990

Return of Organization Exempt From Income Tax

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

2020

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

<u> </u>	For the	2020 calendar y	ear, or tax year begin	ning		, 2020, a	nd endin	g		, 20	
В	Check if a _l	pplicable:	C Name of organization JU	STICE VENTURES INT	ERNATIONA	<u> </u>			D Empl	oyer identificati	on number
\Box ,	Address cl	hange	Doing business as							20-4214	306
_	Name cha	_		D. box if mail is not delivered to street	address)		Room/suite		E Telep	hone number	
=	nitial retur	•	14500 NEW HAME		444.000,				_ ,,,,,,	(202) 45	5-0812
=					at eads				6 Cross	s receipts	<u> </u>
1071		n/terminated		ince, country, and ZIP or foreign posts	ai code					•	400 661
<u> </u>	Amended I		SILVER SPRING,	·				*14 5	\$,492,661
	Application	n pending	F Name and address of pri	ncipal officer:						_	Yes X No
		5								-	Yes No
	Tax-exemp	·) (insert no.) 4947(a)(1	l) or 527			If "No,"	attach a lis	st. See instructior	18
	Nebsite:		USTICEVENTURES.	ORG				H(c) Group e	xemption	number 🕨	
		ganization: X Con	poration Trust Ass	ociation Other ►	LY	ear of formati	ion: 2007	7 <u>Ms</u>	tate of leg	gal domicile: 🛚 🕻	4D
Pa	rt I	Summary									
	1	Briefly describe	the organization's missi	on or most significant activitie	es: JVI w	orks on	the f	ront 1:	ines	in poor	and
		oppressed o	communities whe	re the battle for	justice ra	ages da	ily, f	reeing	the ·	oppresse	d from
Governance		slavery and	d other extreme	injustice.							
ā											
۷e	2	Check this box ▶	If the organization	discontinued its operations o	r disposed of	more than :	25% of its	s net asset	s.		
Ĝ				rning body (Part VI, line 1a)					1 1		8
			-	s of the governing body (Part							8
Activities &		•	=	calendar year 2020 (Part V,	-	<i></i> .					3
ΞΞ			volunteers (estimate if i		•						40
Aci			•	• •							***************************************
	1			Part VIII, column (C), line 12					1		0
	a	Net unrelated bu	isiness taxable income	from Form 990-T, Part I, line	11	• • • • •			7b		<u> </u>
								Prior Year			nt Year
				1h)				1,183		1	,473,180
Revenue		_		2g)					12		3,878
ě	10	Investment incon	ne (Part VIII, column (A), lines 3, 4, and 7d)			·		8		236
8	11	Other revenue (F	Part VIII, column (A), lin	es 5, 6d, 8c, 9c, 10c, and 11e	e)		٠ ــــــــــــــــــــــــــــــــــــ		(62)		759
	12	Total revenue - a	ndd lines 8 through 11 (nust equal Part VIII, column ((A), line 12)			1,182	,981	1	,478,053
	13	Grants and simila	ar amounts paid (Part I	X, column (A), lines 1-3) .				183	,170		255,106
	14	Benefits paid to	or for members (Part I)	(, column (A), line 4)							0_
	15	Salaries, other of	ompensation, employee	benefits (Part IX, column (A)), lines 5-10)			158	,795		215,746
S				olumn (A), line 11e)							0
Expenses			expenses (Part IX, col	, ,,	1		1995010000000		60 KN 86 K		
Ř				es 11a-11d, 11f-24e)				851	,536		823,786
ш	1	•	•	equal Part IX, column (A), line				1,193		1	,294,638
	1	•	·	8 from line 12	-		· —		,520)		183,415
		Nevenue less ex	penses. Subtract file	O HOITIBIE 12	<u> </u>		Daning				
Net Assets or Fund Balances	20	Total assets (Day						ning of Curre		End o	
Sala	20	•	•				•		,551		595,168
A P	21	-	•				•		,148		123,799
			•	ine 21 from line 20			4	264	,403		471,369
Pai		Signature I						تقدما لبصد معاده	af Isla		
				n, including accompanying schedules cer) is based on all information of whic			or ray knows	eoge and bea	ei, ii is		
<u></u>	_		PANKRATZ								
Sigi	1.	Signature of o	officer						Da	te	
Her	e	<u>JEFFREY</u>	PANKRATZ, PRE	SIDENT AND CEO							
		Type or print r	name and title								
		Print/Type preparer	r's name	Preparer's signature		ate		Check	if	PTIN	_
Paid	Ė							self-emp	oloyed		
Prei	parer	Firm's name					Fin	m's ElN ▶			
	Only			H44 1			<u> </u>	one no.			
	y	1					[]				
				own above? (see instructions						Y	es No

Form	990 (2020) JUSTICE VENTURES INTERNATIONAL	20-4214306	Page 2
	rt III 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:		
	JVI works on the front lines in poor and oppressed communities where the bat	tle for jus	tice rage
	daily, freeing the oppressed from slavery and other extreme injustice.		
2	Did the organization undertake any significant program services during the year which were not listed on the	П.,	
	prior Form 990 or 990-EZ?	∐ Yes	X No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	п.,	
	services?	∐ Yes	XI NO
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measur	ed by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	Juleis,	
	the total expenses, and revenue, if any, for each program service reported.		
4-	/O-d- \/ \/ \/ \/ \/ \/ \/ \/ \/ \/ \/ \/ \/	e .	4,873)
4a	(Code:) (Expenses \$1,051,091 including grants of \$255,106) (Revenue ESTABLISH JUSTICE RESOURCE CENTERES AND GIVE GRANTS AND SUPPORT TO GRASSROOT		
	WORKING TO EMPOWER URBAN SLUM DWELLERS, THE POOR AND MARGINALIZED. GIVE GRAN		
	GRASSROOTS ORGANIZATIONS WORKING TO ELIMINATE HUMAN TRAFFICKING AND BONDED S		
	GRASSROOIS ORGANIZATIONS WORKING TO PROVIDE LEGAL AID TO THE MAGINALIZED AND V		
	GRANTS TO ORGANIZATION WORKING TO PROVIDE DEGREE AND TO THE MAGINALIZED AND	OBITEIRIE DE L	
			*
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
	(25337		
	·		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4d	Other program services (Describe on Schedule O.)	,	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 1,051,091		

20-4214306 JUSTICE VENTURES INTERNATIONAL Checklist of Required Schedules Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 1 Х x 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 X Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Х 5 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 X Did the organization receive or hold a conservation easement, including easements to preserve open space, Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or Х Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 Х If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," Х b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more Х c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more 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 11d X Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Х 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 Х Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a 12a Х 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 Х 13 Х 14a Х 14a 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 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or 15 15 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 16 Х 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 Х 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 19 Х Х

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

21

Pa	rt 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		Х
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			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part.I	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?			
	If "Yes," complete Schedule L, Part I	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%			
	controlled entity or family member or 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	24		
	persons? If "Yes," complete Schedule L, Part III	27	gheiride)	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
	IV instructions, for applicable filing thresholds, conditions, and exceptions):	CAS		Mark
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	00-	.,	
	"Yes," complete Schedule L, Part IV	28a 28b	Х	х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		^
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	28c		х
	"Yes," complete Schedule L, Part IV	29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	23		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		Х
24	conservation contributions? If "Yes," complete Schedule M	31		X
31		J1		
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			
33	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,			
-	or IV, and Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	х	l
Par	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	· · ·		\Box
	4 1	1151.7470501	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and		863355	
	reportable gaming (gambling) winnings to prize winners?	1c		X

						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		3			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?				2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					State	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O				3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over						
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				4a		Х
b	If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FE	BAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?				5c .		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the						
	organization solicit any contributions that were not tax deductible as charitable contributions?				6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or						
	gifts were not tax deductible?				6b	verilari esteri	
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				188	100 M	
	and services provided to the payor?				7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was						
	required to file Form 8282?				7c	3003 1000 0	Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			HERMAN	990000	BAS W
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? .				7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				7 f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as				7g		Х
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			• • •	7h	1000000000	X
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? $\dots \dots \dots$		• • •	• • •	8	1/3/4/17/3/2/	199,000,000
9	Sponsoring organizations maintaining donor advised funds.					neally.	50000000
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	450686	50876600
10	Section 501(c)(7) organizations. Enter:	امدا				¥8.600 N. 188	60.950018 5405560
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	Section 501(c)(12) organizations. Enter:	امدا					
a	Gross income from members or shareholders	11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources	11b					
	against amounts due or received from them.)				12a	75645450	Para Septiment
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	12b	• • •		120	dedetal	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12.0					
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?				13a	NUN Nagara I	W/W88/8.
а	Note: See the instructions for additional information the organization must report on Schedule O.				100	75. V. S.	#3455446 \$455446
h	Enter the amount of reserves the organization is required to maintain by the states in which						
b	the organization is licensed to issue qualified health plans	13b					
С	Enter the amount of reserves on hand	13c					
14a	Did the organization receive any payments for indoor tanning services during the tax year?				14a	-,,,	х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O				14b		<u> </u>
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		х
	If "Yes," see instructions and file Form 4720, Schedule N.						3530
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?.				16		х
	If the digalization an education at institution subject to the decider received and an institution at the second section at the	•	-				

20-4214306 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			
		100000000	Yes	No
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			
	committee, explain on Schedule O.			THE STATE OF
b	Enter the number of voting members included in line 1a, above, who are independent			\$20,000
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		4500	Estimation (
	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, or trustees, or key employees to a management company or other person?	3		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<u> x</u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u> </u>
6	Did the organization have members or stockholders?	6		<u> </u>
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,	1		
	stockholders, or persons other than the governing body?	7b	PERMANEN	Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:	3555i	1988A	49.64,18
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
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 Q	9		<u> </u>
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
		100	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	11a		x
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	ı id		8 2 2 2
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	X	TESTA
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12b	×	<u> </u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120		\vdash
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	x	
40	describe in Schedule O how this was done	13	<u>x</u>	
13	Did the organization have a written whistleblower policy?	14	X	
14 	Did the process for determining compensation of the following persons include a review and approval by		.000000	
15	Independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a	X	green i
a b	Other officers or key employees of the organization	15b		х
b	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			
10a	with a taxable entity during the year?	16a	2.11.11	х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
D	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		
Sec	tion 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 (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,			
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	JEFFREY PANKRATZ (202) 455-0812, 14500 NEW HAMPSHIRE AVENUE, SILVER SPRING, MD 20904			

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

Check if Schedule O contains a response or note to any line in this Part VII

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.

Check this box if neither the organization nor any relation	ted organizat	ion cor	mpen	ısate	ed a	ny cum	ent	officer, director, or	trustee.	
				(C)		ı			
(A)	(B)				sition		1	(D)	(E)	(F)
Name and title	Average					an one both an		Reportable	Reportable	Estimated amount
Maile and mic	hours					trustee)		compensation	compensation	of other
	per week							from the	from related organizations	compensation from the
	(list any	유	ns.	g	Xe.	왕	Forme	organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	hours for related	tireo		Officer	/ em	hesi	mer	,		related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	e con				
	below	stec	trust		e	pen				
	dotted line)		8	1	1	Highest compensated employee				
						ű				
(1) JEFFREY PANKRATZ	40.00									
PRESIDENT AND CEO	5.00			X				80,914	25,687	0_
(2) ASHA MATHEW	1.00						- 1			
DIRECTOR		Х					_	0	0	0
(3) DAVID MCDOWELL	1.00									
DIRECTOR		X						00	00	0
(4) ALICIA MCDOWELL										
DIRECTOR		х						0	0	0
(5) KYU HWANG	1.00									
DIRECTOR		Х						0	0	00
(6) NANCY SUNG	2.00									_
VICE CHAIR				Х			_	0	0	00
(7) THOMAS KIM	2.00									
BOARD CHAIR				Х				0	0	0
(8) ROBERT ANDERSON	2.00									
TREASURER				Х				0	0	0
(9) MARK BUCKINGHAM	2.00								!	_
SECRETARY				X			_	0	0	0
<u>(10)</u>										
(11)										
Y9							1			
(12)										
(13)										
(14)				-	\vdash		\dashv			
Y2/										

Part VII Section A. Officers, Directors, Tra	ustees, Key Emp	ioyee	s, an	d H	ighe	est Co	ompe	ensated Employe	es (continued)	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(do n	of che unles er and	Pos eck me s per	C) ition ore th	an one a both a both a both a employee	n)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizatio
5)			***************************************							
6)										
7)										
3)										
9)										
)										
)										
)										
)						-				
)										
)										
1b Subtotal	Section A	• • •					•			
d Total (add lines 1b and 1c)								80,914	25,687	
2 Total number of individuals (including but no reportable compensation from the organization)	t limited to those li								•	
3 Did the organization list any former officer, employee on line 1a? If "Yes," complete Sci		_	-			_		•		Yes N
For any Individual listed on line 1a, is the sum organization and related organizations great individual	of reportable con ter than \$150,000	npensa ? If "Y	ition es,"	and	othe	er con	pens	sation from the		4 X
5 Did any person listed on line 1a receive or action for services rendered to the organization? If	crue compensatio	n from	any			-				5 x
ction B. Independent Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,,,,			•••			
Complete this table for your five highest comp compensation from the organization. Report of										
(A)					•	- 3	•	(B)		(C)

Total number of independent contractors (including but not limited to those listed above) who

received more than \$100,000 of compensation from the organization

Form 990 (2020)

Form 990 (2020) JUSTICE VENTURES INTERNATIONAL 20-4214306 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII Total revenue Related or exempt Revenue excluded Unrelated function revenue business revenue from tax under sections 512-514 Federated campaigns 1a 1a b 1b Contributions, Gifts, Grants and Other Similar Amounts 1c Related organizations 1d Government grants (contributions) . . 1e f All other contributions, gifts, grants, and similar amounts not included above 1,473,180 q Noncash contributions included in h Total. Add lines 1a-1f 1,473,180 **Business Code** 2a FEES FOR SERVICES 900099 3,878 3,878 Program Service Revenue f All other program service revenue 3,878 Investment income (including dividends, interest, and 236 236 4 Income from investment of tax-exempt bond proceeds ▶ (i) Real (ii) Personal 6a Gross rents 6a **b** Less: rental expenses . . 6b c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from (i) Securities (ii) Other sales of assets other than inventory 7a b Less: cost or other basis 7b and sales expenses . . Other Revenue c Gain or (loss) 7c 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses 8b c Net income or (loss) from fundraising events 9a Gross income from gaming activities, See Part IV, line 19 9b b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a 15,367 **b** Less: cost of goods sold 10b 14,608 c Net income or (loss) from sales of inventory . . . 759 759 \blacktriangleright **Business Code** 11a

1,478,053

4,873

20-4214306

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).

Secu	ion 501(c)(3) and 501(c)(4) organizations must complete all c Check if Schedule O contains a response or note to		nizations must comple	· · · · · · · · · · · · · · · · · · ·	X
Do n	not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		акролоос		
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
2					
	individuals. See Part IV, line 22				
3					
	organizations, foreign governments, and	055 106	255 106		
	foreign individuals. See Part IV, lines 15 and 16	255,106	255,106		
4	Benefits paid to or for members			NOTES HOLD COME SECTION OF THE PROPERTY OF THE	
5	Compensation of current officers, directors,	00.040	44 500	0 710	06 701
	trustees, and key employees	80,913	44,502	9,710	26,701
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	117,747	51,808	37,679	28,260
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	3,261	1,794	391	1,076
10	Payroll taxes	13,825	6,705	3,297	3,823
11	Fees for services (nonemployees):				
а	Management	9,628		9,628	
b	Legal				
C	Accounting	36,975		36,975	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
ŭ	(A) amount, list line 11g expenses on Schedule O.)	582,661	582,661		
12	Advertising and promotion		-		
13	Office expenses	5,250		5,250	
14	Information technology	18,104	14,095	4,009	
15	Royalties				
16	Occupancy				
17	Travel	94,931	94,168	763	
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		***************************************		
	Interest				
20	Payments to affiliates				
21	· ·		*******		
22	Depreciation, depletion, and amortization	2,086		2,086	
23	Insurance	2,000		2,080	
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.)	20 0==			63 353
a	FUNDRAISING EXPENSES	63,353	0.50	756	63,353
b	BANK CHARGES	1,008	252	756	
C	MISC ADMIN	9,790		9,790	
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,294,638	1,051,091	120,334	123,213
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here ► ☐ if				
	following SOP 98-2 (ASC 958-720)				
EEA					Form 990 (2020)

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Form 990 (2020) JUSTICE VENTURES INTERNATIONAL 20-4214306 Page 11 Part X **Balance Sheet** (B) (A) Beginning of year End of year Cash - non-interest-bearing 325,889 1 373,519 4,368 2 4,369 2 3 4 185,569 70,856 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined 6 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 7 3,508 5,686 8 8 9 738 752 9 Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D 10a 10c Less: accumulated depreciation 10b b 11 6,136 11 12 Investments - other securities. See Part IV, line 11 21,329 12 13 13 14 14 15 15 407,551 16 595,168 Total assets. Add lines 1 through 15 (must equal line 33) 16 143,148 17 123,799 17 18 18 19 19 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, 22 trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 123,799 143,148 26 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.

Net Assets or Fund Balances 264,403 32 471,369 32 407,551 33 595,168 33 Total liabilities and net assets/fund balances Form 990 (2020) EEA

Net assets with donor restrictions

Capital stock or trust principal, or current funds

Retained earnings, endowment, accumulated income, or other funds

Organizations that do not follow FASB ASC 958, check here

Paid-in or capital surplus, or land, building, or equipment fund

and complete lines 29 through 33.

236,914

27,489

27

28

29

30

31

446,741

24,628

Form	990 (2020) JUSTICE VENTURES INTERNATIONAL 2	0-421430	6	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				_
-	Check if Schedule O contains a response or note to any line in this Part XI				<u>. </u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,4	478,	053
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,2	294,	<u>638</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		183,	415
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		264,	403
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8		23,	<u>551</u>
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		471,	369
Pai	rt XII Financial Statements and Reporting				
	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 🔣 Accrual 📗 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		0.0000		
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	20.000	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:		11,2,112		
	Separate basis Consolidated basis Both consolidated and separate basis				5000
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	5 7 7 5 5 5 5 5 F
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis			183450	
С					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth 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 undergo the				
	required audit or audite explain why an Schedule O and describe any stens taken to undergo such audits		3h		

EEA

Form 990 (2020)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047 2020

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.

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.

Open to Public Inspection

JUS	TIC:	E VENTURES INTERNATIONAL					20-4214306	<u> </u>					
	rt I	Reason for Public Charity	/ Status. (All or	rganizations must c	omplete	this part	.) See instructions).					
		nization is not a private foundation beca											
1	П	A church, convention of churches, or											
2	H	A school described in section 170(b)											
	H	A hospital or a cooperative hospital s											
3	님		-				/4\/A\/##\ Enterthe						
4	L	A medical research organization ope	rated in conjunction	n with a nospital describ	ea in sec u	(a)vtr noi	(1)(A)(III). Enter the						
	_	hospital's name, city, and state:											
5	Ш	An organization operated for the bene	efit of a college or u	iniversity owned or opera	ited by a g	overnmen	al unit described in						
		section 170(b)(1)(A)(iv). (Complete	Part II.)										
6		A federal, state, or local government	or governmental u	nit described in section	170(b)(1)((A)(v).							
7		An organization that normally receives	s a substantial part	of its support from a gov	rernmental	unit or fro	n the general public						
		described in section 170(b)(1)(A)(vi)). (Complete Part I	1.)									
8	П	A community trust described in secti	on 170(b)(1)(A)(vi). (Complete Part II.)									
9	Ħ	An agricultural research organization			rated in co	njunction v	with a land-grant colleg	e					
-													
	or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:												
10	X	An organization that normally receive	e: /1\ more than 33	1/3% of its support from	contribution	ons memh	ershin fees, and gross						
10	iv.	receipts from activities related to its e											
		support from gross investment income					OH Dushesses						
	_	acquired by the organization after Ju-											
11	Ц	An organization organized and opera											
12	Ш	An organization organized and operat											
		of one or more publicly supported org											
		Check the box in lines 12a through 12											
	a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving												
		the supported organization(s) the	power to regularly	appoint or elect a major	ity of the d	lirectors or	trustees of the						
		supporting organization. You mu	ıst complete Part	IV, Sections A and B.									
	b	Type II. A supporting organizatio			ith its supp	orted orga	nization(s), by having						
		control or management of the sup											
		organization(s). You must comp											
	c	Type III functionally integrated			nection w	ith, and fu	nctionally integrated wi	th.					
	•	its supported organization(s) (see						•					
		Type III non-functionally integr						n/e\					
	d							11(0)					
		that is not functionally integrated.					it and an attenuveness						
		requirement (see instructions). Y					France 11. Trans. 111						
	e	Check this box if the organization				a Type I,	rype II, Type III						
		functionally integrated, or Type III											
	f	Enter the number of supported organ											
	g	Provide the following information about	ut the supported or	ganization(s).	1								
	(i)	Name of supported organization	(II) EIN	(ill) Type of organization	(iv) is the o	-	(v) Amount of monetary	(vi) Amount of					
				(described on lines 1-10 above (see instructions))	listed in you docum		support (see instructions)	other support (see instructions)					
				doore (bee measurement)				•					
					Yes	No							
/۸۱													
(A)													
/D\													
(B)													
(C)													
\~ <i>j</i>						ļ <u></u>							
(D)													
(E)													
		· · · · · · · · · · · · · · · · · · ·	Terres	ASSESSMENT OF THE CONTRACT OF THE CONTRACT OF THE PROPERTY OF	Conference Surgicial	200000000000000000000000000000000000000							

JUSTICE VENTURES INTERNATIONAL 20-4214306 Page 2 Schedule A (Form 990 or 990-EZ) 2020 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support (e) 2020 Calendar year (or fiscal year beginning in)▶ (a) 2016 **(b)** 2017 (c) 2018 (d) 2019 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 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 Total. Add lines 1 through 3 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) 6 Public support. Subtract line 5 from line 4 Section B. Total Support (e) 2020 (f) Total Calendar year (or fiscal year beginning in)> (a) 2016 (b) 2017 (c) 2018 (d) 2019 Amounts from line 4...... Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 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... 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage % 14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) % 15 Public support percentage from 2019 Schedule A, Part II, line 14 16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check П 17a 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

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

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

(Complete only if you checked the box on line 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.)

<u>Sec</u>	ction A. Public Support						
Cal	endar year (or fiscal year beginning in)▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees		П		Parameter		
	received. (Do not include any "unusual grants.")	715,759	817,172	847,925	1,183,023	1,396,062	4,959,941
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	46,850	30,816	12,958	11,058		105,358
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513.						
4	Tax revenues levied for the		-				
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the					***************************************	
	organization without charge						
	Total. Add lines 1 through 5	762,609	847,988	860,883	1,194,081	1,399,738	5,065,299
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						•
b	Amounts included on lines 2 and 3				- Control of the Cont		
	received from other than disqualified						
	persons that exceed the greater of \$5,000				50H 50C		0.001.400
	or 1% of the amount on line 13 for the year	340,175	436,204	547,317	737,796		2,061,492
	Add lines 7a and 7b	340,175	436,204	547,317	737,796	80 S90 S80 S80 S80 S80 S80 S80 S80 S80 S80 S8	2,061,492
٥	Public support. (Subtract line 7c from						3,003,807
50/	line 6.)	200000000000000000000000000000000000000	eser a configural become for encountry		Assistance a section of	101/2010/00/00/00/00/00/00/00/00/00/00/00/00/	
	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6	762,609	847,988	860,883	1,194,081		5,065,299
	Gross income from interest, dividends,	702,003	017,300	300,000			
IVa	payments received on securities loans, rents,						
	royalties, and income from similar sources	25	15	95	8	17	160
h	Unrelated business taxable income (less						
~	section 511 taxes) from businesses					:	
	acquired after June 30, 1975						
c	Add lines 10a and 10b	25	15	95	8	17	160
11							
	activities not included in line 10b, whether					i	
	or not the business is regularly carried on						
12	Other income. Do not include gain or					i	
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	762,634	848,003			1,399,755	5,065,459
14	First 5 years. If the Form 990 is for the orga	nization's first,	second, third, t	fourth, or fifth t	ax year as a s	ection 501(c)(3)	_
	organization, check this box and stop here					<u> </u>	▶ ∐
	ction C. Computation of Public Suppor			(0)		l de l	F0 00 0/
	Public support percentage for 2020 (line 8, c					15 16	59.30 %
	Public support percentage from 2019 Sched					10	46.88 %
	ction D. Computation of Investment Inc			na 13. aaluma	/f))	17	0.00 %
	Investment income percentage for 2020 (line					18	0.00 %
	Investment income percentage from 2019 Se 33 1/3% support tests - 2020. If the organiz						
ıya	17 is not more than 33 1/3%, check this box	and eton bere	The arganization	i inio 17, and i	s a publiciv su	pported organiz	ation ▶ 🕅
h	33 1/3% support tests - 2019. If the organiz						
Ŋ	line 18 is not more than 33 1/3%, check this						
20	Private foundation If the organization did r						

Part IV Supportin

Supporting Organizations

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

Section	Α.	All	Supporting	a Organ	izations
---------	----	-----	------------	---------	----------

- 1 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 lines 3b and 3c 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 lines 4b and 4c 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 lines 5b and 5c 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**.
- 10a 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.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
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		risina. Pingga
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2	490000	(2004)(1)
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3b	salest testes to	- 45000 to 0.000
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10b		The State of the

Sched	ule A (Form 990 or 990-EZ) 2020 JUSTICE VENTURES INTERNATIONAL 20-4214	306	F	age 5
Pai	t IV Supporting Organizations (continued)		1	
		585,68	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 lines 11b and	1000000	110000	
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described in line 11a above?	11b	20076990	- Agentanti, te
C	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide	1453	THE	######################################
	detail in Part VI.	11c	<u> </u>	
Sec	tion B. Type I Supporting Organizations		1,,	
		T CHENCE	Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or	10000		
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,		10000000	
	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 officers, directors, or trustees were allocated among the			355
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	1 4.05.44.2	100000000
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	10000000000000000000000000000000000000		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	1,300.00		
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
		1 (A - A - C) (A - C)	Yes	No
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		
Sec	tion D. All Type III Supporting Organizations		1	г
		1	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			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	A000000 4600000		
	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	ע		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have	V.00003		
	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		
Sec	tion 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 (s	ee instruc	tions).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b				
С	The organization supported a governmental entity. Describe in Part VI how you supported a government en	ntity (see ii	n <u>struc</u>	tions)
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
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	1 00 00 00 00 00 00 00 00 00 00 00 00 00		
	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 line 2a, above, 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 lines 3a and 3b below.			
	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? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	h 🗍		. 35.6
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pai	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ganiz	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organize	ation	s must complete Sections.	A through E.
Sec	ction 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		
	ction 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		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):	21100 100,000		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	ction C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 0.85 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-functionally	integ	rated Type III supporting or	ganization
	(see instructions)	_		

Sched	ule A (Form 990 or 990-EZ) 2020 JUSTICE VENTURES INTERNA				4306 Page 7
Pai	Type III Non-Functionally Integrated 509(a)(3	Supporting Organia	zations (continued	<u>d)</u>	
Sec	tion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer	npt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizat	ions	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required) - p	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is respons	sive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	ction E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	าร	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
С	From 2017			i Sala	
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e		70.000 (20.000)		
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from				
	Section D, line 7:				
	Applied to underdistributions of prior years			Company.	
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result				
	greater than zero, explain in Part VI. See instructions.			15.5.5.4	
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
_8	Breakdown of line 7:				
	Excess from 2016			-349-64 -349-64	
	Excess from 2017				
-	Excess from 2018				
	Excess from 2019				
е	Excess from 2020				

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

Employer identification number

2020

Open to Public Inspection

20-4214306 JUSTICE VENTURES INTERNATIONAL Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) 3 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. 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). Preservation of a historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space 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 2a 2b Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? 🗌 Yes 🔲 No Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: 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:

Pai	t III Organizations Maintaining Col								ssets (cc	ntinue	<u>;a)</u>
3	Using the organization's acquisition, accession, and	other records, che	eck any	y of t	he follo	wing that ma	ke signi	ficant use of its			
	collection items (check all that apply):										
а	Public exhibition		đ		Loan c	r exchange į	program	s			
b	Scholarly research		e		Other						
C	Preservation for future generations										
4	Provide a description of the organization's collection	ns and explain how	they t	furth	er the o	rganization's	exempt	purpose in Part			
	XIII.										
5	During the year, did the organization solicit or receive	ve donations of art,	histori	ical t	reasure	es, or other si	imilar		_	_	
	assets to be sold to raise funds rather than to be m	aintained as part o	f the o	rgar	ization'	s collection?.			. Yes	<u> </u>	<u>lo</u>
Pai	TIV Escrow and Custodial Arranger									_	
	Complete if the organization answ	vered "Yes" on	Forn	n 99	90, Pa	rt IV, line !	9, or re	ported an am	ount on F	·orm	
,	990, Part X, line 21.										—
1a	Is the organization an agent, trustee, custodian or of								□ v _{**}	. [] N	
					• • •				∐ res	; <u> </u> r	10
b	If "Yes," explain the arrangement in Part XIII and co	omplete the following	ng tabl	e:				1			
									nount		
C	Beginning balance										—
d	Additions during the year										
e	Distributions during the year										
f	Ending balance									. П г	
2a	If "Yes," explain the arrangement in Part XIII. Check										••
D _O	t V Endowment Funds.	K nere ii iile explaii	auom	ias i	een pr	OVIDED OITT A	RI AIII			<u>· </u>	—
I al	Complete if the organization answ	vered "Yes" on	Forn	n 99	n Pa	rt IV line	10.				
		Current year	(b) P			(c) Two years		(d) Three years back	(e) Four	years bac	
1a	Beginning of year balance	Content year	(4)	iloi ye	·ui	(o) The years	, buon	(0) 100)	107.10		
b	Contributions										
c	Net investment earnings, gains, and										
·	losses										
d	Grants or scholarships						•				
e	Other expenditures for facilities and										
•	programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the current year	ar end balance (line	e 1g, c	olum	ın (a)) l	neld as:					
а	Board designated or quasi-endowment		=								
b	Permanent endowment ► %										
c	Term endowment ► %										
	The percentages on lines 2a, 2b, and 2c should equ	ual 100%.									
3a	Are there endowment funds not in the possession of	of the organization	that a	re he	eld and	administered	for the		1		
	organization by:									Yes	No
	(i) Unrelated organizations								. 3a(i)		
	(ii) Related organizations								. 3a(ii)		
b	If "Yes" on line 3a(ii), are the related organizations	listed as required o	on Sch	edul	eR?.				. 3b		
4	Describe in Part XIII the intended uses of the organ	·····	ent fun	ıds.							
Pa	t VI Land, Buildings, and Equipmen								5	40	
	Complete if the organization answ	vered <u>"Yes" on</u>	Forn	n 99	90, Pa	rt IV, line					
	Description of property	(a) Cost or other ba	asis	(1	•	r other basis	' '	Accumulated	(d) Bool	k value	
		(investment)			(4	other)	d garagasa	epreciation			
1a	Land			4			V(0.42)(0.80)				
b	Buildings			+							
C	Leasehold improvements			-							
d	Equipment			+							
e T.:	Other	Form 000 Part V	no.le.	nr /	2) line	10c l				 	
Inta	c Ano lines 12 inrollan 18. /Collimb (al must édual	rconu 990. Pafi X.	. GUIUI	1111 11	Ji. IIII اد	ه مالکان					

Part VII	Complete if the organization and		90, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)		(b) Book value	(6)) Method of valuation: end-of-year market value
(1) Financial	derivatives				
(2) Closely-h	eld equity interests				
(3) Other					
	MENT IN LLC		21,329	Cost	
(B)					
(C)					
(D)					
(E)			All and a second a		
(F) (G)					
(H)					
	nn (b) must equal Form 990, Part X, col. (B) line 12.).	21,329		
Part VIII	Investments - Program Relate				
10.00.00.00.00	Complete if the organization and	swered "Yes" on Form 9	990, Part IV, lin	e 11c. See Form	990, Part X, line 13.
***	(a) Description of investment	***************************************	(b) Book value	(c) Method of valuation: end-of-year market value
(1)					
(2)			N. N. N.		
(3)					
(4)					
(5)					
(6)			10000	•	
(7)					
(8)					
(9)	****				
	nn (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.				
	Complete if the organization and	swered "Yes" on Form 9	990, Part IV, lin	e 11d. See Form	990, Part X, line 15.
		(a) Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
					,
(8)					
(9)	(1) 4 LE . 000 D. 4V1 (D) II AE)			
	nn (b) must equal Form 990, Part X, col. (B Other Liabilities.) iine 15.)		· · · · · · · · · · · · · · · · · · ·	
Part X	Complete if the organization and	cwared "Ves" on Form (000 Part IV lin	e 11e or 11f See	Form 990 Part X
	line 25.		LANGESTAN		
1.	(a) Description of liability	(b) Book value			
	income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	(b) must equal Form 990, Part X, col. (B) line 25	1 •			
	r uncertain tay positions. In Part XIII provid		organization's fin	anaial etatemente that	roporto tho

Pa	rt XI Reconciliation of Revenue per Audited Financial Statem		_	r Retur	n.
_	Complete if the organization answered "Yes" on Form 990,			1	1 550 470
1	Total revenue, gains, and other support per audited financial statements	• • •		Nesse	1,550,478
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a			
a	Net unrealized gains (losses) on investments		70 405		
b	Donated services and use of facilities	2b	72,425		
C	Recoveries of prior year grants	2c 2d		100000	
d	Other (Describe in Part XIII.)			3.	72,425
e	Add lines 2a through 2d			2e 3	1,478,053
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i			1,410,000
4		40		32-10-10-10-10-10-10-10-10-10-10-10-10-10-	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b		1.000	
b	Add lines 4a and 4b			4c	
C	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,478,053
5 D ₂	rt XII Reconciliation of Expenses per Audited Financial State			1	
Гα	Complete if the organization answered "Yes" on Form 990,		_	po: 110	COLLIN
1	Total expenses and losses per audited financial statements			1	1,367,063
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			10-11-12	
a	Donated services and use of facilities	2a	72,425	100 A 10	
b	Prior year adjustments	2b	,,,,,,		
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d		10000	
e	Add lines 2a through 2d			2e	72,425
3	Subtract line 2e from line 1			3	1,294,638
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		1930,004	
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).			5	1,294,638
	rt XIII Supplemental Information.				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, li art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide an			Part X, lin	e

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

► 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.

Inspection Employer Identification number

JUSTICE VENTURES INTERNATI	ONAL			20-42143	06
		Outside the U	Inited States. Complete if	the organization answered "	Yes" on
Form 990, Part IV, line 1 For grantmakers. Does the org		tain records to s	ubstantiate the amount of its	grante and	
other assistance, the grantees' el				-	
award the grants or assistance?					X Yes No
g					
2 For grantmakers. Describe in F	Part V the orga	nization's proced	lures for monitoring the use o	fits grants and other assistance	
outside the United States.					
				1.11	
3 Activities per Region. (The follow (a) Region	(b) Number	3 table can be du	Iplicated if additional space is (d) Activities conducted in the	needed.) (e) If activity listed in (d) is	(f) Total
(a) Nogon	of offices in the region	emptoyees, agents, and	region (by type) (such as, fundraising, program services,	a program service, describe specific type of	expenditures for and investments
	ale region	independent	investments, grants to recipients	service(s) in the region	in the region
		contractors in the region	located in the region)		
(1)South Asia	1	1	Grant making	ANTI HUMAN TRAFFICKI	255,106
(2)					
(3)					
(0)					
(4)					
(5)					
(0)					
(6)					
(7)					
(8)					
(0)					
(9)					
10)					
-					
11)					
40\				1	
12)					
13)					
Company of the Compan					
14)					
4.5)					
15)					
16)					
-					
17)					
3a Subtotal	1	1			255,106
b Total from continuation					
sheets to Part I	1				255 106

JUSTICE VENTURES INTERNATIONAL

20-4214306

Schedule F (Form 990) 2020

Schedule F (Form 990) 2020 Page 2 (f) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (h) Description of noncash assistance (g) Amount of noncash assistance Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter......... WIRE TRANSFE WIRE TRANSFE WIRE TRANSFE 38,788 WIRE TRANSFE 15,000 WIRE TRANSFE 42,000 WIRE TRANSFE WIRE TRANSFE (f) Manner of cash disbursement Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax 17,057 72,528 35,270 15,000 (e) Amount of cash grant H Н ANT'I HUMAN T H Н H ы ANTI HUMAN ANTI HUMAN NTI HUMAN INTI HUMAN ANTI HUMAN ANTI HUMAN (d) Purpose of grant South Asia Enter total number of other organizations or entitles (b) IRS code section and EIN (if applicable) (a) Name of organization Part II ന ~ (10) (12) (13) (14) (15) 36 EEA (9) $\mathbf{\epsilon}$ (8) 6 (1) <u>4</u> 2 2 3

6

20-4214306

JUSTICE VENTURES INTERNATIONAL

Schedule F (Form 990) 2020 JUSTI

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. Part III

Schedule F (Form 990) 2020 (h) Method of valuation (book, FMV, appraisat, 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 9 (13) (12) (13) 45 (15) (16) E) (18) EEA **€** (5) 9 ε 8 Ξ <u>ත</u> <u></u> Ø

Part	IV 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)	. 🗆	Yes	X	No
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)	. 🗆	Yes	X	No
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)	. 🗆	Yes	X	No
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)	. 🗆	Yes	X	No
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)	. П	Yes	X	No
EEA		Schedu	ıle F (Fo	rm 990	0) 2020

lule F (Form	990) 2020 Page 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); an Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional
	Information. See instructions.
.	

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047 2020

Department of the Treasury Internal Revenue Service Name of the organization

➤ Attach to Form 990 or Form 990-EZ.

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

Open To Public Inspection

JUSTICE VENTURES INT Part Excess Benef		ns (section 501)	(0)/3) 6	ection 5	501/6\/4\	and so		42143		ne on	oh ()		
<u> </u>		answered "Yes										10b.	
1 (a) Name of disqualified pe		(b) Relationship be										(d) Corr	rected?
a (a) name os usquaisieu pe	15011		organizatio	n			(c) Description	ii Oi tialisi	ECHOTI			Yes	No
(1)													
(2)	***************************************												
(3)													
2 Enter the amount of tax in under section 4958									▶ \$	<u> </u>			-
3 Enter the amount of tax, i	f any, on line 2, a	bove, reimbursed	by the o	organizati	ion				▶ \$	<u>; </u>			
Complete if the	e organization	ested Persons answered "Yes' ount on Form 99	on Fo 90, Pari		5, 6, or 2	2.				1		1	itton
(a) Name of interested person	with organization		fro	oan to of om the nization?	(e) Ori principal	_	(f) Balance due	(g) in	default?	by bo	proved ard or nittee?	agreer	
			То	From				Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)											<u> </u>		
(4)													
(5)													<u> </u>
Part III Grants or As	sistance Bene	efiting Interesteration	ed Per	sons.						18968		\$100 g	
(a) Name of interested person		iship between intereste and the organization	d (d	c) Amount of	assistance	(6	l) Type of assistance		(e) Purpos	e of ass	istance	
(1)													
(2)													
(3)													
(4)													
(E)													

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Shi organiz rever	atio iues
TREEDEN DANKDARK	TUDDAM DDBGTDEN	ECE 063	CONCUL MANG	Yes	1
) JEFFREY PANKRATZ	CURRENT PRESIDENT	565,867	CONSULTING		2
)					
)					
rt V Supplemental Information	<u> </u>				
Provide additional informa	tion for responses to questions or	n Schedule L. (see	instructions).		
Supplemental Info	rmation for Schedu	le L			
L, PART IV, BUSINESS TRA	NSACTIONS INVOLVING INTE	RESTED PERSON	S:		
NAME OF PERSON; JEFFREY	PANKRATZ				
DESCRIPTION OF TRANSACTION	ON: CONSULTING (DEVELOPM	ENT SOURCING			
	ON: CONSULTING (DEVELOPM	ENT SOURCING			
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ISORS, LLC).	ON: CONSULTING (DEVELOPM	ENT SOURCING			

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or 990-EZ. ▶ Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection Employer identification number

JUSTICE VENTURES INTERNATIONAL 20-4214306 01. Amended return information THE DUE DATE FOR THE TAX RETURN WITH THE EXTENTION HAD COME AND THE AUDITORS WERE NOT FINISHED. WE FILED WITH THE BEST INFORMATION AVAILABLE TO US AT THE TIME BUT THERE WAS A COUPLE MINOR ADJUSTMENT TO AGREE WITH THE AUDIT. 02. Form 990 governing body review (Part VI, line 11) THE OFFICERS AND BOARD MEMBERS RECEIVE A COPY OF THE 990 TO REVIEW PRIOR TO FILING. 03. Conflict of interest policy compliance (Part VI, line 12c) THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY AND EACH BOARD MEMBER MUST SIGN OFF. 04. CEO, executive director, top management comp (Part VI, line 15a) THE PRESIDENTS SALARY WAS REVIEWED TO CONSIDER COMPARATIVE DATA. HIS SALARY IS WELL BELOW MARKET. THERE ARE NO OTHER COMPENSATED OFFICERS OR KEY EMPLOYEES. 05. Governing documents, etc, available to public (Part VI, line 19) GOVERNING AND FINANCIAL DOCUMENTS ARE AVAILABLE UPON REQUEST. THIS IS COMMUNICATED VERBALLY. 06. List of other fees for services expenses (Part IX, line 11g) CONSULTING SERVICES \$585,552 ALL PROGRAM SERVICES