

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	cash \$ _____ noncash \$ _____				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	59,500.	47,600.	5,949.	5,951.
26	Other salaries and wages	174,939.	143,350.	15,795.	15,794.
27	Pension plan contributions				
28	Other employee benefits	37,933.	30,897.	3,518.	3,518.
29	Payroll taxes	20,668.	16,795.	1,936.	1,937.
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies	73,370.	73,060.	155.	155.
34	Telephone	13,599.	10,879.	1,360.	1,360.
35	Postage and shipping	16,570.	13,256.	1,657.	1,657.
36	Occupancy	1,249.	999.	125.	125.
37	Equipment rental and maintenance	2,863.	2,291.	286.	286.
38	Printing and publications	7,112.	5,690.	711.	711.
39	Travel	7,840.	6,272.	784.	784.
40	Conferences, conventions, and meetings				
41	Interest	3,338.	2,670.	334.	334.
42	Depreciation, depletion, etc (attach schedule)	12,332.	9,866.	1,233.	1,233.
43	Other expenses (itemize)				
a	_____				
b	_____				
c	_____				
d	_____				
e	SEE STATEMENT 3	50,027.	35,627.	7,702.	6,698.
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	481,340.	399,252.	41,545.	40,543.

Reporting of Joint Costs Did you report in column (B) (Program services) any joint costs from a combined educational campaign and fundraising solicitation? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____, (iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments

What is the organization's primary exempt purpose? SEE STATEMENT 4	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts but optional for others.)
a GRADES 9 THRU 12: A BUSINESS ROLE MODEL, TRAINED BY JA, DELIVERS JA CURRICULUM ON FREE ENTERPRISE EDUCATION. (Grants and allocations \$ _____)	56,976.
b GRADES 6 THRU 8: A BUSINESS CONSULTANT (VOLUNTEER) TEACHES ECONOMICS TO STUDENTS ONE CLASS PERIOD PER WEEK. (Grants and allocations \$ _____)	53,191.
c GRADES K THRU 5: VOLUNTEERS TO TEACH THE BASICS OF THE FREE ENTERPRISE SYSTEM. (Grants and allocations \$ _____)	289,085.
d _____ (Grants and allocations \$ _____)	
e Other program services (attach schedule) (Grants and allocations \$ _____)	
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	399,252.

Part IV Balance Sheets

Note Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
Assets	45 Cash - non-interest-bearing	8,586.	45	54,427.
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable			
	b Less allowance for doubtful accounts		47c	
	48 a Pledges receivable	84,360.		
	b Less allowance for doubtful accounts		48c	84,360.
	49 Grants receivable		49	
	50 Receivables from officers, directors, trustees, and key employees		50	
	51 a Other notes and loans receivable			
	b Less allowance for doubtful accounts		51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	4,908.	53	8,747.
	54 Investments - securities		54	
	55 a Investments - land, buildings, and equipment basis			
b Less accumulated depreciation		55c		
56 Investments - other	SEE STATEMENT 5	4,198.	56	3,993.
57 a Land, buildings, and equipment basis	162,554.			
b Less accumulated depreciation	139,196.	20,058.	57c	23,358.
58 Other assets (describe ▶ _____)			58	
59 Total assets (add lines 45 through 58) (must equal line 74)		151,145.	59	174,885.
Liabilities	60 Accounts payable and accrued expenses	14,760.	60	68,080.
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax exempt bond liabilities		64a	
	b Mortgages and other notes payable	61,112.	64b	20,534.
	65 Other liabilities (describe ▶ _____)		65	
66 Total liabilities (add lines 60 through 65)		75,872.	66	88,614.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	67 Unrestricted	25,273.	67	36,271.
	68 Temporarily restricted		68	
	69 Permanently restricted	50,000.	69	50,000.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
73 Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19 and column (B) must equal line 21)		75,273.	73	86,271.
74 Total liabilities and net assets / fund balances (add lines 66 and 73)		151,145.	74	174,885.

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part VI Other Information

Table with columns: Question, N/A, Yes, No. Rows include questions 76 through 90b regarding organizational activities, financials, and governance.

91 The books are in care of EXECUTIVE DIRECTOR Telephone no 954-788-8422
Located at POMPAN0 BEACH, FLORIDA ZIP code 33062

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year

Part VII Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue					
a GRADES 9 THRU 12					671.
b GRADES 6 THRU 8					611.
c GRADES K THRU 5					4,825.
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					276,975.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue					
a OTHER INCOME		3,947.			
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		3,947.		0.	283,082.
105 Total (add line 104, columns (B), (D), and (E))					287,029.

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	SEE STATEMENT 10

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

accompanying schedules and statements, and to the best of my knowledge and belief it is true information of which preparer has any knowledge. (Important See General Instruction W)

12/27/01 Melissa Aiello - President

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

OMB No 1545-0047

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

2000

Department of the Treasury
Internal Revenue Service

Supplementary Information

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization **JUNIOR ACHIEVMENT OF SOUTH FLORIDA, INC.** Employer identification number **59 0871446**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE -----				
Total number of other employees paid over \$50,000 ▶	0			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE -----		
Total number of others receiving over \$50,000 for professional services ▶	0	

Part III Statements About Activities

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI B AND attach a statement giving a detailed description of the lobbying activities	1	X
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	X
e Transfer of any part of its income or assets? If the answer to any question is "Yes," attach a detailed statement explaining the transactions	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc?	3	X
4 a Do you have a section 403(b) annuity plan for your employees?	4a	X
b Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments (See page 2 of the instructions)		

Part IV Reason for Non-Private Foundation Status (See pages 2 through 5 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V, page 5)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ► _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 5 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting
 Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 1999	(b) 1998	(c) 1997	(d) 1996	(e) Total	
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	221,771.	279,104.	326,906.	255,948.	1,083,729.	
16 Membership fees received						
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose	438,926.	435,388.	391,478.	275,411.	1,541,203.	
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	117.	478.	238.	1,186.	2,019.	
19 Net income from unrelated business activities not included in line 18						
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.	5,042.	5,042.	SEE STATEMENT 11 456.		10,540.	
23 Total of lines 15 through 22	665,856.	720,012.	719,078.	532,545.	2,637,491.	
24 Line 23 minus line 17	226,930.	284,624.	327,600.	257,134.	1,096,288.	
25 Enter 1% of line 23	6,659.	7,200.	7,191.	5,325.		
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				26a	N/A
	b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1996 through 1999 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts				26b	N/A
	c Total support for section 509(a)(1) test: Enter line 24, column (e)				26c	N/A
	d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____				26d	N/A
	e Public support (line 26c minus line 26d total)				26e	N/A
	f Public support percentage (line 26e (numerator) divided by line 26c (denominator))				26f	N/A %
27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," attach a list (which is not open to public inspection) to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year: (1999) 0. (1998) 0. (1997) 0. (1996) 0.					
	b For any amount included in line 17 that was received from a nondisqualified person, attach a list to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (1999) 0. (1998) 0. (1997) 0. (1996) 0.					
	c Add: Amounts from column (e) for lines 15 <u>1,083,729.</u> 16 _____ 17 <u>1,541,203.</u> 20 _____ 21 _____				27c	2,624,932.
	d Add: Line 27a total <u>0.</u> and line 27b total <u>0.</u>				27d	0.
	e Public support (line 27c total minus line 27d total)				27e	2,624,932.
	f Total support for section 509(a)(2) test: Enter amount on line 23, column (e)				27f	2,637,491.
	g Public support percentage (line 27e (numerator) divided by line 27f (denominator))				27g	99.5238%
	h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))				27h	.0766%

28 Unusual Grants For an organization described in line 10, 11, or 12, that received any unusual grants during 1996 through 1999, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15 (See page 5 of the instructions)

NONE

Part V Private School Questionnaire
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		N/A	
		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.) _____ _____ _____		
32	Does the organization maintain the following		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) _____ _____	32d	
33	Does the organization discriminate by race in any way with respect to		
a	Students' rights or privileges?	33a	
b	Admissions policies?	33b	
c	Employment of faculty or administrative staff?	33c	
d	Scholarships or other financial assistance?	33d	
e	Educational policies?	33e	
f	Use of facilities?	33f	
g	Athletic programs?	33g	
h	Other extracurricular activities? If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.) _____ _____	33h	
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities

(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

- Check here If the organization belongs to an affiliated group
 Check here If you checked "a" above and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
		N/A	
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table - If the amount on line 40 is - The lobbying nontaxable amount is - Not over \$500 000 20% of the amount on line 40 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	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 9 of the instructions.)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A (e) Total
	(a) 2000	(b) 1999	(c) 1998	(d) 1997	
45	Lobbying nontaxable amount				0.
46	Lobbying ceiling amount (150% of line 45(e))				0.
47	Total lobbying expenditures				0.
48	Grassroots nontaxable amount				0.
49	Grassroots ceiling amount (150% of line 48(e))				0.
50	Grassroots lobbying expenditures				0.

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (include compensation in expenses reported on lines c through h)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e 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 other means
- i Total lobbying expenditures (add lines c through h)

Yes	No	Amount
		0.

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Schedule B
(Form 990 or 990-EZ)

Schedule of Contributors

OMB No 1545-0047

2000

Department of the Treasury
Internal Revenue Service

Supplementary Information for line 1d of Form 990 or
line 1 of Form 990-EZ (see instructions)

Name of organization

JUNIOR ACHIEVMENT OF SOUTH FLORIDA, INC.

Employer identification number

59-0871446

Organization type (check one)-Section 501(c)(03) (enter number) 527 or 4947(a)(1) nonexempt charitable trust

A Section 501(c)(7), (8), or (10) organizations-

Check this box if the organization had no charitable contributors who contributed more than \$1,000 during the year (But see General rule below)

Enter here the total gifts received during the year for a religious, charitable, etc., purpose **\$**

Note: This form is generally not open to public inspection except for section 527 organizations.

General Instructions

Purpose of Form

Schedule B (Form 990 or 990-EZ) is used by organizations required to file Form 990, Return of Organization Exempt From Income Tax, or Form 990-EZ, Short Form Return of Organization Exempt From Income Tax, to provide the information regarding their contributors that is required for line 1d of Form 990 (or line 1 of Form 990-EZ).

Attach the Schedule B (Form 990 or 990-EZ) to Form 990 or 990-EZ. Attach Schedule B after Schedule A (Form 990 or 990-EZ), Organization Exempt Under Section 501(c)(3), if that return is required for the organization.

Who Must File Schedule B (Form 990 or 990-EZ)

All organizations must file Schedule B (Form 990 or 990-EZ) unless they certify that they do not meet the filing requirements of Schedule B (Form 990 or 990-EZ) by checking the box in item L of the heading of their Form 990 or Form 990-EZ.

See the instructions for item L in the Instructions for Form 990 and Form 990-EZ.

Caution Schedule B (Form 990 or 990-EZ) is not a substitute for the list of "contributors" required for Part IV-A, Support Schedule, of Schedule A (Form 990 or 990-EZ).

Public Inspection

Schedule B (Form 990 or 990-EZ) is

- Open to public inspection for a section 527 political organization
- Generally not open to public inspection for the other organizations that must file this form

If a non section 527 organization files a copy of Form 990, or Form 990-EZ, and attachments with any state, it should not include its Schedule B (Form 990 or 990-EZ) in the attachments for the state unless a schedule of contributors is specifically required by the state. States that do not require the information might make the schedule available for public inspection along with the rest of the Form 990 or Form 990-EZ.

See the Instructions for Form 990 and Form 990-EZ for phone help and the public inspection rules for those forms and their attachments, which include Schedule B (Form 990 or 990-EZ).

Contributors Required To Be Listed On Part I

"Contributor" includes individuals, fiduciaries, partnerships, corporations, associations, trusts, and exempt organizations.

General rule Unless the organization is covered by one of the special rules below, it must list on Part I every contributor who during the year, gave the organization directly or indirectly, money, securities, or any other type of property totaling \$5,000 or more for the year. Also complete Part II for a noncash contribution. In determining the \$5,000 amount, total all of the contributor's gifts of \$1,000 or more for the year.

Section 501(c)(3) organizations For an organization described in section 501(c)(3) that meets the 33 1/3% support test of the Regulations under sections 509(a)(1)/170(b)(1)(A)(vi) (whether or not the organization is otherwise described in section 170(b)(1)(A))-

List in Part I only those contributors whose contribution of \$5,000 or more is greater than 2% of the amount reported on line 1d of Form 990 (or line 1 of Form 990-EZ) (Regulations section 1.6033-2(a)(2)(iii)(a)).

Example A section 501(c)(3) organization, of the type described above, reported \$700,000 in total contributions, gifts, grants, and similar amounts received on line 1d of its Form 990. The organization is only required to list in Parts I and II of its Schedule B (Form 990 or 990-EZ) each person who contributed more than the

greater of \$5,000 or \$14,000 (2% of \$700,000). Thus, a contributor who gave a total of \$11,000 would not be reported in Parts I and II for this section 501(c)(3) organization. Even though the \$11,000 contribution to the organization exceeded \$5,000, it did not exceed \$14,000.

Section 501(c)(7), (8), or (10) organizations For noncharitable contributions to one of these organizations, list in Part I contributors who gave \$5,000 or more as described in the General rule discussed above.

If a section 501(c)(7), (8), or (10) organization received contributions or bequests for use exclusively for religious, charitable, etc., purposes (sections 170(c)(4), 2055(a)(3), or 2522(a)(3))-

List in Part I each contributor whose contributions total more than \$1,000 during the year that were for a religious, charitable, etc., purpose. To determine the \$1,000, aggregate all of a contributor's gifts for the year (regardless of amount). For a noncash contribution, complete Part II.

All section 501(c)(7), (8), or (10) organizations that received any charitable contributions and listed any charitable contributors on Part I must also complete Part III.

If section 501(c)(7), (8), or (10) organization received charitable gifts, but is not required to list any charitable contributors on Part I, check the box on line A at the top of Schedule B (Form 990 or 990-EZ) and enter the amount of charitable contributions received in the space provided. The organization need not complete and attach Part III.

Specific Instructions

Note You may duplicate Parts I, II, and III if more copies are needed. Number each page of each Part.

Part I In column (a), identify the first contributor listed as no. 1 and the second contributor as no. 2, etc. Number consecutively. Show the contributor's name, address, aggregate contributions for the year, and the type of contribution (e.g., whether an individual, payroll, or noncash contribution). Report payroll contributions by listing the employer's name, address, and total amount given (unless an employee gave enough to be listed individually).

Part II In column (a), show the number that corresponds to the contributor's number in Part I. Describe the noncash contribution fully. Report on property with readily determinable market value (i.e., market quotations for securities) by listing its fair market value (FMV). For marketable securities registered and listed on a recognized securities exchange, measure market value by the average of the highest and lowest quoted selling prices (or the average between the bona fide bid and asked prices) on the contribution date. See Regulations section 20.2031-2 to determine the value of contributed stocks and bonds. When market value cannot be readily determined, use an appraised or estimated value. To determine the amount of a noncash contribution that is subject to an outstanding debt, subtract the debt from the property's fair market value.

Part III Section 501(c)(7), (8), or (10) organizations that received contributions or bequests for use exclusively for religious, charitable, etc., purposes, must complete Parts I through III for those persons whose gifts totaled more than \$1,000 during the year. Show also, in the heading of Part III, total gifts that were \$1,000 or less and were for a religious, charitable, etc., purpose. Complete this information only on the first Part III page.

If an amount is set aside for a religious, charitable, etc., purpose, show in column (d) how the amount is held (e.g., whether it is mingled with amounts held for other purposes). If the organization transferred the gift to another organization, show the name and address of the transferee organization in column (e) and explain the relationship between the two organizations.

Name of organization JUNIOR ACHIEVMENT OF SOUTH FLORIDA, INC.	Employer identification number 59-0871446
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Part I Contributors

(a) No	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if a noncash contribution)</small>
<u>2</u>	<hr/> <hr/> <hr/>	\$ <u>15,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if a noncash contribution)</small>
<u>3</u>	<hr/> <hr/> <hr/>	\$ <u>8,500.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if a noncash contribution)</small>
<u>4</u>	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if a noncash contribution)</small>
<u>5</u>	<hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if a noncash contribution)</small>
<u>6</u>	<hr/> <hr/> <hr/>	\$ <u>7,500.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> <small>(Complete Part II if a noncash contribution)</small>

Name of organization JUNIOR ACHIEVMENT OF SOUTH FLORIDA, INC.	Employer identification number 59-0871446
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Part I Contributors

(a) No	(b) Name, address and ZIP code	(c) Aggregate contributions	(d) Type of contribution
<u>7</u>	 <hr/> <hr/> <hr/>	\$ <u>7,456.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>8</u>	 <hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>9</u>	 <hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>10</u>	 <hr/> <hr/> <hr/>	\$ <u>5,250.</u>	Individual <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>11</u>	 <hr/> <hr/> <hr/>	\$ _____	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)
<u>12</u>	 <hr/> <hr/> <hr/>	\$ _____	Individual <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if a noncash contribution)

FORM 990

SPECIAL EVENTS AND ACTIVITIES

STATEMENT 1

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
BOWL-A-THON SOUTH FLORIDA INVITATIONAL	101,514.		101,514.	13,984.	87,530.
GRAND PRIX	22,400.		22,400.	9,271.	13,129.
CIGAR NIGHT	22,025.		22,025.	7,579.	14,446.
HALL OF FAME	40,181.		40,181.	26,113.	14,068.
OTHER EVENTS	35,008.		35,008.	1,965.	33,043.
TO FM 990, PART I, LINE 9	405,325.		405,325.	128350.	276,975.

FORM 990 PAYMENTS TO AFFILIATES STATEMENT 2

AFFILIATE'S NAME	AFFILIATE'S ADDRESS
JUNIOR ACHIEVEMENT, INC. NATIONAL HEADQUARTERS	ONE EDUCATION WAY, COLORADO SPRINGS, CO 80906
PURPOSE OF PAYMENT	AMOUNT
PARTICIPATION FEES TO NATIONAL ORGANIZATION	31,695.
TOTAL TO FORM 990, PART I, LINE 16	31,695.

FORM 990 OTHER EXPENSES STATEMENT 3

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
INSURANCE	10,438.	8,350.	1,044.	1,044.
TEACHER RECOGNITION	3,133.	3,133.		
MARKETING	3,123.	2,499.	312.	312.
OTHER EXPENSES	21,849.	17,479.	2,185.	2,185.
PROFESSIONAL FEES	10,042.	3,012.	4,017.	3,013.
TRAINING & RECRUITMENT	1,442.	1,154.	144.	144.
TOTAL TO FM 990, LN 43	50,027.	35,627.	7,702.	6,698.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE STATEMENT 4
PART III

EXPLANATION

TO ENSURE THAT EVERY CHILD IN AMERICA HAS A FUNDAMENTAL UNDERSTANDING OF THE FREE ENTERPRISE SYSTEM.

FORM 990	OTHER INVESTMENTS	STATEMENT	5
DESCRIPTION	VALUATION METHOD	AMOUNT	
INVESTMENTS	COST	3,993.	
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		3,993.	

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	6
DESCRIPTION		AMOUNT	
FUNDRAISING EXPENSES NETTED AGAINST FUNDRAISING REVENUE ON PART 1, LINE 9B		128,351.	
TOTAL TO FORM 990, PART IV-A		128,351.	

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT	7
DESCRIPTION		AMOUNT	
FUNDRAISING EXPENSES NETTED AGAINST FUNDRAISING INCOME ON PART 1, LINE 9B		128,351.	
TOTAL TO FORM 990, PART IV-B		128,351.	

FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT	8
DESCRIPTION		AMOUNT	
PAYMENTS TO AFFILIATES ON PART 1, LINE 16 NETTED AGAINST TOTAL REVENUE, GAINS AND SUPPORT ON THE AUDITED FINANCIAL STATEMENT		31,695.	
TOTAL TO FORM 990, PART IV-A		31,695.	

FORM 990	OTHER EXPENSES INCLUDED ON FORM 990	STATEMENT	9
DESCRIPTION		AMOUNT	
PAYMENTS TO AFFILIATES ON PART 1, LINE 16 NETTED AGAINST TOTAL REVENUE, GAINS AND SUPPORT ON THE AUDITED FINANCIAL STATEMENT			31,695.
TOTAL TO FORM 990, PART IV-B			31,695.

FORM 990	PART VIII - RELATIONSHIP OF ACTIVITIES TO ACCOMPLISHMENT OF EXEMPT PURPOSES	STATEMENT	10
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LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
	THE FOLLOWING SERVED AN EDUCATIONAL PURPOSE BY TEACHING:
93A	GRADES 9 THRU 12 BASIC PRINCIPLES OF BUSINESS
93B	GRADES 6 THRU 8 BASIC PRINCIPLES OF BUSINESS
93C	GRADES K THRU 5 BASIC PRINCIPLES OF BUSINESS
101	STUDENT BUSINESS PRINCIPLES AND FUNDAMENTALS

SCHEDULE A	OTHER INCOME			STATEMENT	11
DESCRIPTION	1999 AMOUNT	1998 AMOUNT	1997 AMOUNT	1996 AMOUNT	
OTHER INCOME	5,042.	5,042.	456.		
TOTAL TO SCHEDULE A, LINE 22	5,042.	5,042.	456.		