



For the taxable year beginning 07012024 ending 06302025

JUNIOR ACHIEVEMENT OF KANSAS, INC. PO BOX 3728

EIN this entity

EIN Federal Consolidated Parent

480731855

TOPEKA KS 66604

A. Method Used to Determine Income of Corporation in Kansas

- X 1. Activity wholly within Kansas - Single entity
2. Activity wholly within Kansas - Consolidated
3. Single entity apportionment method (K-120AS)
4. Combined income method - Single corporation filing (Sch. K-121)
5. Combined income method - Multiple corporation filing (Sch. K-121)
6. Qualified elective two-factor (K-120AS) Year qualified:
7. Common carrier mileage (Enclose mileage apportionment schedule)
8. Alternative or separate accounting (Enclose letter of authorization and schedule)

B. Business Activity Code

90099

C. Date Business Began in KS

06231967

D. Date Business Discontinued in KS

E. State and Month/Day/Year of Incorporation

KS 06231967

F. State of Commercial Domicile

KS

G. Type of Federal Return Filed:

X 1. Separate

2. Consolidated

H. Have you submitted Form K-120EL?

I. Enter your original federal due date if other than 15th day of the 4th month after the end of the tax year.

11172025

J. Name or address has changed?

Filing an amended corporate income return. Reason for amended return: Note: This form cannot be used for tax years prior to 2021.

Amended affects Kansas only

Adjustment by IRS

Amended Federal return

- 1. Federal taxable income
2. Total state and municipal interest
3. Taxes on or measured by income or fees or payments in lieu of income taxes (Part IV, line 2)
4. Federal net operating loss deduction
5. 250 deduction related to Global Intangible Low-Taxed Income (GILTI) (I.R.C. § 250(a)(1)(B)) (Sch. req.)
6. Business interest expense carryforward deduction (I.R.C. § 163(j)) (Sch. req.)
7. Other additions to federal taxable income. (Sch. req.)
8. Total additions to federal taxable income (Add lines 2 - 7)
9. Interest on U. S. government obligations (Part V, line 2)
10. I.R.C. § 78 and 80% of foreign dividends (Sch. req.)
11. Global Intangible Low-Taxed Income (GILTI) (I.R.C. § 951(A)) (Sch. req.)
12. Disallowed business interest deduction (I.R.C. § 163(j)) (Sch. req.)

- 13. Contribution to capital exceptions (I.R.C. § 118) (Sch. req.)
14. Disallowed business meal expenses (I.R.C. § 274) (Sch. req.)
15. Other subtractions from federal taxable income (Sch. req.)
16. Total subtractions from federal taxable income (Add line 9 - 15)
17. Net income before apportionment (Add line 1 to line 8 and subtract line 16)
18. Nonbusiness income - Total company (Sch. req.)
19. Apportionable business income. (Subtract line 18 from line 17)
20. Average percent to Kansas (Part VI, lines A, B, C, & E: if 100% enter 100.0000)
21. Amount to Kansas (Multiply line 19 by line 20)
22. Nonbusiness income - Kansas (Sch. req.)
23. Kansas Expensing Recapture (Sch. req.)

100.0000





JUNIOR ACHIEVEMENT OF KANSAS, INC.

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- 24. Kansas Expensing Deduction (Sch. req.)
- 25. Kansas net income before NOL deduction (Add lines 21 - 23, then subtract line 24)
- 26. Kansas net operating loss deduction (Sch. req.)
- 27. Combined report (Schedule K-121) or alternative/separate accounting income. (Sch. req.)
- 28. Kansas taxable income (Subtract line 28 from line 25 or enter line 27, as applicable)
- 29. Normal tax (3.5% of line 28)
- 30. Surtax (3% of line 28 in excess of \$50,000)
- 31. Total tax (Add lines 29 and 30. If filing combined, use line 30 of K-121.)
- 32. Total nonrefundable credits (Part I, line 38; cannot exceed amount on line 31)
- 33. Balance (Subtract line 32 from line 31; cannot be less than zero)
- 34. Estimated tax paid and amount credited forward (Part II, line 4)
- 35. Other tax payments (enclose separate schedule)
- 36. Amount paid with Kansas extension
- 37. Total of all other refundable credits (Part I, line 46)
- 38. Payments remitted with original return (See instructions)
- 39. Overpayment from original return (This figure is a subtraction; see instructions)
- 40. Total prepaid credits (Add lines 34 - 38 and subtract line 39)
- 41. Balance due
- 42. Interest
- 43. Penalty
- 44. Estimated tax penalty
If annualizing to compute penalty, check this field
- 45. Total tax, interest & penalty due (Add lines 41-44) Complete Form K-120V & enclose it with your payment
- 46. Overpayment
- 47. Refund. Enter the amount of line 46 you wish to be refunded
- 48. Credit Forward. Enter the amount of line 46 (original return only) you wish to apply to 2025 estimated tax. (Line 48 cannot exceed the total of lines 34 - 36)

I authorize the Director of Taxation or the Director's designee to discuss my K-120 and any enclosures with my preparer.
I declare under the penalties of perjury that to the best of my knowledge and belief this is a true, correct, and complete return.

Officer
Signature (Required) Sarah Durekack

Title President

Date 5-15-24

LOUIS DREW WILLIAMS, CPA, SWINDOLL, JANZEN, HAWK & LOYD LLC
4301 SW HUNTOON, TOPEKA, KS 66604

Preparer
Signature (Required) Louis Drew Williams CPA

Preparer
Phone Number 7852343427

Preparer PTIN, EIN or SSN (Required) P02420747



PART I - NONREFUNDABLE CREDITS

1. Apprenticeship Credit (Enclose Schedule K-24; See instructions)
2. Affordable Housing Credit (Enclose Schedule K-25; See instructions)
3. Aviation/Aerospace Credit (Enclose Schedule (Enclose Schedule K-26; See instructions)
4. Housing Investor Credit (Enclose Schedule K-27; See instructions)
5. Powerful Economic Expansion Credit (Enclose Schedule K-28; See instructions)
6. Short Line Railroad Tax Credit (Enclose Schedule K-29; See instructions)
7. Center for Entrepreneurship Credit (Enclose Schedule K-31; See instructions)
8. Agritourism Liability Insurance Credit (Enclose Schedule K-33; See instructions)
9. Business and Job Development Credit - **carry forward use only** (Enclose Schedule K-34; See instructions)
10. Historic Preservation Credit (Enclose Schedule K-35; See instructions)
11. Disabled Access Credit (Enclose Schedule K-37; See instructions)
12. Swine Facility Improvement Credit (Enclose Schedule K-38; See instructions)
13. Oil and Gas Well Plugging Credit (Enclose Schedule K-39; See instructions)
14. Assistive Technology Contribution Credit (Enclose Schedule K-42; See instructions)
15. Eisenhower Foundation Contribution Credit (Enclose Schedule K-43; See instructions)
16. Disability Employment Credit (Enclose Schedule K-44; See instructions)
17. Friends of Cedar Crest Association Contribution Credit (Enclose Schedule K-46; See instructions)
18. Technology Enabled Fiduciary Financial Institutions Credit (Enclose Schedule K-48; See instructions)
19. Research and Development Credit (Enclose Schedule K-53; See instructions)
20. Venture Capital Credit - **carryforward use only** (Enclose Schedule K-55; See instructions)
21. Seed Capital Credit - **carryforward use only** (Enclose Schedule K-55; See instructions)
22. High Performance Incentive Program Credit (Enclose Schedule K-59; See instructions)
23. Community Service Contribution Credit (Enclose Schedule K-60; See instructions)
24. Alternative-Fuel Tax Credit (Enclose Schedule K-62; See instructions)
25. Targeted Employment Credit(Enclose Schedule (Enclose Schedule K-69; See instructions)
26. Low Income Student Scholarship Credit (Enclose Schedule K-70; See instructions)
27. Petroleum Refinery Credit - **carry forward use only** (Enclose Schedule K-73; See instructions)
28. Single City Port Authority Credit (Enclose Schedule K-76; See instructions)
29. Qualifying Pipeline Credit - **carry forward use only** (Enclose Schedule K-77; See instructions)
30. BioMass-to-Energy Credit - **carry forward use only** (Enclose Schedule K-79; See instructions)
31. Environmental Compliance Credit (Enclose Schedule K-81; See instructions)
32. Storage and Blending Equipment Credit - **carry forward use only** (Enclose Schedule K-82; See instructions)
33. Electric Cogeneration Facility Credit - **carry forward use only** (Enclose Schedule K-83; See instructions)
34. Community College and Technical College Contribution Credit (Enclose Schedule K-84; See instructions)
35. Commercial Restoration and Preservation Credit (Enclose Schedule K-92; See instructions)
36. Pregnancy Resource Act Credit (Enclose Schedule K-94; See instructions)
37. Farm Net Operating Loss (Enclose Schedule K-139F; See instructions)
38. **Total nonrefundable credits (Add lines 1 - 37. Enter total here and on line 32, page 2)**

REFUNDABLE CREDITS

39. Powerful Economic Expansion Credit (Enclose Schedule K-28; See instructions)
40. Telecommunications Credit (Enclose Schedule K-36; See instructions)
41. Child Day Care Assistance Credit (Enclose Schedule K-56; See instructions)
42. Small Employer Healthcare Credit (Enclose Schedule K-57; See instructions)
43. Community Service Contribution Credit (Enclose Schedule K-60; See instructions)
44. Individual Development Account Credit (Enclose Schedule K-68; See instructions)
45. Farm Net Operating Loss (Enclose Schedule K-139F; See instructions)
46. **Total refundable credits (Add lines 39 - 45. Enter total here and on line 37, page 2)**

ADDITIONAL INFORMATION

1. Did the corporation file a Kansas Income Tax return under the same name for the preceding year? Yes No If "no", enter previous name and EIN. _____

2. Enter the address of the corporation's principal location in Kansas.
PO BOX 3728
TOPEKA, KS 66604

3. The corporation's books are in care of:
 Name THE ORGANIZATION
 Address SAME AS ABOVE
 Telephone 7856000006

4. List each estimated tax payment and credit forward amount claimed on this return.

Date	Amount	Date	Amount

5. Has your corporation been involved in any reorganization during the period covered by this return? No Yes If "yes", enclose a detailed explanation.

6. If this is a final return for Kansas, please state the reason. If the corporation was liquidated or dissolved, state the IRC section under which the corporation was liquidated. _____

7. If your federal taxable income has been redetermined for any prior year(s) that have not previously been reported to Kansas, check the applicable box(es) below and state the calendar, fiscal, or short period year ending date. You are required to submit, under separate cover, the federal Forms 1139, 1120X, or Revenue Agent's Report along with the Kansas amended return (Form K-120 or K-120X, whichever is applicable).

Revenue Agent's Report Net Operating Loss
 Amended Return Years ended _____

8. If you are registered with the Kansas Department of Revenue under any other Kansas tax act, enter all registration or license numbers on the applicable line:

- a. Sales Tax _____
- b. Compensating Use Tax _____
- c. Withholding Tax _____
- d. Other (specify) _____

PART III AFFILIATED CORPORATIONS DOING BUSINESS IN KANSAS

(Enclose a separate sheet for additional corporations)

Name of Corporation	Employer ID Number

PART IV SCHEDULE OF TAXES

(Include those taxes deducted on line 17 of the federal return. See instructions.)

1. Taxes on or measured by income or fees or payments in lieu of income taxes. (Include federal environmental tax; itemize)

2. Total (Enter on line 3, page 1) _____

3. Total other taxes _____

4. Total taxes (Must equal line 17 of the federal return) _____

PART V SCHEDULE OF INTEREST INCOME

(Include the interest from line 5 of the federal return)

1. U.S. interest income (Describe type):

2. Total (Enter on line 9, page 1) _____

3. Total other interest income _____

4. Total interest income (Must equal line 5 of the federal return) _____

ATTACHMENT TO FORM K-120

This statement is attached to Form K-120 for a tax-exempt organization that files federal Form 990-T. Internal Revenue Code § 6072(e) states the Form 990-T is due the 15th day of the fifth month following the close of organization's taxable year. In conformity with the federal due date, the Form K-120 is due the 15th day of the fifth month following the close of the taxable year.

Product: Exempt Extension
Name: Junior Achievement of Kansas, Inc.
FEIN: *****1855

Category: 990-T Extension

IRS Center: Ogden
e-Postmark: 11/11/2025 11:40:40 AM
Notification:

Fiscal Year Begin Date: 7/1/2024

Fiscal Year End Date: 6/30/2025

eSigned:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
11/05/2025	24X:346510.990:V1	Upload Started			Jennings, Krista	
11/05/2025	24X:346510.990:V1	Ready to Release by Customer				
11/11/2025	24X:346510.990:V1	Released for Transmission - Validation in Progress			LeBlanc, Amber	
11/11/2025	24X:346510.990:V1	Ready to transmit - Validation Complete				
11/11/2025	24X:346510.990:V1	Transmitted to FD - 990-T Extension	48147320253150351e32			
11/11/2025	24X:346510.990:V1	Accepted by FD - 990-T Extension on 11/11/2025				

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

Department of the Treasury
Internal Revenue Service

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

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

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

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

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. JUNIOR ACHIEVEMENT OF KANSAS, INC.	Taxpayer identification number (TIN) 48-0731855
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 781751	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WICHITA, KS 67278	

Enter the Return Code for the return that this application is for (file a separate application for each return) 07

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08	Form 990-T (governmental entities)	15

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of THE ORGANIZATION

PO BOX 781751 - WICHITA, KS 67278

Telephone No. 316-761-1177

Fax No. _____

• If the organization does not have an office or place of business in the United States, check this box

• If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 15, 20 26, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

calendar year 20 _____ or
 tax year beginning JUL 1, 20 24, and ending JUN 30, 20 25

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

Change in accounting period

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

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

EXTENDED TO MAY 15, 2026

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No. 1545-0047

For calendar year 2024 or other tax year beginning JUL 1, 2024, and ending JUN 30, 2025

2024

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990T for instructions and the latest information. Do not enter SSN numbers on this form as it may be made public if your organization is an 501(c)(3).

Form header section including: A Check box if address changed, B Exempt under section 501(c)(3), C Book value of all assets at end of year 673,036, D Employer identification number 48-0731855, E Group exemption number 1116, F Check box if an amended return.

G Check organization type: 501(c) corporation, 501(c) trust, 401(a) trust, Other trust, State college/university, 6417(d)(1)(A) Applicable entity.

H Check if filing only to claim: Credit from Form 8941, Refund shown on Form 2439, Elective payment amount from Form 3800.

I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation.

J Enter the number of attached Schedules A (Form 990-T).

K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

L The books are in care of THE ORGANIZATION Telephone number 785-600-0006

Table with 11 rows: Part I Total Unrelated Business Taxable Income. Columns include line number, description, and amount. Total amount is 0.

Table with 7 rows: Part II Tax Computation. Columns include line number, description, and amount. Total amount is 0.

Table with 4 rows: Part III Tax and Payments. Columns include line number, description, and amount. Total amount is 0.

Part III Tax and Payments (continued)

5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)		5	0.
6 a	Payments: Preceding year's overpayment credited to the current year	6a		
b	Current year's estimated tax payments. Check if section 643(g) election applies <input type="checkbox"/>	6b		
c	Tax deposited with Form 8868	6c		
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Elective payment election amount from Form 3800	6g		
h	Payment from Form 2439	6h		
i	Credit from Form 4136	6i		
j	Other (see instructions)	6j		
7	Total payments. Add lines 6a through 6j		7	
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>		8	
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed		9	
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid		10	
11	Enter the amount of line 10 you want: Credited to 2025 estimated tax Refunded		11	

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

	Yes	No
1 At any time during the 2024 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here		X
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$		
4 Enter available pre-2018 NOL carryovers here \$ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5 Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
Business Activity Code	Available post-2017 NOL carryover	
	\$	
	\$	
	\$	
	\$	
6 a Reserved for future use		
b Reserved for future use		

Part V Supplemental Information

Provide any additional information. 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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here
 Signature of officer: Sarah Dunekack Date: 15-15-24 Title: PRESIDENT
 May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only

Print/Type preparer's name LOUIS DREW WILLIAMS	Preparer's signature <u>Louis Drew Williams</u>	Date <u>05/14/24</u>	Check <input type="checkbox"/> if self-employed	PTIN P02420747
Firm's name SWINDOLL, JANZEN, HAWK & LOYD, LLC	Firm's EIN 48-1041128		Phone no. 785-234-3427	
Firm's address 4301 SW HUNTOON ST. TOPEKA, KS 66604				