

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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

2013

Department of the Treasury  
Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.  
▶ Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

**Open to Public Inspection**

**A** For the 2013 calendar year, or tax year beginning 07/01, 2013, and ending 06/30, 2014

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization JUNIOR ACHIEVEMENT USA Doing Business As				<b>D</b> Employer identification number 84-1267604		
	Number and street (or P.O. box if mail is not delivered to street address)		Room/suite		<b>E</b> Telephone number (719) 540-8000		
	ONE EDUCATION WAY						
	City or town, state or province, country, and ZIP or foreign postal code COLORADO SPRINGS, CO 80906						
<b>F</b> Name and address of principal officer: JACK KOSAKOWSKI, PRES & CEO ONE EDUCATION WAY COLORADO SPRINGS, CO 80906							
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>G</b> Gross receipts \$ 33,138,770.				<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
<b>J</b> Website: WWW.JA.ORG						<b>H(c)</b> Group exemption number ▶ 1116	
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶				<b>L</b> Year of formation: 1992		<b>M</b> State of legal domicile: CO	

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <u>JA EMPOWERS YOUNG PEOPLE TO OWN THEIR ECONOMIC SUCCESS THROUGH VOLUNTEER-DELIVERED PROGRAMS WHICH GIVE THEM KNOWLEDGE/SKILLS IN FINAN LITERACY, WORK READINESS &amp; ENTREPRENEURSHIP.</u>			
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	30.	
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	29.	
	<b>5</b>	Total number of individuals employed in calendar year 2013 (Part V, line 2a)	88.	
	<b>6</b>	Total number of volunteers (estimate if necessary)	0	
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	0	
<b>7b</b>	Net unrelated business taxable income from Form 990-T, line 34	0		
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	20,020,733.	9,619,828.
	<b>9</b>	Program service revenue (Part VIII, line 2g)	4,930,109.	5,039,212.
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	397,560.	501,706.
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,544,605.	9,328,015.
	<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	33,893,007.	24,488,761.
	<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,010,885.
<b>14</b>		Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b>		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	9,325,721.	9,437,085.
<b>16a</b>		Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b>		Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>1,453,777.</u>		
<b>17</b>		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	13,661,844.	11,538,817.
<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	26,998,450.	24,314,089.	
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	6,894,557.	174,672.	
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	25,674,457.	24,625,342.
	<b>21</b>	Total liabilities (Part X, line 26)	5,879,306.	5,151,043.
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	19,795,151.	19,474,299.

## Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer _____ Date _____				
	Type or print name and title _____				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name RITA F WORSTER, CPA	Preparer's signature _____	Date _____	Check <input type="checkbox"/> if self-employed	PTIN P00290681
	Firm's name ▶ BKD, LLP			Firm's EIN ▶ 44-0160260	
	Firm's address ▶ 111 SOUTH TEJON, SUITE 800 COLORADO SPRINGS, CO 80903-9848			Phone no. 719 471-4290	

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2013)

**Part III Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III  Yes  No

**1** Briefly describe the organization's mission:

TO INSPIRE AND PREPARE YOUNG PEOPLE TO SUCCEED IN A GLOBAL ECONOMY.  
SEE ADDITIONAL MISSION INFORMATION ON SCHEDULE O.

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  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 services?  Yes  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 measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 17,980,753. including grants of \$ 3,338,187. ) (Revenue \$ 14,352,178. )

THE ORGANIZATION ASSISTED ITS US AREAS IN SETTING UP AND/OR  
MAINTAINING THEIR OWN ORGANIZATION TO ADMINISTER JUNIOR  
ACHIEVEMENT PROGRAMS. JA'S MEMBERS REACHED APPROXIMATELY 4.6  
MILLION ELEMENTARY THROUGH POST-SECONDARY STUDENTS FOR THE YEAR  
ENDED 6/30/2014.

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services (Describe in Schedule O.)  
(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses 17,980,753.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 20b regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 21 through 38 regarding grants, compensation, tax-exempt bonds, and organizational transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for line numbers (1a-14b), descriptions, and Yes/No checkboxes. Includes sections for backup withholding, Form W-3, unrelated business income, foreign accounts, prohibited transactions, and contributions.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (30); 1b Enter the number of voting members included in line 1a, above, who are independent (29); 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? (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? (X); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (X); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (X); 6 Did the organization have members or stockholders? (X); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (X); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (X); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? (X); 8b Each committee with authority to act on behalf of the governing body? (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 in Schedule O (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? (X); 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (X); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (X); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (X); 13 Did the organization have a written whistleblower policy? (X); 14 Did the organization have a written document retention and destruction policy? (X); 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official (X); 15b Other officers or key employees of the organization (X); If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? (X); 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed CA, CT, NY,
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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.
[X] Own website [ ] Another's website [X] Upon request [ ] Other (explain in Schedule O)
19 Describe in 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, physical address, and telephone number of the person who possesses the books and records of the organization: TIMOTHY ARMIJO ONE EDUCATION WAY COLORADO SPRINGS, CO 80906 719-540-6235

**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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1)AINAR D. AIJALA, JR. DIRECTOR	2.00	X						0	0	0
(2)EVELYN ANGELLE TREASURER	2.00	X		X				0	0	0
(3)LIZ ARKY DIRECTOR THROUGH 12/2013	2.00	X						0	0	0
(4)ALAN S. ARMSTRONG DIRECTOR	2.00	X						0	0	0
(5)SANDRA BEACH LIN DIRECTOR	2.00	X						0	0	0
(6)MARK BRENNER DIRECTOR	2.00	X						0	0	0
(7)CATHERINE S. BRUNE VICE-CHAIR	2.00	X		X				0	0	0
(8)RODNEY D. BULLARD DIRECTOR	2.00	X						0	0	0
(9)AGUSTIN CARCOBA DIRECTOR	2.00	X						0	0	0
(10)JAMES M. CARROLL DIRECTOR	2.00	X						0	0	0
(11)MICHAEL DENISZCZUK DIRECTOR	2.00	X						0	0	0
(12)LYNNE FORD DIRECTOR	2.00	X						0	0	0
(13)JEFF HANSBERRY DIRECTOR THROUGH 11/2013	2.00	X						0	0	0
(14)PERRY HEWITT DIRECTOR	2.00	X						0	0	0

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
15) KYLE H. HYBL DIRECTOR	2.00	X						0	0	0
16) CLYDE D. KEATON DIRECTOR	2.00	X						0	0	0
17) DEBORAH J. KISSIRE DIRECTOR	2.00	X						0	0	0
18) LOREN C. KLUG DIRECTOR	2.00	X						0	0	0
19) LARRY LEVA CHAIR	2.00	X		X				0	0	0
20) ROBERT LLOYD DIRECTOR	2.00	X						0	0	0
21) KEVIN MCKAY DIRECTOR THROUGH 09/2013	2.00	X						0	0	0
22) PAUL E. MCKNIGHT DIRECTOR	2.00	X						0	0	0
23) GREGORY MCSTRAVICK DIRECTOR	2.00	X						0	0	0
24) JULIE A. MONACO SECRETARY	2.00	X		X				0	0	0
25) DAVID PALENCHAR SECRETARY THROUGH 12/2013	2.00	X		X				0	0	0
<b>1b Sub-total</b>								0	0	0
<b>c Total from continuation sheets to Part VII, Section A</b>								2,717,884.	0	568,103.
<b>d Total (add lines 1b and 1c)</b>								2,717,884.	0	568,103.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **13**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 1		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **15**



**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
( 26) JONAS PRISING ----- DIRECTOR	2.00	X					0	0	0	
( 27) ED RAPP ----- DIRECTOR	2.00	X					0	0	0	
( 28) ROBERT REEG ----- DIRECTOR	2.00	X					0	0	0	
( 29) JAMES RUNNELS ----- DIRECTOR	2.00	X					0	0	0	
( 30) LISA SODEIKA ----- DIRECTOR THROUGH 01/2014	2.00	X					0	0	0	
( 31) ALBERT E. SUTER ----- DIRECTOR	2.00	X					0	0	0	
( 32) THOMAS D. WELDON ----- DIRECTOR	2.00	X					0	0	0	
( 33) RICHARD A. WOODS ----- DIRECTOR	2.00	X					0	0	0	
( 34) SEAN C. RUSH ----- DIRECTOR	2.00	X					0	0	0	
( 35) JACK E. KOSAKOWSKI ----- PRESIDENT & CEO	40.00	X		X			432,275.	0	50,016.	
( 36) TIMOTHY ARMIJO ----- CFO	40.00			X			182,361.	0	55,777.	
<b>1b Sub-total</b> .....										
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....										

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 13

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> .....		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> .....	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> .....		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

**Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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 organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
( 37) CECIL THIBODEAUX EVP	40.00			X			292,381.	0	65,209.	
( 38) GARY BLANCHETTE SVP - DEVELOPMENT	40.00			X			244,656.	0	112,809.	
( 39) LISA GILLIS CHIEF ACADEMIC OFFICER	40.00			X			250,186.	0	22,852.	
( 40) SUSAN LUU SVP - BUSINESS IMPROVEMENT	40.00			X			208,774.	0	25,137.	
( 41) LESLIE PIERCE SVP TALENT & ORGANIZATION DEV.	40.00				X		155,934.	0	28,509.	
( 42) ED GROCHOLSKI SVP - BRAND	40.00				X		229,236.	0	26,405.	
( 43) HOWARD BARTNER SVP - OPERATIONS	40.00				X		174,591.	0	67,292.	
( 44) STEVE SCHMIDT SVP - OPERATIONS	40.00				X		181,027.	0	34,594.	
( 45) CHRISTINE KUNZ VP - OPERATIONS	40.00					X	132,583.	0	26,923.	
( 46) JACQUELINE DANT VP - OPERATIONS	40.00					X	120,135.	0	26,501.	
( 47) KRIS PONCIROLI VP DONOR RELATIONS & DEV SVCS	40.00					X	113,745.	0	26,079.	
<b>1b Sub-total</b> . . . . .										
<b>c Total from continuation sheets to Part VII, Section A</b> . . . . .										
<b>d Total (add lines 1b and 1c)</b> . . . . .										

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 13

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> . . . . .		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

**Part VIII Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1a	Federated campaigns . . . . .	1a	17,981.				
	b	Membership dues . . . . .	1b					
	c	Fundraising events . . . . .	1c					
	d	Related organizations . . . . .	1d					
	e	Government grants (contributions) . .	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	9,601,847.				
	g	Noncash contributions included in lines 1a-1f: \$		460,907.				
	h	<b>Total.</b> Add lines 1a-1f . . . . . ▶		9,619,828.				
<b>Program Service Revenue</b>				<b>Business Code</b>				
	2a	AREA LICENSE FEES		611710	4,639,212.	4,639,212.		
	b	SUPPORT FEES		611710	400,000.	400,000.		
	c							
	d							
	e							
	f	All other program service revenue . . . . .						
g	<b>Total.</b> Add lines 2a-2f . . . . . ▶			5,039,212.				
<b>Other Revenue</b>	3	Investment income (including dividends, interest, and other similar amounts) . . . . . ▶			245,234.		245,234.	
	4	Income from investment of tax-exempt bond proceeds . . . ▶			0			
	5	Royalties . . . . . ▶			0			
	6a	Gross rents . . . . .	(i) Real	15,049.				
			(ii) Personal					
			b	Less: rental expenses . . . . .				
			c	Rental income or (loss) . . . . .	15,049.			
	d	<b>Net rental income or (loss)</b> . . . . . ▶			15,049.		15,049.	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	3,598,037.				
			(ii) Other					
			b	Less: cost or other basis and sales expenses . . . . .	3,341,565.			
			c	Gain or (loss) . . . . .	256,472.			
	d	<b>Net gain or (loss)</b> . . . . . ▶			256,472.		256,472.	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 . . . . . a						
b	Less: direct expenses . . . . . b							
c	<b>Net income or (loss) from fundraising events</b> . . . . . ▶			0				
9a	Gross income from gaming activities. See Part IV, line 19 . . . . . a							
b	Less: direct expenses . . . . . b							
c	<b>Net income or (loss) from gaming activities</b> . . . . . ▶			0				
10a	Gross sales of inventory, less returns and allowances . . . . . a		14,259,030.					
		b	Less: cost of goods sold . . . . . b	5,308,444.				
		c	<b>Net income or (loss) from sales of inventory</b> . . . . . ▶			8,950,586.	8,950,586.	
<b>Miscellaneous Revenue</b>			<b>Business Code</b>					
11a	MISCELLANEOUS		900099	362,380.	362,380.			
b								
c								
d	All other revenue . . . . .							
e	<b>Total.</b> Add lines 11a-11d . . . . . ▶			362,380.				
12	<b>Total revenue.</b> See instructions . . . . . ▶			24,488,761.	14,352,178.	516,755.		

**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 . . . . .	3,278,482.	3,278,482.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . . .	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . . .	59,705.	59,705.		
4 Benefits paid to or for members . . . . .	0			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	2,875,435.	2,127,822.	632,596.	115,017.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
7 Other salaries and wages . . . . .	4,740,015.	3,206,695.	864,942.	668,378.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	627,873.	403,737.	124,424.	99,712.
9 Other employee benefits . . . . .	748,175.	495,765.	161,797.	90,613.
10 Payroll taxes . . . . .	445,587.	301,797.	98,613.	45,177.
11 Fees for services (non-employees):				
a Management . . . . .	0			
b Legal . . . . .	170,859.	84,886.	61,990.	23,983.
c Accounting . . . . .	72,600.	18,150.	54,450.	
d Lobbying . . . . .	160,949.	104,617.	24,142.	32,190.
e Professional fundraising services. See Part IV, line 17 . . . . .	0			
f Investment management fees . . . . .	51,935.		51,935.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .	917,499.	568,322.	223,390.	125,787.
12 Advertising and promotion . . . . .	116,411.	110,844.	5,567.	
13 Office expenses . . . . .	529,051.	192,288.	309,457.	27,306.
14 Information technology . . . . .	1,126,660.	614,823.	452,337.	59,500.
15 Royalties . . . . .	0			
16 Occupancy . . . . .	319,183.	131,437.	162,202.	25,544.
17 Travel . . . . .	553,472.	397,836.	76,099.	79,537.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19 Conferences, conventions, and meetings . . . . .	99,933.	28,318.	71,615.	
20 Interest . . . . .	5,214.	1,303.	3,911.	
21 Payments to affiliates . . . . .	1,171,839.	292,960.	878,879.	
22 Depreciation, depletion, and amortization . . . . .	1,691,451.	1,398,591.	272,640.	20,220.
23 Insurance . . . . .	2,106.	2,104.	2.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <u>JA PROGRAM EXPENSES</u> . . . . .	3,225,522.	3,090,775.	134,734.	13.
b <u>IN-KIND SOFTWARE</u> . . . . .	395,000.	335,750.	59,250.	
c <u>TRAININGS</u> . . . . .	172,812.	135,475.	31,598.	5,739.
d <u>EVALUATIONS</u> . . . . .	300,940.	285,893.	15,047.	
e All other expenses . . . . .	455,381.	312,378.	107,942.	35,061.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	24,314,089.	17,980,753.	4,879,559.	1,453,777.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .	0			

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing	2,864,236.	<b>1</b>	6,205,834.
	<b>2</b> Savings and temporary cash investments	395,075.	<b>2</b>	690,757.
	<b>3</b> Pledges and grants receivable, net	1,845,527.	<b>3</b>	2,153,351.
	<b>4</b> Accounts receivable, net	1,698,826.	<b>4</b>	780,787.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use	3,326,072.	<b>8</b>	2,807,279.
	<b>9</b> Prepaid expenses and deferred charges	337,954.	<b>9</b>	333,185.
	<b>10 a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 17,516,937.		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 13,158,340.	5,697,739.	<b>10c</b> 4,358,597.
	<b>11</b> Investments - publicly traded securities	ATCH 3	9,509,028.	<b>11</b> 7,295,552.
	<b>12</b> Investments - other securities. See Part IV, line 11		0	<b>12</b> 0
	<b>13</b> Investments - program-related. See Part IV, line 11		0	<b>13</b> 0
	<b>14</b> Intangible assets		0	<b>14</b> 0
	<b>15</b> Other assets. See Part IV, line 11		0	<b>15</b> 0
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)		25,674,457.	<b>16</b> 24,625,342.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	4,409,761.	<b>17</b>	3,919,577.
	<b>18</b> Grants payable	0	<b>18</b>	0
	<b>19</b> Deferred revenue	139,720.	<b>19</b>	151,674.
	<b>20</b> Tax-exempt bond liabilities	0	<b>20</b>	0
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D	1,166,826.	<b>21</b>	773,511.
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	ATCH 4	162,999.	<b>23</b> 306,281.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		0	<b>24</b> 0
<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		0	<b>25</b> 0	
<b>26 Total liabilities.</b> Add lines 17 through 25		5,879,306.	<b>26</b> 5,151,043.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	10,058,089.	<b>27</b>	11,617,405.
	<b>28</b> Temporarily restricted net assets	9,737,062.	<b>28</b>	7,856,894.
	<b>29</b> Permanently restricted net assets	0	<b>29</b>	0
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
<b>33</b> Total net assets or fund balances	19,795,151.	<b>33</b>	19,474,299.	
<b>34</b> Total liabilities and net assets/fund balances	25,674,457.	<b>34</b>	24,625,342.	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	24,488,761.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	24,314,089.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	174,672.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	19,795,151.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	365,063.
<b>6</b>	Donated services and use of facilities	<b>6</b>	0
<b>7</b>	Investment expenses	<b>7</b>	0
<b>8</b>	Prior period adjustments	<b>8</b>	0
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-860,587.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	19,474,299.

**Part XII Financial Statements and Reporting**

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

- 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 Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? .....  
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant? .....  
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  Consolidated basis  Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....  
If the organization changed either its oversight process or selection process during the tax year, explain in 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? .....
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

**2013**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

**Name of the organization**

JUNIOR ACHIEVEMENT USA

**Employer identification number**

84-1267604

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.  
  - a  Type I    b  Type II    c  Type III-Functionally integrated    d  Type III-Non-functionally integrated
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....
- (ii) A family member of a person described in (i) above? .....
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? .....

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
<b>Total</b>									

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

Schedule A (Form 990 or 990-EZ) 2013

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(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

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities, whether or not the business is regularly carried on; 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.); 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc. (see instructions); 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) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 59.96%; 15 Public support percentage from 2012 Schedule A, Part II, line 14 61.99%; 16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization [X]; 16b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization; 17a 10%-facts-and-circumstances test - 2013. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization; 17b 10%-facts-and-circumstances test - 2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization; 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.



Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.
If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.); 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)). Row 16: Public support percentage from 2012 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)). Row 18: Investment income percentage from 2012 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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**Part IV** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

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**Schedule B**

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

**Schedule of Contributors**

OMB No. 1545-0047

**2013**

▶ **Attach to Form 990, Form 990-EZ, or Form 990-PF.**

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

JUNIOR ACHIEVEMENT USA

Employer identification number

84-1267604

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization JUNIOR ACHIEVEMENT USA

Employer identification number  
84-1267604

**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 400,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 310,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 946,556.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 1,769,674.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 205,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization JUNIOR ACHIEVEMENT USA

Employer identification number  
84-1267604

**Part I** Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 233,410.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8		\$ 926,366.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9		\$ 258,227.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10		\$ 1,500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11		\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization JUNIOR ACHIEVEMENT USA

Employer identification number

84-1267604

**Part II** Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8	SOFTWARE UTILIZED ON JA USA SERVERS AND DESKTOP COMPUTERS AND LOCAL AREA COMPUTERS.	\$ 460,616.	VAR
-----	-----	\$ -----	-----
-----	-----	\$ -----	-----
-----	-----	\$ -----	-----
-----	-----	\$ -----	-----
-----	-----	\$ -----	-----
-----	-----	\$ -----	-----
-----	-----	\$ -----	-----
-----	-----	\$ -----	-----
-----	-----	\$ -----	-----
-----	-----	\$ -----	-----
-----	-----	\$ -----	-----

Name of organization JUNIOR ACHIEVEMENT USA

Employer identification number  
84-1267604

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry.

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2013**

**Open to Public Inspection**

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**  
 ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
 ▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Department of the Treasury  
Internal Revenue Service

**If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

**If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then**

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

**If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>JUNIOR ACHIEVEMENT USA</b>	Employer identification number <b>84-1267604</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures . . . . . ▶ \$ \_\_\_\_\_
- 3 Volunteer hours . . . . . \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . . . ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  Yes  No
- 4a Was a correction made? . . . . .  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)	-----			
(2)	-----			
(3)	-----			
(4)	-----			
(5)	-----			
(6)	-----			



**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

**A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

**B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grass roots lobbying) . . . . .														
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	160,949.													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) . . . . .	160,949.													
<b>d</b>	Other exempt purpose expenditures . . . . .	24,153,140.													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .	24,314,089.													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) . . . . .	250,000.													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .	0	0												
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .	0	0												
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .	<input type="checkbox"/> Yes <input type="checkbox"/> No													

**4-Year Averaging Period Under Section 501(h)**  
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
<b>c</b> Total lobbying expenditures	164,990.	178,529.	164,428.	160,949.	668,896.
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
<b>f</b> Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

Table with 2 columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); 2a Current year; 2b Carryover from last year; 2c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

Horizontal dashed lines for providing supplemental information.

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**Part IV** Supplemental Information *(continued)*

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SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

JUNIOR ACHIEVEMENT USA

Employer identification number

84-1267604

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes No, 6 Did the organization inform all grantees...

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

Form section for Conservation Easements. Includes checkboxes for: Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure. Includes a table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

Form section for Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions 1a, 1b, 2, 2a, 2b regarding reporting requirements and amounts.

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

Schedule D (Form 990) 2013

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

b If "Yes," explain the arrangement in Part XIII and complete the following table:

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

2a Did the organization include an amount on Form 990, Part X, line 21?

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a-1g (Beginning of year balance, Contributions, Net investment earnings, Grants or scholarships, Other expenditures, Administrative expenses, End of year balance).

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 14.5100%
b Permanent endowment %
c Temporarily restricted endowment 85.4900%

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
(ii) related organizations

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b.

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total.

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

**Part IX Other Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) . . . . . ▶	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue per audited financial statements is 26,814,658. Total revenue after adjustments is 24,488,761.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses per audited financial statements is 26,274,923. Total expenses after adjustments is 24,314,089.

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

**Part XIII Supplemental Information** *(continued)*

TRUST, ESCROW, AND CUSTODIAL ARRANGEMENTS

PART IV, LINE 2B

THE ORGANIZATION ASSISTS ITS AREAS IN SETTING UP THEIR OWN ORGANIZATIONS TO ADMINISTER JUNIOR ACHIEVEMENT PROGRAMS. THE ORGANIZATION HOLDS FUNDS ON BEHALF OF CERTAIN MEMBERS FOR THEIR U.S. EXPENSES. THESE ARE INCLUDED IN CASH AND INVESTMENTS ON THE STATEMENTS OF FINANCIAL POSITION AND TOTAL \$491,430 AND \$536,081, RESPECTIVELY AS OF JUNE 30, 2014.

INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS

PART V, LINE 4

TEMPORARILY RESTRICTED FUNDING AND GRANTS HAVE BEEN DONOR RESTRICTED FOR SPECIFIC PURPOSES OR SPECIFIED TIME FRAMES. RESTRICTIONS ARE FOR THE DEVELOPMENT OF VARIOUS TYPES OF CURRICULUM: AFTER SCHOOL, ONLINE PROGRAMS, ETHICS CURRICULUM, AND PERSONAL FINANCIAL LITERACY PROGRAMS. GRANTS PROVIDE LEADERSHIP, MARKETING AND AWARENESS, AND SCHOLARSHIP AWARDS.

UNCERTAIN TAX POSITIONS

PART X, LINE 2

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



**Part XIII Supplemental Information** (continued)

OTHER REVENUE ON BOOKS, NOT ON RETURN

PART XI, LINE 2D

COST OF GOODS SOLD RECLASSIFIED FROM EXPENSE

AND NETTED AGAINST REVENUE 5,308,444

OTHER REVENUE ON RETURN, NOT ON BOOKS

PART XI, LINE 4B

DESIGNATED CONTRIBUTIONS TO US JA OFFICES AND

MEMBER NATIONS TREATED AS AGENCY TRANSACTIONS

FOR FINANCIAL STATEMENT PURPOSES 3,338,187\*

INVESTMENT MANAGEMENT FEES NOT INCLUDED FOR

FINANCIAL STATEMENT PURPOSES, BUT RECOGNIZED FOR

TAX PURPOSES 51,935

TOTAL 3,390,122

OTHER EXPENSES ON BOOKS, NOT ON RETURN

PART XII, LINE 2D

COST OF GOODS SOLD RECLASSIFIED FROM EXPENSE

AND NETTED AGAINST REVENUE 5,308,444

**Part XIII** Supplemental Information (continued)

OTHER EXPENSES ON RETURN, NOT ON BOOKS

PART XII, LINE 4B

DESIGNATED CONTRIBUTIONS TO US JA OFFICES AND

MEMBER NATIONS TREATED AS AGENCY TRANSACTIONS

FOR FINANCIAL STATEMENT PURPOSES 3,338,187\*

INVESTMENT MANAGEMENT FEES NOT INCLUDED FOR

FINANCIAL STATEMENT PURPOSES, BUT RECOGNIZED FOR

TAX PURPOSES 51,935

TOTAL 3,390,122

\* THE ORGANIZATION ASSUMES ACKNOWLEDGMENT RESPONSIBILITY FOR THESE GRANTS. THIS IS THE MOST EFFICIENT APPROACH WITH NUMEROUS LOCAL AREAS AND MEMBER NATIONS BENEFITTING FROM AN INDIVIDUAL GRANT. THEREFORE, THE ORGANIZATION INCLUDES THE GRANT REVENUE AND GRANT EXPENSE ON FORM 990.

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2013**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990. ▶ See separate instructions.
- ▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

Employer identification number

JUNIOR ACHIEVEMENT USA

84-1267604

**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EUROPE			GRANTMAKING		5,200.
(2) NORTH AMERICA			GRANTMAKING		19,100.
(3) SUB-SAHARAN AFRICA			GRANTMAKING		10,800.
(4) MIDDLE EAST AND NORTH AFRICA			GRANTMAKING		24,605.
(5) NORTH AMERICA			FUNDRAISING		
(6) EUROPE			FUNDRAISING		
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
<b>3a</b> Sub-total . . . . .					59,705.
<b>b</b> Total from continuation sheets to Part I . . . . .					
<b>c</b> Totals (add lines 3a and 3b)					59,705.

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

Schedule F (Form 990) 2013

JSA  
3E1274 1.000

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE/ ICELAND/ GREENLAND	TO SUPPORT PROGRAMS	5,200.	WIRE TRANSFER			
(2)			NORTH AMERICA	TO SUPPORT PROGRAMS	15,500.	WIRE TRANSFER			
(3)			SUB-SAHARAN AFRICA	TO SUPPORT PROGRAMS	7,200.	WIRE TRANSFER			
(4)			MIDDLE EAST/NORTH AFRICA	TO SUPPORT PROGRAMS	24,605.	WIRE TRANSFER			
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. . . . . 4.

3 Enter total number of other organizations or entities. . . . .

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**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  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to 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)* . . . . .  Yes  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  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  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  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 file Form 5713, International Boycott Report (see Instructions for Form 5713)* . . . . .  Yes  No

**Part V** **Supplemental Information**

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

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ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

SCH F, PART I, QUESTION 2

GRANTS ARE TO JA OR MEMBER NATIONS ONLY. MOST OF THE FUNDING FOR THE  
GRANTS ARE PROVIDED BY DONORS WHO PLACE RESTRICTIONS ON THE USE OF THE  
MONIES. GRANT USAGE REQUIREMENTS VARIES BY DONOR. THE REPORTING REQUIRED  
IS SUBMITTED TO THE ORGANIZATIONS GRANT STEWARD OR DIRECTLY TO THE DONOR.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

JUNIOR ACHIEVEMENT USA

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) JA OF NORTH CENTRAL OHIO, INC. 1563 FIRESTONE PARKWAY AKRON, OH 44301	34-0940986	501 (C) (3)	25,840.				SUPPORT MISSION
(2) JUNIOR ACHIEVEMENT OF ARIZONA, INC. 636 W. SOUTHERN AVENUE TEMPE, AZ 85282	86-0184349	501 (C) (3)	60,818.				SUPPORT MISSION
(3) JUNIOR ACHIEVEMENT OF ARKANSAS, INC. 1501 N UNIVERSITY AVE LITTLE ROCK, AR 72207	71-0658775	501 (C) (3)	19,825.				SUPPORT MISSION
(4) JUNIOR ACHIEVEMENT OF CENTRAL TEXAS, INC. P.O. BOX 684571 AUSTIN, TX 78768	74-1688335	501 (C) (3)	6,188.				SUPPORT MISSION
(5) JUNIOR ACHIEVEMENT OF CENTRAL MARYLAND, INC. 10711 RED RUN BLVD OWINGS MILLS, MD 21117	52-06688275	501 (C) (3)	49,330.				SUPPORT MISSION
(6) JA OF GREATER BATON ROUGE & ACADIANA 7809 JEFFERSON HWY, BATON ROUGE, LA 70809	72-0485727	501 (C) (3)	10,135.				SUPPORT MISSION
(7) JA OF GREATER BIRMINGHAM, INC. 216 AQUARIUS DRIVE BIRMINGHAM, AL 35209	63-0340866	501 (C) (3)	25,865.				SUPPORT MISSION
(8) JA OF NORTHERN NEW ENGLAND, INC. 400 FIFTH AVE STE 300 WALTHAM, MA 02451	04-2127020	501 (C) (3)	360,892.				SUPPORT MISSION
(9) JA OF WESTERN NEW YORK, INC. 275 OAK STREET, SUITE 222 BUFFALO, NY 14203	16-0821488	501 (C) (3)	17,594.				SUPPORT MISSION
(10) JA OF CENTRAL CAROLINAS, INC. 201 S TRYON ST CHARLOTTE, NC 28202	56-0672085	501 (C) (3)	29,950.				SUPPORT MISSION
(11) JUNIOR ACHIEVEMENT OF CHATTANOOGA, INC. 5721 MARLIN STE 3400 CHATTANOOGA, TN 37411	62-0636297	501 (C) (3)	5,460.				SUPPORT MISSION
(12) JUNIOR ACHIEVEMENT OF CHICAGO 651 W WASHINGTON BLVD CHICAGO, IL 60661	36-2170141	501 (C) (3)	254,286.				SUPPORT MISSION

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) (2013)**



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

JUNIOR ACHIEVEMENT USA

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Employer identification number

84-1267604

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) JUNIOR ACHIEVEMENT OF OKI PARTNERS, INC., 644 LINN ST SUITE 1024 CINCINNATI, OH 45203	32-0014307	501 (C) (3)	19,900.				SUPPORT MISSION
(2) JA OF GREATER CLEVELAND, INC., 1422 EUCLID AVENUE CLEVELAND, OH 44115	34-0733164	501 (C) (3)	37,058.				SUPPORT MISSION
(3) JUNIOR ACHIEVEMENT OF SOUTHERN COLORADO, 419 WEST BLJOU COLORADO SPRINGS, CO 80905	84-6009223	501 (C) (3)	17,051.				SUPPORT MISSION
(4) JA OF CENTRAL SOUTH CAROLINA, INC., 301 GREYSTONE BOULEVARD COLUMBIA, SC 29210	57-0511131	501 (C) (3)	18,255.				SUPPORT MISSION
(5) JUNIOR ACHIEVEMENT OF DALLAS, INC., 1201 EXECUTIVE DRIVE W RICHARDSON, TX 75081	75-0881589	501 (C) (3)	106,261.				SUPPORT MISSION
(6) JUNIOR ACHIEVEMENT OF DELAWARE, INC., 522 S. WALNUT STREET WILMINGTON, DE 19801	51-0078199	501 (C) (3)	7,169.				SUPPORT MISSION
(7) JUNIOR ACHIEVEMENT - ROCKY MOUNTAIN, INC., 1445 MARKET, SUITE 200 DENVER, CO 80202	84-0430495	501 (C) (3)	59,699.				SUPPORT MISSION
(8) JUNIOR ACHIEVEMENT OF CENTRAL IOWA, INC., 6100 GRAND AVENUE DES MOINES, IA 50312	42-0759070	501 (C) (3)	10,000.				SUPPORT MISSION
(9) JA OF SOUTHEASTERN MICHIGAN, INC., 577 E. LARNED, SUITE 200 DETROIT, MI 48226	38-1348535	501 (C) (3)	62,807.				SUPPORT MISSION
(10) JA OF THE DESERT SOUTHWEST, INC., 150 S. ALTO MESA, STE D EL PASO, TX 79912	74-1565161	501 (C) (3)	11,115.				SUPPORT MISSION
(11) JA OF SOUTHWESTERN INDIANA, INC., 431 E DIAMOND AVENUE EVANSVILLE, IN 47711	35-6048156	501 (C) (3)	6,188.				SUPPORT MISSION
(12) JA OF THE CHISHOLM TRAIL, INC., 6300 RIDGLEA STE 400 FORT WORTH, TX 76116	75-0944915	501 (C) (3)	36,095.				SUPPORT MISSION

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2013)

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

JUNIOR ACHIEVEMENT USA

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

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OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Employer identification number

84-1267604

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) JUNIOR ACHIEVEMENT OF GEORGIA, INC. 460 ABERNATHY ROAD NE ATLANTA, GA 30328	58-0598050	501 (C) (3)	157,038.				SUPPORT MISSION
(2) JA OF THE MICHIGAN GREAT LAKES, INC. 2650 E BELTLINE SE GRAND RPDS, MI 49546	38-1557861	501 (C) (3)	5,516.				SUPPORT MISSION
(3) JA OF CENTRAL N CAROLINA, INC. 3220 NORTHLINE AVENUE GREENSBORO, NC 27408	56-0844838	501 (C) (3)	25,048.				SUPPORT MISSION
(4) JA OF SOUTHWEST NEW ENGLAND, INC. 11 ASYLUM ST SUITE 601 HARTFORD, CT 06103	06-0665972	501 (C) (3)	28,385.				SUPPORT MISSION
(5) JA OF SOUTHEAST TEXAS, INC. 2115 EAST GOVERNORS CIR HOUSTON, TX 77092	74-1153957	501 (C) (3)	100,465.				SUPPORT MISSION
(6) JUNIOR ACHIEVEMENT OF NORTH FLORIDA, INC. 4049 WOODCOCK DR JACKSONVILLE, FL 32207	59-1021800	501 (C) (3)	21,826.				SUPPORT MISSION
(7) JUNIOR ACHIEVEMENT OF MIDDLE AMERICA, INC. 4049 PENNSYLVANIA AVE KANSAS CTY, MO 64111	44-0604809	501 (C) (3)	52,671.				SUPPORT MISSION
(8) JUNIOR ACHIEVEMENT OF EAST TENNESSEE, INC. 2135 N CHARLES G SEIVERS CLINTON, TN 37716	62-0810145	501 (C) (3)	14,332.				SUPPORT MISSION
(9) JUNIOR ACHIEVEMENT OF SOUTHERN NEVADA, INC. 7220 S. CIMARRON ROAD LAS VEGAS, NV 89113	88-0354481	501 (C) (3)	43,438.				SUPPORT MISSION
(10) JUNIOR ACHIEVEMENT OF THE BLUEGRASS, INC. 1092 DUVAL ST., STE.240 LEXINGTON, KY 40515	61-0606480	501 (C) (3)	6,300.				SUPPORT MISSION
(11) JA OF SOUTHERN CALIFORNIA, INC. 6250 FOREST LAWN DR LOS ANGELES, CA 90068	95-1799192	501 (C) (3)	133,773.				SUPPORT MISSION
(12) JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC. 1401 W MUHAMMED ALLI LOUISVILLE, KY 40203	61-0476694	501 (C) (3)	28,390.				SUPPORT MISSION

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3 Enter total number of other organizations listed in the line 1 table ▶

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2013)

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

JUNIOR ACHIEVEMENT USA

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) JA OF MEMPHIS AND THE MID-SOUTH, INC. 307 MADISON AVENUE MEMPHIS, TN 38103	62-0549549	501 (C) (3)	17,715.				SUPPORT MISSION
(2) JUNIOR ACHIEVEMENT OF GREATER MIAMI, INC. 13490 NW 7 AVENUE NORTH MIAMI, FL 33168	59-0807486	501 (C) (3)	79,136.				SUPPORT MISSION
(3) JA OF MIDDLE TENNESSEE, INC. 120 FOWELL PLACE NASHVILLE, TN 37204	62-0582571	501 (C) (3)	7,776.				SUPPORT MISSION
(4) JA OF SOUTHERN MASSACHUSETTS, INC. 227 UNION STREET NEW BEDFORD, MA 02740	04-3193575	501 (C) (3)	6,750.				SUPPORT MISSION
(5) JUNIOR ACHIEVEMENT OF NEW JERSEY, INC. 4365 ROUTE 1 SOUTH PRINCETON, NJ 08540	22-1774147	501 (C) (3)	73,029.				SUPPORT MISSION
(6) JA OF GREATER NEW ORLEANS, INC. 5100 ORLEANS AVENUE NEW ORLEANS, LA 70124	72-0469314	501 (C) (3)	32,000.				SUPPORT MISSION
(7) JUNIOR ACHIEVEMENT OF NEW YORK, INC. 420 LEXINGTON AVE. NEW YORK, NY 10170	13-3031828	501 (C) (3)	265,171.				SUPPORT MISSION
(8) JA OF NORTHERN CALIFORNIA, INC. 3003 OAK RD STE 109 WALNUT CREEK, CA 94597	94-1322179	501 (C) (3)	113,455.				SUPPORT MISSION
(9) JUNIOR ACHIEVEMENT OF OKLAHOMA, INC. 3947 SOUTH 103RD EAST AVE TULSA, OK 74146	73-0757053	501 (C) (3)	35,967.				SUPPORT MISSION
(10) JUNIOR ACHIEVEMENT OF CENTRAL FLORIDA, INC. 2121 CAMDEN ROAD ORLANDO, FL 32803	59-0972112	501 (C) (3)	29,439.				SUPPORT MISSION
(11) JUNIOR ACHIEVEMENT OF CENTRAL ILLINOIS, INC. 4450 N PROSPECT RD PEORIA HEIGHTS, IL 61616	37-0657600	501 (C) (3)	6,160.				SUPPORT MISSION
(12) JUNIOR ACHIEVEMENT OF DELAWARE VALLEY, INC. 993 OLD EAGLE SCHOOL ROAD WAYNE, PA 19087	23-1386172	501 (C) (3)	53,163.				SUPPORT MISSION

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) (2013)**

Employer identification number  
84-1267604

Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990). Attach to Form 990.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

JUNIOR ACHIEVEMENT USA

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.  Yes  No

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) JA OF WESTERN PENNSYLVANIA, INC. ONE ALLEGHENY SQUARE, PITTSBURGH, PA 15212	25-09883059	501 (C) (3)	5,868.				SUPPORT MISSION
(2) JA OF OREGON AND SW WASHINGTON INC. 7830 S.E. FOSTER ROAD PORTLAND, OR 04101	93-0384007	501 (C) (3)	16,300.				SUPPORT MISSION
(3) JA OF ROCHESTER, NEW YORK, INC. 259 MONROE AVE STE 108 ROCHESTER, NY 14607	16-0956147	501 (C) (3)	5,573.				SUPPORT MISSION
(4) JUNIOR ACHIEVEMENT OF SACRAMENTO, INC. 3800 WATT AVE STE 165 SACRAMENTO, CA 95821	94-6080866	501 (C) (3)	36,272.				SUPPORT MISSION
(5) JUNIOR ACHIEVEMENT OF SOUTH TEXAS, INC. 403 E RAMSEY STE 201 SAN ANTONIO, TX 78216	74-2061852	501 (C) (3)	22,419.				SUPPORT MISSION
(6) JA OF SAN DIEGO & IMPERIAL CO., INC. 4756 MISSION GORGE PLC SAN DIEGO, CA 92120	95-1727087	501 (C) (3)	37,954.				SUPPORT MISSION
(7) JUNIOR ACHIEVEMENT OF WASHINGTON 1700 WESTLAKE AVENUE N. SEATTLE, WA 98109	91-0604913	501 (C) (3)	26,318.				SUPPORT MISSION
(8) JUNIOR ACHIEVEMENT OF NORTH LOUISIANA, INC. 3825 GILBERT DR SHREVEPORT, LA 71104	72-0595081	501 (C) (3)	8,092.				SUPPORT MISSION
(9) JA OF WESTERN MASSACHUSETTS, INC. 1500 MAIN ST STE 217 SPRINGFIELD, MA 01115	04-20888304	501 (C) (3)	11,725.				SUPPORT MISSION
(10) JUNIOR ACHIEVEMENT OF GREATER ST. LOUIS, IN 17339 N OUTER FORTY CHESTERFIELD, MO 63005	43-0652112	501 (C) (3)	44,474.				SUPPORT MISSION
(11) JA OF SOUTHWEST CONNECTICUT, INC. 200 CONNECTICUT AVENUE NORWALK, CT 06854	06-09332913	501 (C) (3)	25,791.				SUPPORT MISSION
(12) JA OF TAMPA BAY, INC. 13805 58TH ST N CLEARWATER, FL 33760	59-1098499	501 (C) (3)	88,335.				SUPPORT MISSION

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▲
- 3 Enter total number of other organizations listed in the line 1 table ▲

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2013)

Employer identification number  
84-1267604

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

JUNIOR ACHIEVEMENT USA

**Part I General Information on Grants and Assistance**

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) JA OF THE UPPER MIDWEST, INC. 1800 WHITE BEAR AVE N MAPLEWOOD, MN 55109	41-1424988	501 (C) (3)	119,543.				SUPPORT MISSION
(2) JUNIOR ACHIEVEMENT OF UTAH, INC. 515 EAST 100 S SALT LAKE CITY, UT 84102	87-0225875	501 (C) (3)	46,095.				SUPPORT MISSION
(3) JA OF MAHONING VALLEY, INC. NORTHWOOD CENTER GIRARD, OH 44420	34-1714400	501 (C) (3)	11,049.				SUPPORT MISSION
(4) JUNIOR ACHIEVEMENT OF GREATER WASHINGTON, I 1050 17TH ST STE 750 WASHINGTON, DC 20036	54-0788947	501 (C) (3)	31,294.				SUPPORT MISSION
(5) JA OF THE PALM BEACHES & TREASURE COAST, IN 6903 VISTA PKY N WEST PALM BEACH, FL 33411	59-2333738	501 (C) (3)	8,048.				SUPPORT MISSION
(6) JA OF THE HUDSON VALLEY, INC. 12 HAMILTON PL. FARRYTOWN, NY 10591	13-3001065	501 (C) (3)	23,490.				SUPPORT MISSION
(7) JUNIOR ACHIEVEMENT OF WISCONSIN, INC. 11111 W LIBERTY DR MILWAUKEE, WI 53224	39-0826295	501 (C) (3)	41,385.				SUPPORT MISSION
(8) JA WORLDWIDE 177 MILK ST BOSTON, MA 02109	27-3666259	501 (C) (3)	24,000.				SUPPORT MISSION
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 68.

3 Enter total number of other organizations listed in the line 1 table 68.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule I (Form 990) (2013)

Employer identification number  
84-1267604

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

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

SCH I, PART I, QUESTION 2

GRANTS ARE TO US JA OFFICES ONLY. MOST OF THE FUNDING FOR THE GRANTS ARE PROVIDED BY DONORS WHO PLACE RESTRICTIONS ON THE USE OF THE MONIES. GRANT USAGE REQUIREMENTS VARIES BY DONOR. THE REPORTING REQUIRED IS SUBMITTED TO THE ORGANIZATIONS GRANT STEWARD OR DIRECTLY TO THE DONOR.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
- ▶ Attach to Form 990. ▶ See separate instructions.
- ▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Name of the organization

JUNIOR ACHIEVEMENT USA

Employer identification number

84-1267604

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use          |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence          |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)          |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
  - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
  - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
  - b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
  - b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1b</b>	X	
<b>2</b>	X	
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>	X	
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2013

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

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

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

	(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	JACK E. KOSAKOWSKI PRESIDENT & CEO	(i)	321,889.	100,688.	9,698.	27,979.	482,291.	0
		(ii)	0	0	0	0	0	0
2	TIMOTHY ARMIJO CFO	(i)	150,483.	30,150.	1,728.	37,421.	238,138.	0
		(ii)	0	0	0	0	0	0
3	CECIL THIBODEAUX EVP	(i)	236,859.	52,700.	2,822.	48,374.	357,590.	0
		(ii)	0	0	0	0	0	0
4	GARY BLANCHETTE SVP - DEVELOPMENT	(i)	206,081.	36,124.	2,451.	90,909.	357,465.	0
		(ii)	0	0	0	0	0	0
5	LISA GILLIS CHIEF ACADEMIC OFFICER	(i)	218,494.	30,312.	1,380.	3,305.	273,038.	0
		(ii)	0	0	0	0	0	0
6	SUSAN LIU SVP - BUSINESS IMPROVEMENT	(i)	170,474.	37,843.	457.	5,804.	233,911.	0
		(ii)	0	0	0	0	0	0
7	LESLIE PIERCE SVP TALENT & ORGANIZATION DEV.	(i)	153,245.	0	2,689.	18,560.	184,443.	0
		(ii)	0	0	0	0	0	0
8	ED GROCHOLSKI SVP - BRAND	(i)	202,297.	26,106.	833.	4,538.	255,641.	0
		(ii)	0	0	0	0	0	0
9	HOWARD BARTNER SVP - OPERATIONS	(i)	147,156.	26,505.	930.	42,029.	241,883.	0
		(ii)	0	0	0	0	0	0
10	STEVE SCHMIDT SVP - OPERATIONS	(i)	150,143.	29,968.	916.	14,028.	215,621.	0
		(ii)	0	0	0	0	0	0
11	CHRISTINE KUNZ VP - OPERATIONS	(i)	131,128.	0	1,455.	10,563.	159,506.	0
		(ii)	0	0	0	0	0	0
12		(i)						
		(ii)						
13		(i)						
		(ii)						
14		(i)						
		(ii)						
15		(i)						
		(ii)						
16		(i)						
		(ii)						



**Part III Supplemental Information**

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

HEALTH OR SOCIAL CLUB DUES  
SCHEDULE J, PART I, LINE 1A  
MONTHLY CLUB MEMBERSHIP FEES FOR THE PRESIDENT & CEO OF JA USA IS PART OF  
THE BENEFITS PROVIDED TO THIS POSITION. THESE FEES ARE INCLUDED AS  
TAXABLE INCOME EACH YEAR ON THEIR W-2.

DESCRIPTION OF NON-FIXED PAYMENTS  
SCHEDULE J, PART I, LINE 7  
THERE ARE TWO KEY COMPONENTS OF THE EXECUTIVE COMPENSATION PHILOSOPHY OF

JA USA:  
1. REWARD FOR PERFORMANCE  
2. PROVIDE REASONABLE AND COMPETITIVE PAY PACKAGES WITH THOSE OFFERED TO  
LEADERS OF ORGANIZATIONS COMPARABLE TO JA USA IN TERMS OF SIZE,  
COMPLEXITY AND MISSION IMPACT.

AS PART OF THE "REWARD FOR PERFORMANCE" THE EXECUTIVE COMPENSATION  
SUBCOMMITTEE (THE COMMITTEE) OF THE BOARD OF GOVERNORS HAS ADOPTED THE  
MANAGEMENT INCENTIVE COMPENSATION PLAN (MIC). MIC IS INTENDED TO  
STIMULATE AND REWARD RESULTS AND ACHIEVEMENT NECESSARY TO ACCOMPLISH THE

**Part III Supplemental Information**

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

MULTIPLE OBJECTIVES OF JA USA'S STRATEGIC PLAN. THE MIC PLAN IS DESIGNED

TO:

A) MOTIVATE GROWTH IN TOTAL REVENUE AND PROGRAM IMPACT TO ENHANCE SERVICES TO THE COMMUNITY.

B) LINK ACCOMPLISHMENT OF THE ORGANIZATION'S MISSION AND OBJECTIVES WITH THE COMPENSATION OF THE ORGANIZATION'S MANAGERS.

C) CONTROL COSTS BY PROVIDING VARIABLE COMPENSATION BASED ON PERFORMANCE TO ENHANCE AFFORDABILITY AND OFFERING A COMPETITIVE INCENTIVE AND TOTAL CASH COMPENSATION PROGRAM.

D) ENHANCE THE FOCUS, MOTIVATION AND RETENTION OF KEY ORGANIZATIONAL MANAGERS.

IN SETTING THE ANNUAL INCENTIVE COMPENSATION OPPORTUNITIES FOR THE MIC FOR EACH EXECUTIVE, THE COMMITTEE TARGETS THE MEDIAN OF THE COMPARABLE MARKET DATA FOR THAT EXECUTIVE'S POSITION FOR TARGET PERFORMANCE AND THE UPPER QUARTILE OF THE COMPARABLE MARKET DATA FOR THAT EXECUTIVE'S POSITION FOR SUPERIOR PERFORMANCE. THERE IS A CAP ON THE AMOUNT OF INCENTIVE THAT ANY EXECUTIVE CAN EARN FROM THE MIC.

**Part III Supplemental Information**

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

THE COMMITTEE USES DISCRETION IN DETERMINING THE LEVEL OR ACHIEVEMENT OF CERTAIN PERFORMANCE MEASUREMENTS. THE COMMITTEE ALSO ANNUALLY EXAMINES THE COMPARABLE MARKET DATA FOR THESE POSITIONS, FOLLOWING THE THREE-STEP GOVERNANCE PROCESS DESCRIBED IN THE REGULATIONS TO SECTION 4958 ON INTERMEDIATE SANCTIONS TO ESTABLISH THE PRESUMPTION OF REASONABLE COMPENSATION.

THE GOVERNORS MAY, IN THEIR SOLE DISCRETION, AND AT ANY TIME, ELECT TO AMEND, SUSPEND, OR TERMINATE THE PLAN.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2013**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

JUNIOR ACHIEVEMENT USA

Employer identification number

84-1267604

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art . . . . .				
2 Art - Historical treasures . . . . .				
3 Art - Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities - Publicly traded . . . . .	X	1.	291.	FAIR MARKET VALUE
10 Securities - Closely held stock . . . . .				
11 Securities - Partnership, LLC, or trust interests . . . . .				
12 Securities - Miscellaneous . . . . .				
13 Qualified conservation contribution - Historic structures . . . . .				
14 Qualified conservation contribution - Other . . . . .				
15 Real estate - Residential . . . . .				
16 Real estate - Commercial . . . . .				
17 Real estate - Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ (SOFTWARE) . . . . .	X	1.	460,616.	FAIR MARKET VALUE
26 Other ▶ ( ) . . . . .				
27 Other ▶ ( ) . . . . .				
28 Other ▶ ( ) . . . . .				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . **29** 1.

	Yes	No
30 a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? . . . . .	X	
32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) (2013)

JSA

3E1298 1.000

**Part II** **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

---

CONTRIBUTIONS

PART I, COLUMN B

THE NUMBER IN COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTIONS RECEIVED.

DESCRIPTION OF OTHER NONCASH CONTRIBUTION

PART I, LINE 25

SOFTWARE UTILIZED ON JA USA SERVERS AND DESKTOP COMPUTERS AND LOCAL AREA  
COMPUTERS.

**SCHEDULE O**  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Name of the organization

JUNIOR ACHIEVEMENT USA

Employer identification number

84-1267604

ORGANIZATION'S MISSION CONT.

PART III, LINE 1

JUNIOR ACHIEVEMENT IS THE WORLD'S LARGEST ORGANIZATION DEDICATED TO GIVING YOUNG PEOPLE THE KNOWLEDGE AND SKILLS THEY NEED TO OWN THEIR ECONOMIC SUCCESS, PLAN FOR THEIR FUTURE, AND MAKE SMART ACADEMIC AND ECONOMIC CHOICES. OUR FINANCIAL LITERACY, WORK READINESS AND ENTREPRENEURSHIP PROGRAMS EMPOWER STUDENTS TO MAKE A CONNECTION BETWEEN WHAT THEY LEARN IN SCHOOL AND HOW IT CAN BE APPLIED IN THE REAL WORLD. THIS ENHANCES THE RELEVANCE OF THEIR CLASSROOM LEARNING AND INCREASES THEIR UNDERSTANDING OF THE VALUE OF STAYING IN SCHOOL.

MEMBERS

PART VI, LINE 6 & 7B

THE SOLE MEMBER OF THE ORGANIZATION IS JA WORLDWIDE, INC. APPROVAL MUST BE OBTAINED FROM THE MEMBER FOR THE FOLLOWING:

- AMENDMENT, MODIFICATION, OR RESTATEMENT OF THE ARTICLES OF INCORPORATION OR BYLAWS;
  - MERGER, CONSOLIDATION, REORGANIZATION, OR DISSOLUTION OF JUNIOR ACHIEVEMENT USA (JA USA), OR THE SALE, LEASE OR EXCHANGE, OR OTHER DISPOSITION, TRANSFER OR CONVEYANCE OF ALL OF SUBSTANTIALLY ALL OF ITS NET ASSETS;
  - ANY MATERIAL CHANGE IN ANY CURRENT NONPROFIT PURPOSES AND OBJECTIVES OF JA USA;
- ENTERING INTO ANY OPERATING AGREEMENT BETWEEN JA USA AND ANY OF ITS

Name of the organization JUNIOR ACHIEVEMENT USA	Employer identification number 84-1267604
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LOCAL AREAS.

DESCRIBE PROCESS TO REVIEW 990

PART VI, LINE 11B

THE FORM 990 IS PREPARED BY OUR EXTERNAL AUDIT FIRM AND IS REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD. A DRAFT IS SUPPLIED VIA A WEB SITE LINK FOR THE ENTIRE BOARD TO REVIEW BEFORE FILING THE FINAL 990 WITH THE IRS.

DESCRIBE HOW CONFLICT OF INTEREST POLICY IS MONITORED & ENFORCED

PART VI, LINE 12C

A CONFLICT OF INTEREST QUESTIONNAIRE IS SENT VIA EMAIL OR HAND DELIVERED TO INTERESTED PARTIES EACH YEAR REQUESTING VERIFICATION OF POSSIBLE CONFLICTS. IF A CONFLICT IS DISCLOSED IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICT OF INTEREST, AN INTERESTED PERSON MUST DISCLOSE THE EXISTENCE OF THE INTEREST AND BE GIVEN THE OPPORTUNITY TO DISCLOSE ALL MATERIAL FACTS TO THE DIRECTORS AND MEMBERS OF THE COMMITTEES WITH GOVERNING BOARD DELEGATED POWERS CONSIDERING THE PROPOSED TRANSACTION OR ARRANGEMENT.

AFTER DISCLOSURE OF THE INTEREST AND ALL MATERIAL FACTS, AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON, HE OR SHE SHALL LEAVE THE GOVERNING BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE IF A CONFLICT OF INTEREST EXISTS.

Name of the organization JUNIOR ACHIEVEMENT USA	Employer identification number 84-1267604
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DESCRIBE PROCESS FOR DETERMINING COMPENSATION

PART VI, LINE 15A & 15B

THE GOVERNANCE PROCESS FOR DETERMINING COMPENSATION FOR THE ORGANIZATION'S CEO AND OTHER TOP MANAGEMENT IS MODELED AFTER THE REQUIREMENTS IN INTERNAL REVENUE CODE SECTION 4958 TO ESTABLISH THE PRESUMPTION OF REASONABLE COMPENSATION. COMPENSATION WAS REVIEWED AND APPROVED BY THE EXECUTIVE COMPENSATION SUBCOMMITTEE (THE COMMITTEE) OF THE BOARD, WHICH IS COMPRISED OF INDEPENDENT PERSONS. BY ENGAGING AN INDEPENDENT COMPENSATION CONSULTANT, THE COMMITTEE CONSIDERED COMPARABLE MARKET DATA FROM PUBLISHED SURVEYS AND FORM 990 OF COMPARABLE ORGANIZATIONS IN EVALUATING THE COMPENSATION FOR EACH INDIVIDUAL.

THE COMMITTEE CONDUCTED A REVIEW OF THIS COMPARABILITY DATA AND DOCUMENTED ITS DELIBERATION AND DISCUSSION IN MINUTES THAT ARE RETAINED WITH THE OTHER GOVERNANCE MATERIALS OF THE ORGANIZATION. THE COMMITTEE FOLLOWED THE PROCESS TO ESTABLISH THE PRESUMPTION THAT COMPENSATION PAID TO THE ORGANIZATION'S CEO AND OTHER TOP MANAGEMENT FOR PURPOSES OF SECTION 4958 BY RELYING ON PROFESSIONAL ADVICE IN THE WRITTEN OPINION OF REASONABLENESS FROM THE INDEPENDENT COMPENSATION CONSULTANT. THIS REVIEW PROCESS IS CONDUCTED ANNUALLY AND WAS LAST DONE IN 2013.

DESCRIBE HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC

PART VI, LINE 19

JUNIOR ACHIEVEMENT, USA MAKES ITS FINANCIAL STATEMENTS, GOVERNING DOCUMENTS, AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON REQUEST.



Name of the organization JUNIOR ACHIEVEMENT USA	Employer identification number 84-1267604
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## DOCUMENT RETENTION AND DESTRUCTION POLICY

## PART VI LINE 14

JUNIOR ACHIEVEMENT USA FOLLOWS A PROCESS FOR DOCUMENT RETENTION AND DESTRUCTION BASED UPON THE AICPA RECOMMENDED RETENTION PERIOD. THE PROCESS IS NOT A WRITTEN POLICY ADOPTED BY THE BOARD THEREFORE THE QUESTION MUST BE ANSWERED NO.

## COMPENSATION

## PART VII

COMPENSATION DELIBERATIONS TAKE INTO ACCOUNT SERVICES PROVIDED TO THE FILING ORGANIZATION AND ITS AFFILIATES. REVENUE PRESENTED IN THE FORM 990 DOES NOT INCLUDE THE REVENUE OF THE 116 JA AREA AFFILIATES WHO ARE PART OF THE JA USA NETWORK THAT JA USA OVERSEES. IN FYE 2014, REVENUE OF ALL AFFILIATES TOTALED \$187 MILLION.

## OTHER CHANGES IN NET ASSETS

## PART XI, LINE 9

NET ASSET TRANSFER TO AFFILIATE (860,587)  
ATTACHMENT 1

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
MOORE WALLACE INC/RR DONNELLY PO BOX 730216 DALLAS, TX 75373	STORAGE/ASSEMBLY	1,353,434.
SPARK AGENCY, INC. PO BOX 790379 ST. LOUIS, MO 63179	TRANSPORT/STORAGE	637,486.
SNI COMPANIES	TEMP STAFFING	529,324.

Name of the organization JUNIOR ACHIEVEMENT USA	Employer identification number 84-1267604
--	--

ATTACHMENT 1 (CONT'D)

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
PO BOX 814238 HOLLYWOOD, FL 33081		
NOGGIN LABS 4619 N RAVENSWOOD STE 303 CHICAGO, IL 60640	HOSTING/DEVELOPMENT	372,350.
PORTER NOVELLI 1838 SOULTIONS CENTER CHICAGO, IL 60677	MARKETING	287,714.

ATTACHMENT 2

FORM 990, PART VIII - GROSS SALES AND COST OF GOODS SOLD

GROSS SALES LESS RETURNS AND ALLOWANCES .....	14,259,030.
INVENTORY AT BEGINNING OF YEAR .....	3,326,072.
PURCHASES .....	4,789,651.
SALARIES AND WAGES .....	
OTHER COSTS .....	
SUBTOTAL .....	8,115,723.
MINUS ENDING INVENTORY .....	2,807,279.
COST OF GOODS SOLD .....	5,308,444.

ATTACHMENT 3

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
EQUITY SECURITIES	3,652,810.	3,329,273.	FMV

Name of the organization JUNIOR ACHIEVEMENT USA	Employer identification number 84-1267604
--	--

ATTACHMENT 3 (CONT'D)

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

<u>DESCRIPTION</u>	<u>BEGINNING BOOK VALUE</u>	<u>ENDING BOOK VALUE</u>	<u>COST OR FMV</u>
FIXED INCOME MUTUAL FUNDS AND  MUNICIPAL SECURITIES	5,856,218.	3,966,279.	FMV
TOTALS	<u>9,509,028.</u>	<u>7,295,552.</u>	

ATTACHMENT 4

FORM 990, PART X - SECURED MORTGAGES AND NOTES PAYABLE

LENDER: IKON COPIER  
 ORIGINAL AMOUNT: 55,040.  
 INTEREST RATE: 1.860000  
 DATE OF NOTE: 04/08/2009  
 MATURITY DATE: 03/21/2014  
 REPAYMENT TERMS: MONTHLY LEASE PMTS OF \$960.50  
 SECURITY PROVIDED: EQUIPMENT  
 PURPOSE OF LOAN: CAPITAL LEASE

BEGINNING BALANCE DUE ..... 8,578.  
 ENDING BALANCE DUE .....

LENDER: IKON COPIER  
 ORIGINAL AMOUNT: 526,707.  
 INTEREST RATE: 2.710000  
 DATE OF NOTE: 06/30/2009  
 MATURITY DATE: 09/01/2014  
 REPAYMENT TERMS: MONTHLY LEASE PMTS OF \$9,439.70  
 SECURITY PROVIDED: EQUIPMENT  
 PURPOSE OF LOAN: CAPITAL LEASE

BEGINNING BALANCE DUE ..... 139,070.  
 ENDING BALANCE DUE .....

Name of the organization JUNIOR ACHIEVEMENT USA	Employer identification number 84-1267604
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ATTACHMENT 4 (CONT'D)

LENDER: IKON COPIER  
 ORIGINAL AMOUNT: 58,140.  
 INTEREST RATE: 2.710000  
 DATE OF NOTE: 06/30/2009  
 MATURITY DATE: 09/01/2014  
 REPAYMENT TERMS: MONTHLY LEASE PMTS OF \$1,042.00  
 SECURITY PROVIDED: EQUIPMENT  
 PURPOSE OF LOAN: CAPITAL LEASE

BEGINNING BALANCE DUE ..... 15,351.  
 ENDING BALANCE DUE ..... \_\_\_\_\_

LENDER: HASSLER POSTAGE MACHINE  
 ORIGINAL AMOUNT: 18,298.  
 INTEREST RATE: 1.650000  
 DATE OF NOTE: 01/03/2014  
 MATURITY DATE: 10/01/2018  
 REPAYMENT TERMS: MONTHLY LEASE PMTS OF \$321.99  
 SECURITY PROVIDED: EQUIPMENT  
 PURPOSE OF LOAN: CAPITAL LEASE

BEGINNING BALANCE DUE .....  
 ENDING BALANCE DUE ..... 16,745.

Name of the organization JUNIOR ACHIEVEMENT USA	Employer identification number 84-1267604
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ATTACHMENT 4 (CONT'D)

LENDER: RICOH COPIER  
 ORIGINAL AMOUNT: 294,308.  
 INTEREST RATE: 1.290000  
 DATE OF NOTE: 05/01/2014  
 MATURITY DATE: 05/01/2018  
 REPAYMENT TERMS: MONTHLY LEASE PMTS OF \$6,294.27  
 SECURITY PROVIDED: EQUIPMENT  
 PURPOSE OF LOAN: CAPITAL LEASE

BEGINNING BALANCE DUE .....	
ENDING BALANCE DUE .....	<u>289,536.</u>
TOTAL BEGINNING MORTGAGES AND OTHER NOTES PAYABLE	<u>162,999.</u>
TOTAL ENDING MORTGAGES AND OTHER NOTES PAYABLE	<u>306,281.</u>

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

JUNIOR ACHIEVEMENT USA

Employer identification number

84-1267604

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990. See separate instructions.

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 2013

Open to Public Inspection

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Table with 6 columns: (a) Name, address, and EIN; (b) Primary activity; (c) Legal domicile; (d) Total income; (e) End-of-year assets; (f) Direct controlling entity. Rows 1-6 are dashed lines.

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

Table with 7 columns: (a) Name, address, and EIN; (b) Primary activity; (c) Legal domicile; (d) Exempt Code section; (e) Public charity status; (f) Direct controlling entity; (g) Section 512(b)(13) controlled entity? (Yes/No). Rows 1-7 are dashed lines.

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

Schedule R (Form 990) 2013

**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) -----									
(2) -----									
(3) -----									
(4) -----									
(5) -----									
(6) -----									
(7) -----									

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

Table with columns: Description (1a-1s), Yes, No. Rows include Receipt of interest annuities, Gift/grant contributions, Loans/guarantees, Dividends, Sale of assets, Purchase of assets, Exchange of assets, Lease of facilities/equipment, Performance of services, Reimbursement for expenses, and Other transfers.

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

Table with columns: (a) Name of related organization, (b) Transaction type (a-s), (c) Amount involved, (d) Method of determining amount involved. Rows (1) through (6) are currently blank.



**Part VI Unrelated Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

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

**Part VII Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

## RELATED ORGANIZATIONS

## SCHEDULE R, PART II

JUNIOR ACHIEVEMENT USA AND ITS US AFFILIATES, MANY OF WHOM ARE INDICATED ON SCHEDULE I, ARE COVERED UNDER A GROUP EXEMPTION AND ARE RELATED FOR SCHEDULE R PURPOSES.

RELATED ENTITIES COVERED BY A GROUP EXEMPTION ARE NOT REQUIRED TO BE LISTED ON SCHEDULE R, PART II, HOWEVER, TRANSACTIONS BETWEEN JA USA AND THE RELATED ORGANIZATIONS ARE INDICATED ON SCHEDULE R, PART V, LINE 1.