Form	990-EZ

Department of the Treasury Internal Revenue Service

Short Form

OMB No. 1545-0047

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/Form990EZ for instructions and the latest information.

Open to Public Inspection

A	For the	2023 calenda	ar year, or tax year beginning 01/01/2023 and ending	12	/31/2023				
B	Check if ap	oplicable:	C Name of organization	D Empl	oyer iden	tification number			
	Address cl	hange		46-4698607					
	Name cha	nge	E Telep	E Telephone number					
	Initial retur			510-541-3119					
	Final returi Amended	n/terminated	F Grou	F Group Exemption					
	Application		New York, NY 10025-4784	Num	•				
		ing Method:	Cash Accrual Other (specify):	Check	if the c	organization is not			
		knconsul				h Schedule B			
			eck only one) – 🗹 501(c)(3) 🗌 501(c) () (insert no.) 🗌 4947(a)(1) or 🗌 527	(Form 9	90).				
			Corporation □ Trust □ Association □ Other:						
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if tota	al assets					
			500,000 or more, file Form 990 instead of Form 990-EZ		. \$	73,666			
Ρ	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the	instruc	tions f				
			the organization used Schedule O to respond to any question in this Part						
	1		ons, gifts, grants, and similar amounts received		1	0			
	2		ervice revenue including government fees and contracts		2	34,500			
	3	•	ip dues and assessments		3	39,166			
	4	Investment			4	0			
	5a		ount from sale of assets other than inventory	0	-				
	b		or other basis and sales expenses	0					
	c		ss) from sale of assets other than inventory (subtract line 5b from line 5a)		5c	0			
	6		d fundraising events:						
	а		ome from gaming (attach Schedule G if greater than						
Revenue		\$15,000) .		0					
vel	b		me from fundraising events (not including <u></u> of contribution	ons					
Ве			aising events reported on line 1) (attach Schedule G if the						
			h gross income and contributions exceeds \$15,000) 6b	0					
			t expenses from gaming and fundraising events 6c	0					
	d		e or (loss) from gaming and fundraising events (add lines 6a and 6b and su	btract					
		,		• •	6d	0			
	7a		s of inventory, less returns and allowances	0					
	b		of goods sold	0					
	С		it or (loss) from sales of inventory (subtract line 7b from line 7a)		7c	0			
	8	Other reve	nue (describe in Schedule O)	<u> </u>	8	0			
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	73,666			
	10		I similar amounts paid (list in Schedule O)		10	15,310			
	11		aid to or for members		11	0			
ses	12		ther compensation, and employee benefits		12	35,916			
Expenses	13		al fees and other payments to independent contractors		13	3,905			
ğ	14		y, rent, utilities, and maintenance		14	0			
ш	15		ublications, postage, and shipping		15	34			
	16		enses (describe in Schedule O) .See Schedule O, Statement 2		16	10,232			
	17	Total expe	enses. Add lines 10 through 16		17	65,397			
ts	18		(deficit) for the year (subtract line 17 from line 9)		18	8,269			
ŝŝe	19		or fund balances at beginning of year (from line 27, column (A)) (must agre						
As		•	r figure reported on prior year's return)		19	78,139			
Net Assets	20		iges in net assets or fund balances (explain in Schedule O)		20	0			
	21		or fund balances at end of year. Combine lines 18 through 20		21	86,408			
For	Paperv	work Reduct	ion Act Notice, see the separate instructions. Cat. No. 10642			Form 990-EZ (2023)			

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Par		,				
	Check if the organization used Schedule	O to respond to ar			·	
00	Cash asvings, and investments		_	(A) Beginning of year	00	(B) End of year
22 23	Cash, savings, and investments		· · · · · ·	78,139	22 23	86,408
23 24	Other assets (describe in Schedule O)				23 24	0
25			· · · · · · ·	78,139		86.408
26	Total liabilities (describe in Schedule O)				26	00,400
27	Net assets or fund balances (line 27 of column			78,139	-	86,408
Par	Statement of Program Service Accom	plishments (see th	e instructions for P			, , , , , , , , , , , , , , , , , , ,
	Check if the organization used Schedule	O to respond to an	ny question in this F	Part III . 🗌		Expenses
What	is the organization's primary exempt purpose?	See Schedule O, Sta	itement 3			equired for section 1(c)(3) and 501(c)(4)
as m	ribe the organization's program service accomplisie leasured by expenses. In a clear and concise mons benefited, and other relevant information for ear	anner, describe the			· ·	janizations; optional for ners.)
28	Non-profit consulting, research and other scholarly			ents intended		
	to advance more inclusive and equitable scholarship	o within higher educa	tion.			
	(Grants \$ 0) If this amount	includes foreign gra	Ints, check here .		28	a 0
29		includes foreign gra	ints, check here .	· · · · []	200	
20						
	(Grants \$) If this amount	includes foreign gra	ints, check here .	🗌	29	a
30						
			ints, check here .		30	a
31	Other program services (describe in Schedule O)	<u> </u>		<u>· · · · ·</u>		
20	(Grants \$ 0) If this amount Total program service expenses (add lines 28a t	Includes foreign gra	ints, check here .	🗌	31a 32	
Pari						-
T an	Check if the organization used Schedule					
			(c) Reportable			
	(a) Name and title	(b) Average hours per week devoted to position	compensation (Forms W-2/1099-MISC/ 1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employ benefit plans, and deferred compensatio	· .	e) Estimated amount of other compensation
	Thistlethwaite	1.00	0		0	0
	d Chair	40.00	40.000		_	
	ecca Kennison utive Director	10.00	12,000		0	0
	yi Bali	20.00	22,000		0	0
	etary-Treasurer	20.00	22,000		۲,	v
	stopher Long	1.00	0		0	0
Direc						
Robe	ert Hilliker	1.00	0		0	0
Direc	stor					
		-				
		-				
		1				
		1				
		1				

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Part	V Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	00		
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed	33		~
54	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
	change on Schedule O. See instructions	34		~
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	05.		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets	35c		~
00	during the year? If "Yes," complete applicable parts of Schedule N	36		~
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 0			•
b	Did the organization file Form 1120-POL for this year?	37b		~
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were			
_	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		~
	If "Yes," complete Schedule L, Part II, and enter the total amount involved	-		
39 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:			
	section 4911:0; section 4912:0; section 4955:0			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	401-		
с	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	40b		V
U	on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line			
	40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40		
41	List the states with which a copy of this return is filed: NY	40e		~
42a		510-54	1-3110	 a
		10025		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		~
	If "Yes," enter the name of the foreign country:			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
с	At any time during the calendar year, did the organization maintain an office outside the United States?	42c		~
-	If "Yes," enter the name of the foreign country:			-
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here			
	and enter the amount of tax-exempt interest received or accrued during the tax year			
440	Did the exercitive maintain any depart advised funde during the year? If "Vee" Form 000 must be		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		V
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			
	completed instead of Form 990-EZ	44b		~
С	Did the organization receive any payments for indoor tanning services during the year?	44c		~
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			
45a	explanation in Schedule O	44d 45a		~
45a b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	тја		•
~	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			
	Form 990-EZ. See instructions	45b		~

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		l	Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition			
	to candidates for public office? If "Yes," complete Schedule C, Part I	46		~

Part VI	Section 501(c)(3) Organizations Only
	All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines
	50 and 51.

	Check if the organization used Schedule O to respond to any question in this Part VI			
			Yes	No
47	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	47		~
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		~
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		~
b	If "Yes," was the related organization a section 527 organization?	49b		

50	Complete this table for the organization's five highest compensated employees (other than officers, directors, tru	ustees, a	and key
	employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter	er "None	."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		
d Total number of other independent contractors each receiving		

Total number of other independent contractors each receiving over \$100,000 d

52	Did the	organization	com	plete	So	chedule	A?	Ν	ote:	All	sec	tion	501	(c)(3)	or	gani	izat	ions	m	ust	atta	ach	а
	complete	ed Schedule A																					~

· · · · · 🗹 Yes 🗌 No 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.

		, , , , , , , , , , , , , , , , , , , ,	-					
	blen ule	9/10/2024						
Sign	Signature of officer				Date			
Here	Rebecca Kennison, Executive Director							
	Type or print name and title							
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date		Check if if self-employed	PTIN		
Use Only	Firm's name			Firm's EIN				
				Phone no.				
May the IRS	discuss this return with the preparer s	shown above? See instructions			[🗌 Yes 🗌 No		

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047 900**0**

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

<u> 2</u> 0 2 3
Open to Public
Inspection

Name of the organization **KN CONSULTANTS**

Employer identification number

٦	NSIII	TΔ	NTS	I TI

46-4698607 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I

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

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 2
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state:
- An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II.)
- A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross 10 receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12a,
 - **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, С its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V.
 - Check this box if the organization received a written determination from the IRS that it is a Type I. Type II. Type III. е functionally integrated, or Type III non-functionally integrated supporting organization.

. .

- Enter the number of supported organizations f
- Provide the following information about the supported organization(s)

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

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to gualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (d) 2022 (c) 2021 (e) 2023 (f) Total Gifts, grants, contributions, and 1 membership fees received. (Do not include any "unusual grants.") . . Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities 3 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 . . . 4 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) **Public support.** Subtract line 5 from line 4 6 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 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.) **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) % 14 14 15 15 % 331/3% support test-2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a 331/3% support test-2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check h 17a 10%-facts-and-circumstances test-2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported \square b 10%-facts-and-circumstances test-2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18 instructions

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

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

Secti	on A. Public Support			,1	I	/	
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.")	65,300	57,868	107,063	92,718	73,666	396,615
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 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	65,300	57,868	107,063	92,718	73,666	396,615
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b						396,615
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	65,300	57,868	107,063	92,718	73,666	396,615
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 11	Add lines 10a and 10b 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.)	65,300	57,868	107,063	92,718	73,666	396,615
14	organization, check this box and stop here						
	on C. Computation of Public Support	•					
15	Public support percentage for 2023 (line						100 %
16 Socti	Public support percentage from 2022 Scl					16	100 %
	on D. Computation of Investment In Investment income percentage for 2023 (v line 12 colu	mn (f))	17	0/
17 18	Investment income percentage for 2023 (Investment income percentage from 2023			•	())		0 %
18 19a	33 ¹ / ₃ % support tests – 2023. If the organ						-
	17 is not more than $33^{1/3}$ %, check this box						
b	331/3% support tests-2022. If the organize	zation did not c	heck a box on	line 14 or line 1	9a, and line 16	is more than 3	3 ¹ /3%, and
	line 18 is not more than $33^{1}/_{3}\%$, check this	-	-	-			
20	Private foundation. If the organization d	id not check a	box on line 14,	19a, or 19b, c	heck this box		
						Schedule A	(Form 990) 2023

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.)

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

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).

Section D. All Type III Supporting Organizations

Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 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.

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of 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 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.
- 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.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes No

1

2

1

3

2a

2b

3a

3b

Yes No

Yes No

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			ions 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-function	allv i	ntegrated Type III suppo	rting organization

Schedule A (Form 990) 2023

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

Schedule A (Form 990) 2023

Schedu	le A (Form 990) 2023			Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	
Sect	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish a Amounts paid to perform activity that directly furthers exe		1	
2				
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	inizations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required-	1	<i>VI</i>) 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 whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2023 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10)
Sect	ion 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			
а	From 2018			
b	From 2019			
С	From 2020			
d	From 2021			
e	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
а	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, <i>explain in Part VI</i> . See instructions.			
7	Excess distributions carryover to 2024. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
е	Excess from 2023			

Schedule A (Form 990) 2023

Page 8

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

Schedule A, Part II, Line 10 - Program revenue included consulting, research, and events management on behalf of a project funded by the Andrew W. Mellon Foundation \$28,500.00 (190 hours at \$150/hr), workshops as part of that Mellon project (\$6,000), and memberships for the Council of Editors of Learned Journals (\$ 37,993.15, of which only \$ 22,683.25 was genuinely revenue, as explained below) and memberships for the scholarly journal Kairos (§ 1,172.43) (total § 73,665.58). Professional fees were paid for professional memberships and conference registrations (\$ 70), a contractor hired for open education resource work (\$ 1,904.99), a contractor hired to work on a research project (\$ 2000), reimbursement of incorrect payment as explained below (\$ 15,309.90), and fees paid to membership management and financial transaction portals (\$ 959.28) and to ADP for payroll (\$ 1,935.39) (total \$ 22,179.56). As also explained for Schedule A, Part I, line 10, but repeated here for clarity, Johns Hopkins University Press mistakenly paid us a total of \$ 15,309.90 (\$ 2,477.25 on January 12, \$7,355.85 on February 3, \$5,476.80 on March 15), all of which was reimbursed to the Press on May 24. These amounts are reported as revenue (as "memberships") and as expenses (as "grants and similar expenses"), although they were truly neither.

SCHEDULE O (Form 990)

Department of the Treasury

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.



Name of the organization Employer identification num KN CONSULTANTS LTD 46-4698607 57.355.85 on February 3.15.476.80 on March 15), all of which was reimbursed in one lump sum to .HUP on May 24, 2023. These am are reported as revenue (as part of "memberships") and as expenses (as "grants and similar expenses"), although they were truly r 9.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.		Inspectio	Go to www.irs.gov/Form990 for the latest information.	Internal Revenue Service
Form 990-EZ, Part I, Line 10 - Johns Hopkins University Press mistakenly paid us a total of \$ 15,309.90 (\$ 2,477.25 on January 12, 7,355.85 on February 3, \$ 5,476.80 on March 15), all of which was reimbursed in one lump sum to JHUP on May 24, 2023. These am	nber	Employer identification number		lame of the organization
7,355.85 on February 3, \$ 5,476.80 on March 15), all of which was reimbursed in one lump sum to JHUP on May 24, 2023. These am		46-4698607	D	IN CONSULTANTS LT
		77.25 on January 12,	ne 10 - Johns Hopkins University Press mistakenly paid us a total of \$ 15,309.90 (\$ 2	orm 990-EZ, Part I, Lir
	nounts			

Schedule O, Statement 1

Form: Form 990-EZ (2023)

Page: 1

Reasonable Cause Explanations

EIN: 46-4698607

Header Section

Explanation

Late filing until 11/15/2024 was requested using Form 8868, filed with the IRS on 5/8/2024 and accepted by the IRS on that same day.

Schedule O, Statement 2	KN CONSULTANTS LTD
Form: Form 990-EZ (2023)	EIN: 46-4698607
Page: 1	Part I, Line 16
Other Expenses Structure	d Explanation
Description	Amount
Administration	1,539
Equipment	3,281
Governmental registration fees	70
Subscriptions	130
Travel and entertainment	2,247
Vendor fees	2,895
Memberships	70
Total:	10,232

Form: Form 990-EZ (2023)

Page: 2

Primary Exempt Purpose

KN CONSULTANTS LTD

EIN: 46-4698607

Part III

Primary Exempt Purpose

Working with academic institutions and related scholarly organizations to promote efficient infrastructure for information dissemination to disadvantaged populations.