

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

1	4	ZU (J 9	
		1 1 1		
Οp	enito	Publi	cins	ection

OMB No 1545-0047

	For t	he 2009 calen	dar year,	or tax year beginning	· · · · · · · · · · · · · · · · · · ·	, 2009, and endi	ng			
В	Check	ıf applicable		С			·	D Employ	er ident	ification Number
	Па	ddress change	Please use IRS label	INSTITUTE FOR I	THE STUDY OF K	NOWLEDGE		41-2	2045	091
	\square_{N}	ame change	or print or type.	MANAGEMENT IN E				E Telepho	ne num	ber
	\vdash	itial return	See specific	323 HARVARD AVE				650	-728	-3322
	-	ermination	Instruc-	HALF MOON BAY,	CA 94019			<u> </u>		
	\vdash		tions.					G Gross re		s 2,076,809.
	\mathbf{H}	mended return	E Name	and address of principal officer	LISA PETRIDE	<u> </u>	H(a) Is this	a group retur	_	
	LJ^A	pplication pending	1	• •	DISK PEIKIDE	3	1	affiliates incl		Yes ANO
				AS C ABOVE) T 40477 V	1) [[507		attach a list		itructions)
Ļ.		exempt statu			no) 4947(a)(1) or 527	-		_	
<u>J</u>			W.ISKM					exemption nu		
K		n of organization	X Corpora	ation Trust Associa	tion Other►	L Year of Form	ation 200	2 M/s	tate of I	egal domicile CA
Pa		Summa								
	1			ganization's mission or n						
ė				MPROVING THE PR						
Activities & Governance				_SERVES_AS_AN_I		OK CONTINUO	AZ TRAF	KNT NG° -	COPI	LABORATION
, E	_		GE_IN_	THE EDUCATION S	ECTOR					
ĝ	2	Check this bo	ох Б	If the organization discontinuous of the governing bo	ntinued its operations	or aisposed of m	nore than 2	231 TO %C: 	assets 3	; 7
ಳ				nt voting members of the		VI line 1h)			4	
Ses				yees (Part V, line 2a)	governing body (r are	¥1, IIIC 10)			5	5 13
Ξ				eers (estimate if necess	arv)				6	5
Act				ousiness revenue from P		ne 12			7a	0.
		-		s taxable income from Fo					7b	0.
		14ct difference	r business	taxable income nomi e	1111 350 1, III.C 01			wien Veen		
2	_	۾ ا	1800	1 - (D 1) (III 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				rior Year 667,2	70	Current Year 1,616,209.
Re -Ven 2010		Contributions	anorgran	its (Part VIII - line 1h)				42,2		450,349.
	9				. 2 1 and 7d\					
é	10	investment dr	icome (Pa	art VIII, column (A) lines	5 3, 4, and 7d)	la)		<u>14,3</u> 5,9		2,810. 7,441.
`	11	Other revenu	e (Pary	ll), column (A), lines 5,6 nes 8 through 11 (must	ou, oc, 9c, 10c, and 11	n (A) line 10		729,7		2,076,809.
ر ا	12	Total revenue	ei— add ii	ounts paid (Part IX ccolu	equal Part VIII, Colum	II (A), IIIIe 12)		123,1	20.	2,010,803.
נ							—			
-	14	Benefits paid		members (PartitX, colun	nn (A), line 4).			406.0	~-	
បីខ	15			nsation, employee benef		4), lines 5-10)		496,8	21.	687,221.
Expenses	16 a	Professional	fundraisin	ng fees (Part IX, column	(A), line 11e)		(A) 7 Z C	ar variation / b. carrell	1.76 (0.34	inguista a company Company, a se anno se
Ş &	b	Total fundrais	sing expe	nses (Part IX, column (D), line 25) 🟲	79,705.	12.7			
5 "	17	Other expens	ses (Part I	IX, column (A), lines 11a	-11d, 11f-24f)			450,3	52.	597,010.
	18	•		nes 13-17 (must equal P		ne 25)		947,1	79.	1,284,231.
	19	•		s Subtract line 18 from		,		-217,4	$\overline{}$	792,578.
2.8		7.10.107.10.0		<u> </u>			Rogin	nning of Y		End of Year
at Assets or ad Balances	20	Total assets	/Part Y li	ne 16)			Begii	463,8		1,242,897.
ABO		Total liabilitie						80,8		67,325.
Funda Funda							-			
	22 rt II		ure Bloc	ances. Subtract line 21 f	rom line 20			382,9	94.	1,175,572.
Г	rt II									
		Under penaltie true, correct, a	es of perjury, and complete	I declare that I have examined to Declaration of preparer (other to	nis return, including accompa han officer) is based on all in	nying schedules and st iformation of which pre	tatements, and parer has any	l to the best o knowledge	of my kn	owledge and belief, it is
٠.		\ \ \alpha.	(ا نم	1 -1.			1			
Sig He	ın	- 100	<u> 179 YZ</u>	Mar			1			
пе	re	Signature	of officer	and On	• 6 1		Da	"e	اسے	
			rsa ro	ardes, re	sident				01	10
		Type or p	nnt name an	J title		15	-		I D.	
n .		i	4.	10	100	Date		heck if elf-		reparer's identifying number ee instructions)
Pa		Preparer's		Maini m	KIINen	1 11/12/	2010 "	mployed P		P01236188
Pre	er's:	signature	<u>- </u>	COUNTY FIFT	- vine/					
Us		Firm's name (CPA					
On		yours if self- employed),		BOX 94			E	<u>in</u> ► 7		116015
		address, and ZIP + 4	PAL_	O ALTO, CA 9430	2		Р	hone no	(65)	0) 814-0446
Ma	/ the	IRS discuss th	nis return	with the preparer shown	above? (see instructi	ons)				X Yes No
				rwork Reduction Act No				TEEA0113	12/29	909 Form 990 (2009)

Form !	990 (2009) INSTITUTE FOR THE STUDY OF KNOWLEDGE	41-204509	1	Page 2
Part,	III Statement of Program Service Accomplishments			
-	Briefly describe the organization's mission ISKME IS A RESEARCH INSTITUTE DEDICATED TO IMPROVING THE PRACTICE ACCESS AND KNOWLEDGE SHARING AND BY DESIGN, SERVES AS AN INTERMED LEARNING, COLLABORATION AND CHANGE IN THE EDUCATION SECTOR.			00s
	Did the organization undertake any significant program services during the year which were not listed on	the prior		
	Form 990 or 990-EZ? If 'Yes,' describe these new services on Schedule O		Yes [X No
	Did the organization cease conducting, or make significant changes in how it conducts, any program serv If 'Yes,' describe these changes on Schedule O	ices?	Yes [X No
4 (Describe the exempt purpose achievements for each of the organization's three largest program services and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and expenses, and revenue, if any, for each program service reported	by expenses Sec allocations to oth	tion 501 ers, the	1(c)(3) total
- -	(Code	MENT OF KN	POLIC	GE
_	(Code (Expenses \$ 218,285. including grants of \$) (FRESEARCH PROGRAM - ISKME CONDUCTS SOCIAL SCIENCE RESEARCH AND EVALUATION SHARING AND KNOWLEDGE COLLABORATION IN THE EDUCATION S		17	,500.)
_	(Code [Code] (Expenses \$ 192,712. including grants of \$) (FFIELD BUILDING - ISKME DESIGNS AND IMPLEMENTS FIELD-BUILDING ACTIVAND WORKSHOPS IN KNOWLEDGE COLLABORATION AND INNOVATION.			,349.)
- - - - - - -				
	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ► 1,076,334.			

u	1114 S. Officerist of required softedures			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1_1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	4		х
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II .	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	X	Systimate.
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII			
•	• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
	 Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part IX 			
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			
•	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? If 'Yes,' complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		Х
12/	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No 12 A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u> </u>
ŀ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		_X_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15	_	Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

Form 990 (2009) INSTITUTE FOR THE STUDY OF KNOWLEDGE

Part.IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		<u>x</u>
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		Х_
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		Х
t	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		
25 :	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25 a		X
ı	b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		Х_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		_ X_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	X	
3AA		Form	990	(2009)

INSTITUTE FOR THE STUDY OF KNOWLEDGE 41-2045091 Page 5 Form 990 (2009) Statements Regarding Other IRS Filings and Tax Compliance No Yes 1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. 27 Information Returns Enter 0- if not applicable 1a 1b 0 b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c 2 a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the 13 calendar year ending with or within the year covered by this return X 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by 3a Х this return b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in 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)? X 4 a **b** If 'Yes,' enter the name of the foreign country. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. X 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction 5 c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible? 6a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not 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 7 a Х provided to the payor? 7 b **b** If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Dtd the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7 c X d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal X 7 e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f X g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 100 8 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9=

b Did the organization make any distribution to a donor, donor advisor, or related person?

10 Section 501(c)(7) organizations. Enter-

a Initiation fees and capital contributions included on Part VIII, line 12

b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

11 Section 501(c)(12) organizations. Enter

a Gross income from other members or shareholders

b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12b

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

10 b 11 a

10 a

12a

Form 990 (2009)

9b

BAA

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 in Schedule O See instructions.

Sec	tion A.	Governing Body and Management				
					Yes	No
1 a	Enter the	number of voting members of the governing body	1a 7	19 / # 1-	75 T	1 6
b	Enter the	number of voting members that are independent	1 b 5) . Se	2 (\$	1
2	Did any o	officer, director, trustee, or key employee have a family relationship or a business rector, trustee or key employee?	elationship with any other	် 2		X
	Did the or	rganization delegate control over management duties customarily performed by or s, directors or trustees, or key employees to a management company or other pers	under the direct supervision	3		х
4	Did the or	rganization make any significant changes to its organizational documents		4		Х
	since the	prior Form 990 was filed?				
5	Did the oi	rganization become aware during the year of a material diversion of the organization	on's assets?	5		X
6	Does the	organization have members or stockholders?		6		X
7 a	Does the governing	organization have members, stockholders, or other persons who may elect one or $\ensuremath{\mathrm{Jody}}^{2}$	more members of the	7a		Х
b	Are any o	lecisions of the governing body subject to approval by members, stockholders, or o	other persons?	7b		Х
	the follow	5	ertaken during the year by	E TO	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	-	rning body? nmittee with authority to act on behalf of the governing body?		8a	X	
	Is there a	ny officer, director or trustee, or key employee listed in Part VII, Section A, who ca	annot be reached at the	8b	Λ	.,
		on's mailing address? If 'Yes,' provide the names and addresses in Schedule O	war ward by the Internal	9		<u> </u>
		Policies (This Section B requests information about policies not	required by the internal			
teve	nue Code	/			V	N _a
10 a	Does the	organization have local chapters, branches, or affiliates?		10 a	Yes	No X
		oes the organization have written policies and procedures governing the activities of the organization?	of such chapters, affiliates,	10 b		Λ_
		rganization provided a copy of this Form 990 to all members of its governing body		11	Х	
		in Schedule O the process, if any, used by the organization to review this Form 990	•	ان دروال		- 14 G 0 61
		organization have a written conflict of interest policy? If 'No,' go to line 13	o. SEE SCHEDULE O	12a	X	7 Y
		rs, directors or trustees, and key employees required to disclose annually interests	that could give rice	IZa	^	
	to conflict	s ²	J	12b	Х	
	Schedule	organization regularly and consistently monitor and enforce compliance with the po O how this is done SEE SCHEDULE 0	olicy? If 'Yes,' describe in	12 c	Х	
		organization have a written whistleblower policy?		13	Х	
		organization have a written document retention and destruction policy?		14	X	3 K 1 .98
		rocess for determining compensation of the following persons include a review and comparability data, and contemporaneous substantiation of the deliberation and de nization's CEO, Executive Director, or top management official SEE SCHEDULE		15a	X	
	•	cers of key employees of the organization	-	15 b	-	X
		line 15a or 15b, describe the process in Schedule O. (See instructions.)		34 3 34	1.8.4° · 1	145,57
16 a	Did the or entity dur	ganization invest in, contribute assets to, or participate in a joint venture or similaring the year?	r arrangement with a taxable	16a	ا موجود المعاشد	では X
b	in joint ve	as the organization adopted a written policy or procedure requiring the organization inture arrangements under applicable federal tax law, and taken steps to safeguard hirespect to such arrangements?	n to evaluate its participation d the organization's exempt	16b		A. C.
Sect	ion C.	Disclosures				
17	List the st	ates with which a copy of this Form 990 is required to be filed - CA				
18	inspection	104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an Indicate how you make these available. Check all that apply website X Another's website X Upon request	and 990-T (501(c)(3)s only) av	/aılabl	e for p	oublic
19	Describe	in Schedule O whether (and if so, how) the organization makes its governing docurs available to the public SEE SCHEDULE O	ments, conflict of interest poli	cy, ar	id fina	incial
	State the	name, physical address, and telephone number of the person who possesses the PETRIDES 323 HARVARD AVENUE HALF MOON BAY CA 94019		enizati 	on - <u>-</u>	

Page **7**

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of 'key employees.'
- 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 and/or Box 7 of Form 1099-MISC) 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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees, highest compensated employees, and former such persons.

Check this box if the organization did no (A)	(B)				c)			(D)	(E)	(F)
Name and Title	Average	Pos	tion (-	-	hat appl	y)	· · · · · · · · · · · · · · · · · · ·		Estimated
	hours per week	Individual bustee or director	Insubbonal trustee	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
MARY FURLONG BOARD MEMBER	2	X						0.	0.	0
LANCE IZUMI BOARD MEMBER	2	X						0.	0.	0
LISA PETRIDES PRESIDENT	4	Х		Х		х		118,000.	0.	0
XIAONAN CAO BOARD MEMBER	2	Х						0.	0.	0
ANDREEA M SERBAN BOARD MEMBER	2	Х						0.	0.	0
LAARNI VON RUDEN TREASURER	2			х				0.	0.	0
MARK GRAHAM SECRETARY	1			х				0.	0.	0
	-									

Part VII Section A. Officers, Directors, Trus	(B)	(B) (c)						(D)	(E)	(F)	
Name and Title	Average hours per week	urs ⊨ 🕌		Officer	_	Highest compensated	_	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation froi related organizatio (W-2/1099-MISC	Estimated amount of other compensation from the organization and related organization	her on n d
		rustee	trustee		/ee	npensated		!			
							_				
1 b Total							<u> </u>	118,000.	<u> </u>	0.	0.
2 Total number of individuals (including but not limite from the organization ► 1	d to tho	se lı	sted	ab	ove)) wh	o re	ceived more than	\$100,000 in rep	Yes	No
 3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such I 4 For any individual listed on line 1a, is the sum of rethe organization and related organizations greater tindividual 	ndıvıdua	1	•		•	•			, -	3	X
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sc.	ompens hedule	atio <i>I for</i>	n fr	om a ch pe	any erso	unre n	elate	ed organization fo	services	5	X
Section B. Independent Contractors 1 Complete this table for your five highest compensations.	ted inde	pend	deni	cor	ntra	ctors	s tha	at received more t	han \$100,000 o	f	
compensation from the organization (A)								В), ((C)	
Name and business addres	.s							Description	or Services	Compensation	<u>n</u>
		-									
					-						_
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶		lımı	ited	to ti	hose	e list	ted a	above) who receiv	red more than	myster of the second se	

Page 9

<u>Fai</u>	t VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contributs included in lns 1a-1f \$ h Total. Add lines 1a-1f	1,616,209.	1,616,209.			
PROGRAM SERVICE REVENUE	2a FEES FOR SERVICES b REGISTRATION - EVENTS c d e f All other program service revenue	900099 611430	412,000. 38,349.	412,000. 38,349.		
PRO	 g Total. Add lines 2a-2f 3 Investment income (including dividend other similar amounts) 4 Income from investment of tax-exemp 5 Royalties 	•	450,349. 2,810.	Aller Grand Control of the Control o	٠٠٠ ١ ١ ١ ١ ١ ١ ١ ١ ١ ١ ١ ١ ١ ١ ١ ١ ١ ١	2,810.
	(i) Real 6 a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss)	(II) Personal				
OTHER REVENUE	d Net gain or (loss) 8a Gross income from fundraising events (not including \$	a b events				
	10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inv Miscellaneous Revenue 11 a REIMBURSED EXPENSES b c d All other revenue. e Total. Add lines 11a-11d	a b entory Business Code 900099	7,441.	7,441.	Santa Sa	
	12 Total revenue See instructions	•	2.076.809	457.790	0	2.810

Part IX Statement of Functional Expenses

Section 501(c)(X) and 501(c)(X) organizations must complete all columns.

	All other organizations must com	plete column (A) but are	not required to compl	ete columns (B), (C), ai	nd (D).
Do i	not include amounts reported on lines 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 governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	_			SHAME I
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				理學的主作理學學的
5	Compensation of current officers, directors, trustees, and key employees	118,000.	90,300.	14,500.	13,200.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	489,860.	421,706.	50,781.	17,373.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	27,840.	27,840.		
10	Payroll taxes	51,521.	38,529.	10,510.	2,482.
11	Fees for services (non-employees)				
a	a Management				
ŀ) Legal	9,283.		9,283.	
•	c Accounting	5,418.	837.	4,581.	
•	d Lobbying		-Carriana - a Albana Si	1 3 Service 17 18 18 18 18 18 18 18 18 18 18 18 18 18	
	Prof fundraising svcs See Part IV, In 17		CONTRACTOR	Control Martin	
	Investment management fees	151 000	107 100	1 526	22.005
	g Other	151,999.	127,198.	1,536. 4,373.	23,265. 4,103.
12	· ·	20,392. 5,145.	11,916. 4,655.	4,373.	4,103.
13	Office expenses		93,549.	490.	899.
14	Information technology	94,448.	33,343.		033.
15	Royalties	53,550.	53,550.		
16	Occupancy	40,128.	21,796.	108.	18,224.
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials	40,120.	21,170.	100.	10,224.
19	Conferences, conventions, and meetings	3,833.	3,584.	249.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,808.		2,808.	
	Insurance	6,424.	4,953.	1,471.	4.40. / 5.11./ \$ 1
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
	a EVENTS-FIELD BUILDING	192,031.	166,619.	25,412.	<u> </u>
	TELEPHONE	3,996.	3,915.		81.
	BOARD EXPENSES	1,662.		1,662.	1
	HONORARIUM	1,400.	1,400.	, =-	
	ENTERTAINMENT/MEALS	882.	668.	136.	78.
	f All other expenses	3,611.	3,319.	292.	
	Total functional expenses Add lines 1 through 24f	1,284,231.	1,076,334.	128,192.	79,705.
26	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
RAA					Form 990 (2009)

Balance Sheet Part X (A) End of year Beginning of year 1,074,758. Cash - non-interest-bearing 440,496 1 1 2 155,833. 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 10,000 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 10 a 25,991 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 14,549 12,459. 10 c 11,442 **b** Less accumulated depreciation. 11 11 Investments - publicly-traded securities 12 12 Investments - other securities See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 414 14 414. 14 Intangible assets 450. 450. 15 15 Other assets See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) 463,819. 1,242,897. 16 16 Accounts payable and accrued expenses 80,825. 17 67,325 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities. Complete Part X of Schedule D 25 80,825 26 Total liabilities. Add lines 17 through 25 67,325 17. 为数数 X and complete lines Organizations that follow SFAS 117, check here 27 through 29 and lines 33 and 34. 382,994. 27 1,175,572. 27 Unrestricted net assets 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, and equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 33 382,994. 33 1,175,572 Total net assets or fund balances. 463,819. 34 1,242,897. 34 Total liabilities and net assets/fund balances

BAA Form **990** (2009)

•		
Form 990 (2009) INSTITUTE FOR THE STUDY OF KNOWLEDGE 41-2045091	Pa	age 12
Part XI Financial Statements and Reporting		
	Yes	No
1 Accounting method used to prepare the Form 990: 🔲 Cash 🛛 X Accrual 🔲 Other		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b Were the organization's financial statements audited by an independent accountant?	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?	2c	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:		
Separate basis Consolidated basis Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	

BAA

Form **990** (2009)

TEEA0112L 02/05/10

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Inspection:

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

INSTITUTE FOR THE STUDY OF KNOWLEDGE

MANAGEMENT IN EDUCATION 41-2045091 Part I. Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 11, 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.) 3 A hospital or 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 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 X 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.) 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. ∐Туре Ⅱ Type III – Functionally integrated c [ь Type III- Other a | Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (1)

	(ii) a family mem	nber of a person desc	ribed in (i) above?							11 g (ii)		
	(iii) a 35% contro	olled entity of a persor	described in (i) or (ii) a	bove?						11 g (iii)		
h	Provide the following	ng information about t	he supported organization	ons								
	(i) Name of Supported Organization	(ii) EIN	(lii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat (i) listed	Is the tion in col d in your erning ment?	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of Su		port
				Yes	No	Yes	No	Yes	No			
							1	1				
	· · · · · · · · · · · · · · · · · · ·		····				L					
									 			
Total				3.7		· · · · ·						

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule A (Form 990 or 990-EZ) 2009

11 g (i)



	dule A (Form 990 or 990-EZ) 200					41-204509 nd 1 70(b)(1)(A	
	(Complete only if you check	ed the box on line	5, 7, or 8 of Par	t l.)			
Sec	tion A. Public Support						
Cale begi	ndar year (or fiscal year nnıng ın) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')	339,050.	869,150.	983,525.	667,200.	1,616,209.	4,475,134.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						0.
4	Total. Add lines 1-through 3	339,050.	869,150.	983,525.	667,200.	1,616,209.	4,475,134.
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)						2,732,140.
	Public support. Subtract line 5 from line 4						1,742,994.
Sec	tion B. Total Support			<u></u>	<u> </u>		
Cale beg	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	339,050.	869,150.	983,525.	667,200.	1,616,209.	4,475,134.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	73.	147.	3,784.	14,385.	2,810.	21,199.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) SEE PART IV		185.				185.
11	Total support. Add lines 7 through 10	THE REPORT OF THE PARTY OF THE	ا من المنظم ا المنظم المنظم				4,496,518.
12	Gross receipts from related activ	rities, etc. (see ins	structions)			12	705,549.
13	First five years. If the Form 990 organization, check this box and		ation's first, secor	nd, third, fourth,	or fifth tax year as	s a section 501(c)(3) ▶ □
Sec	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20 Public support percentage from 3	, ,		ne 11, column (f)		14 15	38.8 % 24.5 %
16a 33-1/3 support test — 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization.							
b 33-1/3 support test – 2008. 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.							
17 a	17a 10%-facts-and-circumstances test — 2009 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 IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization						
b	b 10%-facts-and-circumstances test — 2008. 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 IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.						

Page 3

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

(Complete only if you checked the box on line 9 of Part I.) Section A. Public Support (a) 2005 Calendar year (or fiscal yr beginning in) **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions and membership fees received (Do not include 'unusual grants') Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a 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 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 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, 3 received from disqualified persons **b** Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year c Add lines 7a and 7b 上午の日本の日本の **一种,有别性的** から、自動 8 Public support (Subtract line AND THE REST OF THE REST 7c from line 6) Section B. Total Support (d) 2008 **(a)** 2005 **(b)** 2006 (c) 2007 (e) 2009 (f) Total Calendar year (or fiscal yr beginning in) 9 Amounts from line 6 10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 IV.) 13 Total support. (add ins 9, 10c, 11, and 12) 1-05 000 · 宣传 / / / / First five 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 2009 (line 8, column (f) divided by line 13, column (f)) 15 % 16 16 Public support percentage from 2008 Schedule A, Part III, line 15 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 19a 33-1/3 support tests - 2009. 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 - 2008. If the organization did not check a box on line 14 or 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

Schedule A (Form 990 or 990 EZ) 2009 INSTITUTE FOR THE STUDY OF KNOWLEDGE 41-2045091 Page	e 4
Part.IV: Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.	
PART II, LINE 17B - 10% FACTS AND CIRCUMSTANCES TEST - 2008	
SCHEDULE A, PART II, LINE 17B, FACTS AND CIRCUMSTANCES STATEMENT	
1. TEN PERCENT OF SUPPORT LIMITATION	
ISKME'S PUBLIC SUPPORT WAS 24.5%, SIGNIFICANTLY ABOVE THE 10% REQUIRED TO QUALIFY	
ISKME FOR THE FACTS AND CIRCUMSTANCES TEST.	
2. ATTRACTION OF PUBLIC SUPPORT	
ISKME IS ORGANIZED AND OPERATED IN A MANNER TO ATTRACT NEW AND ADDITIONAL PUBLIC OR	
GOVERNMENT SUPPORT ON A CONTINUOUS BASIS.	
ISKME'S EXECUTIVE DIRECTOR/PRESIDENT SPENDS A CONSIDERABLE AMOUNT OF TIME,	
APPROXIMATELY 40 PERCENT, DEDICATED TO FUNDRAISING AND DEVELOPMENT EFFORTS. THIS	
INCLUDES PERSONAL DONOR APPEALS, FUNDING PROPOSALS, AND GENERAL OUTREACH EFFORT TO	
THE PUBLIC AND EDUCATION COMMUNITY, AS WELL AS PRIVATE FOUNDATIONS. THE	
VICE-PRESIDENT AT ISKME CURRENTLY SPENDS APPROXIMATELY 20% OF THE TIME DEDICATED TO	
FUNDRAISING AND DEVELOPMENT AND WORKS WITH THE EXECUTIVE DIRECTOR ON GRANT-WRITING	
AND DONOR APPEALS.	
ISKME PUBLISHES PAPERS, JOURNAL ARTICLES, MONOGRAPHS, AND WHITE PAPERS, WHICH ARE	
DISSEMINATED THROUGH A 12,000 PERSON MAILING LIST, AS A WAY TO HIGHLIGHT ISKME'S	
SUCCESSES AND CURRENT TRENDS IN ITS LINE OF APPLIED EDUCATIONAL RESEARCH AND	
INNOVATIONS. ISKME MAINTAINS A DATABASE WITH OVER 400 INDIVIDUAL AND CORPORATE	
DONORS, IN ADDITION TO THEIR EXISTING FUNDRAISING DATABASE. ISKME CREATES WEB-BASED	
MATERIALS WITH THE ASSISTANCE OF A PUBLIC RELATIONS COMMUNICATIONS FIRM TO HELP IN	
ITS_DEVELOPMENT_EFFORTSISKME_ALSO_MAINTAINS_A_WEBSITE_THROUGH_WHICH_IT_SOLICITS	
ONLINE DONATIONS VIA NETWORKFORGOOD, AND MAINTAINS ITS LISTING ON GUIDESTAR.ORG.	

Schedule A (Form 990 or 990 EZ) 2009 INSTITUTE FOR THE STUDY OF KNOWLEDGE 41-2045091 Page 4 Part: IV. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.
PART II, LINE 17B - 10% FACTS AND CIRCUMSTANCES TEST - 2008 (CONTINUED)
ISKME ORGANIZED AN INTERNATIONAL OUTREACH EVENT DURING DECEMBER 2009, WHICH WAS
ATTENDED BY OVER 175 PARTICIPANTS.
3. PERCENTAGE OF FINANCIAL SUPPORT
ISKME'S 24.5% PUBLIC SUPPORT IS WELL ABOVE THE 10% FLOOR AND REFLECTS THE FACT THAT
THE ORGANIZATION RECEIVES SIGNIFICANT PUBLIC SUPPORT. THE ORGANIZATION IS WORKING
ACTIVELY TO BROADEN ITS SOURCES OF SUPPORT TO INCREASE THE PUBLIC SUPPORT
PERCENTAGE.
4. SOURCES OF SUPPORT FACTOR
ISKME RECEIVES SUPPORT FROM A RANGE OF UNRELATED INDIVIDUAL DONORS AND FOUNDATIONS.
IN ADDITION TO THEIR MONETARY SUPPORT, ISKME ALSO INDIRECTLY BENEFITS FROM IN-KIND
CONTRIBUTIONS FROM VOLUNTEERS. ISKME SOLICITS VOLUNTEERS THROUGH VOLUNTEERMATCH.COM,
CRAIGSLIST, AND THROUGH WORD OF MOUTH.
5. REPRESENTATIVE GOVERNING BODY FACTOR
ISKME'S BOARD OF DIRECTORS CONSISTS OF UNRELATED DIRECTORS WHO HAVE SPECIAL
KNOWLEDGE AND EXPERTISE IN THE ORGANIZATION'S FIELD OF OPERATIONS. BECAUSE ISKME'S
RESEARCH AND PROGRAMS SUPPORT AND DEVELOP THE NON-PROFIT SECTOR IN GLOBAL EDUCATION
EFFORTS, DIRECTORS ARE ELECTED TO THE BOARD BECAUSE OF THEIR EXPERIENCE IN
NON-PROFIT MANAGEMENT, EDUCATIONAL RESEARCH AND PRACTICE, AND KNOWLEDGE MANAGEMENT
EXPERTISE ACROSS THE GLOBE. ISKME ENCOURAGES ALL DIRECTORS TO CONTRIBUTE BOTH TIME
AND MONEY TO THE ORGANIZATION.
6. AVAILABILITY OF PUBLIC FACILITIES OR SERVICES FACTOR
ISKME'S APPLIED RESEARCH IS RELEVANT INTERNATIONALLY, NATIONALLY, AND LOCALLY. THREE

Schedule A (Form 990 or 990-EZ) 2009 INSTITUTE FOR THE STUDY OF KNOWLEDGE 41-2045091 Page Pait.IV- Supplemental Information. Complete this part to provide the explanations required by Part II, line 10;	4
Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.	_
PART II, LINE 17B - 10% FACTS AND CIRCUMSTANCES TEST - 2008 (CONTINUED)	-
TIMES A YEAR, ISKME HOSTS A FREE EDUCATION LEADERSHIP FORUM FOR SAN FRANCISCO BAY	-
EDUCATORS, INCLUDING TEACHERS, LOCAL SCHOOL ADMINISTRATORS, AND COMMUNITY COLLEGE	_
STAFF AND FACULTY. ISKME'S WEBSITE CONTAINS SEVERAL FREELY AVAILABLE TOOLS AND	-
RESOURCES THAT CAN BE USED BY TEACHERS, EDUCATORS, PARENTS, SCHOOL BOARD MEMBERS,	-
AND STUDENTS FOR THE IMPROVEMENT OF STUDENT SUCCESS AND SCHOOL REFORM. DURING 2009	_
ISKME HOSTED AN INAUGURAL EVENT, THE BIG IDEAS FEST.	_
	_
	_
	_
	_
	_
	_
	_
	_
	_
	-
	-
	-
	-
	-
	-
	-
	-
	-
	_
	-

2009

FEDERAL WORKSHEETS

PAGE 1

CLIENT ISKME

INSTITUTE FOR THE STUDY OF KNOWLEDGE MANAGEMENT IN EDUCATION

41-2045091

11/12/10

11·44AM

FORM 990, PART IX, LINE 24 OTHER EXPENSES

		(A)	(B) PROGRAM	(C) MANAGEMENT	(D)
	_	TOTAL_	SERVICES	& GENERAL	<u>FUNDRAISING</u>
BANK SERVICE CHARGES		159.	100.	59.	
BOOKS AND PUBLICATIONS DUES AND SUBSCRIPTIONS		32. 838.	32. 753.	85.	
EQUIPMENT POSTAGE AND SHIPPING		620. 325.	620. 282.	43.	
PRINTING AND PUBLICATIONS REPAIRS		816. 821.	816. 716.	105.	
REFAIRS	TOTAL 3	3,611.	\$ 3,319.	\$ 292.	\$ 0.

EXCESS CONTRIBUTIONS

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open to Public

Name of the organization Employer Identification number INSTITUTE FOR THE STUDY OF KNOWLEDGE MANAGEMENT IN EDUCATION 41-2045091 Partie Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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? No Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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?? Part II. Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Preservation of certified historic structure Protection of natural habitat Preservation of open space 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 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 2d d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements Ŝ during the year > Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, 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' to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, 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) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 SFAS 116 relating to these items. a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedule D (Form 990) 2009 INST]	TUTE FOR	THE STUDY	OF K	NOWLEDGE	4	1-2045	5091		Page 2
Part III Organizations Mainta					r Other Simil	ar Asse	ets (c	ontın	
Using the organization's acquisiti items (check all that apply)	on accession ai	nd other records	s, chec	k any of the following	that are a signif	icant use	of its	collect	ion
a Public exhibition		a ∏ (Loan c	or exchange programs					
b Scholarly research			Other	0 , 0					
c Preservation for future gener	ations								
4 Provide a description of the organ Part XIV.	nization's collec	tions and expla	ın how	v they further the organ	nization's exemp	t purpos	e in		
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or re ather than to be	ceive donations maintained as	of art	, historical treasures, of the organization's co	or other similar llection?		Yes	,	□No_
Part IV Escrow and Custodia 9, or reported an amo	I Arrangeme unt on Form	nts Complete 990, Part X,	e if oi line :	rganization answei 21.	red 'Yes' to F	orm 99	0, Pa	rt IV,	line
1a Is the organization an agent, trus included on Form 990, Part X?	stee, custodian,	or other interme	ediary	for contributions or other	ner assets not	Г	Yes		□No
b If 'Yes,' explain the arrangement	ın Part XIV and	d complete the f	ollowii	na table:		L	_]	' I	
				· • · · · · · · · · · · · · · · · · · ·			Amoun	t	
c Beginning balance					1c				
d Additions during the year					1 d				
e Distributions during the year					1 e				
f Ending balance					1f				
2a Did the organization include an a	mount on Form	990, Part X, Im	e 21?		<u> </u>		Yes		No
b If 'Yes,' explain the arrangement						_		'	لس
Part V: Endowment Funds Co		anization ans	swere	ed 'Yes' to Form 99	00, Part IV, Ii	ne 10.			
	(a) Current year		ior year			ars back	(e)	Four yea	rs back
1 a Beginning of year balance				The Court of the C	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	و القديمة ال	2 page 7 . 5	ورد المرابع الدور	15 15 15 15 15 15 15 15 15 15 15 15 15 1
b Contributions				The saturation		10 mg	5 14	15.00	15-24 X
· · · · · · · · · · · · · · · · · · ·				The American	LES LE CHANGE	h, a se i a se in.	100 S		1. V. 1.
c Net Investment earnings, gains, and losses				The Comment of				+ 50 40	-4 2 3
d Grants or scholarships				THE RESERVE	ではは	游戏	12	3 , 30	الكار بالزيد
e Other expenditures for facilities			-				16,3 10,3 m → 10,000 m m m m m m m m m m m m m m m m m		1 3 7 6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
and programs							مَ يُورِ الْمِ		2-4. J. A.
f Administrative expenses				The second second			*		
g End of year balance				, 等性關鍵。2017	to Marie Se	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		3 472	17.4 . 18.3
2 Provide the estimated percentage		d balance held a	as:						
a Board designated or quasi-endow		*							
b Permanent endowment									
c Term endowment ►	8								
3a Are there endowment funds not a	n the possessio	n of the organiz	ation	that are held and admi	nistered for the		Г		Τ
organization by							2.0	Yes	No
(i) unrelated organizations							3a(i)		
(ii) related organizations							3a(ii)		
b If 'Yes' to 3a(II), are the related o	•	•					3b		1
4 Describe in Part XIV the intended					line 10				
Part VI Investments—Land, B									<u> </u>
Description of investment	(a	Cost or other b (Investment)	basis	(b) Cost or other basis (other)	(c) Accumula Depreciation		(a) t	3ook V	alue
1a Land					2 3 20 20 3				
b Buildings									
c Leasehold improvements									
d Equipment				3,700.	2,	909.			791.
e Other				22,291.		640.		10	,651.
Total. Add lines 1a through 1e (Column	n (d) must equa	l Form 990, Par	t X, co	olumn (B), line 10(c))				11	,442.
BAA						Schedu	le D (F	orm 9	90) 2009

Schedule D (Form 990) 2009 INSTITUTE FOR THE	STUDY OF KNOWL	EDGE	41-2045091 Page	e 3
Part:VII Investments—Other Securities See Fo	orm 990, Part X, lin	e 12. N/A		
(a) Description of security or category (including name of security)	(b) Book value		ethod of valuation d-of-year market value	
Financial derivatives			d-or-year market value	—
Closely-held equity interests				_
Other				_
				_
				_
		·		
				_
				_
		V V 13 - F 2 - 12 - 12 - 13 - 13 - 12 - 12 - 12 -	Marine - Miller 2018 War. H. Brigh. 1.1. 11001.	. No. of
Total (Column (b) must equal Form 990 Part X, col (B) line 12.)			製作を表現できません。	- 3
Part VIII Investments-Program Related (See				_
(a) Description of investment type	(b) Book value	(c) Me Cost or en	ethod of valuation d-of-year market value	
		0001 07 011	a or year market value	—
				_
				
				_
				_
				_
				_
				_
				_
Total (Column (b) must equal Form 990, Part X, Col (B) line 13.)		的企業性的一次,這些數學	學的意思的學術的一個語言學	1. 3
Rart IX Other Assets (See Form 990, Part X,				_
(a) De	scription	<u> </u>	(b) Book value	_
				_
				_
				_
				—
				—
				—
Total. (Column (b) must equal Form 990, Part X, col (B), I	me 15)		-	_
Part X: Other Liabilities (See Form 990, Part				—
(a) Description of Liability	(b) Amount	. The second second	ONE TO THE THE PERSON OF	- 1
Federal Income Taxes	(a) / ii/louin		在这个时间是是是一种是有一种	1
T Castal Indonto Taxee				1
			《新文学表》的《外面整本》	ij
				. 1
		The second		· -
		11. 5	The search of the second	
				۲ ۲ ۲
			塞(1965年) 新花,海红花。	- 7
			The second se	· ;
			建冷水水流 流流流流流流流流流流流流流流流流流流流流流流流流流流流流流流流流流流	
			这些是特别的人。这种特别	ار ب ب
Total (Column (b) must equal Form 990, Part X, col (B) line 25)		T \$7.56 27 35 45	· 新国、大学、新疆、 · · · · · · · · · · · · · · · · · · ·	- 1

Schedule D (Form 990) 2009 INSTITUTE FOR THE STUDY OF KNOW	WLEDGE	41-2045091	Page 4
Part XI Reconciliation of Change in Net Assets from Form 99	0 to Financial State	ments N/A	
1 Total revenue (Form 990, Part VIII,column (A), line 12)			
2 Total expenses (Form 990, Part IX, column (A), line 25)			
3 Excess or (deficit) for the year. Subtract line 2 from line 1			
4 Net unrealized gains (losses) on investments			
5 Donated services and use of facilities			
6 Investment expenses			
7 Prior period adjustments			
8 Other (Describe in Part XIV)			
9 Total adjustments (net). Add lines 4 through 8			
10 Excess or (deficit) for the year per audited financial statements Combine			
Part XII Reconciliation of Revenue per Audited Financial State	ements With Reveni	ue per Return N/A	
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 - 1		
a Net unrealized gains on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIV)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1	1 1	3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1.	4-		
a Investments expenses not included on Form 990, Part VIII, line 7b	4a 4b		
b Other (Describe in Part XIV) c Add lines 4a and 4b .	40	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12)	5	
Part XIII Reconciliation of Expenses per Audited Financial Sta	tements With Expe		
Total expenses and losses per audited financial statements	Nonce Trick Expe	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25.		<u> </u>	·
a Donated services and use of facilities	2a	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
b Prior year adjustments	2b	18 18 18	
c Other losses	2c	*****	
d Other (Describe in Part XIV)	2d		
e Add lines 2a through 2d	<u> </u>	2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		76 11 Poly	
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	- 53 T	
b Other (Describe in Part XIV)	4b	7632	
c Add lines 4a and 4b	<u> </u>	4c	
5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, lin	e 18.)	5	
Part XIV Supplemental Information			
Complete this part to provide the descriptions required for Part II, lines 3, 5, and line 4; Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines information	d 9, Part III, lines 1a and es 2d and 4b. Also comp	4; Part IV, lines 1b and 2b; lete this part to provide any	Part V, additional
	·		

Schedule D (Form 990) 2009 INSTITUTE FOR THE STUDY OF KNOWLEDGE Part XIV Supplemental Information (continued)	41-2045091	Page 5
	- 	
		-
		-
		- -
		
		

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047 **2009**

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Name of the organization INSTITUTE FOR THE STUDY OF KNOWLEDGE MANAGEMENT IN EDUCATION	Employer identification number 41-2045091
FORM 990, PART VI. LINE 11 - FORM 990 REVIEW PROCESS	
ISKME'S FORM 990 IS PREPARED BY AN OUTSIDE ACCOUNTANT AND	D_REVIEWED_BY_THE_EXECUTIVE
DIRECTOR, BOARD MEMBERS, AND AN INDEPENDENT LAW FIRM THA	r_specializes_in_nonprofit
ORGANIZATIONS BEFORE THE FILING OF THE RETURN.	
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND EN	ORCEMENT OF CONFLICTS
MONITORING IS ACCOMPLISHED THROUGH ANNUAL DISCLOSURES BY	THE BOARD OF DIRECTORS, KEY
EMPLOYEES, VOLUNTEERS, AND OTHERS TO ENFORCE THE CONFLICT	r of interest policy
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL P	ROCESS FOR CEO, EXEC. DIR., OR TOP MO
COMPENSATION IS REVIEWED AND APPROVED BY MEMBERS OF THE	BOARD OF DIRECTORS AFTER AN
ANALYSIS OF COMPENSATION AT OTHER ORGANIZATIONS, A PERFO	RMANCE REVIEW, AND OTHER
CRITERIA TO ENSURE THAT THE ORGANIZATION ASSETS ARE USED	WISELY.
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUB	LICLY AVAILABLE
GOVERNING DOCUMENTS, POLICIES AND FINANCIAL STATEMENTS A	RE AVAILABLE UPON REQUEST IN
THE SAME FASHION AS ISKME'S FORM 1023 AND FORM 990.	

Schedule O (Form 990) 2009 Page 2					
Name of the organization	INSTITUTE FOR MANAGEMENT IN	THE STUDY OF	KNOWLEDGE	Employer Identification number	
	MANAGEMENT IN	EDUCATION		41-2045091	
		. -			
	•				
		·			
	- 				
		. – – – – – – –			
					
				- 	
					
	 -				
	·				
					
	·		: 		

SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5 2009 INSTITUTE FOR THE STUDY OF KNOWLEDGE MANAGEMENT IN EDUCATION 41-2045091 **CLIENT ISKME** 11/12/10 11 44AM PART II, LINE 10 - OTHER INCOME NATURE AND SOURCE 2009 2008 2007 2006 2005 TOTAL $\frac{185}{0}$ 0. $\frac{185}{0}$ 0. $\frac{185}{0}$ 0. MONOGRAPHS