

## APPROPRIATIONS CONTRACT

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**THIS CONTRACT** is made and entered into on \_\_\_\_\_, by the City of Pompano Beach (“City”) and JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC. a Not For Profit Corporation authorized to do business in the State of Florida (“Recipient”).

**WHEREAS**, the City of Pompano Beach has appropriated for its current Fiscal Year 2020-21 (October 1st through September 30th), the sum of \$15,000 to Recipient, to conduct a program entitled or activity as described in Exhibit “A” Recipients Requirements, Contractual Responsibilities and Program Description” (collectively the “Work”) attached hereto and incorporated herein by reference, for the period beginning upon full execution by the parties and ending September 30, 2021; and

**WHEREAS**, the City Commission finds that entering into this Contract serves a valid public purpose as Recipients shall perform or provide a service that is beneficial to the residents of the City, and that the City is currently not in a position to provide such services on its own; and

**WHEREAS**, it is in the best interest of the City to enter into this contract with Recipient to provide the Work hereunder in accordance with the terms and conditions set forth herein; and

**NOW, THEREFORE**, in consideration of those mutual promises and the terms and conditions set forth hereafter, the parties agree as set forth below.

1. *Contract Documents.* This Contract consists of Exhibit A, “Recipients Requirements, Contractual Responsibilities and Program Description”; Exhibit B, “Payment Schedule”; and Exhibit C, “Insurance Requirements” attached hereto, made a part hereof and incorporated herein, and all written change orders and modifications issued and approved by the City after execution of this Contract.
2. *Term of Contract.* This Contract shall commence upon full execution by both parties and end on September 30, 2021.
3. *Renewal.* This Contract is not subject to renewal.
4. *City’s Maximum Obligation.* City agrees to pay Recipient the aforementioned sum to provide the Work. Both parties agree that unless otherwise directed by City in writing, Recipient shall continue to provide the Work during the term of this Contract.
5. *Payment of Program.* City shall pay Recipient for performance of the Work in accordance with Payment Schedule set forth in Exhibit B.
6. *Disputes.* Any factual disputes between City and the Recipient in regard to this Contract shall be directed to the City Manager for the City whose decision shall be final.

7. *Contract Administrators, Notices and Demands.*

A. *Contract Administrators.* During the term of this Contract, the City's Contract Administrator shall be the City Manager or his/her written designee and Recipient's Contract Administrator shall be Linda Lynch or his/her written designee.

B. *Notices and Demands.* A notice, demand or other communication hereunder by either party to the other shall be effective if it is in writing and sent via email, facsimile, registered or certified mail, postage prepaid to the representative(s) named below or is addressed and delivered to such other authorized representative at the address as that party from time to time may designate in writing and forward to the other as provided herein.

**If to Recipient:** Linda Lynch  
Grants and Government Relations Manager  
1130 Coconut Creek Boulevard  
Coconut Creek, FL 33066  
Office: (954) 979-7100  
Email: linda@jasouthflorida.org

**If to City:** Greg Harrison, City Manager  
100 W Atlantic Blvd.  
Pompano Beach, FL 33060  
Office: (954) 786-4601  
Email: greg.harrison@copbfl.com

8. *Ownership of Documents and Information.* All information, data, reports, plans, procedures or other proprietary rights in all items, developed, prepared, assembled or compiled by Recipient as required for the Work hereunder, whether complete or unfinished, shall be owned by City without restriction, reservation or limitation of their use and made available at any time and at no cost to City upon reasonable written request for use and/or distribution as City deems appropriate provided City has compensated Recipient in accordance with the terms set forth herein. City's re-use of Recipient's Work product shall be at its sole discretion and risk if done without Recipient's written permission. Upon completion of all Work contemplated hereunder or termination of this Contract, Recipient shall promptly provide City's Contract Administrator copies of all of the above Work documents upon written request. Recipient may not disclose, use, license or sell any Work developed, created or otherwise originated hereunder to any third party whatsoever. The rights and obligations created under this paragraph shall survive termination or expiration of this Contract.

To the extent it is necessary for Recipient to perform the Work, City shall provide any information, data and reports in its possession to Recipient free of charge.

9. *Termination.* City shall have the right to terminate this Contract, in whole or in part, for cause, default or negligence on Recipient's part, upon ten (10) business days advance written notice to Recipient. Such Notice of Termination may include City's requests for certain product documents and materials, and other provisions regarding the Program.

If there is any material breach or default in Recipient's performance of any covenant or obligation hereunder which has not been remedied within ten (10) business days after City's written Notice of Termination, City, in its sole discretion, may terminate this Contract immediately and Recipient shall not be entitled to receive further payment from the effective date of the Notice of Termination.

In the event the City fails for any reason to appropriate funds for this Contract, it shall be deemed terminated and City shall provide Recipient with ten (10) business days written notice. Upon receipt of said notice, Recipient shall be responsible for any and all expenses and/or legal obligations made after receipt of City's written notice from the City.

10. *Force Majeure.* Neither party shall be obligated to perform any duty, requirement or obligation hereunder if such performance is prevented by fire, hurricane, earthquake, explosion, war, civil disorder, sabotage, accident, flood, acts of nature or by any reason of any other matter or condition beyond the control of either party which cannot be overcome by reasonable diligence and without unusual expense ("Force Majeure"). In no event shall economic hardship or lack of funds be considered an event of Force Majeure. Additionally, should funds not be utilized, and services or programs not provided within the specific required time period in this Contract due to circumstances outside the control of Recipient, including but not limited to, a Force Majeure event, City is under no obligation to amend or extend this Contract to provide the approved funding past the expiration of the performance period set forth in this Contract. Any amendment to this Contract for such purposes shall be at City's sole discretion, based upon its budget, available funds, and other factors it may deem relevant.

Recipient must follow all Federal, State, County, and City safety guidelines, including all CDC safety guidelines in effect during the term of the program, including but not limited to social distancing, and personal protection equipment. Inability to conduct the program and follow any and all required safety guidelines from the COVID-19 crisis or other similar emergency, or failure to follow such requirements, including but not limited to, social distancing, shall constitute grounds for immediate cancellation of this Agreement unilaterally by the City upon written notice, which may be provided via electronic mail.

11. *Insurance.* Recipient shall maintain insurance in accordance with Exhibit C throughout the term of this Contract.

12. *Indemnification.* Except as expressly provided herein, no liability shall attach to the City by reason of entering into this Contract.

A. Recipient shall at all times indemnify, hold harmless and defend the City, its officials, employees, volunteers and other authorized agents from and against any and all claims, demands, suit, damages, attorneys' fees, fines, losses, penalties, defense costs or liabilities suffered by the City arising directly or indirectly from any act, breach, omission, negligence, recklessness or misconduct of Recipient and/or any of its agents, officers, or employees hereunder, including any inaccuracy in or breach of any of the representations, warranties or covenants made by the Recipient, its agents, officers and/or employees, in the performance of Work under this Contract. Recipient agrees to investigate, handle, respond to, provide defense for, and defend any such claims at its sole expense and to bear all other costs and expenses related thereto, even if the claim(s) is/are groundless, false or fraudulent. To the extent considered necessary by City, any sums due Recipient hereunder may be retained by City until all of City's

claims for indemnification hereunder have been settled or otherwise resolved, and any amount withheld shall not be subject to payment or interest by City.

B. Recipient acknowledges and agrees that City would not enter into this Contract without this indemnification of City by Recipient. The parties agree that one percent (1%) of the total compensation paid to Recipient hereunder shall constitute specific consideration to Recipient for the indemnification provided under this Paragraph and these provisions shall survive expiration or early termination of this Contract.

13. *Sovereign Immunity.* Nothing in this Contract shall be construed to affect in any way the rights, privileges and immunities of the City and its agents as set forth in §768.28, Florida Statutes. Nothing herein shall be construed as consent from either party to be sued by third parties.

14. *Non-Assignability and Subcontracting.*

A. *Non-Assignability.* This Contract is not assignable and Recipient agrees it shall not assign or otherwise transfer any of its interests, rights or obligations hereunder, in whole or in part, to any other person or entity without City's prior written consent which must be sought in writing not less than fifteen (15) days prior to the date of any proposed assignment. Any attempt by Recipient to assign or transfer any of its rights or obligations hereunder without first obtaining City's written approval shall not be binding on City and, at City's sole discretion, may result in City's immediate termination of this Contract whereby City shall be released of any of its obligations hereunder. In addition, this Contract and the rights and obligations herein shall not be assignable or transferable by any process or proceeding in court, or by judgment, execution, proceedings in insolvency, bankruptcy or receivership. In the event of Recipient's insolvency or bankruptcy, City may, at its option, terminate and cancel this Contract without any notice of any kind whatsoever, in which event all rights of Recipient hereunder shall immediately cease and terminate.

B. *Subcontracting.* Prior to subcontracting for Work to be performed hereunder, Recipient shall be required to obtain the written approval of the City's Contract Administrator. If the City's Contract Administrator, in his/her sole discretion, objects to the proposed subcontractor, Recipient shall be prohibited from allowing that subcontractor to provide any Work hereunder. Although Recipient may subcontract Work in accordance with this Paragraph, Recipient remains responsible for any and all contractual obligations hereunder and shall also be responsible to ensure that none of its proposed subcontractors are listed on the *Convicted Vendors List* in accordance with the provisions of Paragraph 26 below.

15. *Performance Under Law.* Recipient, in performance of its duties under this Contract, agrees to comply with all applicable local, state and/or federal laws and ordinances including, but not limited to, standards of licensing, conduct of business and those relating to criminal activity.

16. *Audit and Inspection Records.* Recipient shall permit authorized representatives of the City to inspect and audit all data and records of the Recipient, if any, related to the Work being funded by this Contract until three (3) years after City's final payment under this Contract. Recipient agrees that such inspections and audits may include City's authorized representatives auditing Recipient's financial affairs at any time with no advance notice by City.

Recipient further agrees to include in all subcontracts hereunder a provision to the effect that the subcontractor agrees that City or any of its duly authorized representatives shall, until **three (3) years after City's final payment to Recipient**, have access to and the right to examine any books, documents, papers and records of such subcontractor attendant to any subcontracted Work provided hereunder.

In the event Recipient receives fifty thousand dollars (\$50,000.00) or more from the City, the City reserves the right to request a copy of a Grant Auditing Report conducted in accordance with the Government Auditing Standards issued by the United States Comptroller General and the provisions of OMB Circular A-133 issued by the Office of Management and Budget, Executive Office of the President. If such a request is made by the City, all grant funds shall be shown via explicit disclosure in the annual financial statements and/or the accompanying notes to the financial statement. Upon City's written request, this Report shall be due within 120 days of the close of the City's fiscal year.

17. *Adherence to Law.* Both parties shall adhere to all applicable laws governing their relationship with their employees including, but not limited to, laws, rules, regulations and policies concerning worker's compensation, unemployment compensation and minimum wage requirements.

18. *Independent Contractor.* Recipient shall be deemed an independent contractor for all purposes, and employees of Recipient and all its contractors, subcontractors and the employees thereof, shall not in any manner be deemed to be employees of the City. As such, the employees of Recipient, its contractors or subcontractors, shall not be subject to any withholding for tax, social security or other purposes by City, nor shall such contractor, subcontractor or employee be entitled to sick leave, pension benefits, vacation, medical benefits, life insurance, workers or unemployment compensation or the like from City. Furthermore; nothing in this Contract shall be deemed to constitute or create a joint venture, partnership, pooling arrangement or other form of business entity between Recipient and City.

19. *Mutual cooperation.* Recipient recognizes its performance of Work hereunder is essential to the provision of vital public services and the accomplishment of the stated goals and mission of City. Therefore, Recipient shall be responsible to maintain a cooperative and good faith attitude in all relations with City and the public and shall actively foster a public image of mutual benefit to both parties. Recipient shall not make any statements or take any actions detrimental to this effort.

20. *Public Records.*

A. The City of Pompano Beach is a public agency subject to Chapter 119, Florida Statutes. The Recipient shall comply with Florida's Public Records Law, as amended. Specifically, the Recipient shall:

1. Keep and maintain public records required by the City in order to perform the service.

1. Upon request from the City's custodian of public records, provide the City with a copy of requested records or allow the records to be inspected or copied within a reasonable time

at a cost that does not exceed the cost provided in Chapter 119, Florida Statutes or as otherwise provided by law.

2. Ensure that public records that are exempt or confidential and exempt from public records disclosure requirements are not disclosed except as authorized by law for the duration of the contract term and following completion of the Contract if Recipient does not transfer the records to the City.

4. Upon completion of this Contract, transfer, at no cost to City, all public records in its possession or keep and maintain public records required by the City as required hereunder. If Recipient transfers all public records to the City upon completion of this Contract, Recipient shall destroy any duplicate public records that are exempt or confidential and exempt from public records disclosure requirements. If Recipient keeps and maintains public records upon completion of this Contract, Recipient shall meet all applicable requirements for retaining public records. Upon request from the City's custodian of public records, all records stored electronically by Recipient must be provided to the City in a format that is compatible with the information technology systems of the City.

B. Failure of the Recipient to provide the above described public records to the City within a reasonable time may subject Recipient to penalties under §119.10, Florida Statutes, as amended.

## **PUBLIC RECORDS CUSTODIAN**

**IF THE RECIPIENT HAS QUESTIONS REGARDING THE APPLICATION OF CHAPTER 119, FLORIDA STATUTES, TO THE RECIPIENT'S DUTY TO PROVIDE PUBLIC RECORDS RELATING TO THIS CONTRACT, CONTACT THE CUSTODIAN OF PUBLIC RECORDS AT:**

### **CITY CLERK**

**100 W. Atlantic Blvd., Suite 253**

**Pompano Beach, Florida 33060**

**(954) 786-4611**

**[RecordsCustodian@copbfl.com](mailto:RecordsCustodian@copbfl.com)**

21. *Governing Law.* Agreement must be interpreted and construed in accordance with and governed by the laws of the State of Florida. The exclusive venue for any lawsuit arising from, related to, or in connection with this Agreement will be in the state courts of the Seventeenth Judicial Circuit in and for Broward County, Florida. If any claim arising from, related to, or in connection with this Agreement must be litigated in federal court, the exclusive venue for any such lawsuit will be in the United States District Court or United States Bankruptcy Court for the Southern District of Florida. BY ENTERING INTO THIS AGREEMENT, THE PARTIES HEREBY EXPRESSLY WAIVE ANY RIGHTS EITHER PARTY MAY HAVE TO A TRIAL BY JURY OF ANY CIVIL LITIGATION RELATED TO THIS AGREEMENT.

22. *Waiver and Modification.*

A. No waiver made by either party with respect to performance, manner, time, or any obligation of either party or any condition hereunder shall be considered a waiver of that party's rights with respect to the particular obligation or condition beyond those expressly waived in writing or a waiver of any other rights of the party making the waiver or any other obligations of the other party.

B. No Waiver by Delay. The City shall have the right to institute such actions or proceedings as it may deem desirable for effectuating the purposes of this Contract provided that any delay by City in asserting its rights hereunder shall not operate as a waiver of such rights or limit them in any way. The intent of this provision is that City shall not be constrained to exercise such remedy at a time when it may still hope to otherwise resolve the problems created by the default or risk nor shall any waiver made by City with respect to any specific default by Recipient be considered a waiver of City's rights with respect to that default or any other default by Recipient.

C. Either party may request changes to modify certain provisions of this Contract; however, unless otherwise provided for herein, any such changes must be contained in a written amendment executed by both parties with the same formality of this Contract.

23. *No Contingent Fee.* Recipient warrants that other than a bona fide employee working solely for Recipient, Recipient has not employed or retained any person or entity, or paid or agreed to pay any person or entity, any fee, commission, gift or any other consideration to solicit or secure this Contract or contingent upon or resulting from the award or making of this Contract. In the event of Recipient's breach or violation of this provision, City shall have the right to terminate this Contract without liability and, at City's sole discretion, to deduct from the Payment Schedule set forth in Exhibit B or otherwise recover the full amount of such fee, commission, gift or other consideration.

24. *Attorneys' Fees and Costs.* In the event of any litigation involving the provisions of this Contract, both parties agree that the prevailing party in such litigation shall be entitled to recover from the non-prevailing party reasonable attorney and paraprofessional fees as well as all out-of-pocket costs and expenses incurred thereby by the prevailing party in such litigation through all appellate levels.

25. *No Third-Party Beneficiaries.* Recipient and City agree that this Contract and other contracts pertaining to Recipient's performance hereunder shall not create any obligation on Recipient or City's part to third parties. No person not a party to this Contract shall be a third-party beneficiary or acquire any rights hereunder.

26. *Public Entity Crimes Act.* As of the full execution of this Contract, Recipient certifies that in accordance with §287.133, Florida Statutes, it is not on the *Convicted Vendors List* maintained by the State of Florida, Department of General Services. If Recipient is subsequently listed on the *Convicted Vendors List* during the term of this Contract, Recipient agrees it shall immediately provide City written notice of such designation in accordance with Paragraph 7 above.

27. *Entire Contract.* This document incorporates and includes all prior negotiations, correspondence, conversations, contracts or understandings applicable to the matters contained herein, and the parties agree that there are no commitments, contracts or understandings concerning the subject

matter of this Contract that are not contained in this document. Accordingly, it is agreed that no deviation from the terms hereof shall be predicated upon any prior representations or contracts, whether oral or written.

28. *Headings.* The headings or titles to Articles of this Contract are not part of the Contract and shall have no effect upon the construction or interpretation of any part of this Contract.

29. *Counterparts.* This Contract may be executed in one or more counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument. A photocopy, email or facsimile copy of this Contract and any signatory hereon shall be considered for all purposes as original.

30. *Approvals.* Whenever City approval(s) shall be required for any action under this Contract, said approval(s) shall not be unreasonably withheld.

31. *Absence of Conflicts of Interest.* Both parties represent they presently have no interest and shall acquire no interest, either direct or indirect, which would conflict in any manner with their performance under this Contract and that no person having any conflicting interest shall be employed or engaged by either party in their performance hereunder.

32. *Binding Effect.* The benefits and obligations imposed pursuant to this Contract shall be binding and enforceable by and against the parties hereto.

33. *Severability.* Should any provision of this Contract or the applications of such provisions be rendered or declared invalid by a court action or by reason of any existing or subsequently enacted legislation, the remaining parts of provisions of this Contract shall remain in full force and effect.

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**IN WITNESS WHEREOF**, the parties hereto have caused this Agreement to be executed the day and year hereinabove written.

**CITY OF POMPANO BEACH**

By: \_\_\_\_\_  
REX HARDIN, MAYOR

By: \_\_\_\_\_  
GREGORY P. HARRISON, CITY MANAGER

Attest:

\_\_\_\_\_  
ASCELETA HAMMOND, CITY CLERK

(SEAL)

APPROVED AS TO FORM:

\_\_\_\_\_  
MARK E. BERMAN, CITY ATTORNEY

**“RECIPIENT”**

JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.  
(Print or type name of company here)

Witnesses:

[Signature]

Jill Reppel  
(Print or Type Name)

[Signature]

Rhianna Jenkins  
(Print or Type Name)

By: [Signature]

Print Name: LAURIE SALLARULO

Title: PRESIDENT/CEO

Business License No. 59-0871446

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing instrument was acknowledged before me, by means of  physical presence or  online notarization, this 9<sup>th</sup> day of December, 2020, by LAURIE SALLARULO as PRESIDENT/CEO of JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC., a Florida non for profit corporation. She is personally known to me or who has produced \_\_\_\_\_ (type of identification) as identification.

NOTARY'S SEAL:



[Signature]  
NOTARY PUBLIC, STATE OF FLORIDA

Linda L. Lynch  
(Name of Acknowledger Typed, Printed or Stamped)

GG 152388  
Commission Number

## Exhibit "A"

### Recipients Requirements, Contractual Responsibilities and Program Description

1. RECIPIENT agrees to do as follows:

- a) To accept the funds as appropriated in accordance with the terms of this Contract; and
- b) If RECIPIENT intends on obtaining matching funds from another source at the time of the application for the CITY grant, the CITY reserves the right to request a copy of the matching fund contract along with a financial report; and
- c) Prior to the award of any CITY funds, RECIPIENT shall provide documentation substantiating that RECIPIENT's corporation/organization falls within Section 501(c)(3) and Section 501(A) of the Internal Revenue Code and a W9 form; and
- d) To abide by Chapter 119, Florida Statutes, as from time to time amended, and to comply with all applicable federal, state, county and municipal laws, ordinances, codes and regulations. Any difference between the above federal, state, county or municipal guidelines or regulations and this Contract shall be resolved in favor of the more restrictive guidelines; and
- e) To utilize allotted funds under this Contract for the sole purpose set forth in this Contract – FRAUDULENT USE OF CITY FUNDS SHALL RESULT IN THE TERMINATION OF THIS CONTRACT AND THE RECIPIENT SHALL BE OBLIGATED TO RETURN ALL THE FUNDS AWARDED BY THIS CONTRACT. IN ADDITION, THE CITY RESERVES ANY AND ALL RIGHTS AFFORDED UNDER THE LAW INCLUDING PROSECUTION FOR SUCH FRAUDULENT USE OF CITY FUNDS IN A COURT OF COMPETENT JURISDICTION. ALL UNSPENT FUNDS MUST BE RETURNED TO THE CITY; and
- f) To return to the CITY within fifteen (15) days of demand all CITY funds paid to said RECIPIENT under the terms of this Contract upon the finding that the terms of any contract executed by the RECIPIENT of the provisions or any applicable ordinance or law have been violated by the RECIPIENT; and
- g) To return to the CITY all funds expended for disallowed expenditures as determined by the CITY which includes, but not limited to:
  - i. Personal digital assistants (PDAs), cell phones, smartphones, and similar devices
  - ii. Service costs to support PDAs, cell phones, smartphones, and similar devices such as wireless services and data plans
  - iii. Proposal preparation including the costs to develop, prepare or write the proposal

- iv. Pre-award costs
- v. Out-of-state travel; non-local travel expenses
- vi. Gift cards
- vii. Purchase/lease of facilities or vehicles (e.g., buildings, buses, vans, cars)
- viii. Rentals – one day only (written justification and approval needed for additional time)
- ix. Entertainment – exceptions shall be made for community events (written justification and approval needed prior)
- x. Land acquisition
- xi. Furniture
- xii. Honorariums for presenters/speakers and any costs associated with travel expenses
- xiii. Kitchen appliances (e.g., refrigerators, microwaves, stoves, tabletop burners)
- xiv. Tuition/Scholarships
- xv. Capital improvements and permanent renovations (e.g., playgrounds, buildings, fences, wiring)
- xvi. Clothing or uniforms (written justification and approval needed)
- xvii. Project banquets/luncheons
- xviii. Costs for items/services already covered by indirect costs allocation (supplanting)
- xix. Out of state college tours
- xx. Out of county field trips
- xxi. Alcohol
- xxii. Airfare
- xxiii. Boat rentals
- xxiv. Family incentives
- xxv. Car mileage
- xxvi. Stipends
- xxvii. Payroll taxes
- xxviii. Laboratory fees
- xxix. Computers
- xxx. Health benefits
- xxxi. Appliances and home goods (written justification and approval needed)
- xxxii. Digital Cameras
- xxxiii. Plaques
- xxxiv. Hotel Costs
- xxxv. Housing - (written justification and approval needed based on programming)

h) To maintain books, records and documents in accordance with generally accepted accounting procedures and practices to maintain adequate internal controls which, relating to the project(s), sufficiently and properly reflect all expenditures of funds provided by the CITY under this Contract; and

2) RECIPIENT agrees to provide the City Manager's Office or designee with a quarterly

narrative and financial progress report, if applicable, on the program or activity described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description.

Such reports shall include basic statistical information relative to the program or activity and a statement of expenditures made in each budget category and line item identified in the budget which is included in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description.

RECIPIENT shall receive the first wave of funding upon approval by the City Commission. A narrative and financial report shall be due on the dates listed below, as applicable.

However, following the completion of the first narrative and financial report and as indicated in Exhibit "B" Payment Schedule, the remaining distribution payment to the RECIPIENT shall be contingent upon prior receipt of the required progress narrative and financial report which is due during the preceding quarter. Narrative and financial reports for recipients receiving quarterly or monthly payments as indicated in Exhibit "B" Payment Schedule shall be due no later than the following dates:

- 1st Quarterly Narrative & Financial Report (January/February/March) – April 1st
- 2nd Quarterly Narrative & Financial Report (April/May/June) – July 1st
- 3rd Quarterly Narrative & Financial Report (July/August/September) – September 30th

If RECIPIENT receives a lump sum payment for a one-time event or an award amount of \$5,000 or less then the RECIPIENT shall be required to submit their narrative and financial report on a due date above as assigned by the CITY at a later date. The due date shall occur after the program or activity described in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description has concluded.

However, if any of the above dates fall on a weekend, then the due date shall be extended to the next business day, thereafter, as long as it does not exceed the term of this contract.

When submitting the quarterly narrative reports, RECIPIENT shall track and report to the CITY the following:

- a. Current and final outcomes for the program based on the objectives provided in the RECIPIENT's grant application
- b. Include all available statistics and/or numbers regarding the demographics of individuals served by the program; such as the number of CITY of Pompano Beach residents served (include tracking method used)
  - i. Age
  - ii. Race
  - iii. Gender
  - iv. Zip Codes
  - v. Household income (if applicable)
- c. Describe accomplishments of the program to date

- d. Summary of the impact the program has had on its intended target audience; to include challenges faced, photographs of the project and success stories (How did the CITY's funding make a difference in a resident/recipient's life?)

Failure to provide the quarterly narrative reports shall render an organization ineligible to receive future payouts.

- 3) The approved budget for the RECIPIENT, included in Exhibit "A" Recipients Requirements, Contractual Responsibilities and Program Description and any changes in the budget which would affect expenditure of funds provided under the terms of this contract, must be approved in writing by the City Manager or his/her designee prior to the expenditure of such funds; provided, that nothing herein shall authorize or allow any expenditure or obligation of funds in excess of the total sum aforesaid.

RECIPIENT shall submit financial reports with all required documentation of expenditures (including original receipts/proofs of payments and itemized list).

Failure to provide a narrative and financial report as assigned by the CITY and/or failure to utilize all of the prior allocated funds from the first six months of the contract shall render an organization ineligible to receive additional payouts and render the organization ineligible for current and future funding from the CITY.

Failure from the RECIPIENT to provide a Quarterly or Final narrative or Monthly, Quarterly or Lump Sum, financial report shall forfeit all outstanding project funding and shall render the RECIPIENT ineligible for additional funding from the CITY.

- 4) RECIPIENT agrees that any funds provided by the CITY for the operation of the program or activity during the current CITY's fiscal year, which are residual funds remaining unspent or unencumbered by any existing (not contingent) legal obligation shall be retained by the CITY.
- 5) RECIPIENT shall not use the CITY's logo, materials, or testimony for promotion of the RECIPIENT's program without written authorization from the CITY Manager or its designee.
- 6) RECIPIENTS shall attend a mandatory Orientation provided by the CITY at a date to be determined by the CITY. Failure to attend said Orientation shall be grounds for termination of the contract.
- 7) In cases where a contract is terminated by the CITY for default by RECIPIENT, the CITY reserves the right to deny RECIPIENT's future applications for new funding for a time to be determined by the City Manager, and/or his or her designee, and/or the City Commission.

Organization name: JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.

Program funded: JA BizTown / JA Finance Park / Personal Finance

Amount funded: \$15,000

Program description: JA BizTown Adventures is a virtual simulated town experience. Following 16 hours of curriculum, students work and live as citizens and employees of JA BizTown. Utilizing soft skills, students run various businesses, earn paychecks, open/manage bank accounts, take out and repay business loans, vote, and more.

JA Finance Park Virtual 2.0 Simulation starts with 16 hours of curriculum and culminates in a virtual experience where students explore careers and figure out how much to spend on housing, insurance, transportation, etc., to create/balance a budget. This is done based on an assigned life-scenario that includes family size, marital status, credit score, education and salary.

JA Personal Finance explores fundamental elements of personal finance: earnings, saving and investing, budgeting, credit, risk management, and giving.

Form Name: City of Pompano Beach 2020-2021 Nonprofit Sponsorship Application  
Submission Time: August 26, 2020 9:19 am  
Browser: Chrome 84.0.4147.135 / Windows  
IP Address: 64.57.202.90  
Unique ID: 652450490  
Location: 25.754100799561, -80.271003723145

## About Your Organization

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**Which Fiscal Year Is Your Organization Applying For?** 2020-2021

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**Full Name of Nonprofit:** Junior Achievement of South Florida

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**Mission of Nonprofit:** Junior Achievement of South Florida's mission is to inspire and prepare youth to succeed in a global economy by training the next generation of business leaders, employees and consumers by educating students through financial literacy, entrepreneurship and workforce readiness programs.

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**Brief Overview of Nonprofit:**

Junior Achievement of South Florida fulfills our mission through over twenty volunteer-based K-12 programs provided in local classrooms and at the JA World Huizenga Center at the Lillian S. Wells Pavilion. Approximately 60% of the children we serve are eligible for free/reduced priced lunches, though it varies per school. Last year we served over 50,000 K-12 students and filled more than 7,000 volunteer opportunities!

Junior Achievement of South Florida's twenty-plus K-12 programs address:

- **Work-readiness:** JA programs empower and prepare local students to succeed in the work force. Through volunteer mentors we educate students about employer expectations and real world work experiences. Students develop and strengthen the soft skills, technical skills, and interview skills needed to stand out.
- **Career Awareness:** Many JA programs let students "live in the adult world" for a day to explore careers and gain valuable insight and motivation to begin their own path to meaningful work.
- **Leadership Skills:** JA programs help students, particularly high school students, practice and utilize leadership skills, make critical decisions, learn from actual good and "not so good" decisions, and make meaningful philanthropic investments.
- **Drop Out Prevention:** JA programs reengage students and make school meaningful and even fun. While the estimated U.S. national graduation rate is 73%, the rate for JA students involved in a longitudinal study with two JA experiences is 93%, and those with 3+ JA experiences is 100%.
- **Financial Literacy:** JA programs can stop the cycle of financial illiteracy by providing fundamental knowledge that will be used for a lifetime.
- **Entrepreneurial Education:** Sparking the flame of business ownership can change a family's destiny and an entire community. JA lights the match for hundreds of students from families of all backgrounds.

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**Nonprofit Website:** [www.jasouthflorida.org](http://www.jasouthflorida.org)

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**Which Funding Priority Does Your Nonprofit Qualify For:** Workforce Readiness

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**Type of Organization - select the one that best applies:** Education/Research

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**Executive Summary of How Nonprofit  
will use City of Pompano Beach**

**Funding:**

Funding from the City of Pompano Beach will help provide ...

- JA BizTown in-class curriculum and culminating virtual experience with BizTown Adventures for approximately 795 fifth grade students from Charles Drew, Cresthaven, Cypress, Markham, McNab, Norcrest, Palmview, Pompano Beach, and Sanders Park Elementary Schools. Following in-class curriculum online, students will complete JA BizTown Adventures. The virtual experience provides an online, interactive alternative to students who are unable to visit an on-site simulation. Similar to the on-site simulation, JA BizTown Adventures is a fully interactive, true-to-life, simulated town experience to learn the fundamental relationship between academics and working for a living. Students will run the various businesses, earn paychecks, open/manage bank accounts, take out and repay business loans, vote, price and advertise goods and services for sale, and more. Students will become full-fledged consumers by making purchases at other student-run businesses within the "town."
- JA Finance Park in-class curriculum online and culminating virtual experience for approximately 825 eighth grade students from Crystal Lake and Pompano Beach Middle Schools. Following 16-hours of in-class curriculum students will participate in the JA Finance Park Virtual 2.0 Simulation to explore career opportunities and create a 21-line-item budget based on an assigned an individual profile, including career, family size, credit score, salary and student loans.
- JA Personal Finance Program consists of eight (8) 45- minute sessions that teach 300 students attending Blanche Ely High School the interrelationship between today's financial decisions and future financial freedom. To achieve financial health and wellness, they learn about money-management strategies, including earning, employment and income, budgeting, savings, credit and debt, consumer protection, smart shopping, risk management, and investing. At the conclusion of this program, students will be able to identify how their personal finances affect their quality of life. They will understand how their financial choices will be the basis of how they get what they want and need.
- JA Remote Learning Program - Junior Achievement of South Florida has partnered with Community After School (CAS) to re-open JA World Huizenga Center at the Lilian S. Wells Pavilion, a 60,000 square foot learning center, as a safe place for students to learn and thrive as they participate in e-learning this fall. Opening August 31, the JA World Remote Learning Program is for students with parents who need to return to work or work from home uninterrupted while their students participate in school learning, as well as other activities to keep them engaged. This program is available to all elementary and middle school students in the City of Pompano Beach. Through funding from this grant, 72 spots will be reserved for Pompano Beach students. Nine (9) students would attend daily for eight (8) weeks while school buildings are closed.

## How Does Your Nonprofit/Program Fit the Guidelines and Funding Interests?

Junior Achievement of South Florida (JASF) believes that helping young people gain the skills needed to compete in the workforce is critical to their future success and the vitality of our economy. JA has long been a leader in providing hands-on, relevant, interactive, project based critical career skills training that helps prepare youth for the workforce. In fact, this has been one of our three core focuses for several decades. Sir Richard Branson has stated, "transformation of education is necessary to create more effective outcomes for students," and then cited JA as the model framework through which to achieve such a transformation. "Not only does JA inspire passionate young people," Sir Richard said, but "they fuel the entrepreneurial spirit and cultivate a culture of success."

JASF's leadership is committed to creating opportunities and pathways for youth employment. The leadership is dedicated to further developing innovative programs that produce highly effective outcomes for students. We recognize that programs like JA BizTown, JA Finance Park, JA Remote Learning Program, and JA Personal Finance must not only provide skills training that will prepare students for employment and entrepreneurship, but must also promote and support employment and self-employment.

JA has a massive opportunity and ability to link with businesses, educational institutions, governmental entities, etc. due to the very nature of our core focus areas of workforce readiness, entrepreneurship and financial literacy. Our mission is well aligned with the focuses of many business leaders, governmental representatives and educational institutions. We are all focused on the issue of building a talent pipeline for the future.

JASF has very strong ties to business leaders and has several ways that we interact with them on a regular basis. We are fortunate to have a diverse board of directors of 66 business people who are committed to supporting the mission. These members represent companies of various sizes across many industries. These companies are involved with JASF in many ways and have come to trust JASF's expertise in the areas of workforce readiness, entrepreneurship and financial literacy.

In addition, JASF continues to host a CEO Advisory Council, which brings C-level executives together 3-4 times a year, to discuss issues like workforce development. Through these meetings we are able to better understand the needs of the employers and educate them on why strategies like soft skills training can help prepare the next generation of employees. We communicate with these leaders throughout the year and share successful examples of the experiences of youth and employers through our various programs. This forum also allows us to encourage these leaders to get their employees involved in our programs as volunteer mentors.

Junior Achievement of South Florida, celebrating over 100 years of service worldwide, and sixty years of service locally, is proud to serve the residents

of Pompano Beach through our work readiness, entrepreneurship, and financial literacy programs.

## Statement of Need:

According to Broward by the Numbers (1/2017), youth unemployment remains consistently higher than other age groups. In Florida, the current unemployment rate is 11.3%. This is higher than the national rate of 10.3% according to the US Bureau of Labor Statistics. Currently, 18.5% of adults under 25 are unemployed. Current numbers are high due to the coronavirus pandemic, but this is also due to unskilled workers entering the labor force from high school. Employers cite a lack of critical life and soft skills as a key barrier to employment. And the demand for these types of skills is only increasing. According to Harvard University research, occupations that require strong social skills have grown faster than others since 1980 and show consistent wage growth since 2000. Since educational leaders have focused on increasing academic standards and measuring progress through a barrage of tests, soft skills have been pushed aside, leaving our youth at a distinct disadvantage.

JA BizTown addresses soft skills training at an early age, teaching customer service, communication, teamwork, adaptability, problem-solving, creativity, work ethic, interpersonal skills and even time management.

The JA Finance Park program addresses this issue by introducing hundreds of career opportunities during the virtual simulation portion, including salary ranges and educational requirements. Today's students have little opportunity in school to gain exposure to the plethora of careers that exist in our community across numerous industries. Whether a student is college-bound or bound for trade school, students need to have the opportunity to learn about careers that will excite them and motivate them to graduate and grow. The JA Finance Park program addresses this issue by introducing hundreds of career opportunities during the virtual experience, including salary ranges and educational requirements.

This pandemic has reinforced the need for financial literacy to be taught to children. Only about 50% of American adults have enough cash to cover a \$400 emergency and the average household credit card debt is at its highest in nearly a decade. When students learn financial literacy at a young age, we have a chance to help them develop good behaviors and attitudes around money that they can use throughout their lives. Financial literacy is an essential life skill that will teach children how to prepare for the future.

Through JA Personal Finance, students learn that healthy personal finances require planning and managing. Students begin to analyze the financial implications of educational and career choices as a basis for understanding the relationship between earnings and personal finance. Students investigate the importance of budgeting, analyze the role that saving plays in their personal finances, explore the importance of credit, role-play as lenders to evaluate risk and make decisions about giving credit, investigate factors that may pose a threat to their finances and learn ways they can protect themselves through vigilance and making smart choices, explore making informed purchasing decisions to maximize their

buying power, and investigate risks that can lead to financial loss.

According to the CDC, of all the states in the US, Florida is ranked #2 in total coronavirus cases (591,283 as of 8/23/20). According to the Florida Department of Health, Broward County is ranked #2 in total coronavirus cases (68,891 as of 8/23/20). JASF is dedicated to supporting the needs of families. The JA Remote Learning Program will allow parents to return to work or focus on work at home knowing their child(ren) are in a safe, supportive learning environment where they can continue to grow academically, socially and developmentally. This is also an ideal place for students that require an outside the home learning environment in order to learn best. JASF will help drive accelerated, sustained and equitable recovery by offering a safe, supervised learning center for children with CDC guidelines strictly enforced. Students will complete daily schoolwork online and have opportunities to socialize, learn and play through engaging JA activities and projects around financial literacy, career skills and entrepreneurship. In addition to other age-appropriate activities, including arts and crafts, STEM projects, and interactive physical games. Parents can go to work assured their child is safely maintaining a 6-foot distance from peers, washing and sanitizing their hands often, wearing protective masks and being supervised by experienced, well-trained staff.

**Include a Description of the Geographic Area You Serve:** Broward County, Boca Raton and Delray Beach

**Does Your Organization Receive Matching Funds?** Yes

**Please indicate one or more matching gift options below:** One or more donors match general contributions to our organization.

**Matching Gift Documentation Supporting Your Organization** [https://s3.amazonaws.com/files.formstack.com/uploads/3276970/89621675/652450490/89621675\\_junior\\_achievement\\_of\\_south\\_florida\\_matching\\_gift\\_for\\_nonprofit.pdf](https://s3.amazonaws.com/files.formstack.com/uploads/3276970/89621675/652450490/89621675_junior_achievement_of_south_florida_matching_gift_for_nonprofit.pdf)

### About Your Board of Directors

**Board Disabled** 0

**Board Minorities** 17

**Board Seniors** 16

**Total Board Members** 66

### Program/Event Information #1

**Will your organization be hosting an event on City property?** No

**Which are you applying for? (Program/Event)** Program

**Program/Event Name** JA BizTown / JA Finance Park / Personal Finance

**Type of Program/Event** Nonprofit Program/Seminar/Workshop

**Describe the program/event succinctly:** JA BizTown Adventures is a virtual simulated town experience. Following 16 hours of curriculum, students work and live as citizens and employees of JA BizTown. Utilizing soft skills, students run various businesses, earn paychecks, open/manage bank accounts, take out and repay business loans, vote, and more.

JA Finance Park Virtual 2.0 Simulation starts with 16 hours of curriculum and culminates in a virtual experience where students explore careers and figure out how much to spend on housing, insurance, transportation, etc., to create/balance a budget. This is done based on an assigned life-scenario that includes family size, marital status, credit score, education and salary.

JA Personal Finance explores fundamental elements of personal finance: earnings, saving and investing, budgeting, credit, risk management, and giving.

**Elaborate on your program/event objectives. How do you plan on using the funding to solve the problem?**

JA BizTown "citizens" will learn how their interests and skills can lead to exciting careers. They will have an opportunity to assess their own skills and interests and to see what kinds of jobs are available at JA BizTown. They will even have an opportunity to fill out a job application and experience the job interview process. Students will:

- Recognize their interests and skills.
- Explain the relevance of interests and skills in career exploration and planning.
- Distinguish the differences among the four primary career types: people, ideas, data, and things.
- Categorize STEM careers into different types.
- Demonstrate appropriate workplace behaviors.
- Define resume, job interview, and applicant.
- Complete a job application.
- Model appropriate business greetings.
- Demonstrate proper interview skills.

JA Finance Park students will recognize the fundamental role that income plays in their personal finances and the factors that affect income and take-home pay. They will discover how their decisions about education and careers make an impact on their potential income and quality of life. By taking on adult roles, kids become better prepared for their future as consumers, investors and workers. In the program students will:

- Rate their interests, abilities, and values.
- Determine work preferences and match them to career choices.
- Define taxes and explain their purpose and impact on income.
- Figure net monthly income.

JA Personal Finance will teach students to recognize the fundamental elements of smart personal finances. They also will be able to apply those elements to a personal financial plan that allows them to set specific goals for their lifelong financial needs and desired quality of life. Students will:

- Analyze the financial implications of educational and career choices as a basis for understanding the relationship between earnings and personal finance.
- Investigate the importance of budgeting and how to plan for staying within a budget.
- Students analyze the role that saving plays in their personal finances.
- Recognize that having a healthy savings plan is necessary in all phases of life, but is especially critical for big-ticket items and emergencies.
- Students explore the importance of credit and identify the outcomes of wise and poor uses of credit.
- Students role-play as lenders to evaluate risk and make decisions about giving credit.
- Students investigate factors that may pose a threat to their finances and learn ways they can protect themselves through vigilance and making smart choices.
- Students explore making informed purchasing decisions to maximize their buying power. They work in groups to compare prices in a simulated



shopping experience.

- Students investigate risks that can lead to financial loss and practice applying appropriate risk management strategies in scenarios.

Funding of \$15,000 from the City of Pompano Beach will cover a portion of:

- Program Salaries for employees who provide hands-on services with students: VP of Education, Senior Director of Capstone Programs, Program Coordinator, Administrative Support Leader, Program Manager (3), and Program Assistants(4)
- Curriculum costs

**What are the outcomes of your program/event?**

We will deem this program a success for the City of Pompano Beach when:

(JA BizTown)

- 97% of the fifth graders complete the JA BizTown online curriculum and JA BizTown Adventures virtual simulation.
- 97% of students research and get a job at JA BizTown.
- 80% of students show an increase between the pre- and post-tests.
- Business CEO's create reports that detail production and sales figures, and provide instant feedback as to whether a business is meeting goals.
- 80% of student checkbook registers are reconciled to their bank statements.

(JA Finance Park)

- 97% of the eighth graders complete the JA Finance Park online curriculum and JA Finance Park Virtual 2.0 Simulation.
- At least 90% of the students correctly complete their budget, meaning they pay their bills for all of the twenty-one items on the budget and have money left over to save, invest, and/or donate to charity.
- 80% of students show an increase between the pre- and post-tests.

(JA Personal Finance)

- 95% of students recognize the role income plays in personal finances and the importance of planning in making financial decisions.
- 90% of students recognize high-dollar items and unexpected costs that require savings.
- 95% of students recognize the importance of credit as part of personal finances.
- 90% of students recognize potential risks to their personal finances and learn appropriate preventative measures to limit potential losses.
- 80% of students show an increase between the pre- and post-tests.

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**Estimated # of Attendees at the Program/Event (select the one that best applies)** 1,001-5,000

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**Please Specify the Number of City of Pompano Beach Residents Your Organization will Serve if the Program/Event is Funded:** 1920

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**Describe the demographics of the population you are impacting with this program/event: Demographics: Socioeconomic characteristics of a population expressed statistically, such as age, sex, education level, income level, occupation.**

Based on Broward County Public School's Demographics & Student Assignments Department, the 795 fifth graders, to be served from the nine public elementary schools in Pompano Beach, are mostly between 10-11 years old with an average of 89% eligible for free/reduced priced lunches and 54% African American, 1% Asian, 3% multi-ethnicity, 42% Caucasian and 33% Hispanic. These students will be provided the JA BizTown online curriculum and JA BizTown Adventures virtual simulation.

Based on Broward County Public School's Demographics & Student Assignments Department, the 825 eighth graders, to be served from the two public middle schools in Pompano Beach, are mostly between 13-14 years old with an average of 86% eligible for free/reduced priced lunches and 51% African American, 2% Asian, 2% multi-ethnicity, 45% Caucasian and 32% Hispanic. These students will receive the JA Finance Park online curriculum and JA Finance Park Virtual 2.0 Simulation.

Based on Broward County Public School's Demographics & Student Assignments Department, the 300 high school students to be served from Blanche Ely High School in Pompano Beach, are mostly between 14-18 years old with an average of 93% eligible for free/reduced priced lunches and 78% African American, 0% Asian, 2% multi-ethnicity, 18% Caucasian and 18% Hispanic. These students will receive the JA Personal Finance online curriculum.

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**Start Date of Program/Event:** Oct 01, 2020

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**End Date of Program/Event:** Jun 30, 2021

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**Does your program/event have a start time/end time?** No

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**Name of Program/Event Venue:** Junior Achievement of South Florida

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**Address of Program/Event Venue Location:** 1130 Coconut Creek Boulevard  
Coconut Creek, FL 33066

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**Attire of Program/Event (select the one that best applies):** Casual

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**List any Benefits or Amenities the City of Pompano Beach Receives:**

Recognition of the City of Pompano Beach via:

- Logo and story in the Junior Achievement email blast to 23,000 community members.
- Recognition on the JA BizTown and JA Finance Park virtual simulation days.
- Annual Junior Achievement Impact Report.
- [www.jasouthflorida.org](http://www.jasouthflorida.org)
- [www.facebook.com/JASFL](https://www.facebook.com/JASFL)
- [www.twitter.com/JASouthFlorida](https://www.twitter.com/JASouthFlorida)
- [www.instagram.com/jasouthflorida](https://www.instagram.com/jasouthflorida)

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**Amount Requested:** 15000

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**Are you applying for a second Program/Event?** Yes

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**Program/Event Information #2**

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**Will your organization be hosting an event on City property?** No

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**Which are you applying for? (Program/Event)** Program

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**Program/Event Name** JA Remote Learning Program

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**Type of Program/Event** Nonprofit Program/Seminar/Workshop

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**Describe the program/event succinctly:** Junior Achievement of South Florida (JASF) has been dedicated to being a resource to educators, parents and students for over 60 years. In addition to providing JASF's traditional financial literacy, entrepreneurship, and work readiness programs via virtual platforms, JASF will open its 60,000 sqft learning center as a safe place for students to learn and thrive as they participate in e-learning.

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**Elaborate on your program/event objectives. How do you plan on using the funding to solve the problem?**

JA World Huizenga Center at the Lilian S. Wells Pavilion is a 60,000 sqft learning center. The objective of this program is to provide a safe, secure place for students to learn while parents are working.

JA worked with engineers to determine adequate spacing for the Learning Pods while also allowing for space for fire exits, walkways, etc. Based on the CDC guidelines, JA can safely accommodate 24 Pods. Each Pod consists of 9 student desks and 1 adult desk, all of which will be at least 6ft apart. The area for each Pod also allows space for students to participate in physical activities. Additionally, JA World has 3 large rooms that will be open play spaces where groups can rotate to play games while following social distancing.

We believe very important for students to be active after their e-learning school day. JA will use signage, floor decals, written and verbal instruction to be sure all staff and students comply with the guidelines regarding social distancing during all activities. Students will be grouped by grade, and when possible, grouped by school and class to encourage social continuity. Also, all supplies will be disinfected between groups use.

Space will be reserved for 9 student from the City of Pompano Beach. Based on funding, these students will attend each week for 8 weeks while school buildings are closed.

Funding of \$10,000 from the City of Pompano Beach will cover a portion of:

- Program Salaries for employees who provide hands-on services with students: VP of Education, Director of Classroom & Community Programs, Remote Learning Program Manager, Remote Learning Program Coordinator, First Impression Volunteer Ambassador, Day Porter, IT Administrator
  - Curriculum costs
  - Food & Beverage - daily snacks
  - Supplies including bulk ordering of hand sanitizer, disinfectant, etc.
  - IT/AV Services
-

**What are the outcomes of your program/event?**

The outcome of the JA Remote Learning Center is that students have a safe, supervised learning environment. This will allow parents to return to work or focus on work at home. The remote learning center is also for children that require a safe, supportive learning environment outside the home to learn best. Parents will have peace of mind knowing their child is in a place where all CDC guidelines and protocols are strictly enforced to ensure the safety of their child(ren).

- 100% of students will be in learning pods (groups of 9)
- 100% of students will maintain a 6-foot distance from their peers
- Hand washing and sanitizing will be available at various stations in facility
  
- Wearing protective masks will be enforced
- 100% of students will be supervised by experience and well-trained staff.

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**Estimated # of Attendees at the Program/Event (select the one that best applies)** 51-150

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**Please Specify the Number of City of Pompano Beach Residents Your Organization will Serve if the Program/Event is Funded:** 72

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**Describe the demographics of the population you are impacting with this program/event: Demographics: Socioeconomic characteristics of a population expressed statistically, such as age, sex, education level, income level, occupation.** Based on Broward County Public School's Demographics & Student Assignments Department, there are 5,001 elementary school students from the nine public elementary schools in Pompano Beach and 2,397 students from the two middle schools in Pompano Beach that are eligible for the program. Combined, these students range in age from 5-14 years old with an average of 88% eligible for free/reduced priced lunches and 54% African American, 1% Asian, 2% multi-ethnicity, 43% Caucasian and 32% Hispanic. 72 students will be selected to attend the JA Remote Learning Program for 8 weeks from October through December, based on funding availability.

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**Start Date of Program/Event:** Aug 31, 2020

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**End Date of Program/Event:** Dec 31, 2020

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**Does your program/event have a start time/end time?** No

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**Name of Program/Event Venue:** JA Remote Learning Program

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**Address of Program/Event Venue Location:** 1130 Coconut Creek Boulevard  
Coconut Creek, FL 33066

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**Attire of Program/Event (select the one that best applies)** Casual

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**List any Benefits or Amenities the city of Pompano Beach Receives:**

- Logo and story in the Junior Achievement email blast to 23,000 community members.
- Annual Junior Achievement Impact Report
- [www.jasouthflorida.org](http://www.jasouthflorida.org)
- [www.facebook.com/JASFL](https://www.facebook.com/JASFL)
- [www.twitter.com/JASouthFlorida](https://www.twitter.com/JASouthFlorida)
- [www.instagram.com/jasouthflorida](https://www.instagram.com/jasouthflorida)
- City employees and friends are invited to sign up their children for participation

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**Amount Requested:**

10000

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**Additional Activities**

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**Are there any additional activities associated with the primary sponsorship event (Examples include VIP event, Kickoff event, Awards Ceremony, Thank You/Recognition Party, etc...)**

No

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**Additional Information**

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**What are your organization's credentials? Tell us why your organization does it better than anyone else.**

Over the past 60 years (since inception in 1959, Junior Achievement of South Florida has served over 1,000,000 students in Broward County teaching financial literacy, workforce readiness and entrepreneurship. No other organization is offering programs like ours to local youth. The JA World Huizenga Center is the largest facility of its kind in the world. Due to the coronavirus pandemic, JA will open its 60,000 sqft facility to provide a safe place for students to learn and thrive as they participate in e-learning. This will allow parents to go to work knowing their child(ren) are in a supervised learning center with CDC guidelines strictly enforced. This pandemic has solidified the need for financial literacy education. Our personal finance program offers high school students fundamental elements to a personal financial plan that allows them to set specific goals for their lifelong financial needs and desired quality of life.

Junior Achievement of South Florida was selected as the 2019 FAU Research Park Organization of the Year, and for the third year in a row was awarded one of JA USA's highest honors: the 4 Star Award to recognize staff and boards that meet national standards. In addition, JA was also the 2019 Greater Fort Lauderdale Alliance Economic Partner Finalist of the Year. Several other major successes have occurred over the last four years, like securing over \$850,000 in public funding from Broward County Public Schools, Broward County, and several municipalities.

Members of the Board of Directors are expected to attend all six board meetings and at least two JA events. Each member is expected to secure financial support of a minimum of \$5,000 and to make a meaningful personal gift. Each member must also serve on at least one Committee (Development, Finance, Governance, Programs, or Storefronts) and personally volunteer in at least one JA World program. New members attend a 45-minute orientation and are assigned a mentor.

The JA model gives school children exposure to adults who can bring their work experiences to the classroom and connect school lessons to the business world. Each year volunteers must be recruited and recognized in order to continue a history of very engaged, qualified volunteers. Our volunteers consistently rate their overall experience as 4.9 on a 5.0 scale, and they also provide anecdotal feedback that we use to improve our sign-up process and training.

Additionally:

- Junior Achievement of South Florida manages a \$5.5 million annual budget.
- Over fifty grants, including 12 municipal grants, were received and managed last year alone.
- Employee Policies and Procedures and Accounting Policies and Procedures are reviewed, and updated as needed, on an annual basis.
- A background check is implemented prior to hiring all employees.
- Appropriate performance incentives and disciplinary measures are in place.



- A financial audit is completed every year.
- An outside CPA closes our books every month to make sure we comply with federal and state rules and regulations, including those related to prohibited and unallowable activities.

**Any other information you wish to share?**

This initiative includes 3 high-impact educational programs for Pompano Beach's public school 5th and 8th grade students plus 300 high school students. JA BizTown, JA Finance Park and the JA Remote Learning Program is available for elementary and middle schools students. The Personal Finance program will be taught to students attending Pompano Beach High and Blanche Ely High. We hope you will once again invest in the youth of Pompano Beach through Junior Achievement to help them own their own economic success and see a path to graduation and a career. The students we are training today are the future drivers of our local economy - our consumers, our employees, and our business owners. We proudly recognize the City of Pompano Beach in JA BizTown TownHall, and we hope you'll continue and grow your support as we propose to increase our impact even more.

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### **City of Pompano Beach Funding History**

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<b>Has your organization been funded before by City of Pompano Beach?</b>	Yes
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<b>If yes, when was the most recent year?</b>	2019/2020
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<b>What was the name of program/event funded?</b>	JA Inspire/JA Fellows
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<b>How much was the funding for this program/event?</b>	17000
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### **Requested Budget Information**

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<b>What is the total value your nonprofit is applying for?</b>	25000
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<b>If you are not awarded the full funding requested for your event/program, will you be able to complete your project?</b>	No
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<b>Are you including the following:</b>	Itemized Budget - Please provide a budget for the program/event you are applying for vs. the agency's annual budget = Yes W9 = Yes IRS Letter = Yes List of Board of Directors = Yes Articles of Incorporation = Yes Most Recent 990 Form = Yes
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**Upload your documents: All items are mandatory.**

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**Itemized Budget - Please provide a budget ONLY for the program/event you are applying for. Annual agency budgets will not be accepted.**

[https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077528/652450490/72077528\\_junior\\_achievement\\_of\\_south\\_florida\\_itemized\\_budget.pdf](https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077528/652450490/72077528_junior_achievement_of_south_florida_itemized_budget.pdf)

**W9**

[https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077535/652450490/72077535\\_junior\\_achievement\\_of\\_south\\_florida\\_w9.pdf](https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077535/652450490/72077535_junior_achievement_of_south_florida_w9.pdf)

**IRS Letter**

[https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077552/652450490/72077552\\_junior\\_achievement\\_of\\_south\\_florida\\_irs\\_letter.pdf](https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077552/652450490/72077552_junior_achievement_of_south_florida_irs_letter.pdf)

**List of Board of Directors**

[https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077556/652450490/72077556\\_junior\\_achievement\\_of\\_south\\_florida\\_board\\_of\\_directors.pdf](https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077556/652450490/72077556_junior_achievement_of_south_florida_board_of_directors.pdf)

**Articles of Incorporation**

[https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077558/652450490/72077558\\_junior\\_achievement\\_of\\_south\\_florida\\_articles\\_of\\_incorporation.pdf](https://s3.amazonaws.com/files.formstack.com/uploads/3276970/72077558/652450490/72077558_junior_achievement_of_south_florida_articles_of_incorporation.pdf)

**Most Recent 990 Form**

[https://s3.amazonaws.com/files.formstack.com/uploads/3276970/90960095/652450490/90960095\\_junior\\_achievement\\_of\\_south\\_florida\\_990\\_form.pdf](https://s3.amazonaws.com/files.formstack.com/uploads/3276970/90960095/652450490/90960095_junior_achievement_of_south_florida_990_form.pdf)

## **Charity/Organization Contact**

**Name**

Linda Lynch

**Title**

Grants and Government Relations Manager

**Email**

[linda@jasouthflorida.org](mailto:linda@jasouthflorida.org)

**Phone Number**

(954) 979-7100

**Mailing Address (If awarded, your payment will be mailed to this address)**

1130 Coconut Creek Boulevard  
Coconut Creek, FL 33066



Cincinnati Service Center  
CINCINNATI OH 45999-0038

In reply refer to: 0256521944  
June 12, 2019 LTR 4167C 0  
84-1267604 000000 00

00014394  
BODC: TE

JUNIOR ACHIEVEMENT USA  
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1 EDUCATION WAY  
COLORADO SPGS CO 80906

032185

Employer identification number: 84-1267604  
Group exemption number: 1116

Dear Taxpayer:

This is in response to your request dated June 05, 2019, for information about your tax-exempt status.

Our records indicate we issued a determination letter to you in January 1994, and you're currently exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also recognized the subordinates on the list you submitted as exempt from federal income tax under IRC Section 501(c)(3).

For federal income tax purposes, donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106 and 2522.

Because IRC Section 170(c) describes your subordinate organizations, donors can deduct contributions they make to them.

Please refer to [www.irs.gov/charities](http://www.irs.gov/charities) for information about filing requirements. Specifically, IRC Section 6033(j) provides that, if you don't file a required return or notice for three consecutive years, your exempt status will be automatically revoked on the filing due date of the third required return or notice.

In addition, each subordinate organization is subject to automatic revocation if it doesn't file a required return or notice for three consecutive years. Subordinate organizations can file required returns or notices individually or as part of a group return.

For tax forms, instructions, and publications, visit [www.irs.gov](http://www.irs.gov) or call 1-800-TAX-FORM (1-800-829-3676).

If you have questions, call 1-877-829-5500 between 8 a.m. and 5 p.m., local time, Monday through Friday (Alaska and Hawaii follow Pacific Time).

0256521944  
June 12, 2019 LTR 4167C 0  
84-1267604 000000 00  
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JUNIOR ACHIEVEMENT USA  
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1 EDUCATION WAY  
COLORADO SPGS CO 80906

Sincerely yours,



Kim A. Billups, Operations Manager  
Accounts Management Operations 1



Department of the Treasury  
Internal Revenue Service

Cincinnati Service Center  
CINCINNATI OH 45999-0038

In reply refer to: 0255467241  
May 24, 2019 LTR 4168C 0  
84-1267604 000000 00

00015453  
BODC: TE

JUNIOR ACHIEVEMENT USA  
% EDWARD M PRIEM II  
1 EDUCATION WAY  
COLORADO SPGS CO 80906



023523

Employer ID number: 84-1267604  
Form 990 required: Y

Dear Taxpayer:

We're responding to your request dated May 17, 2019, about your tax-exempt status.

We issued you a determination letter in January 1994, recognizing you as tax-exempt under Internal Revenue Code (IRC) Section 501(c)(3).

We also show you're not a private foundation as defined under IRC Section 509(a) because you're described in IRC Sections 509(a)(1) and 170(b)(1)(A)(vi).

Donors can deduct contributions they make to you as provided in IRC Section 170. You're also qualified to receive tax deductible bequests, legacies, devises, transfers, or gifts under IRC Sections 2055, 2106, and 2522.

In the heading of this letter, we indicated whether you must file an annual information return. If you're required to file a return, you must file one of the following by the 15th day of the 5th month after the end of your annual accounting period:

- Form 990, Return of Organization Exempt From Income Tax
- Form 990EZ, Short Form Return of Organization Exempt From Income Tax
- Form 990-N, Electronic Notice (e-Postcard) for Tax-Exempt Organizations Not Required to File Form 990 or Form 990-EZ
- Form 990-PF, Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

According to IRC Section 6033(j), if you don't file a required annual information return or notice for 3 consecutive years, we'll revoke your tax-exempt status on the due date of the 3rd required return or notice.

You can get IRS forms or publications you need from our website at [www.irs.gov/forms-pubs](http://www.irs.gov/forms-pubs) or by calling 800-TAX-FORM (800-829-3676).

If you have questions, call 877-829-5500 between 8 a.m. and 5 p.m.,

0255467241  
May 24, 2019 LTR 4168C 0  
84-1267604 000000 00  
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1 EDUCATION WAY  
COLORADO SPGS CO 80906

local time, Monday through Friday (Alaska and Hawaii follow Pacific time).

Thank you for your cooperation.

Sincerely yours,



Kim A. Billups, Operations Manager  
Accounts Management Operations 1

## Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
 See Specific Instructions on page 3.

<b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Junior Achievement of South Florida, Inc.</b>	
<b>2</b> Business name/disregarded entity name, if different from above	
<b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <small><b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small>  <input type="checkbox"/> Other (see instructions) ▶ _____	<b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
<b>5</b> Address (number, street, and apt. or suite no.) See instructions. <b>1130 Coconut Creek Boulevard</b>	Requester's name and address (optional)
<b>6</b> City, state, and ZIP code <b>Coconut Creek, Florida 33066</b>	
<b>7</b> List account number(s) here (optional)	

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>																					
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5	9	-	0	8	7	1	4	4	6												

**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <b>1.13.20</b>
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**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



# *State of Florida*

## *Department of State*

I certify from the records of this office that JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC. is a corporation organized under the laws of the State of Florida, filed on January 13, 1984.

The document number of this corporation is N00908.

I further certify that said corporation has paid all fees due this office through December 31, 2020, that its most recent annual report/uniform business report was filed on January 15, 2020, and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

*Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capital, this  
the Fifteenth day of January, 2020*



*Ronald R. Bee*  
**Secretary of State**

Tracking Number: 3303732794CC

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

<https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication>

# Junior Achievement of South Florida

## Board of Directors

Active Members Between 8/20/2020 and 8/20/2020

Board Member	Company	Job Title
<b>Mr. Alfredo Aguirre</b>	<b>Merrill Lynch Wealth Management</b>	<b>First Vice President</b>
Address: 600 N Pine Island Road, Ste. 300 Plantation, FL 33324		Phone: 954-916-2834 (Organization-Direct) (954) 261-5973 (Mobile) Email Address: alfredo_aguirre@ml.com
Committee(s): Board of Directors		
<b>Ms. Amy Allen</b>	<b>Avison Young</b>	<b>Vice President Marketing</b>
Address: 500 W Cypress Creek Road, Suite 350 Fort Lauderdale, FL 33309		Phone: 954-903-1812 (Organization-Direct) (561) 714-8691 (Mobile) Email Address: amy.allen@avisonyoung.com
Committee(s): Board of Directors		
<b>Mr. Carlos Alvarez</b>	<b>BBVA Compass Bancshares, Inc.</b>	<b>Market President</b>
Address: 525 Okeechobee Blvd, # 1680 West Palm Beach, FL 33401		Phone: (561) 346-7391 (Mobile) Email Address: ca.alvarez@bbva.com
Committee(s): Board of Directors Innovative Initiatives Committee		
<b>Ms. Lisa B. Anderson</b>	<b>BankUnited</b>	<b>Senior Vice President</b>
Address: 900 SE 3rd Avenue, Ste. 200 Fort Lauderdale, FL 33316		Phone: 954-712-2910 (Organization-Main) (954) 599-1818 (Mobile) Email Address: landerson@bankunited.com
Committee(s): Board of Directors Governance Committee		
<b>Mr. Robert Arroyo</b>		
Address: 9220 Rutledge Avenue Boca Raton, FL 33434		Phone: (954) 536-8169 (Mobile) Email Address: arroyofa@comcast.net
Committee(s): Board of Directors Programs Committee		
<b>Ms. Jennifer Austin</b>	<b>Chick-fil-A, Inc.</b>	
Address: 8000 West Broward Boulevard Suite 5005 Plantation, FL 33388		Phone: (954) 476-9425 (Organization-Main) (478) 955-2904 (Mobile) Email Address: Jennifer.Austin@cfafranchise.com
Committee(s): Board of Directors Marketing/PR/External Affairs Committee		
<b>Sunem Beaton-Garcia</b>	<b>Broward College</b>	<b>Campus President / Vice Provost Academic Services</b>
Address: 1000 East Coconut Creek Parkway Coconut Creek, FL 33066		Phone: (954) 201-2202 (Organization-Direct) (954) 445-8023 (Mobile) Email Address: sbeaton@broward.edu
Committee(s): Board of Directors		
<b>Mr. Robert Birdsong</b>	<b>OK Generators</b>	
Address: 373 N River Avenue Deerfield Beach, FL 33441		Phone: 954-428-9990 (Organization-Main) 954-501-5547 (Mobile) Email Address: bobb@okgenerators.com
Committee(s): Board of Directors Executive Committee Governance Committee, Chairman		
<b>Ms. Maureen Canada</b>	<b>Lighthouse Point Marina, Inc.</b>	<b>CEO</b>
Address: 2830 NE 29 Avenue Lighthouse Point, FL 33064		Phone: 954-941-0227 (Organization-Main) (954) 261-6251 (Mobile) Fax: (954) 941-3223 Email Address: mcanada@lhpmarina.com
Committee(s): Board of Directors		

Board Member	Company	Job Title
	Circle of Wise Women	
<b>Mr. Christopher G. Cavanagh</b>	<b>Petri Positive Pest Control</b>	<b>Vice-President and General Manager</b>
Address: 737 SW 9th Terrace Pompano Beach, FL 33069		Phone: 954-781-4100 (Organization-Main) 954-448-0969 (Mobile) Email Address: ccavanagh@petrispestcontrol.com
Committee(s): Board of Directors Marketing/PR/External Affairs Committee		
<b>Mr. Robert Ceravolo</b>	<b>Tropic Ocean Airways</b>	<b>CEO</b>
Address: 1100 Lee Wagener Blvd., 2072 Fort Lauderdale, FL 33315		Phone: (954) 210-5569 (Organization-Main) Email Address: rceravolo@flytropic.com
Committee(s): Board of Directors Innovative Initiatives Committee		
<b>Mrs. Jeni Chokron</b>	<b>First Horizon Bank</b>	<b>SVP Broward Commercial Banking Team Lead Relationship Manager</b>
Address: 1000 S Pine Island Rd., Ste. 430 Plantation, FL 33324		Phone: 954-275-6115 (Mobile) Email Address: jchokron@firsthorizon.com
Committee(s): Board of Directors Programs Committee		
<b>Mr. Ben Cucuzza</b>	<b>Wells Fargo Bank</b>	<b>Affluent Segment Leader</b>
Address: 350 E Las Olas Blvd Fort Lauderdale, FL		Phone: (706) 290-3122 (Mobile) Email Address: ben.cucuzza@wellsfargo.com
Committee(s): Board of Directors Finance Committee		
<b>Mr. Kenneth DeBritto</b>	<b>Ai Media Group</b>	
Address: 2951 East Stonebrook Circle Davie, FL 33330		Phone: (561) 758-0100 (Mobile) Email Address: kdebritto@aimg-partners.com
Committee(s): Board of Directors		
<b>Mr. Richard Farah</b>	<b>Salesforce</b>	<b>Director, Software Engineering</b>
Address: 7312 NW 45th Ave Coconut Creek, FL 33073		Phone: (954)249-6746 (Mobile) Email Address: Rick_farah@yahoo.com
Committee(s): Board of Directors Innovative Initiatives Committee		
<b>Mr. Michael A. Fischler</b>	<b>Fischler &amp; Friedman, P.A.</b>	<b>CEO</b>
Address: 1000 S Andrews Avenue Fort Lauderdale, FL 33316		Phone: 954-763-5778 (Organization-Main) (954) 232-9582 (Mobile) Fax: (954) 763-3238 Email Address: michael@ffpa-law.com
Committee(s): Board of Directors Governance Committee Legacy Council, Chairman		
<b>Mrs. Katherine Foster</b>	<b>Bluegreen Corp.</b>	<b>SVP of Business Development &amp; Innovation</b>
Address: 4960 Conference Way North, Suite 100 Boca Raton, FL 33431		Phone: 561-912-8000 (Organization-Main) (954) 646-1239 (Mobile) Email Address: kathy.foster@bluegreenvacations.com
Committee(s): Board of Directors Executive Committee Programs Committee		
<b>John Goff</b>	<b>Publix Super Markets, Inc.</b>	
Address: 3802 Falcon Ridge Circle Weston, FL 33331		Phone: (352) 672-1636 (Mobile) Email Address: john.goff@publix.com
Committee(s): Board of Directors		
<b>Mr. Alan Goldsmith</b>	<b>Broward Health</b>	

Board Member	Company	Job Title
Address: 303 SE 17 Street Fort Lauderdale, FL 33316 Committee(s): Board of Directors Innovative Initiatives Committee		Phone: 954-355-4400 (Organization-Main) Email Address: agoldsmith@browardhealth.org
<b>Major Kevin Granville</b>	<b>Broward Sheriff's Office</b>	<b>Major</b>
Address: 2601 West Broward Blvd Fort Lauderdale, FL 33312 Committee(s): Board of Directors		Phone: (954) 868-3822 (Mobile) Email Address: kevin_granville@sheriff.org
<b>Mr. David D. Greenberg</b>	<b>Greenberg Capital</b>	<b>President/CEO</b>
Address: 4183 Briarcliff Circle Boca Raton, FL 33496 Committee(s): Board of Directors Executive Committee Innovative Initiatives Committee, Chairman		Phone: (855) 521-9100 (Organization-Main) (561) 521-9100 (Mobile) Email Address: david@greenbergcapital.com
<b>Mr. David Gussack</b>	<b>Exotech, Inc.</b>	
Address: 1851 Blount Road Pompano Beach, FL 33069 Committee(s): Marketing/PR/External Affairs Committee		Phone: 954-917-1919 (Organization-Main) Email Address: David@exotech.com
<b>Mr. Stephen N. Henry</b>	<b>University of Miami Sports Medicine Institute</b>	<b>Physician</b>
Address: 5555 Ponce De Leon Blvd., 3rd Floor Coral Gables, FL 33146 Committee(s): Board of Directors		Phone: (305) 689-0100 (Organization-Direct) Email Address: snh55@med.miami.edu
<b>Mr. Brandon L. Hensler</b>	<b>NSU - Main Campus</b>	<b>Executive Director of Public Relations and Marketing Communications</b>
Address: 3301 College Avenue (Museum Tower) Davie, FL 33314 Committee(s): Board of Directors Executive Committee Marketing/PR/External Affairs Committee, Board Chairman		Phone: (954) 393-5926 (Mobile) Email Address: brandon.hensler@nova.edu
<b>Mr. Timothy Hogans, Jr.</b>	<b>NextEra Energy (FPL)</b>	<b>External Affairs Manager</b>
Address: 7201 Cypress Road Plantation, FL 33317 Committee(s): Board of Directors, Secretary Executive Committee		Phone: 954-321-2189 (Organization-Main) 305-215-1800 (Mobile) Email Address: tim.hogans@fpl.com
<b>Ms. Brenda Horner</b>	<b>Consolidated Credit Solutions</b>	<b>Director of Operations</b>
Address: 5701 W Sunrise Blvd. Suite 200 Fort Lauderdale, FL 33313 Committee(s): Board of Directors Executive Committee Governance Committee, Member		Phone: 954-377-9100 (Organization-Direct) Email Address: bhorner@consolidatedcredit.org
<b>Mr. Geoffrey Horst</b>	<b>Deloitte LLP</b>	<b>Tax Managing Partner</b>
Address: 333 SE 2nd Avenue Suite 3600 Miami, FL 33131 Committee(s): Audit Committee Board of Directors, Treasurer Executive Committee Finance Committee		Phone: 305-372-3125 (Organization-Direct) Email Address: ghorst@deloitte.com
<b>Mr. Nicholas Kaniaris</b>	<b>PNC Financial Services Group, Inc., The</b>	<b>District Manager</b>
Address: 200 E Broward Blvd., 9th Floor Fort Lauderdale, FL 33301		Phone: 954-745-4376 (Organization-Direct) (954) 804-9041 (Mobile) Email Address: nikokaniaris@yahoo.com

Board Member	Company	Job Title
Committee(s): Board of Directors Marketing/PR/External Affairs Committee		
<b>Mr. Andrew Koenig</b>	<b>City Furniture</b>	<b>President</b>
Address: 6701 N Hiatus Road Tamarac, FL 33321		Phone: 954-597-2200 (Organization-Main) (954) 829-4385 (Mobile) Email Address: andrewk@City-Furniture.com
Committee(s): Board of Directors, Vice Chairman Executive Committee Innovative Initiatives Committee, Chairman		
<b>Mr. Ed Lawton</b>	<b>Enterprise Fleet Management</b>	<b>Fleet Strategy Manager</b>
Address: 5105 Johnson Road Coconut Creek, FL 33073		Phone: 954-354-5400 (Organization-Main) (954) 553-8549 (Mobile) Email Address: e87058@efleets.com
Committee(s): Board of Directors Programs Committee		
<b>Mrs. Jessica Lerner</b>	<b>Community Care Plan</b>	<b>President and Chief Executive Officer</b>
Address: 1643 Harrison Parkway, Ste. 200 Sunrise, FL 33323		Phone: (954) 622-3222 (Organization-Direct) 954-309-2567 (Mobile) Email Address: jlerner@ccpcares.org
Committee(s): Board of Directors		
<b>Mr. Thomas H. Loffredo</b>	<b>Gray Robinson</b>	
Address: 401 E Las Olas Blvd. Suite 1000 Fort Lauderdale, FL 33301		Phone: 954-761-7499 (Organization-Direct) 954-895-3405 (Mobile) Fax: (954) 761-8112 Email Address: tom.loffredo@gray-robinson.com
Committee(s): Board of Directors Executive Committee Governance Committee		
<b>Dr. Nicole Mancini</b>	<b>The School Board Of Broward County</b>	
Address: 600 SE 3 Avenue, Floor 12 Fort Lauderdale, FL 33301-3125		Phone: (954) 415-4517 (Mobile) Email Address: nicole.mancini@browardschools.com
Committee(s): Board of Directors Programs Committee		
<b>Ms. Lois Marino</b>	<b>Hoffman's Chocolates</b>	<b>Director of Community Engagement</b>
Address: 401 E Las Olas Blvd., Ste 800 Fort Lauderdale, FL 33301		Phone: 954-940-6373 (Organization-Direct) (954) 558-5543 (Mobile) Email Address: lmarino@bbxcapital.com
Committee(s): Board of Directors Marketing/PR/External Affairs Committee, Co Chair		
<b>Mr. Paul Marko</b>	<b>Stiles Corporation</b>	<b>President</b>
Address: 301 E Las Olas Blvd Fort Lauderdale, FL 33301		Phone: 954-627-9300 (Organization-Main) Email Address: paul.marko@stiles.com
Committee(s): Board of Directors		
<b>Ms. Michelle Martinez Reyes</b>	<b>Kelley Kronenberg Attorneys At Law</b>	
Address: 10360 West State Road 84 Fort Lauderdale, FL 33324		Phone: (954) 370-9970 (Organization-Main) (305) 721-7055 (Mobile) Email Address: mmartinezreyes@kklaw.com
Committee(s): Board of Directors		
<b>Mr. Joel D. Mayersohn</b>	<b>Dickinson Wright</b>	
Address: 350 East Las Olas Blvd., Suite 1750 Fort Lauderdale, FL 33301		Phone: 954-991-5426 (Organization-Direct) (954) 557-5664 (Mobile) Fax: (844) 670-6009 Email Address: JMayersohn@dickinson-wright.com
Committee(s): Board of Directors		

Board Member	Company	Job Title
	Executive Committee Finance Committee	
<b>Mr. Michael McGinn</b>	<b>Prince Capital Partners</b>	<b>Managing Director</b>
Address: 20807 Biscayne Blvd. Suite 301 Adventura, FL 33180		Phone: 305-682-5824 (Organization-Direct) (954) 415-5656 (Mobile) Email Address: mmcginn@princecp.com
Committee(s): Board of Directors Finance Committee		
<b>Mr. Alan McKay</b>	<b>FLT Geosystems</b>	<b>Principal</b>
Address: 809 Progresso Drive Fort Lauderdale, FL 33304		Phone: (954) 763-5300 (Organization-Main) (561) 504-1759 (Mobile) Email Address: amckay@fltgeosystems.com
Committee(s): Board of Directors Finance Committee		
<b>Mr. Ronnie Medina</b>	<b>Amerant Bank</b>	
Address: 100 North Federal Highway, Suite 100 Fort Lauderdale, FL 33301		Phone: (954) 678-0300 (Organization-Main) (954) 600-9995 (Mobile) Email Address: RMedina@amerantbank.com
Committee(s): Board of Directors Innovative Initiatives Committee		
<b>Mr. Iwan Mohamed</b>	<b>Bb&amp;T Corporation / Truist</b>	<b>Broward County Market President</b>
Address: 110 E Broward Blvd, 21st Flr Fort Lauderdale, FL 33301		Phone: 954-233-0455 (Organization-Main) (954) 459-1284 (Mobile) Email Address: imohamed@bbandt.com
Committee(s): Board of Directors Innovative Initiatives Committee		
<b>Mr. Stuart R. Morris</b>	<b>Law Offices Of Stuart R. Morris, P.A.</b>	<b>Wealth Preservation Attorney</b>
Address: 7284 W Palmetto Park Road, Suite 101 Boca Raton, FL 33433		Phone: 561-750-3850 (Organization-Main) 954-695-7118 (Mobile) Email Address: smorris@law-morris.com
Committee(s): Board of Directors Executive Committee		
<b>Mr. Zachary Morrison</b>	<b>Tinuiti</b>	
Address: 1855 Griffin Road #C-462 Dania Beach, FL 33004		Phone: (954) 606-6672 (Organization-Direct) (954) 913-4321 (Mobile) Email Address: zach.morrison@tinuiti.com
Committee(s): Board of Directors Innovative Initiatives Committee		
<b>Mrs. Monica Navarro</b>	<b>Molina Healthcare Of Florida</b>	
Address: 1066 Twin Branch Lane Weston, FL 33326		Phone: (954) 907-6593 (Mobile) Email Address: Monica.Navarro@MolinaHealthCare.Com
Committee(s): Board of Directors Finance Committee		
<b>Mr. Steve Nudenberg</b>	<b>On the Ball Ventures</b>	
Address: 701 S. Oliv Avenue, 1102 West Palm Beach, FL 33401		Phone: 954-332-2200 (Organization-Main) (305) 776-1100 (Mobile) Email Address: steve@ontheballmarketing.com
Committee(s): Board of Directors Innovative Initiatives Committee		
<b>Mr. John T. Ray, III</b>	<b>Sonitrol of Fort Lauderdale</b>	<b>President &amp; CEO</b>
Address: 1770 NW 64 Street Suite 630 Fort Lauderdale, FL 33309		Phone: 954-772-9700 (Organization-Main) (954) 275-6120 (Mobile) Email Address: jray@securefl.com
Committee(s): Board of Directors		

Board Member	Company	Job Title
	Executive Committee Finance Committee	
<b>Mr. James Robertson</b>	<b>Adams Benefit</b>	
Address: 5954 NW 74th Terrace Parkland, FL 33067 Committee(s): Board of Directors		Phone: 954-275-5241 (Mobile) Email Address: jimrobertsonusa@outlook.com
<b>Mr. Richard Rodriguez</b>	<b>Centuric, LLC</b>	
Address: 4111 Sw 47th Ave #319, Davie, FL 33314 Fort Lauderdale, FL 33301 Committee(s): Board of Directors		Phone: (954) 691-1651 (Organization-Main) Email Address: rodriguez@centuric.com
<b>Ms. Lisa Roney</b>	<b>Crowe Horwath LLP</b>	<b>Partner</b>
Address: 401 E Las Olas Blvd, Suite 1100 Fort Lauderdale, FL 33301 Committee(s): Board of Directors		Phone: 954-202-8600 (Organization-Main) Email Address: lisa.roney@crowe.com
<b>Mr. Jerome Rosenthal</b>	<b>Tire Hut, Inc.</b>	<b>CEO</b>
Address: 1250 W Sunrise Blvd. Fort Lauderdale, FL 33311 Committee(s): Board of Directors		Phone: 954-462-7780 (Organization-Main) Email Address: jrwin@bellsouth.net
<b>Mr. Timothy A. Rubin</b>	<b>Kaufman Rossin &amp; Co - Fort Lauderdale</b>	<b>Director of Client Services</b>
Address: 100 SE 3rd Avenue, Ste 2400 Fort Lauderdale, FL 33394 Committee(s): Board of Directors, Chairman Executive Committee, Chairman Governance Committee		Phone: 954-713-7435 (Organization-Direct) (954) 609-8127 (Mobile) Email Address: trubin@kaufmanrossin.com
<b>Ms. Meaghan Ryan</b>	<b>Seminole Gaming</b>	<b>Corporate Director</b>
Address: 6401 Sheridan St Hollywood, FL 33024 Committee(s): Board of Directors Executive Committee Programs Committee, Chairman		Phone: (702) 428-9326 (Mobile) Email Address: meaghaneryan48@yahoo.com
<b>Ms. Daphnee A. Sainvil</b>	<b>Broward County</b>	
Address: 115 S Andrews Ave #421 Government Center Annex Fort Lauderdale, FL 33301 Committee(s): Board of Directors Marketing/PR/External Affairs Committee		Phone: 954-357-7577 (Organization-Direct) 305-343-2104 (Mobile) Email Address: dsainvil02@gmail.com
<b>Ms. Angelika Schlanger</b>	<b>The Frederick A. DeLuca Foundation</b>	
Address: 500 E. Broward Blvd., Ste. 2300 Fort Lauderdale, FL 33394 Committee(s): Board of Directors Programs Committee		Phone: 954-495-2312 (Organization-Main) Email Address: aschlanger@freddelucafoundation.com
<b>Ms. Franki Schmidt</b>	<b>American Express Company</b>	<b>Vice President Business Development</b>
Address: 714 NW 123rd Drive Coral Springs, FL 33071 Committee(s): Board of Directors Executive Committee		Phone: 888-297-6282 (Organization-Main) 954-675-8358 (Mobile) Email Address: franki.lupo.schmidt@aexp.com
<b>Mr. Joseph P. Schumacker</b>	<b>SpareZ - Davie</b>	<b>CEO</b>
Address: 5325 S University Drive Davie, FL 33328 Committee(s): Board of Directors		Phone: 954-846-8400 (Organization-Main) Email Address: schumacker@earthlink.net

Board Member	Company	Job Title
	Innovative Initiatives Committee Programs Committee	
<b>Mr. Don Silvestri</b>	<b>Debt.com</b>	
	Address: 5769 West Sunrise Blvd. Plantation, FL 33313	Phone: (954) 377-9156 (Organization-Main) (954) 577-6964 (Mobile) Email Address: don@debt.com
	Committee(s): Board of Directors	
<b>Ms. Dawn Stagliano</b>	<b>Comcast Corporation</b>	
	Address: 4296 Palo Verde Dr Boynton Beach, FL 33436	Phone: 561-882-4379 (Organization-Main) 954-650-0053 (Mobile) Email Address: dawn_stagliano@comcast.com
	Committee(s): Board of Directors Circle of Wise Women Marketing/PR/External Affairs Committee	
<b>Mr. Alfredo Suarez</b>	<b>Royal Caribbean Cruises Ltd.</b>	<b>VP Corporate Development</b>
	Address: 1050 Caribbean Way Miami, FL 33132	Phone: 305-539-6000 (Organization-Main) Email Address: asuarez@rccl.com
	Committee(s): Board of Directors	
<b>Mr. Erik Sussman</b>		
	Address: 313 Ne 2nd Street Ph-05 Fort Lauderdale, FL 33301	Phone: (305) 978-8107 (Mobile) Email Address: Esuss13@gmail.com
	Committee(s): Board of Directors Event-Hall of Fame Innovative Initiatives Committee	
<b>Mrs. Kim Sweers</b>	<b>FastBoat Marine Group</b>	
	Address: 1490 N Federal Hwy Pompano Beach, FL 33062	Phone: (954) 581-8355 (Organization-Direct) Email Address: kim@fbmarine.com
	Committee(s): Innovative Initiatives Committee	
<b>Mr. Robert C. Swindell</b>	<b>Greater Fort Lauderdale Alliance</b>	<b>Sr. Vice President</b>
	Address: 110 E Broward Blvd Suite 1990 Fort Lauderdale, FL 33301	Phone: 954-524-3113 (Organization-Main) (954) 627-0129 (Mobile) Email Address: BSwindell@GFLAlliance.org
	Committee(s): Board of Directors	
<b>Ms. Nicky Tesser</b>	<b>JetBlue Airways</b>	
	Address: 200 Terminal Drive Fort Lauderdale, FL 33315	Phone: 954-359-1200 (Organization-Main) Email Address: nicky.tesser@jetblue.com
	Committee(s): Board of Directors	
<b>Mr. Gregory C. Thompson</b>	<b>Kemet Corporation</b>	<b>Executive Vice President and CFO</b>
	Address: One East Broward Blvd. Fort Lauderdale, FL 33301	Phone: 954-766-2826 (Organization-Main) (440) 315-5351 (Mobile) Email Address: gregthompson@kemet.com
	Committee(s): Board of Directors Finance Committee	
<b>Mr. Matthew Verga</b>	<b>KPMG LLP</b>	<b>Senior Audit Manager</b>
	Address: 450 E Las Olas Blvd, Suite 1200 Fort Lauderdale, FL 33301	Phone: 954-524-6000 (Organization-Main) Email Address: mverga@KPMG.com
	Committee(s): Board of Directors Finance Committee	
<b>Mr. Mark S. Walter, CPA</b>	<b>The Legacy Companies</b>	<b>Chief Financial Officer</b>
	Address: 3355 Enterprise Avenue, Ste. 160 Weston, FL 33331	Phone: (954) 660-1462 (Organization-Direct) (954) 817-2154 (Mobile) Email Address: mwalter@thelegacycompanies.com



Board Member	Company	Job Title
	Committee(s): Audit Committee, Board Chairman Board of Directors Executive Committee	
<b>Mr. Chaz Warrington</b>	<b>DEX Imaging, Inc.</b>	<b>Sales Director</b>
	Address: 2500 N Andrews Avenue Ext Pompano Beach, FL 33064 Committee(s): Board of Directors Innovative Initiatives Committee Marketing/PR/External Affairs Committee	Phone: (813) 769-4282 (Organization-Main) Email Address: cwarrington@deximaging.com
<b>Mr. Mitch Welin</b>	<b>ComRes, Inc.</b>	
	Address: 424 SW 12th Avenue Deerfield Beach, FL 33442-3108 Committee(s): Board of Directors Event-Bowl-A-Thon Programs Committee	Phone: 954-462-9600 (Organization-Main) Email Address: mwelin@comresusa.com
<b>Mr. Michael Weymouth</b>	<b>Riverside Hotel</b>	
	Address: 620 E Las Olas Blvd Fort Lauderdale, FL 33301 Committee(s): Board of Directors Event-Hall of Fame	Phone: 954-463-5630 ext. 14 (Organization-Direct) 954-712-9915 (Mobile) Email Address: mike@lasolas.co
<b>Mr. Peter R. Woolf</b>	<b>Community Volunteer</b>	
	Address: 1208 NE 1st Street Fort Lauderdale, FL 33301 Committee(s): Audit Committee Board of Directors Finance Committee	Phone: (954) 494-1892 (Mobile) Email Address: woolfp@gmail.com
<b>Mr. Jordan Yates</b>	<b>Yates Institute of Plastic Surgery</b>	
	Address: 717 SE 2nd Street Fort Lauderdale, FL 33301 Committee(s): Board of Directors Innovative Initiatives Committee	Phone: (954) 463-5208 (Organization-Main) (563) 639-2563 (Mobile) Email Address: jordan@yatesinstitute.com

Keefe  
McCullough  
CPA's + Trusted Advisors

January 10, 2020

Ms. Laurie Sallarullo, President/CEO  
Junior Achievement of South Florida, Inc.  
1130 Coconut Creek Boulevard  
Coconut Creek, FL 33066

Dear Ms. Sallarullo:

This letter is attached to your file copy of the Return of Organization Exempt from Income Tax (Form 990) for the year ended June 30, 2019.

The original return has been **Electronically Filed** with the Internal Revenue Service Center in accordance with the following instructions:

No tax is payable with this return.

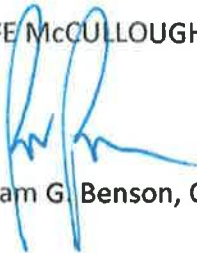
The preparation of this tax return has been based on information furnished to us by the organization without verification of its accuracy or completeness. We want to remind you that the organization has the ultimate responsibility for this income tax return and, therefore, you should inspect the return and notify us of any discrepancies.

Internal Revenue Service audits are more frequent and detailed than ever. If this return is selected for audit, please contact us immediately so that we can determine together the proper response to the I.R.S. Our fee for preparation of this return does not include representation or counseling for I.R.S. audits, other I.R.S. correspondence, or any other tax advice. We will bill you separately for any time required regarding these matters.

Please review the return and contact us if you have questions.

Regards,

KEEFE McCULLOUGH



William G. Benson, C.P.A.

EXTENDED TO MAY 15, 2020

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2018

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

A For the 2018 calendar year, or tax year beginning JUL 1, 2018 and ending JUN 30, 2019

Header section containing organization name (JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.), EIN (59-0871446), address (1130 COCONUT CREEK BLVD, COCONUT CREEK, FL 33066), and principal officer (LAURIE SALLARULO).

Part I Summary

Summary section with line 1: TO INSPIRE AND PREPARE YOUNG PEOPLE TO SUCCEED IN A GLOBAL ECONOMY. Includes a table for revenue and expenses.

Table with columns: Revenue, Expenses, Net Assets or Fund Balances. Rows 8-22 showing financial data for Prior Year and Current Year.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature block containing signatures of Laurie Sallarulo (President & Executive Director) and William G. Benson (Preparer).

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

# Application for Automatic Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury  
Internal Revenue Service

- ▶ **File a separate application for each return.**
- ▶ **Go to [www.irs.gov/Form8868](http://www.irs.gov/Form8868) for the latest information.**

**Electronic filing (e-file).** You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit [www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits](http://www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits).

**Automatic 6-Month Extension of Time.** Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

<b>Type or print</b>	Name of exempt organization or other filer, see instructions. <b>JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.</b>	<b>Enter filer's identifying number</b> Employer identification number (EIN) or <b>59-0871446</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>C/O KMC: - 6550 N. FEDERAL HWY, 4TH FL</b>	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>FT. LAUDERDALE, FL 33308</b>	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

**THE ORGANIZATION**

- The books are in the care of ▶ **1130 COCONUT CREEK BLVD. - COCONUT CREEK, FL 33066**  
Telephone No. ▶ **954-979-7100** Fax No. ▶ **954-971-3525**
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ . If this is for the whole group, check this box ▶  . If it is for part of the group, check this box ▶  and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2020** , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year \_\_\_\_\_ or  
 ▶  tax year beginning **JUL 1, 2018** , and ending **JUN 30, 2019** .

2 If the tax year entered in line 1 is for less than 12 months, check reason:  Initial return  Final return  
 Change in accounting period

3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c <b>Balance due.</b> Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

**Caution:** If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2019)

JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.

Form 990 (2018)

59-0871446 Page 2

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC. HIGHLIGHTS THE VALUE OF THE FREE ENTERPRISE SYSTEM, TEACHING BUSINESS KNOW-HOW AND PERSONAL FINANCE. WE DO THAT THROUGH PROVEN STRUCTURED, HANDS-ON PROGRAMS FOR ALL STUDENTS, K-12. THE RELEVANCY OF THE ORGANIZATION'S PROGRAMS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 3,865,257. including grants of \$ ) (Revenue \$ )

THE PROGRAM SERVICES ARE COMPRISED OF THE FOLLOWING:

JA BIZTOWN: EACH BIZTOWN IS AN INDOOR CENTER THAT CONTAINS A MINI CITY WITH UP TO 18 PUBLIC AND PRIVATE BUSINESSES. EACH BUSINESS WITHIN THE CENTER IS SPONSORED BY A REAL LOCAL BUSINESS AND DISPLAYS THE AUTHENTIC LOGO AND THE ACTUAL MARKETPLACE APPEARANCE OF THE SPONSOR BRINGING THE TOWN TO LIFE FOR THE STUDENTS.

JA FINANCE PARK: PROGRAM HELPS STUDENTS NAVIGATE THE WORLD OF PERSONAL FINANCES AS THEY ASSUME THE ROLE OF AN "ADULT FOR THE DAY". AT JA FINANCE PARK, STUDENTS ARE GIVEN A UNIQUE LIFE SITUATION CARD WHICH INCLUDES AN INCOME, MARITAL STATUS, EVEN KIDS.USING THIS PERSONA,

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

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

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 3,865,257.

Form 990 (2018)

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

Form 990 (2018)

59-0871446 Page 3

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

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

Form 990 (2018)

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	X	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		X
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		X
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		X
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		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 disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		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 entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <i>Note. All Form 990 filers are required to complete Schedule O</i>	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		23
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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**Part V** Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
<b>2a</b>	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		63
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see Instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O		
<b>4a</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)?		X
<b>b</b>	If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		7d
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? ...		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?		
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10a	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	11a	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	13a	
<b>b</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	13b	
<b>c</b>	Enter the amount of reserves on hand	13c	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	X
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	70		
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent		
	70		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Did the organization have members or stockholders?		X
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	a The governing body?	X	
<b>8b</b>	b Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **FL**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request  Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **THE ORGANIZATION - 954-979-7100  
1130 COCONUT CREEK BLVD., COCONUT CREEK, FL 33066**

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

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

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
  - List the organization's **five current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PETER ANDERSON CHAIR	1.00	X		X			0.	0.	0.	
(2) TIM RUBIN VICE CHAIR	1.00	X		X			0.	0.	0.	
(3) GEOFFREY HORST TREASURER	1.00	X		X			0.	0.	0.	
(4) TIM HOGANS SECRETARY	1.00	X		X			0.	0.	0.	
(5) AMY ALLEN PAST CHAIR	1.00	X		X			0.	0.	0.	
(6) ALAN GROSS BOARD MEMBER	1.00	X					0.	0.	0.	
(7) ALAN MCKAY BOARD MEMBER	1.00	X					0.	0.	0.	
(8) ANDREW KOENIG BOARD MEMBER	1.00	X					0.	0.	0.	
(9) ROBERT SWINDELL BOARD MEMBER	1.00	X					0.	0.	0.	
(10) BRANDEN HENSLER BOARD MEMBER	1.00	X					0.	0.	0.	
(11) BRENDA HORNER BOARD MEMBER	1.00	X					0.	0.	0.	
(12) ROBERT CERAVOLO BOARD MEMBER	1.00	X					0.	0.	0.	
(13) DAPHNEE SAINVIL BOARD MEMBER	1.00	X					0.	0.	0.	
(14) DR. AVIS PROCTOR BOARD MEMBER	1.00	X					0.	0.	0.	
(15) JERRY ROSENTHAL BOARD MEMBER	1.00	X					0.	0.	0.	
(16) JOE SCHUMACKER BOARD MEMBER	1.00	X					0.	0.	0.	
(17) LISA RONEY BOARD MEMBER	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) LOIS MARINO BOARD MEMBER	1.00	X						0.	0.	0.
(19) MARK S. WALTER BOARD MEMBER	1.00	X						0.	0.	0.
(20) MATTHEW VERGA BOARD MEMBER	1.00	X						0.	0.	0.
(21) MAUREEN CANADA BOARD MEMBER	1.00	X						0.	0.	0.
(22) MEAGHAN RYAN BOARD MEMBER	1.00	X						0.	0.	0.
(23) MICHAEL MCGINN BOARD MEMBER	1.00	X						0.	0.	0.
(24) MICHAEL SCHWARZBERG BOARD MEMBER	1.00	X						0.	0.	0.
(25) MICHAEL WEYMOUTH BOARD MEMBER	1.00	X						0.	0.	0.
(26) MITCH WELIN BOARD MEMBER	1.00	X						0.	0.	0.
<b>1b Sub-total</b>								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								246,041.	0.	8,224.
<b>d Total (add lines 1b and 1c)</b>								246,041.	0.	8,224.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

**SEE PART VII, SECTION A CONTINUATION SHEETS**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) NICHOLAS KANIARIS BOARD MEMBER	1.00	X						0.	0.	0.
(28) PETER WOOLF BOARD MEMBER	1.00	X						0.	0.	0.
(29) ROBERT LAMM BOARD MEMBER	1.00	X						0.	0.	0.
(30) RONNIE MEDINA BOARD MEMBER	1.00	X						0.	0.	0.
(31) RYAN GUDAITIS BOARD MEMBER	1.00	X						0.	0.	0.
(32) SHAWN SACKMAN BOARD MEMBER	1.00	X						0.	0.	0.
(33) STU MORRIS BOARD MEMBER	1.00	X						0.	0.	0.
(34) JOHN RAY BOARD MEMBER	1.00	X						0.	0.	0.
(35) FRANKI SCHMIDT BOARD MEMBER	1.00	X						0.	0.	0.
(36) ALFREDO AGUIRRE BOARD MEMBER	1.00	X						0.	0.	0.
(37) CARLOS ALVAREZ BOARD MEMBER	1.00	X						0.	0.	0.
(38) LISA ANDERSON BOARD MEMBER	1.00	X						0.	0.	0.
(39) ROBERT ARROYO BOARD MEMBER	1.00	X						0.	0.	0.
(40) ROBERT BIRDSOING BOARD MEMBER	1.00	X						0.	0.	0.
(41) CHRISTOPHER CAVANAGH BOARD MEMBER	1.00	X						0.	0.	0.
(42) RICHARD FARAH BOARD MEMBER	1.00	X						0.	0.	0.
(43) MICHAEL FISCHLER BOARD MEMBER	1.00	X						0.	0.	0.
(44) KATHERINE FOSTER BOARD MEMBER	1.00	X						0.	0.	0.
(45) ALAN GOLDSMITH BOARD MEMBER	1.00	X						0.	0.	0.
(46) DAVID GREENBERG BOARD MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) DAVID GUSSACK BOARD MEMBER	1.00	X						0.	0.	0.
(48) STEPHEN HENRY BOARD MEMBER	1.00	X						0.	0.	0.
(49) JOEL MAYERSOHN BOARD MEMBER	1.00	X						0.	0.	0.
(50) KAREN KILPATRICK BOARD MEMBER	1.00	X						0.	0.	0.
(51) ED LAWTON BOARD MEMBER	1.00	X						0.	0.	0.
(52) THOMAS LOFFREDO BOARD MEMBER	1.00	X						0.	0.	0.
(53) NICOLE MANCINI BOARD MEMBER	1.00	X						0.	0.	0.
(54) PAUL MARKO BOARD MEMBER	1.00	X						0.	0.	0.
(55) MICHELLE MARTINEZ REYES BOARD MEMBER	1.00	X						0.	0.	0.
(56) S. CAROLINA MATA BOARD MEMBER	1.00	X						0.	0.	0.
(57) IWAN MOHAMED BOARD MEMBER	1.00	X						0.	0.	0.
(58) SCOTT RASSLER BOARD MEMBER	1.00	X						0.	0.	0.
(59) MICHAEL REARDEN BOARD MEMBER	1.00	X						0.	0.	0.
(60) JAMES ROBERTSON BOARD MEMBER	1.00	X						0.	0.	0.
(61) RICHARD RODRIGUEZ BOARD MEMBER	1.00	X						0.	0.	0.
(62) DAWN STAGLIANO BOARD MEMBER	1.00	X						0.	0.	0.
(63) SHANE STRUM BOARD MEMBER	1.00	X						0.	0.	0.
(64) ALFREDO SUAREZ BOARD MEMBER	1.00	X						0.	0.	0.
(65) ERIK SUSSMAN BOARD MEMBER	1.00	X						0.	0.	0.
(66) CRISTY SWINK BOARD MEMBER	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(67) CHAZ WARRINGTON BOARD MEMBER	1.00	X						0.	0.	0.
(68) BLAIR WILLIS BOARD MEMBER	1.00	X						0.	0.	0.
(69) DAVID WOLNEK BOARD MEMBER	1.00	X						0.	0.	0.
(70) ERIC YUTZY BOARD MEMBER	1.00	X						0.	0.	0.
(71) LAURIE SALLARULO PRESIDENT AND EXECUTIVE DI	40.00			X				246,041.	0.	8,224.
Total to Part VII, Section A, line 1c								246,041.		8,224.

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**Part VIII** Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b> Federated campaigns	<b>1a</b>			
	<b>b</b> Membership dues	<b>1b</b>			
	<b>c</b> Fundraising events	<b>1c</b> 131,080.			
	<b>d</b> Related organizations	<b>1d</b>			
	<b>e</b> Government grants (contributions)	<b>1e</b> 1,134,215.			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b> 3,127,348.			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$	489,835.			
	<b>h</b> Total. Add lines 1a-1f	4,392,643.			
Program Service Revenue	<b>2 a</b>	<b>Business Code</b>			
	<b>b</b>				
	<b>c</b>				
	<b>d</b>				
	<b>e</b>				
	<b>f</b> All other program service revenue				
	<b>g</b> Total. Add lines 2a-2f				
Other Revenue	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		29,506.		29,506.
	<b>4</b> Income from investment of tax-exempt bond proceeds				
	<b>5</b> Royalties				
	<b>6 a</b> Gross rents	(i) Real (ii) Personal			
	<b>b</b> Less: rental expenses				
	<b>c</b> Rental income or (loss)				
	<b>d</b> Net rental income or (loss)				
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities (ii) Other			
	<b>b</b> Less: cost or other basis and sales expenses				
	<b>c</b> Gain or (loss)				
	<b>d</b> Net gain or (loss)				
	<b>8 a</b> Gross income from fundraising events (not including \$ 131,080. of contributions reported on line 1c). See Part IV, line 18	<b>a</b> 1,216,210.			
	<b>b</b> Less: direct expenses	<b>b</b> 404,325.			
	<b>c</b> Net income or (loss) from fundraising events	811,885.			811,885.
<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>				
<b>b</b> Less: direct expenses	<b>b</b>				
<b>c</b> Net income or (loss) from gaming activities					
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>				
<b>b</b> Less: cost of goods sold	<b>b</b>				
<b>c</b> Net income or (loss) from sales of inventory					
<b>Miscellaneous Revenue</b>		<b>Business Code</b>			
<b>11 a</b>					
<b>b</b>					
<b>c</b>					
<b>d</b> All other revenue					
<b>e</b> Total. Add lines 11a-11d					
<b>12</b> Total revenue. See instructions		5,234,034.	0.	0.	841,391.

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**Part IX Statement of Functional Expenses**

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

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

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 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	266,570.	226,585.	15,994.	23,991.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,575,897.	1,339,512.	94,554.	141,831.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	278,761.	236,947.	16,726.	25,088.
10 Payroll taxes	130,515.	110,938.	7,831.	11,746.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	272,205.	158,435.	4,118.	109,652.
12 Advertising and promotion				
13 Office expenses	79,573.	71,431.	2,307.	5,835.
14 Information technology				
15 Royalties				
16 Occupancy	120,540.	102,733.	5,973.	11,834.
17 Travel	28,294.	19,901.	454.	7,939.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	94,202.	80,072.	5,652.	8,478.
21 Payments to affiliates	95,296.	95,296.		
22 Depreciation, depletion, and amortization	472,777.	399,841.	28,468.	44,468.
23 Insurance	58,974.	52,461.	2,260.	4,253.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>PROGRAM EXPENSES</b>	450,434.	450,434.		
b <b>REPAIRS AND MAINTENANCE</b>	156,795.	130,561.	6,828.	19,406.
c <b>UNFULFILLED PROMISES TO</b>	109,183.			109,183.
d <b>BANK FEES AND OTHER CHA</b>	91,240.	75,962.	4,487.	10,791.
e All other expenses	401,719.	314,148.	6,306.	81,265.
25 <b>Total functional expenses.</b> Add lines 1 through 24e	4,682,975.	3,865,257.	201,958.	615,760.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here  if following SOP 98-2 (ASC 958-720)

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**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	1	Cash - non-interest-bearing .....	2,087,673.	1	1,760,904.
	2	Savings and temporary cash investments .....		2	
	3	Pledges and grants receivable, net .....	5,650,064.	3	5,749,034.
	4	Accounts receivable, net .....	1,070,093.	4	815,200.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		6	
	7	Notes and loans receivable, net .....		7	
	8	Inventories for sale or use .....		8	
	9	Prepaid expenses and deferred charges .....	42,571.	9	52,154.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	14,105,743.		
		10a			
	b	Less: accumulated depreciation .....	4,546,636.		
		10b			
			9,670,022.	10c	9,559,107.
	11	Investments - publicly traded securities .....		11	
	12	Investments - other securities. See Part IV, line 11 .....		12	
13	Investments - program-related. See Part IV, line 11 .....		13		
14	Intangible assets .....		14		
15	Other assets. See Part IV, line 11 .....	706,570.	15	150,004.	
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	19,226,993.	16	18,086,403.	
<b>Liabilities</b>	17	Accounts payable and accrued expenses .....	208,071.	17	288,927.
	18	Grants payable .....		18	
	19	Deferred revenue .....	1,386,973.	19	719,286.
	20	Tax-exempt bond liabilities .....	4,988,218.	20	4,004,374.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23	Secured mortgages and notes payable to unrelated third parties .....		23	
	24	Unsecured notes and loans payable to unrelated third parties .....		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	75,815.	25	77,407.
	26	<b>Total liabilities.</b> Add lines 17 through 25 .....	6,659,077.	26	5,089,994.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	27	Unrestricted net assets .....	5,417,852.	27	6,870,240.
	28	Temporarily restricted net assets .....	7,150,064.	28	0.
	29	Permanently restricted net assets .....		29	6,126,169.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	30	Capital stock or trust principal, or current funds .....		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32	Retained earnings, endowment, accumulated income, or other funds .....		32	
	33	<b>Total net assets or fund balances</b> .....	12,567,916.	33	12,996,409.
	34	<b>Total liabilities and net assets/fund balances</b> .....	19,226,993.	34	18,086,403.

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**Part XI Reconciliation of Net Assets**

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	5,234,034.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,682,975.
3	Revenue less expenses. Subtract line 2 from line 1	3	551,059.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,567,916.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	-80,000.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-42,566.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	12,996,409.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

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

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.

Employer identification number 59-0871446

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 [ ] A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 [ ] A school described in section 170(b)(1)(A)(ii).
3 [ ] A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 [ ] A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 [ ] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [ ] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 [ ] A community trust described in section 170(b)(1)(A)(vi).
9 [ ] An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 [X] An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 [ ] An organization organized and operated exclusively to test for public safety.
12 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations...
a [ ] Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b [ ] Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c [ ] Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d [ ] Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations [ ]

g Provide the following information about the supported organization(s).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization, (iv) Is the organization listed in your governing document? (Yes/No), (v) Amount of monetary support, (vi) Amount of other support.

**JUNIOR ACHIEVEMENT OF**

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) .....	14	%
<b>15</b> Public support percentage from 2017 Schedule A, Part II, line 14 .....	15	%
<b>16a 33 1/3% support test - 2018.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 33 1/3% support test - 2017.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>17a 10% -facts-and-circumstances test - 2018.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 10% -facts-and-circumstances test - 2017.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	2,655,948.	2,630,441.	4,344,694.	8,368,124.	4,392,643.	22,391,850.
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 .....	1,124,342.	943,357.	873,012.	1,155,864.	1,216,210.	5,312,785.
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 .....	3,780,290.	3,573,798.	5,217,706.	9,523,988.	5,608,853.	27,704,635.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons .....						0.
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 .....						0.
c Add lines 7a and 7b .....						0.
8 Public support. (Subtract line 7c from line 6.) .....						27,704,635.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6 .....	3,780,290.	3,573,798.	5,217,706.	9,523,988.	5,608,853.	27,704,635.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....				11,100.	29,506.	40,606.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
c Add lines 10a and 10b .....				11,100.	29,506.	40,606.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly 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.) .....	3,780,290.	3,573,798.	5,217,706.	9,535,088.	5,638,359.	27,745,241.

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) .....	15	99.85 %
16 Public support percentage from 2017 Schedule A, Part III, line 15 .....	16	99.96 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) .....	17	.15 %
18 Investment income percentage from 2017 Schedule A, Part III, line 17 .....	18	.04 %

19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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**Part IV 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.
- 3b 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.
- 3c 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.
- 4b 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.
- 4c 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).
- 5b 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?
- 5c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- 9b 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.
- 9c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- 10b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

**JUNIOR ACHIEVEMENT OF**

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?	<b>11a</b>	
<b>b</b> A family member of a person described in (a) above?	<b>11b</b>	
<b>c</b> 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.	<b>11c</b>	

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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.	<b>1</b>	
<b>2</b> 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.	<b>2</b>	

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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).	<b>1</b>	

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?	<b>1</b>	
<b>2</b> 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).	<b>2</b>	
<b>3</b> 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.	<b>3</b>	

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
<b>2</b> Activities Test. Answer (a) and (b) below.		
<b>a</b> 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.	<b>2a</b>	
<b>b</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.	<b>2b</b>	
<b>3</b> Parent of Supported Organizations. Answer (a) and (b) below.		
<b>a</b> 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.	<b>3a</b>	
<b>b</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.	<b>3b</b>	

JUNIOR ACHIEVEMENT OF

Schedule A (Form 990 or 990-EZ) 2018 SOUTH FLORIDA, INC.

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**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections 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	<b>Adjusted Net Income</b> (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	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> 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	<b>Minimum Asset Amount</b> (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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> 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) 2018



**JUNIOR ACHIEVEMENT OF**

Schedule A (Form 990 or 990-EZ) 2018 **SOUTH FLORIDA, INC.**

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**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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 responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2018 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-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, 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 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

JUNIOR ACHIEVEMENT OF

Schedule A (Form 990 or 990-EZ) 2018 SOUTH FLORIDA, INC.

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**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.)

Lined area for supplemental information.

**Schedule B**

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

Name of the organization

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

Employer identification number

**59-0871446**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, 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 (entering "N/A" in column (b) instead of the contributor name and address), 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).

LHA 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) (2018)

Name of organization <b>JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.</b>	Employer identification number <b>59-0871446</b>
--------------------------------------------------------------------------	-----------------------------------------------------

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	LILLIAN S. WELLS FOUNDATION 600 SAGAMORE ROAD FORT LAUDERDALE, FL 33301	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	JUNIOR ACHIEVEMENT OF SOUTH FLORIDA CHARITABLE FOUNDATION, I 1130 COCONUT CREEK BLVD. COCONUT CREEK, FL 33066	\$ 115,956.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	SEMINOLE HARD ROCK HOTEL & CASINO ONE SEMINOLE WAY HOLLYWOOD, FL 33314	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	JAMES AND BEATRICE SALAH CHARITABLE TRUST 285 E. OAKLAND BLVD., #289 FORT LAUDERDALE, FL 33306	\$ 100,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	THE FREDERICK A. DELUCA FOUNDATION, INC. 500 E. BROWARD BLVD. STE. 2300 FORT LAUDERDALE, FL 33394	\$ 345,722.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	THE SCHOOL BOARD OF BROWARD COUNTY 600 SE 3RD AVENUE FORT LAUDERDALE, FL 33301	\$ 450,358.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

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

Employer identification number

**59-0871446**

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

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

Name of organization

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

Employer identification number

**59-0871446**

**Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2018**

Open to Public Inspection

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

Employer identification number  
**59-0871446**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Part II Conservation Easements.** 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
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
- |                                                                                                                                            | Held at the End of the Tax Year |
|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| a Total number of conservation easements                                                                                                   | 2a                              |
| b Total acreage restricted by conservation easements                                                                                       | 2b                              |
| c Number of conservation easements on a certified historic structure included in (a)                                                       | 2c                              |
| d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register | 2d                              |
- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_
- 4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \_\_\_\_\_
- 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

- 1a 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.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_
- (ii) Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenue included on Form 990, Part VIII, line 1 ▶ \$ \_\_\_\_\_
- b Assets included in Form 990, Part X ▶ \$ \_\_\_\_\_

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

Schedule D (Form 990) 2018

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

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

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

(check all that apply):

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

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

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

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

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

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

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

**Part VI Land, Buildings, and Equipment.**

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		12,276,506.	3,031,767.	9,244,739.
c Leasehold improvements				
d Equipment		1,497,397.	1,259,843.	237,554.
e Other		331,840.	255,026.	76,814.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				9,559,107.



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

Schedule D (Form 990) 2018

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

**Part VIII Investments - Program Related.**

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (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)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" 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) <b>DUE TO RELATED ORGANIZATION</b>	<b>77,407.</b>
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<b>77,407.</b>

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

Schedule D (Form 990) 2018

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	6,086,427.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b	947,689.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	947,689.	
3	Subtract line 2e from line 1	3	5,138,738.	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	95,296.	
c	Add lines 4a and 4b	4c	95,296.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,234,034.	

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

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

1	Total expenses and losses per audited financial statements		1	5,615,368.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	1,027,689.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e	1,027,689.	
3	Subtract line 2e from line 1	3	4,587,679.	
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		
b	Other (Describe in Part XIII.)	4b	95,296.	
c	Add lines 4a and 4b	4c	95,296.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	4,682,975.	

**Part XIII Supplemental Information.**

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

**PART XI, LINE 4B - OTHER ADJUSTMENTS:**

PAYMENTS TO AFFILIATES ON PART IX, LINE 21A NETTED AGAINST TOTAL  
REVENUE, GAINS AND SUPPORT ON THE AUDITED FINANCIAL  
STATEMENT 95,296.

**PART XII, LINE 4B - OTHER ADJUSTMENTS:**

PAYMENTS TO AFFILIATES ON PART IX, LINE 21A NETTED AGAINST TOTAL  
REVENUE, GAINS AND SUPPORT ON THE AUDITED FINANCIAL  
STATEMENT 95,296.

JUNIOR ACHIEVEMENT OF  
SOUTH FLORIDA, INC.

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

Lined area for supplemental information.

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

**Supplemental Information Regarding Fundraising or Gaming Activities**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

**2018**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization **JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.** Employer Identification number **59-0871446**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

**1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a**  Mail solicitations
- b**  Internet and email solicitations
- c**  Phone solicitations
- d**  In-person solicitations
- e**  Solicitation of non-government grants
- f**  Solicitation of government grants
- g**  Special fundraising events

**2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**

**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
<b>Total</b>				▶		

**3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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JUNIOR ACHIEVEMENT OF

Schedule G (Form 990 or 990-EZ) 2018 SOUTH FLORIDA, INC.

59-0871446 Page 2

**Part II Fundraising Events.** Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		HALL OF FAME JA UNCORKED (event type)	(event type)	4 (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	635,754.	382,483.	329,053.	1,347,290.
	2	Less: Contributions	8,250.	57,747.	65,083.	131,080.
	3	Gross income (line 1 minus line 2)	627,504.	324,736.	263,970.	1,216,210.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	125,808.	139,772.	138,745.	404,325.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				404,325.
	11	Net income summary. Subtract line 10 from line 3, column (d)				811,885.

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1	Gross revenue		
Direct Expenses	2	Cash prizes			
	3	Noncash prizes			
	4	Rent/facility costs			
	5	Other direct expenses			
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No  
 b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No  
 b If "Yes," explain: \_\_\_\_\_

JUNIOR ACHIEVEMENT OF

- 11 Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13 Indicate the percentage of gaming activity conducted in:
- |                               |     |   |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility         | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?  Yes  No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_
- c If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

16 Gaming manager information:

Name ▶ \_\_\_\_\_

Gaming manager compensation ▶ \$ \_\_\_\_\_

Description of services provided ▶ \_\_\_\_\_

- Director/officer       Employee       Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?  Yes  No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**Part IV** Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**JUNIOR ACHIEVEMENT OF**

Schedule G (Form 990 or 990-EZ)

**SOUTH FLORIDA, INC.**

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

Lined area for supplemental information, currently blank.

Schedule G (Form 990 or 990-EZ)

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

**2018**

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

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
▶ Attach to Form 990.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

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

Employer identification number

**59-0871446**

**Part I Questions Regarding Compensation**

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

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

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

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

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

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

**4** 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:

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

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

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

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

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

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

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

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

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

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

X

X

X

X

X

X

X

X

X

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Schedule J (Form 990) 2018







▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.  
 ▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

**Part I Bond issues** SEE PART VI FOR COLUMN (F) CONTINUATIONS

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
A	CITY OF COCONUT CREEK	59-087144619188YAA7	01/21/07	7,000,000.		FINANCE THE CONSTRUCTION AND		X		X		X
B												
C												
D												

**Part II Proceeds**

	A	B	C	D
1 Amount of bonds retired				
2 Amount of bonds legally defeased				
3 Total proceeds of issue				
4 Gross proceeds in reserve funds				
5 Capitalized interest from proceeds				
6 Proceeds in refunding escrows				
7 Issuance costs from proceeds				
8 Credit enhancement from proceeds				
9 Working capital expenditures from proceeds				
10 Capital expenditures from proceeds				
11 Other spent proceeds				
12 Other unspent proceeds				
13 Year of substantial completion	2032			
14 Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	Yes	No	Yes	No
15 Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X		
16 Has the final allocation of proceeds been made?		X		
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?		X		

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JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.

59-0871446

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?								
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						
3a Are there any management or service contracts that may result in private business use of bond-financed property?		X						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government								
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6 Total of lines 4 and 5								
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a non-governmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	X							
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?								
b Exception to rebate?								
c No rebate due?								
3 Is the bond issue a variable rate issue?	X							

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

59-0871446

**Part IV Arbitrage (Continued)**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b Name of provider	TD BANK							
c Term of hedge	22,000,000							
d Was the hedge superintegrated?		X						
e Was the hedge terminated?		X						
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?		X						
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of section 148?		X						

**Part V Procedures To Undertake Corrective Action**

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation isn't available under applicable regulations?

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
		X						

**Part VI Supplemental Information.** Provide additional information for responses to questions on Schedule K. See instructions

**SCHEDULE K, PART I, BOND ISSUES:**

(A) ISSUER NAME: CITY OF COCONUT CREEK

(F) DESCRIPTION OF PURPOSE:

FINANCE THE CONSTRUCTION AND EQUIPPING OF CERTAIN EDUCATIONAL FACILITIES

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2018**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

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

Part I	Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ ( <u>ADVERTISING</u> )	X	1	138,030.	FAIR MARKET VALUE
26	Other ▶ ( <u>SPECIAL EVENT</u> )	X	163	131,080.	FAIR MARKET VALUE
27	Other ▶ ( <u>PROGRAM MATER</u> )	X	1	78,225.	FAIR MARKET VALUE
28	Other ▶ ( <u>SIGNAGE</u> )	X	1	50,000.	FAIR MARKET VALUE

29	Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29			
30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?			Yes	No
					X
b	If "Yes," describe the arrangement in Part II.				
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?			Yes	No
					X
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?			Yes	No
					X
b	If "Yes," describe in Part II.				
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.				

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

Schedule M (Form 990) 2018

JUNIOR ACHIEVEMENT OF

Schedule M (Form 990) 2018

SOUTH FLORIDA, INC.

59-0871446

Page 2

**Part II**

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

**PART I, OTHER TYPES OF PROPERTY:**

**FACILITY**

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 50000.

(D) METHOD OF DETERMINING REVENUE: FAIR MARKET VALUE

**SOLAR PANELING**

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 32500.

(D) METHOD OF DETERMINING REVENUE: FAIR MARKET VALUE

**SERVICE DOG**

(A) CHECK IF APPLICABLE = X

(B) NUMBER OF CONTRIBUTIONS = 1

(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 10000.

(D) METHOD OF DETERMINING REVENUE: FAIR MARKET VALUE

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

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2018**

Open to Public  
Inspection

Name of the organization

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

Employer identification number

**59-0871446**

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

REINFORCES THE LEARNING PROCESS, ENCOURAGES SELF-ESTEEM AND INCREASES  
THE POTENTIAL FOR OUR STUDENTS FUTURE SUCCESS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

STUDENTS WORK TO CREATE A BALANCED MONTHLY BUDGET WHILE MAKING  
DECISIONS REGARDING HOUSING, TRANSPORTATION, INSURANCE, SAVINGS,  
ENTERTAINMENT EXPENSES AND MUCH MORE.

JA INCLASS: JA FINANCIAL LITERACY, WORK READINESS, AND ENTREPRENEURSHIP  
PROGRAMS ARE DESIGNED TO INSPIRE AND PREPARE STUDENTS FROM KINDERGARTEN  
THROUGH 12TH GRADE TO OWN THEIR FUTURE ECONOMIC SUCCESS. THEY ARE  
TAUGHT BY TRAINED VOLUNTEER ROLE MODELS FROM THE LOCAL COMMUNITY USING  
PROFESSIONALLY DESIGNED AND RIGOROUSLY EVALUATED CURRICULUM MATERIALS.

FORM 990, PART VI, SECTION B, LINE 11B:

COPY OF FORM 990 PROVIDED TO ORGANIZATION AND BOARD MEMBERS TO REVIEW. TAX  
RETURN IS RECONCILED TO AUDITED FINANCIAL STATEMENTS AND APPROVED BEFORE  
ITS SUBMISSION.

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

ANNUAL FORMS COMPLETED BY ALL BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 15:

PERFORMED BY THE FINANCE COMMITTEE.



Name of the organization JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC.

Employer identification number 59-0871446

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION'S FORM 1023 AND FORM 990 ARE AVAILABLE UPON REQUEST AND CAN BE VIEWED AT GUIDESTAR.ORG

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND AUDITED FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN FAIR VALUE OF INTEREST RATE SWAP -42,566.

FORM 990, PART XII, LINE 2C

THE ORGANIZATION HAS NOT CHANGED ITS OVERSIGHT PROCESS OR AUDITOR SELECTION PROCESS DURING THE CURRENT FISCAL YEAR.

**SCHEDULE R**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Related Organizations and Unrelated Partnerships**

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047  
**2018**  
Open to Public Inspection

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

Employer identification number  
**59-0871446**

**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	(g) Section 512(c)(13) controlled entity?	
						Yes	No

**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	(g) Section 512(c)(13) controlled entity?	
						Yes	No
JUNIOR ACHIEVEMENT USA, INC. 1 EDUCATION WAY COLORADO SPRINGS, CO 80906	EDUCATION	COLORADO	501(C)(3)	LINE 11			X
JUNIOR ACHIEVEMENT OF SOUTH FLORIDA CHARITABLE FOUNDATION, INC, 1130 COCONUT CREEK BLVD, COCONUT CREEK, FL 33066	EDUCATION	FLORIDA	501(C)(3)	LINE 11			X

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

Schedule R (Form 990) 2018

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluding from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	(l) Section 512(b)(13) controlled entity?	
							Yes	No		Yes	No		Yes	No

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

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

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

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

- 1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
  - a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity
  - b Gift, grant, or capital contribution to related organization(s)
  - c Gift, grant, or capital contribution from related organization(s)
  - d Loans or loan guarantees to or for related organization(s)
  - e Loans or loan guarantees by related organization(s)

- f Dividends from related organization(s)
- g Sale of assets to related organization(s)
- h Purchase of assets from related organization(s)
- i Exchange of assets with related organization(s)
- j Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- l Performance of services or membership or fundraising solicitations for related organization(s)
- m Performance of services or membership or fundraising solicitations by related organization(s)
- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o Sharing of paid employees with related organization(s)
- p Reimbursement paid to related organization(s) for expenses
- q Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)

		(a)	(b)	(c)	(d)	Yes	No
		Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	1a	1b
						1f	1g
						1h	1i
						1j	1k
						1l	1m
						1n	1o
						1p	1q
						1r	1s

(1)	JUNIOR ACHIEVEMENT OF SOUTH FLORIDA	M	95,296.FAIR MARKET VALUE				
(2)	CHARITABLE FOUNDATION, INC.	E	77,407.FAIR MARKET VALUE				
(3)							
(4)							
(5)							
(6)				49			

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

**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) Net all partners inc. 512(c)(2) 025. Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations? Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managerial partner? Yes No	(k) Percentage ownership

**Part VII Supplemental Information.**

Provide additional information for responses to questions on Schedule R. See instructions.

**PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:**

**NAME AND ADDRESS OF RELATED ORGANIZATION:**

JUNIOR ACHIEVEMENT USA, INC.

1 EDUCATION WAY

COLORADO SPRINGS, CO 80906

PRIMARY ACTIVITY: EDUCATION

DIRECT CONTROLLING ENTITY:

**NAME AND ADDRESS OF RELATED ORGANIZATION:**

JUNIOR ACHIEVEMENT OF SOUTH FLORIDA CHARITABLE FOUNDATION,

INC

1130 COCONUT CREEK BLVD

COCONUT CREEK, FL 33066

PRIMARY ACTIVITY: EDUCATION

DIRECT CONTROLLING ENTITY:

## GIFT AGREEMENT

Between

**Junior Achievement of South Florida &**

**Hudson Family Foundation c/o Steve Hudson**

This Gift Agreement (“Agreement”) is made this 31<sup>st</sup> day of May between Hudson Family Foundation c/o Steve Hudson (hereinafter referred to as “the Donor”), and Junior Achievement of South Florida a not for profit corporation located in Coconut Creek, Florida.

The Donor and the Junior Achievement of South Florida agree as follows:

1. Donor Commitment. The Donor hereby pledges to Junior Achievement of South Florida the sum of \$35,000, which as provided for herein is designated for the benefit of Junior Achievement of South Florida.
2. Donor Purpose. a. Purpose. It is understood and agreed that the gift will be used as a matching gift for general purposes.
3. Payment. It is further understood and agreed that the gift will be paid in full on or before 7/31/2020.
4. Recognition by Junior Achievement of South Florida. To honor the Donor, and to express the appreciation of Junior Achievement of South Florida, publicity in the form of news announcements, both internal and external, will be made with the permission of the Donor.
5. Reporting and Stewardship. Reports on performance of the Fund and use of the proceeds shall be provided annually to the Donor for matching gifts.
6. Additional Gifts. The Donor reserves the right to increase the Fund through additional gifts and hereby consents to additional contributions to the Fund by any individual, corporation, foundation, trust, estate or other legal entity through individual gift, bequest or other gift vehicle, and all gifts so designated shall be subject to the provisions of this Agreement.

In witness whereof, the parties to this Agreement have affixed their signatures:

*Steve Hudson*

5/31/2020

*Laurie Sallarulo*

5/31/2020

Steve Hudson, Donor  
Hudson Family Foundation

Date

Laurie Sallarulo, President/CEO  
Junior Achievement of South Florida

Date

REVENUES	Program 1					Program 2	
	JA BizTown	JA Finance Park	JA Personal Finance	TOTALS	Use of Funds	JA Remote Learning Prog	Use of Funds
Contribution - Volunteers	191	0	0	191	0	0	0
Contribution - Corporate	8,556	18,437	0	26,993		0	0
Contribution - Foundations	7,686	8,750	4,940	21,376	0	4,400	0
Contribution - Public Funding (Pompano Beach)	6,250	6,250	2,500	15,000	15,000	10,000	10,000
Programs - Capstone Fees	3,078	4,221	0	7,299	0	0	0
JA Hoffman Ice Cream	345	0	0	345	0	0	0
Storefront Revenue	5,551	1,778	0	7,329	0	0	0
Fee Based Program Revenue	5,551	1,778	2,400	9,729	0	0	0
<b>Revenue Subtotal</b>	<b>37,208</b>	<b>41,214</b>	<b>9,840</b>	<b>88,262</b>	<b>15,000</b>	<b>14,400</b>	<b>10,000</b>
In Kind - Storefront	8,231	7,500	0	15,731	0	0	0
In Kind - Volunteer Services	21,056	6,000	4,577	31,633	0	0	0
<b>GIK Subtotal</b>	<b>29,287</b>	<b>13,500</b>	<b>4,577</b>	<b>47,364</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Total Revenues</b>	<b>66,495</b>	<b>54,714</b>	<b>14,417</b>	<b>135,626</b>	<b>15,000</b>	<b>14,400</b>	<b>10,000</b>



Description	JA BizTown	JA Finance Park	JA Personal Finance	TOTALS	Use of Funds	JA Remote Learning Prog	Use of Funds
<b>EXPENSES</b>							
Salaries*	15,620	15,546	4,272	35,438	7,000	10,678	6,859
FICA / Medicare 7.65% total salaries	1,195	1,189	327	2,711		559	
FL Unemployment 2.7% of first 7000 per employee	123	2,079	16	2,218		0	
Payroll Processing Fee 2% of salaries	312	3,109	85	3,506		0	
Medical \$7,305 per f/t employee	2,237	1,603	614	4,454		0	
Workers Comp 4.13% of salaries	645	642	176	1,463		0	
<b>Salary, fringe subtotal</b>	<b>20,132</b>	<b>24,169</b>	<b>5,490</b>	<b>49,791</b>	<b>7,000</b>	<b>11,237</b>	<b>6,859</b>
<b>Curr Materials - \$3.00 x students</b>	2,385	2,475	600	5,460	4,000	216	216
<b>JA USA Program &amp; Support Fee - \$3.00 x students</b>	2,385	2,475	300	5,160	4,000	0	0
<b>Volunteer Recognition</b>	191	88	30	309		0	0
<b>Teacher Recognition</b>	38	22	120	180		0	0
<b>Volunteer Services &amp; Recruitment</b>	23	22	60	105		0	0
<b>Teacher Services</b>	19	22	0	41		0	0
<b>Graphic Design</b>	38	45	0	83		0	0
<b>Marketing &amp; Signage</b>	153	176	120	449		0	0
<b>Printing</b>	781	834	60	1,675		0	0
<b>Contract Labor - Volunteer Stipend</b>	0	0	1,200	1,200		0	0
<b>Local Travel</b>	19	22	60	101		0	0
<b>Food &amp; Beverage - student snacks</b>	574	22	0	596		425	425
<b>Supplies</b>	230	88	60	378		1,500	1,500
<b>Postage</b>	4	4	0	8		0	0
<b>In House IT/AV Services</b>	0	0	0	0		1,000	1,000
<b>Insurance \$.30 x students</b>	239	247	90	576		22	0
<b>PC Software</b>	77	88	960	1,125		0	0
<b>Staff Recognition/Meetings</b>	15	22	0	37		0	0
<b>Staff Training</b>	0	0	0	0		0	0
<b>JA Hoffman's Ice Cream</b>	345	0	0	345		0	0
<b>Utilities</b>	2,393	2,506	0	4,899		0	0
<b>Repairs &amp; Maintenance</b>	1,973	2,154	0	4,127		0	0
<b>Facility Use &amp; Cleaning</b>	3,944	4,483	0	8,427		0	0
<b>Administrative Fee 4%</b>	0	0	690	690		0	0

Description	JA BizTown	JA Finance Park	JA Personal Finance	TOTALS	Use of Funds	JA Remote Learning Prog	Use of Funds
Program Expenses Subtotal	15,826	15,795	4,350	35,971	8,000	3,163	3,141
In Kind - Storefront	8,231	7,500	0	15,731	0	0	0
In Kind - Volunteer Services	21,056	6,000	4,577	31,633	0	0	0
GIK Expense Subtotal	29,287	13,500	4,577	47,364	0	0	0
Total Expenses	65,245	53,464	14,417	133,126	15,000	14,400	10,000

Total Students  
Cost per Student

795      825      300      72  
82      65      48      200

## **Exhibit “B” Payment Schedule**

### **A. AWARD DISBURSEMENTS**

The awards disbursement process will begin upon full execution of the appropriations contract and will end in September, 30 for the fiscal year that this contract is approved.

### **B. PAYMENT SCHEDULE**

The total amount awarded for the JUNIOR ACHIEVEMENT OF SOUTH FLORIDA, INC. (name of the non-profit organization) for JA BizTown / JA Finance Park / Personal Finance (title of the program) for the current fiscal year is: \$15,000.

There will be three (3) payout/s during the period (depending on the amount awarded to each organization):

1. The first will equal 34% of the total allocation or \$5,100; be issued in advance. For any funds advanced the RECIPIENT agrees to provide the CITY with an itemization of how funds advanced were spent, along with invoices and proof of payment. Such an accounting must be provided to the CITY in the quarterly financial report as indicated in Exhibit “A” Recipients Requirements, Contractual Responsibilities and Program Description. Failure to comply with this requirement may result in the denial of the future requests for payments.
2. The second will equal 33% of the total allocation or \$4,950; will be issued upon receipt AND approval of the second quarterly narrative and financial report (including any additional requested documents);
3. The third payout will be the final 33% of the total allocation or \$4,950; will be issued upon receipt AND approval of the third and final quarterly narrative and financial report (including any additional requested documents).

## **EXHIBIT C**

### **INSURANCE REQUIREMENTS: NON PROFIT ORGANIZATION**

ORGANIZATION shall not commence services under the terms of this Agreement until certification or proof of insurance detailing terms and provisions has been received and approved in writing by the CITY's Risk Manager. If you have questions regarding the insurance requirements hereunder, please contact the City's Purchasing Department at (954) 786-4098. If the contract has already been awarded, please direct any queries and proof of the requisite insurance coverage to City staff responsible for oversight of the subject project/contract.

ORGANIZATION is responsible to deliver to the CITY for timely review and written approval/disapproval Certificates of Insurance which evidence that all insurance required hereunder is in full force and effect and which name on a primary basis, the CITY as an additional insured on all such coverage. Such policy or policies shall be issued by United States Treasury approved companies authorized to do business in the State of Florida. The policies shall be written on forms acceptable to the City's Risk Manager, meet a minimum financial A.M. Best and Company rating of no less than Excellent, and be part of the Florida Insurance Guarantee Association Act. No changes are to be made to these specifications without prior written approval of the City's Risk Manager.

Throughout the term of this Agreement, CITY, by and through its Risk Manager, reserve the right to review, modify, reject or accept any insurance policies required by this Agreement, including limits, coverages or endorsements. CITY reserves the right, but not the obligation, to review and reject any insurer providing coverage because of poor financial condition or failure to operate legally.

Failure to maintain the required insurance shall be considered an event of default. The requirements herein, as well as CITY's review or acceptance of insurance maintained by ORGANIZATION, are not intended to and shall not in any way limit or qualify the liabilities and obligations assumed by ORGANIZATION under this Agreement.

Throughout the term of this Agreement, ORGANIZATION and all subcontractors or other agents hereunder, shall, at their sole expense, maintain in full force and effect, the following insurance coverages and limits described herein, including endorsements.

A. Worker's Compensation Insurance covering all employees and providing benefits as required by Florida Statute, Chapter 440, regardless of the size of the company (number of employees) or the state in which the work is to be performed or of the state in which the ORGANIZATION is obligated to pay compensation to employees engaged in the performance of the work. ORGANIZATION further agrees to be responsible for employment, control and conduct of its employees and for any injury sustained by such employees in the course of their employment.

B. Liability Insurance.

(1) Naming the City of Pompano Beach as an additional insured as City's interests may appear, on General Liability Insurance only, relative to claims which arise from

ORGANIZATION'S negligent acts or omissions in connection with Contractor's performance under this Agreement.

(2) Such Liability insurance shall include the following checked types of insurance and indicated minimum policy limits.

<b>Type of Insurance</b>	<b>Limits of Liability</b>
<b>GENERAL LIABILITY:</b>	Minimum \$1,000,000 Per Occurrence and \$2,000,000 Per Aggregate
* Policy to be written on a claims incurred basis	
XX comprehensive form	bodily injury and property damage
XX premises - operations	bodily injury and property damage
— explosion & collapse hazard	
— underground hazard	
XX products/completed operations hazard	bodily injury and property damage combined
XX contractual insurance	bodily injury and property damage combined
XX broad form property damage	bodily injury and property damage combined
XX independent contractors	personal injury
XX personal injury	
XX sexual abuse/molestation	Minimum \$1,000,000 Per Occurrence and Aggregate
— liquor legal liability	Minimum \$1,000,000 Per Occurrence and Aggregate

**AUTOMOBILE LIABILITY:** Minimum \$10,000/\$20,000/\$10,000

- XX comprehensive form
- XX owned
- XX hired
- XX non-owned

**REAL & PERSONAL PROPERTY**

— comprehensive form Agent must show proof they have this coverage.

<b>EXCESS LIABILITY</b>		Per Occurrence	Aggregate
— other than umbrella	bodily injury and property damage combined	\$1,000,000	\$1,000,000

**PROFESSIONAL LIABILITY** Per Occurrence Aggregate

— \* Policy to be written on a claims made basis \$1,000,000 \$1,000,000

(3) If Professional Liability insurance is required, Contractor agrees the indemnification and hold harmless provisions of Section 12 of the Agreement shall survive the termination or expiration of the Agreement for a period of three (3) years unless terminated sooner by the applicable statute of limitations.

C. Employer's Liability. ORGANIZATION and all subcontractors shall, for the benefit of their employees, provide, carry, maintain and pay for Employer's Liability Insurance in the minimum amount of One Hundred Thousand Dollars (\$100,000.00) per employee, Five Hundred Thousand Dollars (\$500,000) per aggregate.

D. Policies. Whenever, under the provisions of this Agreement, insurance is required of the ORGANIZATION, the ORGANIZATION shall promptly provide the following:

- (1) Certificates of Insurance evidencing the required coverage;
- (2) Names and addresses of companies providing coverage;
- (3) Effective and expiration dates of policies; and
- (4) A provision in all policies affording CITY thirty (30) days written notice by a carrier of any cancellation or material change in any policy.

E. Insurance Cancellation or Modification. Should any of the required insurance policies be canceled before the expiration date, or modified or substantially modified, the issuing company shall provide thirty (30) days written notice to the CITY.

F. Waiver of Subrogation. ORGANIZATION hereby waives any and all right of subrogation against the CITY, its officers, employees and agents for each required policy. When required by the insurer, or should a policy condition not permit an insured to enter into a pre-loss agreement to waive subrogation without an endorsement, then ORGANIZATION shall notify the insurer and request the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others, or its equivalent. This Waiver of Subrogation requirement shall not apply to any policy which includes a condition to the policy not specifically prohibiting such an endorsement, or voids coverage should ORGANIZATION enter into such an agreement on a pre-loss basis.

CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement.

Table with PRODUCER (USI Insurance Services, LLC), INSURED (Junior Achievement USA), and CONTACT INFORMATION (PHONE: 303 863-6238, FAX, E-MAIL ADDRESS). Includes a table for INSURER(S) AFFORDING COVERAGE with columns for INSURER A-F and NAIC #.

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES.

Main table with columns: INSR LTR, TYPE OF INSURANCE, POLICY NUMBER, POLICY EFF, POLICY EXP, LIMITS. Contains three rows of coverage details including Commercial General Liability, Umbrella Liability, and Workers Compensation.

APPROVED By Danielle Thorpe at 9:56 pm, Nov 16, 2020

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: Junior Achievement of South Florida. The general liability policy includes an automatic Additional Insured endorsement that provides Additional Insured status to The City of Pompano Beach only when there is a written contract that requires such status, and only with regard to work performed on behalf of the named insured.

Table with CERTIFICATE HOLDER (The City of Pompano Beach) and CANCELLATION (SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE).

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**GEICO** FLORIDA AUTOMOBILE INSURANCE  
geico.com IDENTIFICATION CARD

GEICO GENERAL INSURANCE COMPANY

**Policy Number/Florida Code No. Effective Date**  
4421-05-61-04/01288 06-23-20

PERSONAL INJURY PROTECTION BENEFITS/PROPERTY DAMAGE LIABILITY  
 BODILY INJURY LIABILITY

**Named Insured:** Laurie J Sallarulo

**Year Make Model**  
2019 AUDI A7

**Vehicle ID No.**  
WAUP2AF2XKN124321

Phone Number: 1-800-841-3000

Not valid more than one year from effective date.

**APPROVED**

*D. Thorpe*  
By Danielle Thorpe at 3:17 pm, Dec 07, 2020