o g n	Signature of onicer	
Here	Steven Smith	, CEO
	Type or print name and title	
	Print/Type preparer's name	Preparer's signature
Paid	John Mullins	John Mullins
Preparei	1 millio manno	Mullins, PC
Use Only	Y Firm's address	7625 Wisconsin Avenue
		Bethesda MD 20814
May the IRS	S discuss this return with	he preparer shown above? See ins
or Paperv	vork Reduction Act Noti	ce, see the separate instructions.
EA		

Steven Smith

990

Department of the Treasury

Check if applicable:

Final return/terminated

Address change

Amended return

Application pending

Tax-exempt status:

Form of organization:

Summary

Website:

1

2 3

5

6

7a

Part I

Activities & Governance

Name change

Initial return

For the 2023 calendar year, or tax year beginning

X 501(c)(3)

C Name of organization

Doing business as

1200 New York Ave NW

Washington, DC 20005

) (insert no.)

Other

Name and address of principal officer:

____ 501(c) (

X Corporation Trust Association

Total number of volunteers (estimate if necessary)

Internal Revenue Service

Α в

х

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

Open to Public

Inspection

1,157,376

Yes

Yes

DC

X No

No

5

Δ

6

٦

0

20

D Employer identification number

Global Knowledge Initiative 27-0559519 Room/suite E Telephone number Number and street (or P.O. box if mail is not delivered to street address) 452 (202) 326-8729 G Gross receipts City or town, state or province, country, and ZIP or foreign postal code \$ H(a) Is this a group return for subordinates? H(b) Are all subordinates included? 4947(a)(1) or 527 If "No," attach a list. See instructions www.globalknowledgeinitiative.org H(c) Group exemption number L Year of formation: 2009 M State of legal domicile: Briefly describe the organization's mission or most significant activities: See Schedule O. Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a

2023, and ending

	b	Net unrelated business taxable income from Form 990-1, Part I, line 11 · · · · · · · · · · · ·		0
			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		0
iue	9	Program service revenue (Part VIII, line 2g)	1,742,721	1,157,187
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	159	189
Re	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,742,880	1,157,376
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		365,838
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
Ś	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	557,359	888,615
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
per	b	Total fundraising expenses (Part IX, column (D), line 25) 7,061		
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	776,233	560,051
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,333,592	1,814,504
	19	Revenue less expenses. Subtract line 18 from line 12	409,288	(657,128)
ces			Beginning of Current Year	End of Year
Assets (d Balanc	20	Total assets (Part X, line 16)	1,122,487	219,900
d Bs	21	Total liabilities (Part X, line 26)	319,383	73,924
Pune	22	Net assets or fund balances. Subtract line 21 from line 20	803,104	145,976
Part	t II	Signature Block		

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

Sign	Signature of officer	Date							
Here	Steven Smith								
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature	Date	Check if PTIN					
Paid	John Mullins	John Mullins	08-19-2024	self-employed P01429307					
Preparer		Mullins, PC	Firm's EIN						
Use Only	Firm's address	7625 Wisconsin Avenue		Phone no.					
		Bethesda MD 20814		202-770-6371					
May the IRS	discuss this return with	the preparer shown above? See instruction	ns	X Yes 🗌 No					

Form 990 (2023)

Form	n 990 (2023) Global Knowledge Initiative	27-0559519	Page 2
Ра	rt III Statement of Program Service Accomplishments		-
	Check if Schedule O contains a response or note to any line in this Part III		. 🗌
1	Briefly describe the organization's mission:		
	See Schedule O.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
-	prior Form 990 or 990-EZ?	🗌 Yes 🕱 I	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 🗽 I	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 measure	ed by	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	thers,	
	the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$1,470,901 including grants of \$365,838) (Revenue	\$ 1,157,18	<u>37</u>)
	See SERVICES page for a description of this program service.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	\$)
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 1,470,901		

Form	990 (2023) Global Knowledge Initiative 27-	0559519	F	age 3							
Pa	rt IV Checklist of Required Schedules										
			Yes	No							
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"										
	complete Schedule A	1	x								
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	x								
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to										
	candidates for public office? If "Yes," complete Schedule C, Part I										
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)										
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		х							
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,										
	assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х							
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors										
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If										
	"Yes," complete Schedule D, Part I	6		х							
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,										
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х							
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			1							
	complete Schedule D, Part III • • • • • • • • • • • • • • • • •	8		x							
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			1							
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			1							
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х							
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments										
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		x							
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,										
	VII, VIII, IX, or X, as applicable.										
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"										
	complete Schedule D, Part VI	11a	x								
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more										
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х							
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more										
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x							
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets										
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х							
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		х							
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses										
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		х							
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete										
	Schedule D, Parts XI and XII	12a		х							
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If										
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x							
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х							
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х							
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			1							
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	x								
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or										
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15	x								
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other										
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x							
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on										
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x							
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on										
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		x							
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?										
	If "Yes," complete Schedule G, Part III	19		x							
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		x							
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?										
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or										
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x							

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Pa	rt 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	• • • • •	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the				
	organization's current and former officers, directors, trustees, key employees, and highest compensated				
• • •	employees? If "Yes," complete Schedule J		23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than				
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b		04-		
L	through 24d and complete Schedule K. If "No," go to line 25a		24a		<u>x</u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year		244		
لم	to defease any tax-exempt bonds?		24c 24d		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		240		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit		25a		
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		20d		<u>x</u>
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?		05h		
26	If "Yes," complete Schedule L, Part I		25b		<u>x</u>
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%		26		
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		20		<u>x</u>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key				
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee				
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.		27		v
20	Was the organization a party to a business transaction with one of the following parties (See the Schedule		21		<u>x</u>
28	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).				
2	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If				
а	"Yes," complete Schedule L, Part IV		28a		v
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		20a 28b		x x
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If		200		
C	"Yes," complete Schedule L, Part IV		28c		v
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M		29		x x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		23		
50	conservation contributions? If "Yes," complete Schedule M		30		v
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		31		<u>x</u>
32	Did the organization required, enhance, or dissolve and cease operations in Tes, complete schedule N, Fart T Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		51		X
52	complete Schedule N, Part II		32		v
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		52		X
55	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		33		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,				_ <u>x</u>
54	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·		34		v
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		35a		x x
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		554		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		005		
	related organization? If "Yes," complete Schedule R, Part V, line 2		36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		- 50		
0,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.		37		v
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and		51		x
	19? Note: All Form 990 filers are required to complete Schedule O		38	х	
Par			55	л	L
	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	12			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and				
•	reportable gaming (gambling) winnings to prize winners?		1c	х	
					0000

Form	990 (2023) Global Knowledge Initiative 27-05595	519	F	Page 5
Pai	t 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 6			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	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		x
b	If "Yes," enter the name of the foreign country			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	50 50		
C Fa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	50		
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	60		
ь		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		x
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of 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.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
с	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		x
	If "Yes," complete Form 4720, Schedule O.			
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?	17		
	If "Yes," complete Form 6069.			

-	n 990 (2023) Global Knowledge Initiative 27-05595	-		age 6
Pa	Int VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below,	and fo	or a "l	Vo″
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O			ctions.
	Check if Schedule O contains a response or note to any line in this Part VI			Х
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain on Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1 1 1 4			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
•	any other officer, director, trustee, or key employee?	2		<u>x</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct	_		
4	supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	3		<u>x</u>
4 5	Did the organization become aware during the year of a significant diversion of the organization's assets?	4 5	х	
6	Did the organization become aware during the year of a significant diversion of the organization s assets ?	6		<u>x</u>
0 7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	0		<u>x</u>
74	one or more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			<u> </u>
~	stockholders, or persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b		х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	х	_
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? <i>If "No," go to line 13</i>	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40.		
40	describe on Schedule O how this was done	12c	x	
13 14	Did the organization have a written whistleblower policy? Image: Construction of the organization have a written document retention and destruction policy? Did the organization have a written document retention and destruction policy? Image: Construction of the organization have a written document retention and destruction policy?	13	X	
14 15	Did the process for determining compensation of the following persons include a review and approval by	14	x	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	
b	Other officers or key employees of the organization	15b	x	
-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		х
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed District of Columbia			
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.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest 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.			
	The Organization (202)326-8729, 1200 New York Ave NW, Ste 452, Washington, DC 20005			

Form 990 (2023		27-0559519	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highes	t Compensated Employe	es, 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 Compensate	ed Employees	
1a Complete th	is table for all persons required to be listed. Report compensation for the calendar year ending wit	h or within the	
organization's t	ax year.		
 List all of t 	he organization's current officers, directors, trustees (whether individuals or organizations), regard	dless 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 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.

	iteu organiza		mpe	iisai		any cu	nen		ilusiee.	
				((C)					
(A)	(B)				sition			(D)	(E)	(F)
Name and title	Average	•				han one s both ai		Reportable	Reportable	Estimated amount
	hours					/trustee)		compensation	compensation	of other
	per week							from the	from related	compensation
	(list any	or In	'n	Q	۲.	e Ξ	۲c	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	hours for related	divid dire	stitu	Office	ey ei	ghe	Former	1099-NEC)	1099-NEC)	related organizations
	organizations	ual t	liona	Ċ	Key employee	yee	-			
	below	Individual trustee or director	nstitutional trustee		yee	mpe				
	dotted line)	ee	stee			Highest compensated employee				
						led				
(1)Seema Patel	40.00									
CEO (resigned 8/24)		х		х				156,945	0	11,780
(2)Megan_Scanlon	40.00									
Chief Operating Officer				х				142,257	0	12,413
(3) Steven Smith	40.00									
CEO		х		х				100,466	0	4,901
_(4)Sara_Farley	0.25									
Board member		х						0	0	0
(5)Sam Pitroda	0.25									
Board member		х						0	0	0
(6)Nina_Federoff	0.25									
Board member		х						0	0	0
(7)Dave Furguson	2.00									
Chairperson		х		х				0	0	0
_(<u>8</u>)										
(<u>9</u>)	L									
(10)										
<u>(11)</u>										
	[
<u>(12)</u>										
<u>(13)</u>										
<u>(14)</u>										
	1									Earne 000 (0000)

Form 9			Global	Knowledge	Initiati	ve	-				<u> </u>			55951			age 8
Part		Section A.	JTTICERS	, Directors, I	rustees,	Key	Em	-	-	es, ar	na	Highest Comp	ensated E	mpioy	ees (c	contin	iued)
	(A) (B) Name and title Average hours per week		(do not check more than one Reportable Average box, unless person is both an Reportable hours officer and a director/trustee) compensation							(E) Reportable compensation from related organizations (W		Estimate	other ensatio				
					(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)		organiza elated or	ation a	
<u>(15)</u>																	
<u>(16)</u>																	
<u>(17)</u>																	
<u>(18)</u>																	
<u>(19)</u>																	
<u>(20)</u>																	
<u>(21)</u>																	
<u>(22)</u>																	
<u>(23)</u>																	
<u>(24)</u>																	
(25)																	
	Subt						•••	•••	•••		•						
C d		l from continuat I (add lines 1b a				• • •	• •	• •	•••		•	200 669		_		<u> </u>	0.4
2												399,668 received more t	<u>l</u> han \$100,00	0 0 of	2	9,0	94
	repo	ortable compen	sation fro	om the organiza	ation												3
3	Did H	he organization li	ot on for	ner officer direct	or tructoo k	014 O.M.			r hio	aboot o		apparted			Y	es	No
3		-	-						-						3		x
4												ensation from the					
	-	nization and relat	-	-					olete	Schee	dule	J for such					
5		idual • • • • • •								· · ·	•••	zation or individual		··· -	4 2	x	_
Ŭ								-			-				5		x
Secti		. Independe															
1												that received m					
	com	pensation from	i the orga		rt compens	sation	for	the	cale	endar	yea 	ar ending with or		ganizat		ax y	ear.
			Nam	(A) e and business addre	SS							(B) Description of servio	es	Con	(C) npensatio	on	
2	Tota	l number of inc	lependen	t contractors (i	ncluding bu	ut not	limit	ted t	to th	nose l	iste	d above) who					

received more than	\$100.000	of compensation	from the organization

Form 99		(23) Globa	1 K	nowledge	In	itiative			27-05595	5 19 Page 9
Part	VIII	Statement of Rev								_
		Check if Schedule C	0 COI	ntains a resp	ons	e or note to any	Ine in this Part ((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	g	Federated campaigns . Membership dues Fundraising events Related organizations . Government grants (cont All other contributions, gif and similar amounts not i Noncash contributions ind lines 1a-1f Total. Add lines 1a-1f	ribut ts, g ncluc		1a 1b 1c 1d 1e 1f 1g	\$				
						Business Code				
Program Service Revenue	b c	Labs				900099	1,157,187	1,157,187		
jran Rev	d e									
Jroć	_	All other program service	ever	nue						
-		Total. Add lines 2a-2f				1,157,187				
	3	Investment income (includ other similar amounts)		• •		189			189	
	4 5	Income from investment of Royalties								
	b	Gross rents	6b							
		Rental income or (loss)	6c							
		Net rental income or (loss)	<u> </u>	(i) Securities		(ii) Other				
	/a	Gross amount from sales of assets other than inventory	7a	(i) Securites	•					
e	b	Less: cost or other basis and sales expenses	7h							
rent	c	Gain or (loss)	<u> </u>							
Rev		Net gain or (loss)								
Other Revenue	8a	Gross income from fundra events (not including \$								
		1c). See Part IV, line 18			8a		-			
		Less: direct expenses			8b	1				
		Net income or (loss) from t Gross income from gaming activities. See Part IV, line	3	-	9a					
	b	Less: direct expenses .			9b					
		Net income or (loss) from								
		Gross sales of inventory, le returns and allowances	• •		10a					
		Less: cost of goods sold			10k					
	C	Net income or (loss) from	sales	or inventory	••	Business Code				
sr	11a					Dusiness Code				
Miscellanous Revenue	b									
sella 3ver	c									
Misc Re		All other revenue								
		Total. Add lines 11a-11d								
	12	Total revenue. See instrue	ction	s			1,157,376	1,157,187	0	189

23) Global Knowledge Initiative Statement of Functional Expenses

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

27-0559519

	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and	(D) Fundraising
	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	Grants and other assistance to foreign				
•	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	365,838	365,838		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	399,668	277,894	118,891	2,883
6	Compensation not included above to disqualified	,			_/ • • •
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	334,279	232,428	99,440	2,411
	Pension plan accruals and contributions (include				_,-=
	section 401(k) and 403(b) employer contributions)	28,596	19,117	9,269	210
	Other employee benefits	55,776	39,386	16,094	296
10	Payroll taxes	70,296	46,995	22,785	516
11	Fees for services (nonemployees):	, ,	, -	, ,	
а	Management				
b	Legal	7,133	3,715	3,391	27
с	Accounting	49,125	25,587	23,356	182
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.)	405,819	389,954	15,544	321
12	Advertising and promotion				
13	Office expenses	24,152	13,551	10,519	82
14	Information technology				
15	Royalties				
16	Occupancy	3,687	1,920	1,753	14
17	Travel	28,754	22,408	6,297	49
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	29,340	25,834	3,480	26
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,307	1,723	1,572	12
23	Insurance	3,773	1,965	1,794	14
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.)				
а	Miscellaneous	4,961	2,586	2,357	18
b		,		,	
с					
d					
	All other expenses				
	Total functional expenses. Add lines 1 through 24e	1,814,504	1,470,901	336,542	7,061
	Joint costs. Complete this line only if the	_,011,004	_,1,0,501		,,,,,,,,
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Form 990 (2023)	Global	Knowledge	Initiative
	GIODAI	Innowreage	THITCHACTVE

Page	11

	990 (20		2	/-055	9519 Page 11
Par		Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	(4)	· · · ·	
			(A)		(B)
	4	Cash non interact bearing	Beginning of year		End of year
	1	Cash - non-interest-bearing	228,300	1	208,704
	2	Savings and temporary cash investments	800,158	2	515
	3 4		71 100	3 4	
	4 5	Loans and other receivables from any current or former officer, director,	71,136	4	2,440
	5	trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined		5	
	0	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
ets	8	Invertories for sale or use		8	
Assets	9	Prepaid expenses and deferred charges	15,280	9	2,447
4	10a	Land, buildings, and equipment: cost or other	15,280	5	2,337
	104	basis. Complete Part VI of Schedule D 10a 13,228			
	b	Less: accumulated depreciation	7,613	10c	5,794
	11	Investments - publicly traded securities	7,015	11	5,794
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	1,122,487	16	219,900
	17	Accounts payable and accrued expenses	69,383	17	73,924
	18	Grants payable	,	18	
	19		250,000	19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
S	22	Loans and other payables to any current or former officer, director,			
litie		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	319,383	26	73,924
		Organizations that follow FASB ASC 958, check here			
ses		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	803,104	27	145,976
Bal	28	Net assets with donor restrictions		28	
pu		Organizations that do not follow FASB ASC 958, check here			
Fu		and complete lines 29 through 33.			
) or	29	Capital stock or trust principal, or current funds		29	
sets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	803,104	32	145,976
~	33	Total liabilities and net assets/fund balances	1,122,487	33	219,900
FEA					Form 990 (2023)

EEA

Form 990 (2023)

-	990 (2023) Global Knowledge Initiative	27-055951	9	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,	157,	376
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,	814,	504
3	Revenue less expenses. Subtract line 2 from line 1	3	(657,	128)
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		803,	104
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10		145,	976
Pa	rt 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: Cash X Accrual 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?		2a		х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	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?		2c		
	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?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			F		

Form 990 (2023)

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.

ıst.	2023							
	Open to Public							
	Inspection							
ntificati	ntification number							

OMB No. 1545-0047

				www.irs.gov/Fori	ation.	Inspection							
Name	of th	e organization						Employer identification	number				
Glob	al	Knowledge	a Initiative					27-055951	9				
Par				rity Status. (Al	ty Status. (All organizations must complete this part.) See instructions.								
The o	rdar	nization is not a	private foundation b	ecause it is: (For lir	nes 1 through 12, check	onlv one b	ox.)	·					
1	Π		•	``	urches described in sec	2	,						
2	Н						// • // • // • // • /						
	Н			i on 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) hospital service organization described in section 170(b)(1)(A)(iii).									
3	Н	•		-									
4				perated in conjunction	on with a hospital describ	bed in sect	(d)011 noi:	(1)(A)(III). Enter the					
			e, city, and state:										
5		An organizatio	on operated for the be	enefit of a college o	r university owned or ope	erated by a	a governme	ental unit described in					
		section 170(b)(1)(A)(iv). (Complet	e Part II.)									
6		A federal, state	e, or local governmer	nt or governmental	unit described in section	170(b)(1)	(A)(v).						
7	Х	An organizatio	on that normally recei	ves a substantial pa	art of its support from a g	jovernmen	tal unit or f	rom the general public					
		described in s	ection 170(b)(1)(A)(v	vi). (Complete Part	II.)								
8	Π				/i). (Complete Part II.)								
9	П				tion 170(b)(1)(A)(ix) ope	erated in co	oniunction	with a land-grant colleg	ie				
•		-	-		(see instructions). Enter		-		,-				
		university:	r a non land grant oo	loge of agriculture		the nume,	, only, and o	date of the conege of					
40			n that narmally reasi	vaa (1) mara than (33 1/3% of its support fro	m contribu	tions mon	abarabin face and area					
10	Ш				subject to certain except				55				
		support from g	pross investment inco	me and unrelated I	ousiness taxable income	(less sect	ìoń 511 tax						
			•		section 509(a)(2). (Com	•	,						
11	Ц	An organizatio	on organized and ope	rated exclusively to	test for public safety. Se	ee section	509(a)(4).						
12		0	e .		or the benefit of, to perfor		-	<i>,</i> , ,					
		one or more p	ublicly supported org	anizations describe	d in section 509(a)(1) or	section 5	5 09(a)(2) . S	See section 509(a)(3).	Check				
		the box on line	es 12a through 12d th	nat describes the ty	pe of supporting organiza	ation and o	complete lin	nes 12e, 12f, and 12g.					
а		Type I. A	supporting organizati	on operated, super	vised, or controlled by its	supported	d organizat	ion(s), typically by givir	ng				
		the suppo	rted organization(s) t	he power to regula	rly appoint or elect a maj	ority of the	directors of	or trustees of the					
		supporting	organization. You n	nust complete Par	t IV, Sections A and B.								
b		_ ·· •	•	-	ontrolled in connection w	/ith its sup	ported orda	anization(s), by having					
				•	tion vested in the same		Ũ		ed				
			on(s). You must con										
с		_ ·	. ,	•	anization operated in co	nnection w	vith and fu	nctionally integrated wit	th				
U					ou must complete Part			, ,	un,				
d		_			g organization operated				n(a)				
d			-	•									
			, ,	0	n generally must satisfy a			ient and an altentivene	355				
					te Part IV, Sections A a								
е		—	-		en determination from the		• •	I, Type II, Type III					
					integrated supporting or	ganization							
f			er of supported organ						••••				
g	P	rovide the follo	wing information abo	ut the supported or	ganization(s).	1			1				
	(Name of supported 	ed organization	(ii) EIN	(iii) Type of organization		rganization	(v) Amount of monetary	(vi) Amount of				
					(described on lines 1-10 above (see instructions))	docum	ir governing hent?	support (see instructions)	other support (see instructions)				
						Yes	No						
(A)													
(~)													
(B)													
(8)													
(C)													
(0)													
(D)													
(_)													
(E)													
(-)													
Total													

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. $_{\mbox{\scriptsize EEA}}$

	e A (Form 990) 2023 Global Know	vledge Init	iative			27-055951	9 Page 2
Part							
	(Complete only if you checked the						alify under
	Part III. If the organization fails to	o qualify und	er the tests li	sted below, p	lease comple	ete Part III.)	
	on A. Public Support						
Calen	dar 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.")	789,339	1,185,941	1,575,195	1,742,721	1,157,187	6,450,383
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	789,339	1,185,941	1,575,195	1,742,721	1,157,187	6,450,383
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)						5,005,469
6	Public support. Subtract line 5 from line 4 .						1,444,914
	on B. Total Support	-	_			_	
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	789,339	1,185,941	1,575,195	1,742,721	1,157,187	6,450,383
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
	similar sources	225	162	74	159	189	809
9	Net income from unrelated business						
	activities, whether or not the business						
40	is regularly carried on						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
44	(Explain in Part VI.)	436					436
11 12	Gross receipts from related activities, etc.	(see instructi				12	6,451,628
13	First 5 years. If the Form 990 is for the o						<u>c)(3)</u>
10	organization, check this box and stop he						
Secti	on C. Computation of Public Suppo	rt Percenta	10				
14	Public support percentage for 2023 (line (11. column (f))		14	22.40 %
15	Public support percentage from 2022 Sch	. ,	•	())		15	36.07 %
16a	33 1/3% support test - 2023. If the organ					1/3% or more,	
	box and stop here. The organization qua						
b	33 1/3% support test - 2022. If the organ	nization did no	t check a box o	on line 13 or 16	Sa, and line 15	is 33 1/3% or r	nore, check
	this box and stop here. The organization	qualifies as a	publicly suppo	orted organizati	ion		x
17a	10%-facts-and-circumstances test - 20	23. If the orga	nization did no	t check a box o	on line 13, 16a	, or 16b, and lir	ne 14 is
	10% or more, and if the organization mee	ts the facts-ar	nd-circumstanc	es test, check	this box and s	top here. Expla	ain in
	Part VI how the organization meets the fa						
	organization						
b	10%-facts-and-circumstances test - 20	22. If the orga	nization did no	t check a box o	on line 13, 16a	, 16b, or 17a, a	nd line
	15 is 10% or more, and if the organization					•	
	in Part VI how the organization meets the						· · _
	organization						
18	Private foundation. If the organization d						
	instructions						📋

Schedu	e A (Form 990) 2023 Global Know	ledge Init	iative			27-0559	9519 Page
Part	III Support Schedule for Organiza	ations Desc	ribed in Sec	tion 509(a)(2	2)		
	(Complete only if you checked the second	ne box on line	e 10 of Part I	or if the orga	nization failed	to qualify	/ under Part II.
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part I	l.)	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disgualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
-	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	B (f) Total
9	Amounts from line 6	(4) = 0.00	() = = = = =	(0) = 0 = 0	(4) = - = =	(0) = = = =	(.,
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources •						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the o	rganization's fi	rst. second. th	ird, fourth, or f	ifth tax vear as	a section 5	01(c)(3)
	organization, check this box and stop her						- · · · · -
Secti	on C. Computation of Public Suppo						
15	Public support percentage for 2023 (line 8			13. column (f))		15	9
16	Public support percentage for 2020 (intel Public support percentage from 2022 Sch		•			16	
-	on D. Computation of Investment In						,
17	Investment income percentage for 2023 (-	by line 13. colu	umn (f))	17	9
18	Investment income percentage from 2022		.,	•	.,,	18	9
19a	33 1/3% support tests - 2023. If the orga					-	
	17 is not more than 33 1/3%, check this b						
b	33 1/3% support tests - 2022. If the organization	-	-	-			
~	line 18 is not more than 33 1/3%, check this box						_
20	Private foundation. If the organization di		-			-	
				, . , 			

No

Yes

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in Part VI when and how the organization made the determination.*
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer line 10b below.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Schedule A (Form 990) 2023

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11a		
b	A family member of a person described on line 11a above?	11b		<u> </u>
c	A 35% controlled entity of a person described on 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
Ũ	provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			<u> </u>
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
•	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	4		
•	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		<u> </u>
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	on C. Type II Supporting Organizations		·	·
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		L
Secti	on 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?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
	how the organization maintained a close and continuous working relationship with the supported organization(s)	. 2		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have			
	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations	5	(L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	oine	tructi	one)
a	The organization satisfied the Activities Test. Complete line 2 below.	5 11131	Juch	0113).
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction)			
2	Activities Test. Answer lines 2a and 2b below.	<i>IIS)</i> .	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		169	110
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0.		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's			
	involvement, one or more of the organization's supported organization(s) would have been engaged in? If			
	"Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would			
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
EEA	Schedul	e A (Fo	orm 99	0) 2023

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 Schedule A (Form 990) 2023
 Global Knowledge Initiative

 Part IV
 Supporting Organizations (continued)

V Type III Non-Functionally Integrated 509(a)(3) Supporting Or			
instructions. All other Type III non-functionally integrated supporting organ	nizatio	ns must complete Sec	tions A through E.
on A Adjusted Nat Income		(A) Prior Vear	(B) Current Yea
			(optional)
Net short-term capital gain	1		
	2		
	3		
Add lines 1 through 3.	4		
Depreciation and depletion	5		
of gross income or for management, conservation, or maintenance of			
property held for production of income (see instructions)	6		
Other expenses (see instructions)	7		
Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
on B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
Average monthly value of securities	1a		
Average monthly cash balances	1b		
Fair market value of other non-exempt-use assets	1c		
Total (add lines 1a, 1b, and 1c)	1d		
Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
Acquisition indebtedness applicable to non-exempt-use assets	2		
Subtract line 2 from line 1d.	3		
Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by 0.035.	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
on C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, column A)	1		
Enter 0.85 of line 1.	2		
Minimum asset amount for prior year (from Section B, line 8, column A)	3		
Enter greater of line 2 or line 3.	4		
Income tax imposed in prior year	5		
Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
Check here if the current year is the organization's first as a non-functional	ally in	tearated Type III suppo	orting organization
	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting orgar on A - Adjusted Net Income Net short-term capital gain Recoveries of prior-year distributions Other gross income (see instructions) Add lines 1 through 3. Depreciation and depletion 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) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) on B - Minimum Asset Amount Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): Average monthly cash balances Fair market value of other non-exempt-use assets Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). Net value of non-exempt-use assets Multiply line 5 by 0.035. Recoveries of prior-year distributions Minimum Asset Amount Adjusted net income for prior year (from Section A, line 8, column A) Enter 0.85 of line 1. Minimum asset amount for prior year (from Section B, line 8, column A) Enter greater of line 2 or line 3. Income tax imposed in prior year	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organizatio on A - Adjusted Net Income 1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3. 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other expenses (see instruct lines 5, 6, and 7 from line 4) 8 on B - Minimum Asset Amount 4 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1 Average monthly value of securities 1a Average monthly cash balances 1b Fair market value of other non-exempt-use assets 1c Total (add lines 1a, 1b, and 1c) 1d Discount claimed for blockage or other factors (explain in detail in Part VI): 3 Aceash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 Net value of non-exempt-use assets (subtract line 4 from line 3) <td>Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (exp instructions. All other Type III non-functionally integrated supporting organizations must complete Sec on A - Adjusted Net Income (A) Prior Year Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3. 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection 6 Other gross income of for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other gross income (subtract lines 5, 6, and 7 from line 4) 8 on B - Minimum Asset Amount (A) Prior Year Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a Average monthly value of securities 1a Average monthly value of other non-exempt-use assets 1c Total (add lines 1, b, and 1c) 1d Discount claimed for blockage or other factors 2 (explain in detail in Part VI): 3 Acquisition indebtedness applicable to non-exempt-use assets 2 <</td>	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (exp instructions. All other Type III non-functionally integrated supporting organizations must complete Sec on A - Adjusted Net Income (A) Prior Year Net short-term capital gain 1 Recoveries of prior-year distributions 2 Other gross income (see instructions) 3 Add lines 1 through 3. 4 Depreciation and depletion 5 Portion of operating expenses paid or incurred for production or collection 6 Other gross income of for management, conservation, or maintenance of property held for production of income (see instructions) 6 Other gross income (subtract lines 5, 6, and 7 from line 4) 8 on B - Minimum Asset Amount (A) Prior Year Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a Average monthly value of securities 1a Average monthly value of other non-exempt-use assets 1c Total (add lines 1, b, and 1c) 1d Discount claimed for blockage or other factors 2 (explain in detail in Part VI): 3 Acquisition indebtedness applicable to non-exempt-use assets 2 <

Schedule A (Form 990) 2023

Schedul	e A (Form 990) 2023 Global Knowledge Initiati V Type III Non-Functionally Integrated 509(a)(27-055 (izations (continued)				
Secti	on D - Distributions	<i>,</i> . .	· · · · · ·	Current Year			
1							
2							
	organizations, in excess of income from activity		2				
3	Administrative expenses paid to accomplish exempt purp	oses of supported orgar					
4	Amounts paid to acquire exempt-use assets		4				
5	Qualified set-aside amounts (prior IRS approval required)	•					
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	n the organization is resp					
	(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				
Secti	on 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 - <i>explain in Part VI).</i> See						
	instructions.						
3	Excess distributions carryover, if any, to 2023						
	From 2018						
	From 2019						
	From 2020						
	From 2021						
-	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, <i>explain in Part VI</i> . 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						
				• · · · · · · · · · · · · · · · · · · ·			

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Schedule A (Form 990) 2023

line 17e er 1

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.)

SCHE	DULE D	Supplementa	al Financial S	Statements		OMB	No. 1545-00	047
(Forn	n 990)	Complete if the orga Part IV, line 6, 7, 8, 9, 10	nization answered	Yes" on Form 990,		2	023	
Denartm	nent of the Treasury		ttach to Form 990.			Oper	n to Pub	lic
Internal	Revenue Service	Go to www.irs.gov/Form99	0 for instructions an				ection	
Name o	f the organization				Employer ic	lentification num	ber	
	1 Knowledge					559519		
Pa		ations Maintaining Donor Advised F			counts			
	Complet	te if the organization answered "Yes" o						
	T ()		(a) Donor a	dvised funds	(b) Funds and other	accounts	
1		end of year						
2		of contributions to (during year)						
3 4		of grants from (during year) at end of year						
4 5		tion inform all donors and donor advisors in	writing that the assets	held in donor advised				
5	-	ganization's property, subject to the organiza	-			П	Yes 🗌	No
6		tion inform all grantees, donors, and donor a] 110
•	-	e purposes and not for the benefit of the dor	-	-				
		missible private benefit?		, , ,		П	Yes 🗌	No
Par	0 1	rvation Easements						
	Complet	te if the organization answered "Yes" o	n Form 990, Part I	V, line 7.				
1		nservation easements held by the organizat						
	Preservation	of land for public use (for example, recreatio	n or education)	Preservation of a h	istorically i	mportant land a	rea	
	Protection of	natural habitat		Preservation of a c	ertified hist	toric structure		
	Preservation	of open space						
2	Complete lines 2	a through 2d if the organization held a qualit	fied conservation cont	tribution in the form of a	a con <u>serva</u>	tion		
	easement on the	e last day of the tax year.				Held at the End	l of the Tax	< Year
а	Total number of o	conservation easements • • • • • • • •			. 2a			
b	0	stricted by conservation easements ••••			. 2b			
С	Number of conse	ervation easements on a certified historic str	ucture included on line	e 2a	. 2c			
d		ervation easements included on line 2c, acqu	•					
		cture listed in the National Register ••••						
3	Number of conse	ervation easements modified, transferred, re	leased, extinguished,	or terminated by the or	rganization	during the		
	tax year							
4		s where property subject to conservation eas						
5	-	zation have a written policy regarding the pe					. г	٦
•	-	nforcement of the conservation easements i					-	No
6	Staff and volunte	eer hours devoted to monitoring, inspecting,	nandling of violations,	and enforcing conserv	ation ease	ments during th	e year	
7	Amount of exper	 nses incurred in monitoring, inspecting, hand	lling of violations, and	enforcing conservatior	n easemen	ts during the ye	ar	
~	Deservel							
8		ervation easement reported on line 2d above (h)(4)(B)(ii)?	<i>,</i> ,				Vec [1
•							Yes	No
9		ribe how the organization reports conservati		•				
		le, if applicable, the text of the footnote to the	e organization s infant	cial statements that des	scribes the			
Par		counting for conservation easements zations Maintaining Collections	of Art Historica	Treasures or C	ther Sir	nilar Assota		
Iui		te if the organization answered "Yes" o					,	
1a	-	n elected, as permitted under FASB ASC 95			halance el	neet works		
ia	-	reasures, or other similar assets held for pul						
		in Part XIII the text of the footnote to its finar						
b	•	n elected, as permitted under FASB ASC 95			ance sheet	works of		
D	•	asures, or other similar assets held for public	•					
						5110 301 4106,		
	provide the following amounts relating to these items:							

	(i) Revenue included on Form 990, Part VIII, line 1 • • • • • • • • • • • • • • • • • •
	(ii) Assets included in Form 990, Part X
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the
	following amounts required to be reported under FASB ASC 958 relating to these items:
а	Revenue included on Form 990, Part VIII, line 1 ••••••••••••••••••••••••••••••••••••
b	Assets included in Form 990, Part X

	e D (Form 990) 2023 Global Knowled						27-055		Page 2
Par	t III Organizations Maintaining	g Collections of	Art, Histo	rical T	reasures,	or O	ther Similar <i>I</i>	Assets (co	ontinued)
3	Using the organization's acquisition, acces	sion, and other recor	ds, check any	of the fo	llowing that r	make si	gnificant use of its	S	
	collection items (check all that apply):								
а	Public exhibition		d 🗌	Loan or	exchange pr	ogram			
b	Scholarly research								
с	Preservation for future generations		_	-					
4	Provide a description of the organization's	collections and expla	in how they fu	rther the	organizatior	ı's exer	npt purpose in Pa	irt	
	XIII.								
5	During the year, did the organization solicit	or receive donations	of art. historio	al treasu	ures, or other	r similar			
-	assets to be sold to raise funds rather than		-		-			. 🗌 Yes	□ No
Par	t IV Escrow and Custodial Arr								
	Complete if the organization		" on Form §	990. Pa	art IV, line	9, or	reported an a	mount on	Form
	990, Part X, line 21.			,	,	- ,	1		
	Is the organization an agent, trustee, custo	dian or other interme	diary for contr	ibutions	or other asse	ets not			
	included on Form 990, Part X?								□ No
b	If "Yes," explain the arrangement in Part XI								
5			bilowing table.				Δ	mount	
	Beginning balance					10		nount	
с С	Additions during the year								
d	Distributions during the year								
e	Ending balance						-		
f	-								
2a	Did the organization include an amount on						•		
b	If "Yes," explain the arrangement in Part XI t V Endowment Funds	III. Check here if the e	explanation na	s been p	provided on F	Part XIII			
Par		a anawarad "Vaa	" on Form (art IV/ line	10			
	Complete if the organization		1						
		(a) Current year	(b) Prior ye	ear	(c) Two years	back	(d) Three years bac	k (e) Foury	ears back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cu	urrent year end balan	ce (line 1g, co	lumn (a)) held as:				
а	Board designated or quasi-endowment	%							
b	Permanent endowment	0							
с	Term endowment %								
	The percentages on lines 2a, 2b, and 2c sl	nould equal 100%.							
3a	Are there endowment funds not in the poss	session of the organiz	zation that are	held and	d administere	ed for th	е		
	organization by:	-						- F	Yes No
	(i) Unrelated organizations?							. 3a(i)	
	(ii) Related organizations?							. 3a(ii)	
b	If "Yes" on line 3a(ii), are the related organ							. 3b	
4	Describe in Part XIII the intended uses of t								
Par									
	Complete if the organization	•	" on Form 9	990. Pa	art IV. line	11a. S	See Form 990), Part X. I	ine 10.
	Description of property	(a) Cost or oth			other basis		Accumulated	(d) Book	
	Description of property	(investm	·		her)	• •	epreciation	(u) Dook	Value
1a	Land		·	`			- -		
b	Buildings								
c c	Leasehold improvements								
d	Equipment				12 220		7 434		5 704
	• •				13,228		7,434		5,794
e Total	Other		V line 100	Jumn /D	<u> </u>				E 704
rotal.	Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	∧, IIIIe 10C, CC	nurnn (Bj	,	• • •			5,794

Page 3

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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15 col. (B))	

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) Federa	l income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Columi	n (b) must equal Form 990, Part X, line 25 col. (B))	

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....

Π

	le D (Form 990) 2023 Global Knowledge Initiative	27-0559519	Page 4
Part		er Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
С	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).	5	
Part		per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · 4a		
b	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
C	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Part	XIII Supplemental Information		

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

SCHEDULE F (Form 990)	te if the organ	f Activitie ization answere Attac .gov/Form990 fo	3.	MB No. 1545-0047 2023 Open to Public nspection			
Name of the organization						Employer iden	tification number
Global Knowledge						27-05595	
	Information o), Part IV, line		Outside the U	Inited States. Complete if	the organization a	answered "	Yes" on
1 For grantmaker	s. Does the orga	nization mainta	ain records to sul	bstantiate the amount of its gra	nts and		
 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 							🗶 Yes 🗌 No
· · · ·	gion. (The follow			uplicated if additional space is r	·		
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed a program sen describe specific t service(s) in the i	vice, ype of	(f) Total expenditures for and investments in the region
Central Americ	ca and						
(1) the Caribbeau	n		3	Program services	Program servi	ices	606,828
(2)South Asia			12	Program services	Program servi	ices	777,150

15

15

Subtotal

sheets to Part I **Totals** (add lines 3a and 3b)

Total from continuation

1,383,978

(3)

(4)

(5)

(6)

(7)

(8)

(9)

(10)

(11)

(12)

(13)

(14)

(15)

(16)

<u>(17)</u> 3a

b

С

Schedule F (Form 990) 2023 Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990,

Global Knowledge Initiative

27-0559519

Page **2**

	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
)			South Asia	Support Innovati	88,330	Wire Transfer			
			East Asia and						
)			the Pacific	Support Innovati	30,000	Wire Transfer			
)			South Asia	Support Innovati	8,660	Wire Transfer			
)			South Asia	Support Innovati	70,000	Wire Transfer			
)			South Asia	Support Innovati	70,000	Wire Transfer			
、			Central Americ the Caribbean	a and CARICHAM Network	87,500	Wire Transfer			
)				CARICHAM Network	87,500	WILE ITANSIEL			
)									
)									
)									
0)									
1)									
2)									
3)									
4)									
5)									
6) 2				at are recognized as char					

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

Global Knowledge Initiative

27-0559519

Page 3 Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
0)							
1)							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
A	1	1	1	1	1	1	Schedule F (Form 990)

Schedule F (Fo	orm 990) 2023	Global	Knowledge	Initiative
Part IV	Foreig	ın Form	IS	

27-0559519

EEA		Schedul	e F (Fo	rm 990) 202:
	the instructions for Form 5713; don't file with Form 990)	•	Yes	X No
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see			
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If			
	Foreign Partnerships (see the Instructions for Form 8865)	• 🗆	Yes	X No
	the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain			
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes,"			
-				
	Fund (see the Instructions for Form 8621) ••••••••••••••••••••••••••••••••••••	• 🗆	Yes	X No
	Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing			
	qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621,			
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a			
	Certain Foreign Corporations (see the Instructions for Form 5471)	. 🗌	Yes	X No
	the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To			
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes,"			
		• 🗆	163	
	U.S. Owner (see the Instructions for Forms 3520-A, Annual Montation Retain of Foreign Hust with a		Yes	X No
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a			
2	be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and			
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may			
	Corporation (see the Instructions for Form 926)	• 🗆	Yes	A NO
	the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		Vee	X No
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"			
4	Westhe exercise the second stransform of property to a farming conception during the toy year? If "Vest"			

Schedule F (Form 990) 2023

Schedule F (Forr	990) 2023 Global Knowledge Initiative	27-0559519	Page 5
Part V	Supplemental Information		
	Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, col		
	amounts of investments vs. expenditures per region); Part II, line 1 (accounting method		
	and Part III, column (c) (estimated number of recipients), as applicable. Also complete t	this part to provide any a	dditional
	information. See instructions.		
1. Gener	al Explanation Attachment		
<u>he</u> \$30,0	00 grant to the region, East Asia and the Pacific, was disbursed	l to an	
organizat	ion located in Australia, but the funds were expended for progra	m services in	
Banglades	h. Therefore, Sch F - Page 1, reflects that amount within the Sc	outh Asia region.	

SCHEDULE J	
(Form 990)	

Department of the Treasury Internal Revenue Service

Global Knowledge Initiative

Name of the organization

OMB No. 1545-0047 2023

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.

Open to Public Inspection

Employer identification number 27-0559519

Part	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.			
	First-class or charter travel Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	Tax indemnification and gross-up payments			
	Discretionary spending account 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	1b		
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?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
3	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.			
	Compensation committee			
	Independent compensation consultant Compensation survey or study			
	x Form 990 of other organizations x 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:			
а	Receive a severance payment or change-of-control payment?	4a		x
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
č	Participate in or receive payment from an equity-based compensation arrangement?	4c		x
C	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only caption $E(1/2)/2$, $E(1/2)/4$, and $E(1/2)/20$, arganizations must complete lines E 0			
-	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:			
а	The organization?	5a		х
b	Any related organization?	5b		x
	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:			
а	The organization?	6a		х
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.	•		<u>^</u>
7	For persons listed on Form 990 Part VII. Section A line 1a did the organization provide any ponfived			
1	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed	7	l	
•	payments not described on lines 5 and 6? If "Yes," describe in Part III	7	х	┝──
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	8		х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		
For Pa	perwork Reduction Act Notice, see the Instructions for Form 990. Schedule J	(Form	990)	2023

27-0559519 Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

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.

		(B)Breakdown of W-2 ar			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Seema Patel	(i)	103,745	53,200	0	6,160	5,620	168,725	0
1 CEO (resigned 8/24)	(ii)	0	0	0	0	0	0	0
Megan Scanlon	(i)	121,257	21,000	0	5,765	6,648	154,670	0
2 Chief Operating Officer	(ii)	0	0	0	0	0	0	0
	(i)							
3	(ii)							
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
_	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
40	(i)							
10	(ii)							
	(i)							
11	(ii)							
12	(i) (ii)							
12								
13	(i) (ii)							
13	(i) (i)							
14	(i) (ii)							
17	(i)							
15	(i) (ii)							
10	(i)							
16	(i) (ii)							
FEA	_ (II)						<u></u>	 ule .l (Form 990) 202

Schedule J (Form 990) 2023

Page 2

EEA

Schedule J (Form 990) 2023 Global Knowledge Initiative

Part III Supplemental Information

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

27-0559519

01. Other non-fixed payments (Part I, line 7)

While retention bonuses are not a standard part of our compensation packages, the Board instituted two separate bonus

incentives during the course of the year for all full-time non-CEO staff (including the COO) given the extraordinary

circumstances facing the organization and ongoing attrition concerns during the closure of two major programs, financial

uncertainties, and a leadership transition. The Board also instituted an incentive package for the outgoing CEO to ensure she

stayed through closure of the programs and through hiring and onboarding a new CEO. The Board mandated that the bonuses be

calculated using pre-established percentages of individuals' prevailing salaries if they were still employed in good standing

on the specific dates identified in the Board mandates.

SCHEDULE O (Form 990)

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Global Knowledge Initiative

Employer identification number 27-0559519

01. Organizational document changes (Part VI, line 4)

The Articles of Incorporation were amended and restated to accurately reflect GKI's

current operations and to ensure that GKI was operating consistent with the DC Nonprofit

Corporation Act of 2010.

02. Committee meeting documentation (Part VI, line 8b)

The Organization did not have committees.

03. Form 990 governing body review (Part VI, line 11)

The 990 is reviewed by the full board prior to its filing.

04. Conflict of interest policy compliance (Part VI, line 12c)

A copy of the conflict of interest policy is circulated to all members of the governing

body (directors) and is referenced in determining actions to be taken for which a

potential conflict of interest may arise. In such instances, the language of the policy

is invoked and the actions to be taken are governed by the protocol to eliminate such

conflicts of interest as described in the policy.

05. CEO, executive director, top management comp (Part VI, line 15a)

The CEO's salary is benchmarked using The Washington DC Not- for-Profit salary survey to

determine the appropriate compensation structure by comparing available data.

Compensation decisions, including pay increases are kept parsimonious with local market

standard conditions for similarly sized Not- for-Profit organizations.

06. Other officer or key employee compensation (Part VI, line 15b

Pay bands at GKI are determined by their ability to meet the requirements of the position.

Name of the organization	Employer identification number
Global Knowledge Initiative	27-0559519
The basis for the GKI pay bands is benchmarked off of market comparab	oles (using Guidestar
P2,	

organizations offering design, strategy, and innovation support within the development and

social impact sector. To ensure that employees receive formal feedback and a transparent

evaluation and determination of salary increases and promotions, GKI supervisors conduct

an Annual Performance Evaluations for all full-time and part-time GKI Staff and promotions

and pay increases are linked to Years of Experience, performance and alignment with the

roles and responsibilities.

07. Governing documents, etc, available to public (Part VI, line 19)

Copies of other documents in addition to the conflict of interest policy and financial

statements are kept in electronic formats in multiple secure cloud-based accounts. These

include Articles of Incorporation, Corporate By-laws, minutes and other records such as

written communications and financial statements within the past 3 years. In addition, a

list of names and business addresses of current officers and directors and the most recent

biennial report filed with DC are available. These documents can be shared upon receipt of

<u>a written request.</u>

08. List of other fees for services expenses (Part IX, line 11g)

Other Fees for Services			
Direct Consultants:	\$363,375		
Indirect Consultants:	\$28,493		
Other:	\$13,951		

09. General explanation attachment

Mission Statement:

Schedule O (Form 990) 2023	Page 2
Name of the organization	Employer identification number
Global Knowledge Initiative	27-0559519
At GKI, our mission is to activate collaborative networks to deliver the	innovative
solutions needed to build more resilient systems. We believe the knowledg	e to foster a
more resilient future already exists in the world, but the gap lies in ho	w we connect the
individuals who hold this ingenuity with one another so that they can do	more together.

Statement of Program Service Accomplishments

Name(s) as shown on return

Global Knowledge Initiative

Form 990-Part III(a) Statement of Service Accomplishment

Program Service Code	
Program Service Expenses	\$1470901
Grants and allocations included in above expense	\$365838
Program Services Revenue	\$1157187

Explanation

Labs: GKI's Lab Programs are intentionally designed to bring together diverse stakeholders to solve problems, innovate, drive the alignment of interests, broker new partnerships, and set a collaborative course for strategy design that leads to lasting change. Example projects: CCIR : GKI designed and managed the Caribbean Corporate Investment Initiative (CCIR) program, building collaboration opportunities for governments, businesses, and communities across the Caribbean, to come together to identify, develop and scale innovative, sustainable solutions to systemic challenges around disaster resilience. GKI facilitated private sector and humanitarian actors across the Eastern Caribbean archipelago to collectively map the dynamics of the system, clarify the future state envisioned, and identified strategic opportunities for systems transformation and launch 2 critical initiatives; strengthening a network coalition to foster long-term, value-driven partnerships between the private sector and humanitarian actors, and a resource coordination platform to harness donations and aid resources from the private sector to actors in the field. AI4R: Accelerating Innovation for Resilience (AI4R) designed and managed by GKI, is a systems-informed, stakeholder-led, action-oriented program that brings diverse actors together to identify, develop and scale innovative, sustainable solutions to strengthen the humanitarian innovation ecosystem around disaster response and resilience. AI4Resilience works in accompaniment with a broad range of potential innovation ecosystems stakeholders such as government agencies, humanitarian organizations innovation departments, corporate partners, entrepreneurship incubators, accelerators, and a broad range of investors and activates these intermediaries through a highly participatory incentive challenge, designed to support local innovation, leadership, and collaboration around solutions to emerge while building connective tissue across the network. The program was piloted in Bangladesh.

2023 PG01 Your Social Security Number

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