### Form **990-EZ**

Department of the Treasury Internal Revenue Service

# Short Form Return of Organization Exempt From Income Tax

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

► Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

OMB No. 1545-1150

2013

Open to Public Inspection

Deployer identification number   Power charges   Power charg	A	Fort	the 2013 calendar year, or tax year beginning , 2013, and ending				
Traine change   Part   Receive and   Part	В	Check	s if applicable:	mployer iden	tification number		
Po BOX 651   Enterprise number   T60-376-6683   F Group Exemption   Number   T60-576-6683   F Group Exemption   T60-576-6683   F Group Exempti	-	ŧ.	VIDN DIVID WALLEY WICHODIGE COCTO				
RERNVILLE, CA 93238-0651	-		ID 0 B0V 651				
Represented return   Application pending   F Group Exemption   Rumber.   F Group Exemption   F Group Exemption   Rumber.   F Group Exemption   F Group Exe	-	():	KERNVILLE CA 93238-0651				
Accounting Method:   Cash   X   Accrual Other (specify)	-		ded return				
Cash   Mebsite: N/A   Accounting Method:   Cash   X  Accrual Other (specify)   Mebsite: N/A   Accounting Method:   N/A   Mebsite: N/A   Accounting Method:   N/A   Mebsite: N/A   Mebsit	-		IF G	roup Exen	nption		
Websites: N_A   Signature   Note	G		i i i i i i i i i i i i i i i i i i i				
Tax-exempt status (check only one) -	ï		II Official I				
Add lines 5b, 6c, and 7b, 1o line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assesses (Part II), column (8) below) are \$300,000 or more, file Form 990 instead of Form 990-EZ.  Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I).  Check if the organization used Schedule 0 to respond to any question in this Part I.    1	J		17725				
Part     Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part	K						
Part   Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part  )	L	Add asse	lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total ts (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	. \$	30.737.		
Check if the organization used Schedule O to respond to any question in this Part I  1 Contributions, gifts, grants, and similar amounts received. 2 Program service revenue including government fees and contracts. 3 Membership dues and assessments. 4 Investment income. 4 2, 535. 4 Investment income. 5 a Gross amount from sale of assets other than inventory. 5 b Less: cost or other basis and sales expenses. 5 b Less: cost or other basis and sales expenses. 5 c Gam or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 6 Garming and fundraising events (not including \$ of contributions from fundraising events (not including \$ of contributions for fundraising events (not including \$ of contributions fundraising events	Pa		Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruc	tions for	r Part I)		
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11   Benefits paid to or for members   11   12   12   13   13   14   15   15   15   15   16   15   17   16   17   17   18   18   18   19   18   18   19   19	-	10	Grants and similar amounts paid (list in Schedule O)	10			
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	BA						

, ai	Check if the organization used Sched	dule O to respond to any que	stion in this Part II.				X
-	711771111111111111111111111111111111111			(A)	Beginning of year		(B) End of year
22	Cash, savings, and investments					22	93,750.
23					227,065.	23	227,065.
24	Land and buildings Other assets (describe in Schedule O)	See Schedule	. 0		20,109.	24	20,109.
25	Total assets				333,631.	25	340,924.
26	Total liabilities (describe in Schedule O).				0.	26	0.
27	Net assets or fund balances (line 27 of co			_	333,631.	27	340,924.
	t III Statement of Program Service According				333,031.	1	Expenses
Par	Check if the organization used Sch	edule O to respond to any qu	estion in this Part	HL	[X]	Req	uired for section 501
What	is the organization's primary exempt purpose? See					(c)(3)	and 501(c)(4)
Desc	ribe the organization's program service at	complishments for each of it	s three largest prog	ram	services, as	1947	nizations and section (a)(1) trusts; optional
mea	ribe the organization's program service ac sured by expenses. In a clear and concise fited, and other relevant information for ea	manner, describe the service	es provided, the nu	mber	of persons		hers.)
	0 0 1 1 1 0						
28	See Schedule 0						
	707	s amount includes foreign gr	onte obsek boro			28 a	17 620
	(Grants \$ ) If thi	s amount includes foreign gr	ants, check here			20 a	17,638.
29							
		is amount includes foreign gr				20 -	
	(Grants \$ ) If the	is amount includes foreign gr	ants, check here	0.000.00		29 a	
30							
		s amount includes foreign gr				20 -	
	(Grants \$ ) If th	is amount includes foreign gr	ants, cneck nere		coccesses.	30 a	
31	Other program services (describe in Scho						
		is amount includes foreign gr				31 a	
	Total program service expenses (add line					32	17,638.
Pai	t IV List of Officers, Directors, Tr	ustees, and Key Employ	yees (list each on				ne instructions for Part IV)
	Check if the organization used Sch	nedule O to respond to any q	uestion in this Part	<u>IV</u>			
	4.54	(b) Average hours per	(c) Reportable compens	ation	(d) Health benefits contributions to emplo	vee	(e) Estimated amount of
	(a) Name and Title	week devoted to position	(Forms W-2/1099-MIS (If not paid, enter -0-	-)	benefit plans, and defe compensation	rred	other compensation
<del>,</del>					companion		
See	_Schedule_0			ا ۸		0	_
				0.		0.	0.
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	1400FX			_			
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1-1-0							
			L				
BAA		TEEA0812L	11/27/13				Form 990-EZ (2013)

Pa	the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V.	ule	0	<u>X</u>
33			Yes	No
	If 'Yes,' provide a detailed description of each activity in Schedule O	33		Х
34	Were any significant changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions).	34		Х
35	a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities	-	-	
	(such as those reported on lines 2, 6a, and 7a, among others)?	35 a		X
	b If 'Yes,' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O	35 b		
	c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	35 c		X
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N	36		
37	a Enter amount of political expenditures, direct or indirect, as described in the instructions 37 a 0.	30	THIRDS	Х
	b Did the organization file Form 1120-POL for this year?	37 b	327.0%	Х
38	a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	20-	SIBMO	Religi
ı	b If 'Yes,' complete Schedule L. Part II and enter the total	38 a		X
39	amount involved		Sabuti	
			1,230	
	a initiation fees and capital contributions included on line 9	182		
	a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	2. 1		
	1011		3.7	n he
-	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit		193	RES.
	transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	401		**
	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization	40 b	0.00	X
	managers or disqualified persons during the year under sections 4912, 4955, and 4958		OF STREET	120
•	d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization		الذار	A CONTRACT
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax		30	N. M.
	shelter transaction? It 'Yes,' complete Form 8886-T	40 e		Х
41	List the states with which a copy of this return is filed None			
	The organization's books are in care of Adrienne Burdge  Located at P O Box 184 Kernville CA  At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?  If 'Yes,' enter the name of the foreign country:		290 Yes	No X
c	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.  At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42 c		X
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here	~		N/A N/A No
	Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44a		Х
b	Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44 b	76.3	
С	Did the organization receive any payments for indoor tanning services during the year?	44 b	$\dashv$	<u>X</u>
	If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments?	17,0		1391
45 a	If 'No,' provide an explanation in Schedule O  Did the organization have a controlled entity of the organization within the meaning of section 512(b)(13)?	44 d 45 a	_	
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512/bV(12)2 if Voc.	43 a	(2)16	<u> X</u>
	Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)	45 b		X

							Y	es No
46 Did t	the organization engage, directly or indirectly	ctly, in political campaig	gn activities (	on behalf of	or in opposition to	ſ		11 72 1
Part VI	didates for public office? If 'Yes,' complete						46	X
rait vi	Section 501(c)(3) organization All section 501(c)(3) organizati	<b>5 ONIY</b> One must answer (	rupetions	17 10h ar	ad 52 and same	olato the	+nhlaa	
	for lines 50 and 51.	ons must answer (	questions	47-430 al	iu 52, and comp	nete the	tables	i
	Check if the organization used Schedul	e O to respond to any	question in th	his Part VI		rananananana sasara	nuncione le des	П
							Ye	
47 Did t	the organization engage in lobbying activit	ies or have a section 5	01(h) election	n in effect d	uring the tax year?	If 'Yes,' [		
48 Is the	plete Schedule C, Part IIe organization a school as described in se	otion 170/h\/1\/A\/6\2	HVaalaan				47	X
	the organization make any transfers to an						48	X
b If 'Ye	es,' was the related organization a section	527 organization?	related orga	mzalion:			49 a	X
<b>50</b> Com	plete this table for the organization's five	nighest compensated e	mplovees (o	ther than of	ficers directors true	stees and l	49 D	
emp	loyees) who each received more than \$10	0,000 of compensation	from the org	anization. I	f there is none, ente	r 'None.'	(U)	
	(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable (Forms W-2	compensation /1099-MISC)	(d) Health benefits, contributions to employ benefit plans, and defer compensation	ee (e) Es	timated an	ount of
None								
						_		
f Total	number of other employees paid over \$1	20,000						
	plete this table for the organization's five h		dependent	ontroctors :	lha anabasasasas		1100 000	
comp	pensation from the organization. If there is	none, enter 'None.'	idependent d	contractors v	wno each received n	nore than s	5100,000	) of
	(a) Name and business address of each independent of	ontractor		(b) Type o	of service	(c)	Compensa	ation
None	X					_		
- Total	number of other independent contractors		00.000					
	number of other independent contractors ne organization complete Schedule A? No					-		
charit	table trusts must attach a completed Sche	dule A	organizatioi	ns and 4947	(a)(1) nonexempt	► X	Yes	No
	of perjury, I declare that I have examined this return, incluind complete. Declaration of preparer (other than office				my knowledge and belief, it i	s	103	
irue, correct, a	Ind complete. Declaration of preparer (other than office	r) is based on all information	of which prepare	r has any know	ledge.			
	Signature of officer				Date			
Sian					Treasurer			
Sign Here	No. acceptable							
Sign Here	Adrienne Burdge Type or print name and title				ricasurer			
Sign Here	Adrienne Burdge	Preparer's signature		Date		PTIN	7999	
Here	Adrienne Burdge Type or print name and title Print/Type preparer's name	Preparer's signature Eugene Heins,	1	Date	Check X if		1319	
Sign Here ———— Paid Preparer	Adrienne Burdge Type or print name and title Print/Type preparer's name	Eugene Heins,	1		Check X if	PTIN P0104	4319	
Here Paid	Adrienne Burdge Type or print name and title  Print/Type preparer's name Eugene Heins, E.A.	Eugene Heins, al Services	1	Date	Check X if	P0104	4319 88900	3
Paid Preparer Use Only	Adrienne Burdge Type or print name and title  Print/Type preparer's name  Eugene Heins, E.A.  Firm's name Lindgren Financi  Firm's address 5402 Ruffin Road  San Diego, CA 92	Eugene Heins, al Services l, Suite 210	E.A.	Date 4/13/1	4 Check X if self-employed  Firm's ElN  Phone no. (	P0104		
Paid Preparer Use Only	Adrienne Burdge Type or print name and title  Print/Type preparer's name  Eugene Heins, E.A.  Firm's name  Lindgren Financi Firm's address  5402 Ruffin Road	Eugene Heins, al Services l, Suite 210	E.A.	Date 4/13/1	4 Check X if self-employed  Firm's ElN  Phone no. (	P01044 33-08 858) 56	88900	

95-3702689

Page 4

Form 990-EZ (2013) KERN RIVER VALLEY HISTORICAL SOCIETY

### 2013

# Federal Supplemental Information

Page 1

KERN RIVER VALLEY HISTORICAL SOCIETY

95-3702689

RRF-1--ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA;
PART B--LINE 7--RAFFLES:
ONE RAFFLE WAS HELD, DECEMBER 10, 2013, IN KERNVILLE. GROSS INCOME AND EXPENSES ARE REPORTED IN FORMS 990-EZ, 199, AND RRF-1

#### SCHEDULE A (Form 990 or 990-EZ)

#### **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(E)

Total

KERN RIVER VALLEY HISTORICAL SOCIETY

Employer identification number 95-3702689

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii), (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's 4 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 X June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h. Type I Type II Type III — Functionally integrated Type III - Non-functionally integrated d By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box..... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) 11 g (i) below, the governing body of the supported organization?.... A family member of a person described in (i) above?..... 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above?..... 11 g (iii) Provide the following information about the supported organization(s) h (i) Name of supported organization (ii) EIN (iv) Is the organization in column (i) listed in (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (v) Did you notify (vi) Is the organization in (vii) Amount of monetary the organization in column (i) of your support column (i) your governing document? organized in the U.S.? support? Yes No Yes Yes (A) (B) (C) (D)

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

Schedule A (Form 990 or 990-EZ) 2013

### 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.)

Sec	tion A. Public Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.').						
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						
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.						
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	<b>(b)</b> 2010	<b>(c)</b> 2011	<b>(d)</b> 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 IV.).						
11	Total support. Add lines 7 through 10						71
12	Gross receipts from related activi	ities, etc (see inst	ructions)		******		
13	First five years. If the Form 990 is organization, check this box and	s for the organiza	tion's first, second	d, third, fourth, or	fifth tax year as a	section 501(c)(3)	······· ► []
Sec	tion C. Computation of Pu	blic Support I	Percentage				
	Public support percentage for 20						%
15	Public support percentage from 2	2012 Schedule A,	Part II, line 14				%
16 a	33-1/3% support test $-$ 2013. If t and stop here. The organization $\cdot$	he organization di qualifies as a publ	d not check the b licly supported org	ox on line 13, and janization	the line 14 is 33-	1/3% or more, che	ck this box
b	33-1/3% support test $-$ 2012. If the and stop here. The organization	ie organization dio qualifies as a pub	d not check a box licly supported or	on line 13 or 16a, ganization	, and line 15 is 33	-1/3% or more, che	eck this box
17 a	10%-facts-and-circumstances tes or more, and if the organization r the organization meets the 'facts-	neets the 'facts-ar	nd-circumstances'	test, check this b	nox and <b>stop here</b>	Fynlain in Part IV	how
	10%-facts-and-circumstances testor more, and if the organization rorganization meets the 'facts-and	neets the 'facts-ai -circumstances' te	nd-circumstances' est. The organizat	test, check this b tion qualifies as a	oox and <b>stop here</b> publicly supporte	. Explain in Part IV d organization	how the
18	Private foundation. If the organiz	ation did not chec	k a box on line 13	3, 16a, 16b, 17a, c	or 17b, check this	box and see instru	ctions ►

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

(Complete only if you checked the box on line 9 of Part I 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.)

	ction A. Public Support						
	ndar year (or fiscal yr beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')	33,110.	32,045.	20 102			
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.	33,110.	32,043.	29,193.	30,240.	22,354.	146, 942.
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
	facilities furnished by a governmental unit to the organization without charge						0.
	Total. Add lines 1 through 5	33,110.	32,045.	29,193.	30,240.	22,354.	146, 942.
7 a	a Amounts included on lines 1, 2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	
t	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.						0.
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
		0.	0.	0.	0.	0.	0.
	Public support (Subtract line 7c from line 6.)		FT	. #4			146,942.
	tion B. Total Support	(-) 2000	4120010				_
	dar year (or fiscal yr beginning in) ► Amounts from line 6	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
	Gross income from interest,	33,110.	32,045.	29,193.	30,240.	22,354.	146,942.
	dividends, payments received on securities loans, rents, royalties and income from similar sources	1,096.	534.	1,883.	1,474.	2,535.	7,522.
	income (less section 511 taxes) from businesses acquired after June 30, 1975.					ľ	n
c	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	1,096.	534.	1,883.	1,474.	2.535.	7.522
c	taxes) from businesses acquired after June 30, 1975.	1,096.	534.	1,883.	1,474.	2,535.	7,522.
c 11	taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is	1,096.	534.	1,883.	1,474.	2,535.	7,522.
11 12	taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in						7,522. 0.
11 12 13 14	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total Support. (Add Ins 9,10c, 11 and 12.) First five years. If the Form 990 is organization, check this box and	34,206.	32,579.	31,076.	31,714.	24,889.	7,522.
11 12 13 14	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total Support. (Add Ins 9,10c, 11 and 12.) First five years. If the Form 990 is organization, check this box and tion C. Computation of Pu	34, 206. s for the organization here	32,579. pn's first, second,	31,076. third, fourth, or fi	31,714. fth tax year as a s	24, 889. ection 501(c)(3)	7,522. 0.
11 12 13 14 Sect 15	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total Support. (Add Ins 9,10c, 11 and 12.) First five years. If the Form 990 is organization, check this box and tion C. Computation of Pu	34,206. s for the organization here. blic Support P	32,579. on's first, second, ercentage (f) divided by line 1	31,076. third, fourth, or fi	31,714. fth tax year as a s	24,889. ection 501(c)(3)	7,522. 0.
12 13 14 Sector 15 16	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	34,206. s for the organization stop here	32,579. on's first, second, ercentage (f) divided by line 1 eart III, line 15	31,076. third, fourth, or fi	31,714. fth tax year as a s	24,889. ection 501(c)(3)	7,522. 0. 0. 154,464. ►∏
11 12 13 14 Sect 15 16 Sect	taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total Support. (Add Ins 9,10c, 11 and 12.) First five years. If the Form 990 is organization, check this box and tion C. Computation of Pupublic support percentage for 201 Public support percentage from 2 tion D. Computation of Inv	34,206. s for the organization stop here	32,579. on's first, second, ercentage (f) divided by line 1 ert III, line 15	31,076. third, fourth, or fi	31,714. fth tax year as a s	24,889. ection 501(c)(3)	7,522. 0. 0. 154,464. ► □
11 12 13 14 Sect 15 16 Sect 17	taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total Support. (Add Ins 9,10c, 11 and 12.)  First five years. If the Form 990 is organization, check this box and tion C. Computation of Pupublic support percentage for 201 Public support percentage from 2 tion D. Computation of Investment income percentage for	34, 206. s for the organization of the stop here. blic Support P 13 (line 8, column of the column of	32,579. on's first, second, ercentage (f) divided by line 1 eart III, line 15 ne Percentage blumn (f) divided b	31,076. third, fourth, or fi	31,714. fth tax year as a s	24, 889. ection 501(c)(3) 	7,522.  0.  154,464.  ▶ □  95.13 %  96.37 %
11 12 13 14 Sect 15 16 Sect 17 18	taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total Support. (Add Ins 9,10c, 11 and 12.)  First five years. If the Form 990 is organization, check this box and tion C. Computation of Pu  Public support percentage from 2  Public support percentage from 2  tion D. Computation of Inv  Investment income percentage for	34,206. s for the organization stop here. blic Support P 13 (line 8, column of the col	32,579. pn's first, second, ercentage (f) divided by line 1 ert III, line 15 ne Percentage plumn (f) divided b A, Part III, line 17	31,076. third, fourth, or fi	31,714. fth tax year as a s	24, 889. ection 501(c)(3) 15 16	7,522.  0.  154,464.  ▶ □  95.13 %  96.37 %  4.87 %  3.63 %
11 12 13 14 Sect 15 16 Sect 17 18 19 a	taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total Support. (Add Ins 9,10c, 11 and 12.)  First five years. If the Form 990 is organization, check this box and tion C. Computation of Pupublic support percentage for 201 Public support percentage from 2 tion D. Computation of Investment income percentage for 33-1/3% support tests — 2013. If this is not more than 33-1/3%, check the support tests acquired to the support tests and the support tests acquired to the suppor	34, 206. s for the organization here. blic Support P 13 (line 8, column of the column	32,579. on's first, second, ercentage (f) divided by line 15 art III, line 15 De Percentage olumn (f) divided b A, Part III, line 17 d not check the bo	31,076. third, fourth, or fi  3, column (f).  y line 13, column  x on line 14, and tion qualifies as a	31,714.  fth tax year as a s  (f))	24, 889. ection 501(c)(3)  15 16  17 18 an 33-1/3%, and lind organization	7,522.  0.  154,464.  95.13 % 96.37 %  4.87 % 3.63 %  ne 17
11 12 13 14 Sect 15 16 Sect 17 18 19 a b	taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total Support. (Add ins 9,10c, 11 and 12.)  First five years. If the Form 990 is organization, check this box and tion C. Computation of Pupublic support percentage for 201 Public support percentage from 2 tion D. Computation of Investment income percentage for 33-1/3% support tests — 2013. If the sale of the sale	34, 206. s for the organization here. blic Support P 13 (line 8, column of the column	32,579.  on's first, second,  ercentage (f) divided by line 15 art III, line 15 be Percentage olumn (f) divided b A, Part III, line 17 d not check the boolere. The organization of check a box of stop here. The organization of check a box of stop here. The organization of check a box of stop here. The organization of check a box of stop here. The organization of check a box of stop here.	31,076. third, fourth, or fi  13, column (f)).  y line 13, column  x on line 14, and tion qualifies as a son line 14 or line rganization qualifier	31,714.  fth tax year as a s  (f))  line 15 is more that a publicly supporte 19a, and line 16 is les as a publicly si	24, 889. ection 501(c)(3)  15 16  17 18 an 33-1/3%, and lind organization	7,522.  0.  154,464.  95.13 % 96.37 %  4.87 % 3.63 %  ne 17  X, and ion

Schedule A				KERN	RIVER	VALLEY	HISTOR	RICAL	SOCIETY	95-3702689	Page 4
Part IV	Supple or 17b; (See in	mental and Pa struction	Informa rt III, Iin ns).	<b>tion.</b> F e 12. A	Provide Iso com	the expla oplete this	nations r s part for	equire any a	d by Part dditional i	II, line 10; Part II, line 17a nformation.	
		··· ··· ··· ··· ···									

# **Schedule O - Supplemental Information**

Page 1

#### KERN RIVER VALLEY HISTORICAL SOCIETY

95-3702689

Form 990-EZ, Part IV (continued) List of Officers, Directors, Trustees, and Key Employees

Name and Title	Average Hours Per Week Devoted	Compen- sation	Health Benefits & Contrib- bution toEBP & DC	Estimated Amount Of Other Compen.
Robert Woods Vice President	2	\$ 0.	\$ 0.	\$ 0.
Alexis Woods Secretary	2	0.	0.	0.
Shirley Fisher Secretary	2	0.	0.	0,
Adrienne "Chris" Burdge Treasurer	2	0.,	0	0
Ron Anderson Director	1	0	0.	0
Ron Bach Director	1	0.	0.	0.
Liz Bardos Director	1	0.	0.	0.
Ken Colbert Director	1	0	0.	0.
Linda Diaz Director	1	0.0	0.	0.
Dave Freeland Director	1	0.	0.	0.
Anne Litz Director	1	0.	0.	0.
Sally Partin Director	1	0.	0.	0.
Chet Rock Director	1	0.	0.	0.
Sharonkay Spoonmore Director	1	0.	0.	0.
	Total		<u>\$ 0.</u>	

2013 Schedule O	- Supplemental Information	Page 1
KERN RIVE	R VALLEY HISTORICAL SOCIETY	95-3702689
Awards Badges Curator Dues Essay Contest & Scholarships History Days Insurance Museum Supplies Office Expenses Plaques, Bricks, Memorials Raffle Expense	Total \$	1,329. 398. 66. 253. 140. 1,225. 375. 2,423. 345. 1,399. 492. 1,399. 476. 427.
Form 990-EZ, Part II, Line 24 Other Assets  Furniture & Fixtures Machinery & Equipment Inventory Asset To Balance	9,688. 9,008.	Ending 1,456. 9,688. 9,00843. 20,109.
Form 990-EZ, Part IV List of Officers, Directors, Trustees, and P	Key Employees  Health Benefits & Contrib- Average Hours Per Week Devoted Sation EBP & DC	Estimated Amount Of Other Compen.
Tom McKinney President	2 \$ 0. \$ 0. \$	0.
Dianna Anderson Vice President	2 0. 0.	0.
Richard Burdge Vice President	2 0. 0.	0.
Linda Kubisiak Vice President	2 0. 0.	0.
Diane Bach Vice President	2 0. 0.	0.

Name of the organization  KERN RIVER VALLEY HISTORICAL SOCIETY	Employer identification number 95-3702689
Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishment	ts
150 OR MORE VOLUNTEERS WHO DONATE THEIR TIME. PURCHASE AND PL	ACEMENT OF PLAQUES
OF A HISTORICAL NATURE THROUGHOUT THE KERN RIVER VALLEY. OPER	ATION OF A SMALL
GIFT SHOP IN THE MUSEUM BY VOLUNTEER STAFF FOR SIX HOURS A DAY	,. FOUR DAYS A WEEK.
YEARLY VISITORS NUMBER OVER 10,000. TOURS AVAILABLE OF THE H	ISTORICAL WALKER
HOUSE AND ITS CONTENTS FOR STUDENTS AND VISITORS. ANNUAL HIST	ORY DAYS CELEBRATION
OFFERED ANNUALLY AND ATTENDED BY 1000 OR MORE.	
Form 990-EZ, Part V - Regarding Transfers Associated with Personal Benefit Contra	icts
(a) Did the organization, during the year, receive any funds,	directly or
indirectly, to pay premiums on a personal benefit contract?	No
(b) Did the organization, during the year, pay premiums, direct	ctly or
indirectly, on a personal benefit contract?	No
	•

#### **SCHEDULE 0** (Form 990 or 990-EZ)

### 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 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number
KERN RIVER VALLEY HISTORICAL SOCIETY	95-3702689
Form 990-EZ, Part III - Organization's Primary Exempt Purpose	
SCHOLARSHIPS GIVEN TO HIGH SCHOOL STUDENTS WHO QUALIFY AND HAV	E ENROLLED IN A
COLLEGE OR UNIVERSITY. ELEMENTARY SCHOOL HISTORY AND ART CONT	ESTS AND PRIZES.
HISTORY CLASSES PROVIDED FOR PUBLIC ATTENDANCE FREE OF CHARGE.	
MAINTENANCE AND UPKEEP OF MUSEUM BUILDING AND ITS CONTENTS OF	HISTORICAL VALUE
INCLUDING AN ORIGINAL LOG CABIN ON THE PREMISES WHICH WAS REST	ORED TO ITS ORIGINAL
STATE WITH ORIGINAL MATERIALS; MAINTENANCE AND UPKEEP OF AN OR	IGINAL 1926 GRAHAM
TRUCK, COVERED WAGON, ORIGINAL STAGECOACH AND FARM EQUIPMENT;	INDIAN ARTIFACTS,
ITEMS OF THE LOCAL COMMUNITY OF A HISTORICAL NATURE, PHOTOGRAPH	HS, MAPS, ETC. BY
150 OR MORE VOLUNTEERS WHO DONATE THEIR TIME. PURCHASE AND PL	ACEMENT OF PLAQUES
OF A HISTORICAL NATURE THROUGHOUT THE KERN RIVER VALLEY. OPER	ATION OF A SMALL
GIFR SHOP IN THE MUSEUM BY A VOLUNTEER STAFF FOR SIX HOURS A DA	AY, FOUR DAYS A
WEEK. YEARLY VISITORS NUMBER OVER 10,000. TOURS AVAILABLE OF	THE HISTORICAL
WALKER HOUSE AND ITS CONTENTS FOR STUDENTS AND VISITORS. ANNUA	AL HISTORY DAYS
CELEBRATION OFFERED ANNUALLY AND ATTENDED BY 1000 OR MORE.	
Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishment	s
A. SCHOLARSHIPS GIVEN TO HIGH SCHOOL STUDENTS WHO QUALIFY AND	HAVE ENROLLED IN A
COLLEGE OR UNIVERSITY. ELEMENTARY SCHOOL HISTORY AND ART CONTR	ESTS AND PRIZES.
HISTORY CLASSES PROVIDED FOR PUBLIC ATTENDANCE FREE OF CHARGE.	
B. MAINTENANCE AND UPKEEP OF MUSEUM BUILDING AND ITS CONTENTS	OF HISTORICAL VALUE
INCLUDING AN ORIGINAL LOG CABIN ON THE PREMISES WHICH WAS RESTO	DRED TO ITS ORIGINAL
STATE WITH ORIGINAL MATERIALS; MAINTENANCE AND UPKEEP OF AN ORI	GINAL 1926 GRAHAM
TRUCK, COVERED WAGON, ORIGINAL STAGECOACH AND FARM EQUIPMENT,	NDIAN ARTIFACT,
ITEMS OF THE LOCAL COMMUNITY OF A HISTORICAL NATURE, PHOTOGRAPE	IS MAPS ETC BY