

PUBLIC DISCLOSURE COPY

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form **990**

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

2023

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning 07/01, 2023, and ending 06/30, 20 24

B Check if applicable:
 Address change
 Name change
 Initial return
 Final 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 SUITE 950
 City or town, state or province, country, and ZIP or foreign postal code
CINCINNATI, OH 45202

D Employer identification number 31-1321973

E Telephone number (513) 929-4777

G Gross receipts \$ 6,422,403

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

K Form of organization: Corporation Trust Association Other

L Year of formation: 1991

M State of legal domicile: OH

H(c) Group exemption number _____

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	<u>9</u>
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	<u>9</u>
5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	<u>65</u>
6 Total number of volunteers (estimate if necessary)	6	<u>9</u>
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	<u>0</u>
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	<u>0</u>

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	4,099,750	2,648,076
9 Program service revenue (Part VIII, line 2g)	3,220,991	3,588,627
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	174,724	182,608
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	1,092
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,495,465	6,420,403
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,636,786	768,477
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	8,752,952	9,497,910
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25)	273,806	
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	6,306,457	5,736,461
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	17,696,195	16,002,848
19 Revenue less expenses. Subtract line 18 from line 12	(10,200,730)	(9,582,445)

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	9,927,169	5,801,464
21 Total liabilities (Part X, line 26)	5,898,249	4,275,460
22 Net assets or fund balances. Subtract line 21 from line 20	4,028,920	1,526,004

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: *Holly Brinkman* Date: 5/8/2025

HOLLY BRINKMAN, EVP/COO & TREASURER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name AARON HERSHBERGER	Preparer's signature <u><i>Aaron Hershberger</i></u>	Date <u>04/08/2025</u>	Check <input type="checkbox"/> if self-employed	PTIN <u>P00961884</u>
Firm's name <u>FORVIS MAZARS, LLP</u>	Firm's EIN <u>44-0160260</u>	Firm's address <u>312 WALNUT STREET SUITE 3000, CINCINNATI, OH 45202</u>	Phone no. <u>(513) 621-8300</u>	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the 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, COMPETENCY-BASED LEARNING - AND WHAT IT
MUST DO TO PREPARE STUDENTS FOR A LIFETIME OF LEARNING.

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 \$ 3,940,597 including grants of \$ 0) (Revenue \$ 1,474,038)
KW IN SCHOOLS: SEE SCHEDULE O

4b (Code:) (Expenses \$ 2,749,961 including grants of \$ 587,000) (Revenue \$ 438,505)
POLICY AND ADVOCACY: SEE SCHEDULE O

4c (Code:) (Expenses \$ 2,624,204 including grants of \$ 138,308) (Revenue \$ 634,892)
IMPACT AND IMPROVEMENT: SEE SCHEDULE O

4d Other program services (Describe on Schedule O.)
(Expenses \$ 2,408,444 including grants of \$ 43,169) (Revenue \$ 1,042,284)

4e Total program service expenses 11,723,206

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)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part VI</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part VII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part VIII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IX</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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)? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule G, Part I. See instructions</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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		✓
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	✓	
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		✓
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		✓
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		✓
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		✓
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		✓
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		✓
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		✓
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		✓
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		✓
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	✓	
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	✓	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	✓	
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	✓	
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		✓
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		✓
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	✓	

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?	✓	

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	65		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			✓
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule O</i>	3b			
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)?	4a			✓
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?	5a			✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
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?	7a			✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
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?	12a			
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.	13a			
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?	14a			✓
b	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i>	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15			✓
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.	16			✓
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, 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.	17			

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.		
	1a 9		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 9		
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?	<input checked="" type="checkbox"/>	
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?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?		<input checked="" type="checkbox"/>
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?		<input checked="" type="checkbox"/>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		<input checked="" type="checkbox"/>
7b			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	<input checked="" type="checkbox"/>	
8a			
b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
8b			
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		<input checked="" type="checkbox"/>
9			

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?	<input checked="" type="checkbox"/>	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<input checked="" type="checkbox"/>	
10b			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
b	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	<input checked="" type="checkbox"/>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12b			
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	<input checked="" type="checkbox"/>	
12c			
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
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	<input checked="" type="checkbox"/>	
15a			
b	Other officers or key employees of the organization	<input checked="" type="checkbox"/>	
15b			
	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?		<input checked="" type="checkbox"/>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		
16b			

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed NONE
- 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

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See 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, box 6 of 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) WILLIAM HITE PRESIDENT & CEO	39.0 1.0			✓				371,122	0	18,280
(2) HOLLY BRINKMAN EVP, COO & TREASURER	37.0 3.0			✓				245,477	0	48,621
(3) MATTHEW WILLIAMS EVP/CHIEF PGM OFFR&SECRETARY	39.0 1.0			✓				238,560	0	43,761
(4) MICHAEL DIMAGGIO VP, DEVELOPMENT	40.0 0.0					✓		241,107	0	25,828
(5) VIRGEL HAMMONDS CHIEF LEARNING OFFICER	40.0 0.0				✓			241,976	0	12,145
(6) LILLIAN PACE VP, POLICY & STRATEGIC ADV	40.0 0.0				✓			221,870	0	11,155
(7) REBECCA WOLFE VP, IMPACT & IMPROVEMENT	40.0 0.0				✓			193,861	0	37,552
(8) KATHERINE PRINCE VP, FORESIGHT & STRATEGY	40.0 0.0					✓		193,761	0	22,380
(9) LAUREN MCCAULEY VP, TEACHING & LEARNING	40.0 0.0					✓		159,112	0	36,406
(10) KATE WESTRICH VP, MARKETING & COMMUNICATIONS	40.0 0.0					✓		178,617	0	9,075
(11) GREGORY SEATON SR DIR, IMPACT & IMPROVEMENT	40.0 0.0					✓		150,681	0	36,454
(12) SEAN DECATUR DIRECTOR	2.0 0.0	✓						0	0	0
(13) RENEE FOSTER DIRECTOR	2.0 0.0	✓						0	0	0
(14) THOMAS FRY DIRECTOR	2.0 1.0	✓						0	0	0

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/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			
(15) TRACY NAJERA DIRECTOR	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(16) EILEEN RUDDEN DIRECTOR	2.0 1.0	<input checked="" type="checkbox"/>						0	0	0
(17) ROBERT RUNCIE DIRECTOR	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(18) BRENDA SHUM VICE CHAIR OF THE BOARD	2.0 0.0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(19) JULIANA WONG DIRECTOR	2.0 0.0	<input checked="" type="checkbox"/>						0	0	0
(20) VICTOR YOUNG CHAIR OF THE BOARD	2.0 1.0	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal								2,436,144	0	301,657
c Total from continuation sheets to Part VII, Section A								0	0	0
d Total (add lines 1b and 1c)								2,436,144	0	301,657

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 38

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule J for such individual</i>	<input checked="" type="checkbox"/>	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		<input checked="" type="checkbox"/>

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
BELLWETHER EDUCATION PARTNERS, INC., 517 BOSTON POST RD., #171, SUDBURY, MA 01776	STRATEGY CONSULTING	300,400
EDRESEARCH SOLUTIONS, LLC, 14 CURTIS RD., NEEDHAM, MA 02492	DATA ANALYTICS AND RESEARCH	224,547
RESEARCH FOR ACTION, 100 S. BROAD ST., SUITE 700, PHILADELPHIA, PA 19110	DATA ANALYTICS AND RESEARCH	202,000
FORESIGHT LAW + POLICY, 800 MAINE AVE., SUITE 200, WASHINGTON, DC 20024	POLICY CONSULTING	163,240
WESTED, 730 HARRISON STREET, SAN FRANCISCO, CA 94107	DATA ANALYTICS AND RESEARCH	154,691
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	6	

Part VIII Statement of Revenue

Check 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 0															
	b	Membership dues	1b 0															
	c	Fundraising events	1c 0															
	d	Related organizations	1d 0															
	e	Government grants (contributions)	1e 1,635,205															
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 1,012,871															
	g	Noncash contributions included in lines 1a-1f	1g \$ 0															
	h	Total. Add lines 1a-1f						2,648,076										
	Program Service Revenue							Business Code										
2a		FEES FOR SERVICE	611710	3,538,550	3,538,550	0	0											
b		KWI ADMIN FEES	611710	50,077	50,077	0	0											
c				0	0	0	0											
d				0	0	0	0											
e				0	0	0	0											
f		All other program service revenue		0	0	0	0											
g		Total. Add lines 2a-2f		3,588,627														
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		184,608	0	0	184,608											
	4	Income from investment of tax-exempt bond proceeds		0	0	0	0											
	5	Royalties		0	0	0	0											
	6a	Gross rents	6a	(i) Real	0	0	0	0										
				(ii) Personal														
	b	Less: rental expenses	6b	0	0	0	0											
	c	Rental income or (loss)	6c	0	0	0	0											
	d	Net rental income or (loss)		0	0	0	0											
	7a	Gross amount from sales of assets other than inventory	7a	(i) Securities	0	0	0	0										
				(ii) Other														
	b	Less: cost or other basis and sales expenses	7b	2,000	0	0	0											
	c	Gain or (loss)	7c	(2,000)	0	0	0											
	d	Net gain or (loss)		(2,000)	0	0	(2,000)											
8a	Gross income from fundraising events (not including \$ 0 of contributions reported on line 1c). See Part IV, line 18	8a		0	0	0	0											
			b					Less: direct expenses	8b	0	0	0						
			c					Net income or (loss) from fundraising events		0	0	0						
			9a					Gross income from gaming activities. See Part IV, line 19	9a		0	0	0	0				
										b					Less: direct expenses	9b	0	0
										c					Net income or (loss) from gaming activities		0	0
			10a					Gross sales of inventory, less returns and allowances	10a		0	0	0	0				
										b					Less: cost of goods sold	10b	0	0
										c					Net income or (loss) from sales of inventory		0	0
			Miscellaneous Revenue								Business Code							
11a	GAIN ON LEASE- TERMINATION	900099		1,092	0	0	1,092											
b																		
c																		
d	All other revenue			0	0	0	0											
e	Total. Add lines 11a-11d		1,092															
12	Total revenue. See instructions		6,420,403	3,588,627	0	183,700												

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	0	0		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	768,477	768,477		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0	0		
4 Benefits paid to or for members	0	0		
5 Compensation of current officers, directors, trustees, and key employees	2,688,777	1,932,630	566,146	190,001
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 Other salaries and wages	5,347,553	3,351,028	1,945,960	50,565
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	255,256	158,364	94,234	2,658
9 Other employee benefits	631,376	398,637	219,655	13,084
10 Payroll taxes	574,948	374,470	182,980	17,498
11 Fees for services (nonemployees):				
a Management	28,247	18,480	9,767	0
b Legal	24,984	0	24,984	0
c Accounting	97,373	4,484	92,889	0
d Lobbying	0	0	0	0
e Professional fundraising services. See Part IV, line 17	0			0
f Investment management fees	0	0	0	0
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	2,848,799	2,614,408	234,391	0
12 Advertising and promotion	143,488	57,683	85,805	0
13 Office expenses	70,732	48,907	21,825	0
14 Information technology	428,475	344,389	84,086	0
15 Royalties	0	0	0	0
16 Occupancy	323,463	220,988	102,475	0
17 Travel	1,003,856	930,279	73,577	0
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19 Conferences, conventions, and meetings	423,800	392,863	30,937	0
20 Interest	0	0	0	0
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	90,848	0	90,848	0
23 Insurance	108,148	73,885	34,263	0
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 TRAINING & DEVELOPMENT	79,663	17,875	61,788	0
b -----				
c -----				
d -----				
e All other expenses	64,585	15,359	49,226	0
25 Total functional expenses. Add lines 1 through 24e	16,002,848	11,723,206	4,005,836	273,806
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	5,010,231	1	1,458,954
	2 Savings and temporary cash investments	0	2	0
	3 Pledges and grants receivable, net	920,253	3	746,848
	4 Accounts receivable, net	225,498	4	374,307
	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	0	5	0
	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)	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	0	8	0
	9 Prepaid expenses and deferred charges	335,118	9	268,756
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	595,838		
	b Less: accumulated depreciation	436,944		
	11 Investments—publicly traded securities	2,115,911	11	1,738,371
	12 Investments—other securities. See Part IV, line 11	0	12	0
	13 Investments—program-related. See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	0
	15 Other assets. See Part IV, line 11	1,136,218	15	1,055,334
16 Total assets. Add lines 1 through 15 (must equal line 33)	9,927,169	16	5,801,464	
Liabilities	17 Accounts payable and accrued expenses	1,197,305	17	981,153
	18 Grants payable	0	18	0
	19 Deferred revenue	3,623,365	19	2,273,812
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
	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	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	1,077,579	25	1,020,495
	26 Total liabilities. Add lines 17 through 25	5,898,249	26	4,275,460
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	451,381	27	(63,355)
	28 Net assets with donor restrictions	3,577,539	28	1,589,359
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds	0	29	0
	30 Paid-in or capital surplus, or land, building, or equipment fund	0	30	0
	31 Retained earnings, endowment, accumulated income, or other funds	0	31	0
	32 Total net assets or fund balances.	4,028,920	32	1,526,004
33 Total liabilities and net assets/fund balances.	9,927,169	33	5,801,464	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,420,403
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,002,848
3	Revenue less expenses. Subtract line 2 from line 1	3	(9,582,445)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,028,920
5	Net unrealized gains (losses) on investments	5	12,789
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain on Schedule O)	9	7,066,740
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	1,526,004

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		✓
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	✓	
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.	✓	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	✓	
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.	✓	

**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

2023

**Open to Public
Inspection**

Name of the organization KNOWLEDGEWORKS FOUNDATION	Employer identification number 31-1321973
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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)(vii)**. (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					0	0

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 2023 (line 6, column (f), divided by line 11, column (f))	14	%
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2023. 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—2022. 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—2023. 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—2022. 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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	11,520,114	13,031,798	8,236,045	10,485,710	9,714,816	52,988,483
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	2,915,069	2,150,795	2,501,041	3,220,991	3,588,627	14,376,523
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6 Total. Add lines 1 through 5	14,435,183	15,182,593	10,737,086	13,706,701	13,303,443	67,365,006
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	7,973,282	8,151,432	7,739,652	6,973,373	7,416,817	38,254,556
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	561,198	390,588	906,823	1,253,212	2,476,140	5,587,961
c Add lines 7a and 7b	8,534,480	8,542,020	8,646,475	8,226,585	9,892,957	43,842,517
8 Public support. (Subtract line 7c from line 6.)						23,522,489

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6	14,435,183	15,182,593	10,737,086	13,706,701	13,303,443	67,365,006
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	50,499	10,185	18,532	174,724	184,608	438,548
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	50,499	10,185	18,532	174,724	184,608	438,548
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on		0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	101,078	351,048	0	0	1,092	453,218
13 Total support. (Add lines 9, 10c, 11, and 12.)	14,586,760	15,543,826	10,755,618	13,881,425	13,489,143	68,256,772
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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	34.46 %
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	40.63 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	1.00 %
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	1.00 %
19a 33 1/3% support tests—2023. 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	<input checked="" type="checkbox"/>	
b 33 1/3% support tests—2022. 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	<input type="checkbox"/>	
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions	<input type="checkbox"/>	

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

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? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
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? <i>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.</i>		
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? <i>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.</i>		
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)? <i>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).</i>		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
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? <i>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.</i>			
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? <i>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.</i>			
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? <i>If "Yes" or "No," provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
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	<input type="checkbox"/> 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 2023 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-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required—explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

Part VI

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.)

Return Reference - Identifier	Explanation						
SCHEDULE A, PART III, LINE 12 - OTHER INCOME	Other Income Type	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	(1) SECURITIES LITIGATION INCOME NFP/SERVICING FEE INCOME/LEASE TERMINATION	101,078	351,048	0	0	1,092	453,218

Schedule B (Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Table with 2 columns: Name of the organization (KNOWLEDGEWORKS FOUNDATION) and Employer identification number (31-1321973)

Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ: [x] 501(c)(3) (enter number) organization, [] 4947(a)(1) nonexempt charitable trust not treated as a private foundation, [] 527 political organization
Form 990-PF: [] 501(c)(3) exempt private foundation, [] 4947(a)(1) nonexempt charitable trust treated as a private foundation, [] 501(c)(3) taxable private foundation

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

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

General Rule

- [x] 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...
[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor...
[] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor...

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
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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		\$ 300,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2		\$ 460,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3		\$ 202,871	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4		\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5		\$ 50,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6		\$ 1,630,205	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization KNOWLEDGEWORKS FOUNDATION	Employer identification number 31-1321973
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization KNOWLEDGEWORKS FOUNDATION	Employer identification number 31-1321973
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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.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-----	----- ----- -----	----- ----- -----	----- ----- -----

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee
----- ----- -----	----- ----- -----

**SCHEDULE C
(Form 990)**

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

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.**

**Open to Public
Inspection**

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)				

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)	0													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	13,780													
c	Total lobbying expenditures (add lines 1a and 1b)	13,780													
d	Other exempt purpose expenditures	0													
e	Total exempt purpose expenditures (add lines 1c and 1d)	13,780													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	2,756													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		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.		
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)	689													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	11,024													
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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	520,444	587,700	4,480	2,756	1,115,380
b Lobbying ceiling amount (150% of line 2a, column (e))					1,673,070
c Total lobbying expenditures	28,358	32,653	22,398	13,780	97,189
d Grassroots nontaxable amount	130,111	146,925	1,120	689	278,845
e Grassroots ceiling amount (150% of line 2d, column (e))					418,268
f Grassroots lobbying expenditures			0	0	0

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 not be 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 expenditures 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.

SEE NEXT PAGE

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.

Return Reference - Identifier	Explanation
SCHEDULE C, PART I-A - POLITICAL CAMPAIGN ACTIVITY	THIS SECTIONS IS "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 C, PART I-B - POLITICAL CAMPAIGN ACTIVITY	THIS SECTIONS IS "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)

Supplemental Financial Statements

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

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

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, and questions about donor advisement.

Part II Conservation Easements

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

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include purpose of easements, total number, and monitoring expenses.

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.

Table with 2 columns: Description, Amount. Rows include questions about reporting art and historical treasures.

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
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____
- 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 in Part XIII

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	1,751	3,019
d Equipment		211,303	141,985	69,318
e Other		379,765	293,208	86,557
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				158,894

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, line 12, col. (B))		

Part VIII Investments—Program Related

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

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

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) INTEREST RECEIVABLE ON INVESTMENTS	11,476
(2) RIGHT OF USE ASSETS	1,043,858
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	1,055,334

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) OPERATING LEASE LIABILITIES	1,020,495
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	1,020,495

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 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.

Return Reference - Identifier	Explanation
SCHEDULE D, PART X, LINE 2 - FIN 48 (ASC 740) FOOTNOTE	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)**

Department of the Treasury
Internal Revenue Service
Name of the organization

**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.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

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.

(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 AVE., SILVER SPRING, MD, 20910	27-1635830	501(C)(3)	37,500				(SEE STATEMENT)
(2) BARD COLLEGE P.O. BOX 5000, ANNADALE ON HUDSON, NY, 12504	14-1713034	501(C)(3)	32,500				(SEE STATEMENT)
(3) JOBS FOR THE FUTURE 50 MILK ST., BOSTON, MA, 2109	06-1164568	501(C)(3)	110,000				(SEE STATEMENT)
(4) MIDDLE COLLEGE NATIONAL CONSORTIUM 100 BANK ST., NEW YORK, NY, 10014	04-3608107	501(C)(3)	30,000				(SEE STATEMENT)
(5) NAT'L ALL OF CONCURRENT ENROLLMENT P.O. BOX 578, CHAPEL HILL, NC, 27514	16-1609101	501(C)(3)	72,500				(SEE STATEMENT)
(6) NAT'L CAREER TECHNICAL EDUCATION FND 8484 GEORGIA AVE., SILVER SPRING, MD, 20910	73-1086246	501(C)(3)	54,500				(SEE STATEMENT)
(7) AURORA INSTITUTE 1100 N. GLEBE RD., ARLINGTON, VA, 22201	20-0310109	501(C)(3)	20,000				(SEE STATEMENT)
(8) CENTER FOR INNOVATION IN EDUCATION 1012 TORNEY AVE., SAN FRANCISCO, CA, 94129	94-3213100	501(C)(3)	100,000				(SEE STATEMENT)
(9) KENTUCKY CHAMBER FOUNDATION 464 CHENAULT RD., FRANKFORT, KY, 40601	61-1284992	501(C)(3)	75,000				(SEE STATEMENT)
(10) PRICHARD COMM FOR ACADEMIC EXCELLENCE 2285 EXECUTIVE DR., LEXINGTON, KY, 40505	61-1026214	501(C)(3)	75,000				(SEE STATEMENT)
(11) RILEY INSTITUTE AT FURMAN UNIVERSITY 3300 PAINSETT HWY, GREENVILLE, SC, 29613	57-0314395	501(C)(3)	41,013				(SEE STATEMENT)
(12) WESTED 730 HARRISON ST., SAN FRANCISCO, CA, 94107	94-3233542	501(C)(3)	97,295				(SEE STATEMENT)

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

12

0

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

Cat. No. 50055P

Schedule I (Form 990) 2023

Return Reference - Identifier	Explanation
SCHEDULE I, PART I, LINE 2 - PROCEDURES FOR MONITORING USE OF GRANT FUNDS.	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 FINANCE TEAM PROVIDES PERIODIC REPORTING TO PROGRAM DIRECTORS AND FOLLOWS UP WHEN REQUIRED REPORTING IS DUE.
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	ACHIEVING THE DREAM: HIGH-QUALITY COLLEGE IN HIGH SCHOOL EXPERIENCES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	BARD COLLEGE: HIGH-QUALITY COLLEGE IN HIGH SCHOOL EXPERIENCES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	JOBS FOR THE FUTURE: HIGH-QUALITY COLLEGE IN HIGH SCHOOL EXPERIENCES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	MIDDLE COLLEGE NATIONAL CONSORTIUM: HIGH-QUALITY COLLEGE IN HIGH SCHOOL EXPERIENCES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	NAT'L ALL OF CONCURRENT ENROLLMENT: HIGH-QUALITY COLLEGE IN HIGH SCHOOL EXPERIENCES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	NAT'L CAREER TECHNICAL EDUCATION FND: HIGH-QUALITY COLLEGE IN HIGH SCHOOL EXPERIENCES
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	AURORA INSTITUTE: 2024 AURORA INSTITUTE SYMPOSIUM SPONSORSHIP
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	CENTER FOR INNOVATION IN EDUCATION: SUPPORT ALIGNED PUBLIC STORYTELLING STRATEGY IN KY
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	KENTUCKY CHAMBER FOUNDATION: SUPPORT PUBLIC WILL BUILDING FOR KY K-12 EDUCATION
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	PRICHARD COMM FOR ACADEMIC EXCELLENCE: SUPPORT PUBLIC WILL BUILDING FOR KY K-12 EDUCATION
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	RILEY INSTITUTE AT FURMAN UNIVERSITY: SUPPORT SC PERSONALIZED COMPETENCY-BASED LEARNING STUDY
SCHEDULE I, PART II, COLUMN H - PURPOSE OF GRANT OR ASSISTANCE	WESTED: QUALITATIVE RESEARCH STUDIES - REMIQS INITIATIVE

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

KNOWLEDGEWORKS FOUNDATION

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

2023

Open to Public Inspection

Employer identification number

31-1321973

Part I Questions Regarding Compensation

		Yes	No
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"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <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 checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <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)?		

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	(iv) 1099-MISC	(v) 1099-NEC				
	WILLIAM HITE									
1	PRESIDENT & CEO	364,023	0	7,099	16,500	1,780	389,402	0		
	HOLLY BRINKMAN									
2	EVP, COO & TREASURER	242,556	0	2,921	12,984	35,637	294,098	0		
	MATTHEW WILLIAMS									
3	EVP/CHIEF PGM OFFR&SECRETARY	236,016	0	2,544	12,469	31,292	282,321	0		
	MICHAEL DIMAGGIO									
4	VP, DEVELOPMENT	237,121	0	3,986	12,184	13,644	266,935	0		
	VIRGEL HAMMONDS									
5	CHIEF LEARNING OFFICER	239,467	0	2,509	11,973	172	254,121	0		
	LILLIAN PACE									
6	VP, POLICY & STRATEGIC ADV	219,685	0	2,205	10,983	172	233,025	0		
	REBECCA WOLFE									
7	VP, IMPACT & IMPROVEMENT	191,493	0	2,368	9,997	27,555	231,413	0		
	KATHERINE PRINCE									
8	VP, FORESIGHT & STRATEGY	191,078	0	2,683	9,827	12,553	216,141	0		
	LAUREN MCCAULEY									
9	VP, TEACHING & LEARNING	157,041	0	2,071	8,181	28,225	195,518	0		
	KATE WESTRICH									
10	VP, MARKETING & COMMUNICATIONS	178,068	0	549	8,903	172	187,692	0		
	GREGORY SEATON									
11	SR DIR, IMPACT & IMPROVEMENT	148,215	0	2,466	7,856	28,598	187,135	0		
12										
13										
14										
15										
16										

**SCHEDULE O
(Form 990)**

Department of Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the Organization
KNOWLEDGEWORKS FOUNDATION

Employer Identification Number
31-1321973

Return Reference - Identifier	Explanation
<p>FORM 990, PART I, LINE 1 - ORGANIZATION'S MISSION</p>	<p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>
<p>FORM 990, PART III, LINE 4A - KNOWLEDGEWORKS IN SCHOOLS: PROGRAM SERVICE ACCOMPLISHMENTS</p>	<p>KNOWLEDGEWORKS HAS ESTABLISHED PARTNERSHIPS WITH MORE THAN 100 SCHOOL DISTRICTS AND STATE EDUCATION AGENCIES ACROSS 14 STATES IN TRANSFORMING THEIR SYSTEM FROM A TRADITIONAL SYSTEM TO ONE THAT IS PERSONALIZED AND COMPETENCY BASED. THESE SCHOOL SYSTEMS SPAN THE COUNTRY AND ARE DIVERSE IN SIZE, RACIAL DEMOGRAPHICS, AND SOCIOECONOMIC BACKGROUND. IN FY24, KNOWLEDGEWORKS PARTNERED WITH STATE-LEVEL PARTNERS IN ARIZONA, NEVADA, NORTH DAKOTA, OHIO AND SOUTH CAROLINA TO SUPPORT THE GROWTH OF PERSONALIZED, COMPETENCY-BASED LEARNING (PCBL).</p> <p>KNOWLEDGEWORKS CONTINUED A PARTNERSHIP WITH THE CENTER FOR THE FUTURE OF ARIZONA TO SUPPORT THE ARIZONA PERSONALIZED LEARNING NETWORK. DISTRICT DESIGN TEAMS REPRESENTING FOUR LEARNING COMMUNITIES FOCUSED ON DISTRICT-LEVEL TRANSFORMATION AND SUSTAINABILITY EFFORTS WHILE OVER 300 EDUCATORS PARTICIPATED IN PROFESSIONAL LEARNING TO SUPPORT SCHOOL-LEVEL IMPLEMENTATION.</p> <p>COLLABORATING WITH THE NEVADA DEPARTMENT OF EDUCATION AND ED.XTRAORDINARY, KNOWLEDGEWORKS CONTINUED SUPPORTING THE NEVADA FUTURE OF LEARNING NETWORK, A STATEWIDE PCBL NETWORK CENTERED ON NEVADA'S PORTRAIT OF A LEARNER.</p> <p>KNOWLEDGEWORKS, IN COLLABORATION WITH LOCAL PARTNERS AND EDUCATORS KNOWN AS COMPETENCY CHAMPIONS, FACILITATED THE DESIGN OF COMPETENCIES AND RUBRICS ALIGNED TO NEVADA'S PORTRAIT OF A LEARNER. COMPETENCY CHAMPIONS PARTICIPATED IN LEARNING CYCLES TO PRACTICE INTEGRATING THE PORTRAIT IN THEIR LOCAL CONTEXTS. AS A CULMINATING EXPERIENCE, CHAMPIONS SHARED ACROSS THE NETWORK AT THE NEVADA FUTURE OF LEARNING NETWORK EXHIBITION OF LEARNING IN JUNE.</p> <p>THE NORTH DAKOTA PERSONALIZED, COMPETENCY-BASED LEARNING COHORT COMPLETED THEIR SIX-YEAR COLLABORATION, INCLUDING THE PUBLICATION OF A SUMMATIVE RESEARCH REPORT. THE WORK CONTINUES THROUGH THE DISTRICT-LED, STATE-SUPPORTED NORTH DAKOTA NETWORK FOR PERSONALIZED LEARNING. THE NETWORK LAUNCHED IN SEPTEMBER WITH SITE VISITS, THREE IN-PERSON CONVENINGS, AND A STRONG ONLINE PRESENCE. TO DATE, THE NETWORK HAS OVER 300 MEMBERS.</p> <p>IN OHIO, KNOWLEDGEWORKS CONTINUED TO GROW THE OHIO PERSONALIZED LEARNING NETWORK WHICH REACHED MORE THAN 736 PARTICIPANTS ACROSS MORE THAN 100 SCHOOL DESIGN TEAMS ACROSS THE STATE. BRINGING PERSONALIZED LEARNING SPECIALISTS TOGETHER TO COLLABORATE ACROSS REGIONS PROVIDED A NETWORK OF THOUGHT PARTNERS AND LEADERS. CREATING ADVANCED EXPERTISE ACROSS THE STATE THAT WILL HELP OHIO BUILD ON THE MOMENTUM OF PERSONALIZED LEARNING. THE RESULTS OF OUR RESEARCH SHOW THAT EDUCATORS DEEPENED THEIR UNDERSTANDING OF PERSONALIZED LEARNING THROUGH THEIR EXPERIENCE IN THE SCHOOL DESIGN TEAM PATHWAY AND THAT IMPLEMENTING PERSONALIZED LEARNING PRACTICES HAD A POSITIVE IMPACT ON SCHOOL CULTURE, WITH PROMISING SIGNS FOR TEACHER RETENTION.</p> <p>IN SOUTH CAROLINA, KNOWLEDGEWORKS CONTINUED TO SUPPORT THE PERSONALIZED LEARNING TEAM AT THE SOUTH CAROLINA DEPARTMENT OF EDUCATION AS THEY SCALE AND SPREAD PCBL PRACTICES AROUND THE STATE. KNOWLEDGEWORKS PROVIDED IN-PERSON AND VIRTUAL SUPPORT FOR DISTRICT TRANSFORMATION THROUGH SCHOOL-BASED IMPACT TEAMS, REPRESENTING THREE DISTRICTS AND 92 EDUCATORS.</p> <p>IN SOUTHWEST PENNSYLVANIA, KNOWLEDGEWORKS SUPPORTED THE PERSONALIZED LEARNING WORKING GROUP AS THEY PARTNERED TO SPREAD PERSONALIZED LEARNING ACROSS THE REGION. THEY LED AN INAUGURAL PERSONALIZED LEARNING AMBASSADOR PROGRAM THAT IMPACTED 22 LOCAL EDUCATORS, INSTRUCTIONAL COACHES, AND AN OUT OF SCHOOL TIME PROVIDER. THE PROGRAM INCLUDED LEARNING, COLLABORATION, AND SHARING AND CULMINATED IN A TWO-DAY PERSONALIZED LEARNING SUMMIT ATTENDED BY OVER 130 LOCAL PRACTITIONERS. THEY ALSO HOSTED THREE SITE VISITS AND PUBLISHED MONTHLY NEWSLETTERS.</p>

Return Reference - Identifier	Explanation
<p>FORM 990, PART III, LINE 4B - POLICY AND ADVOCACY: PROGRAM SERVICE ACCOMPLISHMENTS</p>	<p>IN FY24, KNOWLEDGEWORKS CONTINUED TO SUPPORT STATES AND DIVERSE EDUCATION STAKEHOLDERS TO ADVANCE POLICY CHANGE AND MAXIMIZE IMPLEMENTATION IN SERVICE OF SYSTEMS TRANSFORMATION. KNOWLEDGEWORKS CONDUCTED EXTENSIVE POLICY RESEARCH TO CREATE INNOVATION GUIDES FOR KENTUCKY AND OHIO TO HELP DISTRICT LEADERS MAXIMIZE THEIR CURRENT POLICY ENVIRONMENTS TO SUPPORT PCBL IMPLEMENTATION. KNOWLEDGEWORKS ALSO CONDUCTED A STATEWIDE SURVEY OF MINNESOTA EDUCATION STAKEHOLDERS, HELD A SERIES OF FOCUS GROUPS AND LISTENING SESSIONS, AND COMPLETED AN ANALYSIS EXAMINING THE STATE'S POLICY NEEDS AROUND ASSESSMENT, ACCOUNTABILITY, AND OTHER FLEXIBILITIES IN SUPPORT OF PCBL.</p> <p>KNOWLEDGEWORKS FACILITATED POLICY-FOCUSED WORKING GROUPS IN NEVADA, OHIO AND KENTUCKY TO BOLSTER CAPACITY FOR POLICY CHANGE AND IMPLEMENTATION. THE WORK IN NEVADA CULMINATED IN A NEW TOOL TO HELP STAKEHOLDERS GAUGE THE FULL IMPACT OF PCBL EFFORTS TO DATE, FORMAL RECOMMENDATIONS TO THE STATE SUPERINTENDENT FOR ADVANCING POLICY IN THE COMING YEAR, FEEDBACK ON DRAFT COMPETENCY EDUCATION REGULATIONS AND A SUSTAINABILITY REPORT FOR PRESERVING THE WORK OF THE NEVADA FUTURE OF LEARNING NETWORK. THE FACILITATION OF A LEADERSHIP NETWORK IN OHIO DEVELOPED THE CAPACITY OF STATE LEADERS TO SUPPORT PCBL IMPLEMENTATIONS IN THE FIELD AND EXPLORE WAYS TO SUSTAIN THOSE TRANSFORMATIONS. LASTLY, FACILITATION OF A POLICY WORK GROUP IN KENTUCKY HELPED THE UNITED WE LEARN COUNCIL'S BUILDING A BOLD NEW FUTURE WITH COMMUNITIES COMMITTEE IDENTIFY POLICY PRIORITIES FOR ADVANCING VIBRANT LEARNING INCLUDING ALIGNMENT OF P-12 AND POSTSECONDARY PORTRAITS OF A GRADUATE, FUNDING SYSTEMS, AND EVALUATION OF COMPETENCY-BASED EDUCATION.</p> <p>KNOWLEDGEWORKS COMPLETED YEAR TWO OF ITS INITIATIVE TO TRACK PCBL POLICY MOMENTUM IN STATE LEGISLATURES ACROSS THE COUNTRY WITH RELEASE OF AN ANNUAL END OF SESSION WEB ARTICLE IN AUGUST 2023. A WEBINAR WAS HELD IN JANUARY 2024 TO KICK OFF A THIRD YEAR OF LEGISLATIVE TRACKING IN PARTNERSHIP WITH EDUCATION COMMISSION OF THE STATES AND NEW CLASSROOMS. KNOWLEDGEWORKS PUBLISHED A COMPREHENSIVE REPORT: BEYOND THE HORIZON: BLAZING A TRAIL TOWARD LEARNER-CENTERED SCHOOL QUALITY SYSTEMS, WHICH COMPILES RECOMMENDATIONS FROM NEARLY 200 ATTENDEES AT A CONFERENCE HOSTED BY KNOWLEDGEWORKS IN JUNE OF 2023. THE REPORT, PUBLISHED IN OCTOBER 2023, WAS ENDORSED BY 26 NATIONAL ORGANIZATIONS.</p> <p>IN ADDITION TO POLICY SUPPORT AND PUBLICATIONS, KNOWLEDGEWORKS ENGAGED IN SEVERAL EFFORTS TO INCREASE STAKEHOLDER ENGAGEMENT IN SYSTEMS TRANSFORMATION. IN MINNESOTA, WE HELPED CREATE AN ALLIANCE OF EDUCATOR LEADERS, PARENTS, DISTRICTS, ELECTED OFFICIALS, MEMBERSHIP ORGANIZATIONS, AND NONPROFITS FOCUSED ON DRIVING INNOVATIVE AND SUSTAINABLE SYSTEMS CHANGE. IN KENTUCKY, WE COLLABORATED WITH TWO LOCAL ORGANIZATIONS TO RELEASE 15 STORIES HIGHLIGHTING DISTRICT EFFORTS TO EMPHASIZE DURABLE SKILLS THROUGH INSTRUCTIONAL AND ASSESSMENT PRACTICES. IN NEVADA, WE CONTINUED TO SUPPORT THE EDUCATOR AMBASSADOR PROGRAM WHICH CONCLUDED SUCCESSFULLY WITH MORE THAN 14 LOCAL COMMUNITY ENGAGEMENT EVENTS AND SIX PUBLISHED LETTERS TO THE EDITOR. IN SOUTHEASTERN PENNSYLVANIA, WE WORKED TO SHOWCASE IMPACTFUL PERSONALIZED LEARNING WORK HAPPENING ON THE GROUND THROUGH STORYTELLING AND SITE VISITS. LASTLY, WE LAUNCHED AND SUPPORTED A NATIONAL WORKING GROUP OF EDUCATOR LEADERS, FOCUSED ON ADVOCATING FOR PERSONALIZED LEARNING THROUGH KNOWLEDGEWORKS' LEAD FOR LEARNERS NETWORK.</p> <p>KNOWLEDGEWORKS SHARED INSIGHTS FROM THIS WORK THROUGH PRESENTATIONS AT MANY STATE AND NATIONAL CONFERENCES INCLUDING THE AURORA INSTITUTE, EDUCATION COMMISSION ON THE STATES, SXSW EDU, AND THE NATIONAL CONFERENCE ON STUDENT ASSESSMENT. KNOWLEDGEWORKS ALSO ENGAGED POLICYMAKERS AT THE FEDERAL LEVEL TO SHARE INSIGHTS ON STATE EFFORTS TO ADVANCE PCBL. THESE MEETINGS HELPED INFLUENCE CONTINUED FUNDING IN THE FY24 APPROPRIATIONS BILL FOR THE COMPETITIVE GRANTS FOR STATE ASSESSMENT PROGRAM.</p>

Return Reference - Identifier	Explanation
<p>FORM 990, PART III, LINE 4C - IMPACT AND IMPROVEMENT: PROGRAM SERVICE ACCOMPLISHMENTS</p>	<p>IN FY24 KNOWLEDGEWORKS PRODUCED A SUMMATIVE REPORT, IN PARTNERSHIP WITH WESTED ON NORTH DAKOTA'S 5-YEAR INITIATIVE USING DATA FROM THE NORTH DAKOTA'S STUDENT LONGITUDINAL DATA SYSTEM AS WELL AS FROM THE DEPARTMENT OF PUBLIC INSTRUCTION. THE QUASI-EXPERIMENTAL DESIGN STUDY USED STUDENT MATCHED PAIR ANALYSIS OF SUMMATIVE OUTCOMES. THESE FINDINGS WERE SHARED THROUGH AN EXECUTIVE SUMMARY DEVELOPED BY KNOWLEDGEWORKS AS WELL AS THROUGH A WEBINAR HOSTED BY THE NORTH DAKOTA PERSONALIZED LEARNING NETWORK.</p> <p>IN ARIZONA, THE EXTENDED RESEARCH PROJECT CONSISTING OF DEEPER ANALYSIS OF IMPLEMENTATION SURVEY DATA, CASE STUDIES WITHIN TWO TRANSFORM DISTRICTS AND SCHOOL-LEVEL COMPARATIVE INTERRUPTED TIME SERIES (CITS) OUTCOMES ANALYSIS WAS SUCCESSFULLY COMPLETED, RESULTING IN PUBLICATIONS AND A TARGETED WEBINAR AMONG STAKEHOLDERS WITHIN THE ARIZONA PERSONALIZED LEARNING NETWORK.</p> <p>IN NORTH DAKOTA WE FORMED A DATA FELLOWSHIP TO BUILD THE CAPABILITY OF FIVE LEADERS REPRESENTING EACH OF THE MEMBERS OF THE STATE-BASED NETWORK TO COLLECT AND USE DATA FOR THE PURPOSES OF IMPROVEMENT. SIMILARLY, A COHORT OF DATA FELLOWS IN ARIZONA SUCCESSFULLY COMPLETED ANALYTICS CAPABILITY-BUILDING AND DATA SENSEMAKING ENGAGEMENTS, CULMINATING IN A CAPSTONE PRESENTATION WITHIN THE PERSONALIZED LEARNING NETWORK. KNOWLEDGEWORKS ALSO GATHERED AND ANALYZED 20,199 IMPLEMENTATION SURVEYS FROM STUDENTS AND ANOTHER 2,826 FROM EDUCATORS IN ARIZONA, OHIO AND SOUTH CAROLINA. LASTLY, IN PARTNERSHIP WITH EDRESEARCH SOLUTIONS AND CONSULT4ED, WE RELEASED FIVE CASE STUDIES AND FIVE REPORTS ON THE OHIO DEPARTMENT OF EDUCATION AND WORKFORCE WEBSITE TO DOCUMENT THE PERSONALIZED LEARNING INITIATIVES ACROSS OHIO SCHOOLS AND DISTRICTS: SHOWCASING EXEMPLARY PRACTICES, OFFERING INSIGHTS AND REAL-WORLD EXAMPLES AND PRESENTING SNAPSHOTS OF DATA AND RECOMMENDATIONS.</p> <p>KNOWLEDGEWORKS RELEASED ANALYSIS OF PERSONALIZED, COMPETENCY-BASED LEARNING AT SCALE, FROM THEORY TO PRACTICE: CROSS-STATE THEMES IN STUDENT-CENTERED SYSTEMS CHANGE. WE ALSO COMPLETED INDIVIDUAL DATA DASHBOARDS FOR 19 DISTRICTS, SCHOOLS, AND STATE DEPARTMENTS AND PRESENTED EARLY FINDINGS TO THE OHIO LAUNCH COHORT. KNOWLEDGEWORKS CONTINUED TO MAINTAIN AND EXPAND MAKING THE CASE: COMPELLING DATA, A FIELD-FACING, SEARCHABLE DATA LIBRARY FOR SOURCING EVIDENCE AND DATA ON THE POSITIVE IMPACTS OF PCBL. THE MAKING THE CASE DATA LIBRARY HAD 12,600 UNIQUE VISITORS IN FY24, UP FROM 6,770 IN FY23.</p>
<p>FORM 990, PART III, LINE 4D - PROGRAM SERVICE ACCOMPLISHMENTS - OTHER SERVICES</p>	<p>INCLUDES STRATEGIC FORESIGHT AND GRANTMAKING PROGRAMS.</p> <p>KNOWLEDGEWORKS CONTINUED TO EXERCISE NATIONAL THOUGHT LEADERSHIP AROUND THE FUTURE OF LEARNING THROUGH PUBLICATIONS, PARTNERSHIPS AND STAKEHOLDER ENGAGEMENTS. IT PUBLISHED AN EXECUTIVE SUMMARY OF ITS SIXTH ANCHOR FORECAST, IMAGINING LIBERATORY EDUCATION FUTURES, IN ENGLISH AND SPANISH. IT ALSO PUBLISHED CONNECTIONS TO THE FUTURE: ILLUSTRATING LIBERATORY EDUCATION ARTIFACTS, WHICH DREW UPON A PARTICIPATORY PROCESS TO PRESENT THINGS THAT COULD EXIST IN LIBERATORY EDUCATION FUTURES AND HELP PEOPLE IMAGINE POSSIBILITIES.</p> <p>KNOWLEDGEWORKS RECEIVED FUNDING TO RESEARCH AND PUBLISH FUTURES AFFECTING MATH EDUCATION: WIDENING THE LENS ON CHANGE, ENGAGING STUDENTS, PARENTS, EDUCATORS AND SUBJECT MATTER EXPERTS TO CONSIDER DRIVERS OF CHANGE AND DEVELOP SCENARIOS EXPLORING POSSIBLE FUTURES OF MATH. IT ALSO RECEIVED FUNDING TO DEVELOP CONTENT FOR A FORECAST ON POSSIBLE FUTURES OF ASSESSMENT FOR ITS ASSESSMENT FOR GOOD PROGRAM.</p> <p>KNOWLEDGEWORKS CONTINUED TO GIVE PRESENTATIONS AND TO DESIGN AND FACILITATE WORKSHOPS AND WEBINARS EXPLORING FUTURE POSSIBILITIES AND WAYS OF SHAPING THE FUTURE. PRESENTATIONS WERE DELIVERED AT THE NATIONAL ASSOCIATION OF STATE DIRECTORS OF TEACHER EDUCATION AND CERTIFICATION CONFERENCE, ED-FI ALLIANCE SUMMIT, FUTURE TRENDS FORUM, SONOMA UNIFIED SCHOOL DISTRICT, NAPA UNIFIED SCHOOL DISTRICT, TECHINT, ASSEMBLE AND THE SANTA CRUZ PERSONALIZED LEARNING INSTITUTE. KNOWLEDGEWORKS ALSO HOSTED A GRADUATION PARTY FROM THE FUTURE AT SXSW EDU, SUPPORTED THE DESIGN OF THE FORGE FUTURES NATIONAL SUMMIT ON COMMUNITY-WIDE LEARNING AND FACILITATED A WORKSHOP FOR CAMPBELL COUNTY SCHOOLS.</p> <p>THE GRANTMAKING PROGRAM PROVIDED APPROXIMATELY \$768,000 IN GRANTS AND CONTRIBUTIONS TO 35 ORGANIZATIONS.</p>
<p>FORM 990, PART VI, LINE 2 - FAMILY/BUSINESS RELATIONSHIPS AMONGST INTERESTED PERSONS</p>	<p>CERTAIN KNOWLEDGEWORKS BOARD MEMBERS ARE ALSO MEMBERS OF THE BOARDS OF CERTAIN KNOWLEDGEWORKS AFFILIATES. THESE OVERLAPPING BOARD MEMBERSHIPS CONSTITUTE A BUSINESS RELATIONSHIP AS DEFINED BY FORM 990 INSTRUCTIONS. - BUSINESS RELATIONSHIP</p>
<p>FORM 990, PART VI, LINE 11B - REVIEW OF FORM 990 BY GOVERNING BODY</p>	<p>AFTER COMPLETION BY THE PREPARER, THE DRAFT FORM 990 IS REVIEWED BY THE ACCOUNTING DIRECTOR AND THE EVP/COO. 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.</p>
<p>FORM 990, PART VI, LINE 12C - CONFLICT OF INTEREST POLICY</p>	<p>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.</p>

Return Reference - Identifier	Explanation																																																												
FORM 990, PART VI, LINE 15A - PROCESS TO ESTABLISH COMPENSATION OF TOP MANAGEMENT OFFICIAL	<p>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.</p> <p>MEMBERS OF THE BOARD OF DIRECTORS HAVE IN THE PAST RECEIVED REASONABLE COMPENSATION FOR THEIR SERVICES AS MEMBERS OF THE BOARD OF DIRECTORS.</p> <p>A COMPENSATION STUDY WAS LAST PERFORMED IN APRIL 2023 BY SMITHPILOT.</p>																																																												
FORM 990, PART VI, LINE 15B - PROCESS TO ESTABLISH COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES	<p>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.</p> <p>MEMBERS OF THE BOARD OF DIRECTORS HAVE IN THE PAST RECEIVED REASONABLE COMPENSATION FOR THEIR SERVICES AS MEMBERS OF THE BOARD OF DIRECTORS.</p> <p>A COMPENSATION STUDY WAS LAST PERFORMED IN APRIL 2023 BY SMITHPILOT.</p>																																																												
FORM 990, PART VI, LINE 19 - REQUIRED DOCUMENTS AVAILABLE TO THE PUBLIC	<p>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.</p>																																																												
FORM 990, PART IX, LINE 11G - OTHER FEES FOR SERVICES	<table border="1"> <thead> <tr> <th data-bbox="488 747 764 814">(a) Description</th> <th data-bbox="764 747 951 814">(b) Total Expenses</th> <th data-bbox="951 747 1133 814">(c) Program Service Expenses</th> <th data-bbox="1133 747 1320 814">(d) Management and General Expenses</th> <th data-bbox="1320 747 1507 814">(e) Fundraising Expenses</th> </tr> </thead> <tbody> <tr> <td>BUSINESS CONSULTANTS</td> <td>144,400</td> <td>0</td> <td>144,400</td> <td>0</td> </tr> <tr> <td>MARKETING & COMMUNICATIONS</td> <td>40,161</td> <td>34,874</td> <td>5,287</td> <td>0</td> </tr> <tr> <td>NETWORK CONSULTING</td> <td>64,537</td> <td>64,537</td> <td>0</td> <td>0</td> </tr> <tr> <td>PAYROLL, COMP & BENEFITS</td> <td>160,272</td> <td>105,842</td> <td>54,430</td> <td>0</td> </tr> <tr> <td>HR, TRAINING & DEVELOPMENT</td> <td>13,100</td> <td>0</td> <td>13,100</td> <td>0</td> </tr> <tr> <td>TECHNOLOGY</td> <td>17,174</td> <td>0</td> <td>17,174</td> <td>0</td> </tr> <tr> <td>POLICY & ADVOCACY</td> <td>291,208</td> <td>291,208</td> <td>0</td> <td>0</td> </tr> <tr> <td>TEACHING & LEARNING CONSULTANTS</td> <td>755,511</td> <td>755,511</td> <td>0</td> <td>0</td> </tr> <tr> <td>STRATEGIC FORESIGHT</td> <td>341,783</td> <td>341,783</td> <td>0</td> <td>0</td> </tr> <tr> <td>DATA, RESEARCH & EVALUATION</td> <td>1,020,653</td> <td>1,020,653</td> <td>0</td> <td>0</td> </tr> <tr> <td>Total</td> <td>2,848,799</td> <td>2,614,408</td> <td>234,391</td> <td>0</td> </tr> </tbody> </table>	(a) Description	(b) Total Expenses	(c) Program Service Expenses	(d) Management and General Expenses	(e) Fundraising Expenses	BUSINESS CONSULTANTS	144,400	0	144,400	0	MARKETING & COMMUNICATIONS	40,161	34,874	5,287	0	NETWORK CONSULTING	64,537	64,537	0	0	PAYROLL, COMP & BENEFITS	160,272	105,842	54,430	0	HR, TRAINING & DEVELOPMENT	13,100	0	13,100	0	TECHNOLOGY	17,174	0	17,174	0	POLICY & ADVOCACY	291,208	291,208	0	0	TEACHING & LEARNING CONSULTANTS	755,511	755,511	0	0	STRATEGIC FORESIGHT	341,783	341,783	0	0	DATA, RESEARCH & EVALUATION	1,020,653	1,020,653	0	0	Total	2,848,799	2,614,408	234,391	0
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FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS OR FUND BALANCES	<table border="1"> <thead> <tr> <th data-bbox="488 1283 1295 1312">(a) Description</th> <th data-bbox="1295 1283 1507 1312">(b) Amount</th> </tr> </thead> <tbody> <tr> <td>TRANSFER FROM TAX-EXEMPT SUBSIDIARY - KWI</td> <td>7,066,740</td> </tr> </tbody> </table>	(a) Description	(b) Amount	TRANSFER FROM TAX-EXEMPT SUBSIDIARY - KWI	7,066,740																																																								
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**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

2023

**Open to Public
Inspection**

Name of the organization

KNOWLEDGEWORKS FOUNDATION

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) KWSL, LLC (51-0560916) 312 PLUM STREET, SUITE 950, CINCINNATI, OH 45202	STD LENDING	OH	0	0	KF
(2)					
(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?	
						Yes	No
(1) KWI (31-1776354) 312 PLUM STREET, SUITE 950, CINCINNATI, OH 45202	SUPPORTING	OH	501(C)(3)	11	KWF		<input checked="" type="checkbox"/>
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Cat. No. 50135Y

Schedule R (Form 990) 2023

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.

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

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
KWI	L	23,381	ACTUAL COST
(1)			
KWI	N	1,681	ALLOCATED COST
(2)			
KWI	Q	25,015	ACTUAL COST
(3)			
KWI	S	7,066,740	ACTUAL CASH TRF
(4)			
(5)			
(6)			

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(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		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													
(11)													
(12)													
(13)													
(14)													
(15)													
(16)													