

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.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2021

Open to Public
Inspection

A For the **2021** calendar year, or tax year beginning **07/01/2021** and ending **06/30/2022**

B Check if applicable:

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

C Name of organization

KNOWLEDGEWORKS FOUNDATION

Doing Business As

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

Room/suite

312 PLUM STREET

950

City or town, state or province, country, and ZIP or foreign postal code

CINCINNATI, OH 45202

F Name and address of principal officer:

WILLIAM HITE

312 PLUM STREET, SUITE 950, CINCINNATI, OH 45202

D Employer identification number

31-1321973

E Telephone number

(513) 929-4777

G Gross receipts \$ 4,426,921.

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (Insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: WWW.KNOWLEDGEWORKS.ORG

H(c) Group exemption number ▶

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶ **L** Year of formation: 1991 **M** State of legal domicile: OH

Part I Summary

1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) **3** 7

4 Number of independent voting members of the governing body (Part VI, line 1b) **4** 7

5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) **5** 51

6 Total number of volunteers (estimate if necessary) **6** 12

7a Total unrelated business revenue from Part VIII, column (C), line 12 **7a**

b Net unrelated business taxable income from Form 990-T, line 34 **7b** NONE

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	5,205,276.	1,160,654.
	9 Program service revenue (Part VIII, line 2g)	2,150,795.	2,501,042.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	10,185.	18,918.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	351,048.	NONE
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,717,304.	3,680,614.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,138,381.	1,166,309.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	NONE	NONE
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,836,755.	6,670,971.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	3,210.	NONE
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 261,441.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,029,645.	4,410,354.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	12,007,991.	12,247,634.
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12	-4,290,687.	-8,567,020.
	20 Total assets (Part X, line 16)	34,010,195.	30,256,752.
	21 Total liabilities (Part X, line 26)	25,855,527.	22,687,573.
	22 Net assets or fund balances. Subtract line 21 from line 20	8,154,668.	7,569,179.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer

Date 5/10/2023

Type or print name and title Holly Brinkman COO & VP of Finance

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed

PTIN

AARON HERSHBERGER

Aaron D. Hershberger

05.05.2023

P00961884

Firm's name ▶ FORVIS, LLP

Firm's EIN ▶ 44-0160260

Firm's address ▶ 312 WALNUT STREET, SUITE 3000 CINCINNATI, OH 45202

Phone no. 513-621-8300

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2021)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

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 ☒ 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 ☒ No

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

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

4a (Code:) (Expenses \$ 2,307,435. including grants of \$) (Revenue \$ 1,078,017.)

KW IN SCHOOLS: SEE SCHEDULE O

4b (Code:) (Expenses \$ 2,379,136. including grants of \$ 640,000.) (Revenue \$ 281,005.)

POLICY AND ADVOCACY: SEE SCHEDULE O

4c (Code:) (Expenses \$ 1,897,965. including grants of \$ 491,679.) (Revenue \$ 293,540.)

IMPACT AND IMPROVEMENT: SEE SCHEDULE O

4d Other program services (Describe on Schedule O.) SEE SCHEDULE O

(Expenses \$ 2,169,458. including grants of \$ 34,630.) (Revenue \$ 848,480.)

4e Total program service expenses 8,753,994.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III.		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V.		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	X	
b Did the organization report an amount for investments-other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		X
c Did the organization report an amount for investments-program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	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.	X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII.		X
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	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.		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.		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.		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. See instructions.		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.		X
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.		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H.		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	X	

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
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.		X
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		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		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.		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.	X	
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.	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	X	
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.		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2a 51		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		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?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	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		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders 11a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? 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		
c	Enter the amount of reserves on hand 13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
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? If "Yes," see the instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.		

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1b Enter the number of voting members included on line 1a, above, who are independent.		
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?	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?	X	
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6 Did the organization have members or stockholders?		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?		X
7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
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.		X

Section 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?	X	
10b 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? . . .	X	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	X	
11b Describe on 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	X	
12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13 Did the organization have a written whistleblower policy?	X	
14 Did the organization have a written document retention and destruction policy?	X	
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?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
If "Yes" to line 15a or 15b, describe the process on 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?		X
16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ►

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ►
 HOLLY BRINKMAN, 312 PLUM STREET, SUITE 950, CINCINNATI, OH 45202

513-929-4777

Form 990 (2021)

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck 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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the 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 week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CHARLES AMBROSE PRESIDENT & CEO - TERM ENDED	39.00 1.00	X		X				568,162.	NONE	16,256.
(2) HOLLY BRINKMAN INTER PRES&CEO/COO&VP FINANCE	37.00 3.00			X				275,948.	NONE	45,715.
(3) MATTHEW WILLIAMS EVP & CHIEF STRATEGY OFFICER	39.00 1.00			X				256,203.	NONE	43,059.
(4) MICHAEL DIMAGGIO VP, PARTNERSHIPS & DEV	40.00 NONE					X		237,939.	NONE	22,035.
(5) VIRGEL HAMMONDS CHIEF LEARNING OFFICER	40.00 NONE				X			226,878.	NONE	11,427.
(6) LILLIAN PACE VP, POLICY & ADVOCACY	40.00 NONE				X			207,273.	NONE	10,427.
(7) REBECCA WOLFE VP, IMPACT & IMPROVEMENT	40.00 NONE				X			181,238.	NONE	34,536.
(8) KATHERINE PRINCE VP, STRATEGIC FORESIGHT	40.00 NONE					X		170,873.	NONE	22,595.
(9) KATE WESTRICH VP, MKTG & COMMS	40.00 NONE					X		163,066.	NONE	8,309.
(10) LAUREN MCCAULEY SR DIR, TEACHING & LEARNING	40.00 NONE					X		137,163.	NONE	30,701.
(11) STEPHEN MYERS SR DIR, INFO TECH	40.00 NONE					X		151,141.	NONE	15,787.
(12) LUCIE LAPOVSKY DIRECTOR - TERM ENDED	2.00 1.00	X						111,693.	NONE	NONE
(13) SEAN DECATUR DIRECTOR	2.00 NONE	X						NONE	NONE	NONE
(14) RENEE FOSTER DIRECTOR	2.00 NONE	X						NONE	NONE	NONE

Form 990 (2021)

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) THOMAS FRY DIRECTOR	2.00 1.00	X						NONE	NONE	NONE
(16) LIZZETTE GONZALEZ REYNOLDS CHAIR OF THE BOARD	2.00 NONE	X		X				NONE	NONE	NONE
(17) LILLIAN LOWERY DIRECTOR - TERM ENDED	2.00 NONE	X						NONE	NONE	NONE
(18) EILEEN RUDDEN VICE CHAIR OF THE BOARD	2.00 1.00	X		X				NONE	NONE	NONE
(19) BRENDA SHUM DIRECTOR	2.00 NONE	X						NONE	NONE	NONE
(20) TONY SMITH DIRECTOR - TERM ENDED	2.00 NONE	X						NONE	NONE	NONE
(21) ROBYN MINTER SMYERS DIRECTOR - TERM ENDED	2.00 NONE	X						NONE	NONE	NONE
(22) BECKY VAN DER BOGERT DIRECTOR - TERM ENDED	2.00 NONE	X						NONE	NONE	NONE
(23) VICTOR YOUNG DIRECTOR	2.00 1.00	X						NONE	NONE	NONE

1b Sub-total	2,687,577.	NONE	260,847.
c Total from continuation sheets to Part VII, Section A	NONE	NONE	NONE
d Total (add lines 1b and 1c)	2,687,577.	NONE	260,847.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **24**

- 3** Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*
- 4** For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? *If "Yes," complete Schedule J for such individual*
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SEE SCHEDULE O		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **5**

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions) . .	1e	115,432.			
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	1,045,222.			
	g	Noncash contributions included in lines 1a-1f	1g	\$			
	h	Total. Add lines 1a-1f		1,160,654.			
Program Service Revenue				Business Code			
	2a	INTEREST ON STUDENT LOANS	611710	604,297.	604,297.		
	b	FEEs FOR SERVICE	611710	1,827,483.	1,827,483.		
	c	KWI ADMIN FEES	611710	69,262.	69,262.		
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		2,501,042.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		18,532.			18,532.
	4	Income from investment of tax-exempt bond proceeds . .		NONE			
	5	Royalties		NONE			
			(i) Real	(ii) Personal			
	6a	Gross rents	6a				
	b	Less: rental expenses	6b				
	c	Rental income or (loss)	6c	NONE	NONE		
	d	Net rental income or (loss)		NONE			
	7a	Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other		
			7a	746,693.			
	b	Less: cost or other basis and sales expenses . .	7b	746,307.			
	c	Gain or (loss)	7c	386.			
	d	Net gain or (loss)		386.			386.
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a	NONE			
	b	Less: direct expenses	8b	NONE			
	c	Net income or (loss) from fundraising events		NONE			
	9a	Gross income from gaming activities. See Part IV, line 19	9a	NONE			
	b	Less: direct expenses	9b	NONE			
c	Net income or (loss) from gaming activities		NONE				
10a	Gross sales of inventory, less returns and allowances	10a	NONE				
b	Less: cost of goods sold	10b	NONE				
c	Net income or (loss) from sales of inventory		NONE				
Miscellaneous Revenue				Business Code			
	11a						
	b						
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		NONE			
12	Total revenue. See instructions		3,680,614.	2,501,042.		18,918.	

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response or note to any line in this Part IX ☐**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,166,309.	1,166,309.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	NONE			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	1,236,168.	878,292.	306,322.	51,554.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	NONE			
7 Other salaries and wages	4,325,318.	2,856,345.	1,302,568.	166,405.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	250,191.	168,302.	71,927.	9,962.
9 Other employee benefits	447,351.	301,352.	128,608.	17,391.
10 Payroll taxes	411,943.	277,385.	118,429.	16,129.
11 Fees for services (nonemployees):				
a Management	83,471.	32,256.	51,215.	
b Legal	98,261.		98,261.	
c Accounting	131,757.	3,236.	128,521.	
d Lobbying	NONE			
e Professional fundraising services. See Part IV, line 17.	NONE			
f Investment management fees	NONE			
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	SEE SCHE O 1,751,179.	1,184,507.	566,672.	NONE
12 Advertising and promotion	174,422.	109,550.	64,872.	
13 Office expenses	146,824.	101,963.	44,861.	
14 Information technology	363,097.	297,178.	65,919.	
15 Royalties	NONE			
16 Occupancy	319,974.	227,505.	92,469.	
17 Travel	282,217.	262,558.	19,659.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	68,082.	62,677.	5,405.	
20 Interest	169,366.	169,366.		
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization	79,831.		79,831.	
23 Insurance	108,605.	77,219.	31,386.	
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 O.)				
a STUDENT LOAN SERVICING FEES	79,346.	79,346.		
b STUDENT LOAN TRUSTEE & ADMIN	90,789.	90,789.		
c STUDENT LOAN AMORT. EXPENSE	193,885.	193,885.		
d STUDENT LOAN REBATE FEES	190,156.	190,156.		
e All other expenses	79,092.	23,818.	55,274.	
25 Total functional expenses. Add lines 1 through 24e	12,247,634.	8,753,994.	3,232,199.	261,441.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	4,161,299.	1	5,909,835.
	2 Savings and temporary cash investments	706,322.	2	1,287,033.
	3 Pledges and grants receivable, net	3,400,037.	3	1,907,812.
	4 Accounts receivable, net	302,026.	4	240,665.
	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	NONE	5	NONE
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	NONE	6	NONE
	7 Notes and loans receivable, net	NONE	7	NONE
	8 Inventories for sale or use	NONE	8	NONE
	9 Prepaid expenses and deferred charges	205,740.	9	251,885.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	597,740.		
	b Less: accumulated depreciation	366,408.		
	11 Investments - publicly traded securities	261,145.	10c	231,332.
	12 Investments - other securities. See Part IV, line 11	2,810,806.	11	2,054,120.
	13 Investments - program-related. See Part IV, line 11	NONE	12	NONE
	14 Intangible assets	19,898,952.	13	16,252,078.
	15 Other assets. See Part IV, line 11	NONE	14	NONE
16 Total assets. Add lines 1 through 15 (must equal line 33)	2,263,868.	15	2,121,992.	
Liabilities	17 Accounts payable and accrued expenses	34,010,195.	16	30,256,752.
	18 Grants payable	1,847,306.	17	1,668,888.
	19 Deferred revenue	NONE	18	NONE
	20 Tax-exempt bond liabilities	406,043.	19	1,351,149.
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	NONE	20	NONE
	22 Loans and other 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	NONE	21	NONE
	23 Secured mortgages and notes payable to unrelated third parties	NONE	22	NONE
	24 Unsecured notes and loans payable to unrelated third parties	14,043,072.	23	10,748,897.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	NONE	24	NONE
	26 Total liabilities. Add lines 17 through 25	9,559,106.	25	8,918,639.
	Net Assets or Fund Balances	27 Net assets without donor restrictions	25,855,527.	26
28 Net assets with donor restrictions				
29 Capital stock or trust principal, or current funds			29	
30 Paid-in or capital surplus, or land, building, or equipment fund			30	
31 Retained earnings, endowment, accumulated income, or other funds			31	
32 Total net assets or fund balances		549,386.	27	1,502,582.
33 Total liabilities and net assets/fund balances		7,605,282.	28	6,066,597.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,680,614.
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,247,634.
3	Revenue less expenses. Subtract line 2 from line 1	3	-8,567,020.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	8,154,668.
5	Net unrealized gains (losses) on investments	5	-20,019.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O).	9	8,001,550.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	7,569,179.

Part XII Financial Statements and Reporting

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

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

Form **990** (2021)

SCHEDULE A
(Form 990)Department of the Treasury
Internal Revenue Service**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021Open to Public
Inspection

Name of the organization

KNOWLEDGEWORKS FOUNDATION

Employer identification number

31-1321973

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

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

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 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 ☐ 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: _____
- 10 ☒ 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 on 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 about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

Schedule A (Form 990) 2021

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	%
16a 33 1/3 % support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
b 33 1/3 % support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
b 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	12,062,316.	16,480,472.	11,520,114.	13,031,798.	8,236,045.	61,330,745.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,838,954.	2,676,845.	2,915,069.	2,150,795.	2,501,041.	13,082,704.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						NONE
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						NONE
5 The value of services or facilities furnished by a governmental unit to the organization without charge						NONE
6 Total. Add lines 1 through 5.	14,901,270.	19,157,317.	14,435,183.	15,182,593.	10,737,086.	74,413,449.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	9,640,162.	9,148,210.	7,973,282.	8,151,432.	7,739,652.	42,652,738.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	47,193.	NONE	561,198.	390,588.	906,823.	1,905,802.
c Add lines 7a and 7b.	9,687,355.	9,148,210.	8,534,480.	8,542,020.	8,646,475.	44,558,540.
8 Public support. (Subtract line 7c from line 6.)						29,854,909.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6.	14,901,270.	19,157,317.	14,435,183.	15,182,593.	10,737,086.	74,413,449.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	87,713.	83,377.	50,499.	10,185.	18,532.	250,306.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						NONE
c Add lines 10a and 10b	87,713.	83,377.	50,499.	10,185.	18,532.	250,306.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						NONE
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	202,890.	123,337.	101,078.	351,048.	NONE	778,353.
13 Total support. (Add lines 9, 10c, 11, and 12.)	15,191,873.	19,364,031.	14,586,760.	15,543,826.	10,755,618.	75,442,108.

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**. ☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	39.57%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	46.07%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	0.33%
18 Investment income percentage from 2020 Schedule A, Part III, line 17	18	0.31%

19a 33 1/3% support tests - 2021. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. . . ☒

b 33 1/3% support tests - 2020. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. . . ☐

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

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

	Yes	No
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).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined on 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 on 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.)		

Part IV Supporting Organizations (continued)

	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 on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
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.		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (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?		
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).		
3 By reason of the relationship described on 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.		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.		Yes	No
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 on 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			

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

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	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 organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1 Distributable amount for 2021 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2021			
a From 2016			
b From 2017			
c From 2018			
d From 2019			
e From 2020			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2021 distributable amount			
i Carryover from 2016 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2021 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2021 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2022. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2017			
b Excess from 2018			
c Excess from 2019			
d Excess from 2020			
e Excess from 2021			

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

PART III, LINE 12

EXPLANATION OF OTHER INCOME:

SECURITIES LITIGATION INCOME

NFP SERVICING FEE INCOME

LEASE TERMINATION

**Schedule B
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No. 1545-0047

2021

Employer identification number

KNOWLEDGEWORKS FOUNDATION

31-1321973

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

Name of organization

KNOWLEDGEWORKS FOUNDATION

Employer identification number

31-1321973

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	N/A	\$ 200,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	N/A	\$ 595,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	N/A	\$ 14,224.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	N/A	\$ 235,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	N/A	\$ 115,432.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

31-1321973

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

Schedule B (Form 990) (2021)

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization KNOWLEDGEWORKS FOUNDATION	Employer identification number 31-1321973
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."
- 2 Political campaign activity expenditures. See instructions ▶ \$
- 3 Volunteer hours for political campaign activities. See instructions ▶

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955. ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities. ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities. ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b. ▶ \$
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990) 2021

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions 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 influence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)		32,653.	
c Total lobbying expenditures (add lines 1a and 1b)		32,653.	
d Other exempt purpose expenditures		8,721,341.	
e Total exempt purpose expenditures (add lines 1c and 1d)		8,753,994.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		587,700.	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
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.		
g Grassroots nontaxable amount (enter 25% of line 1f)		146,925.	
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	636,080.	820,221.	520,444.	587,700.	2,564,445.
b Lobbying ceiling amount (150% of line 2a, column (e))					3,846,668.
c Total lobbying expenditures	30,965.	29,320.	28,358.	32,653.	121,296.
d Grassroots nontaxable amount	159,020.	205,055.	130,111.	146,925.	641,111.
e Grassroots ceiling amount (150% of line 2d, column (e))					961,667.
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2021

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 of the lobbying activity.

		(a)		(b)
		Yes	No	Amount
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?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
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 similar means?			
i	Other activities?			
j	Total. Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
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 501(c)(5), or section 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 prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political 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 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Part IV Supplemental Information *(continued)*

PART I-A AND I-B

THESE SECTIONS ARE "NOT APPLICABLE" AS KNOWLEDGEWORKS FOUNDATION DOES NOT PARTICIPATE IN OR INTERVENE IN (INCLUDING THE PUBLISHING OR DISTRIBUTING OF STATEMENTS), ANY POLITICAL CAMPAIGN ON BEHALF OF (OR IN OPPOSITION TO) ANY CANDIDATE FOR PUBLIC OFFICE.

**SCHEDULE D
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization
KNOWLEDGEWORKS FOUNDATION

Employer identification number

31-1321973

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (for example, recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1. ▶ \$ _____

(ii) Assets included in Form 990, Part X. ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1. ▶ \$ _____

b Assets included in Form 990, Part X. ▶ \$ _____

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a ☐ Public exhibition d ☐ Loan or exchange program
- b ☐ Scholarly research e ☐ Other _____
- c ☐ Preservation for future generations
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐ Yes ☐ No

Part V Endowment Funds.

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

- | | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance | | | | | |
| b Contributions | | | | | |
| c Net investment earnings, gains, and losses | | | | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | | | | | |
- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ▶ _____ %
- b Permanent endowment ▶ _____ %
- c Term endowment ▶ _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

- | Description of property | (a) Cost or other basis (investment) | (b) Cost or other basis (other) | (c) Accumulated depreciation | (d) Book value |
|---|--------------------------------------|---------------------------------|------------------------------|----------------|
| 1a Land | | | | |
| b Buildings | | | | |
| c Leasehold improvements | | 4,770. | 857. | 3,913. |
| d Equipment | | 225,102. | 123,304. | 101,798. |
| e Other | | 367,868. | 242,247. | 125,621. |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) | | | | 231,332. |

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. (Column (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) STUDENT LOAN RECEIVABLES, NET		
(2) OF UNAMORTIZED LOAN		
(3) ACQUISITION COSTS	16,252,078.	COST
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) INT RECEIVABLE STUDENT LOANS	878,491.
(2) INT RECEIVABLE ON INVESTMENTS	3,030.
(3) RIGHT OF USE ASSETS	1,240,471.
(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 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) INTEREST PAYABLE	27,985.
(3) STUDENT LOAN PROGRAM RESIDUAL	7,718,073.
(4) OPERATING LEASE LIABILITIES	1,172,581.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	

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

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

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

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

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

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

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information.

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

SEE SUPPLEMENTAL PAGE

Part XIII Supplemental Information (continued)

SCHEDULE D, PART X, LINE 2

FEDERAL INCOME TAX

THE FOUNDATION IS EXEMPT FROM INCOME TAXES UNDER SECTION 501 OF THE INTERNAL REVENUE CODE AND A SIMILAR PROVISION OF STATE LAW. HOWEVER, THE FOUNDATION IS SUBJECT TO FEDERAL INCOME TAX ON ANY UNRELATED BUSINESS TAXABLE INCOME. THE FOUNDATION FILES TAX RETURNS IN THE U.S. FEDERAL JURISDICTION.

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.
▶ Attach to Form 990.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

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

Department of the Treasury
Internal Revenue Service

Name of the organization

KNOWLEDGEWORKS FOUNDATION

Employer identification number

31-1321973

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) ACHIEVING THE DREAM 8484 GEORGIA AVENUE SILVER SPRING, MD 20910	27-1635830	501(C)(3)	57,250.				HIGH-QUALITY COLLEGE IN HS EXPERIENCES
(2) ARTSWAVE 20 E CENTRAL PARKWAY CINCINNATI, OH 45264	31-0537138	501(C)(3)	6,075.				2021/2022 CAMPAIGN
(3) BARD COLLEGE P.O. BOX 5000 ANNAPOLIS ON HUDSON, NY 12504	14-1713034	501(C)(3)	61,250.				HIGH-QUALITY COLLEGE IN HS EXPERIENCES
(4) COMMONWEALTH OF KENTUCKY 100 AIRPORT ROAD FRANKFORT, KY 40601	61-0600439	GOVT	25,000.				HIGH-QUALITY COLLEGE IN HS EXPERIENCES
(5) ILLINOIS COMMUNITY COLLEGE BOARD 401 E. CAPITOL AVE SPRINGFIELD, IL 62701	33-1000747	GOVT	25,000.				HIGH-QUALITY COLLEGE IN HS EXPERIENCES
(6) JOBS FOR THE FUTURE 50 MILK ST., FLOOR 17 BOSTON, MA 02109	06-1164568	501(C)(3)	136,250.				HIGH-QUALITY COLLEGE IN HS EXPERIENCES
(7) MIDDLE COLLEGE NATIONAL CONSORTIUM 100 BANK ST., SUITE 3D NEW YORK, NY 10014	04-3608107	501(C)(3)	43,000.				HIGH-QUALITY COLLEGE IN HS EXPERIENCES
(8) MINNESOTA STATE COLLEGES AND UNIVERSITIES 30 7TH STREET EAST ST. PAUL, MN 55101	41-1687554	GOVT	25,000.				HIGH-QUALITY COLLEGE IN HS EXPERIENCES
(9) NATIONAL ALLIANCE OF CONCURRENT ENROLLMENT P.O. BOX 578 CHAPEL HILL, NC 27514	16-1609101	501(C)(3)	136,250.				HIGH-QUALITY COLLEGE IN HS EXPERIENCES
(10) NATIONAL CAREER TECHNICAL EDUCATION FDN 8484 GEORGIA AVE., SILVER SPRING, MD 20910	73-1086246	501(C)(3)	56,000.				HIGH-QUALITY COLLEGE IN HS EXPERIENCES
(11) OKLAHOMA STATE REGENTS FOR HIGHER EDUCATION 655 RESEARCH PARKWAY OKLAHOMA CITY, OK 73104	61-1770436	GOVT	25,000.				HIGH-QUALITY COLLEGE IN HS EXPERIENCES
(12) RESEARCH FOR ACTION 100 S. BROAD ST., PHILADELPHIA, PA 19110	23-2710950	501(C)(3)	80,000.				COMPETENCY-BASED LEARNING ANALYSIS

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 17
- 3 Enter total number of other organizations listed in the line 1 table 17

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

Schedule I (Form 990) 2021

JSA

1E1286 1.000

**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.

OMB No. 1545-0047

2021

**Open to Public
Inspection**

► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

Department of the Treasury
Internal Revenue Service
Name of the organization

KNOWLEDGEWORKS FOUNDATION

Employer identification number
31-1321973

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SMCC STORYTELLING INSTITUTE 7050 S. 24TH STREET PHOENIX, AZ 85052	86-0185552	501(C)(3)	21,179.				SUPPORT AZ YOUTH AUTOETHNOGRAPHY
(2) SUMMIT EDUCATION INITIATIVE 120 E. MILL ST., SUITE 300 AKRON, OH 44308	34-1843220	501(C)(3)	50,000.				SUPPORT & IMPLEMENT WHOLE CHILD POLICIES
(3) THE RILEY INSTITUTE AT FURMAN UNIVERSITY 3000 POINSETT HIGHWAY GREENVILLE, SC 29613	57-0314395	501(C)(3)	142,500.				COMPETENCY-BASED LEARNING SUPPORT
(4) WESTED 730 HARRISON STREET SAN FRANCISCO, CA 94107	94-3233542	501(C)(3)	226,500.				QUALITATIVE RESEARCH STUDIES
(5) YUMA UNION HIGH SCHOOL DISTRICT 3150 SOUTH AVE A, SUITE A YUMA, AZ 85346	20-8103660	GOVT	21,500.				SUPPORT AZ YOUTH AUTOETHNOGRAPHY
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶
- 3 Enter total number of other organizations listed in the line 1 table ▶

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

Schedule I (Form 990) 2021

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 non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.

SCHEDULE I, PART I, LINE 2

KNOWLEDGEWORKS MAINTAINS A SYSTEM OF RECORDS ON GRANTMAKING THAT INCLUDES: DATE OF REQUEST, ELIGIBILITY OF GRANTEE, CONTACT INFORMATION, DATE GRANT WAS AWARDED, GRANT PURPOSE, GRANT BUDGET, ELECTRONIC COPY OF EXECUTED GRANT AGREEMENT AND REQUIRED REPORTING. THE GRANTS MANAGER PROVIDES PERIODIC REPORTING TO PROGRAM DIRECTORS AND FOLLOWS UP WHEN REQUIRED REPORTING IS DUE.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization

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.

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

OMB No. 1545-0047

2021

**Open to Public
Inspection**

KNOWLEDGEWORKS FOUNDATION

Employer identification number

31-1321973

Part I Questions Regarding Compensation

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

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

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

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

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

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

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

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

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

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

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

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

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

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

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

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

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2021

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 and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
HOLLY BRINKMAN	273,243.	NONE	2,705.	14,433.	31,282.	321,663.	
1 INTER PRES&CEO/COO&VP FINANCE	NONE	NONE	NONE	NONE	NONE	NONE	
MATTHEW WILLIAMS	253,696.	NONE	2,507.	13,376.	29,683.	299,262.	
2 EVP & CHIEF STRATEGY OFFICER	NONE	NONE	NONE	NONE	NONE	NONE	
CHARLES AMBROSE	68,741.	NONE	499,421.	4,769.	11,487.	584,418.	
3 PRESIDENT & CEO - TERM ENDED	NONE	NONE	NONE	NONE	NONE	NONE	
MICHAEL DIMAGGIO	234,073.	NONE	3,866.	11,899.	10,136.	259,974.	
4 VP, PARTNERSHIPS & DEV	NONE	NONE	NONE	NONE	NONE	NONE	
KATHERINE PRINCE	168,302.	NONE	2,571.	8,794.	13,801.	193,468.	
5 VP, STRATEGIC FORESIGHT	NONE	NONE	NONE	NONE	NONE	NONE	
KATE WESTRICH	162,736.	NONE	330.	8,137.	172.	171,375.	
6 VP, MKTG & COMMS	NONE	NONE	NONE	NONE	NONE	NONE	
STEPHEN MYERS	149,089.	NONE	2,052.	7,625.	8,162.	166,928.	
7 SR DIR, INFO TECH	NONE	NONE	NONE	NONE	NONE	NONE	
LAUREN MCCAULEY	135,172.	NONE	1,991.	7,126.	23,575.	167,864.	
8 SR DIR, TEACHING & LEARNING	NONE	NONE	NONE	NONE	NONE	NONE	
VIRGEL HAMMONDS	224,660.	NONE	2,218.	11,234.	193.	238,305.	
9 CHIEF LEARNING OFFICER	NONE	NONE	NONE	NONE	NONE	NONE	
LILLIAN PACE	205,102.	NONE	2,171.	10,255.	172.	217,700.	
10 VP, POLICY & ADVOCACY	NONE	NONE	NONE	NONE	NONE	NONE	
REBECCA WOLFE	178,916.	NONE	2,322.	9,357.	25,179.	215,774.	
11 VP, IMPACT & IMPROVEMENT	NONE	NONE	NONE	NONE	NONE	NONE	
12							
13							
14							
15							
16							

Schedule J (Form 990) 2021

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.

SCHEDULE J, PART I, LINE 4A

PAYMENTS TO CHARLES AMBROSE IN THE AMOUNT OF \$480,000 WERE MADE UNDER THE

TERMS OF A NEGOTIATED SEPARATION AGREEMENT.

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KNOWLEDGEWORKS FOUNDATION

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Inspection**

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FORM 990, PART I, LINE 1

ORGANIZATION'S MISSION

KNOWLEDGEWORKS VISION IS A FUTURE OF LEARNING WHERE STUDENTS OF ALL RACES
AND ETHNICITIES, INCOMES AND IDENTITIES PURSUE THE KINDS OF LEARNING
EXPERIENCES THAT ENABLE THEM TO UNCOVER THEIR PASSIONS AND THRIVE IN AN
EVOLVING WORLD.

KNOWLEDGEWORKS MISSION IS TO HELP OUR PARTNERS IN STATES AND SCHOOLS WORK
TOGETHER TO ALIGN POLICY AND PRACTICE, REIMAGINING WHAT EDUCATION CAN DO
THROUGH PERSONALIZED, COMPETENCY-BASED LEARNING - AND WHAT IT MUST DO TO
PREPARE STUDENTS FOR A LIFETIME OF LEARNING.

OUR WORK IN SCHOOLS ACROSS THE COUNTRY SPARKS NEW THINKING ABOUT WAYS TO
PREPARE STUDENTS FOR AN UNCERTAIN FUTURE. WE BELIEVE IN PERSONALIZED
LEARNING NOT ONLY FOR STUDENTS, BUT ALSO FOR EDUCATORS AND LEADERS.

WITH MORE THAN 20 YEARS OF EXPERIENCE EXPLORING THE FUTURE OF LEARNING,
GROWING EDUCATOR IMPACT AND WORKING WITH STATE AND FEDERAL POLICYMAKERS,
OUR PASSIONATE TEAM PARTNERS WITH SCHOOLS AND SCHOOL DISTRICTS TO GROW A
SYSTEM-WIDE APPROACH TO SUSTAIN STUDENT-CENTERED PRACTICES SO THAT EVERY
CHILD GRADUATES READY FOR WHAT'S NEXT.

FORM 990, PART III, LINE 1

DESCRIPTION OF ORGANIZATION'S MISSION

WE HELP OUR PARTNERS IN STATES AND SCHOOLS WORK TOGETHER TO ALIGN POLICY
AND PRACTICE, REIMAGINING WHAT EDUCATION CAN DO THROUGH PERSONALIZED,

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COMPETENCY-BASED LEARNING - AND WHAT IT MUST DO TO PREPARE STUDENTS FOR A
LIFETIME OF LEARNING.

FORM 990, PART III, LINE 4A

PROGRAM SERVICE ACCOMPLISHMENTS - KNOWLEDGEWORKS IN SCHOOLS

THE KNOWLEDGEWORKS IN SCHOOLS TEAM (KWIS) HAS WORKED WITH MORE THAN 86
SCHOOL DISTRICTS AND STATE EDUCATION AGENCIES ACROSS 9 STATES IN
TRANSFORMING THEIR SYSTEM FROM A TRADITIONAL, FACTORY MODEL SYSTEM TO ONE
THAT IS PERSONALIZED AND COMPETENCY-BASED. THESE SCHOOL SYSTEMS ARE
DIVERSE IN SIZE, RACIAL DEMOGRAPHICS AND SOCIOECONOMIC BACKGROUND.

FY2022, KWIS PARTNERED WITH STATE EDUCATION AGENCIES IN NORTH DAKOTA,
OHIO, SOUTH CAROLINA, NEVADA AND ARIZONA TO HELP STAKEHOLDERS SUPPORT THE
GROWTH OF PERSONALIZED AND COMPETENCY-BASED EDUCATION STATEWIDE. GROWTH
WITHIN NORTH DAKOTA'S PARTICIPATING SCHOOL SYSTEM LED TO THE
ESTABLISHMENT OF LEADERSHIP TEAMS COMPRISED OF INDIVIDUALS REPRESENTING
SYSTEMS (SCHOOL, STATE DEPARTMENT, COMMUNITY-BASED ORGANIZATIONS) ACROSS
THE STATE. THESE TEAMS LED THE PLANNING OF AND IMPLEMENTATION OF
STATE-WIDE LEARNING COLLABORATIVES THAT BUILD SUSTAINABLE PROFESSIONAL
DEVELOPMENT OPPORTUNITIES IN NORTH DAKOTA. KNOWLEDGEWORKS PARTNERED WITH
THE OHIO DEPARTMENT OF EDUCATION TO BUILD STAFF CAPACITY TO IMPLEMENT
PERSONALIZED, WHOLE-CHILD APPROACHES ALIGNED WITH THE STATE'S STRATEGIC
PLAN. THIRTEEN REGIONAL SPECIALISTS WERE IDENTIFIED IN OHIO TO SUPPORT
PROFESSIONAL LEARNING OPPORTUNITIES AND COACHING FOR TEACHERS,
PRINCIPALS, AND DISTRICT LEADERS. THESE SPECIALISTS AND KNOWLEDGEWORKS
CO-DESIGNED AND ESTABLISHED THE OHIO PERSONALIZED LEARNING NETWORK WHICH

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WILL OFFER THREE PRIMARY PATHWAYS FOR JOINING THE NETWORK, EXPLORE,
LAUNCH, AND TRANSFORM. IN SOUTH CAROLINA, KWIS CONTINUED EFFORTS WITH THE
DEPARTMENT OF EDUCATION'S OFFICE OF PERSONALIZED LEARNING TO SUPPORT A
STATEWIDE NETWORK OF SCHOOLS AND DISTRICTS IMPLEMENTING PERSONALIZED,
COMPETENCY-BASED LEARNING. THIS STATEWIDE EFFORT GREW FROM 15 DISTRICTS
IN 2018 TO 60 SCHOOL SYSTEMS IN FY2022 WHICH REPRESENTS A COMMITMENT FROM
OVER 75% OF SOUTH CAROLINA'S DISTRICTS. HAVING FACILITATED NEVADA'S
BLUE-RIBBON COMMISSION FOR A GLOBALLY PREPARED NEVADA, KNOWLEDGEWORKS
PROVIDED SUPPORT TO THE NEVADA DEPARTMENT OF EDUCATION STAFF AS THEY
LAUNCHED A STATEWIDE PERSONALIZED, COMPETENCY-BASED LEARNING NETWORK.
KNOWLEDGEWORKS AND THE DEPARTMENT OF EDUCATION MET WITH ALL THIRTEEN
SCHOOL SYSTEMS TO EXPLORE WHAT STATE-WIDE SUPPORTS WOULD BE MOST
IMPACTFUL IN LAUNCHING PERSONALIZED, COMPETENCY-BASED LEARNING AS WELL AS
THE DESIGN OF A NEVADA PROFILE OF A GRADUATE. KWIS WORKED WITH STATE-WIDE
ORGANIZATIONS IN ARIZONA TO LAUNCH COHORTS OF SCHOOL SYSTEMS EXPLORING
NEW, MORE EQUITABLE LEARNING STRUCTURES FOR STUDENTS AND COMMUNITIES
ACROSS THE STATE. IN COLLABORATION WITH ARIZONA STATE UNIVERSITY,
KNOWLEDGEWORKS CREATED A NEW PERSONALIZED, COMPETENCY-BASED LEARNING
SPECIALIZATION FOR THE MARY L. FULTON TEACHER'S COLLEGE.

IN FY2022, KNOWLEDGEWORKS SERVED SCHOOL SYSTEMS SPANNING FROM ALASKA,
SOUTH TO TEXAS, SOUTHEAST TO SOUTH CAROLINA AND NORTH TO MASSACHUSETTS.
THESE SCHOOL SYSTEMS ARE AS SMALL AS A FEW HUNDRED STUDENTS TO AS A LARGE
AS 320,000 STUDENTS, BUT ALL ARE COMMITTED TO REDESIGNING THE LEARNING
INFRASTRUCTURE TO BEING MORE EQUITABLE, INCLUSIVE, AND PERSONALIZED FOR

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EACH CHILD AND FAMILY THEY SERVE.

FORM 990, PART III, LINE 4B

PROGRAM SERVICE ACCOMPLISHMENTS - POLICY & ADVOCACY

IN FY2022, KNOWLEDGEWORKS' POLICY AND ADVOCACY TEAM CONTINUED TO ENGAGE WITH STATE EDUCATION AND POLICY LEADERS ACROSS THE COUNTRY TO IDENTIFY AND REMOVE POLICY BARRIERS, ENABLING GREATER FLEXIBILITY AND SMOOTHER TRANSITIONS FOR DISTRICTS WORKING TO IMPLEMENT PERSONALIZED, COMPETENCY-BASED LEARNING. THE TEAM'S WORK DIRECTLY WITH STATES INCLUDED ADVOCACY EFFORTS IN MINNESOTA AND PENNSYLVANIA; CONTINUED ENGAGEMENTS WITH OHIO, SOUTH CAROLINA, NORTH DAKOTA AND NEVADA; AND SHORTER-TERM ENGAGEMENTS WITH UTAH, GEORGIA AND KENTUCKY. A MULTI-YEAR ENGAGEMENT WITH THE OHIO DEPARTMENT OF EDUCATION WAS LAUNCHED THIS YEAR WHILE WORK IN KENTUCKY HAS SINCE LED TO A MULTI-YEAR COMMITMENT.

THE POLICY AND ADVOCACY TEAM POSITIONED ITSELF AS THOUGHT LEADERS WITH A VARIETY OF PRESENTATIONS, INCLUDING TWO PRESENTATIONS FOR THE AURORA INSTITUTE SYMPOSIUM; TWO SXSW EDU PRESENTATIONS; SEVERAL WEBINARS; AND PRESENTATIONS AT NACEP, ECS, NASBE, CCSO, THE FOUNDATION FOR EXCELLENCE IN EDUCATION, CBEN AND EDUCATION REFORM NOW.

ADDITIONAL THOUGHT LEADERSHIP INCLUDED THE COMPLETION OF SEVERAL PROJECTS AND PUBLICATIONS, INCLUDING A 50-STATE SCAN WITH ECS; COLLEGE IN HIGH SCHOOL RECOMMENDATIONS FOR SOUTH CAROLINA, COLORADO AND RHODE ISLAND; AN OPPORTUNITY ANALYSIS AND ACTION PLAN FOR NEVADA; TRANSFORMING FOR TOMORROW; A SERIES OF WHOLE CHILD STORIES FOR OHIO; A POLICY FLEXIBILITY

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MEMO FOR OHIO; AND TWO PAPERS ON ASSESSMENT AND ACCOUNTABILITY. THE TEAM ALSO LAID THE GROUNDWORK FOR NEW PROJECTS, INCLUDING AN INNOVATION GUIDE FOR SOUTH CAROLINA AND A COMPETENCY-BASED LEARNING FRAMEWORK.

OTHER ACCOMPLISHMENTS FOR THE TEAM INCLUDE NEW EFFORTS IN POLICY TRACKING; FEDERAL POLICY LETTERS AND ADVISORY ROLES; THE LAUNCH OF STATE-LEVEL NETWORKS IN NEVADA, OHIO AND KENTUCKY WITH A FOCUS ON POLICY CHANGE ALIGNED TO PERSONALIZED, COMPETENCY-BASED LEARNING; AND BEING A FOUNDING MEMBER AND STEERING COMMITTEE MEMBER FOR THE STUDENT-CENTERED ASSESSMENT AND ACCOUNTABILITY COALITION.

FORM 990, PART III, LINE 4C

PROGRAM SERVICE ACCOMPLISHMENTS - IMPACT & IMPROVEMENT

IN THE CONTINUED EFFORTS TO SUPPORT STATE WORK, IN FY2022, KNOWLEDGEWORKS' IMPACT AND IMPROVEMENT TEAM PRODUCED ANOTHER REPORT ON THE FORMATIVE DATA COLLECTION AND SHARED INTERIM FINDINGS IN NORTH DAKOTA. THE TEAM FINALIZED PLANS FOR THE SUMMATIVE DATA PORTION OF THE STUDY AND BEGAN SEEKING DATA PERMISSIONS. ALSO IN NORTH DAKOTA, THE TEAM LED 19 CONTINUOUS QUALITY IMPROVEMENT CAPACITY-BUILDING SESSIONS WITH 30 DISTRICTS LEADERS AND DATA FELLOWS. THE TEAM GATHERED, CLEANED, AND ANALYZED 9,267 IMPLEMENTATION SURVEYS FROM EDUCATORS AND STUDENTS IN ARIZONA AND SOUTH CAROLINA. THE TEAM PARTNERED WITH YUMA SCHOOL DISTRICT AND THE SOUTH MOUNTAIN COMMUNITY COLLEGE IN ARIZONA TO HELP A CLASS OF 50 STUDENTS DEVELOP THEIR STORIES AS PART OF A STUDENT VOICE PROJECT AND ALSO WORKED WITH 12 YOUTH WITH LEARNING DIFFERENCES AND OTHER MARGINALIZING FACTORS (E.G., RACE, LANGUAGE) TO CREATE AND PUBLICLY SHARE

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THEIR AUTO-ETHNOGRAPHY.

TOWARDS THE GOAL OF BUILDING THE KNOWLEDGE BASE FOR THE FIELD, THE IMPACT AND IMPROVEMENT TEAM COMPLETED AND DISSEMINATED A CROSS-STATE ANALYSIS AND HELPED PUBLISH AND BROADLY DISSEMINATE FROM STATE COMMITMENT TO DISTRICT IMPLEMENTATION: APPROACHES AND STRATEGIES FOR PERSONALIZED, COMPETENCY-BASED LEARNING WITH RESEARCH PARTNER RESEARCH FOR ACTION (RFA), WITH 335 VIEWS OF OUR LANDING PAGE, APPROXIMATELY 500 DOWNLOADS FROM THE RFA SITE, AND 248 PARTICIPANTS OVER TWO LAUNCH WEBINARS. THE TEAM SECURED FUNDING TO EXPAND AND SUSTAIN MAKING THE CASE: COMPELLING DATA, A FIELD-FACING, SEARCHABLE DATA LIBRARY FOR SOURCING EVIDENCE AND DATA ON THE POSITIVE IMPACTS OF PCBL. THE DATA LIBRARY HAD 615 VIEWS IN FY2022, PRIOR TO ANY MAJOR OUTREACH EFFORTS. THE EDUCATOR COMPETENCIES FOR PERSONALIZED, LEARNER-CENTERED ENVIRONMENTS CONTINUED TO GARNER ATTENTION AND WITH LITTLE NEW PROMOTION HAD 408 PAPER DOWNLOADS AND 1,673 VIEWS OF THE INTERACTIVE WEBSITE. THE IMPACT AND IMPROVEMENT STAFF AUTHORED FIVE BLOGS FOR KNOWLEDGEWORKS, STUDENTS AT THE CENTER, AND GETTING SMART, APPEARED ON TWO PODCASTS, AND SERVED ON THE ADVISORY BOARD OF THE CHRISTENSEN INSTITUTE'S CANOPY PROJECT AND THE HIGHLANDER INSTITUTE'S RESEARCH ADVISORY COMMITTEE.

FORM 990, PART III, LINE 4D

PROGRAM SERVICE ACCOMPLISHMENTS - OTHER SERVICES
INCLUDE STRATEGIC FORESIGHT, GRANTMAKING AND STUDENT LOAN PROGRAMS.

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STRATEGIC FORESIGHT -

KNOWLEDGEWORKS' STRATEGIC FORESIGHT TEAM CONTINUED TO EXERCISE NATIONAL
THOUGHT LEADERSHIP AROUND THE FUTURE OF LEARNING THROUGH PUBLICATIONS,
PARTNERSHIPS AND STAKEHOLDER ENGAGEMENTS. IT PUBLISHED A GAME, IMPACT:
LEARNING EDITION, WHICH USES FUTURES THINKING TO HELP PLAYERS IMAGINE AND
THINK CRITICALLY ABOUT CHANGES THAT COULD IMPACT THE FUTURE OF LEARNING,
ALONG WITH A DISCUSSION GUIDE AND A BLOG SERIES HIGHLIGHTING ITS
CHARACTERS.

KNOWLEDGEWORKS ALSO PUBLISHED ITS SIXTH ANCHOR FORECAST, IMAGINING
LIBERATORY EDUCATION FUTURES, AND A RELATED VIDEO AND BLOG POSTS AND
HOSTED AN INTRODUCTORY WEBINAR. IN ADDITION, THE TEAM HOSTED A WEBINAR
SERIES ON TRANSFORMING STATE EDUCATION SYSTEMS.

KNOWLEDGEWORKS PARTNERED WITH REMAKE LEARNING AND SLB RADIO TO PRODUCE
TWO YOUTH TAKEOVERS OF THE REMAKING TOMORROW PODCAST. WITH REMAKE
LEARNING, KNOWLEDGEWORKS PUBLISHED TWO RELATED PAPERS EXPLORING WHAT
YOUTH WANT FOR THE FUTURE OF EDUCATION AND HOW ADULTS MIGHT HELP MAKE IT
HAPPEN, FORGING THE FUTURE OF LEARNING: THE KIDS HAVE A LOT TO SAY AND
FORGING YOUTH-CENTERED FUTURES: BRINGING YOUTH VISIONS TO LIFE.

KNOWLEDGEWORKS ALSO PRODUCED A SUITE OF RESOURCES ON EARLY CHILDHOOD
FUTURES FOR CAPITA AND SECURED FUNDING FROM TEACH FOR AMERICA TO
CO-CREATE A PAPER ON THE FUTURE OF LEARNING.

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THE STRATEGIC FORESIGHT TEAM PRESENTED, DESIGNED AND FACILITATED
WORKSHOPS AND WEBINARS EXPLORING FUTURE POSSIBILITIES AND WAYS OF SHAPING
THE FUTURE. THE TEAM DELIVERED ENGAGEMENTS FOR ALLEGHENY INTERMEDIATE
UNIT 3 (PA), BTS SPARK, GAMES FOR CHANGE, THE GRABLE FOUNDATION, THE
PENNSYLVANIA STATEWIDE STEM ECOSYSTEM, THE SHAPING EDU PENTE PITCH
CHALLENGE, AND WAYNE RESA (MI), AMONG OTHERS. THE TEAM ALSO SUPPORTED
KNOWLEDGEWORKS EFFORTS TO HELP STATE EDUCATION SYSTEMS AND SCHOOL
DISTRICTS TRANSITION TO PERSONALIZED, COMPETENCY-BASED LEARNING.

GRANT MAKING --

THE GRANT MAKING PROGRAM PROVIDED APPROXIMATELY \$1.2 MILLION IN GRANTS
AND CONTRIBUTIONS TO 57 ORGANIZATIONS.

STUDENT LENDING PROGRAMS --

KNOWLEDGEWORKS SERVED APPROXIMATELY 1,100 STUDENTS DURING THE FISCAL YEAR
THROUGH ITS STUDENT LENDING PROGRAMS.

FORM 990, PART VI, SECTION A, LINE 2

BUSINESS RELATIONSHIPS

CERTAIN KNOWLEDGEWORKS FOUNDATION BOARD MEMBERS ARE ALSO MEMBERS OF THE
BOARDS OF CERTAIN KNOWLEDGEWORKS FOUNDATION AFFILIATES. THESE OVERLAPPING
BOARD MEMBERSHIPS CONSTITUTE A BUSINESS RELATIONSHIP AS DEFINED BY THE
FORM 990 INSTRUCTIONS.

FORM 990, PART VI, SECTION A, LINE 3

KNOWLEDGEWORKS FOUNDATION CONTRACTED WITH NELNET TO ADMINISTER ITS
STUDENT LENDING PROGRAMS.

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

PROCESS TO REVIEW THE FORM 990

AFTER COMPLETION BY THE PREPARER, THE DRAFT FORM 990 IS REVIEWED BY THE ACCOUNTING DIRECTOR AND THE COO/VP OF FINANCE. THE FINAL DRAFT OF THE FORM 990 IS REVIEWED WITH THE AUDIT COMMITTEE. AFTER IT RECEIVES THE APPROVAL OF THE AUDIT COMMITTEE, THE FINAL FORM 990 IS DISTRIBUTED TO ALL MEMBERS OF THE BOARD OF DIRECTORS BEFORE IT IS FILED.

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

ORGANIZATION'S PRACTICE FOR MONITORING COMPLIANCE ON AN ANNUAL BASIS A CONFLICT OF INTEREST QUESTIONNAIRE IS COMPLETED BY DIRECTORS, OFFICERS AND KEY EMPLOYEES AND REVIEWED BY MANAGEMENT. ITEMS REPORTED ARE DISCUSSED WITH LEGAL COUNSEL, WHO ADVISES MANAGEMENT AND THE BOARD OF ANY REQUIRED ACTIONS. THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED WITH THE ANNUAL QUESTIONNAIRE AND IS ALSO ACCESSIBLE ON THE SECURE DIRECTOR'S PORTION OF THE FOUNDATION'S WEBSITE.

FORM 990, PART VI, SECTION B, LINE 15A & 15B

COMPENSATION DETERMINATION

THE COMPENSATION OF THE CEO, OTHER OFFICERS, AND KEY EMPLOYEES ARE SET BY THE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS UTILIZING A COMPENSATION STUDY PERFORMED BY AN INDEPENDENT COMPENSATION CONSULTING FIRM COMPARING SIMILAR POSITIONS IN SIMILAR ORGANIZATIONS, INCLUDING REVIEW OF FORM 990S FOR OTHER ORGANIZATIONS.

MEMBERS OF THE BOARD OF DIRECTORS HAVE IN THE PAST RECEIVED REASONABLE COMPENSATION FOR THEIR SERVICES AS MEMBERS OF THE BOARD OF DIRECTORS.

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A COMPENSATION STUDY WAS LAST PERFORMED IN MAY 2021 BY SMITHPILOT

FORM 990, PART VI, SECTION C, LINE 19

DOCUMENTS

THE CONSOLIDATED FINANCIAL STATEMENTS OF KNOWLEDGEWORKS FOUNDATION AND
ITS SUBSIDIARIES ARE AVAILABLE ON THE KNOWLEDGEWORKS FOUNDATION WEBSITE.
KNOWLEDGEWORKS FOUNDATION'S FORM 990 IS ALSO AVAILABLE ON ITS OWN
WEBSITE. THE GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE
AVAILABLE UPON REQUEST.

FORM 990, PART X, LINE 9

OTHER CHANGES IN NET ASSETS

UNREALIZED GAIN ON LIABILITY FOR STUDENT LOAN RESIDUAL	586,561
AMORTIZATION OF DISCOUNT ON STUDENT LOANS	339,599
TRANSFER FROM TAX-EXEMPT SUBSIDIARY - KWI	7,075,390
TOTAL TO FORM 990, PART XI, LINE 9	8,001,550

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FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

DESCRIPTION -----	GRANTS -----	EXPENSES -----	REVENUE -----
OTHER PROGRAM SERVICES: SEE SCHEDULE O	34,630.	2,169,458.	848,480.
	-----	-----	-----
TOTALS	34,630.	2,169,458.	848,480.
	=====	=====	=====

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FORM 990, PART VII-COMPENSATION OF THE 5 HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
PROMISE54 2414 HERRING RD SW #42967 ATLANTA, GA 30311	TRAINING AND DEV	283,550.
FROST BROWN TODD LLC 301 EAST 4TH ST, SUITE 3300 CINCINNATI, OH 45202	LEGAL SERVICES	239,384.
KORN FERRY 1650 ARCH ST #2300 PHILADELPHIA, PA 19103	RECRUITING	136,400.
WESTED 730 HARRISON ST SAN FRANCISCO, CA 94107	DATA ANALYTICS	134,208.
FORVIS LLP 312 WALNUT ST STE 3000 CINCINNATI, OH 45201	AUDIT AND TAX	117,518.

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FORM 990, PART IX - OTHER FEES

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DESCRIPTION	(A) TOTAL FEES	(B) PROGRAM SERVICE EXP.	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING EXPENSES
-----	-----	-----	-----	-----
BUSINESS CONSULTANTS	18,568.	NONE	18,568.	NONE
MARKETING & COMMUNICATION	143,136.	38,867.	104,269.	NONE
PAYROLL, COMP & BENEFITS	93,445.	66,228.	27,217.	NONE
HR, TRAINING & DEVELOPMEN	360,285.	NONE	360,285.	NONE
TECHNOLOGY	58,618.	2,285.	56,333.	NONE
POLICY & ADVOCACY	333,213.	333,213.	NONE	NONE
DATA, RESEARCH & EVALUATI	197,028.	197,028.	NONE	NONE
TEACHING & LEARNING CONSU	452,985.	452,985.	NONE	NONE
STRATEGIC FORESIGHT	93,901.	93,901.	NONE	NONE
TOTALS	-----	-----	-----	-----
	1,751,179.	1,184,507.	566,672.	NONE
	=====	=====	=====	=====

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FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

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DESCRIPTION	ENDING BOOK VALUE
-----	-----
PREPAID EXPENSES	251,885.

TOTALS	251,885.
	=====

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

KNOWLEDGEWORKS FOUNDATION

Related Organizations and Unrelated Partnerships

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

Employer identification number

31-1321973

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) STRIVEPARTNERSHIP, LLC 312 PLUM STREET, SUITE 950 CINCINNATI, OH 45202	EDUCATION	OH	NONE	NONE	KF
(2) KWSL, LLC 312 PLUM STREET, SUITE 950 CINCINNATI, OH 45202	STD LENDING	OH	NONE	NONE	KF
(3)					
(4)					
(5)					
(6)					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
(1) KWI 312 PLUM STREET, SUITE 950 CINCINNATI, OH 45202	SUPPORTING	OH	501(C)(3)	11A	KWF	Yes No X
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (iii) annuities, (iii) royalties, or (iv) rent from a controlled entity.		1a X
b Gift, grant, or capital contribution to related organization(s).		1b X
c Gift, grant, or capital contribution from related organization(s).		1c X
d Loans or loan guarantees to or for related organization(s).		1d X
e Loans or loan guarantees by related organization(s).		1e X
f Dividends from related organization(s).		1f X
g Sale of assets to related organization(s).		1g X
h Purchase of assets from related organization(s).		1h X
i Exchange of assets with related organization(s).		1i X
j Lease of facilities, equipment, or other assets to related organization(s).		1j X
k Lease of facilities, equipment, or other assets from related organization(s).		1k X
l Performance of services or membership or fundraising solicitations for related organization(s).		1l X
m Performance of services or membership or fundraising solicitations by related organization(s).		1m X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s).		1n X
o Sharing of paid employees with related organization(s).		1o X
p Reimbursement paid to related organization(s) for expenses.		1p X
q Reimbursement paid by related organization(s) for expenses.		1q X
r Other transfer of cash or property to related organization(s).		1r X
s Other transfer of cash or property from related organization(s).		1s X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) KWI		L	19,444.	ACTUAL COST
(2) KWI		N	2,193.	ALLOCATED COST
(3) KWI		Q	49,818.	ACTUAL COST
(4) KWI		S	7,075,390.	ACTUAL CASH TRF
(5)				
(6)				

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Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(1) Name, address, and EIN of entity	(2) Primary activity	(3) Legal domicile (state or foreign country)	(4) Predominant income (related, unrelated, excluded from tax under sections 512 - 514)	(5) Are all partners section 501(c)(3) organizations?		(6) Share of total income	(7) Share of end-of-year assets	(8) Disproportionate allocations?		(9) Code V - UBI amount in box 20 of Schedule K-1 (Form 1065)	(10) General or managing partner?		(11) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
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(8)													
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(16)													