	•	00	Extended to May 15, 2024 Return of Organization Exempt From	n lı	ncome Tax	OMB No. 1545-0047
Foi	rm Y	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code			s) <b>2022</b>
Dep	artment	of the Treasury	Do not enter social security numbers on this form as it ma Go to www.irs.gov/Form990 for instructions and the lat	-	•	Open to Public
		enue Service			UN 30, 2023	Inspection
	Check if		f organization	90	D Employer identific	ation number
_	applicat	ess Dore	Knowledge Charter School dation			
F	Name		usiness as		84-135434	44
	Initia		and street (or P.O. box if mail is not delivered to street address) Room	/suite	E Telephone number	
	Final		Sharp Point Dr		970-672-	
_	termi ated Amer	City or t	own, state or province, country, and ZIP or foreign postal code		<b>G</b> Gross receipts \$	41,528.
Ľ	return Appli	I FOIL	Collins, CO 80525		H(a) Is this a group re	
	tion pend		nd address of principal officer: Noelle Currell		for subordinates	
-	<b>T</b>	empt status:	as C above $\mathbf{V}$ [504(a) ( ) (inserting) ( ) 4047(a)(4) as	7 507	H(b) Are all subordinates in	
	Webs	/-	X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or	527	H(c) Group exemption	list. See instructions
			X Corporation Trust Association Other L	Year		State of legal domicile: CO
	art I			Tour		
	1	Briefly describ	e the organization's mission or most significant activities: Advance	qo	portunities	for
Governance			ion by supporting Colorado charter so			
nar.	2	Check this bo	x if the organization discontinued its operations or disposed of	more	than 25% of its net ass	ets.
Ver	3	Number of vot	ting members of the governing body (Part VI, line 1a)			4
			4	4		
2 2 2	5 5		of individuals employed in calendar year 2022 (Part V, line 2a)			0
itie	6		of volunteers (estimate if necessary)			25
Activities &	7a		d business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>	7b	0.
					Prior Year	Current Year
đ	8	Contributions	and grants (Part VIII, line 1h)		246,837.	37,642.
Ĩ	9	Program servi	ce revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment ind	come (Part VIII, column (A), lines 3, 4, and 7d)		108.	3,886.
α	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12)		246,945.	41,528.
	13	Grants and sir	nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.
U,	3 15		r compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Exnenses	2 16a		undraising fees (Part IX, column (A), line 11e)		0.	0.
ž	k   b		ing expenses (Part IX, column (D), line 25) 0 .		070 600	
ш	17		es (Part IX, column (A), lines 11a-11d, 11f-24e)		278,628.	259,842.
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)		278,628.	259,842.
	19	Revenue less	expenses. Subtract line 18 from line 12		-31,683.	-218,314.
Assets or				ве	ginning of Current Year	End of Year
Ssei		Total assets (F			605,319.	387,005.
Net A			(Part X, line 26)		0. 605,319.	<u> </u>
	<u>= 22</u> art II		fund balances. Subtract line 21 from line 20			507,005.
		-	I declare that I have examined this return, including accompanying schedules and s	tatem	ante and to the best of my	knowledge and belief it is
			Declaration of preparer (other than officer) is based on all information of which pr			הווטשובטטב מווט שבוובו, וג 3
uut	,		י ביטטומימנוטה טי פרטפונט נטנוטר נוומה טוווטטרן וא שמשכע טורמה החטורוומנוטר ער אוווטר אוווטר ש	σμαι σι	nas any knowledge.	

. . .

Sign	Signature of officer		Date
Here	Noelle Currell , Director		
	Type or print name and title		
	Print/Type preparer's name	Preparer's signature	Date Check PTIN
Paid	Thomas G. Sistare	Thomas G. Sistare	01/15/24 self-employed P00356968
Preparer	Firm's name Hoelting & Compan	y, Inc.	Firm's EIN 30-0514455
Use Only	Firm's address 31 East Platte Av	enue, Suite 300	
	Colorado Springs,	CO 80903	Phone no. (719) 630-1091
May the II	RS discuss this return with the preparer shown abo	ve? See instructions	X Yes No
	a so 1114 For Dependence Paduation Act Natio	a and the concrete instructions	Form <b>990</b> (2022)

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

	Core Knowledge Charter School <u>990 (2022)</u> Foundation 84-1354344 Page 2 rt III Statement of Program Service Accomplishments
ı a	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	Advance opportunities for innovation by supporting Colorado charter
	schools.
	Did the exercities undertake any configure program can ince during the year which were not listed on the
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 X 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 X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
4	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$259,842. including grants of \$) (Revenue \$)
	Provide Support for Core Knowledge Charter School.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
_	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
ти	
	(Expenses \$ including grants of \$ ) (Revenue \$ )       Total program service expenses     259,842.
4e	Total program service expenses 259,842.

 Core Knowledge Charter School

 Form 990 (2022)
 Foundation

 Part IV
 Checklist of Required Schedules

			Yes	No			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?						
	If "Yes," complete Schedule A	1	Х				
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		X			
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or						
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X			
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to						
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X			
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,						
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 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 custodian for						
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?						
	If "Yes," complete Schedule D, Part IV	9		X			
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments						
	or in quasi endowments? If "Yes," complete Schedule D, Part V	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		X			
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		X			
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x			
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses						
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X X			
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete						
	Schedule D, Parts XI and XII	12a		X			
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		77				
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х				
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X X			
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>			
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,						
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	4.4%		x			
46	or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b					
15		45		x			
16	foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15					
16		16		x			
17	or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i>	16					
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</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			- 23			
10		18		x			
19	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"						
13		19		x			
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X			
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u> </u>			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or						
	domestic government on Part IX, column (A), line 1? <i>If "Yes." complete Schedule I. Parts I and II</i>	21		x			

 Core Knowledge Charter School

 Form 990 (2022)
 Foundation

 Part IV
 Checklist of Required Schedules (continued)

			Yes	No							
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on										
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	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										
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the										
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete										
	Schedule K. If "No," go to line 25a	24a		X							
b	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?										
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease										
	any tax-exempt bonds?	24c									
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d									
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit										
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X							
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and										
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete										
	Schedule L, Part I	25b		X							
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current										
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%										
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X							
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,										
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled										
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X							
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,										
	instructions for applicable filing thresholds, conditions, and exceptions):										
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If										
	"Yes," complete Schedule L, Part IV	28a		X							
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X							
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If										
	"Yes," complete Schedule L, Part IV	28c		X							
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X							
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation										
	contributions? If "Yes," complete Schedule M	30		X							
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X							
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete										
	Schedule N, Part II	32		X							
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations										
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X							
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		37								
	Part V, line 1	34	X								
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X							
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity										
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b									
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?										
	If "Yes," complete Schedule R, Part V, line 2	36		X							
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			v							
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X							
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v								
Par	Note: All Form 990 filers are required to complete Schedule O           ttv         Statements Regarding Other IRS Filings and Tax Compliance	38	Х	L							
ı al											
	Check if Schedule O contains a response or note to any line in this Part V										
4 -	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No							
		-									
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable <b>1b</b> 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming										
С	Die the organization comply with backup withouting fules for reportable payments to vehicles and reportable gaming										

(gambling) winnings to prize winners?

1c

Core	Knowl	ledge	Charter	School	
------	-------	-------	---------	--------	--

Form	990 (2022) Foundation 84-135	1344	Р	age <b>5</b>							
Par				<u>u</u>							
			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	)									
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b									
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X							
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O										
	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)?										
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							
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c									
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit										
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		<u> </u>							
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?			X 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							
	If "Yes," indicate the number of Forms 8282 filed during the year [7d]										
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f									
f											
-	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?										
8	<ul> <li>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</li> <li>Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the</li> </ul>										
0											
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	8									
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a									
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b									
10	Section 501(c)(7) organizations. Enter:										
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 10b										
11	Section 501(c)(12) organizations. Enter:										
а	Gross income from members or shareholders 11a										
b	Gross income from other sources. (Do not net amounts due or paid to other sources against										
	amounts due or received from them.)										
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a									
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	_									
13	Section 501(c)(29) qualified nonprofit health insurance issuers.										
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 13b	_									
С	Enter the amount of reserves on hand 13c										
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X X							
	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							
40	If "Yes," see the instructions and file Form 4720, Schedule N.	10		v							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X							
47	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	4-									
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17									
	If "Yes," complete Form 6069.										

Foundation 84-1354344 Page 6 Form 990 (2022) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes **1a** Enter the number of voting members of the governing body at the end of the tax year 1a 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 0. 4 **b** Enter the number of voting members included on line 1a, above, who are independent 1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? х 4 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: х a The governing body? 8a b Each committee with authority to act on behalf of the governing body? Х 8b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the х organization's mailing address? If "Yes." provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? х 10a 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 x **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? х 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Х 15a а Х 15b b Other officers or key employees of the organization 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 Х taxable entity during the year? 16a **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure None 17 List the states with which a copy of this Form 990 is required to be filed

18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available. Check all that apply.
	Own website Another's website 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 - 970-672-5823
	1725 Sharp Point Dr, Fort Collins, CO 80525

Check if Schedule O contains a respo	onse or note to	any	' line	in t	his F	Part	VII			
Section A. Officers, Directors, Trustees, Key	Employees, ar	nd H	lighe	est (	Com	npen	sat	ed Employees		
<ul> <li>1a Complete this table for all persons required to</li> <li>List all of the organization's current officers</li> <li>Enter -0- in columns (D), (E), and (F) if no compense</li> <li>List all of the organization's current key or</li> </ul>	s, directors, tru sation was paid	stee I.	es (w	heth	ner i	ndivi	idua	ls or organizations), reg	ardless of amount of c	
<ul> <li>List all of the organization's current key em</li> <li>List the organization's five current highest c</li> <li>who received reportable compensation (box 5 of 1</li> <li>\$100,000 from the organization and any related o</li> <li>List all of the organization's former officers</li> <li>reportable compensation from the organization an</li> <li>List all of the organization's former directo</li> <li>more than \$10,000 of reportable compensation from the order in which to list the order in the or</li></ul>	ompensated er Form W-2, box rganizations. , key employee nd any related o <b>rs or trustees</b> om the organiz	mplo 6 of es, a orga tha atio	f For nd h niza t rec	s (of m 1 ighe ition seive	ther 099- est c s. ed, ir	thar MIS omp	n an C, a bens cap	officer, director, trustee ind/or box 1 of Form 10 ated employees who re- bacity as a former direct	, or key employee) 99-NEC) of more than ceived more than \$100	,
X Check this box if neither the organization neither	or any related o	orga	niza	tion	com	npen	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per week	Position (do not check more tha box, unless person is b officer and a director/tr				than o s both	ı an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) Peter Kast	0.50									
President		Х		Х				0.	0.	0.
<pre>(2) Maureen Schaffer Secretary</pre>	0.50	х		x				0.	0.	0.
(3) Randy Everett	0.50									
Director		х						0.	Ο.	0.
(4) Lauren Van Maren	0.50									
Director		X						0.	0.	0.

Employees, and Independent Contractors

Core Knowledge Charter School Form 990 (2022) Foundation 84-1 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated

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Form	990 (2022) Core Know Foundatio		na	irt	er	· S	scn	.00		84-1	354	344	Pa	ge <b>8</b>
	t VII Section A. Officers, Directors, Trus		olov	<b>665</b>	and	1 Hi	ahea	st C	ompensated Employee		JJ <u></u> .	744	Га	ye U
(A) Name and title		(B) Average hours per week	ge Position (do not check more than one box, unless person is both an						(D) Reportable compensation from	<b>(E)</b> Reportable compensatio	ion amount		timate nount c	
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	SC/ 1099-NEC)		s compen SC/ from		on ed
			-											
											_			
С	Subtotal Total from continuation sheets to Part VI Total (add lines 1b and 1c)	I, Section A							0.		0. 0. 0.			0. 0. 0.
2	Total number of individuals (including but n compensation from the organization									000 of reportable				0
3	Did the organization list any former officer,	-			•						[		Yes	No
4	line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s For any individual listed on line 1a, is the su and related organizations greater than \$150	um of reportabl	le co	mpe	ensa	tion	and	oth	ner compensation from t	he organization		3		x x
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes," com	accrue comper	nsati	on fi	rom	any	unre	elate	ed organization or individ	lual for services		5		x
	tion B. Independent Contractors Complete this table for your five highest co	monoportod inc		ndo	nt or	ontre	acto	ro ti	act reactived more than 4	100 000 of com	opost	ion fro		
1	the organization. Report compensation for	-	-								Jensai		111	
	(A) Name and business	address	N	ONE	3				(B) Description of s	ervices	С	(C omper	;) nsation	
2	Total number of independent contractors (i		ot lir	nited	d to	thos (		ted	above) who received mo	ore than				

 Core Knowledge Charter School

 Form 990 (2022)
 Foundation

 Part VIII
 Statement of Revenue

			Check if Schedule O contains a response	or note to any lin	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C)	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	b d e f	Federated campaigns1aMembership dues1bFundraising events1cRelated organizations1dGovernment grants (contributions)1eAll other contributions, gifts, grants, and similar amounts not included above1fNoncash contributions included in lines 1a-1f1g \$	37,642.	37,642.			
a C		n	Total. Add lines 1a-1f	Business Code	57,042.			
Program Service Revenue	2	b c d e						
Ъ			All other program service revenue					
	3 4	g	Total. Add lines 2a-2f Investment income (including dividends, inter other similar amounts) Income from investment of tax-exempt bond	rest, and proceeds	3,886.			3,886.
		b	Royalties     (i) Real       Gross rents     6a       Less: rental expenses     6b       Rental income or (loss)     6c	(ii) Personal				
е	7	a	Net rental income or (loss)         Gross amount from sales of assets other than inventory         Ta         Less: cost or other basis and sales expenses         Tb					
er Revenue		с	Gain or (loss) 7c					
'Re		d	Net gain or (loss)					
Other			Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8. Less: direct expenses 8					
			Net income or (loss) from fundraising events					
			Gross income from gaming activities. SeePart IV, line 19Less: direct expenses9					
	10	c a	Net income or (loss) from gaming activities         Gross sales of inventory, less returns         and allowances					
			Less: cost of goods sold 10					
		C	Net income or (loss) from sales of inventory	Business Code				
snc	11	а						
Miscellaneous Revenue		b						
cella		с						
Misc			All other revenue					
			Total. Add lines 11a-11d		41 500	0		2.000
	12		Total revenue. See instructions		41,528.	0.	0.	3,886.

# Core Knowledge Charter School Form 990 (2022) Foundation Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons			nplete column (A).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	<b>(C)</b> Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (nonemployees):				
a	Management				
b	Legal				
с	Accounting				
d	, , , , , , , , , , , , , , , , , , ,				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
40	column (A), amount, list line 11g expenses on Sch 0.)				
12	Advertising and promotion				
13	Office expenses				
14 15	Information technology				
15 16	Royalties				
17	Occupancy Travel				
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
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),				
а	amount, list line 24e expenses on Schedule 0.) Contribution Expense	224,676.	224,676.		
d h	Other Expenses	31,549.	31,549.		
с С	Instructional Supplies	3,485.	3,485.		
с А	Purchased Services	132.	132.		
u 6	All other expenses	1021			
25	Total functional expenses. Add lines 1 through 24e	259,842.	259,842.	0.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here fillowing SOP 98-2 (ASC 958-720)				

Part >		2022) Foundation Balance Sheet		04-1	354344 Page 1
art A					
		Check if Schedule O contains a response or note to any line in this Part X		<u> </u>	(B)
			Beginning of year		End of year
1	1	Cash - non-interest-bearing	555,741.	1	337,263
	2	Savings and temporary cash investments	44,556.	2	44,996
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	5,022.	4	4,746
5		Loans and other receivables from any current or former officer, director,	-,		
	0	trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
6	6	Loans and other receivables from other disgualified persons (as defined			
	0	4050(1)		6	
ω   7	7	Notes and loans receivable, net		7	
Assets	_	Inventories for sale or use		8	
ASS   0				9	
		Land, buildings, and equipment: cost or other			
	Ju	basis. Complete Part VI of Schedule D 10a			
	h	Less: accumulated depreciation 10b		10c	
11		Investments - publicly traded securities		11	
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)	605,319.	16	387,005
17		Accounts payable and accrued expenses	00070100	17	5077005
18		Grants payable		18	
19				19	
20		Deferred revenue		20	
21		Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		21	
0		Loans and other payables to any current or former officer, director,			
	-	trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		22	
	3	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		27	
1~	0	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
26	6	Total liabilities. Add lines 17 through 25	0.	26	0
	<u> </u>	Organizations that follow FASB ASC 958, check here		20	
S		and complete lines 27, 28, 32, and 33.			
Ŭ 18   27	7	Net assets without donor restrictions	605,319.	27	387,005
		Net assets with donor restrictions	,	28	
	-	Organizations that do not follow FASB ASC 958, check here			
		and complete lines 29 through 33.			
29	9	Capital stock or trust principal, or current funds		29	
8 30 8 30		Paid-in or capital surplus, or land, building, or equipment fund		30	
SS 31		Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances 85 85 95 95 96 96 97 97 97 97 97 97 97 97 97 97 97 97 97		Total net assets or fund balances	605,319.	32	387,005
z   "	3	Total liabilities and net assets/fund balances	605,319.	33	387,005

Form	Core Knowledge Charter School 990 (2022) Foundation	84-135	4344	Pad	<sub>ge</sub> 12		
	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	<u>41</u> 259		28.		
2							
3	Revenue less expenses. Subtract line 2 from line 1	3	-218	<u> </u>			
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	605	i <b>,</b> 31	19.		
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	387	,0	05.		
Pa	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				X		
				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	Ο.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
	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	X	<u> </u>		
	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 X 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						
	review, or compilation of its financial statements and selection of an independent accountant?		_ <b>2</b> c	Х	<u> </u>		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule 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		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	200	L		

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.						OMB No. 1545-0047	
				-	Form990 for instruction		latest inf	ormation.	Employer	Inspection
nan		he organizatio		dation	Charter Scho	100				identification number 4-1354344
Pa	rt I	Reason f			All organizations must c	omplete th	nis part.) S	ee instruction		<u> </u>
The	organ				For lines 1 through 12, cl					
1			-		n of churches described		-	I)(A)(i).		
2				-	Attach Schedule E (Form					
3					nization described in se		(b)(1)(A)(ii	i).		
4		-	-		njunction with a hospital			-	)(iii). Enter	the hospital's name,
		city, and state	e:							
5		An organizatio	on operated fo	or the benefit of a col	lege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in
		section 170(	<b>b)(1)(A)(iv).</b> (C	Complete Part II.)						
6		A federal, stat	te, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).		
7	X	An organization	on that norma	lly receives a substa	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general p	oublic described in
		-		omplete Part II.)						
8		-			1)(A)(vi). (Complete Par	-				
9		-	-		in section 170(b)(1)(A)(		-		-	-
			or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
10		university:	an that narma		than 22 1/20/ of its own	art from a	ontribution	o momborob	in face and	l areas ressints from
10					than 33 1/3% of its supp t to certain exceptions; a					
					(less section 511 tax) fro					
				mplete Part III.)			soos acqui		Janization a	
11	$\square$				vely to test for public sat	fetv. See	section 50	)9(a)(4).		
12	$\square$	•	-	-	vely for the benefit of, to	•			rrv out the	purposes of one or
		•	-	-	d in section 509(a)(1) o	-			•	
				-	f supporting organizatior					
а		<b>Type I.</b> A su	upporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), t	pically by	giving
		the support	ed organizatio	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or truste	es of the su	pporting
		organization	n. <b>You must c</b>	complete Part IV, Se	ctions A and B.					
b		<b>Type II.</b> A s	upporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organizatio	n(s), by hav	ing
			-		anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	oorted
		¬ ~	. ,	t complete Part IV,						
С			-	• • • •	g organization operated				ly integrate	d with,
			•	.,.	. You must complete I			-	4 - 4	
d		_ ,		•	orting organization oper				0	
					ation generally must sat nplete Part IV, Sections				i all allentiv	eness
е		-			vritten determination from				II Type III	
Ū		_	0		nally integrated supportin			19001, 1900	n, rype n	
f	Ente	er the number of			, , , , , , , , , , , , , , , , , , , ,					
g	Pro	/ide the followi	ng informatior	about the supporte						
	(	i) Name of suppo		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	nization listed ng document?	(v) Amount of	-	(vi) Amount of other
		organization			above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
										<u> </u>
_										
Tota	al									

Core	Knowledge	Charter	School
Found	lation		

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

fails to qualify under the tests listed below, please complete Part III.)

Schedule A (Form 990) 2022

Part II

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	234,967.	304,031.	407,425.	246,837.	37,642.	1230902.
2	Tax revenues levied for the organ-						
	ization'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	234,967.	304,031.	407,425.	246,837.	37,642.	1230902.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						1230902.
	ction B. Total Support				•		
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	234,967.	304,031.	407,425.	246,837.	37,642.	1230902.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	11.	1,273.	2,295.	108.	3,886.	7,573.
9	Net income from unrelated business			-		-	
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	11,925.	10,035.	12,948.			34,908.
11	<b>Total support.</b> Add lines 7 through 10						1273383.
	Gross receipts from related activities,	etc. (see instructio	ns)			12	
	First 5 years. If the Form 990 is for th			ourth. or fifth tax v	vear as a section 5	01(c)(3)	
	organization, check this box and <b>stop</b>						
Sec	ction C. Computation of Publi						
	Public support percentage for 2022 (I			olumn (f))		14	96.66 %
	Public support percentage from 2021					15	96.00 %
	33 1/3% support test - 2022. If the c					ore, check this bo	( and
	stop here. The organization qualifies						V
b	33 1/3% support test - 2021. If the c	organization did no	t check a box on l				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not o	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	-	5	
b	10% -facts-and-circumstances test	•	•		•		
	more, and if the organization meets th	•					
	organization meets the facts-and-circu						
18	Private foundation. If the organizatio						

Schedule A (Form 990) 2022

Sched	ule A (Form 990) 2022 F	oundation	edge Char			84-135	4344 Page 3
Part		rganizations	Described in S	Section 509(a)	(2)		
	(Complete only if you checked	the box on line 10	) of Part I or if the	organization failed	to qualify under P	art II. If the organiz	ation fails to
<u> </u>	qualify under the tests listed b	elow, please comp	olete Part II.)				
Sect	ion A. Public Support		1		1	1	1
Calend	ar year (or fiscal year beginning in)	<b>(a)</b> 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	ifts, grants, contributions, and nembership fees received. (Do not						
	nclude any "unusual grants.")						
n fo a	aross receipts from admissions, herchandise sold or services per- ormed, or facilities furnished in ny activity that is related to the						
	rganization's tax-exempt purpose						
	ross receipts from activities that						
	re not an unrelated trade or bus-						
	ness under section 513						
iz	ax revenues levied for the organ- ration's benefit and either paid to r expended on its behalf						
	he value of services or facilities						
fu	urnished by a governmental unit to ne organization without charge						
6 T	otal. Add lines 1 through 5						
<b>7</b> a A	mounts included on lines 1, 2, and						
3	received from disqualified persons						
fr	mounts included on lines 2 and 3 received om other than disqualified persons that kceed the greater of \$5,000 or 1% of the mount on line 13 for the year						
сA	dd lines 7a and 7b						
8 P	Public support. (Subtract line 7c from line 6.)						
Sect	ion B. Total Support						
Calend	ar year (or fiscal year beginning in)	<b>(a)</b> 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>9</b> A	mounts from line 6						
<b>10a</b> G d s	iross income from interest, ividends, payments received on ecurities loans, rents, royalties, nd income from similar sources						
	nrelated business taxable income						
	ess section 511 taxes) from businesses						
`	cquired after June 30, 1975						
11 N a	dd lines 10a and 10b let income from unrelated business ctivities not included on line 10b, /hether or not the business is						
<b>12</b> C	egularly carried on Other income. Do not include gain r loss from the sale of capital						
	ssets (Explain in Part VI.)						
	otal support. (Add lines 9, 10c, 11, and 12.)						
	irst 5 years. If the Form 990 is for th	-			•		
	heck this box and stop here						
	ion C. Computation of Publi					1 1	
	Public support percentage for 2022 (I					15	%
	Public support percentage from 2021 ion D. Computation of Invest					16	%
	•			no 19 polymer (*)		17	07
	nvestment income percentage for 20					17	%
	nvestment income percentage from 2						<u>%</u>
	<b>3 1/3% support tests - 2022.</b> If the						
	hore than 33 1/3%, check this box ar <b>3 1/3% support tests - 2021.</b> If the						
li	ne 18 is not more than 33 1/3%, che	ck this box and <b>s</b> t	<b>top here.</b> The orga	nization qualifies a	as a publicly suppo	orted organization	
20 P	rivate foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	

Yes

No

#### Schedule A (Form 990) 2022 Four 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 box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI.**
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.* 
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

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2

No

Ра	πιν	Supporting Organizations (continued)			
				Yes	No
11	Has t	he organization accepted a gift or contribution from any of the following persons?			
а	A per	son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c b	elow, the governing body of a supported organization?	11a		
b	A fam	nily member of a person described on line 11a above?	11b		
с	A 35%	% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		in Part VI.	11c		
Sec	tion I	B. Type I Supporting Organizations			
				Yes	No
1	more direct <i>effect</i>	ne governing body, members of the governing body, officers acting in their official capacity, or membership of one or supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, tors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> <b>Part VI</b> <i>how the supported organization(s)</i> tively operated, supervised, or controlled the organization's activities. <i>If the organization had more than one supported</i> <i>nization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the</i>			
	•	orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		

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.	
Section C. Ty	pe II Supporting Organizations	

chedule A (Form 990) 2022

			Yes
I	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	1

Section D	All Type	III Suppor	rting Organiz	ations

			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 on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the	e Integral Part Test during the year	(see instructions).
•			

- **a** The organization satisfied the Activities Test. *Complete* **line 2** *below.*
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c 🗌	The organization supported a get	overnmental entity. Describe in	Part VI how you supported a	governmental entity (see instruction <u>s).</u>
-----	----------------------------------	---------------------------------	-----------------------------	---

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

2a

Yes No

	Core Knowledge Charter S	choo	1	
Sche	dule A (Form 990) 2022 Foundation			84-1354344 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust on	Nov. 20, 1970 ( explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complete	Sections A through E.	-
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally	integrate	ed Type III supporting org	anization (see

instructions).

Schedule A (Form 990) 2022

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Sche	dule A (Form 990) 2022 Foundation			8	4-1354344 Page 7
Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations <sub>(continu</sub>	ied)	
Secti	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exer	npt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations		3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 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) Underdistribution Pre-2022	IS	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	Foundation	Charter School	84-1354344 Page 8
Part VI	Part IV, Section A, lines 1, line 1; Part IV, Section D, li	2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9l ines 2 and 3; Part IV, Section	o, 9c, 11a, 11b, and 11c; Part I\ E, lines 1c, 2a, 2b, 3a, and 3b; I	; Part II, line 17a or 17b; Part III, line 12; /, Section B, lines 1 and 2; Part IV, Section C, Part V, line 1; Part V, Section B, line 1e; Part V, part for any additional information.

SCHEDULE O	OMB No. 1545-0047						
(Form 990)	2022						
Department of the Treasury Internal Revenue Service	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.						
Name of the organization	Core Knowledge Charter School Foundation		identification number				

#### Form 990, Part VI, Section B, line 11b:

The Form 990 Is prepared by the organizations's Independent accounting firm

based on information provided by managment. No review by the board occurs

before filing.

Form 990, Part VI, Section C, Line 19:

No documents are available to the public.

Form 990, Part VI, Section C, Line 19

The process for overseeing and selecting an independent accountant has

not changed from the prior year.

Form 990, Part VI, Section A, Line 1:

The Board of Directors, By resolution adopted by a majority of the

number of directors elected and qualified at the time of the

resolution, may designate two or more directors to constitute an

executive commitee, which shall have and may exercise all of the

authority of the board of directors or such lesser authority as may be

set forth in said resolution. No such delegation of authority shall

operate to relive the board of directors or any member of the board

from any responsibility imposed by law.

SCHEDULE R (Form 990) Department of the Treasur Internal Revenue Service		Related Organization plete if the organization answered Atte Go to www.irs.gov/Form990	'Yes" on Form 990, Part IV, liı ach to Form 990.	ne 33, 34, 35b, 36,	or 37.			OMB No. 1545-0047 2022 Open to Public Inspection			
Name of the organi	<sub>zation</sub> Core Knowled Foundation	ge Charter School					Employer identification r $84-1354344$				
Part I Identific	ation of Disregarded Entities. Com	plete if the organization answered "Ye	s" on Form 990, Part IV, line 3	3.							
Name, a	(a) ddress, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) Total inco	(e) End-of-year a	Issets		<b>(f)</b> controlling entity	9		
Identific	ation of Related Tax-Exempt Oroar	nizations. Complete if the organizatio	n answered "Yes" on Form 990	). Part IV. line 34. k	pecause it had one o	r more relat	ted tax-exe	empt			
Part II organiza	tions during the tax year.	-		1	,						
	(a) lame, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	Direct co	<b>(f)</b> Direct controlling entity		<b>g)</b> 512(b)(13) rolled tity?		
Liberty Common	School - 84-1404585							Yes	No		
1725 Sharp Poir Fort Collins, C		School	Colorado	501(c)(3)	Line 2				x		
		—									
For Paperwork Re	duction Act Notice, see the Instruct	tions for Form 990.				So	chedule R	l (Form 99	90) 2022		

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Schedule R (Form 990) 2022 Foundation

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<b>D</b> · · · · · ·	Identification of Related Organizations Taxable as a Partnership.	Complete if the ordanization answered	"Yes" on ⊢orm 990.	Part IV. line 34.	. because it had one or	more related
				,	,	
	organizations treated as a partnership during the tax year.					

		-																	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)								
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	come Share of total share of ated, income end-of-year allocations? 20 of S		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag partn	<sup>I or</sup> Percentage <sup>ing</sup> ownership										
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	lo								
	1																		
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	<b>(f)</b> Share of total income	<b>(g)</b> Share of end-of-year assets	<b>(h)</b> Percentage ownership	Sec 512(I conti ent	(i) ction (b)(13) trolled tity?
		country)							No
								──	──
								<u> </u>	<u> </u>
									<u> </u>
									<u> </u>
	1								

Schedule R (Form 990) 2022 Foundation

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		Х	
	Gift, grant, or capital contribution to related organization(s)	1b		Х	
	Gift, grant, or capital contribution from related organization(s)	1c		Х	
	Loans or loan guarantees to or for related organization(s)	1d		Х	
	Loans or loan guarantees by related organization(s)	1e		Х	
f	Dividends from related organization(s)	1f		X	
g		1g		Х	
h	Purchase of assets from related organization(s)	1h		X	
i	Exchange of assets with related organization(s)	1i		X	
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		Х	
	Performance of services or membership or fundraising solicitations for related organization(s)	11		X	
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		Х	
	Sharing of paid employees with related organization(s)	10		X	
р	Reimbursement paid to related organization(s) for expenses	1p		Х	
q	Reimbursement paid by related organization(s) for expenses	1q		X	
r	Other transfer of cash or property to related organization(s)	1r		Х	
S	Other transfer of cash or property from related organization(s)	1s		Х	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.				

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) Liberty Common School	В	224,676.	Fair Market Value
<u>(2)</u>			
<u>(3)</u>			
<u>(4)</u>			
(5)			
_(6)			

Schedule R (Form 990) 2022 Foundation

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

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

(a)	(b)	(c)	(d)	(e) Are all	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners s 501(c)(3 orgs.?	total	Share of end-of-year assets	Disprop tionat allocatio		General of managing partner?	r Percentage ownership
			,							
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	-									
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Schedule R (Form 990) 2022

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Schedule	P	(Form	aan	2022	
Schedule	н	(FOIIII	990)	2022	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.