



CareerSource Hillsborough Pinellas Finance/Audit Committee

Date: March 10, 2025

Time: 2:00PM

Location:

Hybrid; Meridian One 4350 W Cypress Street, Suite 875 Tampa FL 33607

Zoom Information

Zoom Link

Call-In-Number: 1 305 224 1968

Meeting ID: 814 1030 0937

Passcode: 366029

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A. Next Finance Committee Meeting – TBD



CareerSource Hillsborough Pinellas Finance/Audit Committee Minutes

CareerSource Hillsborough Pinellas

1/8/2025 10:00 AMEST

@ Hybrid; Meridian One 4350 W Cypress Street, Suite 875 Tampa FL 33607

Attendance

Present:

Members: Mitch Allen, David Fetkenher (remote), Barclay Harless (remote), Commissioner Christopher Latvala (remote), Don Noble, Sophia West (remote)

CareerSource Hillsborough Pinellas Staff: Sheila Doyle, Leah Geis (remote), Jeanette Lugo (remote), Barry Martin (remote), Steve Meier, Anna Munro, Tammy Stahlgren, Doug Tobin (remote)

Hillsborough County Government: Jonathan Wolf (remote)

James Moore: Ben Clark (remote), James Halleran (remote)

Thomas Howell Ferguson P.A.: Allison Harrell (remote), Vince Meyers (remote)

Absent:

Members: Gary Hartfield

I. Call to Order, Roll Call, and Welcome (Presenters: Don Noble)

Don Noble, Chair called the meeting to order at 10:01am. There was a quorum present.

II. Public Comments (Presenters: Don Noble)

There were none.

III. Action Items/Discussion Items

A. Required Communications and Acceptance of June 30, 2024 Annual Financial Statement – WorkNet Pinellas, Inc.

Presenter: Allison Harrell, Shareholder, Thomas Howell Ferguson P.A.
Allison Harrell provided an overview of the audit report, noting an unmodified opinion on the financial statements. The audit found no compliance issues or significant difficulties, and the financial statements were consistent with the prior year.

Motion:

To accept the WorkNet Pinellas, Inc. Annual Financial Statement Audit for the fiscal year ended June 30, 2024.

Motion moved by David Fetkenher and motion seconded by Sophia West. Motion carried.

- B. Required Communications and Acceptance of June 30, 2024 Annual Financial Statement – Tampa Bay Workforce Alliance, Inc.

Presenters: Ben Clark, Director and James Halleran, Partner, James Moore

Ben Clark provided an overview of the required communications for the financial statement audit, noting the auditors' independence, their role in issuing an opinion on the financial statements. Ben noted a clean opinion on financial statements and discussed the compliance and internal control reports. There was no areas of concern.

Motion:

To accept the Tampa Bay Workforce Alliance, Inc. Annual Financial Statement Audit for the fiscal year ended June 30, 2024.

Motion moved by Mitch Allen and motion seconded by Sophia West. Motion carried.

- C. Acceptance of 2023 IRS Form 990 – Tampa Bay Workforce Alliance, Inc.

Presenters: Ben Clark, Director and James Halleran, Partner, James Moore

Motion:

To accept the Tampa Bay Workforce Alliance, Inc. 2023 IRS Form 990 for the fiscal year ending June 30, 2024.

Motion moved by Mitch Allen and motion seconded by David Fetkenher. Motion carried.

The WorkNet Pinellas, Inc 2023 IRS Form 990 for the fiscal year ending June 30, 2024 should be ready for review at the March 2025 Finance/Audit Committee Meeting.

- D. Acceptance of December 31, 2023 401k Plan Audit – Tampa Bay Workforce Alliance, Inc. (Presenters: Anna Munro)

Motion:

To accept the Tampa Bay Workforce Alliance, Inc. 401k Plan Audit for the calendar year ending December 31, 2023

Motion moved by Mitch Allen and motion seconded by Sophia West. Motion carried.

- E. 2024 – 2025 Budget Modification No. 2 (Presenters: Sheila Doyle)

Motion:

To approve the adjustment to the revenue budget and resultant modification to the expenditure budget.

Motion moved by Mitch Allen and motion seconded by David Fetkenher. Motion carried.

- F. Approval of Solicitation of Audit and Tax Services (Presenters: Anna Munro)

Motion:

To approve to solicit an audit and tax firm to be awarded the financial statement audit/990 services and 401(K) contract for the fiscal year end June 30, 2025, and December 31, 2024, respectively, with the option for 4 additional one-year periods.

Motion moved by Mitch Allen and motion seconded by David Fetkenher. Motion carried.

IV. Information Item

There were no questions or discussions about the information items.

- A. FloridaCommerce Financial Monitoring Quality Assurance Reports: LWDB 14 and LWDB 15
- B. Expenditure Reports for the period ending November 30, 2024

V. Adjournment

The meeting adjourned at 10:37 a.m.

Minutes prepared by Tammy Stahlgren, Executive Administrative Assistant.



Action Item

WorkNet Pinellas, Inc. 2023 IRS Form 990 FYE June 30, 2024

Background

Per Amended and Restated By-Laws of Tampa Bay Workforce Alliance, Inc. d/b/a CareerSource Hillsborough Pinellas (“By-Laws”), the Audit Committee’s responsibilities include but are not limited to: “Reviewing and recommending for Board acceptance of the annual IRS Form 990 submission.” [By-Laws, Article VII, Section 7.4(H)]

IRS Form 990, part VI, section B, Line 11B: 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.

Information

The audit and tax firm Thomas Howell Ferguson P.A. has completed the 2023 IRS Form 990 of WorkNet Pinellas, Inc. for the fiscal year ended June 30, 2024.

Enclosed is a copy of the 2023 IRS Form 990. A representative from Thomas Howell Ferguson P.A will present an overview to the Finance/Audit Committee.

Subject to the acceptance of the 2023 IRS Form 990 by the Finance/Audit Committee and Board of Directors at their March 20, 2025 meeting, the 990 will be filed before its extended filing due date of May 15, 2025.

Recommendation

Acceptance of the WorkNet Pinellas, Inc. 2023 IRS Form 990 for the fiscal year ending June 30, 2024.

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2024

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, 2025.

Return of Organization Exempt From Income Tax

Form 990

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

2023

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning JUL 1, 2023 and ending JUN 30, 2024

Form header section containing organization name (WORKNET PINELLAS INC.), address (13805 58TH STREET N SUITE 2-140), EIN (73-1678180), and other identifying information.

Part I Summary

Summary table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Rows include mission statement, governance metrics, and financial data for Prior Year and Current Year.

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.

Signature block form with fields for officer signature (SHEILA DOYLE), preparer name (STACEY T KOLKA), and firm information (THOMAS HOWELL FERGUSON P.A.).

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [] No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: 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

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

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 \$ 4,739,488. including grants of \$ 509,781.) (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 \$ 1,725,732. including grants of \$ 4,752.) (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 \$ 2,393,315. including grants of \$ 41,661.) (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 \$ 405,356. including grants of \$ 1,071,070.) (Revenue \$ 454,980.)

4e Total program service expenses 9,263,891.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 detailing various organizational requirements and compliance checks.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with 3 columns: Question, Yes, No. Rows include 2a (75 employees), 2b (X), 3a (X), 3b, 4a (X), 4b, 5a (X), 5b (X), 5c, 6a (X), 6b, 7 (Organizations that may receive deductible contributions under section 170(c)), 7a (X), 7b, 7c (X), 7d, 7e (X), 7f (X), 7g, 7h, 8 (Sponsoring organizations maintaining donor advised funds), 9 (Sponsoring organizations maintaining donor advised funds), 9a, 9b, 10 (Section 501(c)(7) organizations), 10a, 10b, 11 (Section 501(c)(12) organizations), 11a, 11b, 12a (Section 4947(a)(1) non-exempt charitable trusts), 12b, 13 (Section 501(c)(29) qualified nonprofit health insurance issuers), 13a, 13b, 13c, 14a (X), 14b, 15 (X), 16 (X), 17 (Section 501(c)(21) organizations).

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 29; 1b Enter the number of voting members included on line 1a... 29; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... 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... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? 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... X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b 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... X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done... X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? 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... X; b Other officers or key employees of the organization... 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? X; 16b 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?

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 [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
THE ORGANIZATION - 813-397-2077
13805 58TH STREET N SUITE 2-140, CLEARWATER, FL 33760

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest 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 CEO	50.00			X			161,018.	0.	22,897.	
(2) DAVID ZIRILLI CFO	50.00			X			94,006.	0.	16,395.	
(3) BARCLAY HARLESS TREASURER	1.00	X		X			0.	0.	0.	
(4) BART DIEBOLD DIRECTOR	1.00	X					0.	0.	0.	
(5) BELINTHIA BERRY DIRECTOR	1.00	X					0.	0.	0.	
(6) BENJAMIN FRIEDMAN 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) DAWN PETERS DIRECTOR	1.00	X					0.	0.	0.	
(11) ELIZABETH SIPLIN VICE CHAIR	1.00	X		X			0.	0.	0.	
(12) ESTHER MATTHEWS DIRECTOR	1.00	X					0.	0.	0.	
(13) GLENN WILLOCKS DIRECTOR	1.00	X					0.	0.	0.	
(14) IVONNE ALVAREZ DIRECTOR	1.00	X					0.	0.	0.	
(15) JACK GELLER DIRECTOR	1.00	X					0.	0.	0.	
(16) JEREMY ROBINSON DIRECTOR	1.00	X					0.	0.	0.	
(17) JOHN HOWELL 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) KENNETH WILLIAMS SECRETARY	1.00	X		X				0.	0.	0.
(19) LARRY MORGAN DIRECTOR	1.00	X						0.	0.	0.
(20) MARK HUNT DIRECTOR	1.00	X						0.	0.	0.
(21) MICHAEL JALAZO DIRECTOR	1.00	X						0.	0.	0.
(22) NICK DICEGLIE DIRECTOR	1.00	X						0.	0.	0.
(23) NIKISHA LEZAMA DIRECTOR	1.00	X						0.	0.	0.
(24) PATRICIA SAWYER DIRECTOR	1.00	X						0.	0.	0.
(25) REBECCA SARLO DIRECTOR	1.00	X						0.	0.	0.
(26) RENE FLOWERS DIRECTOR	1.00	X						0.	0.	0.
1b Subtotal								255,024.	0.	39,292.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								255,024.	0.	39,292.

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

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	X
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? <i>If "Yes," complete Schedule J for such individual</i>	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	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	900,933.
LINK TECHNOLOGY SERVICES 11284 CALLISIA DR., ODESSA, FL 33556	IT SERVICE PROVIDER	250,340.
GALEN COLLEGE OF NURSING, 11101 ROOSEVELT BLVD. N., STE. 201, ST. PETERSBURG, FL	TRAINING PROVIDER	240,386.
CHAMPION TRUCK DRIVING SCHOOL 1501 LAKE AVENUE, LARGO, FL 33771	TRAINING PROVIDER	186,420.
ULTIMATE MEDICAL ACADEMY 9309 N. FLORIDA AVENUE, TAMPA, FL 33612	TRAINING PROVIDER	113,171.

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 8

SEE PART VII, SECTION A CONTINUATION SHEETS

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position, (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation. Includes entries for Russell Williams, Scott Thomas, Shawn McDonnell, William Holland, and Zachary White.

Total to Part VII, Section A, line 1c

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	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	9,078,823.			
	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		9,078,823.			
Program Service Revenue	2 a	TICKET TO WORK	Business Code 561300	48,724.	48,724.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		48,724.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		83,929.		83,929.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(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	(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	LITIGATION SETTLEMENT	Business Code 900099	402,190.	402,190.		
	b	MISCELLANEOUS REVENUE	900099	4,066.	4,066.		
	c						
	d	All other revenue					
	e	Total. Add lines 11a-11d		406,256.			
12	Total revenue. See instructions		9,617,732.	454,980.	0.	83,929.	

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 ...	1,627,264.	1,627,264.		
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	303,528.		303,528.	
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	3,190,505.	2,953,157.	237,348.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	186,061.	173,768.	12,293.	
9 Other employee benefits	797,976.	753,061.	44,915.	
10 Payroll taxes	297,297.	258,044.	39,253.	
11 Fees for services (nonemployees):				
a Management				
b Legal	62,179.	10,297.	51,882.	
c Accounting	46,029.		46,029.	
d Lobbying	25,290.		25,290.	
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.)	160,204.	130,154.	30,050.	
12 Advertising and promotion	21,881.	20,946.	935.	
13 Office expenses	156,213.	135,138.	21,075.	
14 Information technology	479,300.	428,915.	50,385.	
15 Royalties				
16 Occupancy	351,840.	317,232.	34,608.	
17 Travel	58,802.	45,654.	13,148.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	12,868.	9,173.	3,695.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	84,799.	67,802.	16,997.	
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	2,164,372.	2,164,372.		
b COMMUNICATIONS	97,855.	90,295.	7,560.	
c CUSTOMER SUPPORT SRVC.	52,497.	49,108.	3,389.	
d LICENSES	29,608.	21,355.	8,253.	
e All other expenses	22,235.	8,156.	14,079.	
25 Total functional expenses. Add lines 1 through 24e	10,228,603.	9,263,891.	964,712.	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 Sheet

Check 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	1,400,525.	1	1,022,058.
	2 Savings and temporary cash investments	181,249.	2	90,661.
	3 Pledges and grants receivable, net	359,982.	3	341,748.
	4 Accounts receivable, net	46,388.	4	10,155.
	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	59,724.	9	22,307.
	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.	10c 0.	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	411,807.	15	273,751.
16 Total assets. Add lines 1 through 15 (must equal line 33)	2,459,675.	16	1,760,680.	
Liabilities	17 Accounts payable and accrued expenses	793,951.	17	762,133.
	18 Grants payable		18	
	19 Deferred revenue	1,302.	19	80,625.
	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	417,765.	25	282,136.
	26 Total liabilities. Add lines 17 through 25	1,213,018.	26	1,124,894.
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	1,246,657.	27	635,786.
	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	1,246,657.	32	635,786.
33 Total liabilities and net assets/fund balances	2,459,675.	33	1,760,680.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,617,732.
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,228,603.
3	Revenue less expenses. Subtract line 2 from line 1	3	-610,871.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,246,657.
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	635,786.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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.
- 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?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

Form 990 (2023)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2023

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.

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 [X] 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).

Table with 6 columns: (i) Name of supported organization, (ii) EIN, (iii) Type of organization (described on lines 1-10 above), (iv) Is the organization listed in your governing document?, (v) Amount of monetary support, (vi) Amount of other support. Includes a Total row.

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	9441414.	8302926.	7501208.	9221292.	9078823.	43545663.
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	9441414.	8302926.	7501208.	9221292.	9078823.	43545663.
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.						43545663.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	9441414.	8302926.	7501208.	9221292.	9078823.	43545663.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	19,106.	14,090.	7,772.	36,550.	83,929.	161,447.
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.)	120,144.	118,778.	88,340.	112,781.	454,980.	895,023.
11 Total support. Add lines 7 through 10						44602133.
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 2023 (line 6, column (f), divided by line 11, column (f))	14	97.63 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	98.41 %
16a 33 1/3% support test - 2023. 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 - 2022. 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 - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 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"/>

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. 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 - 2022. 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)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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? Row 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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 (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

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).		

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 - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2024. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

Schedule A (Form 990) 2023

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.

2023 AMOUNT: \$ 0.

TICKET TO WORK

2019 AMOUNT: \$ 99,153.

2020 AMOUNT: \$ 109,259.

2021 AMOUNT: \$ 82,552.

2022 AMOUNT: \$ 108,820.

2023 AMOUNT: \$ 48,724.

SPONSORSHIPS

2019 AMOUNT: \$ 4,466.

2021 AMOUNT: \$ 2,000.

OTHER PROGRAM SERVICE REVENUE

2019 AMOUNT: \$ 16,525.

2020 AMOUNT: \$ 1,290.

TABACCO FREE FLORIDA REVENUE

2020 AMOUNT: \$ 7,538.

2021 AMOUNT: \$ 3,525.

2022 AMOUNT: \$ 3,530.

2023 AMOUNT: \$ 4,066.

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.)

LITIGATION SETTLEMENT

2023 AMOUNT: \$ 402,190.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

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).

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

Schedule B (Form 990) (2023)

Name of organization WORKNET PINELLAS INC.	Employer identification number 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	\$ 1,879,152.	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	\$ 6,803,675.	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	\$ 395,996.	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 WORKNET PINELLAS INC.	Employer identification number 73-1678180
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization WORKNET PINELLAS INC.	Employer identification number 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)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

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) 2023

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.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 70%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	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.		
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?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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) 2020	(b) 2021	(c) 2022	(d) 2023	(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) 2023

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		25,290.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?		X	
j Total. Add lines 1c through 1i			25,290.
2a Did the activities in line 1 cause the organization to not be 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

2023

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, number of easements on historic structures, and monitoring expenses.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures, and amounts for revenue and assets.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

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
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 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 in 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:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations? | 3a(i) | |
| (ii) Related organizations? | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 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, line 10c, column (B))				0.

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, line 12, col. (B))		

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

(a) Description	(b) Book value
(1) RIGHT OF USE ASSET	273,751.
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	273,751.

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	282,136.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	282,136.

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 ...

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	9,617,732.
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	9,617,732.
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	9,617,732.

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	10,228,603.
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	10,228,603.
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	10,228,603.

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, 2020, 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

2023

**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)	157,410.	0.			FEDERAL GRANT SUBRECIPIENT EMPLOYMENT TRAINING
THE KAISER GROUP (DE), LLC DBA DYNAMIC - 237 SOUTH STREET - WAUKESHA, WI 53186	39-1354364		46,940.	0.			FEDERAL GRANT SUBRECIPIENT ONE STOP OPERATOR
SAIL FUTURE, INC 2154 27TH AVENUE N ST. PETERSBURG, FL 33713	46-3271817	501(C)(3)	419,100.	0.			FEDERAL GRANT SUBRECIPIENT EMPLOYMENT TRAINING
PINELLAS COUNTY 315 COURT STREET CLEARWATER, FL 33756		GOV'T	1,000,000.	0.			GENERAL SUPPORT

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

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

Schedule I (Form 990) 2023

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

2023

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		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2023

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 CEO	(i)	161,018.	0.	0.	10,317.	12,580.	183,915.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE N
(Form 990)**

Department of the Treasury
Internal Revenue Service

Liquidation, Termination, Dissolution, or Significant Disposition of Assets

Complete if the organization answered "Yes" on Form 990, Part IV, lines 31 or 32, or Form 990-EZ, line 36.

Attach certified copies of any articles of dissolution, resolutions, or plans.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

WORKNET PINELLAS INC.

Employer identification number

73-1678180

Part I **Liquidation, Termination, or Dissolution.** Complete this part if the organization answered "Yes" on Form 990, Part IV, line 31, or Form 990-EZ, line 36. Part I can be duplicated if additional space is needed.

1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity

2 Did or will any officer, director, trustee, or key employee of the organization:

- a Become a director or trustee of a successor or transferee organization?
- b Become an employee of, or independent contractor for, a successor or transferee organization?
- c Become a direct or indirect owner of a successor or transferee organization?
- d Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution?
- e If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III.

	Yes	No
2a		
2b		
2c		
2d		

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

Schedule N (Form 990) 2023

Part I Liquidation, Termination, or Dissolution *(continued)*

Note: If the organization distributed all of its assets during the tax year, then Form 990, Part X, column (B), line 16 (Total assets), and line 26 (Total liabilities), should equal -0-

	Yes	No
3 Did the organization distribute its assets in accordance with its governing instrument(s)? If "No," describe in Part III		
4a Is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve, liquidate, or terminate?		
b If "Yes," did the organization provide such notice?		
5 Did the organization discharge or pay all of its liabilities in accordance with state laws?		
6a Did the organization have any tax-exempt bonds outstanding during the year?		
b If "Yes" to line 6a, did the organization discharge or defease all of its tax-exempt bond liabilities during the tax yr in accordance with the Internal Revenue Code and state laws?		
c If "Yes" on line 6b, describe in Part III how the organization defeased or otherwise settled these liabilities. If "No" on line 6b, explain in Part III.		

Part II Sale, Exchange, Disposition, or Other Transfer of More Than 25% of the Organization's Assets. Complete this part if the organization answered "Yes" on Form 990, Part IV, line 32, or Form 990-EZ, line 36. Part II can be duplicated if additional space is needed.

1	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC section of recipient(s) (if tax-exempt) or type of entity
	CASH	06/28/24	1,000,000.	ACTUAL		PINELLAS COUNTY 315 COURT STREET CLEARWATER, FL 33756	GOV'T

	Yes	No
2 Did or will any officer, director, trustee, or key employee of the organization:		
a Become a director or trustee of a successor or transferee organization?		X
b Become an employee of, or independent contractor for, a successor or transferee organization?		X
c Become a direct or indirect owner of a successor or transferee organization?		X
d Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets?		X
e If the organization answered "Yes" to any of the questions on lines 2a through 2d, provide the name of the person involved and explain in Part III.		

**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

2023

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.

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

Schedule O (Form 990) 2023



Action Item

2024-2025 Planning Budget Modification #3

Background Information:

Total budgeted revenue increased from \$30,137,627 to \$30,412,627 for an overall increase of \$275,000.

Workforce Innovation & Opportunity Act (WIOA) Programs:

- New award - Dislocated Worker Grant (DWG) Fostering Opioid Recovery of \$275,000.
 - CSHP was one of five Local Workforce Development Boards (LWDBs) in the state to receive an award to assist with opioid recovery. The purpose of this award is to provide temporary disaster-relief employment, training, and career services to eligible participants. For this project there are two classes of eligible individuals who may be served: 1) Those affected by the opioid disaster or substance use disorder who may be trained in any occupation, and 2) Individuals who are not directly affected by the opioid disaster that seek training for and employment in, demand occupations that impact the opioid disaster or its underlying causes in affected communities, including addiction treatment, mental health care, and pain therapy/management services, as well as other occupations, such as law enforcement, medical, pharmaceutical, and emergency personnel, and occupations that provide support for individuals in treatment and recovery.

Additionally, there was an increase in expenditures of \$149,462.

Recommendation:

Approval of the adjustment to the revenue budget and resultant modification to the expenditure budget.



2024-2025 Budgeted Revenues – Modification #3 Funding by County and Combined

Pinellas County
2024-2025 Planning Budget - Modification #3
Revenues

Funding Streams	Proposed Budget 2024- 2025 Mod #3	Approved Budget 2024- 2025 Mod #2	\$ Change	% Change
Workforce Innovation & Opportunity Act				
Adult	1,258,707	1,258,707	-	0.0%
Dislocated Worker	1,672,679	1,672,679	-	0.0%
Total Adult/Dislocated Worker	2,931,386	2,931,386	-	0.0%
Youth	1,085,180	1,085,180	-	0.0%
Rapid Response	75,952	75,952	-	0.0%
HOPE Funding Initiative	128,127	128,127	-	0.0%
Board Consolidation Funding	12,599	12,599	-	0.0%
AI Incumbent Worker	75,000	75,000	-	0.0%
Sector Based Training	62,500	62,500	-	0.0%
DWG - Hurricane Helene/Milton	185,000	185,000	-	0.0%
Opioid Recovery	82,500	-	82,500	100.0%
Total WIOA	4,638,244	4,555,744	82,500	1.8%
Employment Services				
Wagner-Peyser	816,717	816,717	-	0.0%
Veterans Services	168,000	168,000	-	0.0%
Apprenticeship Navigator	48,000	48,000	-	0.0%
HOPE Navigator	118,387	118,387	-	0.0%
RESEA	477,724	477,724	-	0.0%
Supplemental Nutrition Assistance Program	206,965	206,965	-	0.0%
Trade Adjustment Assistance	27,000	27,000	-	0.0%
Total Employment Services	1,862,793	1,862,793	-	0.0%
Welfare Transition	2,092,311	2,092,311	-	0.0%
TOTAL Florida Commerce Grant Funding	8,593,348	8,510,848	82,500	1.0%
TOTAL Grants Federal, State & Local	8,593,348	8,510,848	82,500	1.0%
Other Revenue				
Ticket to Work	90,000	90,000	-	0.0%
Tobacco Free Florida	2,400	2,400	-	0.0%
Interest	12,000	12,000	-	0.0%
Total Other Revenue	104,400	104,400	-	0.0%
TOTAL 2024-2025 BUDGETED REVENUE	8,697,748	8,615,248	82,500	1.0%

Hillsborough County
2024-2025 Planning Budget - Modification #3
Revenues

Funding Streams	Proposed Budget 2024- 2025 Mod #3	Approved Budget 2024- 2025 Mod #2	\$ Change	% Change
Workforce Innovation & Opportunity Act				
Adult	2,455,100	2,455,100	-	0.0%
Dislocated Worker	3,209,411	3,209,411	-	0.0%
Total Adult/Dislocated Worker	5,664,511	5,664,511	-	0.0%
Youth	2,911,889	2,911,889	-	0.0%
Rapid Response	275,000	275,000	-	0.0%
HOPE Funding Initiative	128,127	128,127	-	0.0%
Board Consolidation Funding	740,617	740,617	-	0.0%
Get There Faster - Veterans & Military Spouses	821,109	821,109	-	0.0%
AI Incumbent Worker	75,000	75,000	-	0.0%
Sector Based Training	62,500	62,500	-	0.0%
DWG - Hurricane Helene/Milton	185,000	185,000	-	0.0%
Opioid Recovery	192,500	-	192,500	100.0%
Total WIOA	11,056,253	10,863,753	192,500	1.8%
Employment Services				
Wagner-Peyser	1,860,344	1,860,344	-	0.0%
Veterans Services	296,673	296,673	-	0.0%
Apprenticeship Navigator	49,000	49,000	-	0.0%
HOPE Navigator	110,529	110,529	-	0.0%
RESEA	1,166,720	1,166,720	-	0.0%
Supplemental Nutrition Assistance Program	728,906	728,906	-	0.0%
Trade Adjustment Assistance	50,359	50,359	-	0.0%
Military Family	275,937	275,937	-	0.0%
Total Employment Services	4,538,468	4,538,468	-	0.0%
Welfare Transition	4,117,059	4,117,059	-	0.0%
TOTAL Florida Commerce Grant Funding	19,711,780	19,519,280	192,500	1.0%
Direct Grants/Special Projects				
Hillsborough County Re-entry Program	202,474	202,474	-	0.0%
Hillsborough County ACE Program	1,033,073	1,033,073	-	0.0%
Hillsborough County Sector Strategies Initiative	549,234	549,234	-	0.0%
United Way - Tampa Bay Summer Hires Program	86,667	86,667	-	0.0%
Good Jobs Initiative	25,250	25,250	-	0.0%
FL Medical - Foundation for Caring	5,201	5,201	-	0.0%
Total Direct Grants/Special Projects	1,901,899	1,901,899	-	0.0%
TOTAL Grants Federal, State & Local	21,613,679	21,421,179	192,500	0.9%
Other Revenue				
Ticket to Work	90,000	90,000	-	0.0%
Tobacco Free Florida	10,000	10,000	-	0.0%
Interest	1,200	1,200	-	0.0%
Total Other Revenue	101,200	101,200	-	0.0%
TOTAL 2024-2025 BUDGETED REVENUE	21,714,879	21,522,379	192,500	0.9%

**CareerSource Hillsborough Pinellas
2024-2025 Planning Budget - Modification #3
Combined Budgeted Revenues**

Funding Streams	Pinellas County Budget 2024- 2025 Mod #3	Hillsborough County Budget 2024- 2025 Mod #3	Combined Budget 2024-2025 Mod #3	Approved Budget 2024- 2025 Mod #2
Workforce Innovation & Opportunity Act				
Adult	1,258,707	2,455,100	3,713,807	3,713,807
Dislocated Worker	1,672,679	3,209,411	4,882,090	4,882,090
Total Adult/Dislocated Worker	2,931,386	5,664,511	8,595,897	8,595,897
Youth	1,085,180	2,911,889	3,997,069	3,997,069
Rapid Response	75,952	275,000	350,952	350,952
HOPE Funding Initiative	128,127	128,127	256,254	256,254
Board Consolidation Funding	12,599	740,617	753,216	753,216
Get There Faster - Veterans & Military Spouses	-	821,109	821,109	821,109
AI Incumbent Worker	75,000	75,000	150,000	150,000
Sector Based Training	62,500	62,500	125,000	125,000
DWG - Hurricane Helene/Milton	185,000	185,000	370,000	370,000
Opioid Recovery	82,500	192,500	275,000	-
Total WIOA	4,638,244	11,056,253	15,694,497	15,419,497
Employment Services				
Wagner-Peyser	816,717	1,860,344	2,677,061	2,677,061
Veterans Services	168,000	296,673	464,673	464,673
Apprenticeship Navigator	48,000	49,000	97,000	97,000
HOPE Navigator	118,387	110,529	228,916	228,916
RESEA	477,724	1,166,720	1,644,444	1,644,444
Supplemental Nutrition Assistance Program	206,965	728,906	935,871	935,871
Trade Adjustment Assistance	27,000	50,359	77,359	77,359
Military Family	-	275,937	275,937	275,937
Total Employment Services	1,862,793	4,538,468	6,401,261	6,401,261
Welfare Transition	2,092,311	4,117,059	6,209,370	6,209,370
TOTAL Florida Commerce Grant Funding	8,593,348	19,711,780	28,305,128	28,030,128
Direct Grants/Special Projects				
Hillsborough County Re-entry Program	-	202,474	202,474	202,474
Hillsborough County ACE Program	-	1,033,073	1,033,073	1,033,073
Hillsborough County Sector Strategies Initiative	-	549,234	549,234	549,234
United Way - Tampa Bay Summer Hires Program	-	86,667	86,667	86,667
Good Jobs Initiative	-	25,250	25,250	25,250
FL Medical - Foundation for Caring	-	5,201	5,201	5,201
Total Direct Grants/Special Projects	-	1,901,899	1,901,899	1,901,899
TOTAL Grants Federal, State & Local	8,593,348	21,613,679	30,207,027	29,932,027
Other Revenue				
Ticket to Work	90,000	90,000	180,000	180,000
Tobacco Free Florida	2,400	10,000	12,400	12,400
Interest	12,000	1,200	13,200	13,200
Total Other Revenue	104,400	101,200	205,600	205,600
TOTAL 2024-2025 BUDGETED REVENUE	8,697,748	21,714,879	30,412,627	30,137,627



***2024-2025 Planning Budget (Revenues & Expenses) – Modification #3
by County and Combined***

Pinellas County
2024-2025 Planning Budget
Modification #3

Budget Category	Approved 2024- 2025 Planning Budget Mod #2	Budget Mod #3	Proposed 2024- 2025 Planning Budget - Mod #3
Grant Revenue - Federal	8,510,848	82,500	8,593,348
Grant Revenue - Local	-	-	-
Total Grant Revenue	8,510,848	82,500	8,593,348
Other Income	104,400	-	104,400
Total Revenues	8,615,248	82,500	8,697,748
Expenses			
Salaries	3,331,390	(116,980)	3,214,410
Payroll Tax & Fringe	1,112,081	(210,191)	901,890
Retirement	283,393	(6,040)	277,353
Staff Training & Education	38,350	-	38,350
Accounting & Professional fees	248,646	28,730	277,376
Occupancy	355,618	26,342	381,960
Contract Labor	264,834	69,282	334,116
Office Expense	187,626	(4,455)	183,171
Insurance	79,000	2,974	81,974
Communications	96,276	-	96,276
Community Outreach	35,132	(2,523)	32,609
Travel	48,650	17,000	65,650
Meetings & Conferences	24,500	4,200	28,700
License, Dues & Other Fees	40,999	-	40,999
Other expense	4,500	3,240	7,740
Customer Training & Related Costs	2,123,914	145,561	2,269,475
Service Provider Contract	327,000	-	327,000
Total Expenses	8,601,909	(42,859)	8,559,050
Net Income/(Loss)	13,339	-	13,339
Unobligated Balance	-	125,359	125,359

Hillsborough County
2024-2025 Planning Budget
Modification #3

Budget Category	Approved 2024- 2025 Planning Budget Mod #2	Budget Mod #3	Proposed 2024- 2025 Planning Budget - Mod #3
Grant Revenue - Federal	19,519,280	192,500	19,711,780
Grant Revenue - Local	1,901,899	-	1,901,899
Total Grant Revenue	21,421,179	192,500	21,613,679
Other Income	101,200	-	101,200
Total Revenues	21,522,379	192,500	21,714,879
Expenses			
Salaries	7,986,580	(61,204)	7,925,376
Payroll Tax & Fringe	2,098,537	(14,244)	2,084,293
Retirement	526,700	(3,737)	522,963
Staff Training & Education	113,000	-	113,000
Accounting & Professional fees	788,872	(61,855)	727,018
Occupancy	1,580,652	-	1,580,652
Contract Labor	565,856	(36,900)	528,956
Office Expense	901,692	57,217	958,909
Insurance	134,140	1,290	135,430
Communications	124,400	(3,020)	121,380
Community Outreach	534,600	(1,290)	533,310
Travel	109,450	-	109,450
Meetings & Conferences	71,500	50,000	121,500
License, Dues & Other Fees	35,200	-	35,200
Other expense	-	5,000	5,000
Customer Training & Related Costs	5,604,000	261,063	5,865,063
Service Provider Contracts	130,000	-	130,000
Total Expenses	21,305,179	192,321	21,497,500
Net Income/(Loss)	10,700	-	10,700
Unobligated Balance	206,500	179	206,679

**CareerSource Hillsborough Pinellas
2024-2025 Planning Budget Combined
Modification #3**

Budget Category	Approved 2024- 2025 Planning Budget Mod #2	Budget Mod #3	Proposed 2024- 2025 Planning Budget - Mod #3
Grant Revenue - Federal	28,030,128	275,000	28,305,128
Grant Revenue - Local	1,901,899	-	1,901,899
Total Grant Revenue	29,932,027	275,000	30,207,027
Other Income	205,600	-	205,600
Total Revenues	30,137,627	275,000	30,412,627
Salaries	11,317,970	(178,184)	11,139,787
Payroll Tax & Fringe	3,210,618	(224,435)	2,986,184
Retirement	810,093	(9,777)	800,316
Staff Training & Education	151,350	-	151,350
Accounting & Professional fees	1,037,518	(33,125)	1,004,394
Occupancy	1,936,270	26,342	1,962,612
Contract Labor	830,690	32,382	863,072
Office Expense	1,089,318	52,762	1,142,080
Insurance	213,140	4,264	217,404
Communications	220,676	(3,020)	217,656
Community Outreach	569,732	(3,813)	565,919
Travel	158,100	17,000	175,100
Meetings & Conferences	96,000	54,200	150,200
License, Dues & Other Fees	76,199	-	76,199
Other expense	4,500	8,240	12,740
Customer Training & Related Costs	7,727,914	406,624	8,134,538
Service Provider Contracts	457,000	-	457,000
Total Expenses	29,907,088	149,462	30,056,550
Net Income/(Loss)	24,039	24,039	24,039
Unobligated Balance			332,038



***2024-2025 Planning Budget by Funding Type
- Modification #3
by County and Combined***

Pinellas County
Planning Budget by Funding Type
Fiscal Year 2025 (July 2024-June 2025)

	Workforce Innovation & Opportunity Act	Employment Services Programs	Welfare Transition Programs	Direct Grants & Special Projects	Total Program Budget FY2024-2025	Unrestricted	Total Organization Budget FY 2024-2025	Prior Approved Budget FY 2024-2025	Modification #3
Revenue:									
Fiscal Year 2025 New Allocations	3,066,346	1,406,635	1,628,500	-	6,101,481	-	6,101,481	6,030,481	71,000
Carryforward from Prior Year Allocations	1,571,898	456,158	463,811	-	2,491,867	-	2,491,867	2,491,867	-
Projected Unrestricted Revenue	-	-	-	-	-	104,400	104,400	92,900	11,500
Total Revenue	4,638,244	1,862,793	2,092,311	-	8,593,348	104,400	8,697,748	8,615,248	82,500
Expenditures:									
Program Services - Allocated Costs:									
Business Services	590,475	123,090	361,435	-	1,075,000	-	1,075,000	1,299,284	(224,284)
Case Management	883,953	561,234	320,813	-	1,766,000	-	1,766,000	2,115,186	(349,186)
Program Services	941,953	1,681	258,323	-	1,201,957	-	1,201,957	1,281,829	(79,872)
One Stop Operating/Facilities Costs	5,763	450,437	-	-	456,200	-	456,200	338,012	118,188
Technology	-	285,973	14,027	-	300,000	-	300,000	174,157	125,843
Community Outreach	2,540	111,460	-	-	114,000	-	114,000	136,897	(22,897)
Program Staff Training & Professional Development	613	23,315	3,572	-	27,500	-	27,500	27,500	-
Subtotal - Program Services Allocated	2,425,297	1,557,190	958,170	-	4,940,657	-	4,940,657	5,372,865	(432,208)
Program Services - Direct Costs:									
Participant & Work Based Learning	1,412,000	23,000	909,476	-	2,344,476	-	2,344,476	2,120,674	223,802
Direct Grants & Special Projects - Salaries & Benefits	-	-	-	-	-	-	-	-	-
Direct Costs - Other	10,956	-	-	-	10,956	91,061	102,017	90,517	11,500
Subrecipient Contracts	315,752	73	11,175	-	327,000	-	327,000	327,000	-
DEO Staff Travel	-	15,500	-	-	15,500	-	15,500	15,500	-
Subtotal - Program Services Direct	1,738,708	38,573	920,651	-	2,697,932	91,061	2,788,993	2,553,691	235,302
Total Program Service Costs:	4,164,005	1,595,763	1,878,821	-	7,638,589	91,061	7,729,650	7,926,556	(196,906)
Indirect Costs									
Indirect Costs	450,850	174,435	204,115	-	829,400	-	829,400	675,353	154,047
Total Indirect Costs	450,850	174,435	204,115	-	829,400	-	829,400	675,353	154,047
Total Expenditures	4,614,855	1,770,198	2,082,936	-	8,467,989	91,061	8,559,050	8,601,909	(42,859)
Projected Net Income/(Loss)	-	-	-	-	-	13,339	13,339	13,339	-
Unobligated Balance	23,389	92,595	9,375	-	125,359	-	125,359	-	125,359

**Hillsborough County
Planning Budget by Funding Type
Fiscal Year 2025 (July 2024-June 2025)**

	Workforce Innovation & Opportunity Act	Employment Services Programs	Welfare Transition Programs	Direct Grants & Special Projects	Total Program Budget FY2024- 2025	Unrestricted	Total Organization Budget	Prior Approved Budget FY	Modification #3
Revenue:									
Fiscal Year 2025 New Allocations	6,476,711	3,458,363	3,735,853	1,140,417	14,811,344	-	14,811,344	14,618,844	192,500
Carryforward from Prior Year Allocations	4,579,542	1,080,105	381,206	761,482	6,802,335	-	6,802,335	6,802,335	-
Projected Unrestricted Revenue	-	-	-	-	-	101,200	101,200	101,200	-
Total Revenue	11,056,253	4,538,468	4,117,059	1,901,899	21,613,679	101,200	21,714,879	21,522,379	192,500
Expenditures:									
Program Services - Allocated Costs:									
Business Services	1,061,997	104,744	233,259	-	1,400,000	-	1,400,000	1,365,000	35,000
Case Management	2,366,499	1,273,815	1,013,204	-	4,653,518	-	4,653,518	4,699,535	(46,017)
Program Services	1,778,827	326,882	751,984	-	2,857,693	-	2,857,693	3,010,418	(152,725)
One Stop Operating/Facilities Costs	112,584	1,422,354	-	115,062	1,650,000	-	1,650,000	1,650,000	-
Technology	44,377	467,773	53,882	33,968	600,000	-	600,000	600,000	-
Community Outreach	11,560	268,956	-	19,484	300,000	-	300,000	300,000	-
Program Staff Training & Professional Development	5,974	41,764	-	2,262	50,000	-	50,000	50,000	-
Subtotal - Program Services Allocated	5,381,818	3,906,288	2,052,329	170,776	11,511,211	-	11,511,211	11,674,953	(163,742)
Program Services - Direct Costs:									
Participant & Work Based Learning	3,618,000	40,000	1,545,000	957,063	6,160,063	-	6,160,063	5,904,000	256,063
Direct Grants & Special Projects - Salaries & Benefits	-	-	-	428,726	428,726	-	428,726	428,726	-
Direct Costs - Other	650,000	-	-	92,000	742,000	90,500	832,500	832,500	-
Subrecipient Contracts	80,921	14,870	34,209	-	130,000	-	130,000	130,000	-
DEO Staff Travel	-	35,000	-	-	35,000	-	35,000	35,000	-
Subtotal - Program Services Direct	4,348,921	89,870	1,579,209	1,477,789	7,495,789	90,500	7,586,289	7,330,226	256,063
Total Program Service Costs:	9,730,739	3,996,158	3,631,538	1,648,565	19,007,000	90,500	19,097,500	19,005,179	92,321
Indirect Costs									
Indirect Costs	1,228,810	505,405	456,442	209,343	2,400,000	-	2,400,000	2,300,000	100,000
Total Indirect Costs	1,228,810	505,405	456,442	209,343	2,400,000	-	2,400,000	2,300,000	100,000
Total Expenditures	10,959,549	4,501,563	4,087,980	1,857,908	21,407,000	90,500	21,497,500	21,305,179	192,321
Projected Net Income/(Loss)	-	-	-	-	-	10,700	10,700	10,700	-
Unobligated Balance	96,704	36,905	29,079	43,991	206,679	-	206,679	206,500	179

**CareerSource Hillsborough Pinellas
Planning Budget by Funding Type
Fiscal Year 2025 (July 2024-June 2025)**

	Workforce Innovation & Opportunity Act	Employment Services Programs	Welfare Transition Programs	Direct Grants & Special Projects	Total Program Budget FY2024-2025	Unrestricted	Total Organization Budget FY 2024-2025	Prior Approved Budget FY 2024-2025	Modification #3
Revenue:									
Fiscal Year 2025 New Allocations	9,543,057	4,864,998	5,364,353	1,140,417	20,912,825	-	20,912,825	20,649,325	263,500
Carryforward from Prior Year Allocations	6,151,440	1,536,263	845,017	761,482	9,294,202	-	9,294,202	9,294,202	-
Projected Unrestricted Revenue	-	-	-	-	-	205,600	205,600	194,100	11,500
Total Revenue	15,694,497	6,401,261	6,209,370	1,901,899	30,207,027	205,600	30,412,627	30,137,627	263,500
Expenditures:									
Program Services - Allocated Costs:									
Business Services	1,652,472	227,834	594,694	-	2,475,000	-	2,475,000	2,664,284	(189,284)
Case Management	3,250,452	1,835,049	1,334,017	-	6,419,518	-	6,419,518	6,814,721	(395,203)
Program Services	2,720,780	328,563	1,010,307	-	4,059,650	-	4,059,650	4,292,247	(232,597)
One Stop Operating/Facilities Costs	118,347	1,872,791	-	115,062	2,106,200	-	2,106,200	1,988,012	118,188
Technology	44,377	753,746	67,909	33,968	900,000	-	900,000	774,157	125,843
Community Outreach	14,100	380,416	-	19,484	414,000	-	414,000	436,897	(22,897)
Program Staff Training & Professional Development	6,587	65,079	3,572	2,262	77,500	-	77,500	77,500	-
Subtotal - Program Services Allocated	7,807,115	5,463,478	3,010,499	170,776	16,451,868	-	16,451,868	17,047,818	(595,950)
Program Services - Direct Costs:									
Participant & Work Based Learning	5,030,000	63,000	2,454,476	957,063	8,504,539	-	8,504,539	8,024,674	479,865
Direct Grants & Special Projects - Salaries & Benefits	-	-	-	428,726	428,726	-	428,726	428,726	-
Direct Costs - Other	660,956	-	-	92,000	752,956	181,561	934,517	923,017	11,500
Subrecipient Contracts	396,673	14,943	45,384	-	457,000	-	457,000	457,000	-
DEO Staff Travel	-	50,500	-	-	50,500	-	50,500	50,500	-
Subtotal - Program Services Direct	6,087,629	128,443	2,499,860	1,477,789	10,193,721	181,561	10,375,282	9,883,917	491,365
Total Program Service Costs:	13,894,744	5,591,921	5,510,359	1,648,565	26,645,589	181,561	26,827,150	26,931,735	(104,585)
Indirect Costs									
Indirect Costs	1,679,660	679,840	660,557	209,343	3,229,400	-	3,229,400	2,975,353	254,047
Total Indirect Costs	1,679,660	679,840	660,557	209,343	3,229,400	-	3,229,400	2,975,353	254,047
Total Expenditures	15,574,404	6,271,761	6,170,916	1,857,908	29,874,989	181,561	30,056,550	29,907,088	149,462
Projected Net Income/(Loss)	-					24,039	24,039	24,039	-
Unobligated Balance	120,093	129,500	38,454	43,991	332,038	-	332,038	206,500	114,038



Information Item

Expenditure Reports for Period Ending January 31, 2025

Pinellas County
Grant Award to Expenditure Report
FY 2024-2025
For Period Ending 1/31/2025

Program Description	Award Begin Date	Award End Date	Award Amount	FY 24-25 Budget	FY 24-25 Expenditures YTD	FY 24-25 Remaining Budget	FY 24-25 Expenditure Rate	Overall Expenditure Rate Expected	Overall Expenditure Rate Actual
Workforce Innovation Opportunity Act									
WIOA - Adult PY2023	7/1/22	6/30/25	1,145,026	418,373	418,373	-	100%	86%	100%
WIOA - Adult PY2024	7/1/23	6/30/26	998,435	798,748	261,425	537,323	33%	53%	26%
WIOA - Dislocated Worker PY2023	7/1/22	6/30/25	1,208,487	589,449	589,449	-	100%	86%	100%
WIOA - Dislocated Worker PY2024	7/1/23	6/30/26	1,293,933	1,035,146	369,417	665,729	36%	53%	29%
WIOA - Youth PY2023	4/1/22	6/30/25	918,857	423,350	423,350	-	100%	87%	100%
WIOA - Youth PY2024	4/1/23	6/30/26	776,931	621,544	240,162	381,382	39%	57%	31%
WIOA - Supplemental	7/1/24	6/30/26	129,956	129,956	-	129,956	0%	0%	0%
WIOA - Hope Navigator	7/1/23	6/30/25	128,127	128,127	-	128,127	0%	79%	0%
WIOA - Rapid Response	7/1/24	6/30/25	75,952	75,952	3,351	72,601	4%	59%	4%
WIOA - AI Incumbent Worker	7/1/24	6/30/25	75,000	75,000	-	75,000	0%	0%	0%
WIOA - Sector Based Training	7/1/24	6/30/25	62,500	62,500	-	62,500	0%	0%	0%
WIOA - DWG Hurricane Helene/Milton	10/1/24	9/30/26	185,000	185,000	1,938	183,062	1%	17%	1%
WIOA - Opioid Recovery	12/20/24	12/31/26	82,500	82,500	-	82,500	0%	6%	0%
WIOA - Board Consolidation & Realignment	7/1/23	6/30/25	50,000	12,599	12,599	-	100%	79%	100%
Total Workforce Innovation Opportunity Act			7,130,704	4,638,244	2,320,064	2,318,180	50%		
Employment Services									
Wagner Peyser PY2023	7/1/23	9/30/24	776,626	221,717	221,717	-	100%	100%	100%
Wagner Peyser PY2024	7/1/24	9/30/25	811,532	595,000	233,544	361,456	39%	47%	29%
WP - Apprenticeship Navigator	7/1/24	6/30/25	48,000	48,000	383	47,617	1%	59%	1%
WP - Hope Navigator	7/1/23	6/30/25	89,689	82,673	4,671	78,002	6%	79%	13%
WP - Hope Navigator	7/1/23	6/30/25	35,714	35,714	-	35,714	0%	79%	0%
DVOP	7/1/24	12/31/25	180,567	145,631	42,294	103,337	29%	39%	43%
LVER	7/1/24	12/31/25	29,395	22,369	12,490	9,879	56%	39%	66%
Supplemental Nutrition Assistance Program PY2023	10/1/23	9/30/24	281,705	28,845	28,845	-	100%	100%	100%
Supplemental Nutrition Assistance Program PY2024	10/1/24	9/30/25	237,493	178,120	69,221	108,899	39%	34%	29%
TAA Training	10/1/22	9/30/24	8,394	1,996	-	1,996	0%	100%	76%
TAA Training	10/1/24	9/30/25	23,270	23,270	405	22,865	2%	34%	2%
TAA Case Management/Admin	10/1/22	9/30/24	3,850	1,734	-	1,734	0%	100%	55%
RESEA Transition PY2023	1/1/23	9/30/25	482,814	119,193	119,193	-	100%	76%	100%
RESEA Transition PY2024	1/1/24	9/30/25	478,041	358,531	286,228	72,303	80%	62%	60%
Total Employment Services			3,487,091	1,862,793	1,018,991	843,802	55%		
Welfare Transition									
Welfare Transition Program PY2024 Oct-June	10/1/23	8/31/24	1,611,956	463,811	463,811	-	100%	100%	100%
Welfare Transition Program PY2025 July-Sept	7/1/24	11/30/24	330,498	330,498	330,498	(0)	100%	100%	100%
Welfare Transition Program PY2025 Oct-June	10/1/24	6/30/25	1,430,921	1,298,002	243,782	1,054,220	19%	45%	17%
Total Welfare Transition			3,373,375	2,092,311	1,038,091	1,054,220	50%		
Totals			\$ 8,593,348	4,377,146	4,216,202	51%			

Hillsborough County
Grant Award to Actual Expenditures
FY 2024-2025
For Period Ending 1/31/2025

Program Description	Award Begin Date	Award End Date	Award Amount	FY 24-25 Budget	FY 24-25 Expenditures YTD	FY 24-25 Remaining Budget	FY 24-25 Expenditure Rate	Overall Expenditure Rate Expected	Overall Expenditure Rate Actual
Workforce Innovation Opportunity Act									
WIOA - Adult PY2023	7/1/22	6/30/25	2,177,393	994,479	994,479	0	100%	86%	100%
WIOA - Adult PY2024	7/1/23	6/30/26	1,854,237	1,483,390	421,282	1,062,108	28%	53%	23%
WIOA - Dislocated Worker PY2023	7/1/22	6/30/25	2,186,118	1,179,853	761,190	418,663	65%	86%	81%
WIOA - Dislocated Worker PY2024	7/1/23	6/30/26	2,300,324	1,840,259	-	1,840,259	0%	53%	0%
WIOA - Youth PY2023	4/1/22	6/30/25	2,318,736	1,315,358	1,315,358	0	100%	87%	100%
WIOA - Youth PY2024	4/1/23	6/30/26	1,902,143	1,521,714	455,478	1,066,236	30%	57%	24%
WIOA - Supplemental	7/1/24	6/30/26	241,347	241,347	-	241,347	0%	0%	0%
WIOA - Get There Faster (Veterans & Military Spouses)	10/1/21	6/30/25	3,089,416	821,108	479,502	341,606	58%	89%	89%
WIOA - Hope Navigator	7/1/23	6/30/25	128,127	128,127	27,535	100,592	21%	79%	21%
WIOA - Rapid Response	7/1/24	6/30/25	275,000	275,000	201,200	73,800	73%	59%	73%
WIOA - AI Incumbent Worker	7/1/24	6/30/25	75,000	75,000	-	75,000	0%	0%	0%
WIOA - Sector Based Training	7/1/24	6/30/25	62,500	62,500	-	62,500	0%	0%	0%
WIOA - DWG Hurricane Helene/Milton	10/1/24	9/30/26	185,000	185,000	57,586	127,414	31%	17%	31%
WIOA - Opioid Recovery	12/20/24	12/31/26	192,500	192,500	-	192,500	0%	6%	0%
WIOA - Board Consolidation & Realignment	7/1/23	6/30/25	356,500	140,617	48,968	91,649	35%	79%	74%
WIOA - Board Consolidation & Realignment	6/3/24	6/30/25	600,000	600,000	-	600,000	0%	62%	0%
Total Workforce Innovation Opportunity Act			17,944,341	11,056,251	4,762,578	6,293,673	43%		
Employment Services									
Wagner Peyser PY2023	7/1/23	9/30/24	1,756,030	385,016	385,016	(0)	100%	100%	100%
Wagner Peyser PY2024	7/1/24	9/30/25	1,575,328	1,475,328	671,495	803,833	46%	47%	43%
WP - Apprenticeship Navigator	7/1/24	7/31/24	1,000	1,000	1,000	-	100%	100%	100%
WP - Apprenticeship Navigator	7/1/24	6/30/25	48,000	48,000	37,887	10,113	79%	59%	79%
WP - Hope Navigator	7/1/23	6/30/25	89,689	74,815	29,263	45,552	39%	79%	49%
WP - Hope Navigator	7/1/23	6/30/25	35,714	35,714	-	35,714	0%	79%	0%
DVOP	7/1/24	12/31/25	217,178	217,178	45,912	171,266	21%	39%	21%
LVER	7/1/24	12/31/25	79,495	79,495	25,081	54,414	32%	39%	32%
Supplemental Nutrition Assistance Program PY2023	10/1/23	9/30/24	815,596	221,950	221,950	(0)	100%	100%	100%
Supplemental Nutrition Assistance Program PY2024	10/1/24	9/30/25	675,941	506,959	244,415	262,544	48%	34%	36%
TAA Training	10/1/22	9/30/24	21,442	21,442	-	21,442	0%	100%	0%
TAA Training	10/1/24	9/30/25	25,000	25,000	-	25,000	0%	34%	0%
TAA Case Management/Admin	10/1/22	9/30/24	3,917	3,917	3,917	-	100%	100%	100%
RESEA Transition PY2023	1/1/23	9/30/25	947,195	470,748	470,748	0	100%	76%	100%
RESEA Transition PY2024	1/1/24	9/30/25	927,963	695,972	72,894	623,078	10%	62%	8%
Military Family	7/1/24	6/30/25	275,937	275,937	142,696	133,241	52%	59%	52%
Total Employment Services			7,495,425	4,538,470	2,352,274	2,186,196	52%		
Welfare Transition									
Welfare Transition Program PY2024 Oct-June	10/1/23	8/31/24	3,111,657	381,206	381,206	(0)	100%	100%	100%
Welfare Transition Program PY2025 July-Sept	7/1/24	11/30/24	1,043,820	1,043,820	1,043,820	-	100%	100%	100%
Welfare Transition Program PY2025 Oct-June	10/1/24	6/30/25	2,692,033	2,692,033	719,973	1,972,060	27%	0%	27%
Total Welfare Transition			6,847,510	4,117,059	2,144,999	1,972,060	52%		
Direct Grants & Special Projects									
Hills County - Targeted Industry Sector Workforce Prog	10/1/23	9/30/24	500,000	174,234	98,178	76,056	56%	100%	85%
Hills County - Targeted Industry Sector Workforce Prog	10/1/24	9/30/25	500,000	375,000	152,288	222,712	41%	34%	30%
Hills County - ACE 4.0	10/1/23	9/30/24	755,000	466,823	197,371	269,452	42%	100%	64%
Hills County - ACE 5.0	10/1/24	9/30/25	755,000	566,250	121,281	444,969	21%	34%	16%
Hills County - Ex-Offender/Returning Citizen	4/1/23	9/30/24	300,000	89,973	34,904	55,069	39%	100%	82%
Hills County - Ex-Offender/Returning Citizen	10/1/24	9/30/25	150,000	112,500	690	111,810	1%	34%	0%
United Way Suncoast - TBSH	7/1/24	6/30/25	86,667	86,667	86,667	-	100%	59%	100%
Good Jobs Initiative	7/1/23	6/30/25	25,250	25,250	-	25,250	0%	0%	0%
Florida Medical - Foundation for Caring	7/1/23	12/31/24	9,244	5,201	5,201	(0)	100%	100%	100%
Total Direct Grants & Special Projects			26,422,701	1,901,898	696,580	1,205,318	37%		
Totals			\$ 21,613,679	9,956,431	11,657,248	46%			

CareerSource Hillsborough Pinellas
 Combined Grant Award to Actual Expenditures
 FY 2024-2025
 For Period Ending 1/31/2025

Program Description	Award Begin Date	Award End Date	Award Amount	FY 24-25 Budget	FY 24-25 Expenditures YTD	FY 24-25 Remaining Budget	FY 24-25 Expenditure Rate	Overall Expenditure Rate Expected	Overall Expenditure Rate Actual
Workforce Innovation Opportunity Act									
WIOA - Adult PY2023	7/1/22	6/30/25	3,322,419	1,412,852	1,412,852	0	100%	86%	100%
WIOA - Adult PY2024	7/1/23	6/30/26	2,852,672	2,282,138	682,707	1,599,431	30%	53%	24%
WIOA - Dislocated Worker PY2023	7/1/22	6/30/25	3,394,605	1,769,302	1,350,639	418,663	76%	86%	88%
WIOA - Dislocated Worker PY2024	7/1/23	6/30/26	3,594,257	2,875,405	369,417	2,505,988	13%	53%	10%
WIOA - Youth PY2023	4/1/22	6/30/25	3,237,593	1,738,708	1,738,708	0	100%	87%	100%
WIOA - Youth PY2024	4/1/23	6/30/26	2,679,074	2,143,258	695,640	1,447,618	32%	57%	26%
WIOA - Supplemental	7/1/24	6/30/26	371,303	371,303	-	371,303	0%	29%	0%
WIOA - Get There Faster (Veterans & Military Spouses)	10/1/21	6/30/25	3,089,416	821,108	479,502	341,606	58%	89%	89%
WIOA - Hope Navigator	7/1/23	6/30/25	256,254	256,254	27,535	228,719	11%	79%	11%
WIOA - Rapid Response	7/1/24	6/30/25	350,952	350,952	204,551	146,401	58%	59%	58%
WIOA - AI Incumbent Worker	7/1/24	6/30/25	150,000	150,000	-	150,000	0%	59%	0%
WIOA - Sector Based Training	7/1/24	6/30/25	125,000	125,000	-	125,000	0%	59%	0%
WIOA - DWG Hurricane Helene/Milton	10/1/24	9/30/26	370,000	370,000	59,524	310,476	16%	17%	16%
WIOA - Opioid Recovery	12/20/24	12/31/26	275,000	275,000	-	275,000	0%	6%	0%
WIOA - Board Consolidation & Realignment	7/1/23	6/30/25	406,500	153,216	48,968	104,248	32%	79%	74%
WIOA - Board Consolidation & Realignment	6/3/24	6/30/25	600,000	600,000	-	600,000	0%	62%	0%
Total Workforce Innovation Opportunity Act			25,075,045	15,694,496	7,070,043	8,624,453	45%		
Employment Services									
Wagner Peyser PY2023	7/1/23	9/30/24	2,532,656	606,733	606,733	(0)	100%	100%	100%
Wagner Peyser PY2024	7/1/24	9/30/25	2,386,860	2,070,328	905,039	1,165,289	44%	47%	38%
WP - Apprenticeship Navigator	7/1/24	7/31/24	1,000	1,000	1,000	-	100%	100%	100%
WP - Apprenticeship Navigator	7/1/24	6/30/25	96,000	96,000	38,270	57,730	40%	59%	40%
WP - Hope Navigator	7/1/23	6/30/25	179,378	157,488	33,934	123,554	22%	79%	31%
WP - Hope Navigator	7/1/23	6/30/25	71,428	71,428	-	71,428	0%	79%	0%
DVOP	7/1/24	12/31/25	397,745	362,809	88,206	274,603	24%	39%	31%
LVER	7/1/24	12/31/25	108,890	101,864	37,571	64,293	37%	39%	41%
Supplemental Nutrition Assistance Program PY2023	10/1/23	9/30/24	1,097,301	250,795	250,795	(0)	100%	100%	100%
Supplemental Nutrition Assistance Program PY2024	10/1/24	9/30/25	913,434	685,079	313,636	371,443	46%	34%	34%
TAA Training	10/1/22	9/30/24	29,836	23,438	-	23,438	0%	100%	21%
TAA Training	10/1/24	9/30/25	48,270	48,270	405	47,865	1%	34%	1%
TAA Case Management/Admin	10/1/22	9/30/24	7,767	5,651	3,917	1,734	69%	100%	78%
RESEA Transition PY2023	1/1/23	9/30/25	1,430,009	589,941	589,941	0	100%	76%	100%
RESEA Transition PY2024	1/1/24	9/30/25	1,406,004	1,054,503	359,122	695,381	34%	62%	26%
Military Family	7/1/24	6/30/25	275,937	275,937	142,696	133,241	52%	59%	52%
Total Employment Services			10,982,516	6,401,263	3,371,265	3,029,998	53%		
Welfare Transition									
Welfare Transition Program PY2024 Oct-June	10/1/23	8/31/24	4,723,613	845,017	845,017	(0)	100%	100%	100%
Welfare Transition Program PY2025 July-Sept	7/1/24	11/30/24	1,374,318	1,374,318	1,374,318	(0)	100%	100%	100%
Welfare Transition Program PY2025 Oct-June	10/1/24	6/30/25	4,122,954	3,990,035	963,755	3,026,280	24%	45%	23%
Total Welfare Transition			10,220,885	6,209,370	3,183,090	3,026,280	51%		
Direct Grants & Special Projects									
Hills County - Targeted Industry Sector Workforce Prog	10/1/23	9/30/24	500,000	174,234	98,178	76,056	56%	100%	85%
Hills County - Targeted Industry Sector Workforce Prog	10/1/24	9/30/25	500,000	375,000	152,288	222,712	41%	34%	30%
Hills County - ACE 4.0	10/1/23	9/30/24	755,000	466,823	197,371	269,452	42%	100%	64%
Hills County - ACE 5.0	10/1/24	9/30/25	755,000	566,250	121,281	444,969	21%	34%	16%
Hills County - Ex-Offender/Returning Citizen	4/1/23	9/30/24	300,000	89,973	34,904	55,069	39%	100%	82%
Hills County - Ex-Offender/Returning Citizen	10/1/24	9/30/25	150,000	112,500	690	111,810	1%	34%	0%
United Way Suncoast - TBSH	7/1/24	6/30/25	86,667	86,667	86,667	-	100%	59%	100%
Good Jobs Initiative	7/1/23	6/30/25	25,250	25,250	-	25,250	0%	79%	0%
Florida Medical - Foundation for Caring	7/1/23	12/31/24	9,244	5,201	5,201	(0)	100%	100%	100%
Total Direct Grants & Special Projects			37,617,397	1,901,898	696,580	1,205,318	37%		
Totals				\$ 30,207,027	14,320,978	15,886,049	47%		

Pinellas County
Budget to Actual
For Period Ending 1/31/2025

Budget Category	Proposed 2024- 2025 Planning Budget - Mod #3	Actual as of 1/31/2025	\$ Remaining Budget
Revenue - Grants	8,593,348	4,377,148	4,216,200
Revenue - Other	104,400	45,288	59,112
Total Revenues	8,697,748	4,422,436	4,275,312
Salaries	3,214,410	1,826,891	1,387,519
Payroll Tax & Fringe	901,890	520,948	380,942
Retirement	277,353	148,598	128,755
Staff Training & Education	38,350	1,343	37,007
Accounting & Professional fees	277,376	166,463	110,913
Occupancy	381,960	216,965	164,995
Contract Labor	334,116	199,821	134,295
Office Expense	183,171	96,348	86,823
Insurance	81,974	2,049	79,925
Communications	96,276	47,663	48,613
Community Outreach	32,609	4,634	27,975
Travel	65,650	32,558	33,092
Meetings & Conferences	28,700	7,380	21,320
License, Dues & Other Fees	40,999	3,763	37,236
Other expense	7,740	37	7,703
Customer Training & Related Costs	2,269,475	921,970	1,347,505
Service Provider Contract	327,000	183,644	143,356
Total Expenses	8,559,050	4,381,078	4,177,972
Projected Net Income/(Loss)	13,339	41,358	
Unobligated Balance	125,359	-	

Hillsborough County
Budget to Actual
For Period Ending 1/31/2025

Budget Category	Proposed 2024- 2025 Planning Budget - Mod #3	Actual as of 1/31/2025	\$ Remaining Budget
Revenue - Grants	21,613,679	9,956,430	11,657,249
Revenue - Other	101,200	85,936	15,264
Total Revenues	21,714,879	10,042,366	11,672,513
Salaries	7,925,376	4,823,373	3,102,004
Payroll Tax & Fringe	2,084,293	1,155,916	928,377
Retirement	522,963	291,370	231,593
Staff Training & Education	113,000	3,110	109,891
Accounting & Professional fees	727,018	306,175	420,842
Occupancy	1,580,652	850,169	730,483
Contract Labor	528,956	309,570	219,386
Office Expense	958,909	292,866	666,042
Insurance	135,430	63,647	71,783
Communications	121,380	64,541	56,839
Community Outreach	533,310	56,218	477,092
Travel	109,450	67,161	42,289
Meetings & Conferences	121,500	91,128	30,372
License, Dues & Other Fees	35,200	17,812	17,388
Other expense	5,000	-	5,000
Customer Training & Related Costs	5,865,063	1,640,954	4,224,109
Service Provider Contract	130,000	36,724	93,276
Total Expenses	21,497,500	10,070,734	11,426,766
Projected Net Income/(Loss)	10,700	(28,367)	
Unobligated Balance	206,679	-	

**CareerSource Hillsborough Pinellas
Combined Budget to Actual
For Period Ending 1/31/2025**

Budget Category	Proposed 2024- 2025 Planning Budget - Mod #3	Actual as of 1/31/2025	\$ Remaining Budget
Revenue - Grants	30,207,027	14,333,578	15,873,449
Revenue - Other	205,600	131,224	74,376
Total Revenues	30,412,627	14,464,802	15,947,825
Salaries	11,139,787	6,650,264	4,489,523
Payroll Tax & Fringe	2,986,184	1,676,864	1,309,319
Retirement	800,316	439,968	360,348
Staff Training & Education	151,350	4,453	146,897
Accounting & Professional fees	1,004,394	472,639	531,755
Occupancy	1,962,612	1,067,134	895,478
Contract Labor	863,072	509,391	353,681
Office Expense	1,142,080	389,215	752,865
Insurance	217,404	65,696	151,708
Communications	217,656	112,204	105,452
Community Outreach	565,919	60,853	505,066
Travel	175,100	99,719	75,381
Meetings & Conferences	150,200	98,508	51,692
License, Dues & Other Fees	76,199	21,575	54,624
Other expense	12,740	37	12,703
Customer Training & Related Costs	8,134,538	2,562,924	5,571,614
Service Provider Contract	457,000	220,368	236,632
Total Expenses	30,056,550	14,451,811	15,604,738
Projected Net Income/(Loss)	24,039	12,991	
Unobligated Balance	332,038	-	



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