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SCANNED SEP 0 9 2010

Form 990-EZ Department of the Treasury

Internal Revenue Service

OMB No 1545-1150

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Sponsoning organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

Open to Public Inspection

Α	For the	he 2009 calendar year, or tax year beginning and ending		
В	Check i applicat	f Please C Name of organization D Em	ployer	identification number
Г	∧adre	SS USE IRS TTTLF KANAWHA RESOURCE CONSERVATION &		
Έ	chang Name	land of DEVELOPMENT (RC & D)	i1 - 0	172533
<u> </u>	chang ☐ Initia retur	·		e number
낟	V retur Term	11 (366)	•	793639
느	lated	Instruc-		
느	—√retur			emption
<u> </u>	Apply péndi		mber 1	
	• Se	ction 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed G Accounting r	nethod	X Cash Accrual
		Schedule A (Form 990 or 990-EZ). Other (specif	y) ▶	
	Websi		ıf i	the organization is not
J	Tax-ex	xempt status (check only one) — 🔀 501(c) (3 −) 🗨 (insert no) 🔲 4947(a)(1) or _ 🛄 527 required to attac	h Sched	dule B (Form 990, 990-EZ, or 990-PF)
K	Check	▶ X If the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more	than \$	25,000 A Form 990-EZ or
		Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return		
L	Add lin	nes 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ	▶ \$	131,935.
	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instruction	s for Pa	
نىشىنا	1	Contributions, gifts, grants, and similar amounts received	1	95,896.
	2	Program service revenue including government fees and contracts	2	27,710.
	3	Membership dues and assessments	3	4,150.
	1	·	4	1,1301
	4	Investment incorne	-	-
	5a	Gross amount from sale of assets other than inventory 5a	-	
	þ	Less cost or other basis and sales expenses 5b		
-	C	Gain vi (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
Ę	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ ☐☐		
Revenue	a	Gross revenue (not including \$ of contributions		
æ	İ	reported on line 1) 6a		
	b	Less direct expenses other than fundraising expenses 6b		
	C	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	
	7a	Gross sales of inventory, less returns and allowances 7a		
	b	Less cost of goods sold 7b		
	C	Gross profit or (loss) from sales of inventory-(Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe RECFIVED SEE STATEMENT 3)	8	4,179.
	g	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	131,935.
	10	Grants and similar amounts paid (attach schedule)	10	15,100.
	11	Benefits paid to or for members S AUG I 7 2010 O	11	25,255
/ 0	1	Salaries, other compensation, and employee benefits \mathcal{C}	12	18,124.
nses	12	Professional face and other payments to independ of Control 2011	13	50,931.
ריי	113	Professional fees and other payments to independent contractors, UT	·	18,005.
Ä	14	Occupancy, rent, utilities, and maintenance	14	437.
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ► SEE STATEMENT: 1)	16	49,868.
_	17	Total expenses. Add lines 10 through 16	17	152,465.
ø	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<20,530.
set	19	Net assets or fund balances at beginning of year (from line 27, column (A))		110 410
Net Assets		(must agree :with end-of-year figure reported on prior year's return)	19	118,418.
Zet	20	Other changes in net assets or fund balances (attach explanation)	20_	0 0 0 0
_	21	Net assets or fund balances at end of year Combine lines 18 through 20	21_	97,888.
P	art II	Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 99	0-EZ	
		(See the instructions for Part II) (A) Beginning of year		(B) End of year
22	Cas	th, savings, and investments 98,373	. 22	96,478.
23		d and buildings	23	
24		er assets (describe ► SEE STATEMENT 2) 21,820	. 24	3,796.
25		120, 193		100,274.
26	Tota	al liabilities (describe ► PAYROLL LIABILITIES) 1,775		2,386.
27		assets or fund balances (line 27 of column (B) must agree with line 21) 118,418		97,888.
932		LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.	<u>, </u>	Form 990-EZ (2009)

LITTLE KANAWHA RESOURCE CONSERVATION & DEVELOPMENT (RC & D) 51-0172533 Page 2 Form 990-EZ (2009) Part III Statement of Program Service Accomplishments (See the instructions for Part III) **Expenses** What is the organization's primary exempt purpose? SEE STATEMENT 10 (Required for section 501(c)(3) and 501(c)(4) organizations and Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe section 4947(a)(1) trusts, optional the services provided, the number of persons benefited, and other relevant information for each program title. for others) SEE STATEMENT 7 8,076.) If this amount includes foreign grants, check here 22,025. 28a **SEE STATEMENT 8** 17,974. 0.) If this amount includes foreign grants, check here 29a (Grants \$ SEE STATEMENT 27,681. 0.) If this amount includes foreign grants, check here 30a (Grants \$ 31 Other program services (attach schedule) SEE STATEMENT 11 23,000.) If this amount includes foreign grants, check here 21,776. 31 a 89,456. ▶ 32 32 Total program service expenses (add lines 28a through 31a) Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated (See the instructions for Part IV) (d) Contributions (c) Compensation (b) Title and average hours (e) Expense to employee (a) Name and address per week devoted to (If not paid, enter account and benefit plans & position -0-.) other allowances deferred compensation SEE STATEMENT 6

Form 990-EZ (2009)

DEVELOPMENT (RC & D)

51-0172533

Page 3

Pá	ort V Other Information (Note the statement requirements in the instructions for Part V.)					
	<u> </u>		Yes	No		
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		X		
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		X		
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not					
	reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			1		
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting,	1		Ì		
	and proxy tax requirements?	35a		х		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/	Ā		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,'					
	complete applicable parts of Sch. N	36		х		
37 a	Enter amount of political expenditures, direct or indirect, as described in the instructions.			$\overline{}$		
	Did the organization file Form 1120-POL for this year?	37Ь		х		
	8a 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 period covered by this return?					
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 386 N/A	38a		<u> </u>		
39	Section 501(c)(7) organizations. Enter:	1				
	Initiation fees and capital contributions included on line 9	1				
	Gross receipts, included on line 9, for public use of club facilities 39b N/A	1				
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1 1		l		
	section 4911 ► 0 • ; section 4912 ► 0 • ; section 4955 ► 0 •					
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the					
•	year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction					
	has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		х		
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers					
•	or disqualified persons during the year under sections 4912, 4955, and 4958					
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the					
	organization • • 0 •					
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter					
	transaction? If "Yes," complete Form 8886-T	40e		Х		
41	List the states with which a copy of this return is filed. > WV					
	The organization's books are in care of ► THE ORGANIZATION Telephone no. ► 304679	363	9			
	Located at ► 1014 VOLCANO ROAD, WAVERLY, WV ZIP+4 ► 2	618	4			
b	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		Yes	No		
	account)?	42b		X		
	If "Yes," enter the name of the foreign country:					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.					
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		Х		
	If "Yes," enter the name of the foreign country:					
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here					
	and enter the amount of tax-exempt interest received or accrued during the tax year	N/A				
	· · · · · · · · · · · · · · · · · · ·					
			Yes	No		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of					
	Form 990-EZ	44		х		
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be					
	completed instead of Form 990-EZ	45		Х		
_		Form 9	90-EZ			

LITTLE KANAWHA RESOURCE CONSERVATION & DEVELOPMENT (RC & D)

Form 990-EZ (2009)

51-0172533

Page 4

Pa	Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt characteristics and section 4947(a)(1) nonexempt characterists must answer questions and 51.					
46	6 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to can	didates for public		1	Yes	No
	office? If "Yes," complete Schedule C, Part I	·	. [46		X
47			· [47		X
48			·	48	1	X
49 a				49a	İ	X
	b If "Yes," was the related organization a section 527 organization?		H-	49b		
50	and a state of the	ustees and key en	<u></u>		ived n	nore
	(a) Name and address of each employee paid more per week devoted to position NONE (b) Title and average hours per week devoted to position	c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e)	Exper ount a allowa	
51	organization If there is none, enter "None" NONE		·	,,		
	(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of serv	/Ice (c)	Comp	ensati	on
	· · · · · · · · · · · · · · · · · · ·					
4	d Total number of other independent contractors each receiving over \$100,000	<u> </u>				
u	u Total humber of other independent contractors each receiving over \$100,000					
Sign Here		and to the best of my wledge	knowledge and beli 8-13- Date		ue,	
	Preparer's signature VIVI 08/11/10 employs the Only Firm's name (or yours of self-employed). Preparer's signature VIVI 08/11/10 employs the Only Firm's name (or yours of self-employed). Preparer's signature VIVI 08/11/10 employs the Only of Street of Str		rer's identifying nur	nber (Sec	e instr)	
	address, and ZIP+4 MARIETTA, OH 45750	no	740-37	3-0	056	õ
May t	ay the IRS discuss this return with the preparer shown above? See instructions	,	▶ [X	Yes		No
			Fo	rm gar). E7 /	

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.

4947(a)(1) nonexempt charitable trust.

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

2009

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

LITTLE KANAWHA RESOURCE CONSERVATION & DEVELOPMENT (RC & D)

Employer identification number 51 - 0172533

۲٤	nt i	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t.) See ins	tructions.		
The	organ	zation is not a	a private foundation	because it is: (For lines	1 through	11, check	only one b	oox.)			
1		A church, co	nvention of churche	s, or association of chur	ches desc	ribed in se	ection 170	(b)(1)(A)(ī).		
2		A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Sc	hedule E.)						
3		A hospital or	a cooperative hospi	tal service organization	described	ın section	170(b)(1)	(A)(iii).			
4		A medical res	search organization	operated in conjunction	with a hos	pital desc	ribed in se	ection 170	(b)(1)(A)(ii	ii). Enter t	the hospital's name,
		city, and stat	te:								
5		An organizat	on operated for the	benefit of a college or u	niversity o	wned or o	perated by	a govern	mental uni	t describ	ed in
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)							
6		A federal, sta	ate, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).			
7	X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit o	or from the	general	public described in
			(b)(1)(A)(vi). (Comple		• • •						•
8				ection 170(b)(1)(A)(vi).	(Complete	Part II.)					
9				eives: (1) more than 33			rom contr	butions, n	nembershi	p fees. a	nd aross receipts from
				nctions - subject to certa							
				axable income (less sect							
			509(a)(2). (Complete			•		•	,		,
10				perated exclusively to te	st for publ	ıc safety. S	See secti o	n 509(a)(4	4).		
11		-		perated exclusively for the	•	•				y out the	purposes of one or
		_		ations described in secti							
				organization and compl							
		a Type	ı b 🗀	Type II d	: 🔲 Тур	e III - Fund	tionally in	tegrated		d□	Type III - Other
е		By checking	this box, I certify tha	t the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified	persons other than
		foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	ations des	cribed in s	ection 509	9(a)(1) or	section 509(a)(2).
f		If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III		
		supporting of	rganization, check th	nis box							
g		Since August	t 17, 2006, has the c	organization accepted ar	ny gift or co	ontribution	from any	of the follo	owing pers	sons?	
		(i) A perso	n who directly or ind	rectly controls, either al	one or tog	ether with	persons o	described	ın (ii) and (iii) below,	Yes No
		the gove	erning body of the st	upported organization?							11g(i)
		(ii) A family	member of a persor	n described in (i) above?							11g(ii)
		(iii) A 35% d	controlled entity of a	person described in (i) o	or (ii) above	∍?					11g(iii)
h		Provide the fe	ollowing information	about the supported or	ganızatıon	(s).					
			1								
(i)	Name	of supported	(ii) EIN	(lii) Type of		rganization			(vi) Is organizatio		(vii) Amount of
	orga	nızatıon		organization (described on lines 1-9	in col (i) lis governing (•			(i) organız	ed in the	support
				above or IRC section		1	,,,,	r support?	··· · us		
				(see instructions))	Yes	No	Yes	No	Yes	No	
							1				
											<u> </u>
		•					-				
					-			-		+ +	
										 	
ota	1			•							

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

Schedule A (Form 990 or 990-EZ) 2009

LITTLE KANAWHA RESOURCE CONSERVATION &

Schedule A (Form 990 or 990-EZ) 2009 DEVELOPMENT (RC & D)

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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007(d) 2008 (e) 2009 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 114.738. 147.377. 271.152. 127,756. 692.723. 31.700. 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 20,000. 20,000. 20.000 20,000 20,000. 100,000. the organization without charge 51.700 134,738. 167.377. 291.152. Total. Add lines 1 through 3 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) 792,7<u>23</u>. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (b) 2006 134,738 (c) 2007 167, 377 Calendar year (or fiscal year beginning in) (a) 2005 51, 700 Amounts from line 4 7 Gross income from interest, dividends, payments received on securities loans, rents, royalties 5. 4,179. 4,184. and income from similar sources 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.) 796,907. 11 Total support. Add lines 7 through 10 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 99.47 14 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 9300 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **►**[X] stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 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

Section A. Public Support	Organizations	Described III	Section 509(a	(Complete on	y if you checked the b	ox on line 9 of Part I
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and	(8) 2003	(b) 2000	(0) 2001	(4) 2000	(6) 2005	(i) Total
· •						
membership fees received. (Do not			1		1	
include any "unusual grants.")		 		 		<u> </u>
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				į		
3 Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513				<u> </u>	 	
4 Tax revenues levied for the organ- ization'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	1					
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)				7.7.7.	, ,	
Section B. Total Support	<u>, </u>		•	•	<u> </u>	
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	(3) 2000	197.=222	(0) = 0.	(4) 2000	(0) 2000	(7,1513
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				<u> </u>		
acquired after June 30, 1975				İ		
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in 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 IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is fo	r the organization'	s first, second, thu	d, fourth, or fifth t	ax vear as a sect	on 501(c)(3) organiz	ation.
check this box and stop here						▶□
Section C. Computation of Pub	lic Support Pe	ercentage				
15 Public support percentage for 2009			column (fl)		15	%
16 Public support percentage from 2008	• • • • • • • • • • • • • • • • • • • •	•	(7)		16	%
Section D. Computation of Inve						
17 Investment income percentage for 20			ne 13. column (fl)		17	<u> </u>
18 Investment income percentage from		**	10,001011111 (1),		18	%
19a 33 1/3% support tests - 2009. If the			on line 14 and line	a 15 is more than		
more than 33 1/3%, check this box a	_					▶ □
b 33 1/3% support tests - 2008. If the	· ·	•		•		and
line 18 is not more than 33 1/3%, che	-					▶ □
20 Private foundation. If the organization		-				
20 Filvate iodiluation, il tile organizatio	an old flot check a	OII IIIIE 14, 19	u, or 130, check t		hedule A (Form 99	0 or 990-F7\ 2000

FORM 990-EZ	OTHER EXPENSES		STATEMENT	1
DESCRIPTION			AMOUNT	
SUPPLIES BAD DEBT EXPENSE ADVERTISING			21,5 17,9 10,3	54.
TOTAL TO FORM 990-EZ, LINE 16			49,8	58.
FORM 990-EZ	OTHER ASSETS		STATEMENT	2
DESCRIPTION		BEG. OF YEAR	END OF YEA	AR
NOTES AND LOANS RECEIVABLE OTHER DEPRECIABLE ASSETS		19,702. 2,118.	1,6	
TOTAL TO FORM 990-EZ, LINE 24		21,820.	3,7	96.
FORM 990-EZ	OTHER REVENUE		STATEMENT	3
DESCRIPTION			AMOUNT	
INTEREST INTEREST-CD ACCOUNT INTEREST-MONEY MARKET ACCOUN INTEREST-REVOLVING LOAN FUND				7. 15. 30.
TOTAL TO FORM 990-EZ, LINE 8			4,1	79.

FORM 990-EZ CASH GRANTS AND ALLOCA	TIONS	STATEMENT	4
CLASS OF ACTIVITY/GRANTEE'S NAME AND ADDRESS	GRANTEE'S RELATIONSHIP	AMOUNT	ı
CONTRACTS TO VARIOUS ENTITIES NONE OF WH	NONE	15,10	0.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		15,10	0.

FO	RM 990-EZ INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS	STATEMENT	5
A)	DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT?	[] YES [X] I	NO
B)	DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? .	. [] YES [X] 1	NO

TRUSTEES	AND KEY EMPLOYEES			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			EXPENSE
CARROLL CUMBERLEDGE	CHAIRMAN 8.00	0.	0.	0.
JIM ASH	VICE-CHAIRMAI 4.00		0.	0.
PAUL JANES	SECRETARY 1.00	0.	0.	0.
FREDDIE FIELDS	TREASURER 8.00	0.	0.	0.
ROBERT WEAVER	MEMBER 0.25	0.	0.	0.
WAYNE HARDWAY	MEMBER 0.25	0.	0.	0.
DONALD PITTS	MEMBER 0.25	0.	0.	0.
TOMMY NUTTER	MEMBER 0.25	0.	0.	0.
OSCAR HARRIS	MEMBER 0.25	0.	0.	0.
DEAN FISHER	MEMBER 0.25	0.	0.	0.
TAMMY SMITH	MEMBER 0.25	0.	0.	0.
FLOYD HODGE	MEMBER 0.25	0.	0.	0.
JUDY WATSON	MEMBER 0.25	0.	0.	0.
JUDY FOUTY	MEMBER 0.25	0.	0.	0.

FORM 990-EZ PART IV - LIST OF OFFICERS, DIRECTORS, STATEMENT

LITTLE KANAWHA RESOURCE (CONSERVATION &		51-01	72533
JIM WOOD	MEMBER 0.25	0.	0.	0.
TERRY WILLIAMS	MEMBER 0.25	0.	0.	0.
CHARLES SMITH	MEMBER 0.25	0.	0.	0.
RONALD FLETCHER	MEMBER 0.25	0.	0.	0.
ROBERT GORBY	MEMBER 0.25	0.	0.	0.
SHIRLEY MICHAEL	MEMBER 0.25	0.	0.	0.
ROBERT LOWE	MEMBER 0.25	0.	0.	0.
ROGER SHAVER	MEMBER 0.25	0.	0.	0.
JEFFREY THORN	MEMBER 0.25	0.	0.	0.
WAYNE DUNN	MEMBER 0.25	0.	0.	0.
JOHN LICHIELLO	MEMBER 0.25	0.	0.	0.
TOTALS INCLUDED ON FORM 990	-EZ, PART IV	0.	0.	0.

STATEMENT

LAWN, GARDEN & FORESTRY EXPO & FAIR: TO PROVIDE LANDOWNERS AND HOMEOWNERS WITH LAND, YARD, GARDEN, AND TIMBER INFORMATION AND EQUIPMENT OPTIONS AND DEMONSTRATIONS. THE EXPO ALSO PROMOTES TRAVEL AND TOURISM, PROVIDES FUN FOR ALL AGES, PROMOTES SAFETY THROUGH DEMONSTRATIONS AND ATTRACTIONS, HISTORIC DISPLAYS, ENTERTAINMENT AND LOCAL FOODS. THERE WERE A TOTAL OF 64 VENDORS AND THE TOTAL WEEKEND GATE COUNT WAS MORE THAN 1500 PEOPLE.

STATEMENT

REVOLVING LOAN FUND: LITTLE KANAWHA RESOURCE CONSERVATION AND DEVELOPMENT (LKRC&D) PROVIDES LOW INTEREST, FIXED RATE LOANS TO NATURAL RESOURCE AND/OR TOURISM BASED BUSINESSES WHICH ARE NECESSARY TO PROMOTE EXISTING AND NEW BUSINESSES IN THE AREA. THE PROGRAM SERVES CALHOUN, PLEASANTS, JACKSON, ROANE, RITCHIE, TYLER, WIRT, WETZEL, AND WOOD COUNTIES.

STATEMENT

9

WILLIAMSTOWN WETLANDS: LKRC&D WORKED WITH MULTIPLE STATE, FEDERAL, AND LOCAL AGENCIES TO IMPROVE THE WETLAND, THEREBY IMPROVING THE NATURAL SETTING FOR BOTH RESIDENTS AND WILDLIFE. ISLANDS AND TRAILS WERE CONSTRUCTED ALONG WITH A BRIDGE, BOARDWALK, CULVERT, WILDLIFE OBSERVATION AREA, AND TRAIL ACCESS POINTS. THOSE BENEFITTING INCLUDE LOCAL RESIDENTS, TOURISTS TO THE COMMUNITY, SCHOOLS, CHURCHES, 4-H CLUB, SCOUTS, AND OTHER GROUPS WHO USE THE AREA FOR RECREATIONAL AND/OR EDUCATIONAL PURPOSES.

STATEMENT 10

OUR MISSION IS TO ASSIST LOCAL COMMUNITIES IN OUR 9 COUNTY AREA IN IMPROVING THEIR ECONOMY AND ENVIRONMENT. OUR VISION STATEMENT IS "LEADING OUR COMMUNITIES THROUGH PARTNERSHIPS TO MAKE THINGS HAPPEN". WE ASSIST COMMUNITIES, SCHOOLS, CHURCHES, AND THE UNDERSERVED IN OUR AREA.

FORM 990-EZ	OTHER PROGRAM SERVICES	នា	ATEMENT	11
DESCRIPTION		GRANTS	EXPENSE	s
TO ASSIST GROUPS IN CARING FAMILIES IN OUR REGION. FOOD, CLOTHING, SCHOOL SUBUILDING SUPPLIES, HYGIEND PARTNERS WITH LOCAL BUSIND DONATIONS ARE USED TO PAY OF PRODUCTS, PICKUP COSTS SUPPLIES. CURRENTLY A GRAJOSEPH'S HELPS WITH THE COMANAGER. ALL OTHER LABOR VOLUNTEER BASIS. PROJECT IN THE MID-OHIO VALLEY. NON-PROFIT GROUPS, TITLE OTHER QUALIFIED ORGANIZATORY PROGRAM. WE HAVE AGREEMED DEPARTMENTS, FOOD BANKS, CHABITAT FOR HUMANITY GROUPS.	NIZATIONS THAT IS DESIGNED G FOR UNDERPRIVILEGED THE PROGRAM CAN PROVIDE PPLIES, COMPUTER EQUIPMENT, E PRODUCTS AND MORE. LKRC&D ESSES TO DISTRIBUTE ITEMS. FOR SHIPPING AND HANDLING , WAREHOUSE MAINTENANCE, AND ANT FOR THE SISTERS OF ST. OST OF THE WAREHOUSE AT THE WAREHOUSE IS ON A SHARING SERVES 9 COUNTIES THERE ARE OVER 300 I SCHOOLS, CHURCHES AND IONS PARTICIPATING IN THE NTS WITH VOLUNTEER FIRE CLOTHES CLOSET PROGRAMS, ENIOR CITIZEN PROGRAMS,	23,000.	21,7	76.
TOTAL TO FORM 990-EZ. LIN	E 31	23,000.	21.7	76.