

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung  
benefit trust or private foundation)

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

OMB No 1545-0047

**2003**Open to Public  
Inspection**A** For the 2003 calendar year, or tax year beginning **7/01/03**, and ending **6/30/04****B** Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return  
☐ Amended return  
☐ Application pending

Please  
use IRS  
label or  
print or  
type.  
See  
Specific  
Instruc-  
tions.**C** Name of organization**JUNIOR ACHIEVEMENT OF MIDDLE TN, INC**

Number and street (or P O box if mail is not delivered to street address)

Room/suite

**120 POWELL PLACE**

City or town, state or country, and ZIP + 4

**NASHVILLE****TN 37204****D** Employer ID number**62-0582571****E** Telephone number**615-383-9500****F** Accounting method: ☐ Cash☒ Accrual ☐ Other (specify)Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable  
trusts must attach a completed Schedule A (Form 990 or 990-EZ).**G** Website: **WWW.JANASH.COM****J** Organization type(check only one) ☒ 501(c) ( **3** ) (insert no) ☐ 4947(a)(1) or ☐ 527**K** Check here ☐ if the organization's gross receipts are normally not more than \$25,000The organization need not file a return with the IRS, but if the organization received a  
Form 990 Package in the mail, it should file a return without financial data **Some states**  
**require a complete return.**

H and I are not applicable to section 527 organizations

**H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** If "Yes," enter number of affiliates **▶****H(c)** Are all affiliates included? ☐ Yes ☐ No

(If "No," att a list See instr)

**H(d)** Is this a separate return filed by an  
organization covered by a group ruling? ☒ Yes ☐ No**I** Group Exemption Number **▶ 1116****M** Check ☐ if the organization is not required  
to attach Sch B (Form 990, 990-EZ, or 990-PF)**L** Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 **▶ 1,827,234****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)****1** Contributions, gifts, grants, and similar amounts received**a** Direct public support**1a** **865,277****b** Indirect public support**1b** **119,075****c** Government contributions (grants)**1c****d** Total (add lines 1a through 1c) (cash \$ **984,352** noncash \$ )**1d** **984,352****2** Program service revenue including government fees and contracts (from Part VII, line 93)**2** **77,859****3** Membership dues and assessments**3****4** Interest on savings and temporary cash investments**4** **5,082****5** Dividends and interest from securities**5****6a** Gross rents**6a****b** Less rental expenses**6b****c** Net rental income or (loss) (subtract line 6b from line 6a)**6c****7** Other investment income (describe **▶** )**7****8a** Gross amount from sales of assets other  
than inventory

(A) Securities

(B) Other

**8a****b** Less cost or other basis and sales expenses**8b****c** Gain or (loss) (attach schedule)**8c****d** Net gain or (loss) (combine line 8c, columns (A) and (B))**8d****9** Special events and activities (attach schedule) If any amount is from gaming, check here ☐**a** Gross revenue (not including \$ of  
contributions reported on line 1a)**9a** **741,206****b** Less direct expenses other than fundraising expenses**9b** **205,405****c** Net income or (loss) from special events (subtract line 9b from line 9a)**9c** **535,801****10a** Gross sales of inventory, less returns and allowances**10a****b** Less cost of goods sold**10b****c** Gross profit (less) from sales of inventory (attach schedule) (subtract line 10b from line 10a)**10c****11** Other revenue (from Part VII, line 103)**11** **18,735****12** Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)**12** **1,621,829****13** Program services (from line 44, column (B))**13** **1,363,001****14** Management and general (from line 44, column (C))**14** **150,336****15** Fundraising (from line 44, column (D))**15** **176,052****16** Payments to affiliates (attach schedule)**SEE STMT 1****16** **56,654****17** Total expenses (add lines 16 and 44, column (A))**17** **1,746,043****18** Excess or (deficit) for the year (subtract line 17 from line 12)**18** **-124,214****19** Net assets or fund balances at beginning of year (from line 73, column (A))**19** **2,571,326****20** Other changes in net assets or fund balances (attach explanation)**20****21** Net assets or fund balances at end of year (combine lines 18, 19, and 20)**21** **2,447,112**

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form **990** (2003)

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**Part II Statement of**

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations

**Functional Expenses** and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See page 22 of the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash \$ _____ non-cash \$ _____ )	22			
23 Specific assistance to individuals	23			
24 Benefits paid to or for members	24			
25 Compensation of officers, directors, etc.	25	181,790	145,432	18,179
26 Other salaries and wages	26	430,380	344,304	43,038
27 Pension plan contributions	27	54,246	43,397	5,425
28 Other employee benefits	28			
29 Payroll taxes	29	40,837	32,670	4,084
30 Professional fundraising fees	30			
31 Accounting fees	31	4,400	3,520	440
32 Legal fees	32			
33 Supplies	33	9,282	7,426	928
34 Telephone	34	14,818	11,854	1,482
35 Postage and shipping	35	8,938	7,150	894
36 Occupancy	36	115,718	92,574	11,572
37 Equipment rental and maintenance	37			
38 Printing and publications	38			
39 Travel	39	10,722	8,578	1,072
40 Conferences, conventions, and meetings	40			
41 Interest	41	59,988	47,990	5,999
42 Depreciation, depletion, etc. (attach schedule)	42	230,463	184,370	23,047
43 Other expenses not covered above (itemize): a	43a			
b SEE STATEMENT	43b	527,807	433,736	59,895
c	43c			
d	43d			
e	43e			
44 Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1,689,389	1,363,001	150,336

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_,

(iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See page 25 of the instructions.)

What is the organization's primary exempt purpose?

► **SEE STATEMENT**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

**Program Service Expenses**  
(Required for 501(c)(3) & (4) orgs. & 4947(a)(1) trusts, but optional for others.)a **ECONOMIC EDUCATION PROGRAMS BENEFITTING OVER 44,100 STUDENTS IN MIDDLE TENNESSEE**(Grants and allocations \$ \_\_\_\_\_ ) **1,363,001**

b

(Grants and allocations \$ \_\_\_\_\_ )

c

(Grants and allocations \$ \_\_\_\_\_ )

d

(Grants and allocations \$ \_\_\_\_\_ )

e Other program services (attach schedule)

(Grants and allocations \$ \_\_\_\_\_ )

f **Total of Program Service Expenses** (should equal line 44, column (B), Program services)► **1,363,001**

**Part IV Balance Sheets** (See page 25 of the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only		(A) Beginning of year		(B) End of year
45	Cash-non-interest-bearing	79,674	45	109,017
46	Savings and temporary cash investments	179,169	46	104,027
47a	Accounts receivable	1,856,823		
b	Less allowance for doubtful accounts		47c	1,856,823
48a	Pledges receivable			
b	Less allowance for doubtful accounts		48c	
49	Grants receivable		49	
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)			
b	Less allowance for doubtful accounts		51c	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges	34,844	53	36,471
54	Investments-securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
55a	Investments-land, buildings, and equipment basis			
b	Less accumulated depreciation (attach schedule)		55c	
56	Investments-other (attach schedule)		56	
57a	Land, buildings, and equipment basis	1,853,304		
b	Less accumulated depreciation (attach schedule) <b>SEE STMT 4</b>		57c	1,423,918
58	Other assets (describe <b>SEE STMT 5</b> )	429,386	58	3,770
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	1,745		
60	Accounts payable and accrued expenses	3,472,260	59	3,534,026
61	Grants payable	30,062	60	85,888
62	Deferred revenue		61	
63	Loans from officers, directors, trustees, and key employees (attach schedule)		62	
64a	Tax-exempt bond liabilities (attach schedule)		63	
b	Mortgages and other notes payable (attach schedule) <b>SEE WORKSHEET</b>		64a	
65	Other liabilities (describe )	870,872	64b	1,001,026
66	<b>Total liabilities</b> (add lines 60 through 65)		65	
67	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74	900,934	66	1,086,914
67	Unrestricted			
68	Temporarily restricted	1,212,919	67	891,556
69	Permanently restricted	1,358,407	68	1,555,556
70	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> and complete lines 70 through 74		69	
70	Capital stock, trust principal, or current funds		70	
71	Paid-in or capital surplus, or land, building, and equipment fund		71	
72	Retained earnings, endowment, accumulated income, or other funds		72	
73	<b>Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)			
74	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	2,571,326	73	2,447,112
		3,472,260	74	3,534,026

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

Part IV-B	Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
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<b>a</b>	Total revenue, gains, and other support per audited financial statements ▶	<b>a</b>	1,827,234
<b>b</b>	Amounts included on line <b>a</b> but not on line 12, Form 990		
	(1) Net unrealized gains on investments \$		
	(2) Donated services and use of facilities \$		
	(3) Recoveries of prior year grants \$		
	(4) Other (specify)		
	SEE STMT 6		
	\$ 205,405		
	Add amounts on lines (1) through (4) ▶	<b>b</b>	205,405
<b>c</b>	Line <b>a</b> minus line <b>b</b> ▶	<b>c</b>	1,621,829
<b>d</b>	Amounts included on line 12, Form 990 but not on line <b>a</b> :		
	(1) Investment expenses not included on line 6b, Form 990 \$		
	(2) Other (specify)		
	\$		
	Add amounts on lines (1) and (2) ▶	<b>d</b>	
<b>e</b>	Total revenue per line 12, Form 990 (line <b>c</b> plus line <b>d</b> ) ▶	<b>e</b>	1,621,829

<b>a</b>	Total expenses and losses per audited financial statements	<b>a</b>	1,951,448
<b>b</b>	Amounts included on line <b>a</b> but not on line 17, Form 990		
	(1) Donated services and use of facilities \$		
	(2) Prior year adjustments reported on line 20, Form 990 \$		
	(3) Losses reported on line 20, Form 990 \$		
	(4) Other (specify)		
	<b>SEE STMT 7</b>		
	\$ 205,405	<b>b</b>	205,405
<b>c</b>	Line <b>a</b> minus line <b>b</b>	<b>c</b>	1,746,043
<b>d</b>	Amounts included on line 17, Form 990 but not on line <b>a</b> :		
	(1) Investment expenses not included on line 6b, Form 990 \$		
	(2) Other (specify)		
	\$		
	Add amounts on lines (1) and (2)	<b>d</b>	
<b>e</b>	Total expenses per line 17, Form 990 (line <b>c</b> plus line <b>d</b> )	<b>e</b>	1,746,043

**Part V**    **List of Officers, Directors, Trustees, and Key Employees** (List each one even if not compensated, see page 27 of the instructions )

[illegible]

**75** Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? If "Yes," attach schedule-see page 28 of the instructions

► ☐ Yes ☒ No

**Part VI Other Information** (See page 28 of the instructions.)

	Yes	No
<b>76</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	<b>76</b>	<b>X</b>
<b>77</b> Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	<b>77</b>	<b>X</b>
<b>78a</b> Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	<b>78a</b>	<b>X</b>
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	<b>78b</b>	
<b>79</b> Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	<b>79</b>	<b>X</b>
<b>80a</b> Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	<b>80a</b>	<b>X</b>
<b>b</b> If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
<b>81a</b> Enter direct and indirect political expenditures See line 81 instructions	<b>81a</b>	
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year?	<b>81b</b>	<b>X</b>
<b>82a</b> Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	<b>82a</b>	<b>X</b>
<b>b</b> If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	<b>82b</b>	
<b>83a</b> Did the organization comply with the public inspection requirements for returns and exemption applications?	<b>83a</b>	<b>X</b>
<b>b</b> Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	<b>83b</b>	<b>X</b>
<b>84a</b> Did the organization solicit any contributions or gifts that were not tax deductible?	<b>84a</b>	<b>X</b>
<b>b</b> If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>84b</b>	<b>N/A</b>
<b>85</b> 501(c)(4), (5), or (6) organizations <b>a</b> Were substantially all dues nondeductible by members?	<b>85a</b>	<b>N/A</b>
<b>b</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, <b>do not</b> complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	<b>85b</b>	<b>N/A</b>
<b>c</b> Dues, assessments, and similar amounts from members	<b>85c</b>	
<b>d</b> Section 162(e) lobbying and political expenditures	<b>85d</b>	
<b>e</b> Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	<b>85e</b>	
<b>f</b> Taxable amount of lobbying and political expenditures (line 85d less 85e)	<b>85f</b>	
<b>g</b> Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	<b>85g</b>	<b>N/A</b>
<b>h</b> If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	<b>85h</b>	<b>N/A</b>
<b>86</b> 501(c)(7) orgs Enter <b>a</b> Initiation fees and capital contributions included on line 12	<b>86a</b>	
<b>b</b> Gross receipts, included on line 12, for public use of club facilities	<b>86b</b>	
<b>87</b> 501(c)(12) orgs Enter <b>a</b> Gross income from members or shareholders	<b>87a</b>	
<b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	<b>87b</b>	
<b>88</b> At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	<b>88</b>	<b>X</b>
<b>89a</b> 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under: section 4911 <input type="checkbox"/> <u>0</u> , section 4912 <input type="checkbox"/> <u>0</u> , section 4955 <input type="checkbox"/> <u>0</u>		
<b>b</b> 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	<b>89b</b>	<b>X</b>
<b>c</b> Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		<b>0</b>
<b>d</b> Enter Amount of tax on line 89c, above, reimbursed by the organization		<b>0</b>
<b>90a</b> List the states with which a copy of this return is filed <input type="checkbox"/> <b>NONE</b>	<b>90b</b>	
<b>b</b> Number of employees employed in the pay period that includes March 12, 2003 (See instructions)		
<b>91</b> The books are in care of <input type="checkbox"/> <b>LAUREN KEY</b> Located at <input type="checkbox"/> <b>120 POWELL PLACE, NASHVILLE, TN</b>	Telephone no <input type="checkbox"/> <b>615-383-9500</b> ZIP + 4 <input type="checkbox"/> <b>37204</b>	
<b>92</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of <b>Form 1041</b> - Check here and enter the amount of tax-exempt interest received or accrued during the tax year	<input type="checkbox"/> <b>92</b>	

**Part VII Analysis of Income-Producing Activities** (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by sec 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
<b>93</b> Program service revenue					
<b>a</b> <b>EXCHANGE CITY PROGRAM</b>					<b>77,859</b>
<b>b</b>					
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>f</b> Medicare/Medicaid payments					
<b>g</b> Fees and contracts from government agencies					
<b>94</b> Membership dues and assessments					
<b>95</b> Interest on savings and temporary cash investments			<b>14</b>	<b>5,082</b>	
<b>96</b> Dividends and interest from securities					
<b>97</b> Net rental income or (loss) from real estate					
<b>a</b> debt-financed property					
<b>b</b> not debt-financed property					
<b>98</b> Net rental income or (loss) from personal property					
<b>99</b> Other investment income					
<b>100</b> Gain or (loss) from sales of assets other than inventory					
<b>101</b> Net income or (loss) from special events					<b>535,801</b>
<b>102</b> Gross profit or (loss) from sales of inventory					
<b>103</b> Other revenue					
<b>a</b>					
<b>b</b> <b>OTHER</b>					<b>18,735</b>
<b>c</b>					
<b>d</b>					
<b>e</b>					
<b>104</b> Subtotal (add columns (B), (D), and (E))		<b>0</b>		<b>5,082</b>	<b>632,395</b>
<b>105</b> Total (add line 104, columns (B), (D), and (E))					<b>637,477</b>

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

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See page 34 of the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
<b>93A</b>	<b>STUDENTS EXPERIENCE REAL-LIFE APPLICATIONS THROUGH PARTICIPATION IN AN EXPERIMENTAL CITY</b>
<b>101</b>	<b>VARIOUS FUNDRAISING EVENTS IN WHICH THE INCOME IS USED TO FUND IN-CLASSROOM BUSINESS PROGRAMS</b>

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See page 34 of the instructions.)

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

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See page 34 of the instructions.)

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

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

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

Date

*President*

*10/19/04*

**SCHEDULE A**  
(Form 990 or 990-EZ)**Organization Exempt Under Section 501(c)(3)**  
(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust  
**Supplementary Information-(See separate instructions.)**

OMB No 1545-0047

**2003**Department of the Treasury  
Internal Revenue Service▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

**JUNIOR ACHIEVEMENT OF MIDDLE TN, INC****62-0582571****Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee ben plans & deferred compensation	(e) Expense account and other allowances
<b>DORIS SHACKLETT 120 POWELL PLACE</b>	<b>VP MARKETING 40 PLUS</b>	<b>58,773</b>	<b>0</b>	<b>0</b>
Total number of other employees paid over \$50,000 ▶	<b>0</b>			

**Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

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

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

Schedule A (Form 990 or 990-EZ) 2003

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

	Yes	No
<b>1</b> During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B ) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	<b>1</b>	<b>X</b>
<b>2</b> During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions )		
<b>a</b> Sale, exchange, or leasing of property?	<b>2a</b>	<b>X</b>
<b>b</b> Lending of money or other extension of credit?	<b>2b</b>	<b>X</b>
<b>c</b> Furnishing of goods, services, or facilities?	<b>2c</b>	<b>X</b>
<b>d</b> Payment of compensation (or payment or reimbursement of expense if more than \$1,000)? <b>SEE PART V, FORM 990</b>	<b>2d</b>	<b>X</b>
<b>e</b> Transfer of any part of its income or assets?	<b>2e</b>	<b>X</b>
<b>3a</b> Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments )	<b>3a</b>	<b>X</b>
<b>3b</b> Do you have a section 403(b) annuity plan for your employees?	<b>3b</b>	<b>X</b>
<b>4</b> Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	<b>4</b>	<b>X</b>

**Part IV Reason for Non-Private Foundation Status** (See pages 3 through 6 of the instructions.)The organization is not a private foundation because it is (Please check only **ONE** applicable box )

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

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

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

- 14** ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions )



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

Calendar year (or fiscal year beginning in)	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
<b>15</b> Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	1,251,169	1,013,549	964,414	946,972	4,176,104
<b>16</b> Membership fees received					0
<b>17</b> Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	544,480	785,847	946,391	748,666	3,025,384
<b>18</b> Gross income from interest, dividends, amounts received from payment on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	8,835	25,084	28,003	48,811	110,733
<b>19</b> Net income from unrelated business activities not included in line 18					0
<b>20</b> Tax revenues levied for the organization's benefits and either paid to it or expended on its behalf					0
<b>21</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					0
<b>22</b> Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets. <b>STMT 8</b>	32,165	20,359			52,524
<b>23</b> Total of lines 15 through 22	1,836,649	1,844,839	1,938,808	1,744,449	7,364,745
<b>24</b> Line 23 minus line 17	1,292,169	1,058,992	992,417	995,783	4,339,361
<b>25</b> Enter 1% of line 23	18,366	18,448	19,388	17,444	
<b>26 Organizations described on lines 10 or 11:</b> a Enter 2% of amount in column (e), line 24					0
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					
c Total support for section 509(a)(1) test. Enter line 24, column (e)					
d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					
e Public support (line 26c minus line 26d total)					
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					%
<b>27 Organizations described on line 12:</b> a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year. (2002) <b>635,743</b> (2001) <b>634,771</b> (2000) <b>89,500</b> (1999) <b>571,500</b>					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year. (2002) <b>526,114</b> (2001) <b>767,399</b> (2000) <b>927,003</b> (1999) <b>731,222</b>					
c Add: Amounts from column (e) for lines 15 <b>4,176,104</b> 16 _____ 17 <b>3,025,384</b> 20 _____ 21 _____					
d Add: Line 27a total <b>1,931,514</b> and line 27b total <b>2,951,738</b>					
e Public support (line 27c total minus line 27d total)					
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e)					
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					31.4775%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					1.5036%

**28 Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

**Part V Private School Questionnaire** (See page 7 of the instructions.)

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

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

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions.)(To be completed **ONLY** by an eligible organization that filed Form 5768) **N/A**Check ☐ **a** if the organization belongs to an affiliated group Check ☐ **b** if you checked "a" and "limited control" provisions apply.**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred )

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations												
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36													
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37													
38	Total lobbying expenditures (add lines 36 and 37)	38													
39	Other exempt purpose expenditures	39													
40	Total exempt purpose expenditures (add lines 38 and 39)	40													
41	Lobbying nontaxable amount Enter the amount from the following table-														
	<table border="0"> <tr> <td><b>If the amount on line 40 is-</b></td> <td><b>The lobbying nontaxable amount is-</b></td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 40</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </table>	<b>If the amount on line 40 is-</b>	<b>The lobbying nontaxable amount is-</b>	Not over \$500,000	20% of the amount on line 40	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000	41	
<b>If the amount on line 40 is-</b>	<b>The lobbying nontaxable amount is-</b>														
Not over \$500,000	20% of the amount on line 40														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
42	Grassroots nontaxable amount (enter 25% of line 41)	42													
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43													
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44													

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

See the instructions for lines 45 through 50 on page 11 of the instructions )

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.) **N/A**

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

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h.)

Yes	No	Amount

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



## Special Events Schedule

Form **' 990 '**

## 2003

For calendar year 2003, or tax year beginning

**7/01/03** , and ending

6/30/04

Name

Employer Identification Number

**JUNIOR ACHIEVEMENT OF MIDDLE TN, INC**

**62-0582571**

	(A)	(B)	(C)	Others	Total
Gross receipts	269,856	131,650	339,700	0	741,206
Less contributions	0	0	0	0	0
Gross revenue	269,856	131,650	339,700	0	741,206
Less direct expenses	56,419	31,527	117,459	0	205,405
Net income (loss)	213,437	100,123	222,241	0	535,801

[illegible]

Forms <b>990 / 990-PF</b>	<b>Mortgages and Other Notes Payable</b>	<b>2003</b>
For calendar year 2003, or tax year beginning <b>7/01/03</b> , and ending		<b>6/30/04</b>
Name  <b>JUNIOR ACHIEVEMENT OF MIDDLE TN, INC</b>		Employer Identification Number  <b>62-0582571</b>

**FORM 990, PART IV, LINE 64B - ADDITIONAL INFORMATION**

Name of lender	Relationship to disqualified person
(1) <b>BANK OF AMERICA</b>	<b>NONE</b>
(2) <b>GMAC</b>	<b>NONE</b>
(3) <b>BANK OF AMERICA LINE OF CREDIT</b>	<b>NONE</b>
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Original amount borrowed	Date of loan	Maturity date	Repayment terms	Interest rate
(1) <b>1,000,000</b>	<b>3/15/02</b>	<b>3/15/07</b>	<b>MO INT + SEMI-ANNUAL PRINC</b>	
(2) <b>29,875</b>	<b>11/02/01</b>	<b>11/10/07</b>	<b>\$536 PER MO (60 MO AMORT)</b>	<b>2.900</b>
(3) <b>186,000</b>	<b>7/29/03</b>	<b>10/24/04</b>	<b>MO INT + SEMI-ANNUAL PRINC</b>	<b>5.500</b>
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Security provided by borrower	Purpose of loan
(1) <b>CONTRIBUTIONS RECEIVABLE &amp; EQUIPMENT</b>	<b>IMPROVEMENTS TO LEASED PROPERTY</b>
(2) <b>AUTOMOBILE</b>	<b>PURCHASE AUTOMOBILE</b>
(3) <b>CONTRIBUTIONS RECEIVABLE &amp; EQUIPMENT</b>	<b>OPERATING EXPENSES</b>
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	

Consideration furnished by lender	Balance due at beginning of year	Balance due at end of year
(1) <b>NONE</b>	<b>850,000</b>	<b>800,000</b>
(2) <b>NONE</b>	<b>20,872</b>	<b>15,026</b>
(3) <b>NONE</b>		<b>186,000</b>
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Totals</b>	<b>870,872</b>	<b>1,001,026</b>

JUNIACH JUNIOR ACHIEVEMENT OF MIDDLE TN, INC

62-0582571

**Federal Statements**

FYE: 6/30/2004

**Statement 1 - Form 990, Part I, Line 16 - Payments to affiliates**

Bus Name	Purpose	Addr	Amount
JUNIOR ACHIEVEMENT	PARTICIPATION FRANCHISE FEE	ONE EDUCATION WAY	\$ 56,654
TOTAL			\$ 56,654

**Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses**

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
	\$	\$	\$	\$
EXPENSES				
PROGRAM MATERIAL	144,866	144,866		
EMPLOYEE INSURANCE	79,783	63,827	7,978	7,978
REPAIRS AND MAINTENANCE	86,101	68,881	8,610	8,610
UNCOLLECTIBLE CONTRIBUTIONS	8,585	6,868	859	858
CONTRACT LABOR	10,288	8,230	1,029	1,029
UTILITIES	26,290	21,032	2,629	2,629
MARKETING	29,930			29,930
PUBLIC RELATIONS	12,885	10,308	1,288	1,289
SUBSCRIPTIONS	9,546	7,637	954	955
VOLUNTEER TRAINING	8,923	8,923		
COMPUTER EXPENSE	16,223	12,978	1,623	1,622
BUSINESS INSURANCE	10,226	8,181	1,022	1,023
STAFF TRAINING	7,025	5,620	702	703
PROGRAM INSURANCE	6,643	6,643		
UNEMPLOYMENT	4,459	3,567	446	446
BUSINESS DEVELOPMENT	2,363			2,363
OUTSIDE SERVICES	4,596	3,677	459	460
IN-KIND ITEMS	59,075	52,498	6,577	
TOTAL	\$ 527,807	\$ 433,736	\$ 34,176	\$ 59,895

**Statement 3 - Form 990, Part III - Organization's Primary Exempt Purpose**

ECONOMIC EDUCATION PROGRAMS BENEFITTING STUDENTS THROUGHOUT  
MIDDLE TENNESSEE

**Federal Statements**

FYE: 6/30/2004

**Statement 4 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment**

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
BUILDINGS, EQUIPMENT & VEHICLES	\$ 1,844,045	\$ 198,923	\$ 1,853,304	\$ 429,386
TOTAL	<u>\$ 1,844,045</u>	<u>\$ 198,923</u>	<u>\$ 1,853,304</u>	<u>\$ 429,386</u>

**Statement 5 - Form 990, Part IV, Line 58 - Other Assets**

Description	Beginning of Year	End of Year
OTHER CURRENT ASSETS	\$ 1,745	\$ 3,770
TOTAL	<u>\$ 1,745</u>	<u>\$ 3,770</u>

**Statement 6 - Form 990, Part IV-A - Other Revenue Included on Financial Statements**

Description	Amount
SPECIAL EVENTS	\$ 205,405
TOTAL	<u>\$ 205,405</u>

**Statement 7 - Form 990, Part IV-B - Other Expenses Included on Financial Statements**

Description	Amount
SPECIAL EVENTS	\$ 205,405
TOTAL	<u>\$ 205,405</u>

**Statement 8 - Schedule A, Part IV-A, Line 22 - Other Income**

Description	2002	2001	2000	1999
TOTAL	<u>\$ 32,165</u>	<u>\$ 20,359</u>	<u>\$ 0</u>	<u>\$ 0</u>





# Junior Achievement®

of Middle Tennessee 2003/2004

## LEADERSHIP

Revised 5/20/04

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#### Past Chairman

**William Hawkins**

#### Chairman

**Daniel G. Crockett**

President & CEO

Franklin American Mortgage

#### President

**W. Dale Johnson**

JA of Middle Tennessee, Inc

#### Corporate Secretary/Treasurer

**Mary K. Cavarra**

Executive Vice President & CFO

Ingram Industries

#### Vice Chairman Funding Growth

**Mark Fioravanti**

President

ResortQuest Int'l/Gaylord Entertainment

#### Vice Chairman Programs

**Thomas Conner**

President & CFO

Monster Labs

#### Vice Chairman Special Events

**Craig W. Clark, FLMI**

Senior VP Operations

American General Financial Group

#### Vice Chairman Awareness

**Jeffrey Buntin, Jr.**

President/Exec Creative Director

The Buntin Group

#### National Board Member

**Victoria Jackson**

President

Jackson Pierce Fine Jewelers

### BOARD OF DIRECTORS

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Area Executive

AmSouth Bank

**George H. Armistead, III**

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TTC, Inc /New Business Development

**Bruce Ash**

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Dollar General Corporation

**Mike Becker**

Treasurer

Rogers Group, Inc

**Jeff Bentley**

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**Tammy Boehms**

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NFIB

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**Doug Cahill**

President

Doane Pet Care Enterprises

**Jim Carroll**

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Office Depot

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CPA/Shareholder

Horne CPA Group

**Doug Conditorio**

Director of Sales

The North Highland Company

**Mike Curb**

Chairman

Curb Records

**Sam DeVane**

Partner

Ernst & Young, LLP

**David Dingler**

Managing Partner

Medical Reimbursements

**David Fulmer**

District Manager

Publix Super Markets

**Pedro E. Garcia**

Ed D

Metropolitan Nashville Public Schools

**James T. Griscom, II**

Senior Vice President

Morgan Stanley

**David E. Hall**

Retired, TNN

**Paul Hastaba**

General Sales Manager

News Channel 5

**Henry Hillenmeyer**

Chris Hills

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Willis

**Thomas M. Hudson, Jr.**

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Matteson-Hudson Construction Co

**Susan Short Jones**

Sr Corporate Counsel

HCA Healthcare

**Jim Keiffer**

Senior Vice President, Marketing

Tennessee Valley Authority

**Herb Knoll**

VP/Consumer Market Executive

Bank of America

**Mike Kuhn**

Vice President, Sales

PRIMUS

**Kenneth C. Lester**

Vice President of Merchandising

Genesco

**Allen A. McCampbell, Jr.**

Retired, American General

**Geren Moor**

Senior Vice President

SouthTrust Bank

**Russell F. Morris, III**

RFM Development Company

**Tom Negri**

General Manager

Loews Vanderbilt Hotel

**G. Allen Parker, CRSP**

Group Vice President

SunTrust Bank

**Robert S. Patterson**

Managing Director

Boult, Cummings, Connors & Berry PLC

**Dr. J. Patrick Raines**

Dean, College of Business Administration

Belmont University

**Edward J. Scott**

Caterpillar Financial Services

**W. Lucas Simons**

Senior Managing Director

UBS PaineWebber

**James W. Spradley, Jr.**

President

Standard Candy Company

**Curtis Sullivan**

General Manager

Universal Solutions

**Robert H. Traeger**

COO

MXISystems, Inc

**Mark Trogon**

First VP Private Banking

National Bank of Commerce

**J. Bransford Wallace**

Chairman Emeritus

Willis

**Rosemary Walsh**

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Lovell Communications, Inc

**Scott Wampold**

Vice President Ticket Sales

Nashville Predators

**Brian Wiese**

Partner

KPMG LLP

**Ken Wills**

Audit Partner

Crowe Chizek and Company LLC

**Jack Wolf**

Vice President – Business Development

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HCA

**Jack Wood**

Chairman

Barge, Waggoner, Sumner & Cannon, Inc

**Pamela Wright**

President & CEO

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### STAFF

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President

**Doris Shacklett**

Vice President Marketing

**Lauren Key**

Director of Operations

**Michelle Williams**

Director of Exchange City

**Kelley Tune**

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**Amy Stephens**

Director of Programs

**Kim Windham**

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