

February 21, 2024 - 10:00 A.M.

Zoom Meeting

*Join via Zoom – Meeting ID: 338 034 9468

[Zoom Link](#)

*Dial In via Phone – Meeting ID: 338 034 9468

Phone: +1 646-558-8656

Finance Committee Meeting

Agenda

I. Welcome and Introductions Barclay Harless, Chair

II. Public Comment

Members of the public may raise their virtual hand during the Public Comment portion of the meeting. Members of the public who do so will be acknowledged by the Chair and provided up to three minutes to make public comment.

III. Roll Call

IV. Action/Discussion Items

1. Approval of minutes – December 13, 2023 Finance Committee Meeting Page 1
2. Approval of Budget Modification III Page 5
3. Approval of 2022 IRS Form 990 Page 9

V. Information Items

1. December 31, 2023 Financial Statements
 - a. Statement of Activities: Current Year vs. Prior Year Page 50
 - b. Statement of Activities: Current Year vs. Budget Page 53
 - c. Cost Allocation/Expenditure Report for PE 12/31/2023 Page 56
 - d. Pooled Cost Report 12/31/2023 Page 57
 - e. Grant Status Report 12/31/2023 Page 58

VI. Other Administrative Matters

(Items of urgency not meeting the seven-day guideline for review.)

VII. Open Discussion

VIII. Adjournment

Next Finance Committee Meeting – April 24, 2024 (10:00 am - 11:00am)

**All parties are advised that if you decide to appeal any decision made by the Board with respect to any matter considered at the meeting or hearing, you will need a record of the proceedings, and that, for such purpose, you may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.*

**If you have a disability and need an accommodation in order to participate in this meeting, please contact the Executive Assistant at 727-608-2551 or admin@careersourcepinellas.com at least two business days in advance of the meeting.*



ACTION ITEM 1

Approval of Minutes

In accordance with Article VII, Section 1(H), of the approved WorkNet Pinellas By-Laws: Minutes shall be kept of all Board and Committee meetings. Minutes shall be reviewed and approved at the next CareerSource Pinellas Board or Committee meeting as appropriate.

The official minutes of meetings of the Board and Committees of the Board are public record and shall be open to inspection by the public. They shall be kept on file by the Board Secretary at the administrative office of CareerSource Pinellas as the record of the official actions of the Board of Directors.

The draft minutes from the December 13, 2023, Finance Committee meeting have been prepared and are enclosed.

RECOMMENDATION

Approval of the draft minutes, to include any amendments necessary.

CareerSource Pinellas Finance Committee Meeting Minutes

Date: December 13, 2023 – 10:00 A.M.

Location: Hybrid – 13805 58th St. N., 2-316, Clearwater, FL 33760/Zoom

Call to Order

The Committee Chair, Barclay Harless, called the meeting to order at 10:00 am. There was a quorum present with the following members participating.

Committee Members in attendance

Barclay Harless, Dr. Rebecca Sarlo, David Fetkenher, Scott Thomas

Committee Members not in attendance

Esther Matthews, Jack Geller

Staff Present

Steven Meier (in-person), David Zirilli (in-person), Leah Geis (in-person), Jay Burkey (Zoom), Jason Druding (Zoom)

Public Comments – None

ACTION ITEM 1 – Approval of Minutes

The minutes of October 25, 2023, Finance Committee Meeting were presented for approval.

Motion:	Scott Thomas
Second:	David Fetkenher

The minutes were approved as presented. The motion carried unanimously. There was no further discussion.

ACTION ITEM 2 – Budget Modification II

REVENUE

Total budgeted revenues estimated to decrease from \$9,496,655 to \$9,302,102 for an overall decrease of \$194,553; or 2%.

Workforce Innovation and Opportunity Act (WIOA) Programs

- HOPE Initiative grant - <\$65,000>
 - Two-year grant awarded from Department of Commerce for a collaboration between the CareerSource Florida network and the Florida Department of Children and Families to help Floridians achieve self-sufficiency through employment, training and support services.
 - We have decreased the amount allocated for the current fiscal year by \$65,000.
- Hurricane Idalia Emergency Dislocated Worker Grant - \$25,000
 - In the aftermath of Hurricane Idalia, several Local Workforce Development Boards, including CareerSource Pinellas, were awarded emergency funding to assist dislocated workers in the affected areas.
 - We were awarded \$500,000 but have offered to deobligate the majority of these funds in order to free them for other Boards with greater needs.
- Board Consolidation and Realignment <\$109,553>
 - Adjustment to reflect anticipated funding and costs associated with the upcoming consolidation with CareerSource Tampa Bay.

Employment Services

- HOPE Navigator - <\$45,000>
 - Two-year grant awarded from Department of Commerce to fund dedicated headcount to facilitate the HOPE Initiative grant.
 - We have decreased the amount allocated for the current fiscal year by \$45,000.

EXPENSES

Total budgeted expenses estimated to decrease from \$9,426,205 to \$9,231,652 for an overall decrease of \$194,553.

Personnel Expenses

- Personnel Expenses expected to decrease approximately \$<70,000> to reflect anticipated staffing levels through the remainder of the fiscal year.

Program Expenses

- Service Provider Contracts - <\$50,000>
 - Reflects lower anticipated spending by Pinellas Education Foundation for the remainder of their no-cost contract extension through 12/31/23.
- Customer Supportive Services - <\$10,000>
- **Adult OJT - <\$60,000>**
 - Reflecting lower adult OJT enrollments due to temporary freeze of WIOA Adult spending in the summer and fall.

Other Expenses

- Out of town travel <\$5,000>
 - Fewer attendees to annual NAWB conference this year

RECOMMENDATION

Staff recommends approval of adjustments to the revenue budgets and resultant modifications to the expenditures budgets.

Discussion: None.

Motion:	Scott Thomas
Second:	David Fetkenher

The Finance Committee made a motion for approval of adjustments to the revenue budgets and resultant modifications to the expenditures budgets. There was no further discussion. The motion carried unanimously.

ACTION ITEM 3 – Related Party Contracts – PERC & Evara Health

FL Statute Section 445.007 mandates that all Local Workforce Development Boards (LWDBs) entering into a contract with an organization or individual represented on the Board, must meet the following requirements:

- a) Approve the contract by a two-thirds (2/3rd) vote of the Board when a quorum has been established.
- b) Board members who could benefit financially from the transaction or who have any relationship with the contracting vendor must disclose any such conflicts prior to the board vote on the contract.
- c) Board members who could benefit financially from the transaction or board members who have any relationship with the contracting vendor must abstain from voting on the contracts; and
- d) Such contracts must be submitted to the Florida Department of Commerce and CareerSource Florida for review.

CareerSource Pinellas is entering into two paid work experience (PWE) agreements with board members employed by the training sites of Pinellas Ex-offender Reentry Coalition dba: People Empowering and Restoring Communities (PERC) and Evara Health.

PWE provides participants an opportunity to engage in work experiences where they develop employability skills, acquire job-specific knowledge, and gain work experience in an area that helps prepare them for self-sufficient employment.

Note: For the record, Board Members, if present must verbally abstain from the vote related to their respective organization.

Action Item	Company	Board Member	OJT/PWE (not to exceed)
A	PERC	Michael Jalazo	\$75K
B	Evara Health	Rebecca Sarlo	\$75K

RECOMMENDATION

- A. Approval of a related party contract involving PERC. Must be approved by a two-thirds (2/3rd) vote with a spending cap of \$75,000 (approximately 15 enrollments).
- B. Approval of a related party contract involving Evara Health. Must be approved by a two-thirds (2/3rd) vote with a spending cap of \$75,000 (approximately 20 enrollments).

Discussion: None

3a.	Motion:	Scott Thomas
	Second:	David Fetkenher

3b.	Motion:	David Fetkenher
	Second:	Scott Thomas
	Abstention:	Dr. Rebecca Sarlo

The Finance Committee made a motion for:

- A. *Approval of a related party contract involving PERC. Must be approved by a two-thirds (2/3rd) vote with a spending cap of \$75,000 (approximately 15 enrollments).*
- B. *Approval of a related party contract involving Evara Health. Must be approved by a two-thirds (2/3rd) vote with a spending cap of \$75,000 (approximately 20 enrollments).*

There was no further discussion. The motion carried unanimously.

INFORMATION ITEM 1 – October 31, 2023 Financial Statements

A financial summary for the year ended August 31, 2023, was included in the meeting packet as well as the reports listed below.

- a. Statement of Activities: Current Year vs. Prior Year
- b. Statement of Activities: Current Year vs. Budget
- c. Cost Allocation/Expenditure Report for PE 10/31/2023
- d. Pooled Cost Report 10/31/2023
- e. Grant Status Report 10/31/2023

Adjournment – Scott Thomas made a motion to adjourn, and David Fetkenher seconded that motion. The meeting was adjourned at 10:18am.



ACTION ITEM 2

Fiscal Year 2023 – 2024: Budget Modification No. 3

When Budget Modification No. 2 was prepared, Ticket-to-Work revenue was forecasted to decrease \$40,000. Ticket-to-Work revenue is unrestricted revenue to the organization and should not impact Federal grant expenses. During the preparation of the budget modification, payroll expenses were inadvertently reduced to reflect this decrease in revenue instead of reducing the organization's budgeted surplus. Thus, this Budget Modification is presented to correct this oversight.

EXPENSES

Total budgeted expenses estimated to increase \$40,000 from \$9,231,652 to \$9,271,652.

Personnel Expenses

- Personnel Expenses expected to increase \$40,000 to reflect anticipated staffing levels through the remainder of the fiscal year.

RECOMMENDATION

Approval of Budget Modification 3 for changes to the expenditure budget.



**CareerSource Pinellas
2023-2024 Planning Budget
For the Year Ended June 30, 2024**

		Approved 2023-2024 Budget Modification I	Proposed Changes	Proposed 2023-2024 Budget Modification II	Proposed Changes	Proposed 2023-2024 Budget Modification III
Revenue						
Operating Revenue						
Grant Revenue						
Grant Revenue - Federal	3000	9,042,702	(85,000)	8,957,702	-	8,957,702
Grant Revenue - State	3001	309,553	(109,553)	200,000	-	200,000
Grant Revenue - Local	3002	-	-	-	-	-
Total Grant Revenue		9,352,255	(194,553)	9,157,702	-	9,157,702
Contributions						
Corporate Revenue	3100	2,400	-	2,400	-	2,400
Sponsorship Revenue	3101	-	-	-	-	-
Donations	3102	-	-	-	-	-
Total Contributions		2,400	-	2,400	-	2,400
Program Revenue						
Ticket to Work Revenue	3103	100,000	(40,000)	60,000	-	60,000
Total Program Revenue		100,000	(40,000)	60,000	-	60,000
Investment Income						
Interest/Dividends	3200	42,000	40,000	82,000	-	82,000
Total Investment Income		42,000	40,000	82,000	-	82,000
Other Income						
Other Revenues	3300	-	-	-	-	-
Total Other Income		-	-	-	-	-
Total Operating Revenue		9,496,655	(194,553)	9,302,102	-	9,302,102
Total Revenue		9,496,655	(194,553)	9,302,102	-	9,302,102
Expenditures						
Personnel Expenses						
Salary Expense	5000	3,516,114	(50,360)	3,465,754	29,000	3,494,754
Salary Expense - Benefit Stipend	5005	760,042	(10,886)	749,156	6,000	755,156
Payroll Taxes	5050	331,622	(4,750)	326,872	3,000	329,872
Fringe Benefits (ER Paid)	5060	40,860	(585)	40,275	-	40,275
Retirement	5090	207,488	(2,972)	204,516	2,000	206,516
Total Personnel Expenses		4,856,126	(69,553)	4,786,573	40,000	4,826,573
Program Expenses						
Operating Supplies	5303	-	-	-	-	-
Food and Beverages	5310	4,200	-	4,200	-	4,200
Communications	5500	95,520	-	95,520	-	95,520
Outreach/Marketing	5520	35,400	-	35,400	-	35,400
Service Provider Contract	8000	565,000	(50,000)	515,000	-	515,000
One-Stop Operator	8100	48,000	-	48,000	-	48,000
Internal Monitoring	8200	68,000	-	68,000	-	68,000
OJT	8300	830,000	(60,000)	770,000	-	770,000
Paid-Work Experience	8320	-	-	-	-	-
Apprenticeships	8330	-	-	-	-	-
Contracted Workforce Services	8335	24,000	-	24,000	-	24,000
Youth Stipends	8340	16,500	-	16,500	-	16,500
Other Customer Support Services	8341	25,200	-	25,200	-	25,200
Customer Training	8342	1,138,000	-	1,138,000	-	1,138,000
Customer Supportive Services	8343	18,000	(10,000)	8,000	-	8,000
Training Related Material	8345	48,600	-	48,600	-	48,600



CareerSource Pinellas
2023-2024 Planning Budget
For the Year Ended June 30, 2024

		Approved 2023-2024 Budget Modification I	Proposed Changes	Proposed 2023-2024 Budget Modification II	Proposed Changes	Proposed 2023-2024 Budget Modification III
Fees/exams/certifications	8346	25,200	-	25,200	-	25,200
Total Program Expenses		3,061,620	(120,000)	2,941,620	-	2,941,620
Professional Fees						
Accounting/Audit Fees	5100	56,250	-	56,250	-	56,250
Legal Fees	5101	96,000	-	96,000	-	96,000
Legal (Lobbying)	5105	25,000	-	25,000	-	25,000
Professional Service	5104	85,920	-	85,920	-	85,920
Contract Labor	5170	131,800	-	131,800	-	131,800
Contract IT Services	5171	245,340	-	245,340	-	245,340
Cybersecurity - IT	5172	47,160	-	47,160	-	47,160
Total Professional Fees		687,470	-	687,470	-	687,470
Supplies						
Office Supplies	5302	22,450	-	22,450	-	22,450
Postage/Shipping	5307	3,300	-	3,300	-	3,300
Document Shredding	5308	1,404	-	1,404	-	1,404
Total Supplies		27,154	-	27,154	-	27,154
Insurance						
Insurance - Commercial Property	5400	9,000	-	9,000	-	9,000
Insurance - General Liability	5401	77,000	-	77,000	-	77,000
Insurance - Workers Comp	5403	34,054	-	34,054	-	34,054
Insurance - Auto	5404	-	-	-	-	-
Insurance - Claims	5405	-	-	-	-	-
Total Insurance		120,054	-	120,054	-	120,054
Occupancy						
Office Rent/Lease	5200	256,415	-	256,415	-	256,415
Other Leases	5201	-	-	-	-	-
Utilities	5202	36,700	-	36,700	-	36,700
Repairs & Maintenananc	5203	4,680	-	4,680	-	4,680
Security	5204	468	-	468	-	468
Janitorial Expense	5205	39,780	-	39,780	-	39,780
Pest Control	5206	2,580	-	2,580	-	2,580
Total Occupancy		340,623	-	340,623	-	340,623
Office Equipment						
Equipment Rent/Lease	5300	24,012	-	24,012	-	24,012
Copy Machine Usage/Maintenance	5301	9,000	-	9,000	-	9,000
Comp Software/License/Maintenance	5304	111,077	-	111,077	-	111,077
Equipment < \$5,000	5305	18,000	-	18,000	-	18,000
Other	5207	-	-	-	-	-
Total Office Equipment		162,089	-	162,089	-	162,089
Travel and Meetings						
Travel - Mileage	5540	10,900	-	10,900	-	10,900
Travel - Out of Town	5541	37,750	(5,000)	32,750	-	32,750
Meetings/Conferences	5560	18,850	-	18,850	-	18,850
Total Travel and Meetings		67,500	(5,000)	62,500	-	62,500
Licences, Dues and Other Fees						
Staff Training/Education	5052	43,050	-	43,050	-	43,050
Other Employee expenses	5055	-	-	-	-	-
Recruitment	5095	4,800	-	4,800	-	4,800
Payroll Processing Fees	5103	6,500	-	6,500	-	6,500
License/Dues & Other Fees	5581	40,339	-	40,339	-	40,339
FSA Administrative Expenses	5582	1,080	-	1,080	-	1,080



**CareerSource Pinellas
2023-2024 Planning Budget
For the Year Ended June 30, 2024**

	G/L	Approved 2023-2024 Budget Modification I	Proposed Changes	Proposed 2023-2024 Budget Modification II	Proposed Changes	Proposed 2023-2024 Budget Modification III
401k Administrative Fees	5583	-	-	-	-	-
HRIS Administrative Fees	5584	7,800	-	7,800	-	7,800
Total Licences, Dues and Other		103,569	-	103,569	-	103,569
Amortization and Depreciation						
Depreciation Expense	5901	-	-	-	-	-
Total Amortization and		-	-	-	-	-
Total Expenditures		9,426,205	(194,553)	9,231,652	40,000	9,271,652
Net Revenue over (under) Expenditures		70,450	-	70,450	(40,000)	30,450



ACTION ITEM 3

2022 IRS Form 990

Information

WorkNet Pinellas' IRS Form 990 has been completed for the period beginning July 1, 2022 and ending June 30, 2023. Based on the 990 disclosure requirements (Part VI, Section B, 11a), a copy will be provided to each voting member of the Board, prior to filing it with the IRS. The 990 form will be filed after approval by the full Board of Directors meeting on March 20, 2024.

RECOMMENDATION

Approval of the 2022 IRS Form 990.

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2023

Prepared For:

Worknet Pinellas Inc.
13805 58th street n SUITE 2-140
Clearwater, FL 33760

Prepared By:

Thomas Howell Ferguson P.A.
2615 Centennial Blvd., Suite 200
Tallahassee, FL 32308

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This return has been prepared for electronic filing. If you wish to have it transmitted electronically to the IRS, please sign, date, and return Form 8879-TE to our office. We will then submit the electronic return to the IRS. Do not mail a paper copy of the return to the IRS. Return Form 8879-TE to us by May 15, 2024.

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2022Open to Public
Inspection**A** For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization**WORKNET PINELLAS INC.**Doing business as **CAREERSOURCE PINELLAS**Number and street (or P.O. box if mail is not delivered to street address) Room/suite
13805 58TH STREET N SUITE 2-140City or town, state or province, country, and ZIP or foreign postal code
CLEARWATER, FL 33760**F** Name and address of principal officer: **STEVEN MEIER**
SAME AS C ABOVE**D** Employer identification number**73-1678180****E** Telephone number**727-608-1709****G** Gross receipts \$ **9,370,623.****H(a)** Is this a group returnfor subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. See instructions

H(c) Group exemption number**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: **WWW.CAREERSOURCEPINELLAS.COM****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Year of formation: **2001** **M** State of legal domicile: **FL****Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: TO BUILD THE TALENT PIPELINE FOR TODAY & THE FUTURE BY PROVIDING EASY ACCESS TO WORKFORCE SOLUTIONS.
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3	Number of voting members of the governing body (Part VI, line 1a) 25
	4	Number of independent voting members of the governing body (Part VI, line 1b) 25
	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a) 74
	6	Total number of volunteers (estimate if necessary) 33
	7a	Total unrelated business revenue from Part VIII, column (C), line 12 0.
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11 0.	
Revenue	8	Contributions and grants (Part VIII, line 1h) 7,501,208.
	9	Program service revenue (Part VIII, line 2g) 83,552.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 7,772.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,788.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 7,597,320.
	Expenses	13
14		Benefits paid to or for members (Part IX, column (A), line 4) 0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 3,489,012.
16a		Professional fundraising fees (Part IX, column (A), line 11e) 0.
b		Total fundraising expenses (Part IX, column (D), line 25) 0.
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,589,974.
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 9,531,291.
19		Revenue less expenses. Subtract line 18 from line 12 -1,933,971.
Net Assets or Fund Balances	20	Total assets (Part X, line 16) 1,995,144.
	21	Total liabilities (Part X, line 26) 770,565.
	22	Net assets or fund balances. Subtract line 21 from line 20 1,224,579.

Part II Signature Block

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

Sign Here	Signature of officer		Date	
	STEVEN MEIER, CEO			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	STACEY T KOLKA			P01371120
Preparer Use Only	Firm's name	Firm's EIN		
	THOMAS HOWELL FERGUSON P.A.	59-3186310		
	Firm's address	Phone no.		
	2615 CENTENNIAL BLVD., SUITE 200 TALLAHASSEE, FL 32308	850-668-8100		

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☐**1** Briefly describe the organization's mission:

THE MISSION OF CAREERSOURCE PINELLAS IS TO BUILD THE TALENT PIPELINE FOR TODAY AND THE FUTURE BY PROVIDING EASY ACCESS TO WORKFORCE SOLUTIONS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

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

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

4a (Code:) (Expenses \$ **4,850,245.** including grants of \$ **331,433.**) (Revenue \$)
WORKFORCE INNOVATION AND OPPORTUNITY ACT - THE PURPOSE OF THE PROGRAM IS TO BUILD A SKILLED WORKFORCE THAT EMPLOYERS NEED. THIS PROGRAM IS DESIGNED TO PROVIDE TRAINING OPPORTUNITIES IN HIGH DEMAND OCCUPATIONS TO INCREASE EMPLOYMENT, RETENTION AND EARNINGS OF WIOA PROGRAM PARTICIPANTS.

4b (Code:) (Expenses \$ **2,011,491.** including grants of \$ **13,090.**) (Revenue \$)
TEMPORARY ASSISTANCE FOR NEEDY FAMILIES - THE PURPOSE OF THE TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) PROGRAM IS TO PROVIDE TEMPORARY FINANCIAL HELP TO ELIGIBLE LOW-INCOME FAMILIES. THE PROGRAM IS DESIGNED TO END DEPENDENCE BY NEEDY PARENTS ON GOVERNMENT BENEFITS BY PROMOTING TRAINING, JOB PREPARATION AND WORK.

4c (Code:) (Expenses \$ **1,136,818.** including grants of \$ **22,883.**) (Revenue \$)
EMPLOYMENT SERVICE CLUSTER - THE PURPOSE OF THE PROGRAM IS TO IMPROVE THE FUNCTIONING OF THE NATION'S LABOR MARKETS BY BRINGING TOGETHER INDIVIDUALS SEEKING EMPLOYMENT WITH EMPLOYERS SEEKING WORKERS. THE SERVICES PROVIDED THROUGH WAGNER PEYSER ARE JOB SEARCH ASSISTANCE, RECRUITING ASSISTANCE FOR EMPLOYERS, MATCHING SERVICES FOR JOB SEEKERS AND EMPLOYERS AND WORK TEST REQUIREMENTS ASSISTANCE FOR UNEMPLOYMENT COMPENSATION CLAIMANTS.

4d Other program services (Describe on Schedule O.)(Expenses \$ **431,500.** including grants of \$ **6,115.**) (Revenue \$ **149,331.**)**4e** Total program service expenses **8,430,054.**

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? 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? <i>If "Yes," complete Schedule C, Part I</i>	3	X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	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? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b	X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	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? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	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)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b	X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13	X
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	14b	X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
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	

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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	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):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	X
35a 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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	X

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	12
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	74
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	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	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders	11a	
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a	
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15	X
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	X
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17	

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

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

☒**Section A. Governing Body and Management**

	1a	1b	2	3	4	5	6	7a	7b	8a	8b	9	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	25													
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.														
b Enter the number of voting members included on line 1a, above, who are independent		25												
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			2											X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?				3										X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?					4									X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?						5								X
6 Did the organization have members or stockholders?							6							X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?								7a						X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?									7b					X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:														
a The governing body?										8a			X	
b Each committee with authority to act on behalf of the governing body?											8b		X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O												9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	10a	10b	11a	11b	12a	12b	12c	13	14	15a	15b	16a	16b	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a														X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b													
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			11a											X	
b Describe on Schedule O the process, if any, used by the organization to review this Form 990.															
12a Did the organization have a written conflict of interest policy? If "No," go to line 13					12a									X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?						12b								X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done							12c							X	
13 Did the organization have a written whistleblower policy?								13						X	
14 Did the organization have a written document retention and destruction policy?									14					X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?															
a The organization's CEO, Executive Director, or top management official										15a				X	
b Other officers or key employees of the organization											15b			X	
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.															
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?												16a			X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?													16b		

Section C. Disclosure

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

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

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

20 State the name, address, and telephone number of the person who possesses the organization's books and records

THE ORGANIZATION - 727-628-1709
13805 58TH ST. N., SUITE 2-140, CLEARWATER, FL 33760

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) STEVEN MEIER CFO & INTERIM CEO	50.00			X				147,320.	0.	7,366.
(2) IVONNE ALVAREZ DIRECTOR	1.00	X						0.	0.	0.
(3) ANGELA BARTON DIRECTOR	1.00	X						0.	0.	0.
(4) BELINTHIA BERRY DIRECTOR	1.00	X						0.	0.	0.
(5) LISA CANE DIRECTOR	1.00	X						0.	0.	0.
(6) BART DIEBOLD DIRECTOR	1.00	X						0.	0.	0.
(7) CANDIDA DUFF DIRECTOR	1.00	X						0.	0.	0.
(8) CELESTE FERNANDEZ DIRECTOR	1.00	X						0.	0.	0.
(9) DAVID FETKENHER DIRECTOR	1.00	X						0.	0.	0.
(10) RENE FLOWERS DIRECTOR	1.00	X						0.	0.	0.
(11) JACK GELLER DIRECTOR	1.00	X						0.	0.	0.
(12) BARCLAY HARLESS TREASURER	1.00	X		X				0.	0.	0.
(13) WILLIAM HOLLAND DIRECTOR	1.00	X						0.	0.	0.
(14) JOHN HOWELL DIRECTOR	1.00	X						0.	0.	0.
(15) MARK HUNT DIRECTOR	1.00	X						0.	0.	0.
(16) MICHAEL JALAZO DIRECTOR	1.00	X						0.	0.	0.
(17) KEVIN KNUTSON DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ESTHER MATTHEWS DIRECTOR	1.00	X						0.	0.	0.
(19) SHAWN MCDONNELL DIRECTOR	1.00	X						0.	0.	0.
(20) REBECCA SARLO DIRECTOR	1.00	X						0.	0.	0.
(21) PATRICIA SAWYER DIRECTOR	1.00	X						0.	0.	0.
(22) ELIZABETH SIPLIN VICE CHAIR	1.00	X		X				0.	0.	0.
(23) SCOTT THOMAS CHAIR	1.00	X		X				0.	0.	0.
(24) ZACHARY WHITE DIRECTOR	1.00	X						0.	0.	0.
(25) KENNETH WILLIAMS SECRETARY	1.00	X		X				0.	0.	0.
(26) GLENN WILLOCKS DIRECTOR	1.00	X						0.	0.	0.
1b Subtotal								147,320.	0.	7,366.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								147,320.	0.	7,366.

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

1

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

	Yes	No
3		X
4	X	
5		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
MANPOWER 21271 NETWORK PL. , CHICAGO , IL 60673	THIRD PARTY EMPLOYER OF RECORD	412,299.
LINK TECHNOLOGY SERVICES 11284 CALLISIA DR. , ODESSA , FL 33556	IT SERVICE PROVIDER	273,707.
NEW HORIZON COMPUTER LEARNING CENTER , 5402 W. LAUREL ST. , STE. 200 , TAMPA, FL	TRAINING PROVIDER	207,770.
GALEN COLLEGE OF NURSING, 11101 ROOSEVELT BLVD. N. , STE. 201, ST. PETERSBURG, FL	TRAINING PROVIDER	182,620.
NATIONAL AVIATION ACADEMY 6225 ULMERTON RD. , CLEARWATER , FL 33760	TRAINING PROVIDER	166,031.
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		9

Form 990 (2022)

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	9,221,292.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f					
	g Noncash contributions included in lines 1a-1f	1g	\$				
	h Total. Add lines 1a-1f						
Program Service Revenue	2 a <u>TICKET TO WORK</u>	Business Code 561300		108,820.	108,820.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			108,820.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			36,550.		
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		6a	(i) Real (ii) Personal				
b Less: rental expenses ...		6b					
c Rental income or (loss)		6c					
d Net rental income or (loss)							
7 a Gross amount from sales of assets other than inventory		7a	(i) Securities (ii) Other				
b Less: cost or other basis and sales expenses		7b					
c Gain or (loss)		7c					
d Net gain or (loss)							
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		8a					
b Less: direct expenses		8b					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19		9a					
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a <u>MISCELLANEOUS REVENUE</u>	Business Code 900099		3,961.	3,961.		
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			3,961.			
	12 Total revenue. See instructions				9,370,623.	112,781.	0.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	373,521.	373,521.		
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	154,686.		154,686.	
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	3,129,555.	2,833,044.	296,511.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	144,311.	124,921.	19,390.	
9 Other employee benefits	709,445.	645,341.	64,104.	
10 Payroll taxes	285,940.	248,773.	37,167.	
11 Fees for services (nonemployees):				
a Management				
b Legal	61,775.		61,775.	
c Accounting	22,407.		22,407.	
d Lobbying	25,792.		25,792.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	214,849.	149,067.	65,782.	
12 Advertising and promotion	35,416.	35,320.	96.	
13 Office expenses	71,263.	61,600.	9,663.	
14 Information technology	647,998.	630,113.	17,885.	
15 Royalties				
16 Occupancy	356,045.	322,185.	33,860.	
17 Travel	50,541.	34,157.	16,384.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	13,765.	8,309.	5,456.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	8,854.		8,854.	
23 Insurance	93,098.	74,017.	19,081.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a CUSTOMER TRAINING	2,722,601.	2,722,601.		
b COMMUNICATIONS	97,695.	89,876.	7,819.	
c OTHER EXPENSES	45,475.	5,176.	40,299.	
d CUSTOMER SUPPORT SRVC.	36,384.	34,484.	1,900.	
e All other expenses	47,129.	37,549.	9,580.	
25 Total functional expenses. Add lines 1 through 24e	9,348,545.	8,430,054.	918,491.	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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,388,669.	1	1,400,525.
	2 Savings and temporary cash investments	178,579.	2	181,249.
	3 Pledges and grants receivable, net	366,644.	3	359,982.
	4 Accounts receivable, net	3,025.	4	46,388.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	49,373.	9	59,724.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 198,557.		
	b Less: accumulated depreciation	10b 198,557.		
		8,854.	10c	0.
	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	0.	15	411,807.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	1,995,144.	16	2,459,675.	
Liabilities	17 Accounts payable and accrued expenses	633,551.	17	793,951.
	18 Grants payable		18	
	19 Deferred revenue	137,014.	19	1,302.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	0.	25	417,765.
	26 Total liabilities. Add lines 17 through 25	770,565.	26	1,213,018.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,224,579.	27	1,246,657.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	1,224,579.	32	1,246,657.
	33 Total liabilities and net assets/fund balances	1,995,144.	33	2,459,675.

Form 990 (2022)

Part XI Reconciliation of Net AssetsCheck 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	9,370,623.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,348,545.
3	Revenue less expenses. Subtract line 2 from line 1	3	22,078.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,224,579.
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	1,246,657.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b Were the organization's financial statements audited by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the 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 required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____	3b	X

Form 990 (2022)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

WORKNET PINELLAS INC.

Employer identification number

73-1678180

Part I	Reason for Public Charity Status. (All organizations must complete this part.) See instructions.
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The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

g Provide the following information about the supported organization(s).						
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9192254.	9441414.	8302926.	7501208.	9221292.	43659094.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	9192254.	9441414.	8302926.	7501208.	9221292.	43659094.
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.						43659094.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	9192254.	9441414.	8302926.	7501208.	9221292.	43659094.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,686.	19,106.	14,090.	7,772.	36,550.	79,204.
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.)	184,944.	120,144.	118,778.	88,340.	112,781.	624,987.
11 Total support. Add lines 7 through 10						44363285.
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	98.41	%
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	98.81	%
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Schedule A (Form 990) 2022

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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 Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
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.			
2a			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
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 .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

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

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

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2022

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

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5	
6 Other distributions (<i>describe in Part VI</i>). See instructions.	6	
7 Total annual distributions. Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8	
9 Distributable amount for 2022 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e 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: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c 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, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. 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 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Schedule A (Form 990) 2022

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, EXPLANATION FOR OTHER INCOME:**MISCELLANEOUS**

2020 AMOUNT: \$ 691.

2021 AMOUNT: \$ 263.

2022 AMOUNT: \$ 431.

TICKET TO WORK

2018 AMOUNT: \$ 62,982.

2019 AMOUNT: \$ 99,153.

2020 AMOUNT: \$ 109,259.

2021 AMOUNT: \$ 82,552.

2022 AMOUNT: \$ 108,820.

SPONSORSHIPS

2018 AMOUNT: \$ 23,915.

2019 AMOUNT: \$ 4,466.

2021 AMOUNT: \$ 2,000.

OTHER PROGRAM SERVICE REVENUE

2018 AMOUNT: \$ 98,047.

2019 AMOUNT: \$ 16,525.

2020 AMOUNT: \$ 1,290.

TABACCO FREE FLORIDA REVENUE

2020 AMOUNT: \$ 7,538.

2021 AMOUNT: \$ 3,525.

2022 AMOUNT: \$ 3,530.

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.)

Supplemental information area with horizontal lines for text entry.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

WORKNET PINELLAS INC.

Employer identification number

73-1678180

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

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

☐ 501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization	Employer identification number
WORKNET PINELLAS INC.	73-1678180

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES 200 INDEPENDENCE AVENUE, S.W. WASHINGTON, DC 20201	\$ 2,249,008.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	U.S. DEPARTMENT OF LABOR 200 CONSTITUTION AVE NW WASHINGTON, DC 20210	\$ 6,557,238.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	U.S. DEPARTMENT OF AGRICULTURE 1400 INDEPENDENCE AVENUE SW WASHINGTON, DC 20250	\$ 415,046.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
WORKNET PINELLAS INC.	73-1678180

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

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

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

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

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

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

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

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

Name of organization

WORKNET PINELLAS INC.

Employer identification number

73-1678180

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures \$

3 Volunteer hours for political campaign activities

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527
exempt function activities \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,
line 17b \$

4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

Schedule C (Form 990) 2022

LHA

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

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)			
d Other exempt purpose expenditures			
e Total exempt purpose expenditures (add lines 1c and 1d)			
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 25% of line 1f)			
h Subtract line 1g from line 1a. If zero or less, enter -0-			
i Subtract line 1f from line 1c. If zero or less, enter -0-			
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			

☐ Yes ☐ No
4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.

See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2022

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		25,792.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			25,792.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

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

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART II-B, LINE 1, LOBBYING ACTIVITIES:

AN OUTSIDE FIRM WAS HIRED TO ASSIST ORGANIZATION NAVIGATE THROUGH
 FLORIDA LEGISLATION IMPACTING WORKFORCE-RELATED PROGRAMS AND SERVICES,
 READ THROUGH EACH BILL TO HIGHLIGHT AREAS OF CONCERN, AND MEET WITH
 LEGISLATORS AND STAFF TO REPRESENT WORKNET PINELLAS.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

WORKNET PINELLAS INC.

Employer identification number

73-1678180

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

Part II

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
☐ Preservation of land for public use (for example, recreation or education) ☐ Preservation of a historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

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

Part III

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

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

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

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

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2022

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

a ☐ Public exhibition

d ☐ Loan or exchange program

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment _____ %

b Permanent endowment _____ %

c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations

(ii) Related organizations

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? ☐

	Yes	No
3a(i)		
3a(ii)		
3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		67,859.	67,859.	0.
d Equipment		130,698.	130,698.	0.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				0.

Schedule D (Form 990) 2022

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) RIGHT OF USE ASSET	411,807.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	411,807.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) LEASE LIABILITY	417,765.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	417,765.

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

Schedule D (Form 990) 2022

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

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

1	Total revenue, gains, and other support per audited financial statements	1	9,370,623.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	9,370,623.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	9,370,623.

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

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

1	Total expenses and losses per audited financial statements	1	9,348,545.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	9,348,545.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	9,348,545.

Part XIII Supplemental Information.

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

PART X, LINE 2:

WITH FEW EXCEPTIONS, THE ORGANIZATION IS NO LONGER SUBJECT TO EXAMINATIONS BY MAJOR TAX JURISDICTIONS FOR YEARS ENDED JUNE 30, 2019, AND PRIOR.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

WORKNET PINELLAS INC.

Employer identification number

73-1678180

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ **Yes** ☐ **No**

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
PINELLAS EDUCATION FOUNDATION 12090 STAARKEY ROAD LARGO, FL 33773	59-2688253	501(C)(3)	327,636.	0.			FEDERAL GRANT SUBRECIPIENT EMPLOYMENT TRAINING.
THE KAISER GROUP (DE), LLC DBA DYNAMIC - 237 SOUTH STREET - WAUKESHA, WI 53186	39-1354364		45,885.	0.			FEDERAL GRANT SUBRECIPIENT ONE STOP OPERATOR

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

3 Enter total number of other organizations listed in the line 1 table **1.**

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

Schedule I (Form 990) 2022

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

THE ORGANIZATION HAS ENGAGED PROFESSIONAL CONTRACTORS TO MONITOR THE
ORGANIZATION RECEIVING GRANT FUNDS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

WORKNET PINELLAS INC.

Employer identification number

73-1678180

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

a Receive a severance payment or change-of-control payment?

b Participate in or receive payment from a supplemental nonqualified retirement plan?

c Participate in or receive payment from an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

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

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

a The organization?

b Any related organization?

If "Yes" on line 5a or 5b, describe in Part III.

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

a The organization?

b Any related organization?

If "Yes" on line 6a or 6b, describe in Part III.

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

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

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

Yes No

1b

2

4a

4b

4c

5a

5b

6a

6b

7

8

9

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

Schedule J (Form 990) 2022

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) STEVEN MEIER CFO & INTERIM CEO	(i)	134,740.	0.	12,580.	7,366.	0.	154,686.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 4A:

PER TERMS OF SEVERANCE AGREEMENT WITH MS. JENNIFER BRACKNEY, FORMER CEO,

MS. BRACKNEY RECEIVED 6 WEEKS OF HER BASE SALARY WHICH WAS \$21,747.14. IN

ADDITION, MS. BRACKNEY WAS PAID FOR HER ACCRUED AND UNUSED PTO WHICH WAS

\$31,651.16. THE ABOVE WAS PAID DURING CALENDAR YEAR 2022.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

WORKNET PINELLAS INC.

Employer identification number

73-1678180

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

FORM 990 AND ACCOMPANYING SCHEDULES ARE PREPARED BY AN INDEPENDENT
ACCOUNTING FIRM. THE FORM AND ACCOMPANYING SCHEDULES ARE REVIEWED BY THE
ORGANIZATION'S FINANCE STAFF. THE REVIEWED FORM AND ACCOMPANYING SCHEDULES
ARE PROVIDED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL. ALL ISSUES
AND QUESTIONS ARE RESOLVED WITH THE INDEPENDENT ACCOUNTING FIRM PRIOR TO
FILING WITH THE INTERNAL REVENUE SERVICE CENTER.

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

INTERNALLY, IT IS THE RESPONSIBILITY OF SENIOR MANAGEMENT TO REVIEW THE
AGENDAS AND IDENTIFY ANY POSSIBLE CONFLICTS OF INTEREST PRIOR TO THE BOARD
MEETINGS. THE ATTORNEY ATTENDS THE BOARD MEETINGS AND MONITORS RELATED
PARTY TRANSACTIONS. BOARD MEMBERS ARE RESPONSIBLE FOR DISCLOSING ANY
RELATED PARTY INTEREST AND ANNUALLY SIGN CONFLICT OF INTEREST FORMS.

FORM 990, PART VI, SECTION B, LINE 15:

THE ORGANIZATION DETERMINES COMPENSATION OF THE CEO AND OTHER EMPLOYEES OF
THE ORGANIZATION BY UTILIZING A THIRD PARTY REPORT THAT COMPARES SALARY
RANGES OF ALL COMPARABLE AGENCIES IN FLORIDA. AN EVALUATION PROCEDURE IS
UTILIZED TO DETERMINE THE AMOUNT OF ANY SALARY INCREASES. THE SALARY
INCREASES ARE RECOMMENDED BY THE COMPENSATION COMMITTEE AND/OR THE AD HOC
CEO REVIEW COMMITTEE AND APPROVED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY
AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

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

Schedule O (Form 990) 2022



INFORMATION ITEM 1

December 31, 2023 Financial Statements

1. December 31, 2023 Financial Statements
 - a. Statement of Activities: Current Year vs. Prior Year..... Page 50
 - b. Statement of Activities: Current Year vs. Budget Page 53
 - c. Cost Allocation/Expenditure Report for PE 12/31/2023 Page 56
 - d. Pooled Cost Report 12/31/2023 Page 57
 - e. Grant Status Report 12/31/2023 Page 58

CareerSource Pinellas
Statement of Revenues and Expenditures
From 7/1/2023 Through 12/31/2023
(In Whole Numbers)

		<u>Actual 2023-2024</u>	<u>Actual 2022-2023</u>	<u>Variance</u>
Revenue				
Operating Revenue				
Grant Revenue				
Grant Revenue - Federal	3000	4,682,981	4,112,173	570,808
Grant Revenue - State	3001	<u>500</u>	<u>0</u>	<u>500</u>
Total Grant Revenue		4,683,481	4,112,173	571,308
Contributions				
Corporate Revenue	3100	<u>1,880</u>	<u>1,410</u>	<u>470</u>
Total Contributions		1,880	1,410	470
Program Revenue				
Ticket to Work Revenue	3103	<u>27,291</u>	<u>51,544</u>	<u>(24,253)</u>
Total Program Revenue		27,291	51,544	(24,253)
Investment Income				
Interest/Dividends	3200	<u>41,740</u>	<u>12,547</u>	<u>29,192</u>
Total Investment Income		41,740	12,547	29,192
Other Income				
Other Revenues	3300	<u>0</u>	<u>431</u>	<u>(431)</u>
Total Other Income		<u>0</u>	<u>431</u>	<u>(431)</u>
Total Operating Revenue		<u>4,754,392</u>	<u>4,178,106</u>	<u>576,286</u>
Total Revenue		<u>4,754,392</u>	<u>4,178,106</u>	<u>576,286</u>
Expenditures				
Personnel Expenses				
Salary Expense	5000	1,814,083	1,507,630	(306,452)
Salary Expense - Benefit Stipend	5005	415,143	335,993	(79,150)
Payroll Taxes	5050	151,752	132,129	(19,623)
Fringe Benefits (ER Paid)	5060	17,883	17,718	(165)
Retirement	5090	<u>100,481</u>	<u>65,489</u>	<u>(34,993)</u>
Total Personnel Expenses		2,499,342	2,058,958	(440,384)
Program Expenses				
Food and Beverages	5310	1,993	1,029	(964)
Communications	5500	49,214	49,016	(198)
Outreach/Marketing	5520	16,633	20,042	3,408
Service Provider Contract	8000	196,287	169,258	(27,029)
One-Stop Operator	8100	22,211	24,752	2,541
Internal Monitoring	8200	34,013	34,005	(8)
OJT	8300	329,594	239,656	(89,938)
Paid Work Experience	8320	146,153	8,564	(137,589)
Workforce Services	8335	12,000	33,500	21,500
Youth Stipends	8340	16,555	10,388	(6,167)
Other Customer Support Services	8341	12,810	12,852	42
Customer Training	8342	627,723	632,562	4,839
Customer Supportive Services	8343	1,432	0	(1,432)
Licensures	8344	(93)	110	203
Training Related Material	8345	9,788	21,760	11,972
Fees/exams/certifications	8346	<u>3,351</u>	<u>7,756</u>	<u>4,406</u>
Total Program Expenses		1,479,666	1,265,251	(214,415)
Professional Fees				
Accounting/Audit Fees	5100	31,934	16,991	(14,943)
Legal Fees	5101	66,006	37,290	(28,716)
Professional Service	5104	43,256	82,622	39,366
Legal (Lobbying)	5105	15,000	15,000	0
Contract Labor	5170	68,914	65,944	(2,970)

CareerSource Pinellas
Statement of Revenues and Expenditures
From 7/1/2023 Through 12/31/2023
(In Whole Numbers)

		Actual 2023-2024	Actual 2022-2023	Variance
Contract IT Services	5171	119,478	122,967	3,489
Cybersecurity - IT	5172	26,522	25,310	(1,212)
Total Professional Fees		371,110	366,124	(4,986)
Supplies				
Office Supplies	5302	7,821	9,542	1,721
Postage/Shipping	5307	2,706	1,174	(1,533)
Document Shredding	5308	585	507	(78)
Total Supplies		11,113	11,223	110
Insurance				
Insurance - Commercial Property	5400	4,412	3,364	(1,048)
Insurance - General Liability	5401	37,988	38,920	932
Insurance - Workers Comp	5403	19,305	7,208	(12,097)
Insurance - Auto	5404	0	4,032	4,032
Total Insurance		61,705	53,524	(8,181)
Occupancy				
Office Rent/Lease	5200	137,647	133,708	(3,939)
Utilities	5202	21,681	17,043	(4,638)
Repairs & Maintenan	5203	1,513	7,678	6,165
Security	5204	364	234	(130)
Janitorial Expense	5205	21,098	18,439	(2,659)
Pest Control	5206	1,386	1,290	(96)
Total Occupancy		183,688	178,391	(5,297)
Office Equipment				
Equipment Rent/Lease	5300	13,915	15,318	1,404
Copy Machine Usage/Maintenance	5301	8,277	3,772	(4,505)
Comp	5304	38,771	114,008	75,237
Software/License/Maintenance				
Equipment < \$5,000	5305	2,854	4,727	1,873
Equipment >or= \$5,000	5306	0	8,350	8,350
Total Office Equipment		63,818	146,176	82,358
Travel and Meetings				
Travel - Mileage	5540	5,825	4,050	(1,775)
Travel - Out of Town	5541	32,120	20,345	(11,776)
Meetings/Conferences	5560	10,198	12,015	1,817
Total Travel and Meetings		48,144	36,410	(11,734)
Licenses, Dues and Other Fees				
Staff Training/Education	5052	5,521	5,716	195
Recruitment	5095	0	2,162	2,162
Payroll Processing Fees	5103	4,695	5,318	623
License/Dues & Other Fees	5581	19,065	24,119	5,054
HSA\FSA Administrative Expenses	5582	275	0	(275)
401k Administrative Fees	5583	0	5,650	5,650
HRIS Administrative Fees	5584	6,096	6,573	478
Total Licenses, Dues and Other Fees		35,651	49,538	13,886
Miscellaneous				
Bank Fees	5102	0	45	45
Other Expense	5700	7,490	11,209	3,719
Vehicle Expenses	5701	0	230	230
Total Miscellaneous		7,490	11,484	3,994
Allocations				
Board Cost Pool Allocation	9800	0	684	684
Indirect Program Cost Pool Allocation	9807	0	(684)	(684)

CareerSource Pinellas
Statement of Revenues and Expenditures
From 7/1/2023 Through 12/31/2023
(In Whole Numbers)

	<u>Actual 2023-2024</u>	<u>Actual 2022-2023</u>	<u>Variance</u>
Total Allocations	<u>0</u>	<u>0</u>	<u>0</u>
Total Expenditures	<u>4,761,726</u>	<u>4,177,078</u>	<u>(584,648)</u>
Net Revenue over (under) Expenditures	<u>(7,334)</u>	<u>1,028</u>	<u>(8,362)</u>

CareerSource Pinellas

Statement of Revenues and Expenditures - 2023-24 Actual vs Budget Mod 3

From 7/1/2023 Through 12/31/2023

(In Whole Numbers)

		Actual YTD	YTD Budget Mod 3	YTD Variance	Total FY Budget Mod 3	Budget Remaining
Revenue						
Operating Revenue						
Grant Revenue						
Grant Revenue - Federal	3000	4,682,981	4,702,585	(19,604)	8,957,702	(4,274,721)
Grant Revenue - State	3001	500	500	0	200,000	(199,500)
Total Grant Revenue		4,683,481	4,703,085	(19,604)	9,157,702	(4,474,221)
Contributions						
Corporate Revenue	3100	1,880	1,200	680	2,400	(520)
Total Contributions		1,880	1,200	680	2,400	(520)
Program Revenue						
Ticket to Work Revenue	3103	27,291	25,615	1,676	60,000	(32,709)
Total Program Revenue		27,291	25,615	1,676	60,000	(32,709)
Investment Income						
Interest/Dividends	3200	41,740	41,739	1	82,000	(40,260)
Total Investment Income		41,740	41,739	1	82,000	(40,260)
Total Operating Revenue		4,754,392	4,771,639	(17,247)	9,302,102	(4,547,710)
Total Revenue		4,754,392	4,771,639	(17,247)	9,302,102	(4,547,710)
Expenditures						
Personnel Expenses						
Salary Expense	5000	1,814,083	1,814,084	1	3,494,754	1,680,671
Salary Expense - Benefit Stipend	5005	415,143	415,143	0	755,156	340,013
Payroll Taxes	5050	151,752	151,723	(29)	329,872	178,120
Fringe Benefits (ER Paid)	5060	17,883	17,882	(1)	40,275	22,392
Retirement	5090	100,481	100,681	200	206,516	106,035
Total Personnel Expenses		2,499,342	2,499,513	171	4,826,573	2,327,231
Program Expenses						
Food and Beverages	5310	1,993	2,100	107	4,200	2,207
Communications	5500	49,214	47,760	(1,454)	95,520	46,306
Outreach/Marketing	5520	16,633	23,250	6,617	35,400	18,767
Service Provider Contract	8000	196,287	204,390	8,103	515,000	318,713
One-Stop Operator	8100	22,211	24,000	1,789	48,000	25,789
Internal Monitoring	8200	34,013	34,000	(13)	68,000	33,988
OJT	8300	329,594	329,594	(0)	770,000	440,406
Paid Work Experience	8320	146,153	60,000	(86,153)	120,000	(26,153)
Workforce Services	8335	12,000	12,000	0	24,000	12,000
Youth Stipends	8340	16,555	14,000	(2,555)	16,500	(55)
Other Customer Support Services	8341	12,810	12,600	(210)	25,200	12,390

CareerSource Pinellas

Statement of Revenues and Expenditures - 2023-24 Actual vs Budget Mod 3

From 7/1/2023 Through 12/31/2023

(In Whole Numbers)

		Actual YTD	YTD Budget Mod 3	YTD Variance	Total FY Budget Mod 3	Budget Remaining
Customer Training	8342	627,723	639,000	11,277	1,138,000	510,277
Customer Supportive Services	8343	1,432	1,431	(1)	8,000	6,568
Licensures	8344	(93)	0	93	0	93
Training Related Material	8345	9,788	24,300	14,512	48,600	38,812
Fees/exams/certifications	8346	3,351	12,600	9,249	25,200	21,849
Total Program Expenses		1,479,666	1,441,025	(38,641)	2,941,620	1,461,954
Professional Fees						
Accounting/Audit Fees	5100	31,934	23,750	(8,184)	56,250	24,316
Legal Fees	5101	66,006	48,000	(18,006)	96,000	29,994
Professional Service	5104	43,256	42,960	(296)	85,920	42,664
Legal (Lobbying)	5105	15,000	0	(15,000)	25,000	10,000
Contract Labor	5170	68,914	68,900	(14)	131,800	62,886
Contract IT Services	5171	119,478	119,718	240	245,340	125,862
Cybersecurity - IT	5172	26,522	23,580	(2,942)	47,160	20,638
Total Professional Fees		371,110	326,908	(44,202)	687,470	316,360
Supplies						
Office Supplies	5302	7,821	11,350	3,529	22,450	14,629
Postage/Shipping	5307	2,706	1,650	(1,056)	3,300	594
Document Shredding	5308	585	702	117	1,404	819
Total Supplies		11,113	13,702	2,589	27,154	16,041
Insurance						
Insurance - Commercial Property	5400	4,412	4,500	88	9,000	4,588
Insurance - General Liability	5401	37,988	38,500	512	77,000	39,012
Insurance - Workers Comp	5403	19,305	17,026	(2,279)	34,054	14,749
Total Insurance		61,705	60,026	(1,679)	120,054	58,349
Occupancy						
Office Rent/Lease	5200	137,647	137,066	(581)	256,415	118,768
Utilities	5202	21,681	19,600	(2,081)	36,700	15,019
Repairs & Maintenance	5203	1,513	2,370	857	4,680	3,167
Security	5204	364	234	(130)	468	104
Janitorial Expense	5205	21,098	19,890	(1,208)	39,780	18,682
Pest Control	5206	1,386	1,290	(96)	2,580	1,194
Total Occupancy		183,688	180,450	(3,238)	340,623	156,935
Office Equipment						
Equipment Rent/Lease	5300	13,915	12,006	(1,909)	24,012	10,097
Copy Machine Usage/Maintenance	5301	8,277	4,500	(3,777)	9,000	723
Comp Software/License/Maintenance	5304	38,771	85,441	46,670	111,077	72,306
Equipment < \$5,000	5305	2,854	9,000	6,146	18,000	15,146

CareerSource Pinellas

Statement of Revenues and Expenditures - 2023-24 Actual vs Budget Mod 3

From 7/1/2023 Through 12/31/2023

(In Whole Numbers)

		Actual YTD	YTD Budget Mod 3	YTD Variance	Total FY Budget Mod 3	Budget Remaining
Total Office Equipment		<u>63,818</u>	<u>110,947</u>	<u>47,129</u>	<u>162,089</u>	<u>98,271</u>
Travel and Meetings						
Travel - Mileage	5540	5,825	5,450	(375)	10,900	5,075
Travel - Out of Town	5541	32,120	32,121	1	32,750	630
Meetings/Conferences	5560	<u>10,198</u>	<u>14,000</u>	<u>3,802</u>	<u>18,850</u>	<u>8,652</u>
Total Travel and Meetings		48,144	51,571	3,427	62,500	14,356
Licenses, Dues and Other Fees						
Staff Training/Education	5052	5,521	28,750	23,229	43,050	37,529
Recruitment	5095	0	2,400	2,400	4,800	4,800
Payroll Processing Fees	5103	4,695	3,250	(1,445)	6,500	1,805
License/Dues & Other Fees	5581	19,065	26,692	7,627	40,339	21,274
HSA\FSA Administrative Expenses	5582	275	540	265	1,080	805
HRIS Administrative Fees	5584	<u>6,096</u>	<u>3,900</u>	<u>(2,196)</u>	<u>7,800</u>	<u>1,704</u>
Total Licenses, Dues and Other Fees		35,651	65,532	29,881	103,569	67,918
Miscellaneous						
Other Expense	5700	<u>7,490</u>	<u>0</u>	<u>(7,490)</u>	<u>0</u>	<u>(7,490)</u>
Total Miscellaneous		<u>7,490</u>	<u>0</u>	<u>(7,490)</u>	<u>0</u>	<u>(7,490)</u>
Total Expenditures		<u>4,761,726</u>	<u>4,749,674</u>	<u>(12,052)</u>	<u>9,271,652</u>	<u>4,509,926</u>
Net Revenue over (under) Expenditures		<u>(7,334)</u>	<u>21,965</u>	<u>(29,299)</u>	<u>30,450</u>	<u>(37,784)</u>



CareerSource Pinellas
Cost Allocation/Expenditure Report
For the Six Months Ended December 31, 2023

Approved 2023-2024 Planning Budget
 Approved Budget Modification #1
 Approved Budget Modification #2
 Approved 2023-2024 Planning Budget

	WIOA	Employment Services	WTP	SNAP	TAA	Total Direct Grants and Spec Projects	Total
Approved 2023-2024 Planning Budget	5,533,069	1,534,000	2,400,000	400,000	10,000	453,953	10,331,022
Approved Budget Modification #1	(724,054)	139,687	(250,000)		-	-	(834,367)
Approved Budget Modification #2	-		-	-	-		-
Approved 2023-2024 Planning Budget	4,809,015	1,673,687	2,150,000	400,000	10,000	453,953	9,496,655
Expenditures to Date:							
Pooled Costs							-
Administrative	262,214	89,381	71,276	16,935	918	7,455	448,179
MIS\Technology	217	44,491	0	3,669	0	0	48,377
Outreach and Marketing	267	54,920	0	6,161	0	0	61,348
Staff Training Cost Pool	21	1,854	0	0	0	0	1,875
One-Stop Cost Pool	696	169,499	0	10,674	0	0	180,869
Program Management	339,628	197,959	127,390	77,205	0	0	742,182
Business Services	432,229	90,702	139,219	0	0	0	662,150
Indirect Program	899	3,203	2,949	625	4	276	7,956
Total Pooled Costs	1,036,171	652,009	340,834	115,269	922	7,731	2,152,936
	40%	68%	38%	48%	10%	10%	45%
Direct Costs							
Personnel Expenses	457,216	184,351	151,020	112,965	-	-	905,552
Service Provider Contracts	195,420	-	867	-	-	-	196,287
Workbased Learning Initiatives	184,558	-	291,190	-	-	-	475,748
Training and Support Services	632,226	8,277	30,290	167	6,715	1,892	679,567
Other Direct Operating Costs	78,812	107,237	81,302	14,070	1,593	68,622	351,636
Total Direct Costs	1,548,232	299,865	554,669	127,202	8,308	70,514	2,608,790
	60%	32%	62%	52%	90%	90%	55%
Total Costs	2,584,403	951,874	895,503	242,471	9,230	78,245	4,761,726
Unexpended Budget Balance	2,224,612	721,813	1,254,497	157,529	770	375,708	4,734,929
Percentage of Budget Expended	53.7%	56.9%	41.7%	60.6%	92.3%	17.2%	50.1%



CareerSource Pinellas
Pooled Cost Expenditure Report
For the Six Months Ended December 31, 2023

Expenditure	Admin	MIS/Tech Cost Pool	Outreach & Marketing Cost Pool	Staff Training Cost Pool	One-Stop Cost Pool	Case Mgmt Cost Pool	Business Services Cost Pool	Program Indirect	Total
Salary Expense	260,394	-	-	-	-	480,437	429,217	5,460	1,175,508
Salary Expense - Benefit Stipend	33,249	-	-	-	-	106,266	106,873	600	246,988
Payroll Taxes	19,020	-	-	-	-	38,956	37,316	396	95,688
Fringe Benefits (ER Paid)	2,459	-	-	-	-	5,021	4,402	-	11,882
Retirement	13,772	-	-	-	-	25,281	24,373	298	63,724
Total Salary and Benefits	328,894	-	-	-	-	655,961	602,181	6,754	1,593,790
Office Rent/Lease	17,735	-	-	-	76,403	16,620	21,900	379	133,037
Professional Service	-	-	39,339	-	-	-	-	-	39,339
Contract Labor	-	36,400	-	-	-	-	-	-	36,400
Internal Monitoring	9,016	-	-	-	-	24,996	-	-	34,012
Accounting/Audit Fees	31,934	-	-	-	-	-	-	-	31,934
Insurance - General Liability	8,129	27	-	-	-	14,617	4,159	173	27,105
Communications	3,101	229	-	-	11,131	4,732	6,160	66	25,419
One-Stop Operator	-	-	-	-	22,211	-	-	-	22,211
Utilities	-	-	-	-	21,681	-	-	-	21,681
Janitorial Expense	-	-	-	-	21,098	-	-	-	21,098
Outreach/Marketing	-	-	16,559	-	-	-	48	-	16,607
License/Dues & Other Fees	3,537	250	5,450	-	-	544	6,180	104	16,065
Travel - Out of Town	5,128	-	-	-	-	4,300	5,711	-	15,139
Contract IT Services	3,181	1,905	-	-	-	4,725	2,953	67	12,831
Insurance - Workers Comp	2,765	-	-	-	-	4,964	4,528	67	12,324
Equipment Rent/Lease	766	-	-	-	9,260	655	995	15	11,691
Comp Software/License/Maintenance	3,961	5,940	-	-	-	1,111	-	84	11,096
Legal Fees	10,787	-	-	-	-	-	-	-	10,787
Copy Machine Usage/Maintenance	1,459	-	-	-	4,449	304	526	23	6,761
HRIS Administrative Fees	5,989	-	-	-	-	-	-	107	6,096
Meetings/Conferences	1,750	-	-	-	-	1,050	2,948	-	5,748
Office Supplies	500	-	-	-	3,560	664	871	13	5,608
Staff Training/Education	3,646	-	-	1,875	-	-	-	-	5,521
Cybersecurity - IT	466	3,350	-	-	-	1,106	408	-	5,330
Payroll Processing Fees	4,599	-	-	-	-	-	-	96	4,695
Insurance - Commercial Property	302	-	-	-	3,397	331	309	7	4,346
Workforce Services	-	-	-	-	-	4,000	-	-	4,000
Equipment < \$5,000	-	-	-	-	1,679	1,175	-	-	2,854
Postage/Shipping	50	-	-	-	2,506	50	83	-	2,689
Travel - Mileage	305	-	-	-	-	205	2,141	-	2,651
Repairs & Maintenananc	-	275	-	-	1,238	-	-	-	1,513
Pest Control	-	-	-	-	1,386	-	-	-	1,386
Document Shredding	78	-	-	-	507	-	-	-	585
Security	-	-	-	-	364	-	-	-	364
HSA\FSA Administrative Expenses	102	-	-	-	-	72	51	-	225
Other\Rounding	-	1	-	-	(1)	-	(2)	-	(2)
	448,180	48,377	61,348	1,875	180,869	742,182	662,150	7,955	2,152,936

CareerSource Pinellas																	
Grant Status Report																	
12/31/2023														2023-2024 Fiscal Year			
														50% through the Fiscal year as of 12/31/2023			
						1/12/2024											
	Program						Cash Drawn	Funds	LTD Expenditures	Unexpended	31-Dec						
MIP Fund #	Year	NFA ID	Program Name	Start Date	End Date	NFA Award	12/19/2023	Available	12/31/2023	Funds	Obligations	% Funds Spent	Time % of Grant	2023/2024	2023/2024	Unexpended	Percentage
Workforce Innovation & Opportunity Act																	
0307/0407	2022	41376	WIOA Youth 2022	4/1/2022	6/30/2024	1,083,069	839,000	244,069	755,570	327,499	371,612	70%	78%	1,400,000	755,570	644,430	54%
0308/0408	2023	42512	WIOA Youth 2023	4/1/2023	6/30/2025	918,857	-	918,857	-	918,857		0%	33%		-		
0107	2022	41522	WIOA - Adult - 2022-2024	7/1/2022	6/30/2024	1,363,109	1,363,109	-	1,363,109	-		100%	75%	1,150,000	477,707	285,044	75%
0108	2023	42799	WIOA - Adult - 2023-2025	7/1/2023	6/30/2025	1,145,026	25,000	1,120,026	387,249	757,777	118,380	34%	25%		387,249		
0207	2022	41546	WIOA - Dislocated Worker - 2022-2024	7/1/2022	6/30/2024	1,452,166	1,017,250	434,916	742,498	709,668	38,657	51%	75%	1,750,000	616,671	1,133,329	35%
0208	2023	42852	WIOA - Dislocated Worker - 2023-2025	7/1/2023	6/30/2025	1,208,487		1,208,487	-	1,208,487		0%	25%		-		
0551	2022	42828	Rapid Response - 2023	7/1/2023	6/30/2024	75,000	19,000	56,000	16,794	58,206		22%	50%	100,000	16,794	83,206	17%
0556	2022	42490	Get There Faster Low Inc. Returning Adult Learners	7/1/2022	6/30/2024	344,500	344,500	-	344,500	-	9,123	100%	75%	280,890	280,890	0	100%
0570	2023	43056	WIOA Hope Florida	7/1/2023	6/30/2025	128,127	-	128,127	-	128,127		0%	25%	63,125	-	63,125	0%
0575	2022	43209	Board Consolidation and Realignment	10/1/2023	9/30/2024	50,000	17,000	33,000	40,818	9,182		82%	25%	200,000	40,818	159,182	20%
0580	2023	43106	Hurricane Idalia Emergency DW Grant	8/28/2023	8/27/2025	500,000	16,750	483,250	8,706	491,294		2%	17%	25,000	8,706	16,294	35%
						8,268,341	3,641,609	4,626,732	3,659,244	4,609,096				4,969,015	2,584,404	2,384,611	52%
Employment Services																	
1408	2022	42212	Local Veterans - 2022-2024	10/1/2022	12/31/2024	50,015	25,199	24,816	23,587	26,428		47%	56%	24,000	16,492	7,508	69%
1409	2023	43269	Local Veterans - 2023-2025	10/1/2023	12/31/2025	13,813	-	13,813	-	13,813		0%	11%		-	-	
1308	2022	42343	Disabled Veterans -2022-2024	10/1/2022	12/31/2024	175,381	81,389	93,992	79,836	95,545		46%	56%	120,000	59,286	60,714	49%
1309	2023	43323	Disabled Veterans -2023-2025	10/1/2023	12/31/2025	26,315	-	26,315	-	26,315		0%	11%		-	-	
1107	2022	41601	Wagner Peyser 2022-2023	7/1/2022	9/30/2023	862,212		-	862,212	-		100%	100%	850,000	250,317	485,161	43%
1108	2023	42880	Wagner Peyser 2023-2024	7/1/2023	9/30/2024	776,626	138,500	638,126	114,522	662,104		15%	40%		114,522		
0531	2021	42388	Recovery Navigator Project 2021-2021	7/1/2022	12/31/2023	50,000	50,000	-	50,000	-		100%	100%	100,000	50,000	50,000	50%
1150	2023	43032	Florida Hope Navigator	7/1/2023	6/30/2025	89,689	1,000	88,689	2,813	86,876		3%	25%	44,687	2,813	41,874	6%
0527	2023	42911	Apprenticeship Navigator -2023	7/1/2023	6/30/2024	62,500	36,000	26,500	41,229	21,271		66%	50%	65,000	41,229	23,771	63%
3108	2022	41943	RESEA 2022-2023	1/1/2022	9/30/2024	359,403	359,403	-	359,403	-		100%	73%	425,000	218,320	7,785	98%
3109	2023	43081	RESEA 2023-2024	1/1/2023	9/30/2024	482,814	173,000	309,814	198,895	283,919		41%	57%	-	198,895		
						2,948,768	1,726,703	1,222,065	1,732,497	1,216,271				1,628,687	951,875	676,813	58%
Supplemental Nutrition Assistance Program																	
1508	2022	41968	Supplemental Nutrition Assistance Program - 2022	10/1/2022	9/30/2023	461,628	461,628	-	461,628	-		100%	100%	400,000	143,135	157,529	
1509	2023	43162	Supplemental Nutrition Assistance Program - 2023	10/1/2023	9/30/2024	281,705	70,426	211,279	99,336	182,369		35%	25%		99,336		
						743,333	532,054	211,279	560,964	182,369				400,000	242,471	157,529	61%
Welfare Transition																	
2612	2022	41913	Welfare Transition Prog -Oct - Aug 2023	10/1/2022	8/31/2023	1,515,675	1,515,675	-	1,515,675	-		100%	100%	2,150,000	260,355		
2613	2023	42771	Welfare Transition Prog - July - Sept 2023	7/1/2023	11/30/2023	470,652	470,652	-	470,652	-		100%	120%		470,652		
2614	2023	43240	Welfare Transition Prog - Oct 2023 - June 2024	10/1/2023	6/30/2024	1,411,956	114,000	1,297,956	164,496	1,247,460		12%	33%		164,496		
						1,986,327	1,986,327	-	2,150,823	-				2,150,000	895,503	1,254,497	42%
Trade Adjustment Assistance																	
2007	2022	42003	Trade Adj Assistance - Training 2022	10/1/2022	9/30/2023	8,394	8,394	-	8,394	-		100%	100%	6,000	3,686		
2008	2023	43190	Trade Adj Assistance - Training 2023	10/1/2023	9/30/2024	8,394	3,000	5,394	3,028	5,366		36%	25%		3,028		
2107	2022	41986	Trade Adj Assistance - Case Management 2022	10/1/2022	9/30/2023	3,738	3,738	-	3,738	-		100%	100%	4,000	1,758		
2108	2023	43201	Trade Adj Assistance - Case Management 2023	10/2/2023	9/30/2024	3,850	3,000	850	757	3,093		20%	25%		757		
						24,376	18,132	6,244	15,917	8,458				10,000	9,230	770	92%
Direct Services																	
			Transition Costs												-		
8000			Corporate\Unrestricted			-			-					144,400	78,245	66,155	54%
						-	-	-	-	-				144,400	78,245	66,155	54%
						13,971,145	7,904,825	6,066,319	8,119,446	6,016,194				9,302,102	4,761,727	4,540,375	51%
	Program						LTD Expend	LTD	LTD Expend			Category	Category		4,761,727	Check total	
MIP Fund #	Year	NFA ID	Program Name	Start Date	End Date	NFA Award	12/31/2023	Admin	Less Admin			Category	Amount	Percentage	Goal	-	
0307/0407	2022	41376	WIOA Youth 2022	4/1/2022	6/30/2024	\$ 1,083,069	\$ 755,570	\$ 75,258	\$ 680,312			PWE	269,535	39.6%	20%		
0308/0408	2023	42512	WIOA Youth 2023	4/1/2023	6/30/2025	\$ 918,857	\$ -	\$ -	\$ -			OSY	597,808	87.9%	50%		
						\$ 2,001,926	\$ 755,570	\$ 75,258	\$ 680,312								
0107	2022	41522	WIOA - Adult - PY22	7/1/2022	6/30/2024	\$ 1,363,109	\$ 1,363,109	\$ 131,182	\$ 1,231,927			ITA State	693,621	56.3%	35%		
0108	2023	42799	WIOA - Adult - PY23	7/1/2023	6/30/2025	\$ 1,145,026	\$ 387,249	\$ 36,805	\$ 350,444			ITA State	148,565	42.4%	35%		
						\$ 2,508,135	\$ 1,750,358	\$ 167,987	\$ 1,582,371				842,186	53.2%	35%		
0207	2022	41546	WIOA - Dislocated Worker - PY22	7/1/2022	6/30/2024	1,452,166	742,498	\$ 86,118	\$ 656,380			ITA State	288,834	44.0%	35%		
0208	2021	42852	WIOA - Dislocated Worker - 2023-2025	7/1/2023	6/30/2025	1,208,487	-	\$ -	\$ -			ITA State	-		35%		