•					•			(110		
		000 T	l ev	kempt Organi	zation Rusi	noce In	come Tay P	912	1 0	MB No. 1545-0047
ı	orm	990-T						sturii		
	6	•		•	xy tax unde		. ,,		1 5	200 19
	·			ndar year 2019 or other to Go to www.irs.gov/i	ax year beginning	uctions and	, and ending	·		
		tment of the Treasury		ot enter SSN numbers on						to Public Inspection for)(3) Organizations Only
-	<u> </u>	Check box if		Name of organization (nd see instructions)	D Emp	loyer ide	ntification number
i	` <u> </u>	address changed xempt under section		JusticePoint, Inc.		mo unangea a	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Emp	loyees' tru:	st, see instructions)
		(501 (C)(3)		Number, street, and roor	n or suite no If a P O, b	ox, see instruc	ctions		45-3	611369
		408(e) 220(e)	Print	205 W. Highland Av		,			lated bu	siness activity code
	Ē	408A 530(a)	Type	City or town	Sta	te	ZIP code	(See	instruction	s)
	Ē	529(a)]	Milwaukee	WI		53203			
		_		Foreign country name	Foreign	province/state	/county Foreign postal co	de		
-			F 0		- (0 !	· · ·				
•		ook value of all assets at		up exemption numbe			501(c) trust	401(a)	truct	Other trust
-		Enter the number of t	<u></u>	ck organization type		·	<u> </u>	<u> </u>		first) unrelated
		trade or business her	e 🕨			. If only o	ne, complete Parts I	I-V. If more	than or	ne, describe the
		first in the blank space	e at the e		entence, complete	Parts I and	d II, complete a Sch	edule M for	each a	dditional
_		trade or business, the								
1		During the tax year, wa					subsidiary controlled	group?	. ▶	Yes X Nó
_		If "Yes," enter the name			parent corporation.	<u> </u>	Talanhana numba	/44	4) 774 (0200
i		The books are in care t I Unrelated T					Telephone numbe	(B) Expe	4) 774-((C) Net
2	1 a			Dusiness Incom	<u>e </u>		(A) IIICOIIIC	(B) Expe		(C) NEX
	b				c Balance I	▶ 1c	0	T 52		
	2	Cost of goods sold		e A, line 7)		2		THE THE		
	3	Gross profit. Subtra	ct line 2 f	from line 1c .		3	0	3847		(
	4 a			ach Schedule D) .				7 7 7		
	þ	- ' '		Part II, line 17) (attac	-	. 4b			100 mm	
	_ c					4c			· PUPON MANA	
	5	(attach statement)	a partner	ship or an S corpora		5				
	6	•	dule C)			6			16.0 16.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.00 19.	· ·
	7	•	-	ome (Schedule E)		7				
3	8			ents from a controlled or		F) 8				
•	9	Investment income of a	section 50)1(c)(7), (9), or (17) organ	nization (Schedule G)	9_				
3	10			come (Schedule I) .		10				ļ <u></u> .
	11	_	-	le J)		11	-	. ACCOUNTS OF THE CONTRACTOR	ALLENSON, COMP.	
	12			ons; attach schedule)		12		adjuntation of the second	0	ļ
	13 Par	Total: Combine line	Not Ta	gh 12 ken Elsewhere (S			ons on deductions			
7	ΓEI			vith the unrelated b			ons on deadcaons	s., (Deduc	10113 11	iusi be
-	14			rectors, and trustees			-0		14	
	15	Salaries and wages		rectors, and trustees		K	ECEIVED		15	
	16	Repairs and mainte				က္က		ပ္ကု	16	
	17	Bad debts		<i>.</i>		N. 8056	OV 23-2020 - 3	۲)	17	
	18			ee instructions)				<u>ن</u>	18	
	19	Taxes and licenses	· ·			00	SDEN LEDTI	=	19	
	20 21			562) n Schedule A and els					21b	
	22								22	
	23			mpensation plans .					23	
	24	Employee benefit p							24	
	25			schedule I)					25	
	26			hedule J)					26	4.
	27			nedule)					27	ļ ,
	28 29			14 through 27 income before net op					28	
	29 30	Deduction for net or	iaxavie i Deratina l	income before net op loss arising in tax yea	eraung ioss deduc ers beginning on o	r after Janu	iary 1, 2018 (see		123	
•	"/								30	
į	31	Unrelated business	taxable i	ncome. Subtract line	30 from line 29 .	<u> </u>	<u> </u>	<u> </u>	31	(
_		aperwork Reduction							F	orm 990-T (2019
	HTA							Ψ		WD
								1		

	90-T (20 1 9)	JusticePoint, Inc	45-3611369	Page 2
Part	J# (7	Total Unrelated Business Taxable Income		
32	Total of	unrelated business taxable income computed from all unrelated trades or businesses (see		
6	instructi		32	0
33		s paid for disallowed fringes	33	0
34		le contributions (see instructions for limitation rules)	34	<u>~</u>
35		related business taxable income before pre-2018 NOLs and specific deduction. Subtract	<u> </u>	
•••		rom the sum of lines 32 and 33	35	0
36		on for net operating loss arising in tax years beginning before January 1, 2018 (see	55	
•	instruction		36	
37		unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	0
38		deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	
39		ed business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,		
33		e smaller of zero or line 37	. 39	0
Part		Tax Computation		
				
40		ations Taxable as Corporations. Multiply line 39 by 21% (0 21)	▶ 40	0
41		Taxable at Trust Rates. See instructions for tax computation. Income tax on the		
		on line 39 from Tax rate schedule or Schedule D (Form 1041)	► 41	
42	-	x. See instructions	▶ 42	
43		ve minimum tax (trusts only)	43	
44		Noncompliant Facility Income. See instructions	44	
45		dd lines 42, 43, and 44 to line 40 or 41, whichever applies	45	0
		ax and Payments Part III	I	
	1 11-1	tax credit (corporations attach Form 1118, trusts attach Form 1116)		
		edits (see instructions) 46b		
C	General	business credit Attach Form 3800 (see instructions) 46c		
d	Credit fo	r prior year minimum tax (attach Form 8801 or 8827)		•
е	Total cr	edits. Add lines 46a through 46d	46e	0
47	Subtract	line 46e from line 45	47	0
48	Other tax	es Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach sched	ule) 48	
49	Total ta	x. Add lines 47 and 48 (see instructions)	49	0
50	2019 ne	t 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	• •
51 a	Paymen	ts A 2018 overpayment credited to 2019	34	
b	2019 es	timated tax payments 4 51b 1	0,548	
С	Tax dep	osited with Form 8868 51c	يُوم ا	
d	Foreign	organizations Tax paid or withheld at source (see instructions) 51d		
е		withholding (see instructions) 51e		
f		r small employer health insurance premiums (attach Form 8941) 51f		
g		edits, adjustments, and payments Form 2439	3,300	
	_	n 4136 Other Total ▶ 51g	ا ا	1 300 100
E2		yments. Add lines 51a through 51g	<u> </u>	10 549
52 53		ed tax penalty (see instructions) Check if Form 2220 is attached	☐ 32 53	10,546
				0
54 55		. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	9 54 55	10,548
55 56		There is line of is larger than the total of the 40, 00, and 00, effect amount overpaid	· . · · · · · · · · · · · · · · · · · ·	10,548
56			, ,	10,346
Part		atements Regarding Certain Activities and Other Information (see instructions		1 1
57		me during the 2019 calendar year, did the organization have an interest in or a signature or		
		nancial account (bank, securities, or other) in a foreign country? If "Yes," the organization ma		
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts If "Yes," enter the name of the foreign Early and Financial Accounts If "Yes," enter the name of the foreign Early and Financial Accounts If "Yes," enter the name of the foreign Early and Financial Early Early and Financial Early and Financial Early and Financial Early	oreign countr	
	here 🕨			X
58	During th	e tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to,	a foreign trust	
	If "Yes,"	see instructions for other forms the organization may have to file		
59		e amount of tax-exempt interest received or accrued during the tax year 🕨 \$		
		r penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of	ny knowledge and	belief, it is true, correct,
Sign	and	confiders Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge	Marrisha	IDC diament this entire with
Here			IRS discuss this return with parer shown below (see	
11016		nature of officer Date Title	instructi	
		Print/Type preparer's name Preparer's signature Date	<u> </u>	, PTIN
Paid		1/6.7	Check	."
Prep		Christine Daws 10/29/2020	self-employed	1. 017 00000
-	Only	Firm's name O'Leary & Anick		<u>39-1977004</u>
USE	Unity	Firm's address 11933 W Burleigh Street, Ste 100, Wauwatosa, WI 53222	Phone no	414-774-0300

Form 990-T (2019) J	usticePoint, Inc.				45-	-3611369	Page 3		
Schedule A—Cost of Goo	ods Sold. Enter metho	od of inventory valua	ation	>			•		
1 Inventory at beginning o		6			d of year	6			
2 Purchases	2	7							
3 Cost of labor					5. Enter here				
4 a Additional section 263A	· · · · · · · · · · · · · · · · · · ·				ne 2	7	0		
(attach schedule)	i i	8		- •	section 263A (wi		Yes No		
b Other costs (attach sche					ced or acquired for	•	765 140		
5 Total. Add lines 1 through	·····	0			ganization?	•			
Schedule C—Rent Incom									
(see instructions)	e (i ioiii Neai Fiopei	ty and reisonal ri	opei	ty Lease	u Willi Neai Pi	operty			
Description of property					<u>-</u>				
					-				
(1)									
(2)	<u>.</u>				***				
(3)							•		
(4)					1 -				
	2. Rent received or accr	neq							
(a) From personal property (if the personal property is more that		b) From real and personal properties of materials			3(a) Deductions directly connected with the income				
more than 50%)			ge of rent for personal property exceeds f the rent is based on profit or income)			in columns 2(a) and 2(b) (attach schedule)			
1)						 			
(2)	· · · · · · · · · · · · · · · · · · ·	"			· · · · ·		-		
(3)									
(4)									
Total	0 Total			0					
					(b) Total deduc	tions.			
(c) Total income. Add totals of co				_	Enter here and o		_		
here and on page 1, Part I, line 6,				0	Part I, line 6, col	umn (B)	0		
Schedule E—Unrelated D	ebt-Financed Incom	e (see instructions)							
		2. Gross income from		3. Deductions directly connected with or allocable to debt-financed property					
1. Description of deb	property	allocable to debt-financed property		(a) Straight line depreciation (attach schedule)		leductions chedule)			
(1)							-		
(2)									
3)									
(4)									
4. Amount of average	5. Average adjusted basi						_		
acquisition debt on or	of or allocable to	6. Column 4 divided		7. Gross in	ncome reportable		deductions		
allocable to debt-financed	allocable to debt-financed debt-financed property			(column	2 × column 6)	(column 6 × total of columns 3(a) and 3(b))			
property (attach schedule)	= (attach schedule)	by column 5	=						
1)			%		0		0		
2)			%		0		0		
3)			%		0		0		
(4)			%		0		0		
				Enter here	and on page 1,	Enter here ar	nd on page 1.		
			- 1						
			J	Part I. line	7. column (A)	Part I. line 7.	column (B).		
Totals				Part I, line	7, column (A)	Part I, line 7,	column (B).		

SCHEU	ule F—Interest, Annui	ePoint, Inc. ties, Royalties,	and Ren	its From (Controlled Ora:	nizations (se	e instruc	tions)	Page 4	
					Organizations	,				
()	Name of controlled organization	2. Employer identification number	3. Net unrelated income (loss) (see instructions)		4. Total of specific	included in the	5. Part of column 4 that is included in the controlling organization's gross incom		g connected with income	
1)					-					
2)		1	<u> </u>							
3)										
1)	-									
lonexer	mpt Controlled Organization	ns								
7. Taxable Income			8. Net unrelated income (loss) (see instructions)		9. Total of specified payments made		10. Part of column 9 that is included in the controlling organization's gross income		connected with income in	
1)			-	<u> </u>						
2)										
3)					-					
1)										
						Add columns Enter here and Part I, line 8, o	on page 1	l, Enter I	columns 6 and 11 here and on page 1, , line 8, column (B)	
otals						.		0	c	
	ule G—Investment Inc	ome of a Section	n 501/c	1/7) (9) 0	r (17) Organiza	tion (see instru		01		
5011041		Joine or a ocoun	<u> </u>		Deductions	I		5 . To	otal deductions	
1. Description of income		2. Amount of i	income directly connected (attach schedule)			4. Set-aside (attach schedu	(attach schedule)		and set-asides (col 3 plus col 4)	
1}							-			
2)				<u> </u>						
3) 4)				-			- +			
•)		Enter here and o	n nage 1	1186 A	11 . 1990 / S. E. 1990 / L. 19		ا £‱. ا	Enter her	re and on page 1,	
otals .		Part I, line 9, col	umn (A). 0	2 - 4 - 200 - 0020 - 0000					e 9, column (B)	
<u>}chedı</u>	ule I—Exploited Exem	pt Activity Inco	me, Oth	<u>er Than A</u>	dvertising Inco	me (see instruc	tions)	_		
Description of exploited activity		2. Gross unrelated business incon from trade or business	ne conn prod ur	expenses irrectly ected with fuction of irrelated ess income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	attribut	penses table to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)	
		-			0		 		0	
 1)					0				0	
1)		1								
2)			 - - - 		0				0	
					0				0	

4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7 7. Excess readership costs (column 6 minus column 5, but not more than column 4) 2. Gross advertising income 3. Direct 5. Circulation 6. Readership 1. Name of periodical advertising costs income costs (1) (2) (3) (4) 0 Totals (carry to Part II, line (5))