EXTENDED TO MAY 16, 2022

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

Department of the Treasury Internal Revenue Service

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



ΑΙ	For the	e 2020 calendar year, or tax year beginning JUL 1, 2020 and	ending J	UN 30, 2021						
B	Check if applicabl	e: C Name of organization		D Employer identified	cation number					
	Addre chang	e JUNIOR ACHIEVEMENT OF NEW YORK, INC.								
	Name chang			13-3031828						
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	E Telephone number	r						
	Final return		205	(212) 907-00	50					
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,782,669.					
	Amen	NEW FORK, NE 10170		H(a) Is this a group re	eturn					
	Applic tion pendir	F Name and address of principal officer: BETTT GARGER		for subordinates	? Yes 🗴 No					
		SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No					
		empt status: 🗴 501(c)(3) 501(c) ()◀ (insert no.) 4947(a)(1) (or 527	- '	list. See instructions					
		te: WWW.JANY.ORG		H(c) Group exemption						
		organization: X Corporation Trust Association Other	L Year	of formation: 1929	State of legal domicile: NY					
Pa	art I	Summary								
¢	1	Briefly describe the organization's mission or most significant activities: TO INSI	PIRE AND	PREPARE YOUNG						
anc		PEOPLE TO SUCCEED IN A GLOBAL ECONOMY.								
Activities & Governance	2	Check this box F if the organization discontinued its operations or dispos								
Š	3				39					
ن حە	4		independent voting members of the governing body (Part VI, line 1b)							
ies	5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)		41						
ivit	6	Total number of volunteers (estimate if necessary)	6	1248						
Act	7a	Total unrelated business revenue from Part VIII, column (C), line 12			0.					
	d	Net unrelated business taxable income from Form 990-T, Part I, line 11								
		Contributions and suggets (Dart) (III line 14)		Prior Year 3,503,238.	Current Year 3,359,417.					
ue	8	Contributions and grants (Part VIII, line 1h)		0.	0.					
Revenue	9	Program service revenue (Part VIII, line 2g)		16,229.	1,235.					
Be	10 11	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		180,490.	243,094.					
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,699,957.	3,603,746.					
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		27,300.	30,000.					
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		2,686,465.	1,946,666.					
sea	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)								
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,278,732.	1,015,368.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		3,992,497.	2,992,034.					
		Revenue less expenses. Subtract line 18 from line 12		-292,540.	611,712.					
or	G	· · · · · · · · · · · · · · · · · · ·		ginning of Current Year	End of Year					
Assets	20	Total assets (Part X, line 16)		3,700,518.	4,177,610.					
Ass	21	Total liabilities (Part X, line 26)		864,306.	729,686.					
Net		Net assets or fund balances. Subtract line 21 from line 20		2,836,212.	3,447,924.					
Pa	art 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.

Sign	Signature of officer		[Date								
Here	BETTY GARGER, PRESIDENT & CEO											
	Type or print name and title											
	Print/Type preparer's name	Preparer's signature dit Kenecki	Date	Check	PTIN							
Paid	CHRISTINE KAWECKI	Chithemeeke	02/07/20	22 self-employed P	00743140							
Preparer	Firm's name 🕒 DELOITTE TAX LLP		F	Firm's EIN 🕨 86	-1065772							
Use Only	Firm's address 🕨 TWO JERICHO PLAZA											
	JERICHO, NY 11753		F	Phone no.516-918	-7000							
May the I	RS discuss this return with the preparer shown abo	ve? See instructions			X Yes	No						
032001 12-2	032001 12-23-20 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2020)											

	1990 (2020) JUNIOR ACHIEVEMENT OF NEW YORK, INC.	13-3031828 Page 2
Ра	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	SEE SCHEDULE O	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as me	easured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	
	revenue, if any, for each program service reported.	• •
4a	(Code:) (Expenses \$ 2,209,672. including grants of \$ 30,000.) (Revenue	130,407.)
	JUNIOR ACHIEVEMENT OF NEW YORK'S EXPERIENTIAL AND INTERACTIVE PROGRAMS	· /
	FOCUS ON THREE KEY CONTENT AREAS: WORK-READINESS, FINANCIAL LITERACY	
	AND ENTREPRENEURSHIP. THESE PROGRAMS ARE DELIVERED BY A NETWORK OF	
	BUSINESS AND COMMUNITY VOLUNTEERS. DURING FISCAL YEAR 20-21. MORE THAN	
	1,200 VOLUNTEERS DELIVERED OUR PROGRAMS TO MORE THAN 32,000 K-12	
	STUDENTS IN NEW YORK CITY, LONG ISLAND, AND THE LOWER HUDSON VALLEY.	
	STODENTS IN NEW TORK CITT, DONG ISLAND, AND THE DOWER HODSON VALLET.	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 2,209,672.	000

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JUNIOR ACHIEVEMENT OF NEW YORK, INC.

	990 (2020) BORION ACTIEVENENT OF NEW TORK, INC. 15-50510,	-0	P	age J
Pa	TIV Checklist of Required Schedules			T
	1 the experimentian described in section $\Gamma(1/n)(0)$ or $40.47(n)(4)$ (ather there are indefense of the 10		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1	x	
2	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	x	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	<u> </u>		
3		3		x
4	public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i> Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		
-		4	x	
5	during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
0	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	–		
'	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
0		8		x
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	–		
5	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
ŭ	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	<u> </u>		
5	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	х	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	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,			
	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? 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? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? 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	Х	
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		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
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 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	TV Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		

					Yes	No		
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	15					
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0					
с	c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?			1c	х			

Form	990 (2020) JUNIOR ACHIEVEMENT OF NEW YORK, INC. 13-303182 t V Statements Regarding Other IRS Filings and Tax Compliance (continued) 13-303182	8	P	age 5						
			Yes	No						
20	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		res	NO						
Za	filed for the calendar year ending with or within the year covered by this return 2a 41									
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х							
D	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to $e-file$ (see instructions)	20								
39	a 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? <i>If</i> "No" to line 3b, provide an explanation on Schedule O	3a 3b		X						
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a									
14	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x						
b	If "Yes," enter the name of the foreign country									
5	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).									
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x						
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x						
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit									
	any contributions that were not tax deductible as charitable contributions?	6a		x						
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts									
	were not tax deductible?	6b								
7	Organizations that may receive deductible contributions under section 170(c).									
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	х							
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	х							
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required									
-	to file Form 8282?	7c		x						
d	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 contract?	7e		x						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x						
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g								
-	h If the organization received a contribution of qualified intellectual property, did the organization me rorm coose as required i									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the									
	sponsoring organization have excess business holdings at any time during the year?	8								
9	Sponsoring organizations maintaining donor advised funds.									
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a								
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b								
10	Section 501(c)(7) organizations. Enter:									
а	Initiation fees and capital contributions included on Part VIII, line 12 10a									
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1								
11	Section 501(c)(12) organizations. Enter:									
а	Gross income from members or shareholders									
b	Gross income from other sources (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)									
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a								
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.									
а	Is the organization licensed to issue qualified health plans in more than one state?	13a								
	Note: See the instructions for additional information the organization must report on Schedule O.									
b	Enter the amount of reserves the organization is required to maintain by the states in which the									
	organization is licensed to issue qualified health plans 13b									
с	Enter the amount of reserves on hand 13c									
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x						
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b								
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or									
	excess parachute payment(s) during the year?	15		x						
	If "Yes," see instructions and file Form 4720, Schedule N.									
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x						
	If "Yes," complete Form 4720, Schedule O.									

Form **990** (2020)

Form		031828		age 6
Par	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a "No" re	espons	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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	39		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b	39		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		x
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?		х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		-	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	<u>10a</u>		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	m? 11a	х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<u>12a</u>	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<u>12b</u>	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	<u>12c</u>	х	
13	Did the organization have a written whistleblower policy?	13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official		х	<u> </u>
b	Other officers or key employees of the organization	<u>15b</u>	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	<u>16a</u>		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
0	exempt status with respect to such arrangements?	16 b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 50'	1(c)(3)s only)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest polic	y, and finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	CHRISTOPHER MALIN - 212-907-0077 420 LEXINGTON AVE SUITE 205, NEW YORK, NY 10170			

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.

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per	(C) Position (do not check more than one box, unless person is both an					one	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	(list any hours for related organizations below line)				irecto	Highest compensated	tee)	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JOSEPH A. PERI	40.00									
PRESIDENT & CEO				х				230,771.	0.	7,623.
(2) RENEE M. COLOMBO	40.00									
SR.VP DEVELOPMENT & COMMUNICATIONS						X		152,974.	0.	12,382.
(3) CHRISTOPHER MALIN	40.00									
CFO, VP FINANCE & ADMIN				Х				111,963.	0.	17,225.
(4) AMY SPRINGSTEEL	1.00									
BOARD MEMBER		Х						0.	0.	0.
(5) ANA RUA	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) ANGELA HARRELL (UNTIL 6/17/21)	1.00									
BOARD MEMBER		Х						0.	0.	0.
(7) ANTHONY G. VISCOGLIOSI	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) ANTHONY PAQUETTE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(9) BRAD CALHOUN	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) BRIAN INSELBERG	1.00									
BOARD MEMBER		х						0.	0.	0.
(11) BRIAN VARGA	1.00									
BOARD MEMBER		х						0.	0.	0.
(12) CATHY VUONG	1.00									
BOARD MEMBER		х						0.	0.	0.
(13) CHARLES H. BORROK	1.00									
BOARD MEMBER		х						0.	Ο.	0.
(14) CHRIS ANDERSON	1.00									
BOARD MEMBER		х						0.	Ο.	0.
(15) CHUCK IMHOF	1.00									
BOARD MEMBER		х						0.	Ο.	0.
(16) CRAIG SOLOFF	1.00									
BOARD MEMBER		х						0.	0.	0.
(17) CRYSTAL SAMPSON	1.00									
BOARD MEMBER		х						0.	0.	0.

Form 990 (2020) JUNIOR ACHIEV	VEMENT OF N	ΈW	YOR	к, :	INC	•			13-303	1828	3	P	Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloy	ees,	and	l Hig	ghes	st C	ompensated Employees	(continued)				
(A) Name and title	(B) Average hours per	box	(C) Position (do not check more than one pox, unless person is both an officer and a director/trustee)					(D) Reportable compensation	(E) Reportable compensation	1		(F) stimate nount	
	week (list any hours for related organizations below	tee or director	Institutional trustee			Highest compensated Saturation		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC	2)	fi org an	other pensa rom th janizat d relat anizati	ation ne tion ted
	line)	Individ	Institu	Officer	Key en	Highe: emplo	Former				org	Linzaci	ono
(18) DAVID FISHMAN	1.00												
BOARD MEMBER		х						0.		٥.			0.
(19) GABRIELLA FITZGERALD	1.00												
BOARD MEMBER		х						0.		0.			0.
(20) GAVIN O'CONNOR (UNTIL 6/17/21)	1.00												
BOARD MEMBER	1 00	х						0.		0.			0.
(21) GREG BISHOP BOARD MEMBER	1.00	x						0.		٥.			0
(22) GUNTHER BRIGHT	1.00	~				-		0.		<u> </u>			0.
BOARD MEMBER	1.00	x						0.		٥.			0.
(23) JIM FOSINA (UNTIL 6/17/21)	1.00							· · ·					•••
BOARD MEMBER		x						0.		٥.			Ο.
(24) JOHN GAMBLE	1.00												
BOARD MEMBER		х						0.		٥.			Ο.
(25) JOSEPH MURPHY	1.00												
BOARD MEMBER		х						0.		٥.			Ο.
(26) KENNETH E. NEWMAN	1.00												
BOARD MEMBER		Х						0.		٥.			0.
1b Subtotal								495,708.		٥.		37,	230.
c Total from continuation sheets to Part VI								0.		٥.			0.
d Total (add lines 1b and 1c)								495,708.		٥.		37,	,230.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,0	00 of reportable				2
compensation from the organization												Vaa	3
										ſ		Yes	No
3 Did the organization list any former officer,			•	•	-		Ŭ	• • •			2		x
line 1a? If "Yes," complete Schedule J for si										··	3		
4 For any individual listed on line 1a, is the su								-	-	- 1	4	х	
and related organizations greater than \$1505 Did any person listed on line 1a receive or a										F			
rendered to the organization? If "Yes," com	-				-			-		- 1	5		x
Section B. Independent Contractors			01 31		20/30	011							
1 Complete this table for your five highest con	npensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$1	00,000 of compe	ensat	ion fro	om	
the organization. Report compensation for t													
(A)								(B)			(0	C)	
Name and business	address	NO	NE					Description of se	rvices	C	ompe	nsatio	'n
							_						
							_						
							+						
							\neg						
2 Total number of independent contractors (ir	ncluding but n	ot lir	nited	d to t	thos	se lis	ted	above) who received more	re than				
\$100.000 of compensation from the organiz						0							

Form 990 JUNIOR ACHIEVEMENT OF NEW YORK, INC. 13-3031828										328
Part VII Section A. Officers, Directors, Tru		nplo	yee			ligh	est (, ,	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	Ι.			ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week (list any	or				ploye		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em l		(W-2/1099-MISC)	(00-2/1099-00130)	organization
	related	ee or	stee			nsate				and related
	organizations	Individual trustee or director	Institutional trustee		oyee	Highest com pensated em ployee				organizations
	below	vidual	tutior	e	Key employee	lest c	ner			
	line)	Indiv	Insti	Officer	Key	High	Former			
(27) KEVIN BARR (UNTIL 10/23/20)	1.00									
BOARD MEMBER		х						0.	Ο.	Ο.
(28) KISHORE SIVA (UNTIL 2/5/21)	1.00									
BOARD MEMBER		х						0.	0.	0.
(29) KURT KURIMSKY	1.00									
BOARD MEMBER		х						٥.	0.	0.
(30) LESLIE GODRIDGE (UNTIL 10/23/20	1.00									
BOARD MEMBER		х						0.	0.	Ο.
(31) MANUEL CHINEA (UNTIL 2/5/21)	1.00									
BOARD MEMBER		х						0.	0.	0.
(32) MARIE GALLAGHER	1.00									
BOARD MEMBER		х						٥.	0.	0.
(33) MICHAEL BARTON	1.00									
BOARD MEMBER		х						0.	0.	Ο.
(34) MICHAEL FINN	1.00									
BOARD MEMBER		х						٥.	0.	0.
(35) MONA MOAZZAZ (UNTIL 10/23/20)	1.00									
BOARD MEMBER		х						٥.	0.	0.
(36) NANNETTE MALEBRANCHE	1.00									
BOARD MEMBER		х						0.	Ο.	0.
(37) PAUL GRIGGS	1.00									
BOARD MEMBER		х						٥.	0.	0.
(38) PERVEZ D. BAMJI	1.00									
BOARD MEMBER		х						٥.	0.	0.
(39) ROSA RAMOS KWOK	1.00									
BOARD MEMBER		х						0.	0.	0.
(40) SCOTT KARNAS	1.00									
BOARD MEMBER		х						0.	0.	0.
(41) SCOTT LIPSTREAU	1.00									
BOARD MEMBER		х			1			0.	0.	0.
(42) SEAN HOUSTON	1.00									
BOARD MEMBER		х						0.	0.	0.
(43) SHMUEL BULKA	1.00									
BOARD MEMBER		х						0.	0.	0.
(44) TOBY SINGH BABA	1.00				Ī					
BOARD MEMBER		х						0.	0.	Ο.
(45) TYLER SPALDING	1.00									
BOARD MEMBER		х						٥.	0.	0.
(46) VICTOR A. MALANGA	1.00									
BOARD MEMBER		х						0.	0.	Ο.
		•				-	•			
Total to Part VII, Section A, line 1c	<u></u>	<u></u>	<u></u> .	<u></u>	<u></u> .	<u></u> .				
		_								

Form 990 JUNIOR ACHIEVEMENT OF NEW YORK, INC.								13-3031828			
Part VII Section A. Officers, Directors, Tru (A)	ustees, Key Er (B)	nplo 	yee		nd H C)	lighe	est (Compensated Employees (continued) (D) (E) (F)			
(A) Name and title	Average hours	(cl		Pos	ition	app	ly)	(D) Reportable compensation	Reportable compensation	(F) Estimated amount of	
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key em ployee	Highest compensated em ployee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
(47) YVETTE BAEZ	1.00										
BOARD MEMBER	1 00	X						0.	0.	0	
(48) KEITH PINNIGER BOARD CHAIR	1.00	x		x				0.	0.	0	
(49) GARY KOZLOWSKI	1.00										
TREASURER		x		x				0.	0.	0	
(50) SEY-HYO LEE	1.00										
SECRETARY		х		х				0.	0.	0	
		-									
		-									
		-									
	<u> </u>										

	n 990 (2			EVEMENT	OF NEW YORK,	INC.		13-303182	8 Page 9
Pa	rt VII	Statement of Re	venue						
		Check if Schedule O	contains a	a response	or note to any line	e in this Part VIII	<u>.</u>		
						(A) Total revenue	(B) Related or exempt function revenue		(D) Revenue excluded from tax under sections 512 - 514
ς, s	1 a	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	•• • • • •							
Ū Ū	с	Fundraising events			1,264,702.				
ar A	d	Related organizations		1d					
s, G mila	е	Government grants (contr		1e	644,090.				
r Si	f	All other contributions, gifts,	grants, and	t l					
the		similar amounts not included	l above 📖	1f	1,450,625.				
d	g	Noncash contributions included in	lines 1a-1f	1g \$					
ပိုရ	h	Total. Add lines 1a-1f				3,359,417.			
					Business Code				
e	2 a								
ervi	b								
gram Ser Revenue	с								
grai Be	d								
Program Service Revenue	e 4	All other pregram convice	***						
-	r a	All other program service Total. Add lines 2a-2f							
	3	Investment income (includ							
	Ŭ	other similar amounts)				1,235.			1,235.
	4	Income from investment of				,			, ,
	5	Royalties		• •	· · · ·				
		,		(i) Real	(ii) Personal				
	6 a	6 a Gross rents 6a							
	b	Less: rental expenses	6b						
	с	Rental income or (loss)	6c						
	d	Net rental income or (loss)			>				
	7 a	Gross amount from sales of	(i) S	Securities	(ii) Other				
		assets other than inventory	7a						
	b	Less: cost or other basis							
evenue		and sales expenses	7b						
eve		Gain or (loss)	7c						
Ĕ		Net gain or (loss)			▶				
Other	8 a	Gross income from fundraisii including \$ 1,2							
0		contributions reported on		- 1					
		Part IV, line 18	,		291,610.				
	h	Less: direct expenses							
		Net income or (loss) from		·····	, , , , , , , , , , , , , , , , , , ,	112,687.			112,687.
		Gross income from gamin		-					,
		Part IV, line 19	-						
	b	Less: direct expenses							
		Net income or (loss) from							
		Gross sales of inventory, I							
		and allowances							
	b	Less: cost of goods sold		101					
	с	Net income or (loss) from	sales of ir	nventory					
s					Business Code				
Miscellaneous Revenue	11 a	INCOME FROM JA USA			611710	130,407.	130,407.		
scellaneo <u>Revenue</u>	b								
Scel	c								
Μi	d	All other revenue				130,407.			
	<u>е</u> 12	Total. Add lines 11a-11d Total revenue. See instruction			····· P	3,603,746.		0.	113,922.
	16		6110			-,,-			,

JUNIOR ACHIEVEMENT OF NEW YORK, INC.

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX										
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to domestic organizations										
	and domestic governments. See Part IV, line 21										
2	Grants and other assistance to domestic										
	individuals. See Part IV, line 22	30,000.	30,000.								
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	367,827.	217,371.	101,782.	48,674.						
6	Compensation not included above to disqualified										
	persons (as defined under section $4958(f)(1)$) and										
	persons described in section 4958(c)(3)(B)										
7	Other salaries and wages	1,279,223.	1,022,850.	36,689.	219,684.						
8	Pension plan accruals and contributions (include										
	section 401(k) and 403(b) employer contributions)	32,744.	23,304.	856.	8,584.						
9	Other employee benefits	144,658.	109,670.	14,363.	20,625.						
10	Payroll taxes	122,214.	83,106.	10,999.	28,109.						
11	Fees for services (nonemployees):										
а	Management										
b	Legal										
	Accounting	55,900.	41,925.	5,590.	8,385.						
d	Lobbying	72,000.			72,000.						
е	Professional fundraising services. See Part IV, line 17										
f	e										
g	Other. (If line 11g amount exceeds 10% of line 25,										
	column (A) amount, list line 11g expenses on Sch 0.)	117,121.	81,985.	17,568.	17,568.						
12	Advertising and promotion	7,189.	5,392.	719.	1,078.						
13	Office expenses	58,100.	43,575.	5,810.	8,715.						
14	Information technology	21,411.	16,058.	2,141.	3,212.						
15	Royalties										
16	Occupancy	298,341.	223,756.	29,834.	44,751.						
17	Travel	1,244.	933.	124.	187.						
18	Payments of travel or entertainment expenses										
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings										
20	Interest	6,400.	4,800.	640.	960.						
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	21,250.	15,897.	1,798.	3,555.						
23	Insurance	33,596.	30,708.	2,888.							
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)										
а		293,968.	236,902.	35,412.	21,654.						
b	PROGRAM MATERIALS	9,712.	9,712.								
с	MAINTENANCE	8,351.	6,263.	835.	1,253.						
d	EQUIPMENT	7,287.	5,465.	729.	1,093.						
е	All other expenses	3,498.		3,498.							
25	Total functional expenses. Add lines 1 through 24e	2,992,034.	2,209,672.	272,275.	510,087.						
26	Joint costs. Complete this line only if the organization										
	reported in column (B) joint costs from a combined										
	educational campaign and fundraising solicitation.										
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2020)						

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Total liabilities and net assets/fund balances

JUNIOR ACHIEVEMENT OF NEW YORK, INC

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1 1 Cash - non-interest-bearing 2,044,363. 2,729,847. Savings and temporary cash investments 2 2 1,426,206. 1,282,075. 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 4 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disgualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 7 Notes and loans receivable, net Assets 3 090. 3,090. 8 Inventories for sale or use 8 73,456. 9 Prepaid expenses and deferred charges 100,003. 9 **10a** Land, buildings, and equipment: cost or other 470,954, basis. Complete Part VI of Schedule D _____ 10a 441,721. 39,430. 29,233. b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 59,909. 87,426. Other assets. See Part IV, line 11 15 15 3,700,518. 4,177,610. 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 16 301,413. 194,168. Accounts payable and accrued expenses 17 17 18 Grants payable 18 88,561. 70,346. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to any current or former officer, director, 22 Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 474,332. 25 465,172. of Schedule D 864,306. 729,686. 26 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 🗵 Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. Net assets without donor restrictions 1,895,273. 2,245,321. 27 27 Net assets with donor restrictions 940,939. 1,202,603. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 2,836,212. 32 3,447,924. 32

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4,177,610.

3,700,518.

33

Part X | Balance Sheet

Form 990 (2020)

Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI 1 Total expenses (must equal Part VIII, column (A), line 25) 2 2,992,034. 3 601,712. 4 2,992,034. 5 2 6 2 7 3 6 7 8 6 7 8 9 Other changes in net assets or fund balances (explain on Schedule O) 9 0ther changes in net assets or fund balances (explain on Schedule O) 9 0ther changes in net assets or fund balances (explain on Schedule O) 9 0ther changes in net assets or fund balances (explain on Schedule O) 9 0ther changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) Part 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: 1 Accounting method used to prepare the Form 990: 1 Accounting method used to prepare the financial statements for the year were compiled or reviewed on a separate basis, consolidat		1990 (2020) JUNIOR ACHIEVEMENT OF NEW YORK, INC.	13-30318	28	Pag	_{ge} 12		
1 Total revenue (must equal Part VIII, column (A), line 12) 1 3, 603, 746. 2 Total expenses (must equal Part IX, column (A), line 25) 2 2, 932, 034. 3 611, 712. 3 611, 712. 4 Vet assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 2, 836, 212. 5 6 6 7 7 7 7 7 8 9 0. 6 7 8 7 8 9 Other changes in net assets or fund balances (explain on Schedule O) 9 0. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9 0. Part XII Financial Statements and Reporting 10 3, 447, 924. Check if Schedule O contains a response or note to any line in this Part XII 10 3, 447, 924. 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 1 ft "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis. 2a X 1 Accounting method us	Pa	rt XI Reconciliation of Net Assets						
2 Total expenses (must equal Part X, column (A), line 25) 2 2, 992, 034. 3 Revenue less expenses. Subtract line 2 from line 1 3 611, 712. 4 Het assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 2, 836, 212. 5 Investment expenses 6 6 7 7 7 8 9 0. 9 0. 9 0. 10 1,447, 924. 9 0. 10 1,447, 924. 9 0. 10 1,447, 924. 9 0. 10 1,447, 924. 9 0. 10 1,447, 924. 9 0. 10 1,447, 924. 9 0. 11 Accounting method used to prepare the Form 990: Cash X Accrual Other 10 11 Accounting method used to prepare the Form 990: Cash X Accrual Other, "explain in Schedule 0. 2a X 11 Accounting method used to prepare the fram subter of panization's financial statements confiled or reviewed by an independent accountant? 2a X 11 Yes, 'check		Check if Schedule O contains a response or note to any line in this Part XI		<u></u>				
2 Total expenses (must equal Part X, column (A), line 25) 2 2, 992, 034. 3 Revenue less expenses. Subtract line 2 from line 1 3 611, 712. 4 2, 836, 212. 5 5 5 6 6 7 7 7 8 6 7 7 7 8 9 0. 9 0. 7 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B) 9 0. 9 0. 9 0. 0. 10 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B) 3, 447, 924. Part XII Financial Statements and Reporting Check if Schedule 0 contains a response or note to any line in this Part XII Check if Schedule 0 contains a response or note to any line in this Part XII Yes No 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 14 the organization's financial statements compiled or reviewed by an independent accountant? Za X	1	Total revenue (must equal Part VIII, column (A), line 12)	1	3	,603,	746.		
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 2,836,212. 5 6 6 7 5 6	2		2	2,992,034.				
4 2,836,212. 5 5 6 5 7 6 8 9 9 0.1 9 0.1 10 3,447,924. 9 0.1 10 3,447,924. 10 3,447,924. 10 3,447,924. 10 3,447,924. 11 Accounting method used to prepare the Form 990: Cash 11 Accounting method used to prepare the Form 990: Cash 11 Accounting method used to prepare the Form 990: Cash 11 Accounting method used to prepare the Form 990: Cash 11 Accounting method used to prepare the Form 990: Cash 12 Accounting from a prior year or checked "Other," explain in Schedule 0. 13 Accounting from ancial statements compiled or reviewed by an independent accountant? 2a 14 Trees' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis. Consolidated basis. 15 Were the organization's financial statements and selection of an independent accountant? 2b X	3	Revenue less expenses. Subtract line 2 from line 1	3	611,712				
6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 3,447,924. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII 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 X Accrual Yes Not 1 Accounting method used to prepare the Form 990: Cash X Accounting method used to prepare the Form 990: Cash X Accounting method used to prepare the Form 990: Cash X Accounting firm a prior year or checked "Other," explain in Schedule O. 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis b Were the organization's financial statements and selection of an independent accountant? 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 "Yes," to line 2a or 2b, does	4							
6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain on Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 3,447,924. Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Check if Schedule O contains a response or note to any line in this Part XII 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 X Accrual Yes Not 1 Accounting method used to prepare the Form 990: Cash X Accounting method used to prepare the Form 990: Cash X Accounting method used to prepare the Form 990: Cash X Accounting firm a prior year or checked "Other," explain in Schedule O. 2a X If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis b Were the organization's financial statements and selection of an independent accountant? 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 "Yes," to line 2a or 2b, does	5	Net unrealized gains (losses) on investments	5					
7 Investment expenses 7 8 Prior period adjustments 9 9 Other changes in net assets or fund balances (explain on Schedule O) 9 0. 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B) 10 3, 447, 924. Part XII Financial Statements and Reporting 10 3, 447, 924. Check if Schedule O contains a response or note to any line in this Part XII The organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a X 1 Accounting method used to prepare the Form 990: Cash X Accrual Other 2a X If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a X 1 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 2b X If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis 2b X <t< th=""><td>6</td><td></td><td>6</td><td></td><td></td><td></td></t<>	6		6					
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b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit			-	3a		х		
	b							
				3b				

Form 990 (2020)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

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

complete this part.) See instructions.

check only one box.)

OMB No. 1545-0047
2020

Open to Public Inspection

Employer identification number 13-3031828

Department of the Treasury Internal Revenue Service

Name of t	he organiza	ation				
			ACHIEVEMENT		,	-
Part I	Reasor	n for Public (Charity Statu	S. (All or	ganizatio	ns must
The organ	ization is no	t a private found	ation because it	is: (For lin	es 1 thro	ugh 12,

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 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.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

9	An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college
	or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or
	university:

- 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.)
- 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **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.**
 - **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.**
 - 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.
 - d 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.
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations

g Provide the following information	n about the supporte	d organization(s).				
(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	anization listed	(v) Amount of monetary	(vi) Amount of other
organization		(described on lines 1-10 above (see instructions))	Yes No ^s		support (see instructions)	support (see instructions)
		above (see instructions))				
			<u> </u>			
 Total						

Schedule A (Form 990 or 990-EZ) 2020 JUNIOR ACHIEVEMENT OF NEW YORK, INC.

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not							
	include any "unusual grants.")	3,564,609.	3,961,924.	4,197,977.	3,503,238.	2,715,327.	17,943,075.	
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							
	Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included	3,564,609.	3,961,924.	4,197,977.	3,503,238.	2,715,327.	17,943,075.	
6	on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4.						17,943,075.	
	tion B. Total Support						17,515,075.	
	ndar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
	Amounts from line 4	3,564,609.	3,961,924.	4,197,977.	3,503,238.	2,715,327.	17,943,075.	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties,		, , ,		, , , .		, , , .	
9	and income from similar sources Net income from unrelated business activities, whether or not the	27.	30.	6,896.	16,230.	1,235.	24,418.	
10	business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	241,265.	174,651.	185,316.	180,490.	243,094.	1,024,816.	
11	Total support. Add lines 7 through 10						18,992,309.	
12	Gross receipts from related activities,	etc. (see instructio	ons)			12		
13	First 5 years. If the Form 990 is for th	ne organization's fir	rst, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)		
	organization, check this box and stop						►	
	ction C. Computation of Publi					r - 1		
14	Public support percentage for 2020 (I					14	94.48 %	
15	Public support percentage from 2019					15	94.85 %	
16a	33 1/3% support test - 2020. If the c			line 13, and line 1	4 is 33 1/3% or m	ore, check this bo>		
	stop here. The organization qualifies as a publicly supported organization Image: Comparison of the organization is a comparison of the organization of the organization is a comparison of the organization of the organization of the organization is a comparison of the organization of the organization of the organization is a comparison of the organization of the organiza							
	10% -facts-and-circumstances test and if the organization meets the fact meets the facts-and-circumstances te 10% -facts-and-circumstances test	s-and-circumstance st. The organizatio	es test, check this n qualifies as a pul	box and stop her plicly supported or	e. Explain in Part	VI how the organiz	ation	
	10% -facts-and-circumstances test more, and if the organization meets the organization meets the facts-and-circu	ne facts-and-circum umstances test. Th	nstances test, chec e organization qua	k this box and st elifies as a publicly	op here. Explain ii supported organiz	n Part VI how the ation	►	
18	Private foundation. If the organization	n ala not check a	uux on line 13, 16a	, 100, 17a, 0r 17b	, check this box a	iu see instructions	>	

13-3031828

Schedule A (Form 990 or 990-EZ) 2020 JUNIOR ACHIEVEMENT OF NEW YORK, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	Alon A. Fublic Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus- iness under section 513						
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						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
b	3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 6						
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third, ⁻	fourth, or fifth tax	year as a section 5	501(c)(3) organiza	ition,
_							
	ction C. Computation of Publi					1 1	
	Public support percentage for 2020 (li			olumn (f))		15	%
	Public support percentage from 2019					16	%
	ction D. Computation of Inves					1 1	
17	Investment income percentage for 20					17	%
18	Investment income percentage from 2					18	%
19a	33 1/3% support tests - 2020. If the	organization did r	ot check the box o	on line 14, and line	e 15 is more than 3	33 1/3%, and line	17 is not
þ	more than 33 1/3%, check this box ar 33 1/3% support tests - 2019. If the	-					►
~	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organizatio						······

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

13-3031828 Page **5**

Yes

Yes No

Yes No

1

2

No

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
11c below, the governing body of a supported organization?	11a		
b A family member of a person described in line 11a above?	11b		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
detail in Part VI.	11c		
Section B. Type I Supporting Organizations			

		_
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,	
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
2	Did the organization operate for the benefit of any supported organization other than the supported	

organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations

Part IV Supporting Organizations (continued)

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 executive (a)	1

Section E	D. All Typ	e III Supp	orting Or	ganizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisf	y the Integral Part Test during the y	ear (see instructions).
---	---------------------------------------	-------------------------

- a 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 sup	ported a government	al entity. Describe	in Part VI how	you supported a	governmental entity	(see instruction <u>s).</u>
---	----------------------	---------------------	---------------------	----------------	-----------------	---------------------	-----------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If* "Yes," *describe in* **Part VI** *the role played by the organization in this regard.*

2a

2b

3a

3b

hedule A (Form 990 or 990-EZ) 2020 JUNIOR ACHIEVEMENT OF NEW YORK, IN	NC.		13-3031828 Pa
art V Type III Non-Functionally Integrated 509(a)(3) Supportin		zations	
Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust on N	ov. 20, 1970 (<i>explain il</i>	n Part VI). See instruction
All other Type III non-functionally integrated supporting organizations mus	t complete S	Sections A through E.	
ction A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
Net short-term capital gain	1		
Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
Add lines 1 through 3.	4		
Depreciation and depletion	5		
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		
Other expenses (see instructions)	7		
Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ction B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
Subtract line 2 from line 1d.	3		
Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by 0.035.	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
ction C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, column A)	1		
Enter 0.85 of line 1.	2		
Minimum asset amount for prior year (from Section B, line 8, column A)	3		
Enter greater of line 2 or line 3.	4		
Income tax imposed in prior year	5		
Distributable Amount. Subtract line 5 from line 4, unless subject to			
,	6		
emergency temporary reduction (see instructions).			

instructions).

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020	JUNIOR	ACHIEVEMENT	OF	NEW	YORK,	INC
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Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	inizations (continu	ued)	
Secti	on D - Distributions		·		Current Year
1	Amounts paid to supported organizations to accomplish exer		1		
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	6	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.	-		8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2020	าร	(iii) Distributable Amount for 2020
_1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
C	From 2017				
d	From 2018				
e	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

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

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:					
INCOME FROM FUNDRAISING ACTIVITIES AND JA USA					
2016 AMOUNT: \$ 241,265.					
2017 AMOUNT: \$ 174,651.					
2018 AMOUNT: \$ 185,316.					
2019 AMOUNT: \$ 180,490.					
2020 AMOUNT: \$ 243,094.					

Schedule B

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

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

2020

Employer identification number

		1
JUN	IIOR ACHIEVEMENT OF NEW YORK, INC.	13-3031828
Organization type (check or	ne):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

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

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions $e_{XClusively}$ for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an $e_{XClusively}$ religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \dots \blacktriangleright \$______

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

 $\label{eq:LHA} \ \ \mbox{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name	of	organization
INALLE	UI.	oruanization

Employer identification number

13 - 3031828

JUNIOR ACHIEVEMENT OF NEW YORK, INC.

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (d) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 X EY LLP Person Payroll 167,500. ONE MANHATTAN WEST Noncash \$ (Complete Part II for NEW YORK, NY 10001 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 CAPITAL ONE BANK X Person Payroll 320 PARK AVE 166,099. Noncash \$ (Complete Part II for NEW YORK, NY 10171 noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 AIG X Person Payroll 32 OLD SLIP 114,500. Noncash \$ (Complete Part II for NEW YORK, NY 10005 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 STERLING NATIONAL BANK Person Х Payroll Noncash 21 SCARSDALE ROAD 95,527. \$ (Complete Part II for YONKERS, NY 10707 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 AMERICAN EXPRESS Х Person Payroll 200 VESEY STREET 90,962. Noncash \$ (Complete Part II for noncash contributions.) NEW YORK, NY 10285-1000 (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 6 PWC Х Person Payroll 300 MADISON AVENUE 82,764. Noncash \$ (Complete Part II for noncash contributions.) NEW YORK, NY 10017-6232

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name	of	organization
INALLE	UI.	oruanization

Part I

Employer identification number

13 - 3031828

JUNIOR ACHIEVEMENT OF NEW YORK, INC.

(a) (b) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 7 PEPSI CO. X Person Payroll 700 ANDERSON HILL ROAD 78,675. Noncash \$ (Complete Part II for NEW YORK, NY 10577 noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 8 U.S. SMALL BUSINESS ADMINISTRATION X Person Payroll 409 3RD ST SW 478,090. Noncash \$ (Complete Part II for WASHINGTON, DC 20416 noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 9 NYC DEPARTMENT OF YOUTH AND COMMUNITY DEVELOPMENT X Person Payroll Noncash 123 WILLIAM ST 114,500. \$ (Complete Part II for NEW YORK, NY 10038 noncash contributions.) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash \$ (Complete Part II for

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

noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization

JUNIOR ACHIEVEMENT OF

Part II Noncash Pro

(b)	(c) FMV (or estimate	,
roperty (see instructions). Use duplicate copies of Part II if a	dditional space is needed	
F NEW YORK, INC.		13-3031828

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

Employer identification number

Page **4**

Name of or	ganization		Employer identification number
JUNIOR A	CHIEVEMENT OF NEW YORK, INC.		13-3031828
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional) through (e) and the following line ent charitable, etc., contributions of \$1,000 or	ection 501(c)(7), (8), or (10) that total more than \$1,000 for the year try. For organizations less 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
		(e) Transfer of gift	t
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
F		(e) Transfer of gift	t
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
F		(e) Transfer of gift	t
ŀ	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
ŀ		(e) Transfer of gift	lt
ŀ	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

SCHEDULE C	Political Campaign and Lobbying Activities					OMB No. 1545-0047	
(Form 990 or 990-EZ)	For Org	2020					
For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.							
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						· Open to Public Inspection	
If the organization answ • Section 501(c)(3) org • Section 501(c) (other • Section 527 organization If the organization answ • Section 501(c)(3) org • Section 501(c)(3) org If the organization answ Tax) (See separate instr • Section 501(c)(4), (5) Name of organization Part I-A Completion 1 Provide a description 2 Political campaign and a section a	vered "Yes," or anizations: Com- than section 50 ations: Complete vered "Yes," or anizations that I anizations that I vered "Yes," or ructions), then , or (6) organizat JUNIOR ACH: ete if the organization on of the organization activity expendit	Form 990, Part IV, line 3, or Form applete Parts I-A and B. Do not comp D1(c)(3)) organizations: Complete Part Part I-A only. Form 990, Part IV, line 4, or Form have filed Form 5768 (election under have NOT filed Form 5768 (election form 990, Part IV, line 5 (Proxy cions: Complete Part III. ELEVEMENT OF NEW YORK, INC. Canization is exempt under enation's direct and indirect political ures	m 990-EZ, Part V, line olete Part I-C. arts I-A and C below. I m 990-EZ, Part VI, lin er section 501(h)): Cor n under section 501(h)) Tax) (See separate in Section 501(c) o campaign activities in	e 46 (Political Camp Do not complete Par ne 47 (Lobbying Acti mplete Part II-A. Do r): Complete Part II-B. (Structions) or Form r is a section 52 Part IV.	t I-B. vities), not com . Do not 990-E: Emplo 27 org	then plete Part II-B. complete Part II-A. Z, Part V, line 35c (Prox yer identification numb 13-3031828	
3 Volunteer hours for	political campai	gn activities			· _		
Part I-B Comple	ete if the ord	anization is exempt under	section 501(c)(3).			
		incurred by the organization under		,	▶\$		
		incurred by organization managers			-		
		n 4955 tax, did it file Form 4720 fo					No
4a Was a correction m	ade?					Yes	No
b If "Yes," describe in	Part IV.						
Part I-C Comple	ete if the org	anization is exempt under	section 501(c), e	except section 5	501(c)((3).	
1 Enter the amount d	irectly expended	d by the filing organization for section	on 527 exempt function	on activities	. ► \$ _		
2 Enter the amount of	f the filing organ	ization's funds contributed to othe	r organizations for sec	ction 527			
exempt function ac	tivities				▶\$_		
3 Total exempt function	on expenditures	. Add lines 1 and 2. Enter here and	I on Form 1120-POL,				
					▶\$_		
							No
made payments. Fo contributions receiv	or each organiza red that were pro	nployer identification number (EIN) tion listed, enter the amount paid fi omptly and directly delivered to a s additional space is needed, provide	rom the filing organiza eparate political orgar	ation's funds. Also er nization, such as a se	ter the	amount of political	
(a) Name	3	(b) Address	(c) EIN	(d) Amount paid filing organizatic funds. If none, ent	on's	(e) Amount of political contributions received a promptly and directly delivered to a separate political organization. If none, enter -0	ind ' e

OMB No

Schedule C (Form 990 or 990-EZ) 2020	JUNIOR A	CHIEVEME	NT OF NEW YORK, I	NC.	13-3	031828 Page 2
Part II-A Complete if the org	anizatio	on is exen	npt under section	1 501(c)(3) and file	d Form 5768 (ele	ection under
section 501(h)).						
A Check if the filing organiza	tion belon	gs to an affil	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and shar	e of exces	s lobbying e	expenditures).			
B Check b if the filing organiza	tion check	ed box A ar	nd "limited control" pro	visions apply.		
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)					(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience pub	lic opinion (g	grassroots lobbying)			
b Total lobbying expenditures to influ	-					
c Total lobbying expenditures (add li						
d Other exempt purpose expenditure						
e Total exempt purpose expenditure						
f_Lobbying nontaxable amount. Ente						
If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of 1	the amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000	\$100,00	0 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	0 plus 10% of the exce	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	000,000	\$225,00	0 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,0				
g Grassroots nontaxable amount (en	ter 25% of	line 1f)				
h Subtract line 1g from line 1a. If zero	o or less, e	enter -0-				
i Subtract line 1f from line 1c. If zero or less, enter -0-						
j If there is an amount other than ze	ro on eithe	er line 1h or l	line 1i, did the organiza	ation file Form 4720		
reporting section 4911 tax for this						Yes No
		4-Year Ave	eraging Period Under	Section 501(h)		
(Some organizations the			• •		of the five columns be	elow.
	Se	e the separa	ate instructions for lin	ies 2a through 2f.)		
	Lob	bying Exper	nditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a)	2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount						
 b Lobbying ceiling amount (150% of line 2a, column(e)) 						
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount (150% of line 2d, column (e))						
f Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2020

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the lobbying activity.	Yes	No	Amo	ount	
1 During the year, did the filing organization attempt to influence foreign, national, state, or					
local legislation, including any attempt to influence public opinion on a legislative matter					
or referendum, through the use of:					
a Volunteers?		X			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X			
c Media advertisements?		X			
d Mailings to members, legislators, or the public?		X			
e Publications, or published or broadcast statements?		X			
f Grants to other organizations for lobbying purposes?		X			
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X			
i Other activities?	Х			72,000.	
j Total. Add lines 1c through 1i				72,000.	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X			
b If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or sec	tion		
501(c)(6).					
			Yes	No	
1 Were substantially all (90% or more) dues received nondeductible by members?		1			
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2			
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the					
Part III-B Complete if the organization is exempt under section 501(c)(4), section					
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR	(b) Part I	II-A, line	3, IS	
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politi					
expenses for which the section 527(f) tax was paid).					
a Current year		2a			
b Carryover from last year					
c Total					
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical				
expenditure next year?		4			
5 Taxable amount of lobbying and political expenditures (See instructions)		5			
Part IV Supplemental Information					
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II	A, lines 1 a	nd 2 (See		
instructions); and Part II-B, line 1. Also, complete this part for any additional information.					
PART II-B, LINE 1, LOBBYING ACTIVITIES:					
JA NEW YORK ENGAGED A GOVERNMENT RELATIONS FIRM TO ENHANCE AWARENESS IN					
THE PUBLIC SECTOR AND GAIN ACCESS TO PUBLIC FUNDING AND OTHER RESOURCES IN					

NEW YORK CITY & STATE.

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



Department of the Treasury Internal Revenue Service

. . .

Go to www.irs.gov/Form9	0 for instructions and t	he latest information.

nployer	identification number	
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Vall	JUNIOR ACHIEVEMENT OF NEW YOR	K, INC.		13-3031828	IIIDei
Pa	t I Organizations Maintaining Donor Advised I	Funds or Other Similar Funds	s or Ac	counts. Complete if the	
	organization answered "Yes" on Form 990, Part IV, line 6	ð.			
		(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 writ	ting that the assets held in donor advi	sed fund	ds	
	are the organization's property, subject to the organization's exc	•			No
6	Did the organization inform all grantees, donors, and donor advi				
	for charitable purposes and not for the benefit of the donor or de			•	
				0	No
Ра		nization answered "Yes" on Form 990,	Part IV,	, line 7.	
1	Purpose(s) of conservation easements held by the organization				
	Preservation of land for public use (for example, recreation		of a histo	prically important land area	
	Protection of natural habitat			ified historic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form	of a co	nservation easement on the la	st
	day of the tax year.			Held at the End of the Ta	
а				2a	
b	- · · · · · · · · · ·			2b	
с	Number of conservation easements on a certified historic struct			2c	
d	Number of conservation easements included in (c) acquired afte				
	listed in the National Register			2d	
3	Number of conservation easements modified, transferred, release			ization during the tax	
	year ▶		0	0	
4	Number of states where property subject to conservation easer	nent is located			
5	Does the organization have a written policy regarding the period		-		
	violations, and enforcement of the conservation easements it ho	olds?		Yes	No
6	Staff and volunteer hours devoted to monitoring, inspecting, ha				
7	Amount of expenses incurred in monitoring, inspecting, handling	g of violations, and enforcing conserva	ation eas	sements during the year	
	▶\$				
8	Does each conservation easement reported on line 2(d) above s	atisfy the requirements of section 170	(h)(4)(B)	(i)	
	and section 170(h)(4)(B)(ii)?			Yes	No
9	In Part XIII, describe how the organization reports conservation				
	balance sheet, and include, if applicable, the text of the footnote	e to the organization's financial statem	ents tha	at describes the	
	organization's accounting for conservation easements.	-			
Ра	t III Organizations Maintaining Collections of A	rt, Historical Treasures, or O	ther S	similar Assets.	
	Complete if the organization answered "Yes" on Form 99	90, Part IV, line 8.			
1a	If the organization elected, as permitted under FASB ASC 958, I	not to report in its revenue statement	and bala	ance sheet works	
	of art, historical treasures, or other similar assets held for public	exhibition, education, or research in f	urtherar	nce of public	
	service, provide in Part XIII the text of the footnote to its financia	al statements that describes these iter	ns.		
b	If the organization elected, as permitted under FASB ASC 958, 1	to report in its revenue statement and	balance	e sheet works of	
	art, historical treasures, or other similar assets held for public ex	hibition, education, or research in furt	herance	e of public service,	
	provide the following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1			▶ \$	
				► \$	
2	If the organization received or held works of art, historical treasu			provide	
	the following amounts required to be reported under FASB ASC				
а	Bevenue included on Form 990 Part VIII line 1			► \$	

b	Assets	included	in	Form	990,	Part	Х

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 032051 12-01-20

Schedule D (Form 990) 2020

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		EVEMENT OF NEW			-	13-303		Pa	.ge 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Othe	er Simila	r Assets	(contir	ued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make	significant u	use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
с	Preservation for future generations								
4	Provide a description of the organization's co	llections and explain	how they further th	e organization's exe	empt purpo	se in Part	XIII.		
5	During the year, did the organization solicit o								
	to be sold to raise funds rather than to be ma						Yes		No
Par	t IV Escrow and Custodial Arrang						ine 9, or		
	reported an amount on Form 990, Par		C C						
1a	Is the organization an agent, trustee, custodia	an or other intermedia	ary for contributions	s or other assets not	included				
	on Form 990, Part X?						Yes		No
b	If "Yes," explain the arrangement in Part XIII a								
			g				Amount	t	
с	Beginning balance				1c			-	
	Additions during the year								
	Distributions during the year								
f	Ending balance								
	Did the organization include an amount on Fo						Yes		No
	If "Yes," explain the arrangement in Part XIII.				• • • • • • • • • • • • • • • • • • • •	······			
Par		f the organization and	wered "Yes" on Fo	rm 990. Part IV. line	10.				
	· · · · ·	(a) Current year	(b) Prior year	(c) Two years back	(d) Three	/ears back	(e) Four	vears b	back
1a	Beginning of year balance	940,939.	799,915.	713,360.		13,280.		714,9	
	Contributions	338,664.	210,524.	,	-	19,750.		425,4	
	Net investment earnings, gains, and losses	, -	,	, -		, .		,	
	Grants or scholarships					31,750.		33,0	00.
	Other expenditures for facilities					-, .			
e		77,000.	69,500.	15,000.	2	87,920.		394,0)30
f	Administrative expenses	,	,	,	_	,		,-	
		1,202,603.	940,939.	799,915.	7	13,360.		713,2	280.
2	End of year balance [Provide the estimated percentage of the curr		,	,		,		,	
	Board designated or quasi-endowment	.0000	%) field as.					
	Permanent endowment .0000	%	_/0						
	Term endowment 100								
U	The percentages on lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should								
20	Are there endowment funds not in the posses		ion that are hold an	d administored for t	ho organiz	otion			
Ja		ssion of the organizat	ion that are new ar		ne organiza	ation	ſ	Yes	No
	by: (i) Unrelated organizations						3a(i)	103	X
							3a(ii)		x
Ь	(ii) Related organizations If "Yes" on line 3a(ii), are the related organiza						3b		
4	Describe in Part XIII the intended uses of the						30		
	t VI Land, Buildings, and Equipm		ment lunus.						
	Complete if the organization answered		Part IV line 11a S	ee Form 990 Part X	line 10				
	Description of property	(a) Cost or ot			Accumulate	ad I	(d) Bool		
	Description of property	basis (investm	• • •		epreciation		(a) Bool	< value	
4-	Land	```	5119 54313		Probation				
	Land								
	Buildings								
	Leasehold improvements			470,954.	441,	721		29,2	22
	Equipment				441,	, 41.		2, ^و 2	
	Other							29,2	222
<u>i ota</u>	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X	<u>, column (B), line 10</u>	<u>JC.)</u>			D (5		
						Schedule	D (Form	1 990) <i>(</i>	2020

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

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

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990. Part X. col. (B) line 13.)		

Other Assets. Part IX

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X Other Liabilities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 9	
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) PAYCHECK PROTECTION PROGRAM REFUNDABLE ADVANCE	465,172.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the X organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Sche	edule D (Form 990) 2020 JUNIOR ACHIEVEMENT OF NEW YORK, INC.	13-3	031828 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	3,277,204.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities 2b 151,5	48.	
с			
d			
е	Add lines 2a through 2d	2e	151,548.
3	Subtract line 2e from line 1		3,125,656.
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.) 478,0	90.	
с	Add lines 4a and 4b	4c	478,090.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	3,603,746.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Returr).
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	3,140,082.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a 151,5	48.	
b	Prior year adjustments 2b		
с	Other losses 2c		
d	Other (Describe in Part XIII.) 2d		
е	Add lines 2a through 2d	2e	151,548.
3	Subtract line 2e from line 1		2,988,534.
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.) 3,5	00.	
	Add lines 4a and 4b	4c	3,500.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,992,034.
Pa	rt 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 V, LINE 4:

THE AMOUNTS IN THE ENDOWMENT FUND WILL BE USED FOR PROGRAM SERVICES.

PART X, LINE 2:

JA NEW YORK IS A NOT-FOR-PROFIT ORGANIZATION THAT HAS BEEN CLASSIFIED BY

THE INTERNAL REVENUE SERVICE AS EXEMPT FROM FEDERAL INCOME TAXES UNDER

SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND HAS BEEN DESIGNATED AS

AN ORGANIZATION, WHICH IS NOT A PRIVATE FOUNDATION. JA NEW YORK RECOGNIZES

THE IMPACT OF INCOME TAX POSITIONS ONLY IF THOSE POSITIONS ARE MORE LIKELY

THAN NOT OF BEING SUSTAINED. INCOME GENERATED FROM ACTIVITIES UNRELATED TO

JA NEW YORK'S TAX-EXEMPT PURPOSE IS SUBJECT TO TAX UNDER INTERNAL REVENUE

CODE SECTION 511. JA NEW YORK DID NOT HAVE ANY MATERIAL UNRELATED BUSINESS

Schedule D (Form 990) 2020 JUNIOR ACHIEVEMENT OF NEW YORK, INC.	13-3031828	Page 5
Part XIII Supplemental Information (continued)		
INCOME TAX LIABILITY FOR THE YEARS ENDED JUNE 30, 2021 AND 2020. JA NEW		
YORK EVALUATES, ON AN ANNUAL BASIS, THE EFFECTS OF ANY UNCERTAIN TAX		
POSITIONS ON ITS FINANCIAL STATEMENTS. AS OF JUNE 30, 2021, JA NEW YORK		
HAS NOT IDENTIFIED OR PROVIDED FOR ANY SUCH POSITIONS.		
PART XI, LINE 4B - OTHER ADJUSTMENTS:		
FORGIVENESS OF PPP LOAN 478,090.		
PART XII, LINE 4B - OTHER ADJUSTMENTS:		
LOSS ON PLEDGES 3,500.		

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

No

Employer identification number

13-3031828

Yes

OMB No. 1545-0047

Department of the Treasury	Attach to Form 990 or Form 990-EZ.				
Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.				
Name of the organization	Name of the organization				
	JUNIOR ACHIEVEMENT OF NEW YORK, INC.				
Part I Fundrais	ing Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line				

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

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

С

е Solicitation of non-government grants f

- Internet and email solicitations b Phone solicitations
- Solicitation of government grants Special fundraising events
- g

d In-person solicitations

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

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

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

<u>Tot</u>al

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

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

13-3031828 Page **2**

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

	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		VIRTUAL		(add col. (a) through
				col. (c))
	(event type)	(event type)	(total number)	
Gross receipts	790,344.	567,322.	198,646.	1,556,312
Less: Contributions	671,792.	453,858.	139,052.	1,264,702
Gross income (line 1 minus line 2)	118,552.	113,464.	59,594.	291,610
Cash prizes				
Noncash prizes				
Rent/facility costs	78,377.	40,763.	11,500.	130,640
Food and beverages	3,350.		44,933.	48,283
Entertainment				
Other direct expenses				
Direct expense summary. Add lines 4 throug	h 9 in column (d)		►	178,923
Net income summary. Subtract line 10 from I	ine 3, column (d)		🕨	112,687
	Less: Contributions Gross income (line 1 minus line 2) Cash prizes Noncash prizes Rent/facility costs Good and beverages Entertainment Dther direct expenses Direct expense summary. Add lines 4 through	.ess: Contributions 671,792. Bross income (line 1 minus line 2) 118,552. Cash prizes 118,552. Cash prizes 78,377. Food and beverages 3,350. Entertainment 118,552. Direct expense summary. Add lines 4 through 9 in column (d) 118,552.	GALA TRIVIATHONS (event type) (event type) Gross receipts 790,344. 567,322. Less: Contributions 671,792. 453,858. Gross income (line 1 minus line 2) 118,552. 113,464. Cash prizes 118,552. 113,464. Noncash prizes 3,377. 40,763. Good and beverages 3,350. 3,350. Entertainment 1 1 Direct expenses 9 in column (d) 1	BALATRIVIATHONS4(event type)(event type)(total number)Gross receipts790,344.567,322.198,646ess: Contributions671,792.453,858.139,052.Gross income (line 1 minus line 2)118,552.113,464.59,594.Cash prizes118,377.40,763.11,500.Good and beverages3,350.44,933.Entertainment111Other direct expenses111Direct expenses summary. Add lines 4 through 9 in column (d)II

anue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming col. (a) through c			
Revenue	1	Gross revenue							
s	2	Cash prizes							
Direct Expenses	3	Noncash prizes							
Direct E	4	Rent/facility costs							
	5	Other direct expenses							
	6	Volunteer labor	Yes % No	Yes % No	Yes% No				
	7	Direct expense summary. Add lines 2 through	5 in column (d)		►				
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)						
9	9 Enter the state(s) in which the organization conducts gaming activities:								
		he organization licensed to conduct gaming ac No," explain:				Yes	No		
		ere any of the organization's gaming licenses re Yes," explain:	voked, suspended, or te	rminated during the tax y	/ear?	Yes	No		

Sch	edule G (Form 990 or 990-EZ) 2020 JUNIOR ACHIEVEMENT OF NEW YORK, INC. 13-	303182	28	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:			
a	The organization's facility	13a		%
	An outside facility			%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	No
	 If "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: 			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation 🕨 💲			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	 Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? 		Yes	No
	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	ITTIV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and P 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	art III, lir	ies 9, 9	9b, 10b,

	(continued)		

SCHEDULE I (Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.							
Department of the Treasury Internal Revenue Service				Attach to For	m 990.			Open to Public Inspection
Internal Revenue Service Go to www.irs.gov/Form990 for the latest information. Name of the organization Employer JUNIOR ACHIEVEMENT OF NEW YORK, INC. Employer								
Part I General In	formation on Grants a		, .					
	ation maintain records t ward the grants or assis							
	IV the organization's pro							
	d Other Assistance to	-				anization answered "Y	es" on Form 990, Parl	IV, line 21, for any
	nat received more than S					(f) Method of		
	dress of organization vernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 Enter total numb	er of section 501(c)(3) a	nd government org	anizations listed in the	e line 1 table				•
3 Enter total numb	er of other organizations	s listed in the line 1	table					
LHA For Paperwork	Reduction Act Notice	, see the Instruction	ons for Form 990.					Schedule I (Form 990) 2020

Schedule I (Form 990) 2020

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
WARD	33	30,000.	٥.		
Part IV Supplemental Information. Provide the information red	uired in Part L lin	e 2 [.] Part III. column	(b): and any other ac	ditional information	

SCHEDULE I, PART III:

JA NEW YORK PROVIDED THE INDIVIDUAL GRANTS IN THE FORM OF CASH AWARDS

TO RECOGNIZE THE WORK OF THREE TEAMS IN THE ANNUAL BUSINESS PLAN

COMPETITION. THE MEMBERS OF THE FIRST PLACE TEAM EACH RECEIVED

\$1,500/TEAM MEMBER; SECOND PLACE RECEIVED \$1,000/TEAM MEMBER; AND THIRD

PLACE RECEIVED \$500/TEAM MEMBER. JA NEW YORK ALSO PROVIDED A \$10,000

SCHOLARSHIP IN THE FORM OF A CASH AWARD TO THE JA NEW YORK STUDENT OF

THE YEAR WHO IS A RISING STAR AND BUSINESS LEADER OF TOMORROW, \$1,000

GRANTS IN THE FORM OF CASH AWARDS TO FOUR STUDENTS OF THE YEAR

FINALISTS, \$750 TO ONE FINALIST RUNNER UP AND \$250 TO SIX STUDENTS.

SCHEDULE J (Form 990)		Con For certain Officer
(, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,	,	For certain Onicer
		Complete if the orga
Department of the Treasury Internal Revenue Service		► Go to www.irs.go
Name of the	ne organizatior	ז
		JUNIOR ACHIEVEMENT
Part I	Question	s Regarding Compensatio

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. 2020 Open to Public Inspection

Employer identification number

OMB No. 1545-0047

	Attach to Form 550.	
Go to	to www.irs.gov/Form990 for instructions and the	e latest information.

	JUNIOR ACHIEVEMENT OF NE	W YORK, INC.	13-3031828		
Pa	rt I Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided a	ny of the following to or for a person listed on Form 9	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 persor	nal use		
	Travel for companions	Payments for business use of personal res			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (such as maid, chauffeu	r, chef)		
b	If any of the boxes on line 1a are checked, did the organizat	ion follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described		1b		
2	Did the organization require substantiation prior to reimburs				
	trustees, and officers, including the CEO/Executive Director		2		
	······································				
3	Indicate which, if any, of the following the organization used	to establish the compensation of the organization's			
Ū	CEO/Executive Director. Check all that apply. Do not check				
	establish compensation of the CEO/Executive Director, but				
	X 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 co	ommittee		
	rom sso or other organizations				
4	During the year, did any person listed on Form 990, Part VII,	Section A line 1a with respect to the filing			
4		, Section A, line 1a, with respect to the himg			
_	organization or a related organization:		4.		х
	Receive a severance payment or change-of-control payment				X
	Participate in or receive payment from a supplemental nonq				X
С	Participate in or receive payment from an equity-based com		<u>4c</u>		А
	If "Yes" to any of lines 4a-c, list the persons and provide the	applicable amounts for each item in Part III.			
	Only an effort (2)(2) (0.1/2)(4) and (0.1/2)(20) are related	ione must complete lines 5.0			
-	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizat	-			
5	For persons listed on Form 990, Part VII, Section A, line 1a,	aid the organization pay or accrue any compensation	1		
_	contingent on the revenues of:		F .		х
					X
D	Any related organization?		<u>5b</u>		А
-	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a,	did the organization pay or accrue any compensation	ו		
	contingent on the net earnings of:				v
а	The organization?				X
b			<u>6b</u>		X
_	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a,				v
_	not described on lines 5 and 6? If "Yes," describe in Part III				х
8	Were any amounts reported on Form 990, Part VII, paid or a				
	initial contract exception described in Regulations section 5				X
9	If "Yes" on line 8, did the organization also follow the rebutta				
	Regulations section 53.4958-6(c)?				

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

Schedule J (Form 990) 2020

Schedule J (Form 990) 2020

13-3031828

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) JOSEPH A. PERI	(i)	230,771.	0.	0.	0.	7,623.	238,394.	0.
PRESIDENT & CEO	(ii)	0.	٥.	0.	0.	0.	0.	0.
(2) RENEE M. COLOMBO	(i)	152,974.	٥.	0.	0.	12,382.	165,356.	0.
SR.VP DEVELOPMENT & COMMUNICATIONS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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Pag<u>e 3</u>

Part III Supplemental Information

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

PART I, LINE 3:

THE COMPENSATION OF JA NEW YORK'S PRESIDENT & CHIEF EXECUTIVE OFFICER AND

SENIOR VICE PRESIDENT, DEVELOPMENT & COMMUNICATIONS IS REVIEWED AND

APPROVED ANNUALLY BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS

PURSUANT TO AUTHORITY SPECIFICALLY DELEGATED TO IT BY JA NEW YORK'S BOARD

OF DIRECTORS. THE EXECUTIVE COMMITTEE REVIEWS COMPENSATION DATA FOR

COMPARABLE JUNIOR ACHIEVEMENT AREAS AND RECOMMENDATIONS FROM A COMPENSATION

STUDY COMMISSIONED BY JUNIOR ACHIEVEMENT USA, THE UMBRELLA ORGANIZATION

THAT AUTHORIZES ALL JUNIOR ACHIEVEMENT AREAS TO OPERATE. THE DECISIONS OF

THE EXECUTIVE COMMITTEE ARE DOCUMENTED CONTEMPORANEOUSLY.

SCHEDULE O	Supplemental Information to Form 990 or 990	-EZ	OMB No. 1545-0047
(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.		2020
Department of the Treasury Internal Revenue Service	Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.		Open to Public Inspection
Name of the organization	JUNIOR ACHIEVEMENT OF NEW YORK, INC.	Employer 13-30	identification number
FORM 990, PART III,	LINE 1, DESCRIPTION OF ORGANIZATION MISSION:		
JUNIOR ACHIEVEMENT	OF NEW YORK (JA NEW YORK) IS THE LOCAL AFFILIATE OF		
JUNIOR ACHIEVEMENT	JSA, THE NATION'S LARGEST ORGANIZATION DEDICATED TO		
GIVING YOUNG PEOPLE	THE KNOWEDGLE AND SKILLS THEY NEED TO OWN THEIR		
ECONOMIC SUCCESS, P	AN FOR THEIR FUTURE AND MAKE SMART ACADEMIC AND		
ECONOMIC CHOICES. O	JR MISSION IS TO INSPIRE AND PREPARE YOUNG PEOPLE TO		
SUCCEED IN A GLOBAL	ECONOMY.		
FORM 990, PART VI,	SECTION B, LINE 11B:		
THE FORM 990 WAS RE	VIEWED WITH THE JA NEW YORK AUDIT COMMITTEE. THE AUDIT		
COMMITTEE THEN PROV	IDED AN OVERVIEW OF THE FORM 990 TO THE JA NEW YORK		
BOARD OF DIRECTORS.	THE FORM 990 WAS PROVIDED TO EACH MEMBER OF THE JA NEW		
YORK BOARD IN ELECT	RONIC FORMAT PRIOR TO ITS FILING WITH THE INTERNAL		
REVENUE SERVICE.			
FORM 990, PART VI,	SECTION B, LINE 12C:		
JA NEW YORK PROVIDE	S EACH NEW DIRECTOR AND NEW EMPLOYEE WITH A COPY OF JA		
NEW YORK'S WRITTEN	CONFLICT OF INTEREST POLICY AND REQUIRES THEM TO		
COMPLETE AN ACKNOWL	EDGEMENT DECLARING ANY POTENTIAL CONFLICT OR		
ACKNOWLEDGING THAT	THERE ARE NONE. IN ADDITION, JA NEW YORK CIRCULATES		
ANNUALLY IN JANUARY	OF EACH YEAR THE CONFLICT OF INTEREST POLICY TO EACH		
DIRECTOR AND EMPLOY	EE AND REQUIRES THEM TO COMPLETE AN ACKNOWLEDGMENT		
DECLARING ANY POTEN	TIAL CONFLICT OR ACKNOWLEDGING THAT THERE ARE NONE. THE		
CONFLICT OF INTERES	F ACKNOWLEDGEMENTS ARE REVIEWED BY AN OFFICER OF JA NEW		
YORK. COMPLIANCE QU	ESTIONS FOR JA NEW YORK EMPLOYEES ARE REFERRED TO THE JA		

NEW YORK PRESIDENT. COMPLIANCE QUESTIONS PERTAINING TO THE JA NEW YORK

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization	Employer identification number
JUNIOR ACHIEVEMENT OF NEW YORK, INC.	13-3031828
PRESIDENT OR A JA NEW YORK BOARD MEMBER ARE REFERRED TO THE JA NEW YORK	
BOARD CHAIR. COMPLIANCE QUESTIONS PERTAINING TO THE JA NEW YORK BOARD CHAIR	
AND COMPLIANCE QUESTIONS THAT CANNOT BE RESOLVED AT THE JA NEW YORK LEVEL	
ARE REFERRED TO THE JUNIOR ACHIEVEMENT USA, INC. EXECUTIVE VICE PRESIDENT	
OR HIS OR HER DESIGNEE FOR REVIEW. CONSISTENT WITH THE NEW YORK NFPCL, JA	
NEW YORK DOES NOT COUNT THE VOTES OF MEMBERS OF THE BOARD OF DIRECTORS WITH	
AN INTEREST IN A CONTRACT OR TRANSACTION INVOLVING JA NEW YORK IN	
DETERMINING IF THE REQUIRED VOTE OF THE BOARD OF DIRECTORS HAD BEEN	
OBTAINED TO APPROVE SUCH CONTRACT OR TRANSACTION.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE COMPENSATION OF JA NEW YORK'S PRESIDENT (CHIEF EXECUTIVE OFFICER) IS	
REVIEWED AND APPROVED ANNUALLY BY THE EXECUTIVE COMMITTEE OF THE BOARD OF	
DIRECTORS PURSUANT TO AUTHORITY SPECIFICALLY DELEGATED TO IT BY JA NEW	
YORK'S BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE REVIEWS COMPENSATION	
DATA FOR COMPARABLE JUNIOR ACHIEVEMENT AREAS AND RECOMMENDATIONS FROM A	
COMPENSATION STUDY COMMISSIONED BY JUNIOR ACHIEVEMENT USA, INC., THE	
UMBRELLA ORGANIZATION THAT AUTHORIZES ALL JUNIOR ACHIEVEMENT AREA	
ORGANIZATIONS TO OPERATE IN THEIR AREAS. THE DECISIONS OF THE EXECUTIVE	
COMMITTEE ARE DOCUMENTED CONTEMPORANEOUSLY. THIS PROCESS WAS LAST PERFORMED	
FOR THE 2020-2021 FISCAL YEAR. THE EXECUTIVE COMMITTEE ALSO PERFORMED A	
REVIEW OF THE COMPENSATION OF JA NEW YORK'S CHIEF FINANCIAL OFFICER FOR THE	
2020-2021 FISCAL YEAR SIMILAR TO THE REVIEW OF THE COMPENSATION OF THE	
PRESIDENT DESCRIBED IN RESPONSE TO PART VI, ITEM 15A ABOVE.	

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

JA NEW YORK MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND

FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. JA NEW YORK'S

Schedule O (Form 990 or 990-EZ) 2020	Page 2	
Name of the organization JUNIOR ACHIEVEMENT OF NEW YORK, INC.	Employer identification number 13-3031828	
FORM 990 AND FINANCIAL STATEMENTS ARE ALSO AVAILABLE ON ITS WEBSITE,		
WWW.JANY.ORG		