NEIGHBORHOOD DEVELOPMENT FUND Not-for-Profit Transmittal and Approval Form

	· · · · · · · · · · · · · · · · · · ·
Applicant/Program: Junior Achievement of Kentuckiana, Inc.	
Applicant Requested Amount: \$20,000	
Appropriation Request Amount:	
Executive Summary of Request	-
· •	
The funding will be used to pay for JA's extensive, activity-based	d curriculum materials that are used by each
volunteer.	
	,
Is this program/project a fundraiser?	☐ Yes ■ No
Is this applicant a faith based organization?	☐ Yes ■ No
Does this application include funding for sub-grantee(s)?	Yes No
2000 time approached metade fantanig for sue grantee(s).	100 110
I have reviewed the attached Neighborhood Development Fund	Application and have found it complete and
within Metro Council guidelines and request approval of fundir	1.1
organization's statement of public purpose to be furthered by th	
purpose is legitimate. I have also completed the disclosure sect	ion below, if required.
$() \land -) \land \land$	
Solution of	\$6,000 Eab 10, 2017
District #	\$6,000 Feb 10, 2017
District # Primary Sponsor Agnature	Amount Date
Primary Sponsor Disclosure	
List below any personal or business relationship you, your fami	
organization, its volunteers, its employees or members of its bo	ard of directors.
None.	
Approved by:	
Tippi orou syr	
Appropriations Committee Chairman	Date
	Duic
Final Appropriations Amount:	

Applicant/Program:			
Junior Achievement of Kentuckiana, Inc.			
Additional Disclosure and Signatures			
Additional Council Office Disclosure	ip you, your family or your legislative assistant have with this		
Council Member Signature and Amount	t		
District 1	\$\$		
District 2	\$		
District 3	\$		
District 4 Barbara Sexton-Smith Julius	ton mil \$ 500-		
District 5	\$		
District 6	\$		
District 7	\$		
District 8	\$		
District 9	\$		
District 10 Pat Mulvihill Campu	Valordie \$ 500.		
District 11	\$		
District 12	\$		
District 13 Vicki Aubrey Welch Vicki Qu	Drew 78 h 6 x 500		
District 14 Cindi Fowler Curdu G	500 s		
District 15 Marianne Butler Marianne	La Balls 500		
<u> </u>			
2 Page Effective May 2016			

Para				
Applicant/Program:				
Additional Disclosure and Signatures				
	ure ationship you, your family or your legislatives or members of its board of directors.	ve assistant have with this		
District 16	\$			
District 17 Glen Stuckel	s 500			
District 18	\$\$			
District 19	\$			
District 20	\$			
District 21	\$			
District 22	<u> </u>			
District 23	\$			
District 24	\$			
District 25	\$	·		
	\$			

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Legal Name of Applicant Organization Program Name and Request Amount Yes/No/NA Is the NDF Transmittal Sheet Signed by all Council Member(s) Appropriating Funding? Yes Is the funding proposed by Council Member(s) less than or equal to the request amount? Yes Yes Is the proposed public purpose of the program viable and well-documented? Yes Will all of the funding go to programs specific to Louisville/Jefferson County? Has Council or Staff relationship to the Agency been adequately disclosed on the cover sheet? Yes Has prior Metro Funds committed/granted been disclosed? Yes Yes Is the application properly signed and dated by authorized signatory? Is proof of Tax Exempt status of 501(c) 3, 4, 6, 19, 1120-H included? Yes If Metro funding is for a separate taxing district is the funding appropriated for a program outside the N/A legal responsibility of that taxing district? Is the entity in good standing with: ▶ Kentucky Secretary of State? ▶ Louisville Metro Revenue Commission? Yes ▶ Louisville Metro Government? ▶ Internal Revenue Service? ▶ Louisville Metro Human Relations Commission? Is the current Fiscal Year Budget included? Yes Yes Is the entity's board member list (with term length/term limits) included? Is recommended funding less than 33% of total agency operating budget? Yes Yes Does the application budget reflect only the revenue and expenses of the project/program? Is the cost estimate(s) from proposed vendor (if request is for capital expense) included? N/A Yes Is the most recent annual audit (if required by organization) included? N/A Is a copy of Signed Lease (if rent costs are requested) included? Is the Supplemental Questionnaire for churches/religious organizations (if requesting organization is N/A faith-based) included? Are the Articles of Incorporation of the Agency included? Yes Is the IRS Form W-9 included? Yes Yes Is the IRS Form 990 included? Are the evaluation forms (if program participants are given evaluation forms) included? N/A Affirmative Action/Equal Employment Opportunity plan and/or policy statement included (if N/A required to do so)? Has the Agency agreed to participate in the BBB Charity review program? If so, has the applicant Yes met the BBB Charity Review Standards?

Date: Feb 10, 2017

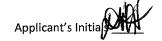
Prepared by: Leslie Curneal, Legislative Assistant

			CANT INFORMATION	
Legal Name of Applic		lunior Achie	evement of Kentuckian	a Inc
as listed on: http://www.		ecoras		a, mc.
Main Office Street &		1401 W. Muhan	nmad Ali Blvd.	
Website: www.jaky.				
Applicant Contact:	Debra H. Hoffe	r	Title:	President
hone:	502-569-9210		Email:	dhoffer@jaky.org
inancial Contact:	Debra H. Hoffe	r	Title:	President
hone:	502-569-9210		Email:	dhoffer@jaky.org
organization's Repre	sentative who at	tended NDF Train	ing:	
GEO	GRAPHICAL AREA	(S) WHERE PROGI	RAM ACTIVITIES ARE (\	WILL BE) PROVIDED
rogram Facility Loca	tion(s): Jeffers	on County Public	Schools	
ouncil District(s):	All		Zip Code(s):	All of Jefferson County
	The state of the s	PROGRAM REQUI	ST & FINANCIAL INFO	RMATION
ROGRAM/PROJECT	NAME:			
otal Request: (\$)	20,000	Total Metro Av	vard (this program) in	previous year: (\$) 9,500
Programmir	ng/services/events	s for direct benefi	of agency's total opera t to community or qual furnishing, building, et	ified individuals
IRS Exempt Status De			Signed lease if rent o	osts are being requested
Current year projected budget		■ IRS Form W9	sous are semigrequested	
Current financial state	ement		Evaluation forms if us	sed in the proposed program
Most recent IRS Form	990 or 1120-H		Annual audit (if requi	
Articles of Incorporati	ion (current & signed) Faith Based Organization Certification Form, if app			
Cost estimates from p capital expense	roposed vendor if r	equest is for		
overnment for this o	r any other progra	am or expense, ind	luding funds received	eived from Louisville Metro through Metro Federal Grants, ent Funds). Attach additional
ource: N	I/A	[:	Amount: (\$)	
urce: N	I/A		Amount: (\$)	
urce: N	I/A		Amount: (\$)	
as the applicant cont as the applicant met		arity Review for pa	articipation? 🔳 Yes	No

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SECTION 3 – AGENCY DETAILS Describe Agency's Vision, Mission and Services: Incorporated in 1949, Junior Achievement of Kentuckiana's (JAKY's) age-appropriate classroom and experiential programs teach financial literacy, work readiness and entrepreneurship. JAKY has made the commitment to serve all students in the region five times in their school careers. JAKY uses classroom lessons taught by volunteers and teachers, as well as hands-on experiences in Sam Swope JA BizTown®, in Chase JA Finance Park® and in business job shadowing experiences to help young people understand the economics of life. JAKY serves 62,000 students per year. Substantial progress has been made toward the goal of serving all students in the region with five JA programs during their K-12 school careers. JAKY is currently reaching: 99% of elementary students in our target counties with a JA classroom program; 87% of regional 5th grade students with JA BizTown®; 85% of 7th or 8th grade students with JA Finance Park®; 51% of high school students with a JA classroom program or JA Job Shadow®. The fifth program, JA Inspire, a mega-career fair for 8th grade students, will debut this fall at the Kentucky Exposition Center for 3,000 students. JAKY's largest customer, Jefferson County Public Schools, with an extremely high percentage of low to moderate income students, has formally integrated JA programs into the official curriculum, as have other area school systems. JAKY delivers an average of 10.45 instructional contact hours per student per year, compared to the national JA average of 7.68 hours. JAKY has consistently received the Junior Achievement USA Five Star Award, which recognizes the highest level financial solvency, program quality practices, program impact and quality management, for twelve consecutive years.



SECTION 4 - BOARD OF DIRECTORS AND PAID STAFF

Board Member	Term End Date	
Orlando Allen	6/30/2017	
Julayne Amstutz	6/30/2017	
John Anderson	6/30/2017	
J. Duffy Baker	6/30/2019	
Sheryl Ball	6/30/2019	
Lisa Bajorinas	6/30/2019	
Jon Baughman	6/30/2018	
Martin Bell	6/30/2017	
Joe Bisig	6/30/2019	
Christopher Brooker	6/30/2018	
Marc Charnas	6/30/2019	
Jeremy Coker	6/30/2018	
Nancy Davis	6/30/2017	
Jenny Drake	6/30/2018	
Leah Eggers	6/30/2017	
Patric Farnan	6/30/2019	
Paul Fultz	6/30/2018	

Describe the Board term limit policy:

Section 1.1. Recommendations for board membership shall be filed with the Board Development Committee for consideration and action by the Board Development Committee. New directors will be elected to a one (1) year term. At the expiration of the initial one (1) year term, the directors so elected may be elected to an additional three (3) year term. Thereafter, directors may be re-elected at an Annual Meeting for a term of three (3) years. Any director whose term expires may accept a re-nomination or terminate further participation on the board.

Three Highest Paid Staff Names	Annual Salary		
Debra H. Hoffer	175,800		
Deborah L. Dalton	102,600		
Sharon E. Peacock	85,400		

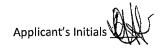
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SECTION 5 - PROGRAM/PROJECT NARRATIVE

A: Describe the program/project start and end dates, a description of the program/project and applicable data with regards to specific client population the program will address (attach related flyers, planning minutes, designs, event permits, proposals for services/goods, etc.):

Of the total of 62,200 students in the region reached during the 2015-16 school year, JA served 38,586 Jefferson County Public Schools (JCPS) students from 164 Schools with 388,000 Instructional Contact Hours. Students were served with JA's high quality programs in EVERY Metro Council District. JA respectfully request \$20,000 to support its financial literacy, career readiness and entrepreneurship programs during the 2016-17 school year, during which we are projecting will serve nearly 40,000 students from Jefferson County Public Schools. JA's unique classroom delivery system pairs community volunteers with classrooms. Through a portfolio of age-appropriate curriculum, JA programs equip youth with the knowledge and skills necessary to compete in an ever complex and changing global economy. JA's programs focus on teaching youth skills that will be required of them in the 21st century, including critical thinking, communication, problem solving, collaboration and teamwork. JA provides volunteer training, materials and the support necessary to bolster the chances for student success. JA's programs that teach life skills provide the most comprehensive application of economics core content available in the United States. This funding will help support programs for a portion of the total JCPS students being served, 6,250 students who will be taught 31,250 instructional hours by 250 volunteers.

B: Describe specifically how the funding will be spent including identification of funding to sub grantee(s):
The funding will be used to pay for JA's extensive, activity-based curriculum materials that are used by each
volunteer. There will be no subgrantee(s).



: If this request is a fundraiser, please detail how the proceeds will be spent:
 For Expenditure Reimbursement Only — The grant award period begins with the Metro Council approval date and ends on June 30 of Metro fiscal year in which the grant is approved. If any part of this funding request is for ands to be spent before the grant award period, identify the applicable circumstances: The funding request is a reimbursement of the following expenditures that will probably be incurred after the application date, but prior to the execution of the grant agreement: ✓ If selecting this option, the invoice, receipt and payment documentation should not be available as of the date of this application. The Grantee will be required to submit financial reporting in accordance with the reporting schedule provided in the grant agreement.
Reimbursements should not be made before application date unless an emergency can be demonstrated by the primary council sponsor. The funding request is a reimbursement of the following expenditures (attach invoices or proof of payment): ✓ Attach a copy of invoices and/or receipts to provide proof of purchase of activities associated with the work plan identified in this application. ✓ Attach a copy of cancelled checks to provide proof of payment of the invoices or receipts associated with the work plan identified in this application.

SECTION 6 - PROGRAM/PROJECT BUDGET SUMMARY

THE PROGRAM/PROJECT BUDGET SHOULD REALISTICALLY ESTIMATE WHAT AMOUNT IS NEEDED FROM METRO GOVERNMENT AND WHAT IS EXPECTED FROM OTHER SOURCES.

	Column 1	Column 2	Column (1+2)=3	
Program/Project Expenses	Proposed Metro Funds	Non- Metro Funds	Total Funds	
A: Personnel Costs Including Benefits		94500	94500	
B: Rent/Utilities				
C: Office Supplies		5800	5800	
D: Telephone				
E: In-town Travel				
F: Client Assistance (See Detailed List on Page 8)				
G: Professional Service Contracts		4950	4950	
H: Program Materials	20000	2500	22500	
I: Community Events & Festivals (See Detailed List on Page 8)				
J: Machinery & Equipment				
K: Capital Project				
L: Other Expenses (See Detailed List on Page 8)				
*TOTAL PROGRAM/PROJECT FUNDS	20000	107750	127750	
% of Program Budget	15.6 %	84.4 %	100%	

List funding sources for total program/project costs in Column 2, Non-Metro Funds:

Other State, Federal or Local Government	0	
United Way	0	
Private Contributions (do not include individual donor names)	107750	
Fees Collected from Program Participants	0	
Other (please specify)	0	
Total Revenue for Columns 2 Expenses **	107750	

^{*}Total of Column 1 MUST match "Total Request on Page 1, Section 2"

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^{**}Must equal or exceed total in column 2.

Detail for Client Assistance, Community Events & Festivals or Other Expenses shown on Page 7	Column 1	Column 2	Column (1 + 2)=3
(circle one and use multiple sheets if necessary)	Proposed Metro Funds	Non- Metro Funds	Total Funds
, and the second		•	
			•
	-		
-			
			,
·			
Total			

Detail of In-Kind Contributions for this PROGRAM only: Includes Volunteers, Space, Utilities, etc. (Include anything not bought with cash revenues of the agency).

	Value of Contribution	Method of Valuation
Volunteers	26250	250 @ \$21/hr X 5 hrs
Classroom Space	112500	250 @ \$90/hr X 5
Transfer - Charles -	138750	
Total Value of In-Kind (to match Program Budget Line Item. Volunteer Contribution & Other In Kind)		
TED INDIVIDUALLY, BUT GROUPED TOGETHE RSON PER WEEK	MONTONE LINE AS A TOTAL NO.	ING HOW IMAINT HOURS FER
ency Fiscal Year Start Date: $_{ m July~1}$	ase or decrease in your budget fro	om the current fiscal year to tl
ency Fiscal Year Start Date: July 1 es your Agency anticipate a significant increa lget projected for next fiscal year? NO	ase or decrease in your budget fro	om the current fiscal year to th
ency Fiscal Year Start Date: July 1 es your Agency anticipate a significant increal get projected for next fiscal year? NO	ase or decrease in your budget fro	om the current fiscal year to th
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ency Fiscal Year Start Date: July 1 es your Agency anticipate a significant increadget projected for next fiscal year? NO	ase or decrease in your budget fro	om the current fiscal year to t
ency Fiscal Year Start Date: $ m \ _{July \ 1}$	ase or decrease in your budget fro	om the current fiscal year to t

SECTION 7 – CERTIFICATIONS & ASSURANCES

By signing Section 7 of the Grant Application, the authorized official signing for the applicant organization certifies and assures to the best of his or her knowledge and/or belief the following Assurances and Certifications. If there is any reason why one or more of the assurances or certifications listed cannot be certified or assured, please explain in writing and attach to this application.

Standard Assurances

- Applicant understands this application and its attachments as well as any resulting grant agreement, reports and proof of expenditure is subject to Kentucky's open records law.
- Applicant will establish safeguards to prohibit employees or any person that receives compensation from awarded funds from using their position for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
- 3. Applicant and any sub grantee will give Louisville Metro Government access to and the right to examine all paper or electronic records related to the awarded grant for up to five years of the grant agreement date.
- 4. Applicant assures compliance with the grant requirements and will monitor the performance of any third party (sub-grantee).
- 5. The Agency is in good standing with the Kentucky Secretary of State, Louisville Metro Government, the Jefferson County Revenue Commission, the Internal Revenue Service, and the Louisville Metro Human Relations Commission.
- Applicant understands failure to provide the services, programs, or projects included in the agreement will result in funds being withheld or requested to be returned if previously disbursed.
- 7. Applicant understands they must return to Louisville Metro any unexpended funds by July 31 following the Metro Louisville's fiscal year end
- 8. Applicant understands they must provide proof of all expenditures (canceled checks, receipts, paid invoices). The Applicant understands the failure to provide proof of expenditures as required in the grant agreement could result in funding being withheld or request to be returned if previously disbursed.
- 9. Applicant understands if this application is approved, the grant agreement will identify an award period that begins with the Metro Council approval date, and will end with June 30 of the fiscal year in which the grant is approved. Expenditures associated with this award expected to occur prior to the award period (approval date) must be disclosed in this application in order to be considered compliant with the grant agreement.
- 10. Applicant understands if we choose to incur expenditures prior to the approval of the application by the Metro Council, there is no guarantee that funding will be reimbursed, as the Council may choose not to award the application.
- 11. Applicant understands if the grant agreement is not returned to Louisville Metro within 90 days of its mailing to the applicant, the approval is automatically revoked and the funds will not be disbursed to our organization.

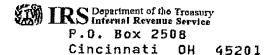
Standard Certifications

- The Agency certifies it will not use Louisville Metro Government funds for any religious, political or fraternal Activities.
- 2. The Agency has a written Affirmative Action/Equal Opportunity Policy.
- 3. The Agency does not discriminate in employment or in provision of any service/program/activity/event based on age, color, disabled status, national origin, race, religion, sex, gender identity or sexual orientation, or Vietnam era veteran status.
- 4. The Agency certifies it will not require clients, recipients, or beneficiaries to participate in religious, political, fraternal or like activities in order to receive services/benefits provided with Louisville Metro Government funds.
- 5. The Agency understands the Americans with Disabilities Act (ADA) and makes reasonable accommodations.

Relationship Disclosure: List below any relationship you or any member of your Board of Directors or employees has with any Councilperson, Councilperson's family, Councilperson's staff or any Louisville Metro Government employee.

SECTION 8 – CERTIFICATIONS & ASSURANCES I certify under the penalty of law the information in this application (including, without limitation, "Certifications and Assurances") is accurate to the best of my knowledge. I am aware my organization will not be eligible for funding if investigation at any time shows falsification. If falsification is shown after funding has been approved, any allocations already received and expended are subject to be repaid. I further certify that I am legally authorized to sign this application for the applying organization and have initialed each page of the application. Signature of Legal Signatory: Date: 18 – 12 – 16 Legal Signatory: (please print): DEBRA H. HOFFER Title: PRESIDENT Phone: 502–569–9210 Extension: Email: dhoffer@ Jaky.org

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In reply refer to: 0248230137 Sep. 08, 2014 LTR 4167C 0 000000 00

00021035 BODC: TE

JUNIOR ACHIEVEMENT USA % TIMOTHY ARMIJO 1 EDUCATION WAY COLORADO SPGS CO 80906

22392

Employer Identification Number:
Group Exemption Number: 1116
Person to Contact: Ms. Edwards
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Aug. 27, 2014, request for information about your tax-exempt status.

Our records indicate that you were issued a determination letter in January 1994, and that you are currently exempt under section 501(c)(3) of the Internal Revenue Code.

Based on the information supplied, we recognized the subordinates named on the list you submitted as exempt from Federal income tax under section 501(c)(3) of the Code.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106 and 2522 of the Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

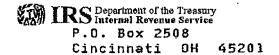
Sincerely yours,

Susan M. O'Neill, Department Mgr. Accounts Management Operations

Susan M. d'Neill

JUNIOR ACHIEVEMENT OF KENTUCKIANA

FEDERAL ID#



In reply refer to: 0248230137 Sep 08 2014 LTR 4168C 0 000000 00

00021101 BODC: TE

JUNIOR ACHIEVEMENT USA % TIMOTHY ARMIJO 1 EDUCATION WAY COLORADO SPGS CO 80906

:22391

Employer Identification Number:
Person to Contact: Ms. Edwards
Toll Free Telephone Number: 1-877-829-5500

Dear Taxpayer:

This is in response to your Aug. 27, 2014, request for information regarding your tax-exempt status.

Our records indicate that you were recognized as exempt under section 501(c)(3) of the Internal Revenue Code in a determination letter issued in January 1994.

Our records also indicate that you are not a private foundation within the meaning of section 509(a) of the Code because you are described in section(s) 509(a)(1) and 170(b)(1)(A)(vi).

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible for Federal estate and gift tax purposes if they meet the applicable provisions of sections 2055, 2106, and 2522 of the Code.

Please refer to our website www.irs.gov/eo for information regarding filing requirements. Specifically, section 6033(j) of the Code provides that failure to file an annual information return for three consecutive years results in revocation of tax-exempt status as of the filing due date of the third return for organizations required to file. We will publish a list of organizations whose tax-exempt status was revoked under section 6033(j) of the Code on our website beginning in early 2011.

JUNIOR ACHIEVEMENT OF KENTUCKIANA

FEDERAL ID#

JUNIOR ACHIEVEMENT USA % TIMOTHY ARMIJO 1 EDUCATION WAY COLORADO SPGS CO 80906

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely yours,

Susan M. d'Neill

Susan M. O'Neill, Department Mgr.

Accounts Management Operations

JUNIOR ACHIEVEMENT OF KENTUCKIANA

FEDERAL ID#

JUNIOR ACHIEVEMENT OF KENTUCKIANA 2016-17 OPERATING BUDGET

10/12/16 2:32 PM		BUDGET	
		2016-17	
INCOME			
Jefferson County	\$	556,200	
District	\$	130,000	
JA City	\$	480,800	-
Program Sponsors/Individual	\$	151,500	
Endowment Income	\$	120,300	
Special Events	\$	241,200	
Board Dues	\$	28,500	_
Other	\$	2,500	
TOTAL INCOME	\$	1,711,000	
EXPENSES			
Salaries	\$	842,020	
Taxes/Benefits	\$	278,050	
Professional Fees	\$	46,000	
Staff Training & Travel	\$	40,470	
Programs	\$	341,790	
Facility	\$	76,600	
Fund-Raising	\$	2,000	
Office	\$	44,200	
Subscriptions & Dues	\$	4,500	
General Insurance	\$	13,600	
Public Relations	\$	3,500	
Interest Expense	\$	••	
Board Expense	\$	4,500	
Miscellaneous	. \$	2,500	
TOTAL EXPENSES	\$	1,699,730	
NA DIANCE II	•	11 270	
VARIANCE +/-	\$	11,270	

Junior Achievement of Kentuckiana Income Statement For the Two Months Ending August 31, 2018

	Current Actual	Current Budgel	Year to Date Actual	Year to Date Budget	Annual Budget
Operating -					
Total Revenues	162,319	198,450	351,158	363,650	\$1,711,000
Total Expenses	132,747	134,910	238,999	268,390	\$1,699,724
Net - Operating	29,571	63,540	112,159	95,260	\$11,276
Experiential Learning Project Experiential Learning Campaign Revenue Experiential Learning Campaign Expense JCPS Allocations	1 0 0	0 0 0	2 0 0	0 0 0 0	\$0 \$0 \$0 \$0
Net Income (Loss) - Experiential Learning	1	0	2	0	\$0
Restricted	*****************	:============		=======================================	
Restricted Income Restricted Expense	0 0	0	0	0 0	\$0 \$0
Net Restricted - Accounts	0	0	0	0	\$0
Capital - Foundation Minor Equipment Expense	o	0	0	0	\$0
Total Capital	0 0	0 0	0	0	\$0 \$0
Achievers' Contributions - Achievers Interest Income - Achievers Other Income - Achievers	0 0	0 0 0	0 0 0	0 0 0 0	\$0 \$0 \$0 \$0
Student Conferences Scholarships	0	0	0	0	\$0 \$0
Net - Achievers' Account	0	0	0	0	\$0
L B & E Contributions - Building Release from Restriction				######################################	
Depreciation Expense Building Lease Expense Moving Expenses	0	0	0	0	\$0
Net-LB&E	0	0	0	0	\$0
Board Restricted		.222222222	************	:======================================	=======
Unrealized Galn/(Loss) Realized Galn/(Loss) Investment Fees Release from Restriction	6,981 (11,830) (1,373)	0 0 0	64,945 (11,830) (2,716)	0 0 0	\$0 \$0 \$0
Net income - Board Restricted	(7,222)	0	50,398	0	\$0
Bad Debi Gain (Loss) on Disposal of Fixed Assets	(4,559) 0	0	(4,559) 0	0	\$0 \$0
Change in Net Assets	17,791	63,540	157,989	95,260 \$	11,276

Junior Achievement of Kentucklana Operating Income Statement August 31, 2016

	Current Actual		Year to Date Actual	Year to Date Budget	Annual Budget
Income					
Jefferson County	84,844	89,500	98,290	119,800	536,200
Districts	3,068	46,0 00	8,161	52,100	130,000
Program Sponsorships	34,000	40,500	86,000	80,000	171,500
JA City	27,594	10,300	111,372	86,500	480,800
Interest Income	3	0	5	0	0
Special Events	9,771	9,150	12,133	20,850	241,200
Other Income	246	0	246	0	2,500
Board Fees	500	3,000	30,000	4,400	28,500
Endowment Income	2,295	0	4,951	0	120,300
Total Income	162,319	198,450	351,158	363,650	1,711,000
Expense					
Personnel	87,934	88,000	176,589	176,000	1,120,071
Professional Fees	5,136	3,000	6,207	6,000	46,000
Staff Training & Travel	8,147	3,480	10,255	14,480	40,468
Programs	18,301	29,450	21,392	38,800	341,785
Facility	7,635	6,300	14,704	12,600	76,600
Fund Raising	268	0	268	0	2,000
Office	4,312	3,680	7,208	7,360	44,200
Subscriptions & Dues	250	300	1,270	850	4,500
General Insurance	389	200	389	11,500	13,600
Public Relations	188	200	363	400	3,500
Board Expense	0	200	83	200	4,500
Miscellaneous Exp.	188	100	271	200	2,500
Total Expense	132,747	134,910	238,999	268,390	1,699,724
Net Income	29,571	63,540	112,159	95,260	11,276

No CPA provides any assurance of these financial statements

JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC. BALANCE SHEET August 31, 2016

	Current Month	June 30, 2016 Audited	Prior Year Current Month
ASSETS			
Current Assets			
Cash - Achievers	\$0.00	\$1,275.01	\$1,275.01
Cash - Stock Yard Bank Investment	\$2,195,516.30	\$2,190,167.07	\$2,270,163.55
Cash - Chase	\$42,645.09	\$84,517.68	\$33,951.40
Cash - Stock Yards Bank	\$2,265.63	\$2,265.51	\$9,888.21
MMA - PNC Capital Campaign	\$5,080.30	\$5,079.01	\$5,073.45
MMA - Chase Capital Campaign	\$13,118.40	\$13,117.74	\$13,114.50
MMA - Your Community Bank	\$0.00	\$0.00	\$0.00
MMA - Republic Bank	\$11,611.50	\$37,029.04	\$29,985.08
Pledges · F/Y 2014	. \$0.00	\$0.00	\$1,954.00
Pledges - F/Y 2015	\$784.46	\$2,391.00	\$76,530.46
Pledges • F/Y 2016	\$22,266.02	\$109,318,06	\$213,353.12
Pledges - F/Y 2017	\$203,978.00	(\$0.00)	\$0.00
Allowance for Uncollectibles	(\$786.80)	(\$3,126,80)	(\$5,600.00)
Total Current Assets	2,496,478.90	2,442,033.32	2,649,688.78
Machinery & Equipment	\$7,010.00	\$7,010.00	\$7,010.00
Hall of Fame Wall	\$0.00	\$0.00	\$27,940.00
Exchange City Enhancements	\$27,100.41	\$27,100.41	\$25,528.53
Finance Perk Enhancements	\$4,999.00	\$4,999.00	\$1,216.00
IT Strategy Implementation	\$274,953.27	\$274,953.27	\$255,365.51
Harnah Board Room Enhancements	\$9,508.81	\$9,508.81	\$9,508.81
Building/Architect/Construct	\$2,241,473.64	\$2,238,503.64	\$2,233,331.27
Design & Project Management	\$160,908.88	\$160,908.88	\$160,908.88
Equipment	\$62,100.81	\$62,100.81	\$54,023.19
Furnishings	\$262,996.19	\$262,996.19	\$262,584.57
Accumulated Depreciation	(\$1,286,422.59)	(\$1,286,422.59)	(\$1,160,372.90)
Total Property and Equipment	1,764,628.42	1,761,658.42	1,877,043.86
Other Assets			
Prepaid Expenses	\$6,965.76	\$6,965.76	\$781.00
Deposit - Utilities	\$5,000,00	\$5,000.00	\$5,000.00
Investments - PNC Harrison Co.	\$191,824.46	\$191,824 <i>.</i> 46	\$217,529.37
Investments in Pooled Income	\$15,741.89	\$15,741.89	\$15,744.61
Investments - Comm. Fdn.	\$8,355.56	\$6,355.55	\$6,682.08
Fund Accounting Adjustment Due to/from JA Capital	\$89,250.00	(\$0,00)	\$37,050.00
•	\$0.00	\$0.00	\$0.00
Total Other Assets	315,137.68	225,887.66	282,787.06
Total Assets	4,576,244.98	4,429,579.40	4,809,519.70
LIABILITIES Current Liabilities			
Accounts Payable - Operating	***	AAA	***
Accounts Payable - Operating Account Expenses	\$11,463.74	\$22,335.64	\$11,630.07
Temp. Restricted - Jefferson County	\$56,007.61	\$56,469.40	\$13,323.39
Temp. Restricted - Jenerson County Temp. Restricted - Board Fees	\$0.00	\$0.00	\$0.00
Temp. Restricted - Bowling	\$0.00	\$0.00	\$0.00
Temp. Restricted - JA City Sponsor	\$0.00	\$0.00	\$0.00
Temp. Restricted - Major Gift	\$0.00	\$0.00	\$0.00
Tomp Portfoled Panel Mamber	\$0.00	\$0.00	\$3,159.35
Temp. Restricted - Board Member Oue to/from JA Operating	\$0.00 \$0.00	\$0.00	\$0.00
•	•	\$0.00	\$0.00
Total Current Liabilities	67,471.35	78,805.04	28,112.81
NET ASSETS			
Net Assets Urrestricted	\$1,761,878.36	\$1,988,118.13	\$2,090,094.13
Net Assets - Board Restricted	\$2,487,470.00	\$2,487,470.00	\$2,392,630,00
Temporary Restricted Net Assets	\$101,428.00	\$101,426.00	\$92,090.00
Net Income	157,999.27	(224,239.77)	206,392.76
Total Net Assets	4,508,773.63	4,350,774.38	4,781,406.89
Total Liabilities & Net Assets	4,578,244.98	4,429,579.40	
	######################################	CDEEGE==================================	.,000,010,10

Form **990**

Return of Organization Exempt From Income Tax

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

2014
Open to Public Inspection

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990 and its instructions is at www.irs.gov/form990

A For the 2014 calendar year, or tax year beginning JUL 1, 2014 2015 and ending JŪN 30, Check if applicable: C Name of organization D Employer identification number]Address]change JUNIOR ACHIEVEMENT OF KENTUCKIANA, Name change Doing business as]Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 1401 W. MUHAMMAD ALI BLVD. (502)561-5437 City or town, state or province, country, and ZIP or foreign postal code 2,793,499. G Gross receipts \$ Amended LOUISVILLE, KY 40203 H(a) Is this a group return Applica-tion F Name and address of principal officer: DEBRA HOFFER for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status: X 501(c)(3) __ 501(c) (If "No," attach a list. (see instructions)) ◀ (insert no.) 4947(a)(1) or J Website: ► WWW.JAKY.ORG H(c) Group exemption number K Form of organization: X Corporation Trust Association Other > L Year of formation: 1949 M State of legal domicile: KY Part I Summary Briefly describe the organization's mission or most significant activities: TO INSPIRE AND PREPARE YOUNG Activities & Governance PEOPLE TO SUCCEED IN A GLOBAL ECONOMY. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 79 Number of independent voting members of the governing body (Part VI, line 1b) 79 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 34 5 Total number of volunteers (estimate if necessary) 784 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 1,887,599. 1,648,193 Program service revenue (Part VIII, line 2g) 230,075. 243,336. 101,188. <148,706. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 77,630 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <190,534 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,765,364 2,083,417. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) Ō. Ō. 991,569. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,007,360. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 816,254. 889,032. 1,807,823. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,896,392. 187,025. 19 Revenue less expenses. Subtract line 18 from line 12 <42,459.Beginning of Current Year **End of Year** 4,471,488. 4,678,032. 103,018. 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 76,039 Net assets or fund balances. Subtract line 21 from line 20 395,449. 4,575,014. Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign DEBRA HOFFER, PRESIDENT Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature Check CHRISTINE N KOENIG Paid self-employe Preparer Firm's name DEMING MALONE LIVESAY & OSTROFF PSC Firm's EIN Use Only Firm's address > 9300 SHELBYVILLE ROAD SUITE 1100 LOUISVILLE, KY 40222-5187 Phone no. (502)426-9660May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

Form	990 (2014) JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC. Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: JUNIOR ACHIEVEMENT OF KENTUCKIANA'S MISSION IS TO INSPIRE AND PREPARE
	YOUNG PEOPLE TO SUCCEED IN A GLOBAL ECONOMY. THE ORGANIZATION IS THE
	REGION'S LEADING PROVIDER OF LIFE-CHANGING ECONOMICS PROGRAMS FOR
	STUDENTS.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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 \$ 1,416,151. including grants of \$) (Revenue \$ 248,160.)
	JUNIOR ACHIEVEMENT OF KENTUCKIANA'S PROGRAMS INCLUDE EDUCATING
	ELEMENTARY, MIDDLE AND HIGH SCHOOL STUDENTS IN THE AREAS OF FREE ENTERPRISE, BUSINESS ECONOMICS AND WORKPLACE PREPARATION. THESE
	ENTERPRISE, BUSINESS ECONOMICS AND WORKPLACE PREPARATION. THESE PROGRAMS ARE DEDICATED TO GIVING YOUNG PEOPLE THE KNOWLEDGE AND SKILLS
	THEY NEED TO OWN THEIR ECONOMIC SUCCESS, PLAN FOR THEIR FUTURE AND MAKE
	SMART ACADEMIC AND ECONOMIC CHOICES. JUNIOR ACHIEVEMENT EMPOWERS
	STUDENTS TO MAKE A CONNECTION BETWEEN WHAT THEY LEARN IN SCHOOL AND HOW
	IT CAN BE APPLIED IN THE REAL WORLD. THIS ENHANCES THE RELEVANCE OF
	THEIR CLASSROOM LEARNING AND INCREASES THEIR UNDERSTANDING OF THE VALUE
	OF STAYING IN SCHOOL.
	OF BIATING IN BEROOD.
4b	(Code:) (Expenses \$ including grants of \$
	(code:
	(Co. t.) (Furning to including grants of \$) (Revenue \$
4c	(Code:) (Expenses \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 1,416,151.

Form 990 (2014) JUNIOR ACHIE Part IV Checklist of Required Schedules

			Ye	s No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes " complete Schedule 4			
2	If "Yes," complete Schedule A	1	X	-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	2	X	
•	public office? If "Yes " complete Schedule C. Part I	1		,,
4	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effection i	3	-	<u> </u>
•	during the tay year? If "Yes " complete Schedule C. Part II	1		,,
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	╀	<u> </u>
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III			-
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		X
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6	ļ	X
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	l _		3,7
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	7	-	<u>X</u>
	Schedule D, Part III		1	
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	8	-	X
_	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	l	1	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	9	 	X
	endowments or quasi-endowments? If "Yes " complete Schedulo D. Port V		,,	
11	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X	10	X	
	as applicable.			
а				
_	Part VI		,,	
b		11a	X	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	l		7.7
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	11b	ļ	X
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	١		1,7
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	11c		X
	Part X, line 16? If "Yes," complete Schedule D, Part IX		Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d	Δ.	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		<u> </u>
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	- 21	
	Schedule D, Parts XI and XII	40-	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	23	
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	406		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	i+d		-47
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
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	140		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
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? If "Yes," complete Schedule F, Parts III and IV	16		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? /f "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	bid the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	-:-		
	complete Schedule G, Part III	19	1	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form 9	200	2014)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
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? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			37
	of any of these persons? If "Yes," complete Schedule L, Part III	27		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):			X
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00		Х
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29	Х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u>~</u>	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		Х
	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	24		Х
	If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		Х
	Schedule N, Part II	32		
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? If "Yes," complete Schedule R, Part I	33		Х
0.4	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	-00		
34		34		Х
	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a		
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
20	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	555		
36		36		X
	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30		
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
38	Note. All Form 990 filers are required to complete Schedule O	38	х	
	Note: All Form 990 files are required to complete ochedule o	,		

Form **990** (2014)

INC.

Form 990 (2014)

JUNIOR ACHIEVEMENT OF KENTUCKIANA,

Part V

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in the December of the contains and the contains a response or note to any line in the December of the contains and the contains a response or note to any line in the December of the contains and the contains and the contains a response or note to any line in the December of the contains and the conta

	Check if Schedule O contains a response or note to any line in this Part V				<u>.</u>	
					Yes	No
1a	The company of the co	1a)		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		(4		
C	by the state of th			1000		
٥-	(gambling) winnings to prize winners?	1 . 1		1c	X	
za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		2.4			
h	filed for the calendar year ending with or within the year covered by this return	2a	3 4	-	37	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	1.0 / 2.0
32	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction					Ţ
	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	_		3a	ļ	X
	At any time during the calendar year, did the organization have an interest in, or a signature or other			3b		
	financial account in a foreign country (such as a bank account, securities account, or other financial			ا .		Х
b	If "Yes," enter the name of the foreign country:	accoun	91	4a	300000	
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccount	e (EBAD)			
5a				5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	action?	••••••	5b	<u> </u>	X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne orga	nization solicit	├──		-
	any contributions that were not tax deductible as charitable contributions?	-		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ions or	gifts			
	were not tax deductible?		•	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices pr	ovided to the payor?	7a	X	
b				7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
	to file Form 8282?	·············		7c		<u> X</u>
	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		<u> X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contribution or approximation received a contribution of purificial visit of the premiums.			7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file For If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7g		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained		a Form 1098-07	7h		Salaya ja da w
•	appropriate propriation have evered by since by U.S	-				
9	Sponsoring organization have excess business notdings at any time during the year? Sponsoring organizations maintaining donor advised funds.		••••••	8		203849-00-
	Did the engaging organization make any toyoble distributions under coation 40662			9a	0.99983	
	Did the energy organization media distributions advantage of the energy design of the energy			9b		
10	Section 501(c)(7) organizations. Enter	•••••				34/200
а		10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
1	Section 501(c)(12) organizations. Enter:			1	- 1	
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
_	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?		12a		
	- ·	12b		1		
	Section 501(c)(29) qualified nonprofit health insurance issuers.					
	Is the organization licensed to issue qualified health plans in more than one state?			13a	eren and a	
	Note. See the instructions for additional information the organization must report on Schedule O.					
	Enter the amount of reserves the organization is required to maintain by the states in which the	401				
C	organization is licensed to issue qualified health plans Enter the amount of reserves on hand	13b			1	
	Did the organization receive any payments for indoor tanning services during the tax year?	13c		145		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule			14a 14b	\dashv	
	25 G. S. M. 25 to report a rose payments: If the provide an expandition in confedure	<u> </u>	<u> </u>		990 (2	2014)

Page 6

X

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

	Check if Schedule O contains a response or note to any line in this Part VI					X							
Sec	tion A. Governing Body and Management												
					Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		79									
	If there are material differences in voting rights among members of the governing body, or if the governing												
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.												
b	b Enter the number of voting members included in line 1a, above, who are independent												
2													
_	officer, director, trustee, or key employee?												
3	Did the organization delegate control over management duties customarily performed by or under the												
·	of officers, directors, or trustees, or key employees to a management company or other person?												
4													
	5 Did the organization become aware during the year of a significant diversion of the organization's assets?												
6													
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a												
<i>,</i> u	more members of the governing body?			7a		X							
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders. or			T							
D	persons other than the governing body?			7b	.	X							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:										
_	The governing body?			8a	Х	10000000							
b	Each committee with authority to act on behalf of the governing body?			.		1							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re-				1	1							
9				9		X							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F			<u> </u>									
000	tion B, I diseas (mis decitor B regardets information about persons are required by				Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?			10		X							
	If "Yes," did the organization have written policies and procedures governing the activities of such or				+-	T							
U	and branches to ensure their operations are consistent with the organization's exempt purposes?	p.co.	o, aa.oo,	10	,								
110	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly befo	re filing the form?		77	+							
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	.,			-								
12a	The state of the s			12	X	ad arthrop							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			121		1							
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y			·	1	+							
C	in Schedule O how this was done			120	X								
40	Did the organization have a written whistleblower policy?					+							
13	Did the organization have a written document retention and destruction policy?					+-							
14	Did the process for determining compensation of the following persons include a review and approve					2 0 3 4							
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		шерениен										
_				15	X	98 P. W. C. C.							
	The organization's CEO, Executive Director, or top management official					X							
b	Other officers or key employees of the organization			. 151	•	<u></u>							
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	mont	iith a		1	1							
ioa				16		x							
	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the organization of the entity of the organization of the entity of the		articipation	. 16:	a	12.7							
b						1							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the control of			461		8-17139-6							
~	exempt status with respect to such arrangements?			16	<u>'</u>								
	tion C. Disclosure												
17	List the states with which a copy of this Form 990 is required to be filled KY	T /C+	ion E01(c)(0) c == !	/\ a\ (a)!!!	able .								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	i (Sect	เบก อบา(เวเอ)ร อกเ	// availi	אועג								
	for public inspection. Indicate how you made these available. Check all that apply.	n in Cal	andula Ol										
	Own website Another's website X Upon request Other (explain												
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	onflict c	interest policy, a	and fina	ancial								
	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 be	ooks ar	nd records: 🟲										
	DEBRA HOFFER, PRESIDENT - (502)561-5437												
	1401 W. MUHAMMAD ALI BLVD., LOUISVILLE, KY 40203												

432006 11-07-14

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 r (A) Name and Title	(B) Average hours per	(do	not c		C) itior more rson	than	one th an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JULAYNE RICKETTS AMSTUTZ	2.00	Ţ.			425500			0	0	0
DIRECTOR (2) JOHN M. ANDERSON	2.00	X	<u> </u>	10		<u> </u>	9688	0.	0.	0
DIRECTOR	2.00	x					١.	0.	0.	0
(3) CHRISTOPHER W. BROOKER	2.00	<u> </u>	-		ška.	200		U •	0.	0 .
DIRECTOR	2.00	X					V	0.	0.	0.
(4) BRIAN K. CALLIHAN	2.00									<u> </u>
DIRECTOR	7/2	x		,494.5				0.	0.	0.
(5) MARC B. CHARNAS	2.00		3							
DIRECTOR		X						0.	0.	0 .
(6) JONATHAN CHERRY	2.00	280								
DIRECTOR		X						0.	0.	0.
(7) JEREMY COKER	2.00	<i>#</i> "						_		
DIRECTOR		Х						0.	0.	0.
(8) SHERYL BALL	2.00									
DIRECTOR (9) J. DUFFY BAKER JR.	2.00	X				<u> </u>	\vdash	0.	0.	0.
(9) J. DUFFY BAKER, JR. DIRECTOR	2.00	х						0.	0.	0
(10) JON BAUGHMAN	2.00	^				-		0.	U•	0.
DIRECTOR	2.00	х						0.	0.	0.
(11) MARTIN L. BELL	2.00								<u></u>	
DIRECTOR		х						0.	0.	0.
(12) W. DUNCAN CROSBY III	2.00									
DIRECTOR		Х						0.	0.	0.
(13) KENNETH S. BERRYMAN	2.00									
DIRECTOR		Х						0.	0.	0.
(14) NANCY B. DAVIS	2.00									
DIRECTOR		Х						0.	0.	0.
(15) M. JOSEPH BISIG	2.00									
DIRECTOR	0.00	Х						0.	0.	0.
(16) JENNY DRAKE	2.00	J.						_	,	^
DIRECTOR (17) CHARLES P. ESSEX	2.00	Х		-				0.	0.	0.
VI/I CHARLES P. ESSEX	4.00	1 1		. [i 1	i		

432007 11-07-14

Form **990** (2014)

Part VII Section A. Officers, Directors, Trus	stees, Key Em	ploy	/ees			ighe	st C	Compensated Employe	es (continued)				
(A)	(B)	5						(D)	(E)			(F)	
Name and title	Average		not c	heck	more	than		Reportable	Reportable	1			
	hours per		, unle					compensation	compensation	1	aı	mount	
	week (list any	-	T	П	Г	T	T	from the	from related organizations		200	other	
	hours for	ndividual trustee or director						organization	(W-2/1099-MIS			npens rom th	
	related	e or c	age			ısateı		(W-2/1099-MISC)	(11 2) 1000 11110	- ,		janiza	
	organizations	truste	altrus		æ	mper		(1.12) 1000 111100)				d rela	
	below	idual	institutional trustee	<u> </u>	ed u	est co oyee	, ja				org	anizat	ions
	line)	Indiý.	Instit	Officer	Key employee	Highest compensated employee	Former						
(18) PATRICK R. FARNAN	2.00												
DIRECTOR		X						0.		0.			0
(19) DONALD L. GOSSMAN	2.00												
DIRECTOR		X						0.		0.			0
(20) DANIEL DUFFY	2.00	Т			Г	Π	T	<i>fa.</i>					
DIRECTOR		X						0.		0.			0
(21) JIM GRAHN	2.00	T	T			T	T						
DIRECTOR		x						0.		0.			0.
(22) LEAH A. EGGERS	2.00	Г		\vdash	 	I	T						
DIRECTOR		x					1	0.		0.			0.
(23) DANIEL HALL	2.00	╒	 -			\vdash	H			Ť			
DIRECTOR	2.00	\mathbf{x}	l				w2255	0.		0.			0.
(24) JOE HAYDEN	2.00		\vdash		 	28	A SECTION AND ADDRESS OF THE PARTY OF THE PA			-			
, ,	2.00	X						0.		0.			0 .
DIRECTOR	2.00	^				999		0.		٠.			
(25) PAUL G. FULTZ	2.00	x			-555-2006			0.		ο.			0.
DIRECTOR	2.00	^	-	ASS		-	100	U •		٠.			
(26) WILLIAM S. HEINZ, JR.	2.00	x				1		0.		0.			Λ
DIRECTOR	L		<u> </u>		Slice	_45		0.		0.			0.
1b Sub-total					*# **# * *	wanes.				0.	2	3,5	
c Total from continuation sheets to Part V								376,590.		0.		$\frac{3,3}{3,5}$	
d Total (add lines 1b and 1c)			else.				<u> </u>	376,590.	L			3,3	70.
2 Total number of individuals (including but r	ot limited to th	ose	liste	ed al	pove	e) wł	ho re	eceived more than \$100	0,000 of reportable)			4
compensation from the organization												Yes	T No.
	400	76								1	Joseph (1907)	162	No
3 Did the organization list any former officer,			e, ke	y en	nplo	yee	, or	highest compensated e	mployee on				l v
line 1a? If "Yes," complete Schedule J for s											3	mylirkele	X
4 For any individual listed on line 1a, is the st	10041004000. 1562										35334	v	
and related organizations greater than \$15											4	X	
5 Did any person listed on line 1a receive or							relat	ed organization or indiv	idual for services				
rendered to the organization? If "Yes," con	iplete Schedui	e J f	or si	uch ,	pers	son					5		<u> X</u>
Section B. Independent Contractors													
1 Complete this table for your five highest co										ens	ation	from	
the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	/ithir	n the organization's tax	year.				
(A)				_				(B)		_	(0		
Name and business	address	N	INC	3			\dashv	Description of s	ervices	C	ompe	nsatic	'n
							T						
							- 1						
2 Total number of independent contractors (includina but r	not li	mite	d to	tho	se li	stec	i above) who received n	nore than				
\$100,000 of compensation from the organi		- /-)		,					
TOO,000 OF COMPONICATION THE ORGANI						-				-			

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2014)

JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.

Name and title Average hours (check all that apply) per week (list any hours for related or related and related	Part VII Section A. Officers, Direct	ctors, ire	ustees, Key I	=mp	loye	es,	and	Higi	nest	Compensated Emplo		T
Componentiation Componenti	(A)		(B)				(C)			(D)	(E)	(F)
Per Week (list any) Week	Name and title		_	1,	ohoo				-1.4	,	1	Estimated
Week			1	1	Criec	r all	T	Т	JIY)	<u>.</u>	,	amount of
((1st arry bours for related organization bours for related organization below line) (W2/1099MISC) (W2/109MISC) (W2/10			1					l g		1	1	other
(27) JOHN GANT				į				ploy		1		from the
(27) JOHN GANT			hours for	l die				led en			(** = *********************************	organization
(27) JOHN GANT			1	stee	rusfee			ensa		,		and related
(27) JOIN GANT			1 -	티를	onal		loye	L CO				organizations
(27) JOIN GANT			1	divid	struti	ficer	y em	ghest	Ē			
EX-OFFICIO	(27) JOHN GANT		'	╀	=	<u> </u>	3	=	12			
Cab Chongyang Ge	EX-OFFICIO			\mathbf{x}^{\dagger}						0.	n	0
DIRECTOR	(28) CHONGYANG GE		2.00	╀▔	+	l	\vdash	 	\vdash	<u> </u>	0.	U
(29) TANI HATFIELD-KENNEDY	DIRECTOR			\mathbf{x}						n	n	0
DIRECTOR	(29) TAMI HATFIELD-KENNEDY		2.00	+==	 		\vdash			.	V .	<u> </u>
(30) DENNIS P. HEISHMAN 2.00 X	DIRECTOR	İ		$1_{\mathbf{x}}$						0.	0	0
131 J. DOUGLAS HELM 2.00 X 0. 0. 125 125 125 125 125 125 132 LARRY W. HORN 2.00 X 0. 133 CLINTON L. GLASSCOCK 2.00 X 0. 126 126 125 125 125 125 126 125 125 125 125 125 126 125 125 125 125 126 125 125 125 125 126 125 125 125 126 125 125 125 126 125 125 125 126 125 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 125 126 125 12	(30) DENNIS P. HEISHMAN		2.00	Ħ	T	-		-		0.	0.	U
(31) J. DOUGLAS HELM 2.00 X 0. 0.	DIRECTOR	Ī		1x						. 0.1	0.1	0
Color	(31) J. DOUGLAS HELM		2.00	T								
32 LARRY W. HORN 2.00		ľ		1x						0.	0.1	0.
33 CLINTON L. GLASSCOCK	(32) LARRY W. HORN		2.00						-48484			
33 CLINTON L. GLASSCOCK				X				A		0.	0.1	0.
134 KATHY HERBIG 2.00 X			2.00									
Name				X						0.	0.	0.
35 ANKUR N. GOPAL 2.00 X			2.00			.KB			V(1)			
X				Х				4	% .	0.	0.	0.
36 JIL J. GREENE 2.00			2.00									
RECTOR				Х	Ш					0.	0.	0.
37 KENNETH E. GROTH		L	2.00	200			Madaga .					
RECTOR				X	.e					0.	0.	0.
38 ANN JOSEPH 2.00 X X X 0. 0. ECRETARY			2.00									
X X X X X X X X X X				Х				_	\bot	0.	0.	0.
39) KEVIN J. JOYNT OARD CHAIR 40) JOHN P. LAWSON, JR. IRECTOR 41) DAVID L. LEWIS IRECTOR 42) REX LOEFFLER IRECTOR 42) REX LOEFFLER IRECTOR 43) DANAIL KELISAKIEV IRECTOR 44) TODD A. KLIMEK IRECTOR 45) DEE MAYNARD IRECTOR 46) CHRISTOPHER J. KRAMER 2.00 X X X X X X X X X X X X X X X X X X		-	2.00				1		l			
OARD CHAIR 40) JOHN P. LAWSON, JR. IRECTOR 41) DAVID L. LEWIS IRECTOR 42) REX LOEFFLER IRECTOR 43) DANAIL KELISAKIEV IRECTOR 44) TODD A. KLIMEK IRECTOR 45) DEE MAYNARD IRECTOR 46) CHRISTOPHER J. KRAMER 2.00 X X 0. 0. 0. 0. 0. 0. 0. 0			0.00	X	***	X	4		\perp	0.	0.	0.
A		4	4.00					1			_	
IRECTOR		1		X	_	X		_	_	0.	0.	0.
A1 DAVID L. LEWIS 2.00 X 0.		-	2.00	37					-		_	
X		<u> 1921 - 4</u> 2 Victoria (44)	2 00	Λ	\dashv		_	-	4	0.	0.	0.
#2) REX LOEFFLER				v								_
X				Δ		-	\dashv		\dashv	0.	0.	0.
43) DANAIL KELISAKIEV 2.00 X 0. 0. IRECTOR X 0. 0. 44) TODD A. KLIMEK 2.00 X 0. 0. IRECTOR X 0. 0. 45) DEE MAYNARD 2.00 X 0. 0. IRECTOR X 0. 0.		F	2.00	v						۱ م		=
X			2 00	Δ	\dashv	\dashv		+	\dashv	<u> </u>	<u> </u>	0.
44) TODD A. KLIMEK 2.00 X 0. 0. 45) DEE MAYNARD 2.00 X 0. 46) CHRISTOPHER J. KRAMER 2.00		H		~						0		•
X 0. 0. 45) DEE MAYNARD 2.00 X 0. 0. 46) CHRISTOPHER J. KRAMER 2.00				^	\dashv	-+	+	-	+		U.	0.
45) DEE MAYNARD IRECTOR 46) CHRISTOPHER J. KRAMER 2.00 0. 0.		<u> </u>		$_{\mathbf{x}}$						0	۱ ,	^
IRECTOR X 0. 0.					\dashv	+	\dashv	+	+	U •	<u> </u>	0.
46) CHRISTOPHER J. KRAMER 2.00		-		$_{\mathbf{x}}$						0	0	^
					+	+	\dashv	+	\dashv	· ·	U•	0.
U• U•		H		$_{x}$		$_{\mathbf{x}}$				n	0	^
				22		۲.			+	U•	U.	0.

JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.

Form 990 JUNIOR AC									read (continued)	
Part VII Section A. Officers, Directors, Tru		nplo	oyee			ligh	est			(F)
(A)	(B)			(C Posi				(D) Reportable	(E) Reportable	(F) Estimated
Name and title	Average hours	(ct		rosi all t			hΛ	compensation	compensation	amount of
	per	(0)	IECK	all	ııaı	арр	, y,	from	from related	other
	week					yee		the	organizations	compensation
	(list any	ector				old III		organization	(W-2/1099-MISC)	from the
	hours for	or director	gy.			ated e		(W-2/1099-MISC)		organization
	related	ste	truste		gg.	suadi				and related organizations
	organizations below	ual tr	tional		ploye	st co m	_			Organizations
	line)	Individual t	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) JULIE MCGREGOR	2.00							_		0
DIRECTOR		Х						0.	0.	0 .
(48) DARRYL S. LAVERY	2.00									0
DIRECTOR		X						0.	0.	0 .
(49) KAREN O'CONNELL	2.00									0
EX-OFFICIO		Х				L.		0.	0.	0
(50) MIKE O'DONNELL	2.00	_							_	^
DIRECTOR		Х						0.	0.	0 .
(51) WESLEY L. RINGO	2.00									0
DIRECTOR		Х						0.	0.	0
(52) RAJA PATIL	2.00					4			ا م	0
DIRECTOR		X			_		200	0.	0.	0
(53) JOHNNY L. PERRY	2.00								0.	0
DIRECTOR		Х		<u> </u>	200,000	198		0.	0.	U .
(54) TODD PHILLIPS	2.00					١.		1	0.	0
DIRECTOR	0.00	X			_	4		0.	V •	<u> </u>
(55) MICHAEL ROBERTS	2.00	x			es.			0.	0.	0 .
DIRECTOR	2.00	1		- 3	100	12 (18 A) 12 (18 A)			0.	
(56) PAM ROYSTER	2.00	x						0.	0.	0
EX-OFFICIO	2.00		#= ##	-		-	┢			
(57) DAVE RUSSELL	2.00	x						0.	0.	0
DIRECTOR	2.00		50,000		_	-	├	· ·		
(58) ROGER D. SHANNON	2.00	X		x				0.	0.	0
TREASURER	2.00	23)	-			-	┢	<u> </u>		
(59) JONATHAN PRESSER	2.00	x	1					0.	0.	0
DIRECTOR (60) RAYMOND PRYOR	2.00	 	\vdash	-	-	\vdash	 			
DIRECTOR	2.00	x						0.	0.	0
(61) ADAM SIMON	2.00	╫	 	f		┢	1			
DIRECTOR		x						0.	0.	0
(62) DAVID S. SINCLAIR	2.00	-	t^-	\vdash	T	T	T			
DIRECTOR		x						0.	0.	0
(63) CHRIS J. REID	2.00	T	T	T		T	T			
DIRECTOR		x						0.	0.	0
(64) RIC SINCLAIR	2.00	1	T	T	T	1	T			
DIRECTOR		x						0.	0.	0
	2.00	T					Τ			
DIRECTOR		x				1		0.	0.	0
	2.00		1		Γ	T	Τ			
		X						0.	0.	0
(65) MELISSA RICHARDS-PERSON DIRECTOR (66) KEVIN SIPES DIRECTOR Total to Part VII, Section A, line 1c	2.00									

Form 990	JUNIOR	ACHIEVEMENT	OF	KENTUCKIANA,	TNC
		TIOTET A TITILITY	O.L	THE TOCKLEME,	TIMC.

Obstaty Obst	Part VII Section A. Officers, Di	rectors, Tr	ustees, Key E	mp	loye	es,	and	High	hes	t Compensated Employ	vees (continue)	
Name and title	(A)		(B)	T			(C)			(D)		(F)
hours per week (fist arry hours for leaked organizations wheek (fist arry hours for leaked organizations held organizations wheek (fist arry hours for leaked organizations held organizations wheek first arrows held organization organization (W-2/1099-MISC) (W-2/1099	Name and title		1					n		1	1	1
Week			hours	(0	chec	k all	that	t app	oly)	i '	1 '	1
Obstanty		1	Г		Τ	Τ		П		from related	other	
CF1 DALE B. SKAGGS Z.00 X								loyee		į.		compensation
CF1 DALE B. SKAGGS Z.00 X			1 ' -	direct				lem p		, -	(W-2/1099-MISC)	
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G88 BERARD TOMASSETTI			2.00				İ	l				
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Columbia Columbia	(75) JEFF ULIGIAN		2.00								- 0 •	<u> </u>
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O	(76) J. TODD SPURGEON		2.00	A.		\neg	1164555	ajer.				
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(80) DEBORAH DALTON SR. VP OF ADVANCEMENT (81) SHARON PEACOCK VP OF OPERATIONS (82) DEBRA H. HOFFER PRESIDENT X 199,228. 0. 7,687. X 81,825. 0. 7,891.		4	2.00						l			
SR. VP OF ADVANCEMENT (81) SHARON PEACOCK VP OF OPERATIONS (82) DEBRA H. HOFFER PRESIDENT X 99,228. 0. 7,687. 7,687. 195,537. 0. 7,998.			27 50	X		\dashv	\dashv	_	_	0.	0.	0.
(81) SHARON PEACOCK VP OF OPERATIONS (82) DEBRA H. HOFFER PRESIDENT X 195,537. 0. 7,687. 7,687. 195,537. 0. 7,891.		-	3/.50	ı		Ţ.			ı	00 000		
VP OF OPERATIONS (82) DEBRA H. HOFFER PRESIDENT X 81,825. 0. 7,891. 37.50 X 195,537. 0. 7,998.			37 50		\dashv	쒸	-	\dashv	_	99,228.	0.	<u>7,687.</u>
(82) DEBRA H. HOFFER 37.50 X 195,537. 0. 7,998.		+	37.30			Ţ		1		01 005		
PRESIDENT X 195,537. 0. 7,998.		98.8	37.50	\dashv	_	4	\dashv	\dashv		01,043.	U.	7,891.
	PRESIDENT	-	37.30	- 1		v				105 527	<u>, </u>	7 000
Total to Part VII, Section A, line 1c 376 . 590 . 23 . 576				\dashv	+	4	\dashv		\dashv	193,337.		7,998.
Total to Part VII, Section A, line 1c 376 . 590 . 23 . 576		<u> </u>		- 1		- 1		ı	ı			
Total to Part VII, Section A, line 1c 376 . 590 . 23 . 576				\dashv	十	+	\dashv	+	\dashv			
Total to Part VII, Section A, line 1c 376 . 590 . 23 . 576	·	-									1	
Otal to Part VII, Section A, line 1c 376.590. 23.576				\dashv	\neg	+	\top	\dashv	+			
Total to Part VII, Section A, line 1c 376 . 590 . 23 . 576												
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Total to Part VII, Section A, line 1c 376 . 590 . 23 . 576												
Total to Part VII, Section A, line 1c 376 . 590 . 23 . 576												
1 23.370	Total to Part VII, Section A, line 1c		,	· · · · · ·		<u>,</u>	<u></u>			376,590.		23,576.

Part VIII Statement of Rev

	Check if Schedule O co			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
1 :	a Federated campaigns	1a			165.72 (166.15)		
1 6	b Membership dues	1b					
	c Fundraising events	1c	438,617.				
	d Related organizations	1d					
	e Government grants (contrib	utions) 1e	195.				
<u> </u>	f All other contributions, gifts, gr	ants, and					
}	similar amounts not included a	bove 1f 1	,448,787.				
3 9	g Noncash contributions included in li	nes 1a-1f: \$	330,978.				
<u> </u>	h Total. Add lines 1a-1f			1,887,599.			
			Business Code				
2 :	a PROGRAM FEES		900099	243,336.	243,336.		
2	b						
	С				Notice of		
	d		1 :				
1	е			48			
1	f All other program service re	venue					
	g Total. Add lines 2a-2f		<u> </u>	243,336.			
3	Investment income (includir	ng dividends, inte	erest, and				
	other similar amounts)			62,690.			62,690
4	Income from investment of	tax-exempt bond	d proceeds	100			
5	Royalties)				
1		(i) Real	(ii) Personal				
6 6	a Gross rents						
1	b Less: rental expenses		T.				
,	c Rental income or (loss)						
,	d Net rental income or (loss)						
7 :	a Gross amount from sales of						
İ	assets other than inventory	556,168	•				
	b Less: cost or other basis						
	and sales expenses	516,453	1,217.				
(c Gain or (loss)	39,715	· <1,21/•	>			
,	d Net gain or (loss)			38,498.			38,498
8	a Gross income from fundrais						
1	including \$ 438	617. of					
	contributions reported on li						1
	Part IV, line 18		a 38,882.				
	b Less: direct expenses		ь 192,412.				1
	c Net income or (loss) from fu	ındraising events	· ▶	<153,530.	>		<153,530
9	a Gross income from gaming	activities. See					1
	Part IV, line 19		a				
	b Less: direct expenses		b				
1'	c Net income or (loss) from g	aming activities					
10	a Gross sales of inventory, le	ss returns					
	and allowances		а				
£	b Less: cost of goods sold		b				
	c Net income or (loss) from s	ales of inventory	>				
	Miscellaneous Reve	nue	Business Code				
11	a OTHER INCOME		900099	4,824.	4,824.		
	b						
	c						
	d All other revenue		. <u>L</u>				
	e Total. Add lines 11a-11d		>	4,824.			
	Total revenue. See instruction	•	<u> </u>	2,083,417.	248,160.	0	. <52,342

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).

Do	Check if Schedule O contains a respon not include amounts reported on lines 6b,	nse or note to any line in (A) Total expenses	this Part IX	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	- Otal Oxpolitoco	expenses	general expenses	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	407,747.	179,101.	122,141.	106,505.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		45.483		
	persons described in section 4958(c)(3)(B)		47.22.73.73.		
7	Other salaries and wages	407,980.	312,151.	1,019.	94,810.
8	Pension plan accruals and contributions (include		40.00		
	section 401(k) and 403(b) employer contributions)	88,836.	54,190.	12,437.	22,209.
9	Other employee benefits	47,809.	34,250.	1,626.	11,933.
10	Payroll taxes	54,988.	33,543.	7,698.	13,747.
11	Fees for services (non-employees):				
а	Management				
b	Legal				
C	Accounting	28,722.	<u> </u>	28,722.	
d	Lobbying	Transfer of the second			
е	Professional fundraising services. See Part IV, line 17				-
f	Investment management fees	4.			· · · · · · · · · · · · · · · · · · ·
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	208,200.	208,200.		4005
13	Office expenses	48,034.	31,865.	5,896.	10,273.
14	Information technology	31,299.	26,499.	2,400.	2,400.
15	Royalties		E0 (E0		
16	Occupancy	76,553.	70,659.	2,947.	2,947.
17	Travel	20,121.	10,992.	2,103.	7,026.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				***************************************
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	104,931.	96,851.	4 040	4 040
22	Depreciation, depletion, and amortization	13,610.	12,562.	4,040.	4,040. 524.
23	Other expenses. Itemize expenses not covered	13,010•	14,004.	524.	324.
24	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
а	amount, list line 24e expenses on Schedule 0.) PROGRAM MATERIALS AND F	336,801.	336,801.		
a	TRAINING	9,105.	8,437.		668.
D	BAD DEBT	5,460.	0,43/•	5,460.	000.
d	MISCELLANEOUS	3,353.		2,909.	444.
		2,843.	50.	575.	2,218.
е 25	All other expenses Total functional expenses. Add lines 1 through 24e	1,896,392.	1,416,151.	200,497.	279,744.
26	Joint costs. Complete this line only if the organization	1,000,002.	1, 210, 1J1 ·	400,431.	413,144.
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	11-07-14				Form 990 (2014)

432010 11-07-14

Part X	Balance Sheet	VIII.00 - 100000000		
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	242,074.	1	101,118
2	Savings and temporary cash investments	53,845.	2	54,740
3	Pledges and grants receivable, net	86,017.	3	182,354
4	Accounts receivable, net		4	
5	Loans and other receivables from current and former officers, directors,		100000	
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L	in the controlling which is now in the control to the control end	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			
s	employees' beneficiary organizations (see instr). Complete Part II of Sch L	4	6	
Assets	Notes and loans receivable, net		7	
A B	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	10,128.	9	10,160
1	Land, buildings, and equipment: cost or other			•
l	hasis Complete Part VI of Schedule D 10a 3,002,563.			
h	Less: accumulated depreciation 10b 1,160,373.	1,686,594.	10c	1.842.190
11	Investments - publicly traded securities	2,158,803.	11	1,842,190 2,246,932
12	Investments - other securities. See Part IV, line 11		12	
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets	90 90	14	
15	Other assets. See Part IV, line 11	234,027.	15	240,538
16	Total assets. Add lines 1 through 15 (must equal line 34)	4,471,488.	16	4,678,032
17	Accounts payable and accrued expenses	76,039.	17	103,018
18	Grants payable	. ,	18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	——————————————————————————————————————
- 1	Loans and other payables to current and former officers, directors, trustees,			
ğ	key employees, highest compensated employees, and disqualified persons.			
Liabilities 8	Complete Part II of Schedule L	atisəldir. Azərbi dəyət dizəriyə işdə	22	
ع ا	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			
20	parties, and other liabilities not included on lines 17-24). Complete Part X of		1	
	Schedule D		25	
26	Total liabilities. Add lines 17 through 25	76,039.	26	103,018
120	Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
s l	complete lines 27 through 29, and lines 33 and 34.			
စ္ဗီ ₂₇	Unrestricted net assets	4,303,359.	27	4,473,588
<u> 28</u>	Temporarily restricted net assets	92,090.	28	101,426
n 29	Permanently restricted net assets		29	
Ĕ Ž	Organizations that do not follow SFAS 117 (ASC 958), check here ▶□			
<u> </u>	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
9 30 9 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ğ 30	Retained earnings, endowment, accumulated income, or other funds		32	
Net Assets or Fund Balances Net Assets or Fund Balances 2		4,395,449.	33	4,575,014
33	Total net assets or fund balances Total liabilities and net assets/fund balances	4,471,488.	34	4,678,032
34	Total naminies and het assets/fund palatices	-, -, -, -, -, -, -,	U-7	Form 990 (2014

F	TIMIOD ACUTEVEMENT OF VENITIGATANA THO				
	JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC. INT XI Reconciliation of Net Assets			Pa	age 12
	Check if Schedule O contains a response or note to any line in this Part XI				Х
		Π			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,08	3.4	117.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,89		
3	Revenue less expenses. Subtract line 2 from line 1	3			25.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,39		
5	Net unrealized gains (losses) on investments	5			71.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		6,5	11.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	4,57	5,0	14.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	_		
Żа	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	10004 (190)	х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis				
b			2b	X	40(58/A/A)
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate			 Vanasa	200
	consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	2 240.0,			

☐ Both consolidated and separate basis

Consolidated basis

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Form 990 (2014)

X

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За

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

Open to Public Inspection

identification number Name of the organization Employ JUNIOR ACHIEVEMENT OF KENTUCKIANA, Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, 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). (iv) Is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported (ii) EIN (iii) Type of organization listed in your (described on lines 1-9 other support (see support (see organization governing do cument? above or IRC section Instructions) Instructions) Yes Nο (see instructions))

Form 990 or 990-EZ. 432021 09-17-14

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.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	923,911.	1312882.	1528427.	1648193.	1887599.	7301012.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to				·		
	the organization without charge						
4	Total. Add lines 1 through 3	923,911.	1312882.	1528427.	1648193.	1887599.	7301012.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						562,040.
	Public support. Subtract line 5 from line 4.						6738972.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	923,911.	1312882.	1528427.	1648193.	1887599.	7301012.
8	Gross income from interest,			*			
	dividends, payments received on		1				
	securities loans, rents, royalties	25 501	E4 600	00 006			006 450
	and income from similar sources	35,781.	54,629.	22,376.	60,977.	62,690.	236,453.
9							
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain	e.					
	or loss from the sale of capital	2 525	2 207	4 205	4 200	4 004	10 440
	assets (Explain in Part VI.)	2,527.	3,387.	4,325.	4,380.	4,824.	19,443.
	Total support. Add lines 7 through 10	Barrier Barrier					7556908.
	Gross receipts from related activities,	42957 Z. 198859410	,			12	
13	First five years. If the Form 990 is for	2015 J	s first, second, third	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
Sec	organization, check this box and stop ction C. Computation of Publ	here ic Support Pe	rcentage				.
		45-10-400		-l (5)		44	89.18 %
	Public support percentage for 2014 (I					14	00.60
	Public support percentage from 2013				_	15	
104	33 1/3% support test - 2014. If the c	_					
.	stop here. The organization qualifies33 1/3% support test - 2013. If the organization						
IJ	and stop here. The organization quali						
172	10% -facts-and-circumstances test						
ı, a	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
L	10% -facts-and-circumstances test						
IJ	more, and if the organization meets th	•				•	1070 UI
	organization meets the "facts-and-circ		·				
18	Private foundation. If the organization			•			
<u> </u>	Trate roundation. If the organization	in and mor offects a	55X 011 mile 10, 102	, 100, 17a, 01 17D		dule A (Form 990	
							<u></u> j <u></u> 14

Scriedule A (Form 990 of 990-EZ) 201

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Sec	ction A. Public Support	ciovi, piodeo com					
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	•)				
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513				1604		
4	Tax revenues levied for the organ- ization'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			(4)			
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and			1			
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		[-		
С	Add lines 7a and 7b						·
	Public support (Subtract line 7c from line 6.)						
	ction B. Total Support			nging Selection	·		
Cale	ndar year (or fiscal year beginning in) ►	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is fo	r the organization	s first second thi	rd, fourth, or fifth t	ax vear as a sectic	n 501(c)(3) ord	anization,
14	check this box and stop here						
Sec	ction C. Computation of Pub	ic Support Pe	rcentage				
15	Public support percentage for 2014 (line 8, column (f) d	livided by line 13.	column (f))	.,,	15	%
16	Public support percentage from 2013	3 Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Inve	stment Incom	e Percentage				
17						17	%
18	Investment income percentage from	2013 Schedule A,	Part III, line 17			18	%
19	a 33 1/3% support tests - 2014. If the	e organization did	not check the box	on line 14, and lin	e 15 is more than	33 1/3%, and I	ine 17 is not
	more than 33 1/3%, check this box a	and stop here. The	e organization qua	ilifies as a publicly	supported organiz	ation	▶∟
ŧ	33 1/3% support tests - 2013. If the	e organization did ı	not check a box o	n line 14 or line 19	a, and line 16 is me	ore than 33 1/3	3%, and
	line 18 is not more than 33 1/3%, ch	eck this box and s	top here. The org	anization qualifies	as a publicly supp	orted organiza	tion
20		on did not check a	box on line 14, 19	9a, or 19b, check t	his box and see in	structions	>

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)

 (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in part vi what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <code>part VI</code>, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 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).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in part VI.
- **b** Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **part VI**.
- c Did a disqualified person (as defined in line 9(a)) 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes, "answer (b) below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

			Yes		No
	1		7		
	2				
	3a				
	3b				
	3с				
	4a	1		1	
	4b	1		1	
				1	
	4c				
	5a- 5b			l	
	5c				
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-	9b	Ž		Q.	
7000000	9c				
	10a 10b				

	dule A (Form 990 or 990-EZ) 2014 JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.		Pa	age 5
Fai	t IV Supporting Organizations (continued)		Vac	No
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	Validation.		
	below, the governing body of a supported organization?	11a		<u> </u>
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in part VI.	11c	L	
Sec	tion B. Type I Supporting Organizations			
	\cdot		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,	1		
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	organization(s) triat operated, supervised, of controlled the supporting organization(s) that operated			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		\$150 P.C.
	supervised, or controlled the supporting organization.			L
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		L
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
-	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
2	By reason of the relationship described in (2), did the organization's supported organizations have a			
3	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	3	S. Welliam	Alfred 4
	supported organizations played in this regard.	<u> </u>		L
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	tructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		l
h	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			
		2b	(C-90(\$7)45)	pastast.
_	activities but for the organization's involvement.			52860
3	Parent of Supported Organizations. Answer (a) and (b) below.	1		
а				
	trustees of each of the supported organizations? Provide details in Part VI.	3a		12/16/50/0
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported erganizations? If "Yes," describe in \mathbf{p}_{-1} is the role played by the organization in this regard.	3b	ı	ı

_	edule A (Form 990 or 990-EZ) 2014 JUNIOR ACHIEVEMENT OF KI			Page 6
Ра	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting		······································	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	•	•	ictions. All
	other Type III non-functionally integrated supporting organizations must cor	nplete	Sections A through E.	
Sec	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year
				(optional)
	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	<i>7</i> 6.	
8_	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion 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):			
<u>a</u>	Average monthly value of securities	1a		
	Average monthly cash balances	1b	Ports.	
	Fair market value of other non-exempt-use assets	1c		
<u>d</u>	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
<u>6</u>	Multiply line 5 by .035	6		
	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-	integra	ated Type III supporting orga	nization (see
	in atm satisma			

Schedule A (Form 990 or 990-EZ) 2014

	edule A (Form 990 or 990-EZ) 2014 JUNIOR ACHIEV	EMENT OF KENTU	JCKIANA, INC.	Page 7
Carrier as	Current Year			
	ion D - Distributions	mont nurnaces		Ourtent real
1	Amounts paid to supported organizations to accomplish exe			
2	Amounts paid to perform activity that directly furthers exem			
_	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purpos	es or supported organization	ITIS	
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 t	he organization is responsiv	/e	
	(provide details in Part VI). See instructions.			
9_	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014
1_	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
a				
b		The state of the s		
C				
d				
	From 2013		The state of the s	
	Total of lines 3a through e			
		\$590 Nation		
	Applied to underdistributions of prior years			
	Applied to 2014 distributable amount			
<u></u>	Carryover from 2009 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
	Applied to underdistributions of prior years		s Casa de como mono en en en en en en en en en en en en en	
	Applied to 2014 distributable amount			
<u>c</u>	Remainder. Subtract lines 4a and 4b from 4.		4	
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014, Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a			and the second s	
b		AND AND AND AND AND AND AND AND AND AND		
	Evocos from 2013			

Schedule A (Form 990 or 990-EZ) 2014

e Excess from 2014

	orm 990 or 990-EZ) 2014 JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC. Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 1	12.
A	lso complete this part for any additional information. (See instructions).	
		·····
		-
		
		

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2014

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
VDRB-TV	311,385.	160,247
ALPHA MEDIA LOUISVILLE	280,945.	129,807
FIRST SAVINGS BANK	280,542.	129,404
THE PAUL OGLE FOUNDATION	293,720.	142,582
		·
		1501 . WHAT WAR S
Fotal Excess Contributions to Schedule A, Part II, Line 5		562,040

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

OMB No. 1545-0047 2014

Name of the organization

Employer identification number

Organization type	JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.
Filers of:	Section:
Form 990 or 990-E2	Z X 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
	ization is covered by the General Rule or a Special Rule.
Note. Only a section	n 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 orga	anization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or rom any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 50 any one co	anization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 09(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 intributor, 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, 990-EZ, line 1. Complete Parts I and II.
year, total o	anization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for tion of cruelty to children or animals. Complete Parts I, II, and III.
year, contri is checked, purpose. D	inization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ibutions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., o not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively naritable, etc., contributions totaling \$5,000 or more during the year
but it must answer "	ration that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 of 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) (2014)

Name of organization

Employer identification number

1 ONTO	R ACHIEVEMENT OF KENTUCKIANA, INC.		
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FIRST SAVINGS BANK 501 E. LEWIS AND CLARK PKWY. CLARKSVILLE, IN 47129	\$ 77,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE PAUL OGLE FOUNDATION P.O. BOX 845 JEFFERSONVILLE, IN 47131	\$ 293,720.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	WDRB-TV 624 W. MUHAMMAD ALI BLVD. LOUISVILLE, KY 40203	\$142,320.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ALPHA MEDIA LOUISVILLE 520 S. FOURTH STREET LOUISVILLE, KY 40202	\$\$	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	HARRISON COUNTY COMMUNITY FOUNDATION 1523 FOUNDATION WAY NE CORYDON, IN 47112	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for

Employer identification number

JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.



(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	PRODUCTION/ADVERTISING		
		\$\$	06/30/15
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_4	ADVERTISING	\$ 100,993.	06/30/15
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of org	anization		Employer identification number			
	R ACHIEVEMENT OF KENTUC	CKIANA, INC.				
Part III	Exclusively religious, charitable, etc., con the year from any one contributor. Complete	tributions to organizations described in columns (a) through (e) and the following	section 501(c)(7), (8), or (10) that total more than \$1,000 fing line entry. For organizations			
	completing Part III, enter the total of exclusively religion Use duplicate copies of Part III if addition		ss for the year. (Enter this info. once.)			
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		A PROBLEM BY A PRO				
		(e) Transfer of gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
F						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
Part I	(b) i dipose oi giit	(0) 000 01 g.11	(4,233,233,233,233,233,233,233,233,233,23			
		(a) Transfer of 25th				
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
(-XXI-						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
raici		40.4				
		(e) Transfer of gift				
		- 1 TID 4	Deletionship of two of two of two of two			
	Transferee's name, address, a	na ZIP + 4	Relationship of transferor to transferee			
(a) No. from						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gift				
	Transferee's name, address, a	and 7IP + 4	Relationship of transferor to transferee			
F	Hansieree's Hame, audress, a	TT TT	Total of the first			
ł						
1						

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

JUNIOR ACHIEVEMENT OF KENTUCKTANA TNC

Pa	art I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	r Accounts Complete It the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	Ties of the second please in the
		(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 t	funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose con	ferring
-	impermissible private benefit?	http://www.	Yes No
Ра	TII Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part I	IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	ARPEREN, ARPER	
	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 qualif	ied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		
	T. C. A. C. W.		Held at the End of the Tax Year
a	Total number of conservation easements		
b	and the state of t		2b
C A	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
u	Number of conservation easements included in (c) acquired a		
3	listed in the National Register		2d
Ü	Number of conservation easements modified, transferred, relevant ►	eased, extinguished, or terminated by the org	anization during the tax
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the peri		
•	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,		Yes No
7	Amount of expenses incurred in monitoring, inspecting, and e	inforcing conservation assements during	the year
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense state	Yes No
	include, if applicable, the text of the footnote to the organizati	on's financial statements that describes the	errenization's accounting for
	conservation easements.	on a manoral statements that describes the o	rganization's accounting for
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to Form 9	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue statement :	and balance sheet works of art
	historical treasures, or other similar assets held for public exhi	bition, education, or research in furtherance of	of public service, provide, in Part XIII
	the text of the footnote to its financial statements that describ	es these items.	γ ==== σ, μ.σ., μ.σ., α.ε.,,
b	If the organization elected, as permitted under SFAS 116 (ASC	C 958), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edit	ucation, or research in furtherance of public s	ervice, provide the following amounts
	relating to these items:	• • • •	arriad the fellowing difficulty
	(i) Revenue included in Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical treas	sures, or other similar assets for financial gain	, provide
	the following amounts required to be reported under SFAS 11		, ₁
а	Revenue included in Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		▶ \$
	For December 1 Declaration Ast Alex		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. 432051 10-01-14

Schedule D (Form 990) 2014

	dule D (Form 990) 2014 JUNIOR rt III Organizations Maintaining C		IT OF KENTU art, Historical Ti				ar Asse	e ts (conti		age 2
3	Using the organization's acquisition, access	ion, and other recor	ds, check any of the	following th	at are a si	ignificant	use of its	collectio	n iten	ns
	(check all that apply):	,	•	ŭ		J				
а	Public exhibition	(Loan or exc	hange prog	rams					
b	Scholarly research	•	Other	0.0						
C	Preservation for future generations							·		
4	Provide a description of the organization's co	ollections and expla	in how they further t	he organizat	tion's exe	mpt purpa	ose in Pa	rt XIII.		
5	During the year, did the organization solicit of	•	-	_						
_	to be sold to raise funds rather than to be m		•	-				Yes		No
Pai	t IV Escrow and Custodial Arran									
-	reported an amount on Form 990, Pa		G				, ,			
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for contribution	ns or other a	ssets not	included				
	on Form 990, Part X?		•					Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:							
_	· · · · · · · · · · · · · · · · · · ·							Amount	t	•••••
С	Beginning balance			¥.		1c				
	Additions during the year					1d				
	Distributions during the year							***************************************		
f	Ending balance					1f				
	Did the organization include an amount on F							Yes		No
	If "Yes." explain the arrangement in Part XIII.					,]
Par		,				0.				
- table to the same	2 Maria 1991	(a) Current year	(b) Prior year	(c) Two year		(d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance	2,392,830.		1.0000000	7,917.	`	44,848.		,101,	
b	Contributions		75,000.	1	0,000.		15,580.			712.
c	Net investment earnings, gains, and losses	94,640.	297,663.	18	2,250.	<	22,511.	>		837.
d	Grants or scholarships						·····		<u>.</u>	
	Other expenditures for facilities									
•	and programs				-					
f	Administrative expenses	<i>2</i> 46.	20072000							
g g	End of year balance	2,487,470,	2,392,830.	2,02	0,167.	1.6	37,917.	1	444,	848.
2	Provide the estimated percentage of the curr	70000	L						<u>'</u>	
	Board designated or quasi-endowment	100.00	%	.,,o.a ao.						
b	Permanent endowment	%								
	Temporarily restricted endowment									
·	The percentages in lines 2a, 2b, and 2c shou									
35	Are there endowment funds not in the posse		ation that are held a	nd administe	ered for th	ne organiz	ation			
oa	by:	oolon or the organiz	ation that are note a	ina aaniiniloo	5100 101 111	io oi gainz	u.i.o.i.	Γ	Yes	No
								3a(i)	X	140
	(i) unrelated organizations						• • • • • • • • • • • • • • • • • • • •			X
h	(ii) related organizations If "Yes" to 3a(ii), are the related organizations	listed as required s	n Schodulo D2					3b	\dashv	
					•••••			30	1	
Par	Describe in Part XIII the intended uses of the tVI Land, Buildings, and Equipm		owinent lunus.							
. 41	Complete if the organization answere		Dart IV line 11a S	ee Form 000	Dart V Ii	ino 10				
						cumulate	۵ ا	(d) Dool		
	Description of property	(a) Cost or o basis (investr	1	or other (other)		reciation	٠	(d) Book	value)
	Land		nony basis	(54101)	Geb	, Joiation	Savera de			
	Land						2,000			-
	Buildings		2 11	7,289.	77	63,58	38	1,683	2 7	11
	Leasehold improvements			5,274.		96,78			$\frac{3}{3}, \frac{7}{4}$	
	Equipment		33	J,4/4.		70,10	· · -	100	J,40	J J •
	Other Column (5) must a		V solume (D) (in a	(00)				1,842) 10	<u> </u>
rotal	. Add lines 1a through 1e. (Column (d) must e	quai гопп ээо, Рап	∧, coluttin (B), line t	<i>UC.)</i>					· , 1.	<i>,</i> .

Schedule D (Form 990) 2014

O Locket D. (5			
Schedule D (Form 990) 2014 JUNIOR ACHI Part VIII Investments - Other Securities.	EVEMENT OF K	ENTUCKIANA, INC.	Page 3
Complete if the organization answered "Yes"	to Form 990. Part IV. line	11h 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 e	nd-of-year market value
(1) Financial derivatives			,
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)	· · · · · · · · · · · · · · · · · · ·		
(E)			
(F)			
(G) (H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		1	
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" t	o Form 000 Port IV line	110 Con Form 000 Fact V II - 40	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	od of year market value
(1)	(7/2001 10:00	(e) method of valuation, cost of e	id-or-year market value
(2)			
(3)			
(4)			
(5)	72		
(6)			
(7)			
(8)			
(9)	4		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" to		11d. See Form 990, Part X, line 15.	
	escription ETS HELD BY	OMULED C	(b) Book value
(1) BENEFICIAL INTEREST IN ASS (2)	ELS HEDD BX	OTHERS	240,538.
(3)			
(4)	· · ·		
(5)			
(6)	-		
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col. (B) line	15.)	>	240,538.
Part X Other Liabilities.			
Complete if the organization answered "Yes" to	Form 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25.	·
. (a) Description of liability		b) Book value	
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) otal. (Column (b) must equal Form 990, Part X, col. (B) line 2	05)		
(.u./ 🔛 l	■ 2000 000 000 000 000 000 000 000 000 0	en Languer in annumber a 60 Abres (1900 Artis (1900 Artis)

Schedule D (Form 990) 2014

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 X

JOHCHARD D (FOITH GOO) EGIT			
5 VI	at Davision may Audited E	inancial Statemente With	Pavanua nar Raturn
Part XI Reconciliation	of Revenue per Auditeu r	inancial Statements With I	nevenue per neturn.

Pai	TAI Reconciliation of nevertice per Addited I maneral otatem		i novonao por n	otu	•
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			г. т	2,305,471.
1	Total revenue, gains, and other support per audited financial statements			1	2,303,471.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	.12 071		
а	Net unrealized gains (losses) on investments		<13,971.	P	
b	Donated services and use of facilities	2b	76,700.		
С	Recoveries of prior year grants		450 205		
d	Other (Describe in Part XIII.)	2d	159,325.		000 054
е	Add lines 2a through 2d			2e	222,054.
3	Subtract line 2e from line 1			3	2,083,417.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b	,		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,083,417.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem		h Expenses per	Retu	rn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	With the second			- 4 o F - 0 o C
1	Total expenses and losses per audited financial statements			1	2,125,906.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	4 1			
а	Donated services and use of facilities	2a	76,700.		
b	Prior year adjustments				
С	Other losses				
d	Other (Describe in Part XIII.)	. 2d	152,814.		
е	Add lines 2a through 2d			2e	229,514.
3	Subtract line 2e from line 1			3	1,896,392.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				_
С	Add lines 4a and 4b Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			4c	1,896,392.

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 X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL, STATE, AND LOCAL INCOME TAXES AS A NOT-FOR-PROFIT ORGANIZATION AS DESCRIBED UNDER INTERNAL REVENUE CODE THE ORGANIZATION FILES AN INFORMATIONAL TAX RETURN IN SECTION 501(C)(3). THE U.S. FEDERAL JURISDICTION AND WITH THE KENTUCKY OFFICE OF ATTORNEY HOWEVER, INCOME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO GENERAL. THE ORGANIZATION'S TAX-EXEMPT PURPOSE MAY BE SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME.

AS OF JUNE 30, 2015 AND 2014, THE ORGANIZATION DID NOT HAVE ANY ACCRUED INTEREST OR PENALTIES RELATED TO INCOME TAX LIABILITIES, AND NO INTEREST

OR PENALTIES HAVE BEEN CHARGED TO OPERATIONS FOR THE YEARS THEN ENDED. 432054 10-01-14

Schedule D (Form 990) 2014 JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC. Part XIII Supplemental Information (continued)	Page 5
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
CHANGE IN VALUE OF BENEFICIAL INTEREST IN ASSETS HELD BY	
OTHERS	6,511.
COST OF SPECIAL EVENTS SHOWN GROSS ON AUDITED FINANCIAL	
STATEMENTS	152,814.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	159,325.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
COST OF SPECIAL EVENTS SHOWN GROSS ON AUDITED FINANCIAL	***************************************
STATEMENTS	152,814.
	4

<u>'</u>	

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization	ACUTEURNIC OF REA	TOTAL T	2312 TMG	Employeride	entification number
	ACHIEVEMENT OF KED S. Complete if the organization answ			I line 17. Form 990-E∠	tilers are not
required to complete this part indicate whether the organization rate in a Mail solicitations b Internet and email solicitation c Phone solicitations	art. ised funds through any of the following e Solicitar of the following funds through any of the following funds through any of the following funds through the following funds the following funds through the following funds the following funds the following funds the following funds the following funds the following funds the following funds the following funds the following funds the following funds the following funds the following funds the following funds the following funds the following funds the funds the following funds the funds	ng activitie	s. Check all that apply government grants ernment grants		
 d	Part VII) or entity in connection with p dividuals or entities (fundraisers) purs	orofessiona	l fundraising services	? Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custod 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			
	<u> </u>				
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				
					•
Total		<u> </u>			
List all states in which the organization or licensing.		contributio	ns or has been notified	d it is exempt from re	egistration
	· · · · · · · · · · · · · · · · · · ·				
LHA For Paperwork Reduction Act No	tice, see the Instructions for Form	990 or 990	-EZ. S	Schedule G (Form 9	90 or 990-EZ) 2014

432081 08-28-14

	nedi art	ule G (Form 990 or 990-EZ) 2014 JUNIOR II Fundraising Events. Complete if the	ACHIEVEMENT	OF KENTUCKIA	NA, INC.	Page 2
3.0		of fundraising event contributions and g	ne organization answere ross income on Form 996	u res to Form 990, Par N-F7 lines 1 and 6h List	t IV, line 18, or reported	more than \$15,000
		or tarrelationing of our contributions and g	(a) Event #1	(b) Event #2 BOWLING	(c) Other events	(d) Total events
			HALL OF FAME		4	(add col. (a) through col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	232,768.	139,268.	105,463.	477,499.
	2	Less: Contributions	206,068.	131,907.	100,642.	438,617.
	3	Gross income (line 1 minus line 2)	26,700.	7,361.	4,821.	38,882.
	4	Cash prizes				
"	5	Noncash prizes		8,367.	6,104.	14,471.
Direct Expenses	6	Rent/facility costs	3,477.	3,285.	2,656.	9,418.
	7	Food and beverages	28,126.		1,915.	30,041.
	8	Entertainment	9,150.	4,864.	·	14,014.
	9	Other direct expenses	89,936.	24,923.	9,608.	124,467.
	10 11		! C! (-!)	••• (**********************************		192,411.
Pa		Gaming. Complete if the organization		990. Part IV. line 19. or re		<153,529.
Laster	<u> </u>	\$15,000 on Form 990-EZ, line 6a.		,		
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue		25 777		
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
_	5	Other direct expenses				****
	6	Volunteer labor	Yes% No	☐ Yes % ☐ No	Yes %	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		>	

3208	Schedule G (Form 990 or 990-EZ) 2014
	If "Yes," explain:
l0a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
	If "No," explain:
а	Is the organization licensed to conduct gaming activities in each of these states?
9	Enter the state(s) in which the organization conducts gaming activities:
	Net gaming income summary. Subtract line 7 from line 1, column (d)

Sch	edule G (Form 990 or 990 EZ) 2014 JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.		Page 3
11		Ye	
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?	☐ Ye	s No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility	13b	%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	L	
	Zittor the mane and address of the person wile prepared and engagement of games graphs		
	Name		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Ye	s No
b	olf "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party > \$		
	: If "Yes," enter name and address of the third party:		
•	The foot of the final addition of the final 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?	· L Ye	s L No
k	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 > \$		
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, li	nes 9, 9b	10b, 15b,
<u> </u>	15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).		

Schedule G (Form 990 or 990-EZ)	JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.	Page 4
Schedule G (Form 990 or 990-EZ) Part IV Supplemental Info	ormation (continued)	Fage 4
		* · · · · · · · · · · · · · · · · · · ·

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SCHEDULE J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Em

number

Name of the organization

JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.

Pai	rt Questions Regarding Compensation			
	 	District	Yes	No
t a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
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.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
	Tomin 300 of other digatizations			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
-	organization or a related organization:			
_	Receive a severance payment or change-of-control payment?	4a		Х
a h	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
D	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
U	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	II 165 to any of infest 42 of not the persons and profite a separate			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
_	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
5	contingent on the revenues of:			
_	The organization?	5a		Х
	Any related organization?	5b		X
D	If "Yes" to line 5a or 5b, describe in Part III.			
	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
6				
_	contingent on the net earnings of: The organization?	6a		Х
		6b		X
D	Any related organization?			
_	If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any normal payments	7	Х	gen synty
_	not described in lines 5 and 6? If "Yes," describe in Part III		_ _	10 th 10 th
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	8	969439) -	Х
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		25375	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	9	20 WESS	P. 6500.
	Regulations section 53.4958-6(c)?	J / F =	- 000	

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

Schedule J (Form 990) 2014

JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.

Schedule J (Form 990) 2014

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copie

eeded.

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

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

		(B) Breakdown of \	W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	oe reilis Oe	(a)-(y(a)	in column (b) reported as deferred in prior Form 990
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SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

OMB No. 1545-0047 **2014**

Open To Public Inspection

Employer identification number

Name of the organization

JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.

(a)	etermining			(b)	(a)			
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 - Publicly traded 11 Securities - Partnership, LLC, or 12 trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Commercial 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 ▶ (PRINTING/PROD) 26 Other ▶ (PRINTING/PROD) 27 Other ▶ (PRINTING/PROD) 28 Other ▶ (QIFT CERTIFIC) 3		i .	amounts reported on	contributions or	Check if			
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			ontributions	g the tax year for o	ization durin	ns 8283 received by the organ		
for which the organization completed Form 8283, Part IV, Donee Acknowledgement	00							
	Yes No							
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it		gh 28, that it	oorted in Part I, lines 1 throug	on any property re	y contribution	, did the organization receive t	During the year	30a
must hold for at least three years from the date of the initial contribution, and which is not required to be used for		used for	which is not required to be	al contribution, and	e of the initi	t least three years from the dat	must hold for a	
exempt purposes for the entire holding period?	30a X							
b If "Yes." describe the arrangement in Part II.					***************************************			b
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31 X	utions?	of any non-standard contrib	equires the review	policy that r			
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash								
contributions?	32a X						=	
b If "Yes," describe in Part II.								b
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,		necked,	rty for which column (a) is ch	for a type of prope	column (c)	ion did not report an amount ir	If the organizat	33
describe in Part II.								

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

Schedule M (Form 990) (2014)

Schedule M (Form 990) (2014) JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.	Page 2
Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organic is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also contributions this part for any additional information.	ration nplete
PART I, OTHER TYPES OF PROPERTY:	-
OFFICE SUPPLIES	
(A) CHECK IF APPLICABLE = X	
(B) NUMBER OF CONTRIBUTIONS = 1	
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 4995.	
(D) METHOD OF DETERMINING REVENUE: FAIR MARKET VALUE	M
	·
OTHER	
(A) CHECK IF APPLICABLE = X	
(B) NUMBER OF CONTRIBUTIONS = 1	
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 1722.	
(D) METHOD OF DETERMINING REVENUE: FAIR MARKET VALUE	

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 Open to Public

Inspection

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

n number

JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.
FORM 990, PART VI, SECTION B, LINE 11:
THE FORM 990 IS PRESENTED TO THE FINANCE AND AUDIT COMMITTEE FOR APPROVAL
BEFORE FILING THE RETURN.
FORM 990, PART VI, SECTION B, LINE 12C:
ALL EMPLOYEES AND BOARD MEMBERS COMPLETE AND ANNUALLY UPDATE A CONFLICT OF
INTEREST DECLARATION.
FORM 990, PART VI, SECTION B, LINE 15A:
COMPENSATION OF THE PRESIDENT IS DETERMINED BY THE EXECUTIVE COMMITTEE OF
THE BOARD OF DIRECTORS AND INCLUDES THE USE OF COMPARABILITY DATA PROVIDED
TO THE ORGANIZATION BY JUNIOR ACHIEVEMENT USA.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
CHANGE IN VALUE OF BENEFICIAL INTEREST IN ASSETS HELD BY
OTHERS 6,511.
,

0026463.09

Trey Grayson
Secretary of State
Received and Filed
07/18/2006 12:43:26 PM
Fee Receipt: \$16.00

AMENDED AND RESTATED Fee ARTICLES OF INCORPORATION OF JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.

Pursuant to the provisions of KRS §273.267 and §273.273, the undersigned corporation hereby executes these Amended and Restated Articles of Incorporation.

FIRST: The name of the corporation is Junior Achievement of Kentuckiana, Inc. (the "Corporation").

SECOND: The Articles of Incorporation of the Corporation are hereby amended and restated to read in their entirety as follows:

ARTICLE I NAME

The name of the Corporation shall be: Junior Achievement of Kentuckiana, Inc.

ARTICLE II PURPOSES

The purpose of the Corporation shall be to: [i] educate and inspire young people to value free enterprise, understand business and economics, and be workforce ready; [ii] carry out these activities in the territory assigned by the national organization; [iii] not to realize pecuniary profit inuring to the benefit of any private member or individual; and [iv] all other purposes for which non-profit corporations may be formed pursuant to the provisions of KRS §273.010 et. seq.

ARTICLE III DURATION

The duration of the Corporation shall be perpetual.

ARTICLE IV PRINCIPAL OFFICE; REGISTERED AGENT; REGISTERED OFFICE

The principal place of business of the Corporation shall be in Louisville, Jefferson County, Kentucky. The Registered Agent of the Corporation shall be Debra Humes Hoffer and the Registered Office shall be located at 1401 W. Muhammad Ali Boulevard, Louisville, Kentucky 40203.

ARTICLE V BOARD OF DIRECTORS

The business and affairs of the Corporation shall be governed by a Board of Directors. A member of the Board of Directors may resign upon notice to the Corporation or may be removed from office by the Board of Directors with or without cause. The names and mailing addresses of the current members of the Board of Directors are:

Name

Lisa K. Aly

Jill Anderson

Mary Beth Arnett

Debbie Barmore

Marty L. Bell

Bethann I. Bertucci

M. Joseph Bisig

Theresa A. Canaday

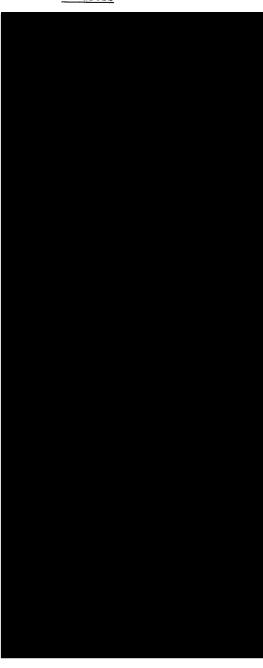
Richard F. Carrico

Scott Casey

Wendy R. Chapman

Kelly Collins

Address



Robert A. Davenport

Nancy B. Davis

Anne S. Dawson

Ronald J. Dieckman

Leah A. Eggers

Sanford L. Fleck

Scott Flynn

Stan Franczek

Clinton L. Glasscock

Donald L. Gossman

Aaron R. Hazzard

William S. Heinz, Jr.

Dennis P. Heishman

Doug Helm

John Hill



Tammy G. Hodges Adrianne Johnson Kevin Joynt Cindy Kanning Donald J. Kelly Mark E. Klein Christopher J. Kramer R. Miles Lee, Jr. Douglas H. Madison Dee Maynard William Mitchell Todd L. Phillips Philip S. Poindexter David A. Rink J. Daniel Rivers

Charles Robello James W. Robinson James R. Rucker Dale Schaefer Robert M. South Todd Spencer Todd Spurgeon Kathi Stearman William E. Summers V Kelly Sweasy Berard Tomassetti William P. Tompkins III Jeff Uligian Wendy C. Welsh Mimi Zinniel

ARTICLE VI MEMBERS

The Members of the Corporation shall be all persons or organizations who contribute annually to the Corporation a sum of One Hundred Dollars (\$100.00) or more. All Members of the Corporation may attend the Annual Meeting and any Special Meetings of the Corporation, and shall be entitled to vote at, in person or by proxy, and to receive notice of such Meetings.

ARTICLE VII INDEMNITY

Each person who is or was a member, director, trustee, or officer of the Corporation, whether elected or appointed, and each person who is or was serving at the request of the Corporation as a member, director, trustee, or officer of another corporation, whether elected or appointed (including, in either such case, the heirs, executors, administrators, or estate of any such person), shall be indemnified by the Corporation to the full amount against any liability, and the reasonable cost or expense (including attorneys' fees, monetary or other judgments, fines, excise taxes, or penalties and amounts paid or to be paid in settlement) incurred by such person in such person's capacity as a member, director, trustee, officer, or employee or arising out of such person's status as a member, director, trustee, officer, or employee; provided, however, no such person shall be indemnified against any such liability, cost, or expense incurred in connection with any action, suit, or proceeding in which such person shall have been adjudged liable on the basis that personal benefit was improperly received by such person, or if such indemnification would be prohibited by law. Such right of indemnification shall be a contract right and shall include the right to be paid by the Corporation the reasonable expenses incurred in defending any threatened or pending action, suit, or proceeding in advance of its final disposition; provided, however, that such advance payment of expenses shall be made only after delivery to the Corporation of an undertaking by or on behalf of such person to repay all amounts so advanced if it shall be determined that such person is not entitled to such indemnification. Any repeal or modification of this Article shall not affect any rights or obligations then existing. If any indemnification payment required by this Article is not paid by the Corporation within ninety (90) days after a written claim has been received by the Corporation, the member, director, trustee, officer, or employee may at any time thereafter bring suit against the Corporation to recover the unpaid amount and, if successful in whole or in part, such person shall be entitled to be paid also the expense of prosecuting such claim. The Corporation may maintain insurance, at its own expense, to protect itself and any such person against any such liability, cost, or expense, whether or not the Corporation would have the power to indemnify such person against such liability, cost, or expense under the Kentucky Nonprofit Corporation Act or under this Article, but it shall not be obligated to do so. The indemnification provided by this Article shall not be deemed exclusive of any other rights which those seeking indemnification may have or hereafter acquire under any bylaw, agreement, statute, vote of members or board of directors, or otherwise. If this Article or any portion thereof shall be invalidated on any ground by any court of competent jurisdiction, then the Corporation shall nevertheless indemnify each such person to the full extent permitted by any applicable portion of this Article that shall not have been invalidated or by any other applicable law.

THIRD: The foregoing amendment and restatement was adopted by the affirmative vote of a majority of the Members of the Board of Directors of the Corporation present at the Annual Meeting of the Board of Directors and, upon recommendation by the Board of Directors, by an affirmative vote of at least two-thirds (2/3rds) of the Members of the Corporation present at the Annual Meeting of the Members, in each instance on June 27, 2002, at which meeting a quorum was present, pursuant to KRS §273.263 and §273.273.

FOURTH: These Amended and Restated Articles of Incorporation shall be effective as of the date filed in the Office of the Secretary of State for the Commonwealth of Kentucky.

FIFTH: The following Articles have been amended to read in their entirety as set forth herein: Articles I, IV, V, and VI.

SIXTH: The foregoing Amended and Restated Articles of Incorporation were duly adopted as required by law, correctly set forth without change the corresponding provisions of the Articles of Incorporation as heretofore and herein amended, and supersede the original Articles of Incorporation and all prior amendments thereto.

Dated as of June 22, 2006.

JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.

Debra Humes I

President

Form W-9

(Flov. January 2002)

Department of the Treasury Internal Sevenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not sand to the IRS.

e 22	Junior Achievement of Kentuckiana
page	Business name, if different from above
6	
type	Check appropriate box: Sole proprietor Corporation Partnership Other Non-Profit withholding
Print or type Specific Instructions	Address (number, street, and apt. or suite no.) 1401 W. Muhammad Ali Boulevard Louisville Metro Council
peclí	Louisville XY 40203
See S	List account number(s) here (optional)
Par	Taxpayer Identification Number (TIN)
Howe page see F	your TIN in the appropriate box. For individuals, this is your social security number (SSN). ever, for a resident alian, solo proprietor, or disregarded entity, see the Part Linstructions on 2. For other entitles, it is your employer identification number (EIN). If you do not have a number, or let the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in more than one name, see the chart on page 2 for guidelines on whose number of the account is in the account is in the account in the account in the account is in the account in the account in the account is in the account in the account in the account is in the account in the account in the account is in the account in the a
Par	Certification Certification
Unde	er penalties of perjury, I certify that:
1 7	ha number shows on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
Fi N	arn not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the internal exercise (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
3, 1	am a U.S. person (including a U.S. resident alien).
willar	affication instructions. You must cross out Item 2 above If you have been notified by the IRS that you are currently subject to backup including because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply, nortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement igement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must

Sign Hete Signature of U.S. person

ose of Form

provide your correct TIN. (See the instructions on page 2.)

Purpose of Form

A person who is required to file an information return with the tRS must get your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person findleding a resident alien), to give your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify the TIN you are giving is correct for you are waiting for a number to be issued).
- 2. Certify you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

If you are a foreign person, use the appropriate Form W-8. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities.

Note: If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

What is blackup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 30% of such payments after December 31, 2001 (29% after December 31, 2003). This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding If:

- 1. You do not furnish your TIN to the requester, or
- You do not certify your TIM when required (see the Part II instructions on page 2 for details), or
- The IRS tells the requester that you furnished an incorrect TIN, or
- The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or

 You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See the instructions on page 2 and the separate Instructions for the Requester of Form W-9.

Penalties

Dale 🕨

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a lake statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of Federal law, the requester may be subject to civil and criminal penalties.

General Information

Organization Number

0026463

Name

JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC.

Profit or Non-Profit

N - Non-profit

Company Type

KCO - Kentucky Corporation

Status

A - Active

Standing

G - Good

State

KY

File Date

8/3/1950

Organization Date

8/3/1950

Last Annual Report

3/9/2016

Principal Office

1401 W. MUHAMMAD ALI BOULEVARD

LOUISVILLE, KY 40203-1745

Registered Agent

DEBRA HUMES HOFFER

1401 W. MUHAMMAD ALI BLVD

LOUISVILLE, KY 40203

Current Officers

President

Debra Humes Hoffer

Vice President

DEBBIE DALTON

Secretary

ANN JOSEPH

Director

Nancy B. Davis

Director

BERARD TOMASSETTI

Director

BRYAN TAYLOR

Individuals / Entities listed at time of formation

Director

LF BABBITT

Director

DOUGLAS CORNETTE

Director

W F COSLON

Director

LH DONLEY

Director

ROBT E GUFFY

Incorporator

DOUGLAS D CORNETTE

Incorporator

WALTER H GIRDLER IR

Incorporator

ROBT E GUFFY

Images available online

Documents filed with the Office of the Secretary of State on September 15, 2004 or thereafter are available as scanned images or PDF documents. Documents filed prior to September 15, 2004 will become available as the images are created.

<u>Annual Report</u>	3/9/2016	1 page	<u>tiff</u>	
<u>Annual Report</u>	4/6/2015	1 page	<u>tiff</u>	
<u>Annual Report</u>	3/7/2014	1 page	tiff	

PDF PDF PDF Organization ID# 0026463 State of origin

Commonwealth of Kentucky Filing fee \$15.00 Alison Lundergan Grimes, Secretary of State



Alison Lundergan Grimes Secretary of State P. O. Box 1150 Frankfort, KY 40602-1150 (502) 564-3490 http://www.sos.ky.gov

2017 Annual Report Due June 30, 2017

ARP

Exact organization name and principal office address JUNIOR ACHIEVEMENT OF KENTUCKIANA, INC. 1401 W. MUHAMMAD ALI BOULEVARD **LOUISVILLE KY 40203-1745**

The principal office address and registered agent name/office address cannot be changed on this form. You can file online at app.sos.ky.gov/ftsearch or forms can be downloaded from our website.

Registered Agent and Registered Office Address

DEBRA HUMES HOFFER 1401 W. MUHAMMAD ALI BLVD LOUISVILLE, KY 40203

Vice President	DESDIE DA TON			
	DEBBIE DALTON		21% V 24.	
Secretary	ANN JOSEPH			
Directors - Non-profit corpositice address.	porations must have at least three (3) direct	ors. All directors of the non-profit must	be listed. If not specified, director addresses default	to the principal
NANCY B. DAVIS				
BERARD TOMASSE	TTI			
BRYAN TAYLOR				
5 W. W. W. W. W. W. W. W. W. W. W. W. W.				
X				

TO AVOID A PENALTY FEE OF \$100, SAVE TIME, FILE ONLINE: http://app.sos.ky.gov/arp/0026463 OR sign and return to the Office with the required \$15.00 filing fee no later than June 30, 2017 To file via mail:

- Confirm the information is correct.
- Make changes by writing on this annual report, or by submitting an attachment with the signed report.
- The signed annual report, any attachments and filing fee (payable to the Kentucky State Treasurer) must be received in the Office by
- If filing online, do not return this annual report or submit payment,

OVER 10: OVER 1
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FINANCIAL STATEMENTS

Years Ended June 30, 2016 and 2015

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Independent Auditors' Report

To the Board of Directors Junior Achievement of Kentuckiana, Inc. Louisville, Kentucky

We have audited the accompanying financial statements of Junior Achievement of Kentuckiana, Inc. (a nonprofit organization), which comprise the statements of financial position as of June 30, 2016 and 2015, and the related statements of activities, functional expenses, and cash flows for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Junior Achievement of Kentuckiana, Inc. as of June 30, 2016 and 2015, and the changes in its net assets and its cash flows for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Dening, Malone, Therapy & Ostroff

Louisville, Kentucky September 19, 2016

STATEMENTS OF FINANCIAL POSITION

June 30, 2016 and 2015

Assets	2016	2015
Current Assets		
Cash and cash equivalents	\$ 143,284	\$ 155,858
Investments	2,190,167	2,246,932
Pledges receivable - net	108,582	182,354
Prepaid assets	11,966	10,160
Total current assets	2,453,999	2,595,304
Long-Term Assets		
Beneficial interest in assets held by others	213,922	240,538
Fixed assets - net	1,761,658	1,842,190
Total long-term assets	1,975,580	2,082,728
Total assets	\$ 4,429,579	\$ 4,678,032
Liabilities and Net Assets		
Current Liabilities		
Accounts payable	\$ 22,336	\$ 32,468
Accrued expenses	56,469	70,550
Total current liabilities	78,805	103,018
Net Assets		
Unrestricted net assets	1,857,435	1,986,118
Board designated net assets	2,404,089	2,487,470
Total unrestricted net assets	4,261,524	4,473,588
Temporarily restricted net assets	89,250	101,426
Total net assets	4,350,774	4,575,014
Total liabilities and net assets	\$ 4,429,579	\$ 4,678,032

STATEMENTS OF ACTIVITIES Years Ended June 30, 2016 and 2015

			2016					2015		
	Unrestricted	Board Designated	Total Unrestricted	Temporarily Restricted	Total	Uhrestricted	Board	Total	Temporarily	
Public Support and Revenues						Dincoln Company	Congridica	Ollicshireted	RESILICIED	lotal
Contributions:										
Corporate	\$ 729,746		\$ 729,746	\$ 60,750	\$ 790,496	\$ 697,703		\$ 697,703	\$ 29,100	\$ 726.803
יי י י י י י י י י י י י י י י י י י י	152,679	\$ 1,390	154,069	21,000	175,069	183,032		183,032	450	183 487
Foundations	335,350		335,350	7,500	342,850	243,594		243,594	301.220	544.814
Total contributions	1,217,775	1,390	1,219,165	89,250	1.308.415	1.124.329		1 124 329	330 770	1 455 000
Special events - net of cost of direct benefit to donors								(36,121,1	011,000	1,433,099
of \$62,093 in 2016 and \$39,598 in 2015	351,692		351.692		351,692	343 947		313 017		4,000
Governmental income	9,500		9.500		005 6	105		146,040		343,947
Investment income	28,960	40.557	215 69		69 517	305	305 67 305	193		195
Unrealized loss on investments		(34,468)	(34,468)		(34.468)		(13.971)	02,690		62,690
Realized (loss) gain		(12,854)	(12,854)		(12.854)		30 715	(17,67)		(13,9/1)
In-kind contributions	378,674		378 674		378 674	869 600	07,113	57,713		39,715
Other income	5,793		5 793		5,075	0/0,/04		40,,07		407,678
Change in value of beneficial interest in					0,00	4,00,4		4,8,4		4,824
assets held by others		(78,006)	(300.80)		(300 90)		110			
Net assets released from restriction	151,426	(50,000)	101.426	(101.426)	(50,000)	321 434	0,511	6,511	(221 424)	6,511
Total public support and revenues	2 143 820	(62 201)	3 050 430	(19.130)	270 070	101,120		177,174	(321,434)	
	2,140,020	(105,201)	7,000,439	(17,1/6)	2,048,263	2,202,712	94,640	2,297,352	9,336	2,306,688
Expenses										
Program expense	1,584,993		1,584,993		1,584,993	1,486,945		1,486,945		1 486 945
Management and general expense	223,740		223,740		223,740	203,450		203,450		203,245
rundraising and special events expense	443,924		443,924		443,924	435,511		435,511		435 511
Loss on disposal of fixed assets	19,846		19,846		19,846	1,217		1,217		1.217
Total expenses	2,272,503		2,272,503		2,272,503	2,127,123		2,127,123		2,127,123
Change in net assets	(128,683)	(83,381)	(212,064)	(12,176)	(224,240)	75,589	94,640	170,229	9,336	179,565
Net assets, beginning of year	1,986,118	2,487,470	4,473,588	101,426	4,575,014	1,910,529	2,392,830	4,303,359	92,090	4,395,449
Net assets end of year	£ 1 957 135	0 7 404 080								
יונר בייסטיים מונר כן לכמו	1,027,453	2,404,089	\$ 4,261,524	\$ 89,250	\$ 4,350,774	\$ 1,986,118	\$ 2,487,470	\$ 4,473,588	\$ 101,426	\$ 4,575,014

STATEMENTS OF FUNCTIONAL EXPENSES

Years Ended June 30, 2016 and 2015

						•••			
						2016	draising		
	****	Program	N 2	Ianagement and General	t 	General Fundraising		Special Events	– Total
Personnel Staff training and travel Program materials and fees Facility Office Subscriptions and dues General insurance Public relations Depreciation Direct event costs Miscellaneous	\$	30,705 362,455 141,188 57,997 480 1,723 186,270 123,814	·	167,302 1,230 5,889 37,421 3,010 72 5,165 3,651	•	5,889 12,343 468 72 5,165 2,668	\$	7,750 134,908	\$ 1,115,346
Total	<u>\$</u>	1,584,993	<u>\$</u>	223,740	\$	301,266	\$ 1	42,658	\$ 2,252,657
						2015	• •		
			Ma	nagement	-	Fundr General			
		Program	ane	d General	F	Sundraising	-	pecial vents	Total
Personnel Staff training and travel Program materials and fees	\$	613,235 19,429 336,801	\$	144,921 2,103	\$	249,204 7,694			\$ 1,007,360 29,226
Facility Office		141,453		5,900		. 5,900			336,801
Subscriptions and dues		58,364		37,018		12,673			153,253 108,055
General insurance		50 12,562		575		2,218			2,843
Public relations		208,200		524		524			13,610
Depreciation		96,851		4,040	•	4.040	\$	9,033	217,233
Bad debt expense		.,		5,460		4,040			104,931
Direct event costs				2,100			14	3,781	5,460
Miscellaneous				2,909		444		J,761	143,781 3,353
Total	\$ 1	,486,945	\$	203,450	\$	282,697	\$ 152	2,814	\$ 2,125,906

STATEMENTS OF CASH FLOWS

Years Ended June 30, 2016 and 2015

	2016	2015
Cash Flows from Operating Activities		
Contributions and other income received	\$ 1,396,090	\$ 1,363,781
Cash received from special events	413,785	343,947
Investment income received	28,960	305
Cash paid to suppliers and employees	(1,827,951)	(1,605,948)
Net cash provided by operating activities	10,884	102,085
Cash Flows from Investing Activities		
Purchases of fixed assets	(73,458)	(242,146)
Purchases of investments	(334,992)	(556,168)
Proceeds from sale of investments	384,992	556,168
Net cash used in investing activities	(23,458)	(242,146)
Net decrease in cash and cash equivalents	(12,574)	(140,061)
Cash and cash equivalents, beginning of year	155,858	295,919
Cash and cash equivalents, end of year	\$ 143,284	\$ 155,858

	•	2016		2015
Reconciliation of Change in Net Assets to Net Cash Provided by Operating Activities				
Change in net assets	\$	(224,240)	\$	179,565
Adjustments to reconcile change in net assets to net cash provided by operating activities:				
Depreciation Bad debt expense		134,144		104,931 5,460
Investment income reinvested		(40,557)		(62,385)
Unrealized loss on investments		34,468		13,971
Realized loss (gain)		12,854		(39,715)
Contributions to assets held by others		(1,390)	,	
Change in value of beneficial interest in assets held by others		28,006		(6,511)
Loss of disposal of fixed assets		19,846		1,217
Changes in assets and liabilities:				
(Increase) decrease in:				
Pledges receivable		73,772		(101,797)
Prepaid assets		(1,806)		(32)
Increase (decrease) in:				
Accounts payable		(10,132)		(11,000)
Accrued expenses		(14,081)	·	18,381
Total adjustments		235,124		(77,480)
Net cash provided by operating activities	\$	10,884	<u>\$</u>	102,085
Supplemental Disclosure of Cash Flow Information				
Purchases of property and equipment in accounts payable			\$	19,598

NOTES TO FINANCIAL STATEMENTS

Note 1. Description of Organization and Summary of Significant Accounting Policies

Description of Organization:

Junior Achievement of Kentuckiana, Inc. (Organization) is a not-for-profit organization formed for the purpose of educating elementary, middle and high school students in the areas of free enterprise, business economics and workplace preparation. The Organization serves the Greater Louisville area, including Jefferson, Hardin, Bullitt, Shelby and other surrounding counties in Kentucky and Southern Indiana. The Organization is supported primarily through donor contributions.

Summary of significant accounting policies:

This summary of significant accounting policies of Junior Achievement of Kentuckiana, Inc. is presented to assist in understanding the Organization's financial statements. The financial statements and notes are the representations of the Organization's management who is responsible for the integrity and objectivity of the financial statements. These accounting policies conform to accounting principles generally accepted in the United States of America and have been consistently applied in the preparation of the financial statements.

Net asset classification:

Resources are classified for accounting and reporting purposes into the following three net asset classes according to externally imposed restrictions:

Unrestricted net assets – Unrestricted net assets are not subject to any donor-imposed restrictions. Unrestricted net assets include assets designated by the board for particular purposes.

Temporarily restricted net assets – Temporarily restricted net assets include net assets whose use by the Organization is limited by donor-imposed restrictions that either expire by the passage of time or that can be fulfilled or removed by actions of the Organization pursuant to those stipulations.

Permanently restricted net assets – Permanently restricted net assets include net assets whose use is limited by donor-imposed stipulations that neither expire with the passage of time nor can be fulfilled or otherwise removed by actions of the Organization.

Contributions:

Contributions other than cash are recorded at their fair market value as of the date of donation. Contributions of long-lived assets with explicit restrictions that specify how the assets are to be used and donations of cash or other assets that must be used to acquire long-lived assets are reported as restricted support. Absent explicit donor stipulations about how long those long-lived assets must be maintained, the Organization reports expirations of donor restrictions when the contributed or acquired long-live assets are place in service.

Donated goods are recorded at fair market value in the period received. Donated services that create or enhance non-financial assets or that require specific expertise and would normally have been purchased are recorded at fair market value in the period received.

The Organization treats donor restricted contributions whose restrictions are met in the same reporting period as unrestricted support.

Cash and cash equivalents:

For purposes of the statement of cash flows, the Organization considers all highly liquid investments with an initial maturity of three months or less to be cash equivalents.

Investments and credit risk:

Investments are recorded at fair market value. Donated investments are recorded at their fair market value as of the date received. See Note 5 for discussion of fair value measurements.

The Organization has significant investments in common stocks, mutual funds and bonds held by an investment manager and is, therefore, subject to concentrations of credit risk. Investments are made by the investment managers and the investments are monitored by the Board of Directors. Though the market value of investments is subject to fluctuations on a year-to-year basis, management believes the investment policy is prudent for the long-term welfare of the Organization.

Pledges receivable:

The valuation of pledges receivable is based on a detailed analysis of past due pledges and the history of uncollectible pledges. The Organization periodically reviews doubtful pledges receivable to determine if write-offs are necessary.

Fixed assets:

Fixed assets are recorded at cost, if purchased, or at fair market value as of the date of donation, if donated. The Organization's policy is to capitalize asset purchases exceeding \$1,000 with a useful life greater than one year. Depreciation is computed on the straight-line method over the estimated useful lives of the assets ranging from three to forty years. Depreciation expense for the years ended June 30, 2016 and 2015, was \$134,144 and \$104,931, respectively.

Income taxes:

The Organization is exempt from federal, state, and local income taxes as a not-for-profit organization described under Internal Revenue Code Section 501(c)(3). The Organization files an informational tax return in the U.S. federal jurisdiction and with the Kentucky Office of Attorney General. However, income from certain activities not directly related to the Organization's tax-exempt purpose may be subject to taxation as unrelated business income.

As of June 30, 2016 and 2015, the Organization did not have any accrued interest or penalties related to income tax liabilities, and no interest or penalties have been charged to operations for the years then ended.

Estimates:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Advertising:

Advertising costs are expensed as incurred. Advertising expense for the years ended June 30, 2016 and 2015 is \$151,550 and \$121,330, respectively, inclusive of in-kind contributions of \$147,940 and \$119,873 for the years ended June 30, 2016 and 2015, respectively.

Newly issued standards not yet effective:

The Financial Accounting Standards Board has issued accounting standard No. 2016-02, *Leases*, concerning the accounting for leases effective for years beginning after December 15, 2019, and No. 2016-14, *Not-for-Profit Entities: Presentation of Financial Statements of Not-for-Profit Entities* effective for years beginning after December 15, 2017. The Organization is evaluating the impact that adoption of the standards will have on future financial position and results of operations.

Subsequent events:

Subsequent events have been evaluated through September 19, 2016, which is the date the financial statements were available to be issued.

Note 2. Pledges Receivable

Total pledges receivable as of June 30, 2016 and 2015 are as follows:

	<u>2016</u>	<u>2015</u>
Pledges receivable Less allowance for uncollectible pledges	\$111,709 (3,127)	\$187,954 (5,600)
Pledges receivable - net	\$108,582	<u>\$182,354</u>
Amounts due in: Less than one year	<u>\$111,709</u>	<u>\$187,954</u>

One donor accounts for approximately 18% and 24% of the total gross pledges receivable of \$111,709 and \$187,954 as of June 30, 2016 and 2015, respectively.

Note 3. Investments

Cost and market value of investments consist of the following as of June 30, 2016 and 2015:

		2016	
			Unrealized
		Market	Appreciation
	Cost	<u>Value</u>	(Depreciation)
Cash equivalents	\$ 56,049	\$ 56,049	
Common stocks	893,469	1,070,265	\$176,796
Mutual funds	567,609	565,233	(2,376)
Government bonds	178,185	181,371	3,186
Corporate bonds	310,465	317,249	6,784
	\$2,005,777	<u>\$2,190,167</u>	<u>\$184,390</u>
		2015	
		Market	Unrealized
	Cost	Value	Appreciation
Cash equivalents	\$ 35,592	\$ 35,592	
Common stocks	924,706	1,075,831	\$151,125
Mutual funds	682,138	744,746	62,608
Government bonds	75,037	76,004	967
Corporate bonds	310,601	314,759	4,158
	<u>\$2,028,074</u>	<u>\$2,246,932</u>	<u>\$218,858</u>

Investment income reported in the accompanying statements of activities is net of investment fees. Such investment expenses totaled \$15,895 and \$16,270 for the years ended June 30, 2016 and 2015, respectively.

Note 4. Beneficial Interest in Assets Held by Others

The Organization is an income beneficiary of certain funds held at various community foundations. These accounts were created by an irrevocable transfer of funds from the Organization to the community foundations to establish other means for donors to make contributions to support the Organization. The agreements with the community foundations call for annual distributions to the Organization in accordance with the foundations' distribution policies.

Beneficial interest in assets held by others at June 30, 2016 and 2015 is summarized as follows:

	<u>2016</u>	<u>2015</u>
Beneficial interest in assets held by the Community Foundation of Louisville, Inc.	\$ 15,742	\$ 16,326
Beneficial interest in assets held by the Harrison County Community Foundation, Inc.	191,824	217,530
Beneficial interest in assets held by the Community Foundation of Southern Indiana, Inc.	6,356	6,682
	<u>\$213,922</u>	<u>\$240,538</u>

Note 5. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The three levels of the fair value hierarchy are described as follows:

- Level 1 Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets.
- Level 2 Inputs to the valuation methodology include: quoted prices for similar assets or liabilities in active or inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means.
- Level 3 Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The Organization's Level 1 and Level 2 assets have been valued using a market approach. Level 3 assets have been valued using the income approach. Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in methodologies used at June 30, 2016 and 2015.

Cash equivalents, common stocks, mutual funds and corporate bonds – valued at the closing price reported in the active market in which the security is traded.

Government bonds – valued based on quoted prices for similar assets from observable pricing sources.

Beneficial interest – valued at the discounted cash flow of future income based on quoted market prices or value as determined by the fund manager of the underlying assets held by the community foundations.

The following table sets forth by level, within the fair value hierarchy, the Organization's assets measured at fair value as of June 30, 2016 and 2015:

		June 3	0, 2016	
	Level 1	Level 2	Level 3	Total
Investments:				
	Φ <i>EC</i> 040			
Cash equivalents Common stocks:	\$ 56,049			\$ 56,049
	100 451			
Energy	80,451			80,451
Industrials	77,523			77,523
Consumer discretionary	175,145			175,145
Consumer staples	83,023			83,023
Financials	222,361			222,361
Technology	202,603			202,603
Healthcare	148,343			148,343
Other	80,816			80,816
Mutual funds:				,
Mid cap blend	38,514			38,514
Mid cap value	62,930			62,930
Small cap value	92,393			92,393
International	144,849			144,849
Real estate	40,715			40,715
Fixed income	185,832			185,832
Government bonds	100,002	\$181,371		181,371
Corporate bonds	317,249	Ψ101,571		<u>317,249</u>
, and a second	2,008,796	181,371		
Beneficial interest in assets held	2,000,700	101,571		2,190,167
by others			<u>\$213,922</u>	212 022
-y			<u> 4413,722</u>	213,922
	\$2,008,796	<u>\$181,371</u>	\$213,922	<u>\$2,404,089</u>

		June 3	0, 2015	
	Level 1	Level 2	Level 3	Total
Investments:				
Cash equivalents	\$ 35,592			\$ 35.592
Common stocks:	~ 00,00m			\$ 35,592
Energy	98,465			98,465
Industrials	79,629			79,629
Consumer discretionary	211,538			211,538
Consumer staples	61,520			61,520
Financials	156,125			156,125
Technology	208,129			208,129
Healthcare	184,709			184,709
Other	75,716			75,716
Mutual funds:	•			70,710
Mid cap blend	88,532			88,532
Mid cap value	74,206			74,206
Small cap value	124,731			124,731
International	166,439			166,439
Real estate	38,485			38,485
Fixed income	252,353			252,353
Government bonds		\$76,004		76,004
Corporate bonds	<u>314,759</u>			314,759
	2,170,928	76,004		2,246,932
Beneficial interest in assets held			\$240,538	240,538
by others		*************************************	<u>\$2 10,550</u>	
	<u>\$2,170,928</u>	<u>\$76,004</u>	<u>\$240,538</u>	<u>\$2,487,470</u>

The following table sets forth a summary of the changes in the fair value of the Organization's Level 3 assets for the year ended June 30, 2016 and 2015:

	<u>2016</u>	<u>2015</u>
Balance, beginning of year Contributions Change in value of beneficial interest	\$240,538 1,390	\$234,027
in assets held by others	(28,006)	6,511
Balance, end of year	<u>\$213,922</u>	\$240,538

Note 6. Endowment

The Organization's endowment funds consist of investments held at Stock Yards Bank (SYB) and beneficial interest in assets held at various community foundations. As required by generally accepted accounting principles, net assets associated with endowment funds, including funds designated by the Board of Directors to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions.

The Organization's endowment funds are board-designated. As of June 30, 2016 and 2015, unrestricted, board-designated net assets were \$2,404,089 and \$2,487,470, respectively.

Changes in endowment net assets for the years ended June 30, 2016 and 2015 are as follows:

	<u>2016</u>	<u>2015</u>
Endowment net assets, beginning of year	\$2,487,470	\$2,392,830
Contributions Transfers - operations Investment return:	1,390 (50,000)	
Investment income Realized (loss) gain Unrealized loss Change in value of beneficial interest in	40,557 (12,854) (34,468)	62,385 39,715 (13,971)
assets held by others	(28,006)	6,511
Endowment net assets, end of year	<u>\$2,404,089</u>	<u>\$2,487,470</u>

Interpretation of relevant law:

The Organization has interpreted the Kentucky Uniform Prudent Management of Institutional Funds Act (UPMIFA) as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As of June 30, 2016 and 2015, the Organization has no donor-restricted endowment funds.

Investment policy:

The Organization's Board of Directors does not have input or authority over the nature and type of investments held by others at various community foundations. The fund managers of these funds have sole discretion over the investment allocation. The Organization has adopted an investment policy for its board-designated endowment assets that is intended to provide a predictable stream of funding to programs supported by its endowment while seeking to maintain the purchasing power of the endowment assets.

Except for the Organization's beneficial interest in assets held by others, the Finance and Audit Committee of the Board of Directors has the responsibility for development of the investment objectives and guidelines, the selection of the investment managers (Managers), and the regular monitoring of the Managers' performance to help assure the effectiveness of the objectives and to initiate modification of changes, as needed.

Under this policy, as approved by the Board of Directors, the board-designated endowment assets are managed by investment managers selected by the Board of Directors and are invested in equity and fixed income securities that are intended to provide a balance that will enhance a total return while avoiding undue risk from concentration in any single asset class or investment style. The Organization expects its endowment funds, over time, to provide total return, net of fees, to meet or exceed 5% inflation.

To satisfy its long-term rate-of-return objectives, the Organization relies on a total return strategy in which investment returns are achieved through both capital appreciation (realized and unrealized) and current yield (interest and dividends). The Organization has established and monitors a diversified asset allocation, including a target equity position, fixed income position, and cash equivalents exposure.

Spending policy:

Distributions from the beneficial interest in assets held by the community foundation are subject to the distribution policy of the respective community foundation. These distributions are utilized to fund the Organization's programs.

Cash distributions from the SYB endowment fund are also used exclusively to fund the Organization's programs. Distributions to the Organization are equal to 5% of the average market value of the endowment fund over a three year moving average period, with the understanding that this distribution rate over the long-term will not exceed total real return (return net of inflation) from investments. This distribution occurs on the first day of the fiscal year's third quarter. During the year ended June 30, 2016, a net distribution of \$50,000 was made from the SYB endowment fund. During the year ended June 30, 2015, the Board agreed to temporarily suspend these distributions; accordingly, no distribution was made from the SYB endowment fund for the year ended June 30, 2015.

Note 7. Fixed Assets

Fixed assets consist of the following at June 30, 2016 and 2015:

	<u>2016</u>	<u>2015</u>
Furniture and equipment Leasehold improvements and fixtures Less accumulated depreciation	\$ 607,060 <u>2,441,021</u> 3,048,081 <u>(1,286,423)</u>	\$ 555,274 <u>2,447,289</u> 3,002,563 <u>(1,160,373)</u>
	<u>\$ 1,761,658</u>	<u>\$ 1,842,190</u>

Note 8. Changes in Temporarily Restricted Net Assets

Temporarily restricted net assets consist of the following at June 30, 2016 and 2015:

	2016	<u>2015</u>
Purchases of capital items Contributions for next fiscal year	<u>\$89,250</u>	\$ 64,376 37,050
	<u>\$89,250</u>	<u>\$101,426</u>

Note 9. Operating Leases

The Organization leases certain office equipment under operating leases with lease terms expiring through April 2017. Minimum lease payments under these leases at June 30, 2016 are \$5,319 for the year ending June 30, 2017.

Total rent expense under the leases for the years ended June 30, 2016 and 2015 was \$6,383 and \$10,361, respectively.

Note 10. Pension Plan

The Organization offers participation in a noncontributory defined benefit pension plan (Plan) to its employees. The Plan is administered by Junior Achievement USA® and covers all full-time employees of Junior Achievement USA, JA Worldwide, Inc., and participating Junior Achievement chapters in the United States. The Plan is accounted for like a multi-employer plan. Benefits are determined based on years of service and salary history. The Plan's assets are invested in various investment funds. The respective participants' employers are required to fund the Plan, as determined necessary by Junior Achievement USA's Board of Directors, based on an annual actuarial valuation. The Organization makes contributions equal to 16.75% of participants' eligible compensation. Additionally, the Plan requires that participating members who withdraw from the Plan remain liable for any previous funding obligations under the Plan. Accordingly, the Organization recognizes, as net pension cost, the required contribution for the period and recognizes, as a liability, any contributions due and unpaid. There is no recognition of the funded status of the Plan in the financial statements of the Organization.

Junior Achievement USA® uses a June 30 measurement date for the Plan. Significant balances are:

	<u>2016</u>	<u>2015</u>
Benefit obligation Fair value of plan assets	\$81,344,372 _55,068,370	\$77,147,902 _54,503,578
Underfunded status	<u>\$26,276,002</u>	<u>\$22,644,324</u>
Accumulated benefit obligation	<u>\$74,857,471</u>	<u>\$70,170,258</u>

The risks to the Organization of participating in this multiemployer pension plan are different from single-employer plans in the following aspects:

- Assets contributed to the multiemployer plan by one employer may be used to provide benefits to employees of other participating employers.
- If a participating employer stops contributing to the plan, the unfunded obligations of the plan may be borne by the remaining participating employers.
- If the Organization chooses to stop participating in the multiemployer plan, the Organization may be required to pay the plan an amount based on the underfunded status of the plan, referred to as a withdrawal liability.

The Organization's participation in this plan for the annual periods ended June 30, 2016 and 2015 is outlined in the table below. The "EIN/Pension Plan Number" column provides the Employee Identification Number (EIN) and the three-digit plan number of the Plan. The Plan's funded status available in 2016 and 2015 is for years ended June 30, 2016 and 2015, respectively. There have been no significant changes that affect the comparability of 2016 and 2015 contributions.

Pension Fund	EIN / Pension Plan <u>Number</u>	<u>Funded</u> 2016	<u>Status</u> <u>2015</u>	_	zation's butions 2015
Retirement Plan for Employees of Junior Achievement USA	13-1635270 PN 333	68%	71%	\$95,014	\$88,836

The Organization was listed in its Plan's Form 5500 as providing more than 5% of the total contributions for the June 30, 2016 and 2015 plan years.

Note 11. Transactions with the National Office of Junior Achievement

A license fee is paid to the National Office of Junior Achievement based on the following percentages of operating fund contributions:

Up to \$300,000	9.0%
Over \$300,000	1.8%

In addition, the Organization also purchases all of its program materials from the National Office.

The following is a summary of the transactions with the National Office of Junior Achievement:

	<u>2016</u>	<u>2015</u>
License fee	\$ 51,452	\$ 49,320
Classroom materials and insurance purchased	140,572	141,131
Capstone student license fees	37,607	37,965