

**Return of Organization Exempt From Income Tax**

**2007**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

**A** For the 2007 calendar year, or tax year beginning **JUL 1, 2007** and ending **JUN 30, 2008**

**B** Check if applicable:  Address change,  Name change,  Initial return,  Termination,  Amended return,  Application pending

**C** Name of organization: **JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.**

Number and street (or P O box if mail is not delivered to street address): **2335 E. ATLANTIC BLVD.** Room/suite: **200**

City or town, state or country, and ZIP + 4: **POMPANO BEACH, FL 33062**

**D** Employer identification number: **59-0871446**

**E** Telephone number: **954-788-8422**

**F** Accounting method:  Cash  Accrual

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**H and I are not applicable to section 527 organizations**

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** If "Yes," enter number of affiliates: **N/A**

**H(c)** Are all affiliates included? **N/A**  Yes  No (If "No," attach a list)

**H(d)** Is this a separate return filed by an organization covered by a group ruling?  Yes  No

**I** Group Exemption Number: **1116**

**G** Website: **N/A**

**J** Organization type (check only one):  501(c) ( 03 ) (insert no)  4947(a)(1) or  527

**K** Check here  if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

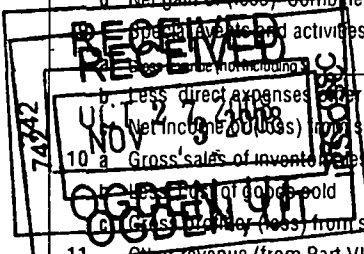
**M** Check  if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

**L** Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12: **2,617,481.**

**Part I: Revenue, Expenses, and Changes in Net Assets or Fund Balances**

Revenue	1	Contributions, gifts, grants, and similar amounts received				
	a	Contributions to donor advised funds	1a			
	b	Direct public support (not included on line 1a)	1b	2,081,017.		
	c	Indirect public support (not included on line 1a)	1c			
	d	Government contributions (grants) (not included on line 1a)	1d			
	e	Total (add lines 1a through 1d) (cash \$ 1,822,932. noncash \$ 258,085.)	1e		2,081,017.	
	2	Program service revenue including government fees and contracts (from Part VII, line 93)	2			
	3	Membership dues and assessments	3			
	4	Interest on savings and temporary cash investments	4		76,630.	
	5	Dividends and interest from securities	5			
	Expenses	6 a	Gross rents	6a		
b		Less rental expenses	6b			
c		Net rental income or (loss) Subtract line 6b from line 6a	6c			
7		Other investment income (describe )	7			
8 a		Gross amount from sales of assets other than inventory	(A) Securities	8a		
			(B) Other	8b	609.	
				8c	-609.	
			d	Net gain or (loss) Combine line 8c, columns (A) and (B)	8d	
Net Assets		9 a	Other revenue from gaming activities (attach schedule) If any amount is from gaming, check here <input type="checkbox"/>	9a	450,171.	
		b	Less direct expenses other than fundraising expenses	9b	328,445.	
	c	Net income (or loss) from special events Subtract line 9b from line 9a	9c		121,726.	
	10 a	Gross sales of inventory less returns and allowances	10a			
	b	Less cost or other basis (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10b			
11	Other revenue (from Part VII, line 103)	11		9,663.		
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12		2,288,427.		
13	Program services (from line 44, column (B))	13		803,079.		
14	Management and general (from line 44, column (C))	14		33,147.		
15	Fundraising (from line 44, column (D))	15		33,321.		
16	Payments to affiliates (attach schedule) SEE STATEMENT 3	16		27,398.		
17	Total expenses. Add lines 16 and 44, column (A)	17		896,945.		
18	Excess or (deficit) for the year Subtract line 17 from line 12	18		1,391,482.		
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19		6,179,839.		
20	Other changes in net assets or fund balances (attach explanation)	20		0.		
21	Net assets or fund balances at end of year Combine lines 18, 19, and 20	21		7,571,321.		

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**JUNIOR ACHIEVEMENT OF  
SOUTH FLORIDA, INC.**

Form 990 (2007)

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**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
<b>22a</b> Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/> <b>22a</b>				
<b>22b</b> Other grants and allocations (attach schedule) (cash \$ <u>0</u> . noncash \$ <u>0</u> . If this amount includes foreign grants, check here <input type="checkbox"/> <b>22b</b>				
<b>23</b> Specific assistance to individuals (attach schedule) <b>23</b>				
<b>24</b> Benefits paid to or for members (attach schedule) <b>24</b>				
<b>25a</b> Compensation of current officers, directors, key employees, etc listed in Part V-A <b>25a</b>	80,048.	80,048.	0.	0.
<b>b</b> Compensation of former officers, directors, key employees, etc listed in Part V-B <b>25b</b>	0.	0.	0.	0.
<b>c</b> Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <b>25c</b>				
<b>26</b> Salaries and wages of employees not included on lines 25a, b, and c <b>26</b>	324,206.	283,780.	20,213.	20,213.
<b>27</b> Pension plan contributions not included on lines 25a, b, and c <b>27</b>				
<b>28</b> Employee benefits not included on lines 25a - 27 <b>28</b>	74,034.	66,630.	3,702.	3,702.
<b>29</b> Payroll taxes <b>29</b>	30,154.	27,138.	1,508.	1,508.
<b>30</b> Professional fundraising fees <b>30</b>				
<b>31</b> Accounting fees <b>31</b>				
<b>32</b> Legal fees <b>32</b>				
<b>33</b> Supplies <b>33</b>	115,838.	115,434.	115.	289.
<b>34</b> Telephone <b>34</b>	7,760.	6,984.	388.	388.
<b>35</b> Postage and shipping <b>35</b>	2,548.	2,316.	116.	116.
<b>36</b> Occupancy <b>36</b>	8,100.	7,288.	406.	406.
<b>37</b> Equipment rental and maintenance <b>37</b>	8,631.	8,167.	232.	232.
<b>38</b> Printing and publications <b>38</b>	2,397.	2,253.	72.	72.
<b>39</b> Travel <b>39</b>	21,404.	20,250.	577.	577.
<b>40</b> Conferences, conventions, and meetings <b>40</b>				
<b>41</b> Interest <b>41</b>	2,571.	2,313.	129.	129.
<b>42</b> Depreciation, depletion, etc. (attach schedule) <b>42</b>	13,227.	12,547.	340.	340.
<b>43</b> Other expenses not covered above (itemize):				
a _____ <b>43a</b>				
b _____ <b>43b</b>				
c _____ <b>43c</b>				
d _____ <b>43d</b>				
e _____ <b>43e</b>				
f _____ <b>43f</b>				
g <b>SEE STATEMENT 4</b> <b>43g</b>	178,629.	167,931.	5,349.	5,349.
<b>44</b> Total functional expenses. Add lines 22a through 43g (Organizations completing columns (B)-(D), carry these totals to lines 13-15) <b>44</b>	869,547.	803,079.	33,147.	33,321.

**Joint Costs.** Check  if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ N/A , (ii) the amount allocated to Program services \$ N/A ,  
 (iii) the amount allocated to Management and general \$ N/A , and (iv) the amount allocated to Fundraising \$ N/A

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Form 990 (2007)

JUNIOR ACHIEVEMENT OF  
SOUTH FLORIDA, INC.

Form 990 (2007)

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**Part III** Statement of Program Service Accomplishments (See the instructions.)

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.

What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 5</u>	Program Service Expenses (Required for 501(c)(3) and (4) orgs, and 4947(a)(1) trusts, but optional for others)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	
<b>a GRADES 9 THRU 12: A BUSINESS ROLE MODEL, TRAINED BY JA, DELIVERS JA CURRICULUM ON FREE ENTERPRISE EDUCATION.</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	40,829.
<b>b GRADES 6 THRU 8: A BUSINESS CONSULTANT (VOLUNTEER) TEACHES ECONOMICS TO STUDENTS ONE CLASS PERIOD PER WEEK.</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	61,164.
<b>c GRADES K THRU 5: VOLUNTEERS TO TEACH THE BASICS OF THE FREE ENTERPRISE SYSTEM.</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	565,677.
<b>d JA WORLD AT THE HUIZENGA CENTER FOR FREE ENTERPRISE: STUDENTS LEARN THE BASICS OF THE FREE ENTERPRISE SYSTEM.</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	135,409.
<b>e Other program services (attach schedule)</b>	
(Grants and allocations \$ ) If this amount includes foreign grants, check here ► <input type="checkbox"/>	803,079.
<b>f Total of Program Service Expenses (should equal line 44, column (B), Program services)</b>	803,079.

Form 990 (2007)

**JUNIOR ACHIEVEMENT OF  
SOUTH FLORIDA, INC.**

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**Part IV Balance Sheets** (See the instructions.)

**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
<b>Assets</b>	45 Cash - non-interest-bearing	2,651,728.	45	2,411,632.
	46 Savings and temporary cash investments		46	
	47 a Accounts receivable	2,268,000.		
	b Less: allowance for doubtful accounts		47c	2,268,000.
	48 a Pledges receivable	3,729,376.		
	b Less: allowance for doubtful accounts		48c	3,729,376.
	49 Grants receivable		49	
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		50b	
	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		53	
	54 a Investments - publicly-traded securities	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a
	b Investments - other securities	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b
55 a Investments - land, buildings, and equipment: basis				
b Less accumulated depreciation		55c		
56 Investments - other	SEE STATEMENT 6	4,886.	56	4,402.
57 a Land, buildings, and equipment basis	70,971.			
b Less accumulated depreciation	23,553.	19,257.	57c	47,418.
58 Other assets, including program-related investments (describe ▶ SEE STATEMENT 7 )		1,010,545.	58	9,488,041.
59 <b>Total assets</b> (must equal line 74). Add lines 45 through 58		9,550,097.	59	17,948,869.
<b>Liabilities</b>	60 Accounts payable and accrued expenses	55,817.	60	69,041.
	61 Grants payable		61	
	62 Deferred revenue	3,010,000.	62	3,271,000.
	63 Loans from officers, directors, trustees, and key employees		63	
	64 a Tax-exempt bond liabilities		64a	
	b Mortgages and other notes payable		64b	
	65 Other liabilities (describe ▶ SEE STATEMENT 8 )		304,441.	65
66 <b>Total liabilities.</b> Add lines 60 through 65		3,370,258.	66	10,377,548.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	517,083.	67	2,008,756.
	68 Temporarily restricted	5,662,756.	68	5,562,565.
	69 Permanently restricted		69	
	<b>Organizations that do not follow SFAS 117, check here</b> <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 <b>Total net assets or fund balances.</b> Add lines 67 through 69 or lines 70 through 72 (Column (A) must equal line 19 and column (B) must equal line 21)		6,179,839.	73	7,571,321.
74 <b>Total liabilities and net assets/fund balances.</b> Add lines 66 and 73		9,550,097.	74	17,948,869.

Form 990 (2007)

JUNIOR ACHIEVEMENT OF  
SOUTH FLORIDA, INC.

**Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** (See the instructions)

<b>a</b>	Total revenue, gains, and other support per audited financial statements		<b>a</b>	3,013,999.
<b>b</b>	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	<b>b1</b>		
2	Donated services and use of facilities	<b>b2</b>	424,525.	
3	Recoveries of prior year grants	<b>b3</b>		
4	Other (specify): <u>SEE STATEMENT 9</u>	<b>b4</b>	328,445.	
	Add lines <b>b1</b> through <b>b4</b>			<b>b</b> 752,970.
<b>c</b>	Subtract line <b>b</b> from line <b>a</b>			<b>c</b> 2,261,029.
<b>d</b>	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	<b>d1</b>		
2	Other (specify): <u>SEE STATEMENT 11</u>	<b>d2</b>	27,398.	
	Add lines <b>d1</b> and <b>d2</b>			<b>d</b> 27,398.
<b>e</b>	<b>Total revenue</b> (Part I, line 12). Add lines <b>c</b> and <b>d</b>			<b>e</b> 2,288,427.

**Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

<b>a</b>	Total expenses and losses per audited financial statements		<b>a</b>	1,622,517.
<b>b</b>	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	<b>b1</b>	424,525.	
2	Prior year adjustments reported on Part I, line 20	<b>b2</b>		
3	Losses reported on Part I, line 20	<b>b3</b>		
4	Other (specify): <u>SEE STATEMENT 10</u>	<b>b4</b>	328,445.	
	Add lines <b>b1</b> through <b>b4</b>			<b>b</b> 752,970.
<b>c</b>	Subtract line <b>b</b> from line <b>a</b>			<b>c</b> 869,547.
<b>d</b>	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	<b>d1</b>		
2	Other (specify): <u>SEE STATEMENT 12</u>	<b>d2</b>	27,398.	
	Add lines <b>d1</b> and <b>d2</b>			<b>d</b> 27,398.
<b>e</b>	<b>Total expenses</b> (Part I, line 17). Add lines <b>c</b> and <b>d</b>			<b>e</b> 896,945.

**Part V-A Current Officers, Directors, Trustees, and Key Employees** (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENT 13		80,048.	0.	0.
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**JUNIOR ACHIEVEMENT OF  
SOUTH FLORIDA, INC.**

**Part VI Other Information (continued)**

		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III)		
	82b		N/A
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?		N/A
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
85 a	501(c)(4), (5), or (6) Were substantially all dues nondeductible by members?		N/A
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year		N/A
c	Dues, assessments, and similar amounts from members		85c N/A
d	Section 162(e) lobbying and political expenditures		85d N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices		85e N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)		85f N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		85g N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		85h N/A
86	501(c)(7) organizations Enter: a Initiation fees and capital contributions included on line 12		86a N/A
b	Gross receipts, included on line 12, for public use of club facilities		86b N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders		87a N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)		87b N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		88a X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI		88b X
89 a	501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under: section 4911 <input type="text" value="0"/> , section 4912 <input type="text" value="0"/> , section 4955 <input type="text" value="0"/> .		
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		89b X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 <input type="text" value="0"/> .		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization <input type="text" value="0"/> .		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		89e X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		89f X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		89g X
90 a	List the states with which a copy of this return is filed <input type="text" value="FL"/>		
b	Number of employees employed in the pay period that includes March 12, 2007	90b	9
91 a	The books are in care of <input type="text" value="EXECUTIVE DIRECTOR"/> Telephone no <input type="text" value="954-788-8422"/> Located at <input type="text" value="POMPANO BEACH, FLORIDA"/> ZIP + 4 <input type="text" value="33062"/>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country <input type="text" value="N/A"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	91b	X

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**Part VI Other Information** (continued) Yes No

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c  Yes  No  
 If "Yes," enter the name of the foreign country N/A

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 92  N/A

**Part VII Analysis of Income-Producing Activities** (See the instructions)

**Note:** 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 _____					
b _____					
c _____					
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			14	76,630.	
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			18	-609.	
101 Net income or (loss) from special events					121,726.
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a MISCELLANEOUS					9,663.
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		76,021.	131,389.
105 Total (add line 104, columns (B), (D), and (E))					207,410.

**Note:** Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See the instructions.)

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)
101	STUDENT BUSINESS PRINCIPLES AND FUNDAMENTALS
103A	MISCELLANEOUS EXEMPT FUNCTION SERVICE ACTIVITIES

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See the instructions)

(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** (See the instructions.)

(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

**Note:** If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Form 990 (2007)

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SOUTH FLORIDA, INC.

Form 990 (2007)

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**Part XI** Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). N/A

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
<b>Totals</b>				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	----- ----- -----			
b	----- ----- -----			
c	----- ----- -----			
<b>Totals</b>				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes No

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

Please Sign Here: *Melissa Aiello* Signature of officer | 10/29/2008 Date

Type or print name and title: *Melissa Aiello*

Paid Preparer's Use Only: *William J. ... CPA* Date: *10/27/08* Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: **KEEFE, MCCULLOUGH & CO., LLP, C.P.A.'S**  
**6550 N FEDERAL HIGHWAY, SUITE 410**  
**FT. LAUDERDALE, FL 33308**

EIN: **591363792**  
Phone no: **954-771-0896**

Form 990 (2007)

**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 4947(a)(1) Nonexempt Charitable Trust

**2007**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information-(See separate instructions.)**

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

Name of the organization **JUNIOR ACHIEVEMENT 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 page 1 of the 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
CINDY BURKETT 20221 SW 50TH PLACE, SOUTHWEST RANCHE	VP OF OPERATIONS 40.00	71,346.		
GINA GRAVES 310 SE 23RD AVENUE, BOYNTON BEACH, FL	DIR OF DEVELOPMENT 40.00	55,000.		
SENNETHA HEPBURN-DESROCHES 656 NW 90TH TERRACE, PLANTATION, FL 3	DIRECTOR 40.00	50,673.		
Total number of other employees paid over \$50,000 ▶	0			

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the 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 II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None " See page 2 of the instructions )

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

JUNIOR ACHIEVEMENT OF

**Part III** Statements About Activities (See page 2 of the instructions)

	Yes	No
<p>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 ► \$ _____ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B)</p> <p>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.</p>		X
<p>2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, 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? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)</p>		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e Transfer of any part of its income or assets?		X
3 a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)		X
b Did the organization have a section 403(b) annuity plan for its employees?		X
c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement.		X
d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?		X
4 a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g.		X
b Did the organization make any taxable distributions under section 4966?	N/A	
c Did the organization make a distribution to a donor, donor advisor, or related person?	N/A	
d Enter the total number of donor advised funds owned at the end of the tax year	►	N/A
e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year	►	N/A
f Enter the total number of separate funds or accounts owned at the end of the year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts	►	0.
g Enter the aggregate value of assets in all funds or accounts included on line 4f at the end of the tax year	►	0.

**Part IV Reason for Non-Private Foundation Status** (See pages 4 through 8 of the instructions )

I certify that 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 )
- 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 otherwise meets the requirements of section 509(a)(3) Check the box that describes the type of supporting organization  
 Type I       Type II       Type III-Functionally Integrated       Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions )

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
<b>Total</b>					▶

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 8 of the instructions )

**JUNIOR ACHIEVEMENT OF**

**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) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants See line 28)		2,446,197.	1,443,018.	463,157.	4,352,372.
<b>16</b> Membership fees received					
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose		436,624.	422,389.	366,717.	1,225,730.
<b>18</b> Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975		27,378.	2,385.	113.	29,876.
<b>19</b> Net income from unrelated business activities not included in line 18					
<b>20</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
<b>21</b> 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					
<b>22</b> Other income Attach a schedule Do not include gain or (loss) from sale of capital assets		8,864.	333.	4,785.	13,982.
<b>23</b> Total of lines 15 through 22	0.	2,919,063.	1,868,125.	834,772.	5,621,960.
<b>24</b> Line 23 minus line 17		2,482,439.	1,445,736.	468,055.	4,396,230.
<b>25</b> Enter 1% of line 23		29,191.	18,681.	8,348.	
<b>26</b> Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24					N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts					N/A
c Total support for section 509(a)(1) test Enter line 24, column (e)					N/A
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					N/A
e Public support (line 26c minus line 26d total)					N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					N/A %
<b>27</b> Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year	(2006) 0.	(2005) 0.	(2004) 0.	(2003) 0.	0.
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records 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 11b, as well as individuals) Do not file this list with your return. 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	(2006) 0.	(2005) 0.	(2004) 0.	(2003) 0.	0.
c Add Amounts from column (e) for lines 15 <u>4,352,372.</u> 16 _____ 17 <u>1,225,730.</u> 20 _____ 21 _____					5,578,102.
d Add Line 27a total <u>0.</u> and line 27b total <u>0.</u>					0.
e Public support (line 27c total minus line 27d total)					5,578,102.
f Total support for section 509(a)(2) test Enter amount on line 23, column (e)			5,621,960.		
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					99.2199%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					.5314%
<b>28</b> Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15		NONE			

JUNIOR ACHIEVEMENT OF

**Part V Private School Questionnaire** (See page 9 of the instructions )

N/A

**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

		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	

JUNIOR ACHIEVEMENT OF

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 11 of the instructions)

N/A

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

Check  a  if the organization belongs to an affiliated group Check  b  if you checked "a" 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 13 of the instructions)

Calendar year (or fiscal year beginning in)	Lobbying Expenditures During 4-Year Averaging Period				N/A
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
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) (See page 14 of the instructions)

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



FORM 990 GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 1

DESCRIPTION	DATE ACQUIRED		DATE SOLD		METHOD ACQUIRED
	VARIOUS		VARIOUS		PURCHASED
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
NONE	0.	168,738.	0.	168,129.	-609.
TO FM 990, PART I, LN 8		168,738.	0.	168,129.	-609.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 2

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME OR (LOSS)
BOWL-A-THON SOUTH FLORIDA INVITATIONAL	112,762.		112,762.	27,715.	85,047.
CIGAR NIGHT	138,583.		138,583.	68,791.	69,792.
PROFESSIONAL CONNECTION	59,862.		59,862.	97,481.	-37,619.
FINE WINE AUCTION	51,364.		51,364.	20,523.	30,841.
HALL OF FAME	20,900.		20,900.	25,807.	-4,907.
	66,700.		66,700.	88,128.	-21,428.
TO FM 990, PART I, LINE 9	450,171.		450,171.	328445.	121,726.

FORM 990	PAYMENTS TO AFFILIATES	STATEMENT	3
<u>AFFILIATE'S NAME</u>	<u>AFFILIATE'S ADDRESS</u>		
JUNIOR ACHIEVEMENT, INC. NATIONAL HEADQUARTERS	ONE EDUCATION WAY COLORADO SPRINGS, CO 80906		
<u>PURPOSE OF PAYMENT</u>		<u>AMOUNT</u>	
PARTICIPATION FEES TO NATIONAL ORGANIZATION		27,398.	
TOTAL TO FORM 990, PART I, LINE 16		27,398.	

FORM 990	OTHER EXPENSES			STATEMENT	4
<u>DESCRIPTION</u>	(A) <u>TOTAL</u>	(B) <u>PROGRAM SERVICES</u>	(C) <u>MANAGEMENT AND GENERAL</u>	(D) <u>FUNDRAISING</u>	
CONTRACT LABOR	21,993.	21,043.	475.	475.	
MISCELLANEOUS	74,341.	66,487.	3,927.	3,927.	
PROFESSIONAL FEES	8,400.	7,560.	420.	420.	
MARKETING	17,340.	17,190.	75.	75.	
INSURANCE	6,253.	5,627.	313.	313.	
TRAINING AND RECRUITMENT	2,787.	2,509.	139.	139.	
BAD DEBT	41,916.	41,916.			
DUES & SUBSCRIPTIONS	5,599.	5,599.			
TOTAL TO FM 990, LN 43	178,629.	167,931.	5,349.	5,349.	

FORM 990	STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE	STATEMENT	5
	PART III		

EXPLANATION

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

FORM 990	OTHER INVESTMENTS	STATEMENT	6
DESCRIPTION	VALUATION METHOD	AMOUNT	
INVESTMENTS	MARKET VALUE	4,402.	
TOTAL TO FORM 990, PART IV, LINE 56, COLUMN B		4,402.	

FORM 990	OTHER ASSETS	STATEMENT	7
DESCRIPTION	BEGINNING OF YEAR	END OF YEAR	
CONSTRUCTION-IN-PROCESS	814,110.	1,846,085.	
DEFERRED EXPENSES	196,435.	374,510.	
BOND ISSUE COSTS, NET OF ACCUMULATED AMORT. \$1346		483,346.	
RESTRICTED CASH		6,784,100.	
TOTAL TO FORM 990, PART IV, LINE 58		9,488,041.	

FORM 990	OTHER LIABILITIES	STATEMENT	8
DESCRIPTION	BEGINNING OF YEAR	END OF YEAR	
NOTE PAYABLE	54,441.		
PROMISES TO GIVE TO OTHERS	250,000.		
RETAINAGE PAYABLE		37,507.	
BONDS PAYABLE		7,000,000.	
TOTAL TO FORM 990, PART IV, LINE 65		7,037,507.	

FORM 990	OTHER REVENUE NOT INCLUDED ON FORM 990	STATEMENT	9
DESCRIPTION	AMOUNT		
FUNDRAISING EXPENSES NETTED AGAINST FUNDRAISING REVENUE ON PART 1, LINE 9B	328,445.		
TOTAL TO FORM 990, PART IV-A		328,445.	

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT 10
DESCRIPTION		AMOUNT
	FUNDRAISING EXPENSES NETTED AGAINST FUNDRAISING INCOME ON PART 1, LINE 9B	328,445.
	TOTAL TO FORM 990, PART IV-B	328,445.

FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT 11
DESCRIPTION		AMOUNT
	PAYMENTS TO AFFILIATES ON PART 1, LINE 16 NETTED AGAINST TOTAL REVENUE, GAINS AND SUPPORT ON THE AUDITED FINANCIAL STATEMENT	27,398.
	TOTAL TO FORM 990, PART IV-A	27,398.

FORM 990	OTHER EXPENSES INCLUDED ON FORM 990	STATEMENT 12
DESCRIPTION		AMOUNT
	PAYMENTS TO AFFILIATES ON PART 1, LINE 16 NETTED AGAINST TOTAL REVENUE, GAINS AND SUPPORT ON THE AUDITED FINANCIAL STATEMENT	27,398.
	TOTAL TO FORM 990, PART IV-B	27,398.

FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES STATEMENT 13

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MELISSA AIELLO 2335 E. ATLANTIC BLVD., STE 200 POMPANO BEACH, FL 33062	PRESIDENT 40.00	80,048.	0.	0.
MATT BECKER 7805 SW 6TH COURT PLANTATION, FL 33324	BOARD MEMBER 0.00	0.	0.	0.
ANDREW CAGNETTA, JR 5101 NW 21ST AVENUE FORT LAUDERDALE, FL 33309	BOARD MEMBER 0.00	0.	0.	0.
LARRY CALDERON 3301 COLLEGE AVENUE #161 FORT LAUDERDALE, FL 33314-7796	BOARD MEMBER 0.00	0.	0.	0.
ROBIN C. CAMPBELL 350 EAST LAS OLAS BLVD , SUITE 1700 FORT LAUDERDALE, FL 33301	BOARD MEMBER 0.00	0.	0.	0.
LES CAMPBELL 101 NORTH FEDERAL HWY, #600 BOCA RATON, FL 33432-3924	BOARD MEMBER 0.00	0.	0.	0.
BLAKE CAMPBELL 8919 MAPLE HILL COURT BOYNTON BEACH, FL 33437	BOARD MEMBER 0.00	0.	0.	0.
BARBARA CAPELETTI 1895 MERION LANE CORAL SPRINGS, FL 33071	BOARD MEMBER 0.00	0.	0.	0.
JANICE CARULLI 777 AMERICAN EXPRESSWAY FORT LAUDERDALE, FL 33337	BOARD MEMBER 0.00	0.	0.	0.
MARTIN CLANCY 851 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309-2009	BOARD MEMBER 0.00	0.	0.	0.

BRENT COLSTON 6401 NOB HILL ROAD TAMARAC, FL 33321	BOARD MEMBER 0.00	0.	0.	0.
GERALD CZARNECKI 282 FAN PALM ROAD BOCA RATON, FL 33432	BOARD MEMBER 0.00	0.	0.	0.
MIKE DAYHOFF 4250 N FEDERAL HWY LIGHTHOUSE POINT, FL 33064	BOARD MEMBER 0.00	0.	0.	0.
JACK DRURY 2800 E COMMERCIAL BLVD #207 FORT LAUDERDALE, FL 33308	BOARD MEMBER 0.00	0.	0.	0.
HOWARD DVORKIN 5701 W. SUNRISE BLVD., STE. 200 FORT LAUDERDALE, FL 33313	BOARD MEMBER 0.00	0.	0.	0.
GARY ELLIS 5900 N. ANDREWS AVENUE, 10TH FLOOR FORT LAUDERDALE, FL 33309-2369	BOARD MEMBER 0.00	0.	0.	0.
CHARLES FELIX 1939 BONNIE STREET BOCA RATON, FL 33486	BOARD MEMBER 0.00	0.	0.	0.
MICHAEL FISCHLER 1000 SOUTH ANDREWS AVENUE FORT LAUDERDALE, FL 33316	BOARD MEMBER 0.00	0.	0.	0.
JAMES FRANSKOUSKY 23029 L'ERMITAGE CIRCLE BOCA RATON, FL 33432	BOARD MEMBER 0.00	0.	0.	0.
STACY GOLD 450 EAST LAS OLAS BLVD FORT LAUDERDALE, FL 33301	BOARD MEMBER 0.00	0.	0.	0.
MIKE GREENE 1844 N. NOB RD. #445 PLANTATION, FL 33322	BOARD MEMBER 0.00	0.	0.	0.
MICHELE HAAS 1571 SAWGRASS CORPORATE PARKWAY, ST 140 SUNRISE, FL 33323	BOARD MEMBER 0.00	0.	0.	0.
ISABEL HEBERT 700 UNIVERSE BLVD., HRR/JB JUNO BEACH, FL 33408-0420	BOARD MEMBER 0.00	0.	0.	0.

BRUCE HECKER 110 SE SIXTH STREET FORT LAUDERDALE, FL 33301	BOARD MEMBER 0.00	0.	0.	0.
JOSEPH HESS PO BOX 612447 POMPANO BEACH, FL 33061	BOARD MEMBER 0.00	0.	0.	0.
FRANK JAUMOT 190 SE 19TH AVENUE POMPANO BEACH, FL 33060	BOARD MEMBER 0.00	0.	0.	0.
F. LITRENTO 1489 W PALMETTO PARK RD., 3RD FL BOCA RATON, FL 33486	BOARD MEMBER 0.00	0.	0.	0.
MARK LUDWIG 1441 BRICKELL AVENUE, #1100 MIAMI, FL 33131	BOARD MEMBER 0.00	0.	0.	0.
CHUCK MALKUS 2170 SE 17TH STREET CAUSEWAY #201 FORT LAUDERDALE, FL 33316	BOARD MEMBER 0.00	0.	0.	0.
JUDY PAUL 6591 ORANGE DRIVE DAVIE, FL 33314	BOARD MEMBER 0.00	0.	0.	0.
SHANA PETERSON-SHEPTAK 11349 SANDSTONE HILL TERRACE BOYNTON BEACH, FL 33437	BOARD MEMBER 0.00	0.	0.	0.
MARK QUINTANA 600 SE 3RD AVENUE FORT LAUDERDALE, FL 33301	BOARD MEMBER 0.00	0.	0.	0.
C. RASSLER 1000 CORPORATE DR., STE 340 FORT LAUDERDALE, FL 33334	BOARD MEMBER 0.00	0.	0.	0.
DOUGLAS ROBERTS 6555 N. FEDERAL HIGHWAY, STE 101 FORT LAUDERDALE, FL 33308	BOARD MEMBER 0.00	0.	0.	0.
JEROME ROSENTHAL 1250 W. SUNRISE BLVD. FORT LAUDERDALE, FL 33311	BOARD MEMBER 0.00	0.	0.	0.
JEFF KUNTZ 401 E. LAS OLAS BOULEVARD, STE 1850 FORT LAUDERDALE, FL 33301	BOARD MEMBER 0.00	0.	0.	0.

JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC

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PAUL SCHULER 2381 STIRLING ROAD FORT LAUDERDALE, FL 33312	BOARD MEMBER 0.00	0.	0.	0.
PETER SHEPTAK 190 JIM MORAN BOULEVARD DEERFIELD BEACH, FL 33442	BOARD MEMBER 0.00	0.	0.	0.
MARK TEMPLETON 851 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309-2009	BOARD MEMBER 0.00	0.	0.	0.
FRANK TILL 1150 NW 120TH AVENUE PLANTATION, FL 33323	BOARD MEMBER 0.00	0.	0.	0.
BRAD WEINBRUM 12301 NW 39TH STREET CORAL SPRINGS, FL 33065	BOARD MEMBER 0.00	0.	0.	0.
JASON WELCH 10362 GENTLEWOOD FOREST DRIVE BOYNTON BEACH, FL 33437	BOARD MEMBER 0.00	0.	0.	0.
NONA WILGUS 2100 W. CYPRESS CREEK ROAD FORT LAUDERDALE, FL 33309	BOARD MEMBER 0.00	0.	0.	0.
ALAN WOLNEK 1520 S. POWERLINE ROAD DEERFIELD BEACH, FL 33442	BOARD MEMBER 0.00	0.	0.	0.
JOHN ZAMORA 200 S. BISCAYNE BOULEVARD, SUITE 400 MIAMI, FL 33131	BOARD MEMBER 0.00	0.	0.	0.
DEVIN AVERY 115 S. ANDREWS AVE., STE A-540 FORT LAUDERDALE, FL 33301	BOARD MEMBER 0.00	0.	0.	0.
MERRIE HENISER 350 EAST LAS OLAS BLVD , SUITE 1420 FORT LAUDERDALE, FL 33301	BOARD MEMBER 0.00	0.	0.	0.
LINA FERNANDEZ 450 EAST LAS OLAS BLVD, STE 750 FORT LAUDERDALE, FL 33301	BOARD MEMBER 0.00	0.	0.	0.
TOTALS INCLUDED ON FORM 990, PART V-A		<u>80,048.</u>	<u>0.</u>	<u>0.</u>

SCHEDULE A	OTHER INCOME			STATEMENT 14
DESCRIPTION	2006 AMOUNT	2005 AMOUNT	2004 AMOUNT	2003 AMOUNT
MISCELLANEOUS	0.	8,864.	333.	4,785.
TOTAL TO SCHEDULE A, LINE 22	0.	8,864.	333.	4,785.