Othe	r Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958, not to report in its revenu	ue statement and balance sheet works
	If the organization elected, as permitted under FASB ASC 958, not to report in its revenu of art, historical treasures, or other similar assets held for public exhibition, education, service, provide in Part XIII the text of the footnote to its financial statements that describes t	or research in furtherance of public
b	If the organization elected, as permitted under FASB ASC 958, to report in its revenue s art, historical treasures, or other similar assets held for public exhibition, education, or res	
	provide the following amounts relating to these items:	•
	(i) Revenue included on Form 990, Part VIII, line 1	
	(ii) Assets included in Form 990, Part X	▶ \$
2	If the organization received or held works of art, historical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under FASB ASC 958 relating to these items:	
	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	> \$

Schedule D (Form 990) 2019

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Pa	rt III Organizations Maintaini	ng Collections of	Art, Historical Tre	easures, or C	ther Similar A	ssets (con		age =		
3	Using the organization's acquisition	on, accession, and o	other records, chec	k any of the f	ollowing that m	ake signific	ant use	of its		
	collection items (check all that app	ly):								
а	Public exhibition		d Loan	or exchange p	rogram					
b	Scholarly research		e Other							
С	Preservation for future gene									
4	Provide a description of the organ	nization's collections	and explain how	they further th	ne organization's	s exempt pu	urpose in	Part		
	XIII.									
5	During the year, did the organization							_		
	assets to be sold to raise funds rath		ained as part of the	organization's	collection?		Yes	No		
Pa	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form									
		ition answered "Ye	es" on Form 990, I	Part IV, line 9	, or reported ar	n amount o	n Form			
	990, Part X, line 21.									
1a	Is the organization an agent, trusted						V	∃ .		
	included on Form 990, Part X?						Yes X	No		
D	If "Yes," explain the arrangement i	n Part XIII and comp	piete the following ta	bie:		A m quint				
_	Paginning halange			4-		Amount				
C C	Beginning balance									
	Additions during the year									
e f	Distributions during the year Ending balance									
-	Did the organization include an am				odial account lial	hility2 X	Yes	No		
	If "Yes," explain the arrangement i							_		
	rt V Endowment Funds.	III alt XIII. Ollock III	ere ii trie explanation	rnas been pro-	vaca on r art XIII					
ı a	Complete if the organiza	ation answered "Ye	es" on Form 990. I	Part IV. line 1	0.					
	, , , , , , , , , , , , , , , , , , ,	(a) Current year	(b) Prior year	(c) Two years b		ears back (e) Four years	back		
10	Beginning of year balance	112,773,600.	112,771,681.	112,769,8			12,769			
1a b	Contributions	1,120.	1,919.		794.	394.		270		
	Net investment earnings, gains,	,	,							
С	and losses	20,546,220.	2,444,431.	17,064,9	34. 6,647	7,980.	438	,824		
d	Grants or scholarships									
e	Other expenditures for facilities									
C	and programs	20,546,220.	2,444,431.	17,064,9	34. 6,647	7,980.	438	,824		
f	Administrative expenses									
g	End of year balance	112,774,720.	112,773,600.	112,771,6	81. 112,769	,887. 1	12,769	,493.		
2	Provide the estimated percentage	of the current year	end halance (line 1g	column (a)) he	ald as.					
a	Board designated or quasi-endown		%	, 00.0 (4)) 1.0	old do.					
b	Permanent endowment ▶ 100.0	000 %	_							
С	Term endowment ▶	%								
	The percentages on lines 2a, 2b, a	and 2c should equal 1	100%.							
3a	Are there endowment funds not in	the possession of th	ne organization that	are held and	administered for	the				
	organization by:					_	Yes	No		
	(i) Unrelated organizations					3	a(i)	X		
	(ii) Related organizations					_	a(ii)	X		
b	If "Yes" on line 3a(ii), are the relate	ed organizations liste	d as required on Sch	nedule R?			3b			
4	Describe in Part XIII the intended u									
Pa	rt VI Land, Buildings, and Equ Complete if the organize	Jipment. ation answered "Yo	es" on Form 990	Part IV line 1	11a See Form	990 Part)	(line 10)		
	Description of property	(a) Cost or	other basis (b) Cost		(c) Accumulated		ook value	<u>, </u>		
		(inves		other)	depreciation					
_	Land									
b	Buildings									
C	Leasehold improvements			20 770	10 516		2 /	262		
d	Equipment			20,779.	18,516.		۷, ۰	263.		
	Other		n 000 Port V 22/	n (D) line 10=	1		2 '	263.		
rota	I. Add lines 1a through 1e. (Column	ı (u) must equal Forn	н ээо, <i>Рап</i> X, colum	н (в), шпе тис.,	<u>/</u> . ▶		∠,.	۷٥٥.		

Schedule D (Form 990) 2019

Part VII Investments - Other Securities. Complete if the organization answere	ed "Yes" on Form 990,	Part IV, line 11b. See Form 990, Part X, line	12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) HEDGE EQUITY FUNDS	45,793,541.	FMV	
(B) LIMITED PARTNERSHIPS	64,673,654.	FMV	
(C) REAL ESTATE FUND	12,617,360.	FMV	
(D) PRIVATE EQUITY FUNDS	2,797,103.	FMV	
(E) OTHER ALTERNATIVE INVESTMENTS	49,409,190.	FMV	
(F)			
(G) (H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	175,290,848.		
Part VIII Investments - Program Related.	17572507010.		
	ed "Yes" on Form 990,	Part IV, line 11c. See Form 990, Part X, line	13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1)		,	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. Complete if the organization answere	ed "Yes" on Form 990	Part IV, line 11d. See Form 990, Part X, line	15
	Description	(b) Book v	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
_(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B)) line 15.)	· · · · · · · · · · · · · · · · · · ·	
Part X Other Liabilities. Complete if the organization answere	ed "Yes" on Form 990,	Part IV, line 11e or 11f. See Form 990, Part I	Χ,
line 25.			
1. (a) Descr (1) Federal income taxes	ription of liability	(b) Book v	alue
(2) INVESTMENT SECURITIES PAYABLE		86	6,741
(3)			<i>,</i> , , , , , ,
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25	j.)	▶ 86	6,741
2. Liability for uncertain tax positions. In Part XIII, provide th			

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Schedule D (Form 990) 2019 Page 4

Ochcaa	C D (1 0111 000) 2010		1 age 4
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	
1	Total revenue, gains, and other support per audited financial statements	1	35,844,794.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities	.	
C	Recoveries of prior year grants	-	
d e	Other (Describe in Part XIII.)	2e	24,862,826.
3	Subtract line 2e from line 1	3	10,981,968.
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 872,102.	.	
b	Other (Describe in Part XIII.)	4c	872,102.
с 5	Add lines 4a and 4b	5	11,854,070.
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu		<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	11,105,486.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	-	
b C	Other losses	-	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	11 105 406
3	Subtract line 2e from line 1	3	11,105,486.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII line 7b. 4a 872,102.		
a b	Investment expenses not included on Form 990, Part VIII, line 7b 4a 872,102. Other (Describe in Part XIII.)	-	
C	Add lines 4a and 4b	4c	872,102.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	11,977,588.
	XIII Supplemental Information. e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; F	Part \/	line 4: Part Y line
	E the descriptions required for Fart II, lines 3, 3, and 3, Fart III, lines 1a and 4, Fart IV, lines 1b and 2b, 1 at III, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform		
SEE	PAGE 5		

Page 5

SCHEDULE D, PART V, LINE 4

DESCRIBE THE INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS: PERMANENTLY RESTRICTED NET ASSETS ARE TO BE MAINTAINED BY THE ENDOWMENT IN PERPETUITY. THE INCOME FROM THE PORTION OF THE ENDOWMENT FUNDS RELATING TO THE ENDOWMENT'S FUNDS CAN BE USED TO SUPPORT THE ACTIVITIES OF THE ENDOWMENT IN ACCORDANCE WITH THE ENDOWMENT'S SPENDING POLICY. THE ENDOWMENT FUNDS THAT THE ENDOWMENT HOLDS SOLELY AS AGENT FOR THE BENEFIT OF THE SPORTS ORGANIZATIONS CAN BE USED ONLY BY THE SPORTS ORGANIZATIONS IN ACCORDANCE WITH THEIR SPENDING POLICIES. THE ENDOWMENT HAS NO CONTROL OR AUTHORITY WITH RESPECT TO THESE SPORT ORGANIZATION'S INVESTMENT FUNDS ONCE DISTRIBUTED TO THE SPORTS ORGANIZATIONS.

SCHEDULE D, PART IV, LINE 2B

INVESTMENTS HELD SOLELY AS AGENT FOR SPORTS ORGANIZATIONS:

THE ENDOWMENT HAS AN INVESTMENT PROGRAM, WHICH ALLOWS THE COMMITTEE AND

ITS AFFILIATED SPORTS

ORGANIZATIONS TO POOL THEIR FUNDS FOR INVESTMENT WITH FUNDS OF THE

ENDOWMENT. THE ENDOWMENT

HOLDS THESE FUNDS SOLELY AS AGENT FOR THESE ORGANIZATIONS. THESE SPORTS

ORGANIZATIONS MAY REQUEST PARTIAL WITHDRAWALS (INCLUDING ALLOCATED GAINS

AND INTEREST ONCE ALLOCATIONS ARE APPROVED) FOLLOWING A 30-DAY

NOTIFICATION PERIOD. FULL OR LIQUIDATING WITHDRAWALS MAY BE PROCESSED

FOLLOWING A 90-DAY NOTIFICATION PERIOD.

Page 5

Part XIII Supplemental Information (continued)

SCHEDULE D, PART X, LINE 2

ORGANIZATION'S LIABILITY FOR UNCERTAIN TAX POSITIONS:

MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740. BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	UNITED STATES OLYMPIC				74-23278.	
Part	General Information o Form 990, Part IV, line 14		Outside the	United States. Comple	ete if the organization a	nswered "Yes" or
1	For grantmakers. Does the org	ganization maii	ntain records	to substantiate the amou	nt of its grants and	
	other assistance, the grantees'	eligibility for t	he grants or	assistance, and the selec	tion criteria used to	
;	award the grants or assistance?				[Yes No
	-					
2	For grantmakers. Describe in	Part V the org	anization's pro	ocedures for monitoring t	he use of its grants and	d other assistance
	outside the United States.	9		· ·	· ·	
3	Activities per Region. (The follov	ving Part I. line	3 table can be	e duplicated if additional sp	ace is needed.)	
		(b) Number	(c) Number of	(d) Activities conducted in the	•	/f) Total
	(a) Region	of offices in	employees,	region (by type) (such as,	(e) If activity listed in (d) is a program service,	(f) Total expenditures for
		the region	agents, and independent	fundraising, program services,	describe specific type of	and investments
			contractors	investments, grants to recipients located in the region)	service(s) in the region	in the region
			in the region	100000000000000000000000000000000000000		
_(1)	CENTRAL AMERICA/CARIBBEAN	0.	0.	INVESTMENTS		48,651,548.
(2)						
(3)						
(4)						
(5)						
_(0)						
(6)						
(6)						
(7)						
(7)						
(=)						
(8)						
_(9)						
(10)						
(11)						
(12)						
(13)						
(10)						
(14)						
(14)						
(15)						
(15)						
(40)						
(16)						
(17)						
3a	Subtotal					48,651,548.
b	Total from continuation					
	sheets to Part I					
С						48,651,548.

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2019

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

1 Ql Numo of Ql Numo of Ql Numo of Ql Arrount of Q
--

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt 2

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019

Part III

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance Ξ (5) (3) 4 (2) (9) 6 (10) (11) (12) (13) (14) (12) (16) (17) 8 (18) 5

Schedule F (Form 990) 2019

Page 4 Schedule F (Form 990) 2019

Part	V Foreign Forms	
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) Yes X No	
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization	
	may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) X Yes	
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990) Yes	

Schedule F (Form 990) 2019

Schedule F (Form 990) 2019 Page 5

Part V

Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE F, PART 1, LINE 2

DETAIL OF INVESTMENTS

INVESTMENT MANAGEMENT FEES 638,719

INVESTMENTS BALANCES 48,012,829

TOTAL 48,651,548

SCHEDULEI (Form

Grants and Other Assistance to Organizations,

(Form 990)	Governments, and Individuals in the United States		
	Complete if the organization answered "Yes" on Form 990. Part IV. line 21 or 22.		
Department of the Treasury	► Attach to Form 990.	o O	Open to Pu
Internal Revenue Service	► Go to www.irs.gov/Form990 for the latest information.		Inspecti
Name of the organization		Employer identification number	number
THE UNITED STAT	THE UNITED STATES OLYMPIC ENDOWMENT	74-2327838	
Part General In	Part I General Information on Grants and Assistance		
1 Does the organiza	1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	_	_
the selection crite	the selection criteria used to award the grants or assistance?	*	× Yes
2 Describe in Part I	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.		

Part II	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990,	omestic Org	anizations an	d Domestic Gov	ernments. Com	plete if the organiza	ation answered "Ye	ss" on Form 990,
	Part IV, line 21, for any recipient that received	nat received	more than \$5,	000. Part II can b	e duplicated if a	more than \$5,000. Part II can be duplicated if additional space is needed.	eeded.	
	1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) UNITE	(1) UNITED STATES OLYMPIC AND PARALYMPIC CO							
1 OLY	OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	13-1548339	501 (C)(3)	10,162,464.				GENERAL SUPPORT
(2) US OL	US OLYMPIC AND PARALYMPIC MUSEUM							
PO BO	BOX 681 COLORADO SPRINGS, CO 80901	46-3189741	501(C)(3)	400,000.				GENERAL SUPPORT
(3)								
(4)								
(5)								
(9)								
		ı						
(7)								
(8)								
(6)								
		ı						
(0)								
5								
1								
12)								
2 Ente	Enter total number of section 501(c)(3) and government or	government c	rganizations list	ganizations listed in the line 1 table	le .		•	2.
3 Ente	Enter total number of other organizations listed in the line	ed in the line	1 table				•	
or Paperv	or Paperwork Reduction Act Notice, see the Instructions for Form 990.	ons for Form 9	90.				Sche	Schedule I (Form 990) (2019)

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule I (Form 990) (2019)

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
2						
ო						
4						
5						
9						
7						
Part IV	Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional	information re	quired in Part I, I	ine 2, Part III, c	olumn (b); and any o	ther additional

information.

SCHEDULE I, PART I, LINE 2

DESCRIBE THE ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANT FUNDS:

TO THE UNITED STATES OLYMPIC AND PARALYMPIC COMMITTEE AND GRANTS ARE MADE

US OLYMPIC AND PARALYMPIC MUSEUM AND THEY ARE PERMITTED TO USE THE GRANT

IN ANY MANNER AS NEEDED THAT SUPPORTS THEIR CHARITABLE PURPOSE.

Schedule I (Form 990) (2019)

PAGE 34

SCHEDULE J (Form 990)

Compensation InformationFor certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE UNITED STATES OLYMPIC ENDOWMENT

Employer identification number

74-2327838

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
	explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The second confidence of the second confidence			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
а	The organization?	5a		Х
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		Х
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
•	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	a		

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2019

Page 2

Schedule J (Form 990) 2019

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		i i	218 A 0000 L 11 0 181					
		(b) Breakdown of	(b) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
SARAH D. HIRSHLAND, DIR	R (E)	0	0	0	.0	0	.0	
1(CEO OF USOPC)	€	596,446.	160,000.	29,270.	7,662.	24,300.	817,678.	
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2	€							
	Ξ							
က	€							
	Ξ							
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Schedule J (Form 990) 2019 Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2019

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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

THE UNITED STATES OLYMPIC ENDOWMENT

Employer identification number 74-2327838

FORM 990, PART VI, SECTION A, LINE 6

CLASSES OF MEMBERS:

THE UNITED STATES OLYMPIC ENDOWMENT (USOE) HAS MEMBERS USING THE DEFINITION OF MEMBERS FOR 990 PURPOSES.

FORM 990, PART VI, SECTION A, LINE 7A

MEMBER ELECTIONS:

THE UNITED STATES OLYMPIC AND PARALYMPIC COMMITTEE (USOPC) ELECTS FIVE MEMBERS (WHICH INCLUDES THE CHAIRMAN AND CHIEF EXECUTIVE OFFICER OF THE USOPC), THE ATHLETES' ADVISORY COUNCIL (AAC) ELECTS TWO REPRESENTATIVES, THE NATIONAL GOVERNING BODIES COUNCIL (NGBC) ELECTS TWO REPRESENTATIVES AND THE MULTISPORT ORGANIZATIONS COUNCIL (MSOC) ELECTS ONE REPRESENTATIVE.

FORM 990, PART VI, SECTION A, LINE 7B

GOVERNANCE DECISIONS:

THE USOPC MUST APPROVE AMENDMENTS TO THE ORGANIZATION'S ARTICLES OF INCORPORATION AND BYLAWS.

FORM 990, PART VI, SECTION B, LINE 11B

FORM 990 REVIEW:

THE FORM 990 IS PREPARED BY A THIRD PARTY AND AN INITIAL REVIEW IS CONDUCTED BY THE ORGANIZATION'S EXECUTIVE VICE PRESIDENT/CHIEF OPERATING OFFICER PRIOR TO THE RETURN BEING FINALIZED. THE 990 IS THEN FORWARDED TO Name of the organization

THE UNITED STATES OLYMPIC ENDOWMENT

Employer identification number

74-2327838

ALL BOARD MEMBERS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C

PROCESS FOR MONITORING COMPLIANCE WITH CONFLICT OF INTEREST POLICY:

ALL BOARD MEMBERS AND OFFICERS ARE REQUIRED TO COMPLETE A CONFLICT OF

INTEREST DISCLOSURE ON AN ANNUAL BASIS. IN THE EVENT A CONFLICT IS

IDENTIFIED, THE BOARD REVIEWS AND DETERMINES IF A CONFLICT DOES EXIST. IN

THE EVENT THAT A CONFLICT EXISTS, DIRECTORS ABSTAIN AND OFFICERS ARE

PROHIBITED FROM PARTICIPATING IN THE DECISION MAKING PROCESS.

FORM 990, PART VI, QUESTION 15A & 15B

COMPENSATION OF OFFICERS AND EXECUTIVES:

COMPENSATION FOR THE EXECUTIVE AND OTHER OFFICERS OF THE ORGANIZATION IS APPROVED BY THE BOARD AND DOCUMENTED IN THE MINUTES.

FORM 990, PART VI, SECTION C, LINE 19

AVAILABILITY OF DOCUMENTS TO THE PUBLIC:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE ENDOWMENT PROVIDES A PERMANENT ENDOWMENT TO FOSTER THE UNITED STATES OF AMERICA'S PARTICIPATION IN NATIONAL AND INTERNATIONAL AMATEUR SPORTS COMPETITION. THIS IS DONE THROUGH DIRECT SUPPORT OF THE UNITED STATES OLYMPIC AND PARALYMPIC COMMITTEE THAT, IN TURN, REGULATES AND SUPPORTS MEMBER SPORTS ORGANIZATIONS THAT DEVELOP

Name of the organization Employer identification number THE UNITED STATES OLYMPIC ENDOWMENT 74-2327838

ATTACHMENT 1 (CONT'D)

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

AMATEUR ATHLETES FOR NATIONAL AND INTERNATIONAL COMPETITION.

ATTACHMENT 2

990, PART VII- COMPENSATION OF THE FIVE HIGHEST	PAID	IND.	CONTRACTORS
---	------	------	-------------

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
ABERDEEN ASSET MANAGEMENT 712 5TH AVENUE 49TH FLOOR NEW YORK, NY 10019	INVESTMENT MANAGER	258,629.
PRIME, BUCHHOLZ AND ASSOCIATES 273 CORPORATE DRIVE PORTSMOUTH, NH 02210	INVESTMENT CONSULT.	162,366.
FORESTER CAPITAL, LLC TWO SOUND VIEW DRIVE, THIRD FLOOR GREENWICH, CT 06830	INVESTMENT MANAGER	140,695.
POLSINELLI PC 900 W. 48TH PLACE, STE. 900 KANSAS CITY, MO 64112	LEGAL SERVICES	136,193.
WELLINGTON TRUST CO., NA 280 CONGRESS STREET BOSTON, MA 02210	INVESTMENT MANAGER	129,785.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

THE UNITED STATES OLYMPIC ENDOWMENT

► Attach to Form 990.

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

Open to Public 2019 Inspection

► Go to www.irs.gov/Form990 for instructions and the latest information.

74-2327838

Employer identification number

(f)
Direct controlling
entity

(e) End-of-year assets (d) Total income Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (c)
Legal domicile (state
or foreign country) (b)
Primary activity (a) (a) Name, address, and EIN (if applicable) of disregarded entity Part I (9) Ξ (2) 4 3 (5)

Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. Part II

	,						
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	2(b)(13) illed y?
						Yes	No
(1) US OLYMPIC AND PARALYMPIC COMMITTEE 13-1548339							
1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	AMATURE SPORT	CO	501(C)(3)	7	N/A		×
(2) UNITED STATES OLYMPIC AND PARALYMPIC FDN 80-0939841							
1 OLYMPIC PLAZA COLORADO SPRINGS, CO 80909	FUNDRAISING	CO	501(C)(3)	7	USOC		×
(3)							
(4)							
(5)							
(9)							
(7)							
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	.0				Schedule R (Form 990) 2019	(Form 99	0) 2019

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Page		(k) Percentage ownership								
	34,	(j) General or managing partner?	Š							
	, line		Yes							
	n 990, Part IV	(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)								
	Forn	(h) Disproportionate allocations?	8 N							
	" on	Dispra	Yes							
	nswered "Yes	(g) Share of end-of- year assets								
	organization a tax year.	(f) Share of total income								
	as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, treated as a partnership during the tax year.	Predominant income (related, unrelated, excluded from tax under sections, 512 - 514)								
	e as a Partnersh is treated as a pa	(d) Direct controlling entity								
	s Taxabl Janizatior	(c) Legal domicile (state or foreign	coding)							
	ted Organization more related org	(b) Primary activity								
Schedule R (Form 990) 2019	Part III Identification of Related Organizations Taxable a because it had one or more related organizations	(a) Name, address, and EIN of related organization		(1)	(2)	(3)	(4)	(5)	(9)	(7)

Country)		end-or-year assets ownersnip controlled	ownership c	(12(b)(13) controlled
			<u> </u>	entity?

JSA

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Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Part V

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.	schedule.				Yes	Š
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ollowing transactions with one or more re	ated organizations list	ed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) rovalties, or (iv) rent from a controlled entity	n a controlled entity.			1a		×
				1b	×	
c Giff grant or capital contribution from related organization(s)				10		×
		- - - - - - -		19	_	×
				1e		×
						:
f Dividends from related organization(s)				#		\times
g Sale of assets to related organization(s).				19	6	×
Purchase of assets from related organization(s)				1	_	×
Exchange of assets with related organization(s).				=	_	×
	ation(s)			7		×
k Lease of facilities, equipment, or other assets from related organization(s)	nization(s)			1 _K		×
	ions for related organization(s)			=		×
m Performance of services or membership or fundraising solicitations by related organization(s)	ions by related organization(s).				_	×
	ith related organization(s)			1 ₁	_	×
				10		×
		- - - - - -	-			
p Reimbursement paid to related organization(s) for expenses				1р	×	
				19		\bowtie
r Other transfer of cash or property to related organization(s)				11	_	×
				1s	"	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	for information on who must complete thi	s line, including cove	red relationships and transa	action thresho	lds.	
(e)		(4)	(9)	(P)		
Name of related organization		Transaction type (a-s)	Amount involved	Method of determining amount involved	eterminin nvolved	Ď.
(2)						
(3)						
(4)						
(5)						
(9)						
JSA			Sch	Schedule R (Form 990) 2019	7 (066 u	2019
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Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37. Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

Name, address, and EIN of entity (a) (b) (c) (b) (c) (d) (d) (d) (e) (f) (e) (f) (f) (h) (f) (h) (f) (h) (f) (h) (h	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	(k) Percentage ownership
			sections 512-514)	Yes No			Yes	ON	Yes No	
(1)										
(2)										
(3)										
(4)										
(5)										
(9)										
(7)										
(8)										
(6)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
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Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.