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Form 990-EZ

# 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)

► Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section \$12(b)(13) must file Form 990 (see instructions)

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000

at the end of the year may use this form

OMB No 1545-1150

2012

**Open to Public** Inspection

		the Treasury  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 requirem	ente	Inspection	n
_	nal Revenu	2012 calendar year, or tax year beginning 07-01 , 2012, and ending		6-30 , <b>201</b> 3	
_	Check if ap			er identification number	
	Address ch				er
$\overline{}$	Name chan		E Telephon	.629065	
$\overline{}$	nitial return	L releption	ie number		
$\equiv$	riitiai retuir Ferminated				
$\equiv$	Amended re		F Group Ex	) 341-1445	
=		Starti			
_	Application		Number		
ı				If the organization is	not
١.		e: ► WWW.KANAWHAVALLEY COLLECTIVE.ORG  mpt status (check only one) -   501(c)(3)	*	tach Schedule B	
				90-EZ, or 990-PF)	
		If the organization is not a section 509(a)(3) supporting organization or section 527 organization a			
		e than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may	y be required (:	see instructions) But if	
	•	nization chooses to file a return, be sure to file a complete return			
		s 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total			
-		column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ			,091
Pa	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances(see the	instructions fo	r Part I)	
				· · · · · · · · · · · · · · · · · · ·	· 🗷
	1	Contributions, gifts, grants, and similar amounts received · · · · · · · · · · · · · · · · · · ·		1 111	,024
11	2	Program service revenue including government fees and contracts		2 1	, 937
	3	Membership dues and assessments $\cdots \cdots \cdots$		3	125
•	4	Investment income $\cdots \cdots \cdots$		4	
;	5a	Gross amount from sale of assets other than inventory			
	b	Less cost or other basis and sales expenses			
	С	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		5c	
	6	Gaming and fundraising events			
,	а	Gross income from gaming (attach Schedule G if greater than			
ģ		\$15,000) · · · · · · · · · · · · · · · · · ·			
el el	ь	Gross income from fundraising events (not including \$ of contribution	ns		
Revenue.	i	from fundraising events reported on line 1) (attach Schedule G if the			
~:		sum of such gross income and contributions exceeds \$15,000)   6b			
ن:	С	Less direct expenses from gaming and fundraising events 6c			
		Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract			
	_	line 6c)		6d	
	7a	Gross sales of inventory, less returns and allowances	· · · · · ·	-	
		Less cost of goods sold	-	İ	
	1	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		7c	
	8	Other revenue (describe in Schedule O)		8	
	9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	<u> </u>		
	10	Grants and similar amounts paid (list in Schedule O)			,091
	11	Benefits paid to or for members		10	
	12	ロー・ カー・ カー・ カー・ カー・ カー・ カー・ カー・ カー・ カー・ カ	I ⊢	11	
es	1	Salaries, other compensation, and employee benefits	70 F	12	
Expenses	13	Professional fees and other payments to independent contractors	181 -		,357
×	14	Occupancy, rent, utilities, and maintenance Printing, publications, postage, and shipping	1(6)	14	
Ш	15			15	544
	16	Other expenses (describe in Schedule O)  Total expenses. Add lines 10 through 16	\ \. ⊢		,790
	17				,691
	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		18 (3	,600
	4.0	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with			
sets	19	· ····································	j		
Assets		end-of-year figure reported on prior year's return)		19 18	,335
Net Assets		· ····································	-	19 <u>18</u> 20	,335





	instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V	<u></u>	· —	<del>بل</del>
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
٠.	detailed description of each activity in Schedule O	33		37
4	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed	33		X
7	copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the		i	
				١,,
· 5 -	change on Schedule O (see instructions)	34	├	X
о a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business			١,,
	activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		X
	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b	ļ	ļ
С	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	35c		X
6	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets			
. <b>.</b> -	during the year? If "Yes," complete applicable parts of Schedule N	36	ļ	X
	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a	_		
	Did the organization file Form 1120-POL for this year?	37b	<u> </u>	X
ва	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were	1	ļ	
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	<u> </u>	X
	If "Yes," complete Schedule L, Part II and enter the total amount involved	4		
19	Section 501(c)(7) organizations Enter			
a	Initiation fees and capital contributions included on line 9	_		
	Gross receipts, included on line 9, for public use of club facilities	_		
0 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under			
_	section 4911 , section 4912 , section 4955 , section 4955			
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 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	40b		X
С	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,		i	
	4955, and 4958 · · · · · · · · · · · · · · · · · · ·			
d	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c			
	reimbursed by the organization			
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		X
1	List the states with which a copy of this return is filed			
2 a	The organization's books are in care of Margaret Taylor Telephone no 304-	341-1	445	
	Located at ► 600 Shrewsbury Street Charleston, WV ZIP+4 ► 25303			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		Χ
	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		İ	
	and Financial Accounts.		l	
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		Χ
	If "Yes," enter the name of the foreign country			
3	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041-Check here			Γ
	and enter the amount of tax-exempt interest received or accrued during the tax year			_
			Yes	No
14 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be			· ·
	completed instead of Form 990-EZ	44a		X
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	44b		X
С	Did the organization receive any payments for indoor tanning services during the year?	44c		X
d	If "Yes," to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an	1	<del> </del>	<u> </u>
_	explanation in Schedule O · · · · · · · · · · · · · · · · · ·	44d		
. F .		45a	-	Х
. J	The state of the s	400	<u> </u>	<u> </u>
5 a 5 b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the		1	ı
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of			

Form 9	n 990-EZ (2012) KANAWHA VALLEY COLLECTIVE INC	73-162906	<u>5</u>	Page 4
			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition			1
Dai	to candidates for public office? If "Yes," complete Schedule C, Part I		46	<u> </u>
rai	All Section 501(c)(3) organizations must answer questions 47-49b and 52, and	t complete the tables	forling	_
	50 and 51	r complete the tables	ioi iirie:	>
	Check if the organization used Schedule O to respond to any question in this P	Part VI		П
			Yes	No
47	Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax	Г	103	110
	year? If "Yes," complete Schedule C, Part II		47	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<del>-</del>	48	X
49a			9a	1
b			9Ь	
50	Complete this table for the organization's five highest compensated employees (other than officers, directors,	trustees and key	L	<u> </u>
	employees) who each received more than \$100,000 of compensation from the organization. If there is none,	enter "None "		
	(a) Name and title of each employee (b) Average (c) Reportable (d)	Health benefits,		
	hours per week compensation		mated amou er compensa	
	paid more than \$100,000 devoted to position (Forms W-2/1099-MISC)	compensation	ompense	ition
NON	NE .			
			<del></del>	
	Total number of other employees paid over \$100,000 · · · · · ▶		<del></del>	
51	Complete this table for the organization's five highest compensated independent contractors who each receiv	rad mara than		
٠.	\$100,000 of compensation from the organization. If there is none, enter "None"	ed more than		
(a	(a) Name and address of each independent contractor paid more than \$100,000 (b) Type of service	(c) Compen	sation	
NON	NE			
	☐ Total number of other independent contractors each receiving over \$100,000 ▶			
52	Did the organization complete Schedule A? <b>Note:</b> All section 501(c)(3) organizations and 4947(a)(1)	·		
32	nonexempt charitable trusts must attach a completed Schedule A	▶ 🔯	v □	Al a
Linder	er penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my know		Yes 📙	No
	correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge	heage and belief, it is		
440, 0	Betty Ann Smith	$\overline{}$		
Sig		Date		
Her		1_2HA-11	1	
	Type or print name and title	- 100/	$\overline{}$	
	Print/Type preparer's name Preparer's signature Date	Check X if PTIN		
Paid	d PAUL GILMER 02-15-2014		15172	
Prep		Firm's EIN		
Use	e Only Firm's address 424 Washington Street West			
		Phone no 304-343-0	L28	
May	y the IRS discuss this return with the preparer shown above? See Instructions		Yes 🛚	No
EEA		Forr	990-EZ	(2012)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

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.

► See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name	of the	organization							Employer	identification	number		
KAN	AWH	A VALLEY COLLE								629065			
	rt I		<del>-</del>	Status (All organiz				part) S	See instr	uctions		_	
The	orgai			se it is (For lines 1 throu									
1	$\sqcup$	A church, convention	of churches, or as	sociation of churches de	scribed in s	section 17	'0(b)(1)(A)(i	i).					
2		A school described in	n section 170(b)(1	)(A)(ii). (Attach Schedule	Ε)								
3		A hospital or a coope	erative hospital sen	rice organization describe	ed in sectio	on 170(b)(	1)(A)(iii).						
4		A medical research of	organization operat	ed in conjunction with a h	nospital des	scribed in s	ection 170	(b)(1)(A)(	iii). Enter t	he			
		hospital's name, city,	and state										
5		An organization oper	ated for the benefit	of a college or university	owned or	operated b	y a governi	mental un	it describe	d in			
		section 170(b)(1)(A)(iv). (Complete Part II )											
6		A federal, state, or lo	cal government or	governmental unit descri	bed in <b>sec</b> t	tion 170(b	)(1)(A)(v).						
7		An organization that	normally receives a	a substantial part of its su	pport from	a governm	nental unit d	or from the	e general p	ublic			
		described in section	170(b)(1)(A)(vi). (	Complete Part II)									
8		A community trust de	escribed in section	170(b)(1)(A)(vi). (Comp	lete Part II	)							
9	X	An organization that	normally receives	(1) more than 33 1/3% of	f its suppor	t from cont	tributions, m	nembersh	ip fees, and	d gross			
		receipts from activities	es related to its exe	mpt functions - subject to	certain ex	ceptions, a	and (2) no r	nore than	33 1/3% o	fits			
		support from gross in	nvestment income	and unrelated business to	axable inco	me (less s	ection 511	tax) from	businesses	3			
		acquired by the organ	nization after June	30, 1975 See section 5	09(a)(2). (C	Complete F	Part III )	•					
10		An organization orga	nized and operated	d exclusively to test for pu	ublic safety	See secti	ion 509(a)(	4).					
11	Ē	An organization orga	nized and operated	d exclusively for the bene	fit of, to pe	rform the fi	unctions of,	or to carr	v out the				
		-	•	rted organizations descri	· · · · · · · · · · · · · · · · · · ·				•	ction			
		•		the type of supporting of				, ,					
		a Type I	b 🗌 Typ	_	III-Function			ďΓ		Non-funtio	nally int	earate	d
е	П		. I certify that the or	rganization is not controll				more disc			. ,	- 3	_
	_		•	ner than one or more pub	-		• •						
		or section 509(a)(2)	Ū	·	, .,	·				` / ` /			
f		,	ceived a written de	termination from the IRS	that it is a	Type I, Typ	oe II, or Typ	e III supp	orting				
		organization, check t				• • • • • • • • • • • • • • • • • • • •							П
g		•		ation accepted any gift or	r contribution	on from an	v of the						
Ū		following persons?		. , , ,		•	•						
		• .	lirectly or indirectly	controls, either alone or i	toaether wi	th persons	described	ın (ıı) and				Yes	No
		• •		ne supported organization							11g(ı)	<del>  -</del>	''
		(ii) A family member		• • •							11g(ıı		
		• •	•	n described in (i) or (ii) at	oove? .						11g(u		
h		7 7	* .	the supported organization							119(	<u>/ </u>	<u> </u>
	(i) N	ame of supported	(II) EIN	(iii) Type of organization	(iv) Is the or	rganization	(v) Did you	notify	(vi) !:	s the	(vii) Amo	unt of m	oneten
	.,	organization	1	(described on lines 1-9	in col (i) lis	-	the organiz	-	organizati		(411) 73110	support	,
				above or IRC section (see instructions))	governing d	locument?	col (i) of supp	your ort?	(i) organiz	ed in the S ?			
				(See moracuons)	Yes	No	Yes	No	Yes	No			
(A)					''				1.50	- 110			
(,						İ							
(B)					<del> </del>	<u> </u>							
(2)													
(C)		· · · · · · · · · · · · · · · · · · ·			·								•
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Tota	11		I	I	1	1	1		1	1	1		

73-1629065 Page 2 Schedule A (Form 990 or 990-EZ) 2012 KANAWHA VALLEY COLLECTIVE INC Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge . . . . . . 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) Public support. Subtract line 5 from line 4 . . Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total Amounts from line 4 . . . . . . . . . Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business 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 12 Gross receipts from related activities, etc (see instructions) 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) Section C. Computation of Public Support Percentage Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) % 15 Public support percentage from 2011 Schedule A, Part II, line 14 % 33 1/3% support test - 2012. 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 33 1/3% support test - 2011. 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 - 2012. 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 - 2011. 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

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b check this box and see

990 or 990-EZ) 2012 KANAWHA VALLEY COLLECTIVE INC
Support Schedule for Organizations Described in Section 509(a)(2) Part III

(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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	32,779	49,517	29,796	55,597	10048	<u> </u>
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	32,119	43,317	23,130	33,337	7000	به ۱۰۵۰, ۱۰۵۰
3	Gross receipts from activities that are not an unrelated trade or bus under sec 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					10048	,
6	Total. Add lines 1 through 5	32,779	49,517	29,796	55,597	<i>l</i> 2500	<b>2</b> 68,189
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)						268,189
	ction B. Total Support	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012 [8]	(f) Total
9	endar year (or fiscal year beginning in)  Amounts from line 6	(a) 2008 32,779		29,796			<u>168,189</u>
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			14	7		21
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b · · · · · · · · · · · · ·			14	7	,	21
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)					1481	
13	Total support. (Add lines 9, 10c, 11, and 12) · · · · · · · · · · · · · · · · · · ·	32,779	49,517	29,810	55,604	10	<b>1</b> 68,210
14	First five years. If the Form 990 is for the or organization, check this box and stop here					) • • • • • <u>• • • • • • •                </u>	
	ction C. Computation of Public Su					1451	
15	Public support percentage for 2012 (line 8, c Public support percentage from 2011 Schedu			))		15	99.99 %
16 Se	ction D. Computation of Investme					10	99.99 %
17	Investment income percentage for 2012 (line		<del>_</del>	lumn (f))		17	0.01 %
18	Investment income percentage from 2011 Sc		-			18	%
19a	33 1/3% support tests - 2012. If the organiz 17 is not more than 33 1/3%, check this box						▶ 🏻
k	33 1/3% support tests - 2011. If the organiz line 18 is not more than 33 1/3%, check this						▶ □
20	Private foundation. If the organization did n	' <del>-</del> '	-	-		• • • • • •	▶ 📋

### **SCHEDULE C**

(Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ. Complete if the organization is described below. ► See separate instructions.

Inspection

OMB No 1545-0047

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

•	Section 501(c)(4), (5), or (6) organizations	Complete Part III			
Nam	e of organization			Employer	identification number
KA	NAWHA VALLEY COLLECTIVE IN			73-162	
Pa	rt I-A Complete if the organ	ization is exempt under section	on 501(c) or is	a section 527 org	anization.
1	Provide a description of the organization's				
2	Political expenditures			▶ \$	
3	Volunteer hours			· · · · · · · _	
			5644 \( \)		
Pa		ization is exempt under section			<del> </del>
1	Enter the amount of any excise tax incurre				
2	Enter the amount of any excise tax incurre				
3	If the organization incurred a section 4955 Was a correction made?				
4a					· · 📙 Yes 📙 No
D <sub>2</sub>	If "Yes," describe in Part IV  Int I-C Complete if the organ	ization is exempt under section	on 501(c) exc	ent section 501(c)	(3)
1	Enter the amount directly expended by the			opt occitori cor(o)	(0).
•	activities			<b>&gt;</b> s	
2	Enter the amount of the filing organization			_	
_	527 exempt function activities · · · ·	<del>_</del>		▶ s	
3	Total exempt function expenditures Add I			·	
	line 17b · · · · · · · · · · · · · · · · · · ·			▶ \$	
4	Did the filing organization file Form 1120-				
5	Enter the names, addresses and employe				
	organization made payments. For each or	ganization listed, enter the amount paid	from the filing orga	nization's funds Also ente	er
	the amount of political contributions receive	ved that were promptly and directly delive	ered to a separate	political organization, sucl	h
	as a separate segregated fund or a politic	al action committee (PAC) If additional	pace is needed, p	rovide 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-
(1)					
(2)					
(3)					
(4)					
(5)			<u> </u>		
(6)					

	dule C (Form 990 or 990-EZ) 2012 KANAWHA VALLEY	COLLECTIVE	INC	44 1461 1 200	73-16290	065 Page 2
Pa	rt II-A Complete if the organization	is exempt ur	ider section 50	1(c)(3) and filed	Form 5768 (elec	tion under
	section 501(h)).			1 . (5) -1 - 2		
Α	Check  (a) If the filing organization belongs to an				mber's	
<u>.</u>	name, address, EIN, expenses, and					
В	Check If the filing organization checked box			у	T :	
	Limits on Lobbyi				(a) Filing organization's totals	(b) Affiliated group totals
	(The term "expenditures" mea				Organization's totals	group totals
1a	Total lobbying expenditures to influence public opini					
b						
C	Total lobbying expenditures (add lines 1a and 1b)					
d	Otto: Otto: Prepare triperies					
9	Total exempt purpose expenditures (add lines 1c ar					
Ť	Lobbying nontaxable amount Enter the amount from	n the following ta	ble in both			
	columns			<del></del>		
	If the amount on line 1e, column (a) or (b) is:		nontaxable amoun	it is :		
	Not over \$500,000		nount on line 1e	0500.000		
	Over \$500,000 but not over \$1,000,000	+	15% of the excess of		ļ	
	Over \$1,000,000 but not over \$1,500,000		10% of the excess of			
	Over \$1,500,000 but not over \$17,000,000	<del>                                     </del>	5% of the excess ov	ver \$1,500,000		
	Over \$17,000,000	\$1,000,000				
g		•				<del></del>
ŀ	_					<del></del>
į	Subtract line 1f from line 1c If zero or less, enter -0					
j	If there is an amount other than zero on either line 1					П v П и.
	reporting section 4911 tax for this year?	• • • • • • •				∐ Yes ∐ No
	(Some organizations that ma	ade a section 50				
	Lobbyir	ng Expenditures	During 4-Year Aver	raging Period	1	
	Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount	_				
ŀ	Lobbying ceiling amount (150% of line 2a, column (e))					
•	Total lobbying expenditures					
-	Grassroots nontaxable amount					
-	Grassroots ceiling amount (150% of line 2d, column (e))					
	Grassroots lobbying expenditures					· · · · · · · · · · · · · · · · · · ·
EEA					Schedule C (For	m 990 or 990-EZ) 2012

desci	each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed	(	a)	(b)
	escription of the lobbying activity.  Yes			
	During the year, did the filing organization attempt to influence foreign, national, state or local	<del> </del>		
	legislation, including any attempt to influence public opinion on a legislative matter or			
	referendum, through the use of			
	Volunteers?	ŀ		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
	Media advertisements?			
	Mailings to members, legislators, or the public?	<b>—</b>		
	Publications, or published or broadcast statements?			
	Grants to other organizations for lobbying purposes?			
	Direct contact with legislators, their staffs, government officials, or a legislative body?			
_	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		$\vdash$	
	Other activities?		<del> </del>	
	Total Add lines 1c through 1i · · · · · · · · · · · · · · · · · ·			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
	If "Yes," enter the amount of any tax incurred under section 4912			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	İ		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		l †	
	t III-A   Complete if the organization is exempt under section 501(c)(4), section 501(c)	:)(5).	or se	ction
	501(c)(6).	,,,		
				Yes
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 expenditures from the prior year?			3
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)	:)(5),	or se	ction
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," C	R (b	) Part	III-A, line 3
	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).			
а	Current year		2a	
b	Carryover from last year		2b	
С	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 expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	
Par	rt IV Supplemental Information			
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated g	roup		
	Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information			
Comp				

	Federal Supporting Statements	2012 PG01
Name(s) as shown on return		FEIN
KANAWHA VALI	EY COLLECTIVE INC	73-1629065

Form 990EZ, Part IV Compensation Explanation

Statement #A01

Name

Debra Payne

 $\frac{\texttt{Explanation}}{\texttt{volunteer}}$ 

PG01

Statement #A02

Form 990EZ, Part IV Compensation Explanation

Name

Stephanie Hyre

 $\frac{\texttt{Explanation}}{\texttt{volunteer}}$ 

990	Overflow Statement		<b>2012</b> Page 1
ame(s) as shown on return		FE	IN
ANAWHA VALLEY COLL	ECTIVE INC		73-1629065
	Grants		
escription			Amount
			\$ 2,400 11,078
			82,506
			15,000
		Total:	\$ 111,024
	Event income		
escription			Amount
H Event		Total:	\$ 1,937 \$ 1,937
	Professional Fee	<u>:3</u>	
escription			Amount
Service Point		-	\$ 14,417
rant Writing MIS Expense			3,500 68,090
MEB Site TA			350
SG Contracy CH			15,000
		Total:	\$ 101,357

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

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 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Employer identification number Name of the organization 73-1629065 KANAWHA VALLEY COLLECTIVE INC 01. Description of other expenses (Part I, line 16) Amount Description 1,064 Liability Insurance 13,478 Veltrı Dinner 500 Misc Conference & Convention (477)25 Fees 200 One Night Out

## Form , **8868**

(Rev January 2013)

Application for Extension of Time To File an **Exempt Organization Return** 

► File a separate application for each return.

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

If you are f	iling for an Automatic 3-Month Extension, com	plete only Pa	art I and check this box				<del> ▶</del>	X
•	iling for an Additional (Not Automatic) 3-Month			ge 2 of this form)				
	elete Part II unless you have already been grante				3868			
a corporation 8868 to reque Return for Tra	ing (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not est an extension of time to file any of the forms list ansfers Associated With Certain Personal Benefit For more details on the electronic filing of this for	automatic) 3 ed in Part I o Contracts, w	-month extension of time You r Part II with the exception of hich must be sent to the IRS i	i can electronically f Form 8870, Informa n paper format (see	ile For tion	m		
Part I	Automatic 3-Month Extension of Ti							
	required to file Form 990-T and requesting an aut	<u> </u>						
							•	П
	orations (including 1120-C filers), partnerships, RI			request an extensio	n of ti	me		
to file income				•				
			Enter	filer's identifying	numb	er, see	instructio	ns
Type or	Name of exempt organization or other filer, see	e instructions		Employer identific	ation i	number	(EIN) or	
print	KANAWHA VALLEY COLLECTIVE IN	c		73-16290	065			
File by the	Number, street, and room or suite no If a P O	box, see ins	structions	Social security nu	mber (	(SSN)		
due date for	600 Shrewsbury Streeet							
filing your return See	City, town or post office, state, and ZIP code I	For a foreign	address, see instructions					
instructions	Charleston, WV 25301			·				
Enter the Ret	urn code for the return that this application is for (	file a separat	e application for each return)				[0]	1
Applicatio	n	Return	Application				Retur	n
ls For		Code	Is For				Code	<u> </u>
Form 990 c	or Form 990-EZ	01	Form 990-T (corporation)				07	
Form 990-E	3L	02	Form 1041-A	· · · · · · · · · · · · · · · · · · ·			08	
Form 4720	(ındıvıdual)	03	Form 4720				09	
Form 990-F	PF	04	Form 5227				10	
Form 990-	T (sec 401(a) or 408(a) trust)	05	Form 6069				11	
Form 990-	T (trust other than above)	06	Form 8870				12	
Telephone If the orga If this is for	e No 304-343-0128  Initiation does not have an office or place of busin or a Group Return, enter the organization's four dig group, check this box	F/ ess in the Ur git Group Exe it is for part (	AX No ► 304-343-0129  inted States, check this box emption Number (GEN)		 s is	EAST	, wv 25: ▶	302
	names and EINs of all members the extension is est an automatic 3-month (6 months for a corporate		to file Form 900 T) extension	of time				—
1 I reque	02-18 , 20 14 , to file the exempt o				nsion	ıs		
_	organization's return for	gamzanorr	stann for the organization man					
	calendar year 20 or							
▶ 🏻	tax year beginning 07-01	, 2012	, and ending	06-30	2013	3_		
2 If the t	ax year entered in line 1 is for less than 12 months			Final return		_		
	ange in accounting period	20 0000				<del></del> -		
	application is for Form 990-BL, 990-PF, 990-T, 47	20, or 6069,	enter the tentative tax, less ar	iy	2-	•		
	undable credits See instructions				3a	\$		
	application is for Form 990-PF, 990-T, 4720, or 60				3b	e		
	ited tax payments made Include any prior year of ce due. Subtract line 3b from line 3a Include you			na l	JU	\$		
	ce que. Subtract line 35 from line 3a include your S (Electronic Federal Tax Payment System) See		ar ans torm, ir required, by usi	שי' 	3с	s		
	are going to make an electronic fund withdrawal with this Form		8453-EO and Form 8879-EO for paym	ent instructions		<u> </u>	<del></del>	
-auton nyou	are going to make an electronic folia militarano, mantras i offi							