JUNIOR ACHIEVEMENT USA FORM 990 TAX YEAR 2016 Form **990**

Return of Organization Exempt From Income Tax

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

thic f

2016

OMB No. 1545-0047

		of the Treasury enue Service	 Do not enter social security numbers on this form as it may Information about Form 990 and its instructions is at www 	•	•		Inspect						
A F	or ti	ne 201 <u>6 ca</u> le	ndar year, or tax year beginning 07/01, 2016, and en	ding		06/30,	20 17						
B Ch		upplicable: JUI	e of organization IIOR ACHIEVEMENT USA		D Employer ident		mber						
	Addr chan	ge Doing	Doing business as										
	Name	e change	ber and street (or P.O. box if mail is not delivered to street address) Room/sui	te	E Telephone num								
	ŧ		E EDUCATION WAY		(719) 540	-8000							
	termi	inated	or town, state or province, country, and ZIP or foreign postal code										
	Amei retur	n 001	LORADO SPRINGS, CO 80906		G Gross receipts \$		<u>5,094</u> ,	,941					
	Appli pend	ing	e and address of principal officer: JACK KOSAKOWSKI, PRES & CE	20	H(a) Is this a group subordinates?	return for	Yes	XN					
		ONI	E EDUCATION WAY COLORADO SPRINGS, CO 80906		H(b) Are all subordina	ates included?	Yes	N					
1 1	ax-e	empt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527	If "No," attach	a list. (see ins	structions)						
-		ite: 🕨 WWW.			H(c) Group exempti	ion number	▶ 11	.16					
K F	orm	of organization:	X Corporation Trust Association Other	ar of format	tion: 1992 M S	tate of legal	domicile:	CC					
Pa	rt I	Summar											
	1	Briefly descri	be the organization's mission or most significant activities: JA EMPOWERS	YOUNG	PEOPLE TO	OWN T	HEIR						
e		ECONOMIC	SUCCESS THROUGH VOLUNTEER-DELIVERED PROGRAMS	WHICH	GIVE THEM								
Governance		KNOWLEDO	E/SKILLS IN FINAN LITERACY, WORK READINESS & E	NTREPR	ENEURSHIP.								
veri	2	Check this bo	x 🕨 🥅 if the organization discontinued its operations or disposed of more	than 25%	of its net assets.								
Ô	3	Number of vo	ting members of the governing body (Part VI, line 1a)			3		35.					
Š	4		dependent voting members of the governing body (Part VI, line 1b)			4		34.					
ties	5 Total number of individuals employed in calendar year 2016 (Part V, line 2a)												
Activities &	6		of volunteers (estimate if necessary)			6		34.					
Ac	-		ed business revenue from Part VIII, column (C), line 12		🛏	- 7a		0.					
			business taxable income from Form 990-T, line 34			7b		0.					
				<u> </u>	Prior Year		urrent Ye	ear					
	8	Contributions	and grants (Part VIII, line 1h)		7,793,927	· .	9,237,	935.					
Revenue	9		ice revenue (Part VIII, line 2g)		4,828,358		4,850,						
evel 1	10		come (Part VIII, column (A), lines 3, 4, and 7d)		298,380			,101.					
	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,073,685		9,810,						
	12		e - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		22,994,350		4,393,						
	13		milar amounts paid (Part IX, column (A), lines 1-3)		3,502,525		2,685,						
	14		to or for members (Part IX, column (A), line 4)).	, ,	0					
	14		er compensation, employee benefits (Part IX, column (A), lines 5-10)		9,916,827		9,914,	-					
						·).	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0					
ben			fundraising fees (Part IX, column (A), line 11e) sing expenses (Part IX, column (D), line 25) ► 1,416,908.	•	C								
ËX			sing expenses (Part IX, column (D), line 25) ▶ 1 , 416 , 908 es (Part IX, column (A), lines 11a-11d, 11f-24e)	_	11,391,022) 1	1,949,	401					
			24,810,374		1,949, 4,549,								
	18		es. Add lines 13-17 (must equal Part IX, column (A), line 25)										
- 0	19	Revenue less	expenses. Subtract line 18 from line 12		-1,816,024 ning of Current Ye		, 156 - End of Yea						
Net Assets or Fund Balances					-								
sse	20		Part X, line 16)		26,191,624		6,213,						
Id B	21	Total liabilitie	s (Part X, line 26)	•	5,851,452		5,543,						
ž'n	22	Net assets or	fund balances. Subtract line 21 from line 20		20,340,172	2. 2	0,670,	850.					
Par	't II	Signatur											
Und	er pe	nalties of perjury	, I declare that I have examined this return, including accompanying schedules and st and be	atements, a	and to the best of r	my knowled	lge and be	lief, it i					

Sign Here	Signature of officer			Date	
	Type or print name and title				
Delia	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN
Paid	ADAM R SMITH CPA			self-employed	P00958966
Preparer Use Only	Firm's name ▶BKD, LLP	Firm's EIN ▶ 44-	0160260		
Use only	Firm's address >111 SOUTH TEJON, SUITE 80	Phone no. 719	471-4290		
May the II	RS discuss this return with the preparer shown	n above? (see instructions)			X Yes No
For Paper	rwork Reduction Act Notice, see the separate	e instructions.			Form 990 (2016)

Paperwork Reduction Act Notice, see the separate instructions FO

JUNIOR	ACHIEVEMENT	USA

_	n 990 (20		Page 2
Pa	rt III	Statement of Program Service Accomplishments	
4	Driafly	Check if Schedule O contains a response or note to any line in this Part III escribe the organization's mission:	X
1		SPIRE AND PREPARE YOUNG PEOPLE TO SUCCEED IN A GLOBAL ECONOMY.	
		DDITIONAL MISSION INFORMATION ON SCHEDULE O.	
2		organization undertake any significant program services during the year which were not listed on the rm 990 or 990-EZ?	Yes X No
3	If "Yes,'	describe these new services on Schedule O. organization cease conducting, or make significant changes in how it conducts, any program	
	services	? describe these changes on Schedule O.	Yes X No
4	expense	e the organization's program service accomplishments for each of its three largest program service s. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and al expenses, and revenue, if any, for each program service reported.	
) (Expenses \$ 18,268,800. including grants of \$ 2,685,808.) (Revenue \$ 24 RGANIZATION ASSISTED ITS US AREAS IN SETTING UP AND/OR AINING THEIR OWN ORGANIZATION TO ADMINISTER JUNIOR	,393,363.)
		ZEMENT PROGRAMS. JA'S MEMBERS REACHED APPROXIMATELY 4.8	
	MILLI	ON ELEMENTARY THROUGH POST-SECONDARY STUDENTS FOR THE YEAR	
	ENDED	6/30/2017.	
1b	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4d	Other r	rogram services (Describe in Schedule O.)	
	(Expension		
		ogram service expenses ► 18,268,800.	
SA E10	020 1.000		Form 990 (2016)
		62E 5974 4/25/2018 9:11:23 AM 4607	PAGE 3

Part IV Checklist of Required Schedules Yes 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A, is the organization engage in direct or indirect policical campaign activities on behalf of or in opposition to candidates for puble officer PI "Yes," complete Schedule C, Part I. 2 X 3 Did the organization solution to regarization engage in lobying activities, or have a section 501(h) 4 X 4 section 501(c)(3) organizations. Did the organization engage in lobying activities, or have a section 501(h) 4 X 5 Is the organization asset on 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar anuota as defined in Revenue Procedure 98-197 If "Yes," complete Schedule C, Part II. 5 6 Did the organization receives or hold a conservation easement, including easements for which donors have the right to provide advice on the distribution or invasiment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 7 8 Did the organization receive or hold a conservation easement, including easements, or similar amounts as defined in Revenue Proceedure 98-192 If "Yes," complete Schedule D, Part II. 7 8 Did the organization animatin collections of works of art, historical trasaures, or other similar assets? If "Yes," complete Schedule D, Part II. 7 9 Did the organization animatin collections of works	Page 3
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A, 1 2 Is the organization required to complete Schedule of Contributors (see instructions)?. 1 X 3 Did the organization required to complete Schedule of Contributors (see instructions)?. 3 3 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax yea? If "Yes," complete Schedule C, Part I. 4 X 5 Is the organization required to complete schedule C, Part I. 4 X 6 Did the organization requeres and the stay earl If "Yes," complete Schedule C, Part II. 4 X 6 Did the organization requeres and diministian any donor advised funds or any similar funds or accounts If "Yes," complete Schedule D, Part I. 6 6 7 Did the organization requeres or hold a conservation easement, including easements to preserve open space, the environment, historical and accouse I with X, or provide credit counseling, detst management, credit repair, or dets required to receive or hold a conservation easement, including easements to preserve open space, or dets reganization report an amount in Part X, line 21. for escrew or custodial account liability, serve as acustodial for amounts not listed in Part X, or provide credit counseling, detst management, credit repair, or dett reganization report an amount for land, buildings, and equipment in Part X, line 21.	
complete Schedule A. 1 2 Is the organization required to complete Schedule B. Schedule of Comtibutors (see instructions)?. 1 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "kes," complete Schedule C, Part II. 3 4 Section 501(c)(4) organizations. Bid the organization engage in lobbying activities, or have a section 501(i) 4 5 Is the organization ascention 501(c)(6) organization that receives membership dues. 5 6 Did the organization ascention 501(c)(6) organization that receives membership dues. 5 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic instructers? If "ses" complete Schedule D. Part II. 7 8 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic instructers? If "ses" complete Schedule D. Part II. 7 7 Did the organization request an anount in Part X, ine 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, ine 70, Part V. 9 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 12 that is 5% or more of its total assets reported in Part X, ine 167 If "ress", compl	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?. 2 X 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public offee? If "Yes," complete Schedule C, Part I. 3 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assassments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III, 4 4 5 Is the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investiment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I. 5 6 Did the organization requires on maintain collections of works of an, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II. 7 8 Did the organization requires on maintain collections of works of an, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II. 9 9 Did the organization resort on thisted in Part X, ine 21, lor escrew or custodial account liability, serve as custodian for amounts on listed in Part X, or provide credit counseling. debt management, credit repair, or debt neganization resort an amount for land, buildings, and equipment in Part X, line 12 that is 5% or ormore of it stotal assets reportent an Amount for investments-or	
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 andidates for public office? If "Yes," complete Schedule C, Part I. 3 4 xection 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year II "Yes," complete Schedule C, Part II. 5 Is the organization maintain any denor advised funds or any similar funds or accounts for which denors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 6 Did the organization maintain any denor advised funds or any similar funds or accounts for which denors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 6 Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 II "Yes," complete Schedule D, Part V. 10 Did the organization report an amount for investments-rogram related in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 167 II "Yes," complete Schedule D, Part X V. 11 Did the organization report an amount for investments-rogram related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 167 II "Yes," complete Schedule D, Part X V. 11 Did the organization report an amount for investments-rogram related in Part X, lin	
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Part III. 5 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I. 6 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic alnad areas, or historic structures? If "Yes," complete Schedule D, Part II. 6 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V. 9 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, premanent endowments, or quasi-nedwomments, Part S, organizet Schedule D, Part V. 9 11 If the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part V. 10 11 & X b Did the organization report an amount for investments-other securities in Part X, line 12? If "Yes," complete Schedule D, Part V. 11 2 Did the organization report an amount for other assets in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part X. 11 X 2 Did the organization report an amount for investments-other securities in Part X, line 13 that is 5% or moree of its total assets reported in Part X, lin	
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	Х
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	
Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	Х
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	
If "Yes," complete Schedule G, Part III	Х

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Part	V Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			37
		24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
	· · · · · · · · · · · · · · · · · · ·	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			37
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			v
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		х
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):	20-		х
a		28a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	204		Х
_	Schedule L, Part IV.	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		Х
20	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c 29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		х
31	conservation contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
31	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	51		
32	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
54	or IV, and Part V, line 1.	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
~	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	

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Par	t 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			
		· · ·	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0.			
	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return. 2a 91			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a		x
h	account)?	40		
a				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			37
	and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	70		x
	required to file Form 8282?	7c		
		7e		x
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	70 7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	If the organization received a contribution of qualities interior and property, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
Ũ	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40 -	against amounts due or received from them.)	12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	120		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b JSA	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0	14b	000	(2010

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Part	WI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 39			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 34	±		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			v
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			x
-	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4 5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6	X	
6	Did the organization have members or stockholders?	-		<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	7a		x
b	one or more members of the governing body?	10		
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7b	Х	
0	stockholders, or persons other than the governing body?			
8	the year by the following:			
2	The governing body?	8a	Х	
a b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
Ū	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	ə.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	Х	
b	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	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45.0	Х	
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	27	
40-	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	16a		х
h	with a taxable entity during the year?	Tou		
b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed \blacktriangleright 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)
10	available for public inspection. Indicate how you made these available. Check all that apply.	501(0	5,0,5	, orny)
	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 int	erest	policy	/. and
	financial statements available to the public during the tax year.			,,
20	State the name, address, and telephone number of the person who possesses the organization's books and record TIMOTHY ARMIJO ONE EDUCATION WAY COLORADO SPRINGS, CO 80906 719-540-6235	s: ►		
	TIMOTHY ARMIJO ONE EDUCATION WAY COLORADO SPRINGS, CO 80906 719-540-6235			
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Part VII	Compensation of Officer Independent Contractors			•	• •	U	•	•••	
	Check if Schedule O conta	ns a response	e or note to	any lii	ne in this Part	VII			X

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.

				(0	C)					
(A)	(B)			Pos	sition			(D)	(E)	(F)
Name and Title	Average					e than c		Reportable	Reportable	Estimated
	hours per					is both		compensation	compensation from	amount of
	week (list any hours for				-	ctor/trustee)		from the	related organizations	other compensation
	related	or di	nsti	Officer	Key	High	Former	organization	(W-2/1099-MISC)	from the
	organizations		Institutional trustee	ë	Key employee	est o	ler	(W-2/1099-MISC)		organization
	below dotted	or tr	nal t		loye					and related organizations
		stee	rust		e	Dens				organizations
			ee			Highest compensated employee				
(1) ^{AINAR D. AIJALA, JR.}	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(2) EVELYN ANGELLE	2.00									
TREASURER	0.	Х		Х				0.	0.	0.
(3)ALAN S. ARMSTRONG	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(4)CATHERINE S. BRUNE	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(5)RODNEY D. BULLARD	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(6) JAMES M. CARROLL	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(7)LYNNE FORD	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(8)JEFF HANSBERRY	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(9)PERRY HEWITT	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(10) ^{KYLE H. HYBL}	2.00									
SECRETARY	0.	Х		Х				0.	0.	0.
(11)CLYDE D. KEATON	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(12)LOREN C. KLUG	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(13) LARRY LEVA	2.00									
DIRECTOR	0.	Х						0.	0.	0.
(14)ROBERT LLOYD	2.00									
DIRECTOR	0.	X						0.	0.	0.

(A)	(B)			(0	2)			(D)	(E)	(F)
(A) Name and title	Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Pos heck ss pe	ition more rson	e than o is both or/trust employee	an	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
15) PAUL E. MCKNIGHT	2.00									
DIRECTOR	0.	X						0.	0.	
L6) JULIE A. MONACO	2.00									
CHAIR	0.	X		Х				0.	0.	
17) JONAS PRISING	2.00									
DIRECTOR	0.	X						0.	0.	
L8) RICHARD A. WOODS	2.00									
DIRECTOR	0.	X						0.	0.	
L9) JACK E. KOSAKOWSKI	40.00									
PRESIDENT & CEO	0.	Х		Х				497,175.	0.	51,23
20) ASHEESH ADVANI	2.00									
DIRECTOR	0.	Х						0.	0.	
21) CHARLES GARCIA	2.00									
DIRECTOR	0.	X						0.	0.	
22) DAVID PAUL	2.00									
DIRECTOR	0.	x						0.	0.	
23) DOUGLAS OLSON	2.00									
DIRECTOR	0.	x						0.	0.	
24) DR. KERRY HEALEY	2.00									
DIRECTOR	0.	x						0.	0.	
25) LAWRENCE SIDWELL	2.00									
DIRECTOR	0.	x						0.	0.	
1b Sub-total								0.	0.	
c Total from continuation sheets to Part VII, S	Section A		• • •		• •			3,289,958.	0.	568,36
d Total (add lines 1b and 1c)	-				•••		•	3,289,958.	0.	568,36
 Total number of individuals (including but not reportable compensation from the organization 	limited to t		liste			e) who		ceived more than	\$100,000 of	
										Yes

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..... 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



Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of 1 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 more than \$100,000 in compensation from the organization ► 13	se listed above) who received	
421		- 000

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Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo			and H	lig		ed Employee	S (C	ontinue	d)	
(A) Name and title	(B) Average hours per week (list any hours for	box,	unles	ss pe	ition more rson	e than c is both or/trust	an	(D) Reportable compensation from the	(E) Reportable compensation f related organizations		am	(F) timated ount o other censati	f
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MI		orga and	om the anizatio I related nization	on d
26) MICHELLE LEE DIRECTOR	2.00	x						0.		0.			0.
27) RANDAL CAIN DIRECTOR	2.00	x						0.		0.			0.
28) RICHARD NEGRIN, ESQ. DIRECTOR	2.00	x						0.		0.			0.
29) TIMOTHY BAXTER	2.00												
DIRECTOR 30) TRIPP DAVIS	0.	X						0.		0.			0.
DIRECTOR 31) DENISE C. JOHNSON	0.	X						0.		0.			0.
DIRECTOR 32) DINO E.ROBUSTO	0.	X						0.		0.			0.
DIRECTOR 33) JEANETTE HERNANDEZ PRENGER	0.	X						0.		0.			0.
DIRECTOR 34) JEFFREY RUSSELL	0.	X						0.		0.			0.
DIRECTOR	0.	x						0.		0.			0.
35) RODNEY O. MARTIN DIRECTOR	0.	x						0.		0.			0.
36) TIMOTHY ARMIJO CFO	40.00 0.			х				215,289.		0.		63,4	126.
 1b Sub-total c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c) 2 Total number of individuals (including but not 							re	cceived more than	\$100,000 of				
reportable compensation from the organization	n 🕨	20)									Yes	No
3 Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											3	162	X
4 For any individual listed on line 1a, is the sorganization and related organizations graindividual	eater than	\$15	50,0	00?	lf	"Yes	s," (complete Schedu	le J for suc	h	4	X	
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue co	mpen	satio	on f	rom	n any	un	related organization	on or individua	al	5		X
Section B. Independent Contractors	,,						1		<u></u>	-	-		
1 Complete this table for your five highest com compensation from the organization. Report c year.													
(A) Name and business add	lress							(B) Description of se	rvices	С	(C) ompens	ation	

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 ►

$ \begin{array}{c}\\ 38\\\\ 39\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\$	 (A) Name and title CECIL THIBODEAUX EVP GARY BLANCHETTE SVP - DEVELOPMENT - THRU 4/17 SUSAN LUU SVP - DEVELOPMENT - THRU 4/17 SUSAN LUU SVP - BUSINESS IMPROVEMENT MARY CATHERINE DESROSIERS SVP EDUCATION & LEARNING HOWARD BARTNER SVP - OPERATIONS ED GROCHOLSKI SVP - BRAND LESLIE PIERCE SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT 	(B) Average hours per week (list any hours for related organizations below dotted line) 40.00 0. 0. 40.00 0. 0. 40.00 0. 0. 40.00 0. 0. 0. 40.00 0. 0. 0. 0. 0. 0. 0. 0. 0.	box,	unles	Pos heck ss pe	X X	e than o is both or/trust employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC) 348,858. 262,997. 236,994. 235,409. 194,763.	(E) Reportab compensation related organizatio (W-2/1099-M	n from ons	Esi am comp frc orga anc orga	(F) timated ount of other bensatio m the anizatio I related nizatior 50,3 57,5 29,4 6,5	f on d 380
$ \begin{array}{c}\\ 38\\\\ 39\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\$	<pre>CECIL THIBODEAUX EVP GARY BLANCHETTE SVP - DEVELOPMENT - THRU 4/17 SUSAN LUU SVP - BUSINESS IMPROVEMENT MARY CATHERINE DESROSIERS SVP EDUCATION & LEARNING HOWARD BARTNER SVP - OPERATIONS ED GROCHOLSKI SVP - BRAND LESLIE PIERCE SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT</pre>	hours per week (list any hours for related organizations below dotted line) 40.00 0. 40.00 0. 40.00 0. 40.00 0. 40.00 0. 40.00 0. 40.00 0. 40.00 0. 0. 40.00 0. 0. 40.00 0. 0. 40.00 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	box, office	unles r and	heck ss pe d a d Officer X	X X	is both or/trust	an ee)	compensation from the organization (W-2/1099-MISC) 348,858. 262,997. 236,994. 235,409.	compensation related organizatio	n from ons MISC) 0. 0. 0.	am comp frc orga anc orga	ount of other bensatio om the anizatio I related nizatior 50,3 57,5 29,4	f on d 380
$ \begin{array}{c}\\ 38\\\\ 39\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\$	EVP GARY BLANCHETTE SVP - DEVELOPMENT - THRU 4/17 SUSAN LUU SVP - BUSINESS IMPROVEMENT MARY CATHERINE DESROSIERS SVP EDUCATION & LEARNING HOWARD BARTNER SVP - OPERATIONS ED GROCHOLSKI SVP - BRAND LESLIE PIERCE SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT	organizations below dotted line) 40.00 0. 40.00 0. 40.00 0. 40.00 0. 40.00 0. 40.00 0. 40.00 0.	Individual trustee	Institutional trustee	x x	employee X X	Highest compensated employee	Former	(W-2/1099-MISC) 348,858. 262,997. 236,994. 235,409.	(W-2/1099-N	0. 0. 0.	orga anc orga	anizatio I related nizatior 50,3 57,5 29,4	d ns 880 508
$ \begin{array}{c}\\ 38\\\\ 39\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\$	EVP GARY BLANCHETTE SVP - DEVELOPMENT - THRU 4/17 SUSAN LUU SVP - BUSINESS IMPROVEMENT MARY CATHERINE DESROSIERS SVP EDUCATION & LEARNING HOWARD BARTNER SVP - OPERATIONS ED GROCHOLSKI SVP - BRAND LESLIE PIERCE SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT	$\begin{array}{c} 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 0.$	-		x	x			262,997. 236,994. 235,409.		0. 0. 0.		57,5 29,4	508
$ \begin{array}{c}\\ 39\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\$	SVP - DEVELOPMENT - THRU 4/17SUSAN LUUSVP - BUSINESS IMPROVEMENTMARY CATHERINE DESROSIERSSVP EDUCATION & LEARNINGHOWARD BARTNERSVP - OPERATIONSED GROCHOLSKISVP - BRANDLESLIE PIERCESVP TALENT & ORGANIZATION DEVSTEVE SCHMIDT	$\begin{array}{c} 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 0.$	-		x	x			262,997. 236,994. 235,409.		0. 0. 0.		57,5 29,4	508
$ \begin{array}{c}\\ 39\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\ 40\\\\$	SVP - DEVELOPMENT - THRU 4/17SUSAN LUUSVP - BUSINESS IMPROVEMENTMARY CATHERINE DESROSIERSSVP EDUCATION & LEARNINGHOWARD BARTNERSVP - OPERATIONSED GROCHOLSKISVP - BRANDLESLIE PIERCESVP TALENT & ORGANIZATION DEVSTEVE SCHMIDT	$ \begin{array}{r} 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 0. \\ 0. \\ 0. \\ \end{array} $	-			x			236,994. 235,409.		0.		29,4	
$ \begin{array}{c}\\ 40\\\\ 41\\\\ 42\\\\ 42\\\\ 43\\\\ 44\\\\\\\\\\ $	SVP - BUSINESS IMPROVEMENTMARY CATHERINE DESROSIERSSVP EDUCATION & LEARNINGHOWARD BARTNERSVP - OPERATIONSED GROCHOLSKISVP - BRANDLESLIE PIERCESVP TALENT & ORGANIZATION DEVSTEVE SCHMIDT	$\begin{array}{c} 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 0.$	-		x	x			236,994. 235,409.		0.		29,4	
$ \begin{array}{c}\\ 41\\ -\\ 42\\ -\\ 43\\ -\\ 44\\ -\\ 45\\ -\\ 46\\ -\\ -\\ -\\ -\\ -\\ -\\ -\\ -\\ -\\ -\\ -\\ -\\ -\\$	MARY CATHERINE DESROSIERS SVP EDUCATION & LEARNING HOWARD BARTNER SVP - OPERATIONS ED GROCHOLSKI SVP - BRAND LESLIE PIERCE SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT	$ \begin{array}{r} 40.00 \\ 0. \\ 40.00 \\ \hline 0. \\ 40.00 \\ \hline 0. \\ 40.00 \\ 0. \\ 0. \\ \end{array} $	-		X	x			235,409.		0.			34
 41 42 43 43 44 45 46 	SVP EDUCATION & LEARNINGHOWARD BARTNERSVP - OPERATIONSED GROCHOLSKISVP - BRANDLESLIE PIERCESVP TALENT & ORGANIZATION DEVSTEVE SCHMIDT	$ \begin{array}{r} 0.\\ 40.00\\ 0.\\ 40.00\\ 0.\\ 40.00\\ 0.\\ 0.\\ 0.\\ \end{array} $	-			x							6,5	
$\frac{1}{42}$ $\frac{1}{43}$ $\frac{1}{44}$ $\frac{1}{45}$ $\frac{1}{46}$	HOWARD BARTNER SVP - OPERATIONS ED GROCHOLSKI SVP - BRAND LESLIE PIERCE SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT	$ \begin{array}{r} 40.00 \\ 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 0. \end{array} $	-			x							б,5	
	SVP - OPERATIONS ED GROCHOLSKI SVP - BRAND LESLIE PIERCE SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT	$ \begin{array}{c} 0. \\ 40.00 \\ 0. \\ 40.00 \\ 0. \\ 0. \end{array} $	-						194.763		0			642
43 $$ 44 $$ 45 $$ 46 $$	ED GROCHOLSKI SVP - BRAND LESLIE PIERCE SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT	40.00 0. 40.00 0.	-						194.763					
43 $$ 44 $$ 45 $$ 46 $$	SVP - BRAND LESLIE PIERCE SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT	0. 40.00 0.	-								0.1		58,4	83
${44}$ ${45}$ ${46}$	LESLIE PIERCE SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT	40.00				37								
${44}$ $\frac{45}{}$ $\frac{46}{}$	SVP TALENT & ORGANIZATION DEV STEVE SCHMIDT	0.				X			239,149.		Ο.		41,3	30
45 46 46	STEVE SCHMIDT		1											
45 46 46		10 00				X			218,974.	0.			41,7	00'
46		40.00												
46	SVP - OPERATIONS	0.	1			X			191,462.		Ο.		40,2	292
	CHRISTINE KUNTZ	40.00												
	VP - OPERATIONS	0.	1				Х		143,238.		Ο.		34,8	65
47	JACQUELINE DANT	40.00												
47	VP - OPERATIONS	0.					Х		138,593.		0.		34,6	64
т,	KRIS PONCIROLI	40.00												
	VP DONOR RELATIONS & DEV SVCS	0.					Х		126,950.		0.		27,3	96
1k	Sub-total	oction A												
	Total from continuation sheets to Part VII, S						• • •	5						
	Total number of individuals (including but not reportable compensation from the organization	limited to t		iste				o re	ceived more than	\$100,000 of	f			
													Yes	No
3	Did the organization list any former offic employee on line 1a? If "Yes," complete Schedu											3		X
4	For any individual listed on line 1a, is the sorganization and related organizations greater	sum of rep eater than	ortab \$15	le c 0,0	com 00?	pen ' If	isation "Yes	n ar	nd other compens	sation from	the			
5	<i>individual</i> Did any person listed on line 1a receive or								related organizatio	on or individ		4	X	
_	for services rendered to the organization? If "Ye ction B. Independent Contractors											5		Х
1	Complete this table for your five highest com compensation from the organization. Report c year.													
	(A)								(B)			(C)		
	Name and business add	tress							Description of se	ervices	C	ompens	ation	

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 ►

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	not ch unles er and	s pe d a d	ition more rson	e than c		(D) Reportable compensation	(E) Reportable compensation f	om	Est	(F) imated	
	organizations below dotted	Individual tru or director	Institut	Ofi		or/trust	ee)	from the	related		C	ount of other oensatio	f
		ustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS		orga and	m the nizatio related nizatior	b
LISA FRYE VP EMPLOYMENT & EMPLOYEE RELA	40.00 T 0.					X		110,447.		0.		19,8	384.
JEANNINE REILLY VP - EDUCATION DELIVERY & TEC	40.00 H 0.					x		129,660.		0.	-	11,2	231.
		-											
		-											
		-											
		-											
		-											
		-								_			
Sub-total Total from continuation sheets to Part VII, Total (add lines 1b and 1c)	Section A												
Total number of individuals (including but no reportable compensation from the organization		hose 20		d al	oove	e) who	o re	ceived more than	\$100,000 of				
Did the organization list any former of												Yes	No X
employee on line 1a? If "Yes," complete Sche For any individual listed on line 1a, is the organization and related organizations	e sum of rep	ortab	le c	om	pen	satio	n ai	nd other compens	sation from the	•	3		
<i>individual</i> . Did any person listed on line 1a receive							• •				4	Х	
for services rendered to the organization? <i>If</i> ction B. Independent Contractors											5		Х
Complete this table for your five highest co compensation from the organization. Repor year.											s tax		
(A) Name and business a	address							(B) Description of se	ervices	Con	(C) npens	ation	

(

(

		Check if Schedule O contair			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta: under sections 512-514
ts t	1a	Federated campaigns	1a	44,424.				
oun	b	Membership dues						
A A B A		Fundraising events						
ilar	d	Related organizations						
Sin	е	Government grants (contributions)) <u> </u>					
and Other Similar Amounts	f	All other contributions, gifts, grants and similar amounts not included above		9,193,511.				
P	g	Noncash contributions included in lines	s 1a-1f: \$					
	h	Total. Add lines 1a-1f	<u></u>	<u></u>	9,237,935.			
nue				Business Code				
eve	2a	AREA LICENSE FEE		611710	4,841,629.	4,841,629.		
Program Service Revenue	b	SUPPORT FEES		611710	8,760.	8,760.		
i Š	с							
Se	d							
am	е							
lgo	f	All other program service revenue						
2	g	Total. Add lines 2a-2f		<u></u>	4,850,389.			
	3	Investment income (includin	ig dividend	ds, interest,				
		and other similar amounts)			433,997.			433,997
	4	Income from investment of tax-ex	•		0.			
	5	Royalties			0.			
			(i) Real	(ii) Personal				
	6a	Gross rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)			0.			
	7a		Securities	(ii) Other				
		assets other than inventory	5,584,652.					
	b	Less: cost or other basis						
		and sales expenses	5,524,548.					
	c	Gain or (loss)	60,104.					
	d	Net gain or (loss)	••••	<u></u>	60,104.			60,104
e	8a	Gross income from fundraising						
ven		events (not including \$						
Re		of contributions reported on line 1						
Other Revenue		See Part IV, line 18		0.				
ð	b	Less: direct expenses			0			
	С	Net income or (loss) from fundrais		· · · · · · · •	0.			
	9a	Gross income from gaming activ						
		See Part IV, line 19		0.				
	b C	Less: direct expenses Net income or (loss) from gaming			0.			
	10a	Gross sales of inventory, returns and allowances		14,161,440.				
	b	Less: cost of goods sold	ь	-4,822,970.				
┝	C	Net income or (loss) from sales of	inventory		9,338,470.	9,338,470.		
┝		Miscellaneous Revenue		Business Code				
	11a	MISCELLANEOUS REVENUE		900099	472,468.	472,468.		
	b							
	С							
	d	All other revenue	-					
	е	Total. Add lines 11a-11d			472,468.			
SA	12	Total revenue. See instructions.		🕨	24,393,363.	14,661,327.		494,101 Form 990 (2016

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Part VIII Statement of Revenue

84-1267604

Page 9

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations mus		s. All other organization	ns must complete colun	nn (A).
Check if Schedule O contains a resp				
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,597,958.	2,597,958.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	0.			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	87,850.	87,850.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	3,081,395.	2,280,232.	677,907.	123,256
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	4,978,521.	3,487,526.	768,988.	722,007
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	782,603.	552,513.	129,691.	100,399
9 Other employee benefits	604,259.	437,008.	116,516.	50,735
10 Payroll taxes	467,432.	337,126.	87,121.	43,185
11 Fees for services (non-employees): a Management	0.			
b Legal	152,772.	73,895.	39,358.	39,519
c Accounting	65,505.	16,376.	49,129.	
d Lobbying	0.			
e Professional fundraising services. See Part IV, line 17 f Investment management fees	0. 83,871.		83,871.	
g Other. (If line 11g amount exceeds 10% of line 25, column				
(A) amount, list line 11g expenses on Schedule O.)	1,195,782.	830,643.	245,668.	119,471
12 Advertising and promotion	332,991.	316,341.	16,650.	
13 Office expenses	567,032.	280,873.	286,128.	31
14 Information technology	1,731,473.	1,195,933.	535,540.	
15 Royalties	0. 449,950.	211,645.	238,305.	
16 Occupancy	624,253.	468,676.	57,360.	98,217
17 Travel18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.	100,070.	57,500.	50,217
19 Conferences, conventions, and meetings	137,754.	21,891.	110,837.	5,026
20 Interest	133.	33.	100.	
21 Payments to affiliates	1,282,971.	320,743.	962,228.	
22 Depreciation, depletion, and amortization	248,464.	183,021.	49,732.	15,711
23 Insurance	21,290.	6,387.	14,903.	
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.)				
aJA PROGRAM EXPENSE	3,982,523.	3,647,639.	284,403.	50,481
bEVALUATIONS	258,168.	239,032.	19,136.	
cSUBSCRIPTIONS & DUES	47,594.	29,809.	14,751.	3,034
dTRAININGS	340,619.	288,745.	39,738.	12,136
e All other expenses	426,349.	356,905.	35,744.	33,700
 25 Total functional expenses. Add lines 1 through 24e 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if 	24,549,512.	18,268,800.	4,863,804.	1,416,908
following SOP 98-2 (ASC 958-720)	0.			

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Form 990 (2016)

	n 990 (Page II
Pa	rt X		n	te enville : in this D	ant V		
		Check if Schedule O contains a response of	or note	e to any line in this Pa		<u></u>	
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			5,652,885.	1	5,756,528.
	2	Savings and temporary cash investments			1,116,823.	2	340,522.
	3	Pledges and grants receivable, net			1,813,281.	3	1,744,776.
	4	Accounts receivable, net			779,015.	4	929,339.
	5	Loans and other receivables from current and	forme	r officers, directors,			
		trustees, key employees, and highest co	omper	nsated employees.			
		Complete Part II of Schedule L Loans and other receivables from other disqualified pers			0.	5	0
	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B) and sponsoring organizations of section 501(c)(9) volu	, and o	contributing employers			
s		organizations (see instructions). Complete Part II of Sche	dule L		0.	6	0.
Assets	7	Notes and loans receivable, net			0.	7	0.
As	8	Inventories for sale or use			3,539,250.	8	3,570,277.
	9	Prepaid expenses and deferred charges			336,005.	9	262,628.
	10 a	Land, buildings, and equipment: cost or					
			10a				
	b	Less: accumulated depreciation	10b	10,371,921.			
	11				11,092,082.	11	12,072,268.
	12	Investments - other securities. See Part IV, line 11			0.	12	0.
	13	Investments - program-related. See Part IV, line 11			0.	13	0.
	14	Intangible assets			0.	14	0.
	15	Other assets. See Part IV, line 11			76,178.	15	0.
	16	Total assets. Add lines 1 through 15 (must equal			26,191,624.	16	26,213,979.
	17	Accounts payable and accrued expenses			4,639,304.	17	4,787,093.
	18	Grants payable			0.	18	0.
	19	Deferred revenue			116,510.	19	77,974.
	20	Tax-exempt bond liabilities			0.	20	0.
	21	Escrow or custodial account liability. Complete Pa			947,720.	21	609,406.
ies	22	Loans and other payables to current and for					
Liabilities		trustees, key employees, highest compen					
-iab		disqualified persons. Complete Part II of Schedule			0.	22	0.
_	23	Secured mortgages and notes payable to unrelate			147,918.	23	68,656.
	24	Unsecured notes and loans payable to unrelated			0.	24	0.
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lines		, .	0.	0.5	0.
	20	of Schedule D Total liabilities. Add lines 17 through 25	• • •	•••••	5,851,452.	25 26	5,543,129.
	26	Organizations that follow SFAS 117 (ASC 958),	check		5,051,452.	20	5,545,125.
Ces		complete lines 27 through 29, and lines 33 and			12 (20 052		14 005 000
Fund Balances	27	Unrestricted net assets			13,630,953.	27	14,997,328.
l Ba	28	Temporarily restricted net assets			6,709,219.	28	5,673,522.
pur	29	Permanently restricted net assets			0.	29	0.
ŗ		Organizations that do not follow SFAS 117 (ASC 958) complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building, or equ	iipmer	nt fund		31	
μ	32	Retained earnings, endowment, accumulated inc	ome, o	or other funds		32	
Net	33	Total net assets or fund balances			20,340,172.	33	20,670,850.
	34	Total liabilities and net assets/fund balances			26,191,624.	34	26,213,979. Form 990 (2016)

Form 9	90 (2016)				Pa	ge 12
Part						
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1			93,3	
2	Total expenses (must equal Part IX, column (A), line 25)	2	2			512.
3	Revenue less expenses. Subtract line 2 from line 1	3				L49.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2			L72.
5	Net unrealized gains (losses) on investments	5		4	86,8	327.
6	Donated services and use of facilities	6				0.
7	Investment expenses	7				0.
8	Prior period adjustments	8				0.
9	Other changes in net assets or fund balances (explain in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	2	20,6	70,8	350.
Part						
	Check if Schedule O contains a response or note to any line in this Part XII					
			Г		Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		<u> </u>			
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in			
	Schedule O.					37
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted o	na			
	separate basis, consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for	oversi	ight			
	of the audit, review, or compilation of its financial statements and selection of an independent acc	counta	ant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, e	explair	nin			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	n in 🛛			
	the Single Audit Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not unc		the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au	dits.		3b		

 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 2016

		of the Treasury		►	Attach to Form 990 or	Form 990)-EZ.		Open to Public
Intern	al Reve	nue Service	Information	n about Schedule A	(Form 990 or 990-EZ) a	ind its ins	tructions	is at www.irs.gov/form99	0. Inspection
Name	e of the	organization						Employer identifica	ation number
JUN	IIOR	ACHIEVEM						84-126760	4
Par				•	0			art.) See instructions.	
	<u> </u>				is: (For lines 1 through		•	,	
1					tion of churches desc				
2					. (Attach Schedule E				
3		•	•		rganization described		• • •		
4			•	•	conjunction with a hos	spital de	scribed ir	n section 170(b)(1)(A)(i	iii). Enter the
			ne, city, and s						
5		•			a college or universit	y owned	d or ope	rated by a governmen	tal unit described in
				Complete Part II.)					
6			-	-	rnmental unit describe		-		
7		-		-	-	pport fro	om a go	vernmental unit or fror	n the general public
)(1)(A)(vi). (Compl					
8		-			b)(1)(A)(vi). (Complete	-			
9	· · · · · · · · · · · · · · · · · · ·	-		-			-	I in conjunction with a la	
		•	r a non-land-	grant college of ac	griculture (see instruct	tions). Ei	nter the i	name, city, and state of t	the college or
		niversity:							
10	re s	eceipts from	activities rela gross investm	ited to its exempt f nent income and u	unctions - subject to	certain e able inco	xception	ntributions, membershi s, and (2) no more than s section 511 tax) from b Part III.)	331/3 % of its
11					usively to test for publi				
12	🗌 A	n organizatio	on organized	and operated exclu	usively for the benefit	of, to pe	erform th	e functions of, or to ca	arry out the purposes
	0	of one or mor	e publicly su	pported organizati	ons described in sec	tion 509	(a)(1) or	section 509(a)(2). Se	e section 509(a)(3).
	С	Check the box	in lines 12a t	hrough 12d that d	escribes the type of s	upporting	g organiz	ation and complete line	es 12e, 12f, and 12g.
а		Type I. A su	pporting org	anization operated	, supervised, or contr	olled by	its supp	orted organization(s), ty	ypically by giving
		the supporte	ed organizatio	on(s) the power to	regularly appoint or e	lect a ma	ajority of	the directors or trustee	s of the
		supporting c	organization.	You must complet	e Part IV, Sections A	and B.			
b							with its	supported organization	n(s), by having
								is that control or mana	
					, Sections A and C.		-		
с		Type III fund	ctionally inte	grated. A supporti	ng organization opera	ated in co	onnectio	n with, and functionally	v integrated with,
			-		ns). You must comple				
d			-					ection with its supporte	ed organization(s)
		that is not fu	inctionally inte	egrated. The organ	nization generally mus	st satisfy	a distrib	ution requirement and	an attentiveness
		requirement	(see instruct	ions). You must co	omplete Part IV, Sect	ions A a	nd D, an	d Part V.	
е		Check this b	ox if the orga	anization received	a written determinatio	n from t	he IRS th	nat it is a Type I, Type II,	Type III
			-		ionally integrated sup				
f	Ente								
g	Prov	ide the follow	ing information	on about the suppo	orted organization(s).				
	(i) Nam	ne of supported of	organization	(ii) EIN	(iii) Type of organization		organization	(v) Amount of monetary	(vi) Amount of
					(described on lines 1-10 above (see instructions))		ur governing ment?	support (see instructions)	other support (see instructions)
						Yes	No	motraolionoy	monuolionoy
(A)									
(B)									
(C)									
(D)									
(E)									
Tota	ıl								

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. JSA 6E1210 1.000 71762E 5974 4/25/2018 9:11:23 AM

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016

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.)

Sec	ifts, grants, contributions, and embership fees received. (Do not clude any 'unusual grants.') 20,020,733. 9,619,828. 12,449,756. 7,793,927. 9,237,935. 59,122,179. ax revenues levied for the granization's benefit and either paid or expended on its behalf 0. 0. 0. ne value of services or facilities granization's without charge 0. 0. 0. ne value of services or facilities granization without charge 0. 0. 0. ne value of services or facilities granization without charge 0. 0. 0. services or for that a governmental unit or publicly upported organization) included on te 1 that exceeds 2% of the amount sown mine 11, column (f). 20,020,733. 9,619,828. 12,449,756. 7,793,927. 9,237,935. 59,122,179. averamental unit or publicly upported organization) included on te 1 that exceeds 2% of the amount sown mine 11, column (f). 20,020,733. 9,619,828. 12,449,756. 7,793,927. 9,237,935. 59,122,179. reges income from interest, dividends, syments received on securities loans, ints, royalites and income from similar purces. (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 215,033. 260,283. 419,746. 498,146. 433,997. 1.827,205.						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	20,020,733.	9,619,828.	12,449,756.	7,793,927.	9,237,935.	59,122,179.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	20,020,733.	9,619,828.	12,449,756.	7,793,927.	9,237,935.	59,122,179.
5	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
							20,022,613.
6							39,099,566.
	• •	(-) 2012	(b) 2042	(-) 2014	(-1) 2015	(-) 2010	
		. ,	. ,	()			
7 8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10						60,949,384.
12	Gross receipts from related activities, etc. (s	see instructions)				12	96,952,277.
13	First five years. If the Form 990 is for organization, check this box and stop here	or the organizat	ion's first, secon	d, third, fourth,	or fifth tax yea		
Sec	tion C. Computation of Public Sup	port Percenta	ge				
14	Public support percentage for 2016 (li					14	64.15%
15	Public support percentage from 2015	Schedule A, Pa	rt II, line 14			15	59.53%
	331/3% support test - 2016. If the o this box and stop here. The organization	on qualifies as a	publicly suppor	ted organizatio	n		. ► X
	331/3% support test - 2015. If the c check this box and stop here. The organization of	anization qualifie	es as a publicly s	supported organ	nization		▶ □
17a	10%-facts-and-circumstances test - 2 10% or more, and if the organization Part VI how the organization meets t	meets the "fac	cts-and-circumst	ances" test, ch	eck this box ar	nd stop here. E	xplain in
b	organization 10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the orga Explain in Part VI how the organization supported organization	on meets the "	facts-and-circum	stances" test.	The organizatio	on qualifies as a	publicly
18	Private foundation. If the organization instructions						

Schedule A (Form 990 or 990-EZ) 2016

Schedule A (Form 990 or 990-EZ) 2016

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
~	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from						
Ū	line 6.)						
Sec	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9	Amounts from line 6.						
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly						
10	carried on						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is f	L	tion's first, seco	nd third fourth	or fifth tax ve	ear as a section	
••	organization, check this box and stop here	-			•		
Sec	tion C. Computation of Public Sur						
15	Public support percentage for 2016 (line 8			mn (f))		15	%
16	Public support percentage from 2015 Sche					16	%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2016 (li			13, column (f))		17	%
18	Investment income percentage from 2015					18	%
	331/3% support tests - 2016. If the or						
	17 is not more than 331/3%, check th						
b	331/3% support tests - 2015. If the orga	-	-	-			
~	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization		•	•			
JSA							990 or 990-EZ) 2016
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Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

84-1267604

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

10b Schedule A (Form 990 or 990-EZ) 2016

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-	ule A (Form 990 or 990-EZ) 2016			Page 5
Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Secti	ion D. All Type III Supporting Organizations			L
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior			
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
•		-		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	ion E. Type III Functionally Integrated Supporting Organizations	5		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in	ctructi	onel	
	The organization satisfied the Activities Test. Complete line 2 below.	Suucu	0113).	
a h	The organization satisfied the Activities rest. Complete line 2 below.			
b	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	o in otra	-tione)	
С	The organization supported a governmental entity. Describe in Fait vi now you supported a government entity (see	; 11150100		No
2	Activities Test. Answer (a) and (b) below.		162	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b Schedule A (Form 990 or 990-EZ) 2016

JSA

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

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2016

Sect	Type III Non-Functionally Integrated 509(a)(3) ion D - Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish ex	empt purposes				
2						
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations			
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI). See instructions.					
7	Total annual distributions. Add lines 1 through 6.					
8	Distributions to attentive supported organizations to which	the organization is resp	onsive			
	(provide details in Part VI). See instructions.					
9	Distributable amount for 2016 from Section C, line 6					
10	Line 8 amount divided by Line 9 amount					
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016		
1	Distributable amount for 2016 from Section C, line 6					
	Underdistributions, if any, for years prior to 2016					
2	(reasonable cause required-explain in Part VI). See					
	instructions.					
3	Excess distributions carryover, if any, to 2016:					
а						
b						
С	From 2013					
d	From 2014					
е	From 2015					
f	Total of lines 3a through e					
g	Applied to underdistributions of prior years					
h	Applied to 2016 distributable amount					
i	Carryover from 2011 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2016 from					
	Section D, line 7: \$					
а	Applied to underdistributions of prior years					
b	Applied to 2016 distributable amount					
С	Remainder. Subtract lines 4a and 4b from 4.					
5	Remaining underdistributions for years prior to 2016, if					
	any. Subtract lines 3g and 4a from line 2. For result					
	greater than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2016. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2017. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
a	E (0010					
b	Excess from 2013					
<u>с</u>	Excess from 2014					
d	Excess from 2015					
е	Excess from 2016					

Page 8

Schedule A (Form 990 or 990-EZ) 2016

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

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

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/form99	0.

2016

Name of the organization

JUNIOR ACHIEVEMENT USA

Employer identification number

		84-1267604
Organization type (check one):	
Filers of:	Section:	
Form 990 or 990-EZ X 501(c)(³) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treated as a private for	undation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private founda	tion
	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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

E	5974	4/25/2018	9:21:52 AM	

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$400,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$836,200.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$839,218.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$190,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u>		\$Schedule	Person X Payroll Noncash (Complete Part II for noncash contributions.) B (Form 990, 990-EZ, or 990-PF) (2016)

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

Part I

Name of organization JUNIOR ACHIEVEMENT USA

9:21:52 AM

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)	

Name of organization JUNIOR ACHIEVEMENT USA

(a)	butors (See instructions). Use duplicate cop (b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$235,990.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>11</u>		\$200,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Pa				
Name of organization	JUNIOR	ACHIEVEMENT	USA	Employer identification number
				84-1267604

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
—		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
′a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)	Page 4
Name of organization JUNIOR ACHIEVEMENT USA	Employer identification number
	01 1067601

Part III	(10) that total more than \$1,000 for th	e year from any one contr ns completing Part III, enter t year. (Enter this information	bins described in section 501(c)(7), (8), or ributor. Complete columns (a) through (e) ar the total of <i>exclusively</i> religious, charitable, et once. See instructions.) ► \$		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	Transferee's name, address, and	(e) Transfer of gift 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		Relationship of transferor to transferee		

(Form 990 or 990-					
	For (Organizations Exempt From Incon	ne Tax Under section	on 501(c) and section 527	
Department of the Treas Internal Revenue Service	^{ury} ► Informa	plete if the organization is described be ation about Schedule C (Form 990 or 9	990-EZ) and its instruc		^{1990.} Inspection
•		" on Form 990, Part IV, line 3, or Forn		6 (Political Campaign Activiti	es), then
	, .	S: Complete Parts I-A and B. Do not comp ion 501(c)(3)) organizations: Complete		Do not complete Part I P	
 Section 501(c) (Section 527 org 			Fails I-A and C below. I	Do not complete Part I-B.	
0		" on Form 990, Part IV, line 4, or Form	990-FZ Part VI line 4	7 (Lobbying Activities) then	
•		s that have filed Form 5768 (election ur			olete Part II-B.
	, .	s that have NOT filed Form 5768 (electi			
If the organization a Tax) (see separate in	nswered "Yes, structions), the	" on Form 990, Part IV, line 5 (Proxy n			
		ganizations: Complete Part III.		· · · · · · · · · · · · · · · · · · ·	
Name of organization					tification number
JUNIOR ACHIEV				84-1267	
	-	organization is exempt under			
	•	e organization's direct and indirect	political campaign a	ctivities in Part IV. (see ir	structions for definition
•	ampaign activi				
		expenditures (see instructions)			
	urs for politica	l campaign activities (see instructio	ns)		
		organization is exempt under			
1 Enter the am	ount of any ex	cise tax incurred by the organization	on under section 495	5►\$	
		cise tax incurred by organization m			
-		a section 4955 tax, did it file Form			
					Yes No
b If "Yes," desc					
	•	organization is exempt under	· · ·		•
		expended by the filing organizatio			
		ing organization's funds contributed ies			
•		enditures. Add lines 1 and 2. Er			
 4 Did the filing of 5 Enter the nan organization of the amount of 	organization fi nes, addresses made paymen of political con	le Form 1120-POL for this year? s and employer identification numb its. For each organization listed, er tributions received that were pron and or a political action committee (per (EIN) of all section ter the amount pair aptly and directly de	on 527 political organiza d from the filing organiza livered to a separate pol	tions to which the filing ation's funds. Also enter itical organization, such
(a) Nar	ne	(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)			-		
For Paperwork Redu	ction Act Notic	, see the Instructions for Form 990 o	r 990-EZ.	Schedule	C (Form 990 or 990-EZ) 2016

Political Campaign and Lobbying Activities

SCHEDULE C

OMB No. 1545-0047

Sch	edule C (Form 990 or 990-EZ) 2016 JUNIOR	ACHIEVEMENT USA	84-1	267604 Page Z
Pa	art II-A Complete if the organizati section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	ction under
Α		belongs to an affiliated group (and list in Pa enses, and share of excess lobbying expend		oup member's
В	Check ► if the filing organization	checked box A and "limited control" provisi	ons apply.	
		ying Expenditures	(a) Filing	(b) Affiliated
	(The term "expenditures" m	eans amounts paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)		
k	 Total lobbying expenditures to influence 	a legislative body (direct lobbying)		
c	: Total lobbying expenditures (add lines 1	a and 1b)		
c	Other exempt purpose expenditures		24,549,512.	
e	e Total exempt purpose expenditures (ad	d lines 1c and 1d)	24,549,512.	
f	Lobbying nontaxable amount. Enter th	e amount from the following table in both		
	columns.		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.		
ç	Grassroots nontaxable amount (enter 28	5% of line 1f)	250,000.	
ł	Subtract line 1g from line 1a. If zero or le	ess, enter -0-	0.	0.
i	Subtract line 1f from line 1c. If zero or le	ss, enter -0-	0.	0.
j	If there is an amount other than zero	on either line 1h or line 1i, did the organiza	tion file Form 4720	
	reporting section 4911 tax for this year?			Yes 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period										
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total					
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.					
b Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.					
c Total lobbying expenditures	160,949.				160,949.					
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.					
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.					
f Grassroots lobbying expenditures										

Schedule C (Form 990 or 990-EZ) 2016

Schedule C	(Form	990 or	990-F7	2016
Schedule C		330 01	330-EZ	2010

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)).

Eor	For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed		a)	(b)	
	cription of the lobbying activity.	Yes	No	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local				
	legislation, including any attempt to influence public opinion on a legislative matter or				
	referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?.				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pa	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	ection	

1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity 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."

1	Dues, assessments and similar amounts from members	1	
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).		
а	Current year.	2a	
	Carryover from last year.		
	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?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

. 501(c)(6).

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, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Page 3

Schedule C (Form 990 or 990-EZ) 2016

Page 4

Part IV Supplemental Information (continued)

SCHEE	DULE	D
(Form	990)	

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization Employer identification number JUNIOR ACHIEVEMENT USA 84-1267604 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. Total number of conservation easements 2a а 2b b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) С d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year 🕨 Number of states where property subject to conservation easement is located **b** 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? No Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶\$ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 No and section 170(h)(4)(B)(ii)? Yes In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and q balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet b works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included in Form 990, Part VIII, line 1..... ▶ \$ _ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included in Form 990, Part VIII, line 1 а ▶ \$ b ▶ \$ For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2016

JSA

OMB No. 1545-0047

-	dule D (Form 990) 2016				_							Page 2
Par	t III Organizations Maintaining Colle		-									
3	Using the organization's acquisition, access collection items (check all that apply):	ssion, and o	other recor	ds, checl	k any c	f the	follow	ing that a	re a sign	nificant	use c	of its
а	Public exhibition		d	Loan	or excha	ange	prograr	ns				
b	Scholarly research		e	Other								
с	Preservation for future generations											
4	Provide a description of the organization's	s collections	and expla	ain how t	thev fu	ther	the or	anization's	s exemp	t purpo	se in	Part
-	XIII.							Jan	, evenib			
5	During the year, did the organization solicit	or receive c	Ionations c	fart hist	orical tr	62511	res or d	other simila	ar			
Ŭ	assets to be sold to raise funds rather than									Yes		No
Par	t IV Escrow and Custodial Arrangem				organiza		3 00100			103		
ια	Complete if the organization ans		s" on Forn	0 990 P	art IV I	ine C) or re	norted an	amoun	t on Fo	rm	
	990, Part X, line 21.		5 OIT OIT	1 550, 1	ant iv, i		, 0110	poned an	amoun			
10	Is the organization an agent, trustee, custo	dian or othe	rintormos	lion (for o	ontribut	liono	or other	· ococto not				
Ia				-						Vee	X] N
	included on Form 990, Part X?								• • • L	Yes	Δ	No
b	If "Yes," explain the arrangement in Part X	ill and comp	plete the to	llowing tai	ole:			•				
								Ar	mount			
С	Beginning balance					1c						
d	Additions during the year					1d						
е	Distributions during the year					1e						
f	Ending balance					1f						
2a	Did the organization include an amount on								-	X Yes		No
	If "Yes," explain the arrangement in Part X	III. Check he	ere if the e	xplanation	has be	en pr	ovided	on Part XIII	<u></u>			
Par	t V Endowment Funds.						_					
	Complete if the organization ans	wered "Yes	s" on Forn	n 990, Pa								
	(a) Cu	urrent year	(b) Pric	or year	(c) Tw	o year	s back	(d) Three ye	ars back	(e) Fou	r years	back
1a	Beginning of year balance											
b	Contributions											
с	Net investment earnings, gains,											
	and losses											
d	Grants or scholarships											
e	Other expenditures for facilities											
•	and programs											
f	Administrative expenses											
g	End of year balance											
9 2	Provide the estimated percentage of the ci	urrent vear	and halanc	o (lino 1a	columr	(2))	hold as		I			
2 a	Board designated or quasi-endowment	unent year o	%	e (iirie Ty,	, colum	(a))						
b	Permanent endowment %											
	Temporarily restricted endowment	%										
•	The percentages on lines 2a, 2b, and 2c sh		100%									
3a	Are there endowment funds not in the poss			ation that	are hel	d and	l admin	istered for	the			
ou	organization by:		io organiza			a and	aanni				Yes	No
	(i) unrelated organizations									3a(i)		-
	(ii) related organizations									3a(ii)		
h	If "Yes" on line 3a(ii), are the related organ									3b		
	Describe in Part XIII the intended uses of t					· • •		• • • • • •		55		
4 Dat	t VI Land, Buildings, and Equipment.			wittent tu	nus.							
Fai	Complete if the organization and	swered "Ye	s" on Fori	n 990, F	Part IV,	line	11a. S	ee Form 9	90, Par	t X, line	e 10.	
	Description of property	(a) Cost or	other basis	(b) Cost o	or other ba		(c) Acc	umulated		j) Book va		
10	Land	(inves	tment)		other) 260,73		depr	eciation		1 0	60,7	20
1a ⊾	Land						2 0					
b	Buildings			4,1	L20,47	· _ •	۶,۶	58,739.		1	61,7	54.
C	Leasehold improvements			-	706 67						0 - 7	70
d	Equipment				726,63			41,454.			85,1	
e	Other				301,72			71,728.			30,0	
ı ota	I. Add lines 1a through 1e. (Column (d) mus	α equal ⊢orr	n 990, Part	x, colum	n (B), lir	ie 10	C.)	•		т,5	37,6	94⊥.

Schedule D (Form 990) 2016

JUNIOR ACHIEVEMENT USA 84-1267604 Schedule D (Form 990) 2016 Page 3 Part VII **Investments - Other Securities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: (including name of security) 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) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Investments - Program Related. Part VIII Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (c) Method of valuation: (a) Description of investment (b) Book value Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" on 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) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" on 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)

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 JSA <u>Schedule D (Form 99</u>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

(9)

	JUNIOR	ACHIEVEMENT	USA
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Schedu	le D (Form 990) 2016				Page 4
Part				า.	
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line	e 12a.		00.151.000
1	Total revenue, gains, and other support per audited financial statements			1	27,151,970.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	486,827.		
b	Donated services and use of facilities	2b	218,489.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	4,822,970.		
е	Add lines 2a through 2d			2e	5,528,286.
3	Subtract line 2e from line 1			3	21,623,684.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	83,871.		
b	Other (Describe in Part XIII.)	4b	2,685,808.		
с	Add lines 4a and 4b			4c	2,769,679.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	24,393,363.
Part				rn.	
	Complete if the organization answered "Yes" on Form 990, Part IV	/, line	e 12a.		
1	Total expenses and losses per audited financial statements			1	26,821,292.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	218,489.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	4,822,970.		
e	Add lines 2a through 2d			2e	5,041,459.
3	Subtract line 2e from line 1			3	21,779,833.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	83,871.		
b	Other (Describe in Part XIII.)	4b	2,685,808.		
c	Add lines 4a and 4b			4c	2,769,679.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	24,549,512.
Part	XIII Supplemental Information.				
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F	Part I	/. lines 1b and 2b: Pa	art V. li	ne 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

JSA

Part XIII Supplemental Information (continued)

SCHEDULE D, PART IV, LINE 2B

TRUST, ESCROW, AND CUSTODIAL ARRANGEMENTS:

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 \$174,263 AND \$345,043 RESPECTIVELY AS OF JUNE 30, 2017.

SCHEDULE D, PART X, LINE 2

UNCERTAIN TAX POSITIONS:

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

SCHEDULE D, PART XI, LINE 2D OTHER REVENUE ON BOOKS, NOT ON RETURN: COST OF GOODS SOLD RECLASSED FROM EXPENSE AND NETTED AGAINST REVENUE

4,822,970

SCHEDULE D, PART XI, LINE 4B OTHER REVENUE ON RETURN, NOT ON BOOKS: DESIGNATED CONTRIBUTIONS TO US JA OFFICES AND MEMBER NATIONS TREATED AS AGENCY TRANSACTIONS FOR FINANCIAL STATEMENT PURPOSES 2,685,808*

Schedule D (Form 990) 2016

 Schedule D (Form 990) 2016
 JUNIOR ACHIEVEMENT USA

 Part XIII
 Supplemental Information (continued)

 SCHEDULE D, PART XII, LINE 2D

 OTHER EXPENSES ON BOOKS, NOT ON RETURN:

 COST OF GOODS SOLD RECLASSED FROM EXPENSE

 AND NETTED AGAINST REVENUE

 4,822,970

 SCHEDULE D, PART XII, LINE 4B

OTHER EXPENSES ON RETURN, NOT ON BOOKS:

DESIGNATED CONTRIBUTIONS TO US JA OFFICES AND

MEMBER NATIONS TREATED AS AGENCY TRANSACTIONS

FOR FINANCIAL STATEMENT PURPOSES

2,685,808**

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.

		Staten	nent of A	ctivities	Outside the Unit	ted States	OMB No. 1545-0047		
(For	m 990)	► Complete	e if the organiza		"Yes" on Form 990, Part IV,	line 14b, 15, or 16.	2016		
	ment of the Treasury	► Informatio	n about Schedu		to Form 990.) and its instructions is at <i>w</i> w	w.irs.gov/form990.	Open to Public		
	I Revenue Service			-	-	Employer id	Inspection Inspection		
	IOR ACHIEVEME	NT USA					267604		
Part		formation o		Outside the U	nited States. Complete i	if the organization a	inswered "Yes" on		
1				in records to s	substantiate the amount of	f its grants and othe	r		
					e, and the selection criteri				
	grants or assistanc	e?					X Yes No		
	For grantmakers. assistance outside			ganization's p	rocedures for monitoring	the use of its gr	ants and other		
3	Activities per Regi	on. (The follow	ving Part I, line	3 table can be	e duplicated if additional sp	ace is needed.)			
	(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in a program service describe specific typ service(s) in the reg	e, expenditures for be of and investments		
(1)	EAST ASIA AND THE	PACIFIC			GRANTMAKING		20,000.		
(2)	SUB-SAHARAN AFRIC	A			GRANTMAKING		25,550.		
(3)	EUROPE				GRANTMAKING		22,500.		
(4)	NORTH AMERICA				GRANTMAKING		14,800.		
(5)	SOUTH AMERICA				GRANTMAKING		5,000.		
(6)									
(7)									
(8)									
<u>(9)</u> (10)									
(11)									
(12)									
(13)									
<u>(14)</u>									
<u>(15)</u>									
<u>(16)</u>									
<u>(17)</u>									
3a b	Sub-total Total from sheets to Part I	continuation					87,850.		
c	Totals (add lines						87,850.		
For P	aperwork Reduction	Act Notice, see	e the Instruction	s for Form 990.		So	hedule F (Form 990) 2016		

erwork Reduction Act Notice, see the Instructions for Form 990. For Pa JSA 6E1274 1.000 71762E 5974 4/25/2018 9:11:23 AM

Schedule F (Form 990) 2016		
Part II	Grants and Other	Assistance to Organizati	
	Part IV, line 15, for	any recipient who receive	
1	(a) Name of	(b) IBS code	

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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				TO SUPPORT					
(1)			EUROPE/ICELAND/GREENLAND	PROGRAMS	10,000.				
				TO SUPPORT					
(2)			NORTH AMERICA	PROGRAMS.	7,500.				
				TO SUPPORT					
(3)			SUB-SAHARAN AFRICA	PROGRAMS	14,600.				
				TO SUPPORT					
(4)			NORTH AMERICA	PROGRAMS	7,300.				
				TO SUPPORT					
(5)			EUROPE/ICELAND/GREENLAND	PROGRAMS	7,500.				
				TO SUPPORT					
(6)			EAST ASIA/PACIFIC	PROGRAMS	10,000.				
				TO SUPPORT					
(7)			EAST ASIA/PACIFIC	PROGRAMS	10,000.				
				TO SUPPORT					
(8)			SUB-SAHARAN AFRICA	PROGRAMS	10,950.				
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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

8.

3 Enter total number of other organizations or entities ______ Schedule F (Form 990) 2016

(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 noncash assistance	(g) Description of noncash 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)							

Schedule F (Form 990) 2016

JSA 6E1276 1.000 Page 3

JUNIOR ACHIEVEMENT USA

Schedule F (Form 990) 2016

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

Schedule F (Form 990) 2016

Schedule F (Form 990) 2016

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

SCHEDULE F, PART I, QUESTION 2

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

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 VARY BY DONOR. THE REPORTING REQUIRED

IS SUBMITTED TO THE ORGANIZATION'S GRANT STEWARD OR DIRECTLY TO THE

DONOR.

SCHEDULE I		Grants a	nd Other A	Assistance t	o Organiza	tions.	1	OMB No. 1545-0047
(Form 990)				ndividuals i				<u>କ</u> ଳ 1 ଜୁନ
			ganization ans		<u>2016</u>			
Department of the Treasu			•	tach to Form 990.	•			Open to Public
Internal Revenue Service	► Informat	tion about Se	chedule I (Form	990) and its inst	ructions is at www	v.irs.gov/form990.		Inspection
Name of the organization	<u>ו</u>						Employer identific	ation number
JUNIOR ACHIEV	/EMENT USA						84-126760	14
Part I Genera	al Information on Grants and	d Assistanc	e					
1 Does the orga	anization maintain records to su	ubstantiate th	e amount of the	e grants or assista	nce, the grantees	' eligibility for the grant	s or assistance, and	
the selection	criteria used to award the grant	s or assistand	;e?					X Yes No
	art IV the organization's proced							
Part II Grants	and Other Assistance to D	omestic Or	ganizations ar	nd Domestic Gov	vernments. Com	plete if the organization	ation answered "Y	es" on Form
	art IV, line 21, for any recipi							
	, , , , , , , , , , , , , , , , , , , ,			· · · · · · · · · · · ·				
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 noncash assistance	(h) Purpose of grant or assistance
(1) JUNIOR ACHIEVE	MENT OF ARIZONA, INC.							SUPPORT
636 W. SOUTHER	N AVENUE TEMPE, AZ 85282	86-0184349	501(C)(3)	38,220.				MISSION
(2) JUNIOR ACHIEVE	MENT OF ARKANSAS, INC.							SUPPORT
1001 TECH. DR.	, STE 201, LIT ROCK, AK 72223	71-0658775	501(C)(3)	19,910.				MISSION
(3) JUNIOR ACHIEVE	MENT OF CENTRAL TEXAS, INC.							SUPPORT
P.O. BOX 68457	1 AUSTIN, TX 78768	74-1688335	501(C)(3)	13,080.				MISSION
(4) JUNIOR ACHIEVE	MENT OF CENTRAL MARYLAND, INC							SUPPORT
10711 RED RUN	BLVD., OWINGS MILLS, MD 21117	52-0688275	501(C)(3)	36,250.				MISSION
(5) JA OF GREATER	BATON ROUGE & ACADIANA							SUPPORT
7809 JEFFERSON	HWY D4 BATON ROUGE LA 70809	72-0485727	501(C)(3)	31,860.				MISSION
(6) JA OF SOUTH CE	NTRAL KENTUCKY, INC.							SUPPORT
440-1/2 E MAIN	AVE, BOWLING GREEN, KY 42101	61-0997385	501(C)(3)	11,137.				MISSION
(7) JA OF WESTERN	NEW YORK, INC.							SUPPORT
275 OAK STREET	, SUITE 222 BUFFALO, NY 14203	16-0821488	501(C)(3)	30,050.				MISSION
(8) JUNIOR ACHIEVE	MENT OF CHICAGO							SUPPORT
	TON BLVD. CHICAGO, IL 60661	36-2170141	501(C)(3)	152,744.				MISSION
(9) JUNIOR ACHIEVE	MENT OF OKI PARTNERS, INC.	_						SUPPORT
644 LINN STREE	T, CINCINNATI, OH 45203	32-0014307	501(C)(3)	10,710.				MISSION
(10) JA OF GREATER	CLEVELAND, INC.	_						SUPPORT
	ENUE CLEVELAND, OH 44115	34-0733164	501(C)(3)	9,160.				MISSION
(11) JUNIOR ACHIEVE	MENT OF SOUTHERN COLORADO	_						SUPPORT
2320 W COLORAD	O AVE COLORADO SPGS, CO 80904	84-6009223	501(C)(3)	13,583.				MISSION
(12) JUNIOR ACHIEVE	MENT OF CENTRAL OHIO, INC.	4						SUPPORT
	UE COLUMBUS, OH 43201	31-4385042		6,000.				MISSION
	mber of section 501(c)(3) and	•	•					
3 Enter total nu	mber of other organizations list	ed in the line	1 table				<u></u>	
For Paperwork Redu	ction Act Notice, see the Instructi	ons for Form 9	90.				Sch	nedule I (Form 990) (2016)

JSA 6E1288 1.000

SCHEDULE I		Grants a	nd Other A	Assistance t	o Organiza	tions.		OMB No. 1545-0047
(Form 990)	Go	vernme	nts, and Ir	ndividuals i	n the United	d States		2016
	Comp	olete if the o	rganization ans					
Department of the Treasur Internal Revenue Service	y ► Informat	tion about S		ach to Form 990. 990) and its instr	uctions is at www	v.irs.gov/form990.		Open to Public Inspection
Name of the organization							Employer identific	ation number
JUNIOR ACHIEVE	EMENT USA						84-126760	4
Part I General	Information on Grants and	d Assistanc	e					
	nization maintain records to su	ubstantiate th	e amount of the	grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
	riteria used to award the grant							X Yes No
	rt IV the organization's proced							
Part II Grants a	and Other Assistance to D	omestic Or	ganizations ar	d Domestic Gov	vernments. Com	plete if the organiza	ation answered "Ye	es" on Form
	t IV, line 21, for any recipi							
	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 noncash assistance	(h) Purpose of grant or assistance
(1) JUNIOR ACHIEVEM	ENT OF DALLAS, INC.							SUPPORT
1201 EXECUTIVE I	DR WEST, RICHARDSON TX 75081	75-0881589	501(C)(3)	69,918.				MISSION
(2) JUNIOR ACHIEVEM	ENT OF DELAWARE, INC.							SUPPORT
522 S. WALNUT S	FREET WILMINGTON, DE 19801	51-0078199	501(C)(3)	31,900.				MISSION
(3) JUNIOR ACHIEVEM	ENT - ROCKY MOUNTAIN, INC.							SUPPORT
1445 MARKET, SU	ITE 200 DENVER, CO 80202	84-0430495	501(C)(3)	23,488.				MISSION
(4) JUNIOR ACHIEVEM	ENT OF CENTRAL IOWA, INC.							SUPPORT
6100 GRAND AVEN	JE DES MOINES, IA 50312	42-0759070	501(C)(3)	20,000.				MISSION
(5) JA OF SOUTHEAST	ERN MICHIGAN, INC.							SUPPORT
577 E. LARNED, S	SUITE 200 DETROIT, MI 48226	38-1348535	501(C)(3)	64,850.				MISSION
(6) JUNIOR ACHIEVEM	ENT OF EASTERN IOWA, INC.							SUPPORT
324 3RD STREET S	SE, CEDAR RAPIDS, IA 52401	42-0919209	501(C)(3)	6,833.				MISSION
(7) JA OF THE DESER	F SOUTHWEST, INC.							SUPPORT
200 BARTLETT, ST	FE 104 EL PASO, TX 79912	74-1565161	501(C)(3)	11,250.				MISSION
(8) JUNIOR ACHIEVEM	ENT OF SOUTH FLORIDA, INC.	_						SUPPORT
	EEK COCONUT CREEK, FL 33066	59-0871446	501(C)(3)	33,900.				MISSION
(9) JUNIOR ACHIEVEM	ENT OF NORTHERN INDIANA, INC	_						SUPPORT
601 NOBLE DRIVE	FORT WAYNE, IN 46825	35-0922731	501(C)(3)	16,133.				MISSION
(10) JA OF THE CHISH	DLM TRAIL, INC.	_						SUPPORT
	ACE #400, FT WORTH, TX 76116	75-0944915	501(C)(3)	31,000.				MISSION
(11) JUNIOR ACHIEVEM	ENT OF GEORGIA, INC.	_						SUPPORT
460 ABERNATHY RO	DAD NE ATLANTA, GA 30328	58-0598050	501(C)(3)	137,590.				MISSION
_/	GAN GREAT LAKES, INC.	_						SUPPORT
	E SE, GRND RPDS, MI 49546	38-1557861	1	9,000.				MISSION
	ber of section 501(c)(3) and							
	ber of other organizations list					<u></u>	<u></u>	
For Paperwork Reduc	tion Act Notice, see the Instructi	ons for Form 9	90.				Sch	edule I (Form 990) (2016)

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

JSA 6E1288 1.000

Grants and Other Assistance to Organizations, Form 990) Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990.							OMB No. 1545-0047 20 16 Open to Public
Department of the Treasury Internal Revenue Service	v.irs.gov/form990.		Inspection				
Name of the organization	Employer identific						
JUNIOR ACHIEVEMENT USA						84-126760	
Part General Information on Grants and	d Assistanc	e				01 120700	
 Does the organization maintain records to s the selection criteria used to award the grant Describe in Part IV the organization's proced Part II Grants and Other Assistance to D 	ts or assistand dures for mor Pomestic Or	ce? nitoring the use ganizations a i	of grant funds in th nd Domestic Gov	e United States. /ernments. Com	plete if the organiza	ation answered "Y	X Yes No
990, Part IV, line 21, for any recip 1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	an \$5,000. Part I (d) Amount of cash grant	(e) Amount of non- cash assistance	ed if additional space (f) Method of valuation (book, FMV, appraisal, other)	ce is needed. (g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) JA OF CENTRAL N CAROLINA, INC.			-		otholy		SUPPORT
201 S TRYON ST. CHARLOTTE, NC 28202	56-0672085	501(C)(3)	44,045.				MISSION
(2) JA OF SOUTHWEST NEW ENGLAND, INC.							SUPPORT
11 ASYLUM STREET, HARTFORD, CT 06103	06-0665972	501(C)(3)	33,930.				MISSION
(3) JUNIOR ACHIEVEMENT OF NORTH FLORIDA, INC.							SUPPORT
4049 WOODCOCK DR. JACKSONVILLE, FL 32207	59-1021800	501(C)(3)	16,800.				MISSION
(4) JUNIOR ACHIEVEMENT OF MIDDLE AMERICA, INC.							SUPPORT
4001 BLUE PARKWAY, KANSAS CITY, MO 64130	44-0604809	501(C)(3)	11,080.				MISSION
(5) JUNIOR ACHIEVEMENT OF EAST TENNESSEE, INC.							SUPPORT
2135 N CHARLES G. SEIVERS, CLINTON TN 37716	62-0810145	501(C)(3)	19,100.				MISSION
(6) JUNIOR ACHIEVEMENT OF SOUTHERN NEVADA, INC.							SUPPORT
7220 S CIMARRON RD #130, LAS VEGAS NV 89113	88-0354481	501(C)(3)	13,500.				MISSION
(7) JUNIOR ACHIEVEMENT OF THE BLUEGRASS, INC.							SUPPORT
2420 SPURR ROAD LEXINGTON, KY 40511	61-0606480	501(C)(3)	13,367.				MISSION
(8) JA OF SOUTHERN CALIFORNIA, INC.							SUPPORT
6250 FOREST LAWN DR, LOS ANGELES, CA 90068	95-1799192	501(C)(3)	101,757.				MISSION
(9) JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.							SUPPORT
1401 W MUHAMMED ALI, LOUISVILLE KY 40203	61-0476694	501(C)(3)	25,440.				MISSION
(10) JUNIOR ACHIEVEMENT OF GREATER MIAMI, INC.							SUPPORT
301 71ST ST 2ND FLOOR, MIAMI BEACH FL 33141	59-0807486	501(C)(3)	45,000.				MISSION
(11) JA OF MIDDLE TENNESSEE, INC.							SUPPORT

JSA 6E1288 1.000

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

120 POWELL PLACE NASHVILLE, TN 37204

360 PEAR BLOSSOM DRIVE EDISON, NJ 08837

(12) JUNIOR ACHIEVEMENT OF NEW JERSEY, INC.

40,970.

114,425.

62-0582571 501(C)(3)

22-1774147 501(C)(3)

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

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

MISSION

SUPPORT

MISSION

Schedule I (Form 990) (2016)

.

SCHEDULE I		Grants a	nd Other 4	Assistance t	o Organiza	tions		OMB No. 1545-0047
(Form 990)				ndividuals in				
			rganization ans		2016			
			► Att		Open to Public			
Department of the Treasury Internal Revenue Service	✓ Information	tion about Se	chedule I (Form	990) and its inst	uctions is at www	v.irs.gov/form990.		Inspection
Name of the organization			-	-		_	Employer identific	ation number
JUNIOR ACHIEVE	IMENT USA						84-126760	4
Part I General	Information on Grants and	d Assistanc	е					
1 Does the organ	nization maintain records to su	ubstantiate th	e amount of the	grants or assista	nce, the grantees	eligibility for the grant	s or assistance, and	
	riteria used to award the grant							X Yes No
	rt IV the organization's proced							
Part II Grants a	and Other Assistance to D	omestic Or	ganizations ar	d Domestic Gov	vernments, Com	plete if the organization	ation answered "Ye	es" on Form
	t IV, line 21, for any recipi							
	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 noncash assistance	(h) Purpose of grant or assistance
(1) JUNIOR ACHIEVEME	ENT OF NEW MEXICO, INC.							SUPPORT
	. NE, ALBUQUERQUE, NM 87109	85-0416889	501(C)(3)	10,000.				MISSION
(2) JA OF NORTHERN (CALIFORNIA, INC.							SUPPORT
	ALNUT CREEK, CA 94597	94-1322179	501(C)(3)	44,079.				MISSION
(3) JUNIOR ACHIEVEME	ENT OF OKLAHOMA, INC.							SUPPORT
3947 SOUTH 103RI	D EAST AVE, TULSA, OK 74146	73-0757053	501(C)(3)	28,850.				MISSION
(4) JUNIOR ACHIEVEME	ENT OF CENTRAL FLORIDA, INC.							SUPPORT
2121 CAMDEN ROAI	O ORLANDO, FL 32803	59-0972112	501(C)(3)	7,360.				MISSION
(5) JA OF WESTERN PH	ENNSYLVANIA, INC.							SUPPORT
5001 CENTRE AVE	, 2 FLR, PITTSBURGH PA 15213	25-0983059	501(C)(3)	11,000.				MISSION
(6) JA OF OREGON AND	SW WASHINGTON INC.							SUPPORT
7830 S.E. FOSTER	R ROAD PORTLAND, OR 97206	93-0384007	501(C)(3)	19,000.				MISSION
(7) JUNIOR ACHIEVEME	ENT OF SACRAMENTO, INC.							SUPPORT
PO BOX 255602 SA	ACRAMENTO, CA 95865	94-6080866	501(C)(3)	16,084.				MISSION
(8) JUNIOR ACHIEVEME	ENT OF SOUTH TEXAS, INC.							SUPPORT
403 E RAMSEY #20	01, SAN ANTONIO TX, 78216	74-2061852	501(C)(3)	28,270.				MISSION
(9) JUNIOR ACHIEVEME	ENT OF WASHINGTON							SUPPORT
1700 WESTLAKE AV	VENUE N. SEATTLE, WA 98109	91-0604913	501(C)(3)	24,830.				MISSION
(10) JA OF WESTERN MA	ASSACHUSETTS, INC.	4						SUPPORT
	17, SPRINGFIELD, MA 01115	04-2088304	501(C)(3)	25,950.				MISSION
(11) JUNIOR ACHIEVEME	ENT OF GREATER ST. LOUIS INC	4						SUPPORT
17339 N OUTER FC	DRTY, CHESTERFIELD, MO 63005	43-0652112	501(C)(3)	49,270.				MISSION
(12) JA OF SOUTHWEST		4						SUPPORT
	AVENUE NORWALK, CT 06854	06-0932913		6,500.				MISSION
	ber of section 501(c)(3) and							
3 Enter total num	ber of other organizations list	ed in the line	1 table				<u></u>	
For Paperwork Reduc	tion Act Notice, see the Instructi	ons for Form 9	90.				Sch	nedule I (Form 990) (2016)

JSA 6E1288 1.000

SCHEDULE I (Form 990)	Go	vernme	nts, and Ir	Assistance f ndividuals in swered "Yes" on F	n the United	d States		омв no. 1545-0047 20 16
Department of the Treasury			► At	tach to Form 990.				Open to Public
Internal Revenue Service	► Information	tion about S	chedule I (Form	n 990) and its inst	ructions is at www	v.irs.gov/form990.		Inspection
Name of the organization							Employer identific	
JUNIOR ACHIEVEN							84-126760)4
Part I General I	nformation on Grants and	d Assistanc	e					
the selection crit 2 Describe in Part Part II Grants ar	zation maintain records to su eria used to award the grant IV the organization's proced IN Other Assistance to D IV, line 21, for any recipi	s or assistand lures for mor omestic Or	ce? nitoring the use ganizations a r	of grant funds in the	e United States. /ernments. Com	plete if the organiza	ation answered "Y	X Yes No
	d address of organization 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 noncash assistance	(h) Purpose of grant or assistance
 JA OF TAMPA BAY, 	INC.							SUPPORT
	2-140, CLEARWATER FL 33760	59-1098499	501(C)(3)	94,997.				MISSION
(2) JA OF THE UPPER M	IDWEST, INC.							SUPPORT
1800 WHITE BEAR A	VE N, MAPLEWOOD, MN 55109	41-1424988	501(C)(3)	108,967.				MISSION
(3) JUNIOR ACHIEVEMEN	T OF GREATER WASHINGTON							SUPPORT
1050 17TH ST NW,	#750, WASHINGTON, DC 20036	54-0788947	501(C)(3)	24,600.				MISSION
(4) JA OF THE PALM BE	ACHES & TREASURE COAST							SUPPORT
6903 VISTA PKWY N	10, W PALM BEACH FL 33411	59-2333738	501(C)(3)	10,548.				MISSION
(5) JUNIOR ACHIEVEMEN	T OF WISCONSIN, INC.							SUPPORT
11111 WEST LIBERT	Y DR, MILWAUKEE WI 53224	39-0826295	501(C)(3)	56,946.				MISSION
(6) JUNIOR ACHIEVEMEN	T OF NEW YORK, INC.							SUPPORT
420 LEXINGTON AVE	#205, NEW YORK, NY 10170	13-3031828	501(C)(3)	236,940.				MISSION
(7) JUNIOR ACHIEVEMEN	T OF NORTHERN NEW ENGLAND							SUPPORT
400 FIFTH AVE, ST	E 300 WALTHAM, MA 02451	04-2127020	501(C)(3)	101,050.				MISSION
(8) JUNIOR ACHIEVEMEN	T OF SOUTHEAST TEXAS, INC.							SUPPORT
2115 E. GOVERNORS	CIRCLE, HOUSTON, TX 77092	74-1153957	501(C)(3)	75,935.				MISSION
(9) JUNIOR ACHIEVEMEN	T OF SW PENNSYLVANIA							SUPPORT
994 OLD EAGLE SCH	OOL RD 1014 WAYNE PA 19087	23-1386172	501(C)(3)	65,771.				MISSION

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

95-1727087 501(C)(3)

05-0263443 501(C)(3)

57-0511131 501(C)(3)

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

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

(10) JUNIOR ACHIEVEMENT OF SAN DIEGO COUNTY, INC

(11) JUNIOR ACHIEVEMENT OF RHODE ISLAND, INC.

(12) JUNIOR ACHIEVEMENT GREATER SOUTH CAROLINA

57 GREENE ST WARWICK, RI 02886

4756 MISSION GORGE PLACE SAN DIEGO CA 92120

2711 MIDDLEBURG DR #105, COLUMBIA, SC 29204

Schedule I (Form 990) (2016)

SUPPORT

MISSION

SUPPORT

MISSION

SUPPORT

MISSION

.

JSA 6E1288 1.000 27,230.

30,000.

12,940.

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	_	OMB No. 1545-0047						
Name of the organization			•	-		-	Employer ident	ification number
JUNIOR ACHIEVEM	ENT USA						84-1267	604
	nformation on Grants and		-					
the selection crite 2 Describe in Part	ation maintain records to su eria used to award the grant IV the organization's proced	s or assistand dures for moi	ce? nitoring the use	of grant funds in the	e United States.			X Yes No
990, Part	d Other Assistance to D IV, line 21, for any recipi	ient that rec	ceived more the	an \$5,000. Part II	can be duplicat	ed if additional space	ce is needed.	
	address of organization	(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 noncash assistance	
(1) JUNIOR ACHIEVEMEN	Γ OF ALABAMA, INC.							TO SUPPORT
PO BOX 19307 BIRM		63-0340866	501(C)(3)	26,700.				MISSION
(2) JUNIOR ACHIEVEMENT	I SOUTHERN MASSACHUSETTS							SUPPORT
	304, NEW BEDFORD, MA 02740	04-3193575	501(C)(3)	21,000.				MISSION
(3) JUNIOR ACHIEVEMENT	I OF CENTRAL ILLINOIS, INC							SUPPORT
	NE EAST PEORIA, IL 61611	37-0657600	501(C)(3)	15,430.				MISSION
(4) JUNIOR ACHIEVEMENT	I OF SOUTH DAKOTA, INC.							SUPPORT
1000 NW AVE, STE 1	110, SIOUX FALLS, SD 57104	46-0306352	501(C)(3)	11,950.				MISSION
(5) JUNIOR ACHIEVEMEN	I OF CENTRAL MICHIGAN, INC							SUPPORT
309 E. INDIAN STR	EET MIDLAND, MI 48640	38-6081685	501(C)(3)	10,950.				MISSION
(6) JUNIOR ACHIEVEMEN	I OF S. CENTRAL PENNSYLVAN							SUPPORT
610 SOUTH GEORGE S	ST. YORK, PA 17401	23-1598129	501(C)(3)	25,950.				MISSION
(7) JUNIOR ACHIEVEMEN	I OF GREATER HAMPTON ROADS							SUPPORT
160 NEWTOWN RD ST	E 102, NORFOLK, VA 23462	54-0799839	501(C)(3)	16,000.				MISSION
(8)		-						
(9)		_						
(10)		_						
(11)		_						
(12)		_						
	er of section 501(c)(3) and er of other organizations list	-	-				•••••	► <u>67.</u>

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

Schedule I (Form 990) (2016)

JSA 6E1288 1.000

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

(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

SCHEDULE I, PART I, QUESTION 2

ORGANIZATION'S PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS: 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 VARY BY DONOR. THE REPORTING REQUIRED IS SUBMITTED TO

THE ORGANIZATION'S GRANT STEWARD OR DIRECTLY TO THE DONOR.

(Fori	m 990) nent of the Treasury	For certain Officers, Dire Con ► Complete if the organizatior ► A	ctors, Trustees, Key Employees, and Highest npensated Employees n answered "Yes" on Form 990, Part IV, line 2 Attach to Form 990.	3.	MB No. 20 Open to	16 Puk	olic
		Information about Schedule J (For	rin 990) and its instructions is at www.irs.gov			ectio	1
	0	EMENT IISA		. ,			
Part				01 120/001			
T art	Quoonon					Yes	No
1a b	990, Part VII, First-cla Travel fo Tax inde Discretio	 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Travel for companions Tax indemnification and gross-up payments Discretionary spending account 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 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 					
	explain				1b		
2	The set of the Testery Tester						
3	explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 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. X Compensation committee X Compensation committee X Form 990 of other organizations X Form 990 of other organization: X Compensation committee X Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement?						
а	•		avment?		4a		х
b					4b		X
c					4c		Х
5	Only section For persons I	501(c)(3), 501(c)(4), and 501(c)(29) or isted on Form 990, Part VII, Section A,	ganizations must complete lines 5-9.				
	•						
-	-				5a		X
b	-	-			5b		X
6	For persons I compensatior	isted on Form 990, Part VII, Section A, a contingent on the net earnings of:		-			
а					6a		X
b		-			6b		X
7					7	х	
8	Were any am	ounts reported on Form 990, Part VII, p	paid or accrued pursuant to a contract the	at was subject			
		-			8		Х
9	If "Yes" on I	ine 8, did the organization also foll	ow the rebuttable presumption proced	lure described in	9		

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

Schedule J (Form 990) 2016

Schedule J (Form 990) 2016

Page 2

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

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

		(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
JACK E. KOSAKOWSKI	(i)	399,248.	93,571.	4,356.	30,958.	20,274.	548,407.	0.
1 ^{PRESIDENT & CEO}	(ii)	0.	0.	0.	0.	0.	0.	0.
TIMOTHY ARMIJO	(i)	185,667.	26,225.	3,397.	43,164.	20,262.	278,715.	0.
2 ^{CFO}	(ii)	0.	0.	0.	0.	0.	0.	0.
CECIL THIBODEAUX	(i)	287,432.	57,070.	4,356.	32,506.	17,874.	399,238.	0.
3 ^{EVP}	(ii)	0.	0.	0.	0.	0.	0.	0.
GARY BLANCHETTE	(i)	228,390.	31,841.	2,766.	39,652.	17,856.	320,505.	0.
4 SVP - DEVELOPMENT - THRU 4/17	(ii)	0.	0.	0.	0.	0.	0.	0.
SUSAN LUU	(i)	203,959.	32,189.	846.	7,849.	21,585.	266,428.	0.
5SVP - BUSINESS IMPROVEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
MARY CATHERINE DESROSIE	(i)	198,237.	36,186.	986.	5,802.	740.	241,951.	0.
6SVP EDUCATION & LEARNING	(ii)	0.	0.	0.	0.	0.	0.	0.
HOWARD BARTNER	(i)	168,923.	23,843.	1,997.	35,319.	23,164.	253,246.	0.
7 ^{SVP - OPERATIONS}	(ii)	0.	0.	0.	0.	0.	0.	0.
ED GROCHOLSKI	(i)	205,887.	32,407.	855.	19,738.	21,592.	280,479.	0.
8 ^{SVP - BRAND}	(ii)	0.	0.	0.	0.	0.	0.	0.
LESLIE PIERCE	(i)	182,601.	32,502.	3,871.	30,190.	11,510.	260,674.	0.
9SVP TALENT & ORGANIZATION DEV	(ii)	0.	0.	0.	0.	0.	0.	0.
STEVE SCHMIDT	(i)	166,193.	23,319.	1,950.	18,002.	22,290.	231,754.	0.
10 ^{SVP - OPERATIONS}	(ii)	0.	0.	0.	0.	0.	0.	0.
CHRISTINE KUNTZ	(i)	141,602.	0.	1,636.	15,396.	19,469.	178,103.	0.
11 ^{VP - OPERATIONS}	(ii)	0.	0.	0.	0.	0.	0.	0.
JACQUELINE DANT	(i)	137,740.	0.	853.	11,506.	23,158.	173,257.	0.
12 ^{VP - OPERATIONS}	(ii)	0.	0.	0.	0.	0.	0.	0.
KRIS PONCIROLI	(i)	126,448.	0.	502.	4,882.	22,514.	154,346.	0.
13 ^{VP DONOR RELATIONS & DEV SVCS}	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
14	(ii)							
	(i)							
_15	(ii)							
	(i)							
_16	(ii)							

Schedule J (Form 990) 2016

Schedule J (Form 990) 2016

Part III Supplemental Information

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

SCHEDULE J, PART I, LINE 7

DESCRIPTION OF NON-FIXED PAYMENTS:

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 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.

Schedule J (Form 990) 2016

Part III Supplemental Information

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

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.

JSA

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.

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 Page 3

Schedule J (Form 990) 2016

Part III Supplemental Information

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

COMPENSATION.

THE GOVERNORS MAY, IN THEIR SOLE DISCRETION, AND AT ANY TIME, ELECT TO

AMEND, SUSPEND, OR TERMINATE THE PLAN

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

FORM 990, PART III, LINE 1

ORGANIZATION'S MISSION CONTINUED:

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.

FORM 990, PART VI, SECTION A, LINE 6 & 7B

DESCRIBE CIRCUMSTANCES FOR HAVING MEMBERS:

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

Employer identification number 84-1267604

Page 2

LOCAL AREAS.

FORM 990, PART VI, SECTION B, LINE 11B DESCRIBE PROCESS TO REVIEW 990: 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.

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

DESCRIBE HOW CONFLICT OF INTEREST POLICY IS MONITORED AND ENFORCED: 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.

FORM 990, PART VI, SECTION B, LINE 15A & 15B DESCRIBE PROCESS FOR DETERMINING COMPENSATION: 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 (TOWERS WATSON), THE COMMITTEE CONSIDERED COMPARABLE MARKET DATA FROM PUBLISHED SURVEYS AND FORM 990S 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 2016.

FORM 990, PART VI, SECTION C, LINE 19 DESCRIBE HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC: JUNIOR ACHIEVEMENT, USA MAKES ITS FINANCIAL STATEMENTS, GOVERNING DOCUMENTS, AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC UPON

REQUEST.

FORM 990, PART VII

COMPENSATION:

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 109 JA AREA AFFILIATES WHO ARE PART OF THE JA USA NETWORK THAT JA USA OVERSEES. IN FYE 2017, REVENUE OF ALL AFFILIATES TOTALED \$307 MILLION.

	ATTACHME	NT 1
990, PART VII- COMPENSATION OF THE FIVE HIGHEST P	AID IND. CONTRACTORS	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
MOORE WALLACE INC/RR DONNELY PO BOX 730216 DALLAS, TX 75373	STORAGE/ASSEMBLY	636,717.
SPARK AGENCY, INC. PO BOX 790379 ST. LOUIS, MO 63179	TRANSPORT/STORAGE	625,601.
SNI COMPANIES PO BOX 814238 HOLLYWOOD, FL 33081	TEMP STAFFING	481,142.
MANPOWER 21271 NETWORK CHICAGO, IL 60673-1212	TEMP STAFFING	944,849.
FABLEVISION INC 308 CONGRESS ST. 6TH FLOOR BOSTON, MA 02210	PROGRAM DEVELOPMENT	447,600.

4607

OMB No. 1545-0047

Open to Public

Inspection

6

2

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.

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

SCHEDULE R

(Form 990)

JUNIOR ACHIEVEMENT USA

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

				-	
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)	-				
_(2)					
(2)					
_(3)	-				
(4)					
(5)	-				
(6)	-				

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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 contr ent	512(b)(13)	
						Yes	No	
(1) SEE PART VII					N/A			
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

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

Schedule R (Form 990) 2016

Schedule R (Form 990) 2016

Page **2**

Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 Part III 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	() Disprop alloca		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	j) eral or aging ner?	(k) Percentage ownership
		country)					Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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. Part IV

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign country)	(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	
(1)							Yes
2)							
3)							
(4)							
(5)							
(6)							
(7)							
A					Schedule	R (Form 9	90) 2

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Schedule R (Form 990) 2016

Part	Transactions With Related Organizations. Complete if the organization answered "Y	es" on Form 990, Par	t IV, line 34, 35b, or 36.				
Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more	related organizations lis	ted in Parts II-IV?	ſ			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	-		[1a		Х
	Gift, grant, or capital contribution to related organization(s)				1b	Х	
с	Gift, grant, or capital contribution from related organization(s)				1c		Х
d	Loans or loan guarantees to or for related organization(s)				1d	Х	
е	Loans or loan guarantees by related organization(s)				1e		Х
f	Dividends from related organization(s)			[1f		Х
	Sale of assets to related organization(s)				1g	Х	
	Purchase of assets from related organization(s)				1h		Х
i	Exchange of assets with related organization(s)				1i		Х
i	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х
•							
k	Lease of facilities, equipment, or other assets from related organization(s)			[1k		Х
I	Performance of services or membership or fundraising solicitations for related organization(s)				11	Х	
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m		Х
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		Х
	Sharing of paid employees with related organization(s)				10		Х
	5 · · · · · · · · · · · · · · · · · · ·						
р	Reimbursement paid to related organization(s) for expenses.			[1p		Х
	Reimbursement paid by related organization(s) for expenses				1q		Х
•							
r	Other transfer of cash or property to related organization(s)				1r		Х
s	Other transfer of cash or property from related organization(s).				1s		Х
2	f the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including cove	red relationships and transa	action thres	holds	S. '	
	(a)	(b)	(c)		(d)		
	Name of related organization	Transaction type (a-s)	Amount involved	Method o amour			ıg
		type (a 3)		anour	11 11100	iveu	
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
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Schedule R (Form 990) 2016

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 sections 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)													
0)													
1)													
2)													
3)													
4)													
5)													
6)													

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Schedule R (Form 990) 2016

Part VII	Supplemental Information
	Provide additional information for responses to questions on Schedule R. See instructions.

SCHEDULE R, PART II, COLUMN A

RELATED ORGANIZATIONS:

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.