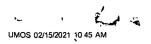
_			l						OMB No 1545-0047
	Form	990-T		Exempt Organization I (and proxy tax)	under s	section	6033(e))	2006	2019
		rtment of the Treasury		Go to www.irs gov/Form990T	for instruc	tions and	the latest informatio	n.	Open to Public Inspection for
	Interr	nal Revenue Service	501(c)(3) Organizations Only						
	_	Check box if address changed Exempt under section	Print	Name of organization (		SERVICES		ntification number st, see instructions)	
	f	408(e) 220(e)	or	Number, street, and room or suite no If a P O b	vov see instru	tions		39-10	47172
	h	408A 530(a)	Туре	2701 S CHASE AVE	70×, 000 mod 50				iness activity code
	r	529(a)	*	City or town, state or province, country, and ZI	P or foreign p	ostal code		(See instruction	ns)
	CE	Book value of all assets		MILWAUKEE		WI 53	207	53112	0
		it end of year	F G	oup exemption number (See instruc					
		<u> 16,770,987</u>			(c) corpor		501(c) trust	401(a) trust	
	H E			ation's unrelated trades or business		Des	onbe the only (or fir	st) unrelated tra-	de or business here
				ONS OF THE BUILDI					If only one, complete
				cribe the first in the blank space at t		the previo	ous sentence, comp	lete Parts I and	II, complete a
^				trade or business, then complete Pa rporation a subsidiary in an affiliated			vibordioni opotrollor	~~~~	No. Van V No.
K	<b>\</b> .	f "Yes," enter the name	e and id	nporation a subsidiary in an aniliated entifying number of the parent corpor	ration	a parent-	subsidiary controlled	group /	Yes X No
	1	<u> </u>						_	
		The books are in care of					Telep	none number 💺	<u>-414-389-6000</u>
	Pa	art   Unrelated	d Trad	or Business Income		_	(A) Income	(B) Expenses	(C) Net
	1a	Gross receipts or sale							
	b	Less returns and allo		c Balance	<b>&gt;</b>	1c			
	2	Cost of goods sold (S			•	2		K	ECEIV: )
	3	Gross profit Subtract			`,	3		122	S C C C C C C C C C C C C C C C C C C C
	4a	Capital gain net incor	•	•		4a		188: M/	4R 10 9 2021 18
	b c	Capital loss deduction		line 17) (attach Form 4797)		4b 4c		<u> </u>	\$
	5	Income (loss) from pa		1,7					
	J	statement)	210101011	and o corporation (attach		5			DEN UT
<b>N</b>	6	Rent income (Schedu	ıle C)			6			
2022	7	Unrelated debt-finance	ed incor	ne (Schedule E)		7 /	189,686	167,6	50 22,036
	8	Interest, annuities, royalti	es, and r	nts from controlled organization (Schedule	e F)	8			
23	9			1(c)(7), (9), or (17) organization (Schedule	: G)	<u></u>			
	10	Exploited exempt acti	ivity inco	ne (Schedule I)		/10			
FEB	11	Advertising income (S		-		11			
	12	Other income (See in				12	100 606	167.6	50 00 006
	13 	Total. Combine lines	3 through	n 12 : Taken Elsewhere (See Jr/si	truotiona	for limit	189,686	167, 6	
		connected	d with	the unrelated business incom	iruciions 1e )	IOI IIIIII	alions on dedu	ctions) (Dea	uctions must be un
というの	14			ctors, and trustees (Schedule K)					14
ξ	15	Salanes and wages							15
ก	16	Repairs and mainten	ance						16
	17	Bad debts						<u> </u>	17
	18	Interest (attach sched	iule) (se	e instructions)					18
	19	Taxes and licenses					1 1	<u> </u>	19
	20	Depreciation (attach I					20		<del>_</del>
	21		med on	Schedule A and elsewhere on return	n		21a		1b 0
	22 23	Depletion  Contributions to defer	red for	nensation plans				_	22
	23 24	Employee benefit pro		pensation pians					24
	24 25	Excess exempt exper	,	nedule I)					25
	26	Excess readership co							26
	27	Other deductions (att	•	•				_	27
	28	Total deductions. A						_	28
	29	/		come before net operating loss dedu	uction Sub	tract line	28 from line 13		29 22,036
	30	/		ss ansing in tax years beginning on					
		instructions)	-					<u> </u>	30
4	<u>31</u>	Unrelated business ta	xable in	come Subtract line 30 from line 29				;	22,036
	DAA	For Paperwork Redu	action A	ct Notice, see instructions.					Form <b>990-T</b> (2019)



Form	k990-T (2019) UNITED MIGRANT OPPORTUNITY SERVICES39-1047172	Page <b>2</b>
<u>LPa</u>	art-IIII Total Unrelated Business Taxable income	<del></del>
32	Total of unrelated business taxable income computed from all unrelated trades or businesses (see	
	instructions)	22,036
33	Amounts paid for disallowed fringes	33
34	Chantable contributions (see instructions for limitation rules)	34
35	Total unrelated business taxable income before pre-2018 NOLs and specific deductions. Subtract line	
	34 from the sum of lines 32 and 33	22,036
36	Deductions for net operating loss ansing in tax years beginning before January 1, 2018 (see	
	instruçtions)	<b>36</b> 22,036
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37 0
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38 1,000
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	
1	enter the smaller of zero or line 37	<u>  <b>49</b>                                       </u>
Į pa	art IV Tax Computation	
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0 21)	40
41	Trusts Taxable at Trust Rates. See instructions for tax computation Income tax on	
	the amount on line 39 from Tax rate schedule or Schedule D (Form 1041)	41
42	Proxy tax. See instructions	42
43	Alternative minimum tax (trusts only)	43
144 1	Tax on Noncompliant Facility Income See Instructions	44
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	45 0
	ITTV Tax and Payments	<del></del>
46a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	-
b	Other credits (see instructions) 45b	<b>-                                     </b>
С	General business credit Attach Form 3800 (see instructions)	<b>-                                     </b>
d	Credit for pnor year minimum tax (attach Form 8801 or 8827)	<del> - - </del>
е	Total credits. Add lines 46a through 46d	46e
47	Subtract line 46e from line 45 Other taxes	47
48	Check if from. Form 4255 Form 8611 Form 8697 Form 8866 Other (att sch.)	48
49	Total tax. Add lines 47 and 48 (see instructions)	49 0
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k) line 3	50
51a	Payments A 2018 overpayment credited to 2019	<b>-</b>   <b> </b>
b	2019 estimated tax payments 51b	4 11
С	Tax deposited with Form 8868	
d	Foreign organizations Tax paid or withheld at source (see instructions)	-
e	Backup withholding (see instructions)	-
1	Credit for small employer health insurance premiums (attach Form 8941)	-
g	Other credits, adjustments, and payments Form 2439	
	Form 4136 Other Total ▶ 5/1g	<del></del>
52	Total payments. Add lines 51a through 51g	52
53	Estimated tax penalty (see instructions) Check if Form 2220 is attached	53
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	54 0
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55
56 1 Da	Enter the amount of line 55 you want Credited to 2020 estimated tax   Refunded   Refunded   Activities and Other Information (see particular to the control of the control	<u>  1 2   5                               </u>
	art VII Statements Regarding Certain Activities and Other Information (see instructions	
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authoriover a financial account (bank, secunties, or other) in a foreign country? If "YES," the organization may have to fi	ty Yes No
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts If "YES," enter the name of the foreign count	try ————————————————————————————————————
	here ►	X
58	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a for	eign trust? X
59	If "YES," see instructions for other forms the organization may have to file  Enter the amount of tax-exempt interest received or accrued during the tax year	
	Linder genalties of penury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge	and belief, it S
Sig		May the IRS discuss this return with the preparer shown below (see instructions)?
Her	TREE IBBN 17 CEC	
	Signature of officer Date Title	
	Preparer's signature Date	Check
Paid		
•		's EIN ► 39-1648207
use	Only 6300 76TH ST STE 200	262 657 7716
	Firm's address ► KENOSHA, WI 53142-4018 Phor	ne no 262-657-7716
		Form <b>990-T</b> (2019)



	990-T (2019) UNITED I				<u> 39-1047172                                   </u>		Pa	age 3
Sch	edule A - Cost of Goods	s Sold. Enter me				<del>                                      </del>		
1	Inventory at beginning of year	1		Inventory at end of	•	6		
2	Purchases	2	7	The state of the s				
3	Cost of labor	3		line 6 from line 5. Enter here and				
4a	Additional sec 263A costs			ın Part I, line 2		7		
	(attach schedule)	_4a	8	Do the rules of secti	on 263A (with respect to		Yes	No
b	Other costs (attach schedule)	4b		property produced of	r acquired for resale) app	ly		
5	Total. Add lines 1 through 4b	5		to the organization?				
Sch	edule C - Rent Income	(From Real Prop	erty and Po	ersonal Property	Leased With Real	Property)		
	ee instructions)	,	•	•				
	cription of property	•						
(1)	N/A							
(2)								
(3)					·			
(4)					<u> </u>			
<u>-7</u>		2 Rent received or acc	ued					
	(a) From personal property (if the percent			d compact amounts (if the	3(a) Doductions	directly connecte	d with the income	
	for personal property is more than 10%	-		d personal property (if the or personal property exceeds		(a) and 2(b) (att		
	more than 50%)	,	-	based on profit or income)		,, (	<b>,</b>	
(1)								
(1)								
(2)						<del></del> .	<del>-</del>	
(3)				<del></del>				
(4) Takai		Total		<del></del>				
Total					(b) Total deduction			
	otal income. Add totals of colur and on page 1, Part I, line 6, co		ter	_	Enter here and on p Part I, line 6, colum			
	edule E - Unrelated Del		ma (coo inci	ructions)	Tarti, inic o, colum	II (U) P		
<u>JUII</u>	edule L = Officialed Del	ot-i ilianiceu ilicu	line (see insi	iructions)				
			2 Gross	income from or	3 Deductions directly of CTMT 1 debt-fine		2	
	<ol> <li>Description of debt-financed</li> </ol>	f property	allocable to debt-financed		DIM I		STMT	
				property	(a) Straight line depredation (attach schedule)		(b) Other deductions (attach schedule)	
	ODO DENERT DOOD	NDD MY	<u></u>	1.66.604		<del>-   · · · ·</del>		100
(1)		ERTY		166,624	23	<del>-</del> +		<u> 103</u>
(2)		ERTY		99,753	44,15			<u> 796</u>
(3)	DVR RENTAL PROP	ERTY	_	146,785	50,51		74,3	<u> 378</u>
(4)								
	4 Amount of average 5 acquisition debt on or	Average adjusted basis of or allocable to	l	Column	7 Gross income reportable		ocable deductions	
	allocable to debt-financed	debt-financed property	l	4 divided column 5	(column 2 x column 6)		6 x total of column 3(a) and 3(b))	ns
	property (attach schedule)	(attach schedule)		Colonii 5			AB) BIO 3(D))	
(1)	59,764	<u>206,783</u>		28.90%	48,15		29,3	<u> 373</u>
(2)	298,376	552 <b>,</b> 678		53.99%	53 <b>,</b> 85	7	63,6	<u> 680</u>
(3)	202,374	338,819		59.73%	87 <b>,</b> 67	5	74,5	<u> 597</u>
(4)				%				
SE	CE STATEMENT 3 SEE	STATEMENT 4			Enter here and on page Part I, line 7, column (A		ere and on pag line 7, column	
Tota	ls.			<b>▶</b>	189,68	6	167,6	550
	dividends-received deductio	ns included in column	ı 8	, ,	<b>_</b>			
			· -				Form <b>990-T</b> (	(2019)
								,

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Form 990-1 (2019) UNITED										Page 4	
Schedule F - Interest, And	nuities, Roy	<u>alties, and F</u>						ons (see in	structio	ons)	
	!		Exemp	ot Controlled	d Orga	nızatı	ons				
Name of controlled organization	, ide	2 Employer (dentification number		related income e instructions)	Total of specified payments made		ade	5 Part of column 4 that included in the controllin organization's gross inco-		6 Deductions directly connected with income in column 5	
NI / 7											
(1) N/A			-								
(2)		<del></del>		_							
(3)											
(4)											
Nonexempt Controlled Organiz	ations										
7 Taxable Income		Net unrelated income oss) (see instructions		9 Total of specific payments made		inc	duded in th	umn 9 that is e controlling gross income		Deductions directly nected with income in column 10	
(1)											
(2)											
(3)		•									
(4)											
Totals	,		<del>- '\                                   </del>		•	Ent		s 5 and 10 d on page 1, column (A)	Ente	d columns 6 and 11 er here and on page 1, 1 I, line 8, column (B)	
Schedule G - Investment	Income of a	Section 50	1(c)(7).	(9), or (17	) Orga	niza	tion (s	ee instruction	ons)		
1 Description of income		2 Amount of		3 Ded directly o	luctions connected schedule)	ed 4 Set-asides				5 Total deductions and set-asides (col 3 plus col 4)	
(1) N/A		<del>-</del>				-				<u> </u>	
· ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·- ·-		<del> </del>		<u> </u>				·	-		
(2)				<del> </del>					-		
(3)				<b>_</b>							
(4)		ļ						1			
Totals	<b>.</b>	Enter here and o Part I, line 9, co	olumn (A)						Pa	ter here and on page 1, art I, line 9, column (B)	
Schedule I - Exploited Ex	empt Activit	y Income, C	ther Th	nan Adver	tising	Inco	ome (se	ee instructio	ns)		
1 Description of exploited activity	2 Gross unrelated business incom from trade or business	3 Exper directl e connected productio unrelate business ii	y iwnth on of ed	4. Net income (If from unrelated to or business (coling a minus column if a gain, composits 5 through	rade umn 3) ute	from a	iss income activity that unrelated iss income	6 Exp attnbut colur	able to	7 Excess exempt expenses (column 6 munus column 5, but not more than column 4)	
(1) N/A											
(2)					<del>-  </del>					<del>                                     </del>	
			<del>-  </del>		+			-		<del>  -</del>	
(3)	<del> </del>	+	+							+	
(4) Totals ▶	Enter here and of page 1, Part I, line 10, col (A)	page 1, P	Part I,		<b>I</b>					Enter here and on page 1, Part II, line 25	
Schedule J - Advertising	Income (see	instructions)				•					
Part     Income From			a Con	solidated	Basis					<del></del>	
1 Name of penodical	2 Gross advertising income	3 Dire advertising	a	4. Advertising gain or (loss) (of 2 minus col. 3) a gain, computicols 5 through	l col if te	5 Cr	rculation come	6 Read		7 Excess readership costs (column 6 minus column 5, but not more than column 4)	
(1) N/A						-					
(2)									•	┪ !	
		<del>-  </del>			$\vdash$			<del> </del>			
(3)		+	——[		$\vdash$			+		┥	
(4)		<del></del>									
Totals (carry to Part II, line (5))					-						

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

Form 990-T (2019) UNITED MIGRANT OPPORTUNITY SERVICES 9-1047172 Page 5
Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns

	a line-by-line ba	, , , , , , , , , , , , , , , , , , ,		i i			
1 Name of penodical	2 Gross advertising income	3 D advertisi	rect ng costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Read	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
1) N/A							
2)			_				
3)							 
4)							
Totals from Part I							
	Enter here and on page 1, Part I, line 11, col (A)		re and on , Part I, col (B)				Enter here and on page 1, Part II line 26
Totals, Part II (lines 1-5) ► Schedule K – Compensar	ion of Officers.	Directo	rs. and	Trustees (see i	nstructions)		 
1 Nar				2 Title		3 Percent of time devoted to business	ensation attributable to trelated business
1) N/A						%	
2)		•				%	
3)						%	
4)						%	

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UMOS UNITED MIGRANT OPPORTUNITY SERVICES

39-1047172

**Federal Statements** 

FYE: 6/30/2020

#### Statement 1 - Form 990-T, Schedule E, Column 3a - Straight Line Depreciation

Description	Deduction
CEC RENTAL PROPERTY	224
	234
TOTAL	234
DOT RENTAL PROPERTY	
	44,152
TOTAL	44,152
DVR RENTAL PROPERTY	
	50,512
TOTAL	50,512

#### Statement 2 - Form 990-T, Schedule E, Column 3b - Other Deductions

Description	Deduction
CEC RENTAL PROPERTY INTEREST INSURANCE ADMIN CAM PURCHASED SERVICES RENTAL LEASING FEE CEC WRITEOFF	1,383 10,611 13,868 41,585 3,526 7,662 22,768 101,403
DOT RENTAL PROPERTY INTEREST INSURANCE SUPPLIES UTILITIES ADMIN BENEFITS BLDG OCCUPANCY CAM COMMON OFFICE INFO TECH-DIRECT PURCHASED SERVICES SALARIES TOTAL	6,907 5,246 696 12,271 10,723 3,134 13 20,634 1 2 5,208 8,961 73,796
DVR RENTAL PROPERTY INTEREST INSURANCE SUPPLIES TAXES UTILITIES ADMIN BENEFITS CAM	4,684 5,723 352 10,041 6,577 11,355 2,791 22,349

UMOS UNITED MIGRANT OPPORTUNITY SERVICES
39-1047172 Federal Statements

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FYE 6/30/2020

# Statement 2 - Form 990-T, Schedule E, Column 3b - Other Deductions (continued)

Description	Deduction
INFO TECH-DIRECT	\$ 1,004
PURCHASED SERVICES	1,586
SALARIES	7,903
BUILDING/OCCUPANCY	13
TOTAL	74,378

### Statement 3 - Form 990-T, Schedule E, Column 4 - Average Acquisition Debt

	Deduction
CEC RENTAL PROPERTY SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD	717,168 12
AVERAGE ACQUISITION DEBT	59,764
DOT RENTAL PROPERTY SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD AVERAGE ACQUISITION DEBT	3,580,512 12 298,376
DVR RENTAL PROPERTY SUM OF DEBT OUTSTANDING AT FIRST OF EACH MONTH DIVIDED BY TOTAL NUMBER OF MONTHS PROPERTY HELD AVERAGE ACQUISITION DEBT	2,428,488 12 202,374

# Statement 4 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis

Description	Deduction
CEC RENTAL PROPERTY ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	206,899 206,666
DIVIDED BY 2	413,565
AVERAGE ADJUSTED BASIS	206,783
DOT RENTAL PROPERTY ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	573,132 532,223
DIVIDED BY 2	1,105,355
AVERAGE ADJUSTED BASIS	552,678
DVR RENTAL PROPERTY ADJUSTED BASIS ON FIRST DAY PROPERTY WAS HELD ADJUSTED BASIS ON LAST DAY PROPERTY WAS HELD	352,379 325,258
DIVIDED BY 2	677,637

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UMOS UNITED MIGRANT OPPORTUNITY SERVICES

**Federal Statements** 

FYE: 6/30/2020

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Statement 4 - Form 990-T, Schedule E, Column 5 - Average Adjusted Basis (continued)

Description Deduction

AVERAGE ADJUSTED BASIS \$ 338,819

