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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

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

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

Open to Public Inspection

F	· FC	or the	2013 calendar year, or tax year beginning and	enaing		
B	Ch ap	eck if plicabl	C Name of organization		D Employer identifi	cation number
1	-	Addre chang	S VEDN COMMITTEN FOUNDAMION			
		Name			77-0	555874
		Initial return	Number and street (or P.O. box if mail is not delivered to street address)	E Telephone numbe	er	
		Termii				325-5346
		Amen- return	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	13,781,059.
		Application pendic	DAKERSFIELD, CA 93301		H(a) Is this a group re	
		pondi	F Name and address of principal officer: JEFFREY R. PICKERTI		for subordinates	
_	_		3300 TRUXTUN AVE., STE. 220, BAKERSFIE		H(b) Are all subordinates i	
_!	l Ta	ıx-ex	empt status: X 501(c)(3) 501(c)() (insert no.) 4947(a)(1) (ite: WWW.KERNFOUNDATION.ORG	or 527	1,	list. (see instructions)
			organization: X Corporation Trust Association Other	I Vear	H(c) Group exemption 1999	I State of legal domicile: CA
		t I			oriorination. ±JJJ	VI State of legal domicile. CA
	Т	_	Briefly describe the organization's mission or most significant activities: KERN	COMMU	NITY FOUNDA	TION'S
2014	일	•	MISSION IS GROWING COMMUNITY AND GROWING	PHILA	NTHROPY.	
	Ē	2	Check this box if the organization discontinued its operations or dispose			ssets.
	8	3	Number of voting members of the governing body (Part VI, line 1a)		3	15
,	<u>ت</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	14
	es	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)		5	5
	≝	6	Total number of volunteers (estimate if necessary)		6	0
الماد ا	ا ک	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>	0.
3		b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				<u> </u>	Prior Year	Current Year
C	ᆲ		Contributions and grants (Part VIII, line 1h)		3,578,153. 242,537.	2,344,467. 267,590.
0	Revenu		Program service revenue (Part VIII, line 2g)	_	249,887.	1,806,720.
SEP	ê		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	. —	48,186.	1,800,720.
			Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	\ ⊢	4,118,763.	4,420,277.
SCANNED	\dashv	12 13	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A) line 2) Grants and similar amounts paid (Part IX, column (A), lines 13)		771,948.	1,642,419.
				<i>t t</i>	0.	0.
	اي				254,858.	341,134.
3	Expenses		Salaries, other compensation, employee benefits (Part IX) column (A), lines 5-10). Professional fundraising fees (Part IX, column (A), line 11e)	9	0.	0.
Y)	<u>ē</u>	b	Professional fundraising fees (Part IX, column (A), line 11e). Total fundraising expenses (Part IX, column (D), line 25) (EDEN, 96, 1	40.		
-	<u> </u>	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		561,093.	657,540.
			Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,587,899.	2,641,093.
		19	Revenue less expenses. Subtract line 18 from line 12		2,530,864.	1,779,184.
č	Balances			Be	ginning of Current Year	End of Year
, coto	<u>a</u>	20	Total assets (Part X, line 16)		16,076,267.	17,533,096.
_	וסיי		Total liabilities (Part X, line 26)		2,934,530.	2,732,741.
			Net assets or fund balances. Subtract line 21 from line 20		13,141,737.	14,800,355.
		t II	Signature Block Ities of perjury, I declare that I have examined this return, including accompanying schedule:	o and atatam	anta and to the best of m	w knowledge and helief it in
			ittes of perjury, I declare that I have examined this return, including accompanying schedule: it, and complete. Declaration of preparer (other than officer) is based on all information of wh			y knowledge and belief, it is
<u>u</u>	ue, c	orrec	it, and complete. Declaration of preparer (other than officer) is based on an information of wi	non preparer	V 9 10	Aliu
c	Sign		Signature of Office	-	Date	
	lere		JEFFREY R. PICKERING, PRESIDENT & CEO		•	
•		•	Type or print name and title			
_			Print/Type preparer's name Preparer's signature		Date Check	PTIN
P	aid		LYNDA PARK, EA	(U) 8	3/3/14 If self-employ	P01314343
P	repa	arer	Firm's name DANIELLS PHILLIPS VAUGHAN & BOC	K)	Firm's EIN	95-2972229
ι	lse C	nly	Firm's address 300 NEW STINE ROAD			
_			BAKERSFIELD, CA 93309		Phone no. 6 6	1-834-7411
<u>N</u>	/lay	the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
3	3200	1 10-2	9-13 LHA For Paperwork Reduction Act Notice, see the separate instruction	ons.		Form 990 (2013)



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Form 990 (2013) KERN COMMUNI
Part IV Checklist of Required Schedules

-			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		₹.
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			X
_	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	8		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
.0	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	_X_	
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			37
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	x	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		
128	Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	u		
	If "Yes." and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		<u> </u>
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
13	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990	2013)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			l
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete]
	Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			3.7
	Schedule K If "No", go to line 25a	24a		<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			₹.
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			v
	Schedule L, Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	<u> </u>		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,	ٔ ۔۔ ا		х
	complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	ŀ		i
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			х
	of any of these persons? If "Yes," complete Schedule L, Part III	27		
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):	28a		х
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
b	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
С	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	X	į
20	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes, " complete Schedule M	29	X	
29 30	Did the organization receive more than \$25,000 in non-cash contributions: in res, complete conservation Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	<u> </u>		
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
J I	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
-	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
•	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	L
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	1		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	l
		Form	990	(2013)

Pa				
	Check if Schedule O contains a response or note to any line in this Part V		I	<u> </u>
4-	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable U Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
С	(gambling) winnings to prize winners?	1c	х	-
22	Enter the number of employees reported on Form W·3, Transmittal of Wage and Tax Statements,	<u> </u>		-
2.0	filed for the calendar year ending with or within the year covered by this return			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		<u> </u>	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	l	х
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	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)?	4a	ł	х
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		_~
	to file Form 8282?	7c	-	Х
	If "Yes," indicate the number of Forms 8282 filed during the year	- -	·	x
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f	<u> </u>	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g	If the organization received a contribution of qualified intellectual property, and the organization file of office of the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		х
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		Х
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12		, ` ` ·	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	, '		2 .
11	Section 501(c)(12) organizations. Enter:			دار
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			-
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40-	 -	-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	-	-
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b 13c			,
C 14a	Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	14a	H	X
14a h	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	in 100, has think at only 120 to report these payments in 110, provide an explanation in concede o		990	(2013

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI										
Sec	tion A. Governing Body and Management										
		1 1		Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15	3,							
	If there are material differences in voting rights among members of the governing body, or if the governing										
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.	l i .									
b	Enter the number of voting members included in line 1a, above, who are independent		14								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with any other		l	l						
	officer, director, trustee, or key employee?		2		Х						
3	Did the organization delegate control over management duties customanly performed by or under the	e direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?		3		X						
4	Did the organization make any significant changes to its governing documents since the prior Form		4		X						
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?	5		X						
6	Did the organization have members or stockholders?		6		X						
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or										
	more members of the governing body?										
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockholders, or									
	persons other than the governing body?		7b		X						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by the following:		۱,,							
а	The governing body?		8a	X	_						
þ	Each committee with authority to act on behalf of the governing body?		8b	X	 						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached at the			 						
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		X						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code.)		T	T						
				Yes	No						
	Did the organization have local chapters, branches, or affiliates?		10a	<u> </u>	X						
þ	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b	v	-						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly before filing the form?	? 11a	X	-						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		١	 ₩							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12b	_							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	res, " describe	1	x							
	in Schedule O how this was done		12c	X							
13	Did the organization have a written whistleblower policy?		13	X							
14	Did the organization have a written document retention and destruction policy?	al by undependent	14	 ^							
15	Did the process for determining compensation of the following persons include a review and approv										
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		15a	х							
a	The organization's CEO, Executive Director, or top management official		15a	X							
D	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		1.50	†==							
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a									
. - a	taxable entity during the year?		16a	1	х						
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ite its participation	1	,							
	In joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization										
	exempt status with respect to such arrangements?		16b	-							
Sec	tion C. Disclosure	<u> </u>									
17	List the states with which a copy of this Form 990 is required to be filed ►CA										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Section 501(c)(3)s on	ly) avaıla	ole							
	for public inspection Indicate how you made these available. Check all that apply.	, - 1,-,-,-	.,								
		ın Schedule O)									
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co		and fina	ncıal							
.5	statements available to the public during the tax year.										
20	State the name, physical address, and telephone number of the person who possesses the books a	and records of the organ	ızatıon: I	>							
	DANETTE RINEHART - 661-325-5346			_							
	3300 TRUXTUN AVE, STE. 220, BAKERSFIELD, CA 93301	•									

332006 10-29-13

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

(A) Name and Title	(B) Average hours per	(do	not c	Pos heck ss pe	c) ition more	than	one h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer Officer		Highest compensated 4/		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) VIPUL R. DEV DIRECTOR	1.00	x						0.	0.	0.
(2) ANGELO A. HADDAD	1.00				┢	\vdash	-	-	•	<u>.</u>
DIRECTOR	100	\mathbf{x}						0.	0.	0.
(3) CHANDRASEKHAR COMMURI	1.00	 				t^-	<u> </u>			
DIRECTOR		x						0.	0.	0.
(4) DUANE A. KEATHLEY	1.00				<u> </u>					
DIRECTOR		X						0.	0.	0.
(5) BRYAN L. LYNN	1.00	<u> </u>								
DIRECTOR		X						. 0.	0.	0.
(6) KATHY M. MILLER	1.00									
DIRECTOR		X						0.	0.	0.
(7) HEATHER BUTLER TAYLOR	1.00									
DIRECTOR		X						0.	0.	0.
(8) JOHN M. ALLEN	1.00									
DIRECTOR		X						0.	0.	0.
(9) KEVIN C. FINDLEY	1.00									
DIRECTOR		X	L					0.	0.	0.
(10) DIANE L. WHITE	1.00								_	
DIRECTOR		X	<u> </u>					0.	0.	0.
(11) KEITH T. BRICE	1.00							_	_	
DIRECTOR		X	┕		L	_		0.	0.	0.
(12) STEPHEN H. BOYLE	1.00								_	
CHAIRMAN		X	L	X	_		_	0.	0.	0.
(13) A.J. ANTONGIOVANNI	1.00	l								•
DIRECTOR	1 00	X	┡	<u> </u>	_	_	L	0.	0.	0.
(14) EUGENE J. VOILAND	1.00	,,		\ , ,					_	_
TREASURER	40.00	X	┝	X		-	_	0.	0.	0.
(15) JEFFREY R. PICKERING	40.00	x		x				122 022	0.	0.
PRESIDENT & CEO	_	^	┢	Λ				132,833.	0.	0.
		-	<u> </u>		-					
200007 40 00 40	<u> </u>	<u> </u>	L	<u> </u>						Form 990 (2012)

332007 10-29-13

Section A. Officers, Director	rs, Trustees, Key Em	pioye	es,	and	ınıç	gnes	it C	ompensated Employe	es (conunuea)				
(A)	(B)		_	(C	-			(D)	(E)			(F)	
Name and title	Average	(do n		osit eck n		than o	ne	Reportable	Reportable	•	Es	timate	ed
	hours per	box, t	unles	s per	son is		an	compensation	compensation		ar	nount	of
	week (list any	\vdash	T	Ī	7	1	,	from the	from relate			other	
	hours for	lirect				_		the organization	organizatior (W-2/1099-MI			pensa	
	related	0.0	stee			麗		(W-2/1099-MISC)	(44-271099-1411	30)		anızat	
	organizations	Truste	E		8			(112) 1000 111100)			_	d relat	
	below	Individual trustee or director	il lipidin	_	Key employee	o sa co	ĕ				i	anızatı	
	line)	ind Sp	Institutional trustee	Officer	Key e	Highest compensated employee	For						
								-					
		1											
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		₩	\dashv	\dashv	\dashv	\dashv							
		1							1				
		\vdash	\dashv	\dashv	-	+							-
1b Sub-total							>	132,833.		0.			0.
c Total from continuation sheets to	Part VII. Section A						•	0.	_	0.			0.
d Total (add lines 1b and 1c)	,						•	132,833.		0.			0.
2 Total number of individuals (including	ng but not limited to th	iose li	ste	d ab	ove) who	o re	eceived more than \$100	0.000 of reportab	ole			
compensation from the organization	-					•			•				1
												Yes	No
3 Did the organization list any former	officer, director, or tru	ıstee,	, key	em/	ploy	/ee,	or I	nighest compensated e	mployee on			,	
line 1a? If "Yes," complete Schedule	e J for such individual										3		X
4 For any individual listed on line 1a, i									the organization				
and related organizations greater th											4		X
5 Did any person listed on line 1a rece	•				-		elate	ed organization or indivi	idual for services	3	_	1	x
rendered to the organization? If "Ye Section B. Independent Contractors	es," complete Scriedul	e J 101	rsu	cn p	erse	on					5_		
Complete this table for your five high	hest compensated inc	deper	nder	nt co	ontra	actor	rs t	hat received more than	\$100,000 of cor	npens	ation 1	rom	
the organization. Report compensat													
	(A)	-						(B)			((
Name and bu	usiness address	NO	NE				\perp	Description of s	ervices	С	ompe	nsatio	n
							1						
							+						
							1						
							\forall	· · · · · · · · · · · · · · · · · · ·				-	
							-						
							1						
							\dagger						
2 Total number of independent contra \$100,000 of compensation from the		ot lim	nted	to t	thos 0		ted	above) who received m	nore than	, °	å	,	
φτου,υσο οι compensation from the	s organization 📂									<u> </u>	,		

332008 10-29-13 Form **990** (2013)

Form 990 (2013)

332009 10-29-13

Form 990 (2013) KERN COMMUNITY Part IX Statement of Functional Expenses

t include amounts reported on lines 6b, 9b, and 10b of Part VIII. Trants and other assistance to governments and rganizations in the United States. See Part IV, line 21 grants and other assistance to individuals in the United States. See Part IV, line 22 grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 grants paid to or for members. Compensation of current officers, directors, custees, and key employees compensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)	(A) Total expenses 1,642,419.	(B) Program service expenses 1,642,419.	Management and general expenses 49,815.	(D) Fundraising expenses
rganizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Granefits paid to or for members Compensation of current officers, directors, mustees, and key employees compensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)			-	
Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Granefits paid to or for members Compensation of current officers, directors, mustees, and key employees compensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)			-	
arants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 denefits paid to or for members compensation of current officers, directors, mustees, and key employees compensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)	132,833.	66,415.	-	
Grants and other assistance to governments, organizations, and individuals outside the strates. See Part IV, lines 15 and 16 denefits paid to or for members compensation of current officers, directors, rustees, and key employees compensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)	132,833.	66,415.	-	
Inted States. See Part IV, lines 15 and 16 Inited States. See Part IV, lines 15 and 16 Identifies paid to or for members Compensation of current officers, directors, rustees, and key employees Compensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)	132,833.	66,415.	-	
United States. See Part IV, lines 15 and 16 denefits paid to or for members compensation of current officers, directors, rustees, and key employees compensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)	132,833.	66,415.	-	
Compensation of current officers, directors, nustees, and key employees compensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)	132,833.	66,415.	49,815.	
Compensation of current officers, directors, nustees, and key employees compensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)	132,833.	66,415.	49,815.	
rustees, and key employees compensation not included above, to disqualified ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)	132,833.	66,415.	49,815.	
ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)				16,603
ersons (as defined under section 4958(f)(1)) and ersons described in section 4958(c)(3)(B)				
ersons described in section 4958(c)(3)(B)	I			
· · · · · · · · · · · · · · · · · · ·				
Other salaries and wages	170,175.	85,089.	63,813.	21,273
ension plan accruals and contributions (include				
ection 401(k) and 403(b) employer contributions)				
Other employee benefits				1,887
Payroll taxes	23,030.	11,515.	8,636.	2,879
ees for services (non-employees):				
Management				
egal				
Accounting				
· ·				
_	250 216		250 216	
	259,210.		239,210.	
	140 272	95 /191	33 409	21 272
· · · ·				21,373 5,173
·	7 9/0	3 970		993
·	15 942			1,993
	13,742.	7,571	3,370.	1,333
· · · · · · · · · · · · · · · · · · ·	50.257	25.129.	18.846.	6,282
· · ·				906
			_,	
• 1				
	44,315.	22,187.	16,581.	5,547
·		-		
· F	7,668.			
nsurance	5,783.	3,110.	1,896.	777
	i _e			
4e amount exceeds 10% of line 25, column (A)	,			
	10 505	24 002	19 602	6,201
				2,307
				<u>2,307</u> 697
				338
				911
				96,140
	2,011,050			70,140
-				
• • • • • • • • • • • • • • • • • • • •				
	ection 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (non-employees): Management Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion Office expenses Information technology Royalties Occupancy Fravel Payments of travel or entertainment expenses or any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line the amount exceeds 10% of line 25, column (A) Immount, list line 24e expenses on Schedule 0.) OUES AND SUBSCRIPTIONS CONTRACT LABOR OTILITIES TELEPHONE All other expenses Fotal functional expenses. Add lines 1 through 24e Idint costs. Complete this line only if the organization eported in column (B) joint costs from a combined inducational campaign and fundraising solicitation. Check here Infollowing SOP 98-2 (ASC 958-720)	ection 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes Pees for services (non-employees): Anagement Legal Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, rolumn (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion Office expenses Occupancy Fravel Payments of travel or entertainment expenses or any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Payments to affiliates Payments to affiliates Payments to affiliates Popereciation, depletion, and amortization Insurance Other expenses. Itemize expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) Industrial in 24e expenses on Schedule 0.) DUES AND SUBSCRIPTIONS CONTRACT LABOR UTILITIES FELEPHONE All other expenses Fotal functional expenses. Add lines 1 through 24e Industrial functiona	action 401(k) and 403(b) employer contributions) Sther employee benefits Payroll taxes Sees for services (non-employees): Ananagement Legal Accounting Accounting Professional fundraising services. See Part IV, line 17 Investment management fees Sther. (If line 11g amount exceeds 10% of line 25, ollumn (A) amount, list line 11g expenses on Sch 0.) Advertising and promotion Office expenses Information technology Royalities Decupancy Travel Payments of travel or entertainment expenses or any federal, state, or local public officials Conferences, conventions, and meetings interest Payments to affiliates Depreciation, depletion, and amortization insurance Dither expenses. Itemize expenses in line 24e. If line 44e amount exceeds 10% of line 25, collumn (A) immont, list line 24e expenses on Schedule 0.) DUES AND SUBSCRIPTIONS TELEPHONE All other expenses Total functional expenses. Add lines 1 through 24e Total functional expenses. Add lines 1 through 24e Total functional expenses. Add lines 1 through 24e Lint column (B) joint costs from a combined diucational campaign and fundraising solicitation. Check here Intollowing SOP 98-2 (ASC 958-720)	ther employee benefits 23,030. 11,515. 8,661. 23,030. 11,515. 8,636. 24,906. 25,9,216. 259,216. 2

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing			33,967.	1	
	2	Savings and temporary cash investments			3,089,828.	2	3,162,575.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			510,779.	4	236,671.
	5	Loans and other receivables from current and for	ormer of	ficers, directors,	· ·		
		trustees, key employees, and highest compensation	ated em	ployees. Complete			
		Part II of Schedule L		į		5	
	6	Loans and other receivables from other disquali	fied per	sons (as defined under	, ""		· · · · · · · ·
		section 4958(f)(1)), persons described in section	1958(c	c)(3)(B), and contributing			
		employers and sponsoring organizations of sections	tion 501	(c)(9) voluntary			
tz		employees' beneficiary organizations (see instr).	Compl	ete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net				7	
Ä	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			13,111.	9	12,156.
	10a	Land, buildings, and equipment: cost or other	1 1				
		basis. Complete Part VI of Schedule D	10a	77,564. 52,855.	,a ap be as		, .,
	ь	Less accumulated depreciation	10b	52,855.	26,017.	10c	24,709.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line	11		11,320,841.	12	14,096,985.
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			1,081,724.	15	0.
	16	Total assets. Add lines 1 through 15 (must equ	at line 3	4)	16,076,267.	16	17,533,096.
	17	Accounts payable and accrued expenses			21,716.	17	47,132.
	18	Grants payable			167,385.	18	88,925.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
es	22	Loans and other payables to current and former	r officer	s, directors, trustees,			
Ë		key employees, highest compensated employee	es, and	disqualified persons.			
Liabilities		Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa	-				
		parties, and other liabilities not included on lines	s 17-24)	. Complete Part X of	2,745,429.		2 506 604
		Schedule D			2,745,429.	25	2,596,684. 2,732,741.
	26	Total liabilities. Add lines 17 through 25			2,334,330.	26	2,132,141.
		Organizations that follow SFAS 117 (ASC 958		k here ▶ 🔼 and		۸,	
ces	l	complete lines 27 through 29, and lines 33 ar	1d 34.		12,641,737.		14,300,355.
<u>ja</u>	27	Unrestricted net assets			12,011,131		14,300,333.
Ba	28	Temporarily restricted net assets			500,000.	28 29	500,000.
ᄪ	29	Permanently restricted net assets)) abaak basa N	300,000.	29	
Ę		Organizations that do not follow SFAS 117 (A	12C 926	s), cneck nere		4	**
S		and complete lines 30 through 34.				1	
set	30	Capital stock or trust principal, or current funds		at fund		30 31	<u> </u>
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or ed				32	
Ne.	32	Retained earnings, endowment, accumulated in	icome, (or other lunus	13,141,737.	33	14,800,355.
•	33	Total liabilities and not assets/fund balances			16,076,267.	34	17,533,096.
	34	Total liabilities and net assets/fund balances			10,010,201	_ 	1 1,,555,050.

Form **990** (2013)

Form 990 (2013)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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. OMB No 1545-0047

Open to Public Inspection

Name of the organization

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

			MMUNITY FOUN						<u></u>	7-0555	8/4		
Part I			ity Status (All organiz	· · · · · · · · · · · · · · · · · · ·				ructions.				<u> </u>	
The organi			because it is: (For lines 1										
1 🔲	A church, cor	nvention of churches	s, or association of churc	ches desc	ribed in se	ction 170	(b)(1)(A)(i)						
2 🖳	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sci	hedule E.)									
з 🔙			tal service organization o										
4	A medical res	earch organization o	operated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital	's nam	ie,	
	city, and state												
5	An organizati	on operated for the l	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental uni	t describ	oed in			
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)										
6 🖳			ent or governmental und										
7 X	An organizati	on that normally reco	eives a substantial part o	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	rıbed ı	n	
	section 170(b)(1)(A)(vi). (Complet	te Part II.)										
8 🖳	•		ection 170(b)(1)(A)(vi). (
9 📖	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 i	ınrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nızatıon	after June 3	0, 197	' 5.	
		509(a)(2). (Complete											
10			perated exclusively to tes										
11 📖			perated exclusively for th									or	
			itions described in section				2). See se o	ction 509 (a)(3). Ch	eck the box	that		
	describes the type of supporting organization and complete lines 11e through 11h.												
	a Type I	•	1		nctionally i	-				n-functional		-	
e 📖			t the organization is not										
			han one or more publicly						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					
		rganization, check th											
g			organization accepted ar									r	
			irectly controls, either al	one or tog	ether with	persons o	described	ın (ıı) and (III) below		Yes	No	
	•		upported organization?							11g(i)			
		•	n described in (i) above?							11g(ii)	-	-	
		•	person described in (i) o							11g(iii)	L	l	
h	Provide the f	ollowing information	about the supported org	ganization	(s)								
			<u> </u>	(C. A. I., Ab.,		Las Diel in	4-6 - 40	(vi) Is	the	I			
٠,	of supported	(ii) EIN			organization sted in your		u notify the ion in col.	lorganizátio	on in col.	(vii) Amount		netary	
orga	anization				document?		r support?	(i) organiz U.S		Sup	port		
			(see instructions))	Yes	No	Yes	No	Yes	No	1			
				103	110	100	110			ļ			
							-	-	 				
				1	 	 	 						
				-	 	 	 						
					 		 	 		-			
							}		1				
		 	<u> </u>		 		 						
Total				1									
Total	Panerwork Pa	duction Act Notice	, see the Instructions fo	or		<u> </u>	<u> </u>	Schedul	e A (For	m 990 or 99	0-F7	2013	
LITA FOR P	ahei woik ue	AUGUION ACCITOLICE	, oce the man notions it	٠.				JU. 10441	,				

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013 KERN COMMUNITY FOUNDATION 77-05558

[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.)

<u>Sec</u>	Section A. Public Support												
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total						
1	Gifts, grants, contributions, and												
	membership fees received. (Do not												
	include any "unusual grants ")	1,493,446.	1,215,974.	4,278,254.	3,078,153.	2,344,467.	12,410,294.						
2	Tax revenues levied for the organ-												
	ization's benefit and either paid to					:							
	or expended on its behalf												
3	The value of services or facilities												
	furnished by a governmental unit to					İ							
	the organization without charge												
4	Total. Add lines 1 through 3	1,493,446.	1,215,974.	4,278,254.	3,078,153.	2,344,467.	12,410,294.						
5	The portion of total contributions	Ì		*									
	by each person (other than a												
	governmental unit or publicly				. 3								
	supported organization) included		٠,										
	on line 1 that exceeds 2% of the	, ,											
	amount shown on line 11,												
	column (f)												
	Public support. Subtract line 5 from line 4	•					12,410,294.						
$\overline{}$	ction B. Total Support	1 .											
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total						
7	Amounts from line 4	1,493,446.	1,215,974.	4,278,254.	3,078,153.	2,344,467.	12,410,294.						
8	Gross income from interest,												
	dividends, payments received on												
	securities loans, rents, royalties	1 2 2 2 2 2	126 222	157 147	100 135	100 055	705 460						
	and income from similar sources	131,999.	136,233.	157,147.	180,135.	189,955.	795,469.						
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.)												
	Total support. Add lines 7 through 10						13,205,763.						
	Gross receipts from related activities					12	975,677.						
13	First five years. If the Form 990 is for		s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	. —						
50	organization, check this box and storection C. Computation of Publ		rcentage				<u> </u>						
	Public support percentage for 2013 (column (fl)		14	93.98 %						
	Public support percentage for 2013 (Joidinn (1))		15	93.98 %						
	33 1/3% support test - 2013. If the			n line 13, and line	14 is 33 1/3% or n	<u> </u>							
ıUč	stop here. The organization qualifies					or look trila bu	►X						
	33 1/3% support test - 2012. If the				line 15 is 33 1/3%	or more, check th	•						
	and stop here. The organization qual					, c. 111010, 01100K tl	▶ □						
17:					13 16a or 16b a	and line 14 is 10%	or more						
.,,	7a 10% -facts-and-circumstances test - 2013. 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. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2012. 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												
1Ω	Private foundation. If the organization		<u> </u>	•									
-13	Trivate roundation. II the organization	did Hot Offect a	207 917 III 0 10, 10	<u>.,,,</u>		edule A (Form 990							
					23.10								

Schedule A (Form 990 or 990 EZ) 2013 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.)

Sec	ction A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	((e) 2013	(f) Total			
1	Gifts, grants, contributions, and										
	membership fees received. (Do not				1		l				
	include any "unusual grants.")						ı				
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	-									
3	Gross receipts from activities that are not an unrelated trade or bus-										
	iness under section 513										
4	Tax revenues levied for the organ- ization's benefit and either paid to										
	or expended on its behalf					İ					
5	The value of services or facilities							··			
3	furnished by a governmental unit to						l				
	the organization without charge						l				
_	•				1	+					
	Total. Add lines 1 through 5	<u> </u>		-		+					
78	Amounts included on lines 1, 2, and					1	l				
	3 received from disqualified persons				ļ	-					
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										
	•				 	+					
	Add lines 7a and 7b					╅					
	Public support (Subtractine 7c from line 6.)	<u> </u>	<u>`</u>		<u> </u>						
	ction B. Total Support		1	1	1	т.					
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	4—4	(e) 2013	(f) Total			
9	Amounts from line 6					 					
10	dividends, payments received on securities loans, rents, royalties and income from similar sources										
t	Unrelated business taxable income	-					l				
	(less section 511 taxes) from businesses						l				
	acquired after June 30, 1975										
	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										
13	assets (Explain in Part IV.) Total support, (Add lines 9, 10c, 11, and 12)	.,.			 	+					
	First five years. If the Form 990 is fo	r the organization	s first, second, thi	rd, fourth, or fifth 1	ax vear as a secti	on 501	(c)(3) organiz	ation.			
	check this box and stop here	, 0. g	, ,	- -,	,		(-)(-)	▶□			
Se	ction C. Computation of Publ	ic Support Pe	ercentage								
	Public support percentage for 2013 (column (fl)	·····	15		%			
			-	Column (i))		16					
16	Public support percentage from 2012	_				10		%			
	ction D. Computation of Inve					1 1					
	Investment income percentage for 20			ne 13, column (f))		17		<u>%</u>			
	Investment income percentage from					18		%			
19	9a 33 1/3% support tests - 2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not										
	more than 33 1/3%, check this box a	and stop here. The	e organization qua	lifies as a publicly	supported organi	zatıon					
ŧ	b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and										
	line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization										
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	struct	ons	▶ L_			
					C-		A /Earm 00	0 000 EZ\ 0040			

332023 09-25-13

Schedule A	(Form 990 or 990-E	Z) 2013 KERN	COMMUNITY	FOUNDATION		77-0555874 Page 4
Part IV	Supplementa	I Information.	Provide the explana	tions required by Part	II, line 10, Part II, line 17a or 1	7b; and Part III, line 12.
	Also complete this	s part for any addit	tional information. (S	ee instructions).		
						
			_			
	<u> </u>					
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SCHEDULE D

Department of the Treasury Internal Revenue Service

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.urs.gov/form990.

Open to Public

OMB No 1545-0047

Inspection

Name of the organization

KERN COMMUNITY FOUNDATION

Employer identification number 77-0555874

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	55	
2	Aggregate contributions to (during year)	1,602,579.	
3	Aggregate grants from (during year)	1,103,984.	
4	Aggregate value at end of year	7,612,859.	
5	Did the organization inform all donors and donor advisors in		sed funds
	are the organization's property, subject to the organization's		X Yes No
6	Did the organization inform all grantees, donors, and donor a		e used only
•	for charitable purposes and not for the benefit of the donor		
	Impermissible private benefit?	, , , , ,	X Yes No
Par		ganization answered "Yes" to Form 990, i	
1	Purpose(s) of conservation easements held by the organizat		
	Preservation of land for public use (e.g., recreation or		storically important land area
	Protection of natural habitat		tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		
	,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic sti	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	ne organization during the tax
	year▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	· · · · · · · · · · · · · · · · · · ·	
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		during the year
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo		
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expens	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza	tion's financial statements that describes	s the organization's accounting for
	conservation easements.		
Par	t III Organizations Maintaining Collections o	of Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex	hibition, education, or research in further	ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of pu	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financi	al gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		► \$ ► \$

Sche	dule D (Form 990) 2013 KERN COI	MMUNITY FO	UNDATION _			77-05	55874	Page 2
	t III Organizations Maintaining C	ollections of A	rt, Historical Tr	easures, or Oth	er Simil	ar Asset	ts (continue	ed)
3	Using the organization's acquisition, accession							
	(check all that apply).							
а	Public exhibition	d	Loan or excl	hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations		_					
4	Provide a description of the organization's co	llections and explai	n how they further th	he organization's ex	empt purpo	ose in Part	: XIII	
5	During the year, did the organization solicit o	r receive donations	of art, historical trea	sures, or other simil	ar assets		_	
	to be sold to raise funds rather than to be ma	untained as part of t	he organization's co	ollection?	<u>.</u>		Yes	No_
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered "Yes" to	o Form 990	, Part IV, II	ne 9, or	
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodi	an or other intermed	liary for contribution	is or other assets no	ot included	_	,	
	on Form 990, Part X?						Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:					
							Amount	
С	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e_			
f	Ending balance				1f			
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?			L	J Yes │	No
	If "Yes," explain the arrangement in Part XIII.							
Pai	t V. Endowment Funds. Complete it	the organization an	swered "Yes" to Fo	rm 990, Part IV, line				
	1	(a) Current year	(b) Prior year	(c) Two years back	(d) Three y	/ears back	(e) Four ye	ars back
1a	Beginning of year balance	509,056.						
b	Contributions		500,000.					
С	Net investment earnings, gains, and losses	83,833.	16,845.					
d	Grants or scholarships							
е	Other expenditures for facilities						ì	
	and programs							
f	Administrative expenses	11,888.	7,789.					
g	End of year balance	581,001.	509,056.		<u> </u>			
2	Provide the estimated percentage of the curr	ent year end baland	e (line 1g, column (a	a)) held as:				
а	Board designated or quasi-endowment		%					
b	Permanent endowment >	%						
C	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c should	ild equal 100%.						
3a	Are there endowment funds not in the posse	ssion of the organiz	ation that are held a	nd administered for	the organiz	zation		
	by:						Y	
	(i) unrelated organizations	-					3a(i)	X
	(ii) related organizations						3a(ii)	Х
b	If "Yes" to 3a(ii), are the related organizations						3b	
4	Describe in Part XIII the intended uses of the		wment funds.					
Pa	t VI Land, Buildings, and Equipm							
	Complete if the organization answere	d "Yes" to Form 990						
	Description of property	(a) Cost or o	1 , ,		Accumulate		(d) Book v	alue
		basis (investr	nent) basis	(other) de	epreciation	\longrightarrow		
1a	Land	<u> </u>						
b	Buildings			 		\longrightarrow		
С	Leasehold improvements	<u> </u>	077		40.2	_	4 ==	673
d	Equipment		977.		49,3			673.
<u>e</u>	Other		587.		3,5	<u>5</u> 1 −		700
Tata	LAdd lines 1a through 1e (Column (d) must e	aual Form 990 Part	Y column (R) line 1	(O(c))			7.4	709.

Part VII Investments - Other Securities.				. ugo -
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	aluation: Cost or end-of-year market va	lue
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) AGENCY ACCOUNT	14,096,98	END-OF-Y	EAR MARKET VALUE	
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)	•			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	14,096,98	35.		
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11c See Form 990, F	Part X, line 13.	
(a) Description of investment	(b) Book value		aluation: Cost or end-of-year market va	lue
(1)			·	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11d. See Form 990, F	Part X, line 15	
	Description		(b) Book valu	ie e
(1)				
(2)				
(3)				
(4)				
(5)				
(6)			 -	
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	2 15)		>	
Part X Other Liabilities.				
Complete if the organization answered "Yes"	to Form 990. Part IV.	line 11e or 11f. See Form	990. Part X. line 25.	
(a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) FUNDS HELD FOR OTHERS		2,565,238.		
(3) ACCRUED PAYROLL LIABILITIE	ES	31,446.		
(4)		·		
(5)				
(6)				
(7)				
(8)				
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	25)	2,596,684.		
IUIAI. (COMINII (D) MUSI EQUAL FORM 330, FAIL A, COI. (D) III I		2,000,0020		

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2013

SCHEDULE

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www its gov/form990.

Inspection:

Name of the organization KERN COMMUNITY FOUNDATI	UNITY FOU	NDATION			•		Employer identification number $77-0555874$
्Part्‼केंब्रे General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	/ for the grants or ass	istance, and the selec	
criteria used to award the grants or assistance?	tance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the i	cedures for monr	toring the use of grant	use of grant funds in the United States.	d States.			
Part訓》 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	Governments and	d Organizations in the	e United States. C	omplete if the orga	ınızatıon answered "\	es" to Form 990, Part	IV, line 21, for any
recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	5,000. Part II can	be duplicated if addit	ional space is need	Jed			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SEE CLIENT PREPARED SPREADSHEET							
ATTACHED			1,642,419.	0			
	nd government or	ganizations listed in th	ne line 1 table				A
-,	listed in the line	1 table					
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instruct	ions for Form 990.					Schedule I (Form 990) (2013)

77-0555874

Schedule I (Form 990) (2013) KERN COMMUNITY FOUNDATION

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

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

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

KERN COMMUNITY FOUNDATION

Employer identification number 77-0555874

Part I Excess Benefit 1	ransaction	ONS (section 50)1(c)(3	and s	section 501(c)(4) org	anizations only).	-					
Complete if the organ							art V	lıne 4∩	h			
4		elationship bety				5, 01 1 01111 990 LZ, F	ait V, i	116 40	<u> </u>	(4)	Correc	cted?
(a) Name of disqualified persor	ח (פו) ח	person and or			illed (c) Description of tran	sactio	n		Ye		No
		po.co a								+ 16	=	NU
										+	\dashv	
										+		
										+		
										╁	+	
										+	+	
2 Enter the amount of tax incurr	red by the o	rganızatıon man	agers	or disc	qualified persons du	ring the year under						
section 4958								> \$.				
3 Enter the amount of tax, if any	y, on line 2, a	above, reimburs	ed by	the or	ganızatıon			▶ \$.				
								_				
Part II Loans to and/or	From Int	erested Pers	sons.									
Complete if the organ	ization answ	vered "Yes" on F	orm 9	90-EZ	, Part V, line 38a or f	Form 990, Part IV, lin	e 26;	or if th	e orga	nızatı	n	
reported an amount o	n Form 990	, Part X, line 5, 6	, or 22	2.								
	Relationship		(d) Los	an to or	(e) Original	(f) Balance due			(h) App by boa	orovea ard or	(1)	ritten
interested person with	organization	of loan	organiz		principal amount		defa	ult?	comm		agree	ment?
			То	From			Yes	No	Yes	No	Yes	No

\$ Total Grants or Assistance Benefiting Interested Persons. Part III

Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (e) Purpose of (a) Name of interested person (c) Amount of (d) Type of (b) Relationship between assistance assistance assistance interested person and the organization

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

Schedule L (Form 990 or 990-EZ) 2013

SCHEDULE M (Form 990) .

Noncash Contributions

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.urs.gov/form990 Inspection
Employer identification number

Name of the organization

KERN COMMUNITY FOUNDATION

77-0555874

Par	t I Types of Property	, 						
		(a) Check if	(b) Number of	(c) Noncash contribution	(d) Method of de	etermir	ning	
		applicable	contributions or	amounts reported on Form 990, Part VIII, line 1g	noncash contribu		-	s
1	Art - Works of art		items contributed	TOTTI 390, Fart VIII, line Tg				
2	Art - Historical treasures							
3	Art · Fractional interests		-					
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property						_	
9	Securities - Publicly traded	Х	3	719,709.	FAIR MARKET	' VA	LUE	
10	Securities - Closely held stock							
11	Securities · Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -	i						
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory		<u> </u>					
20	Drugs and medical supplies		<u> </u>					
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens	<u> </u>						
24	Archeological artifacts	<u> </u>						
25 26	Other () Other ()		<u> </u>					
26 27	Other ()							
28	Other ()							
29	Number of Forms 8283 received by the organi	zation durin	a the tax vear for a	contributions				
	for which the organization completed Form 82							
		, ,					Yes	No
30a	During the year, did the organization receive b	y contribution	on any property re	ported in Part I, lines 1 - 28, t	hat it must hold for			
	at least three years from the date of the initial							
	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that r	equires the review	of any non-standard contrib	utions?	31	X	
32a	Does the organization hire or use third parties	or related o	rganizations to sol	ıcıt, process, or sell noncash				
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c)	for a type of prope	rty for which column (a) is ch	ecked,			
	describe in Part II.							
1 1.14	For Paperwork Reduction Act Notice see	the Instruc	tions for Form 90	M .	Schedule M	(Earm	990) (2013)

cneaule_۱۸	Л (Form 990) (2013) K 🗜	ERN COMMUNI'	TY FOUNDATION	77-0555874	Page 2
Part II	Supplemental in s reporting in Part I, c this part for any addition	formation. Provide olumn (b), the number	the information required by Part I, lines 30b, r of contributions, the number of items received.	, 32b, and 33, and whether the organiza yed, or a combination of both. Also comp	tion plete
		 			
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		 -			
=					
					
	<u></u>				-
		, _		•	
	3-13			Schedule M (Form 9	

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 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number

Name of the organization 77-0555874 KERN COMMUNITY FOUNDATION FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: THE FOUNDATION'S BOARD OF DIRECTORS REVIEW THE FORM 990 PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: EXPLANATION: THE ORGANIZATION PROVIDES ALL NEW DIRECTORS & EMPLOYEES WITH A CONFLICT OF INTEREST FORM. CONTINUING DIRECTORS & EMPLOYEES ARE REQUIRED TO UPDATE THE FORM ANNUALLY. FORM 990, PART VI, SECTION B, LINE 15: EXPLANATION: THE ORGANIZATION'S BOARD OF DIRECTORS ANNUALLY REVIEW AND APPROVE SALARIES OF PRESIDENT AND CEO AND OTHER KEY EMPLOYEES. FORM 990, PART VI, SECTION C, LINE 19: EXPLANATION: THE FORM 990 IS AVAILABLE ON THE KERN COMMUNITY FOUNDATION'S WEBSITE, WWW.KERNFOUNDATION.ORG, VIA THE "ABOUT US" SECTION AT THE "FINANCIAL OVERVIEW" TAB. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: -1,083,131. TRANSFER TO TYPE 1 SUPPORTING ORGANIZATION INTERFUND ADJUSTMENTS BETWEEN RELATED ORGANIZATIONS 1,077,706. -5,425. TOTAL TO FORM 990, PART XI, LINE 9

the organization answered "Yes" on fapplicable) Fapplicable) Fapplicable) Fare-Exempt Organizations Complete if the organization answered "Yes" on hinty Tax-Exempt Organizations Complete if the organization answered "Yes" on hinty (b) GEN Primary activity ation Tay-Exempt Organizations Complete if the organization answered "Yes" on hinty Tax-Exempt Organizations Complete if the organization answered "Yes" on hinty Tay-Exempt Organizations Complete if the organization answered "Yes" on hinty Tay-Exempt Organization answered "Yes" on hinty Tay-Exempt Organization answered "Yes" on hinty Tay-Exempt Organization answered "Yes" on hinty Tay-Exempt Organization answered "Yes" on hinty Tay-Exempt Organization answered "Yes" on hinty Tay-Exempt Organization answered "Yes" on hinty Tay-Exempt Organization answered "Yes" on hinty Tay-Exempt Organizations Complete if the organization answered "Yes" on hinty Tay-Exempt Organization and "Yes" of hinty Tay-Exempt Organ	orm 990, Part IV, line 33. (c) Legal domicile (state or foreign country)	(d) (e) Total income End-of-year assets	nployer iden 77 – 055	5874 (f) xt controlling entity
Identification of Disregarded Entities Complete if the organization answered "Yes" on I (b) Name, address, and EIN (if applicable) Primary activity of disregarded entity	corm 990, Part IV, line 33. (c) Legal domicile (state or Tota foreign country)			t trolling
Part II Identification of Related Tax-Exempt Organization answord related organization of related organization (a) Name, address, and EIN (b) Name, address, and EIN of elated organization (b) Name, address, and EIN of related organization (b) Name, address, and EIN of related organization Of disregarde FOUNDATION - 46-2637218 TO BENEFIT AND SUPPORT THE	Legal domicile (state or foreign country) foreign country)			trolling
art II Identification of Related Tax-Exempt Organizations Complete if the organization answorganizations during the tax year. (a) Name, address, and EIN Of related organization Of related organization Of TRUXTUN AVENUE, SUITE 220 TO BENEFIT AND SUPPORT THE	out W Ford Odd most at Society			
art II Identification of Related Tax-Exempt Organizations Complete if the organization answ organization answ address, and EiN Name, address, and EiN Of related organization RN REAL ESTATE FOUNDATION - 46-2637218 TO BENEFIT AND SUPPORT THE POWENTED STATES THE PARTY OF THE P	Soul Vy Pool Dod Wy Inch			
art II Identification of Related Tax-Exempt Organizations Complete if the organization answ organizations during the tax year. (a) Name, address, and EIN Of related organization RN REAL ESTATE FOUNDATION - 46-2637218 TO BENEFIT AND SUPPORT THE	ord "Voc" or Form 600 Bod W Inco			
Identification of Related Tax-Exempt Organizations Complete if the organization answ organizations during the tax year. (a) Name, address, and ElN of related organization RN REAL ESTATE FOUNDATION - 46-2637218 TO BENEFIT AND SUPPORT THE	South Vice and Bod William	_		
Identification of Related Tax-Exempt Organizations Complete if the organization answ organizations during the tax year. (a) Name, address, and EIN of related organization RN REAL ESTATE FOUNDATION - 46-2637218 TO BENEFIT AND SUPPORT THE	1 000 ms 2 oo "00" por 00 in 0			
### (b) Primary activity ation - 46-2637218 TO BENEFIT AND SUPPORT THE	מומס ופט סוורטווו ססט, רמונוע, וווופ	34 because it had one or m	ore related tax-exempt	
- 46-2637218 220 TO BENEFIT AND	(c) (d) Legal domicile (state or foreign country) Section	(e) Public charity status (if section	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
TO BENEFIT AND		((c)(3))		Yes
BAREKSFIELD, CA 93301	501(C)(3)	LINE 11A, I		<u>×</u>

Page 2 77-0555874

Schedule R (Form 990) 2013 KERN COMMUNITY FOUNDATION

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)		(f) Share of total income	(g) Share of end-of-year assets		ortionate uons?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing managing partner? SS) Yes No	al or Perc	(j) (k) General or Percentage managing ownership partner? Yes/No
		_										_	!
Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	rganizations Taxable or sporation or trust during	as a Corport as the tax	oration or Trust Co	omplete if the	organization	answered "Yes	s" on Form 9	90, Part IV,	line 34 b	ecause it had	d one or	more re	lated
(a) Name, address, and EIN of related organization	N. C.	Pring	(b) Primary activity	(C) Legal domicile (state or foreign country)	(d) Direct controlling entity	ling Type of entity (C corp, S corp, or trust)		(f) Share of total income		(g) Share of Fend-of-year assets	(h) Percentage ownership	-	Section 512(b)(3) controlled entity?
				<u></u>									
									-	-			
332162 09-12-13				35						Sched	Schedule R (Form 990) 2013	orm 99	0) 2013

Page 3

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 Note Complete line 1 if any entity is listed in Parts II. or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	s with one or more re	elated organizations listed	in Parts II-IV?	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		·		1a X
b Gift, grant, or capital contribution to related organization(s)				
c Gift, grant, or capital contribution from related organization(s)				1c X
d Loans or loan guarantees to or for related organization(s)				Td X
e Loans or loan guarantees by related organization(s)				1e X
				A
† Dividends from related organization(s)				
g Sale of assets to related organization(s)				1g X
h Purchase of assets from related organization(s)				‡ X
i Exchange of assets with related organization(s)				1i X
j Lease of facilities, equipment, or other assets to related organization(s)				1j X
k pass of facilities politiment or other assats from related organization(s)				X
	inization(s)			
m Performance of services or membership or fundraising solicitations by related organization(s)	inization(s)			L
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s) (ou			
o Sharing of paid employees with related organization(s)				
				A gray was a surply of the same
p Reimbursement paid to related organization(s) for expenses				Tp X
q Reimbursement paid by related organization(s) for expenses				Tq X
 Other transfer of cash or property to related organization(s) 				1
				1s X
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete the	nis line, including covered	relationships and transaction thresholds.	
(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved	volved
(1) KERN REAL ESTATE FOUNDATION	R	1,081,724.	FMV	
(2)				
(3)				:
(4)				
(5)				
(6)				
332163 09-12-13	36		Schedule	Schedule R (Form 990) 2013

Page 4

Part VI; Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) (b)	(q)	(<u>0</u>	(p) (c)	(e)	ω	(6)	Ξ	(3)	s	(K)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	(related, unrelated,	e partners sec 501(c)(3)	Share of total	Share of end-of-year	Dispropor- tionate	amount in box 20 managing ownership	General o managing partner?	Percentage ownership
		country)	under section 512-514)	Yes No	income	assets	Yes No	(Form 1065)	Yes No	
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								Schedule	۳ (۲٥ <u>٦</u>	Schedule R (Form 990) 2013

Schedule F	l (Form 990) 2013	KERN_	COMMUNITY	FOUNDATION	77-0555874 Page 5
Part VII	(Form 990) 2013 Supplemental In	formation	-	• -	
	Provide additional infe	ormation for re	sponses to question	s on Schedule R (see instructions).	
					
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Kern Community Foundation EIN 77-0555874 2013 Form 990

Grant Report

IDCODE Grantee	Grantee	ADDRESS1	ADDRESS2	CH7	STATE	ZIP	Q XY	Total
4152	Haggar Institute for Advancd Leadership Training, Inc	4725 Peachtree Corners Circle, Suite 100		Norcross	Ą	30092-2553	58-0898309	200,000 00
2385	Bakersfield Memorial Hospital Foundation	420 34th Street		Bakersfield	5	93301	95-3555043	101,825 00
3251	Friends of Mercy Foundation	P O Box 119		Bakersfield	ర	93302	77-0201321	101,050 00
	Bakersfield Christian High School	12775 Stockdale Highway		Bakersfield	CA	93314	77-0121197	100,250 00
	Leading the Way With Dr. Michael Youssef, Inc.	1570 Northside Drive, NW		Atlanta	В	30318	58-1816773	100,000 00
	San Joaquin Community Hospital Foundation	PO Box 2615		Bakersfield	ð	93303	95-2294234	100,000 00
T	Salvation Army Ventura Residences, Inc	155 S Oak Street		Ventura		93001	95-4106270	75,000 00
1320	Southern Sterra Physoling Club Bakarefield College Equipation	1801 Dangrama Driva		Rakerefold	55	93422	51.0151400	55 800 00
	Leadue of Dreams	8302 Espresso Dave Suite 100		Bakersfield	5 5	93312	20-2495631	50 050 00
2008	United Way of Kern County Inc	5405 Stockdale Hwy Suite 200		Bakersfield	5 5	93309	95-2274560	50,000,00
1616	Boys and Girls Clubs of Kern County	801 Niles Street, Bin 5J		Bakersfield	S	93385	95-2462246	40,500 00
2066	Bakersfield Rescue Mission	Bakersfield Rescue Mission	PO Box 2222	Bakersfield	CA	93303-2222	95-1890705	25,300 00
	The Mission at Kern County	Bakersfield Rescue Mission	PO Box 2222	Bakersfield	CA	93303-2222	95-1890705	6,175 00
2039	Youth far Christ of Kern County	P O Box 763		Bakersfield	CA	93302	95-2597393	26,200 00
1742	The Henrietta Weill Memorial Child Guidance Clinic	901 Tower Way Suite 201		Bakersfield	CA	93309	77-0249408	25,000 00
2516	Salvation Army	P O Box 10358		Bakersfield	5	93389	13-2923701	21,700 00
1899	New Advances for People with Disabilities	2601 F Street		Bakersfield	5	93301	95-2630398	21,050 00
2755	BARC Industries	2240 South Union Avenue		Bakersfield	δi	93307	95-1805520	21,025 00
71817	Campus Crusade for Christ Kern Caunty Superatordent of Schools	1300 17th Street		Orlando	<u> </u>	32862-8222	95-2814920	21,000 00
1988	Teen Challenge	P.O. Box 1011		Bakersfield	5 2	93301-4304	05.2683852	20,062 30
1735	HEARTS Connection	3101 North Silliert Ave. Ste 115		Bakersfield	5 2	93308	77-0490433	20,100,02
84	CSUB Foundation	University Advancement 19-AW	9001 Stockdale Highway	Bakersfield	S	93311	95-2643086	19,000 00
2755	University of California, Los Angeles	Box 951432, 1125 Murphy Hall	405 Hilgard Avenue	Los Angeles	CA	90095-9000	95-2250801	19,000 00
3906	Bakersfield Music Theater	1931 Chester Avenue		Bakersfield	S	93301	23-7351668	17,000 0
2050	Garden Pathways, Inc	3509 Union Avenue		Bakersfield	5	93305	77-0442212	15,137 90
4277	Pine Meadow Counseling	7070 Schirra Court, Suite 200		Bakersfield	5	93313	26-0876120	15,000 00
1596	Rakersfield Art Foundation Inc Bakersfield Museum of Art	1930 R Street		Bakersheld	5 5	93300	77-0125694	13,000 00
3985		1721 Westwind Drive. Suite B		Bakersfield	5 5	93301	27-3257780	10.075.00
1868	Mare Therapeutic Riding Center	18200 Johnson Road		Bakersfield	5	93314	77-0297678	10,025 00
152	Bakersfield East Rotary Foundation	P.O. Box 505		Bakersfield	₹	93302	77-0397007	10,000 00
4276	The Jeremy Staat Foundation	3400 Calloway Drive, Suite 703A		Bakersfield	გ :	93312	45-2456529	10,000 00
2418	California State University, Bakersheld	Office of Financial Aid	9001 Stockdale Highway	Bakersheld	<u>ક</u>	93311	95-2643086	6,000 00
	California State University, bakersiteld & Parmeet Signu California State University, Bakersfield and Knandio Kaur	Office of Financial Aid	9001 Stockdale Highway	Bakersheid	5 5		95-2643086	0000,1
	California State University. Bakersfield & Andreyna Osorio Mendez	Office of Financial Aid	9001 Stockdale Highway	Bakersfield	5 5		95-2643086	1 000 00
		Office of Financial Aid	9001 Stockdale Highway	Bakersfield	გ	93311	95-2643086	1,000 00
4143	Planned Parenthood Mar Monte	1691 The Alameda		San Jose	Y)	95126	94-1583439	10,000 00
2045	Southern Sierra Council Boy Scouts of America	2417 M Street		Bakersfield	ა	93301	95-1642363	7,825 00
3533	Boy Scouts of America, Southern Sierra Council	2417 M Street		Bakersfield	8 5		95-1642363	200 00
38	Kern Leadership Alliance Services, Inc	1201 24th St. Suite B110-231		Bakersfield	5 5	93203	20-3926759	00000
3113	North Kern Christian School	710 Peters Street		Wasco	5		95-3159575	7,938 00
3369	The Plank Foundation	1400 Easton Drive #107		Bakersfield	S		77-0114147	7,575 00
3957	Latina Leaders of Kern County	PO Box 2843		Bakersfield	۲ <u>۸</u>	93302	01-0950580	6,250 0
3921	Youth Unlimited Gospel Outreach	P O Box 58		National City	ঠ	91951-0008	95-6150002	6,000 00
4502	National Christian Fellowship Bothson, Society Bothsofield Homelone Contra	PMB #240	4492 Camino de la Plaza	San Ysidro	5 8	92173-3097	95-3866667	6,000 00
1567	American Bod Cross Kern Charter	1600 East Truxtun Avenue		Bakersheld	5 5	93305	95-2858936	5,573.75
2449	Avin High School	900 Varsity Avenue	!	April	5 5	93302	77-0235452	5,500 00
1605	Bakersfield Symphony Orchestra Inc	1328 34th Street. Surte A		Bakersfield	55	93301	95-6001765	5,450,00
391	Community Action Partnership of Kern	P O Box 134		Bakersfield	CA	93302	95-2402760	5,375 00
4278	ors Trust	3555 Landco Drive, No. A.		Bakersfield	Ϋ́	93308	77-0356367	5,025 00
4004	National Multiple Scierosis Society Southern California Chapter	1800 30th Street, Ste 105		Bakersfield	S	93301	13-5661935	5,000 00
3792	Mountain Communities Family Resource Center	P O Box 1902		Frazier Park	5	93225	80-0719925	4,500 00
1662	Grade Rejormed Church Count Appointed Special Advantates of Kern County (CASA)	2000 24th Street Suite 130		Bakersheld	5 5	93305	51-0175552	4,423 5,
1		2000 24th Street, Suite 130		Bakersfield	5 5	93301-3834	77-0344298	2,037.90
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Kern Community Foundation EIN 77-0555874 2013 Form 990 Grant Report

3180	Clarifee		ADDIVESSE.		1	1	2	2
	The Fishers Evangelistic Association	P.O. Box 1403	-	Bakersfield	CA	93302	95-3434214	3,200 00
4118	Kernville Union School District	3240 Erskine Creek Road		Lake Isabella	ð	93240		3,000 00
2925	Stanford University	Gift Processina	P O Box 20466	Stanford	ζ	94309-0466	94-1156365	3,000 00
1602	Bakersfield SPCA	3000 Ghson Street		Bakersfield	Ą	93308-6110	95-2141790	2,800,00
1843	Kern River Valley Revitalization. Inc	P O Box 2692		Lake Isabella	CA	93240-2692	77-0437023	2,100 00
3698	South Fork School and Community Foundation	P O Box 1006		Weldon		93283	77-0509303	2,000 00
4111	Kern River Valley Cemetery District	PO Box 215		Wofford Heights		93285		2,000 00
2920	Yale University	Office of Development	P O Box 2030	New Haven	CT	06521-2038	06-0646973	2,000 00
3459	University of Southern California	700 Child's Way, JHH 324		Los Angeles	CA	90089-0914	95-1642394	2,000 00
3256	American Bible Society	1865 Broadway		New York	Ϋ́	10023	13-1623885	1,800 00
1706	Fox Theater Foundation	2001 H Street		Bakersfield	CA	93301-3919	77-0306813	1,750 00
4077	African American Network of Kern County	P O Box 1215		Bakersfield	Ą	93302	77-0387496	1,500 00
1852	Kernville Chamber of Commerce Community Events & Projects	P O Box 397		Kernville	CA	93238-0397	95-3247759	1,500 00
3087		201 Sproul Hall #1960		Berkeley		94720-1960	94-3250114	1,500 00
1559	Alzheimer's Disease Association of Kern County, Inc	5500 Olive Drive Blda 1		Bakersfield	CA	93308-2924	77-0017561	1,275 00
2894	American Lung Association of California	2025 Westwind Drive, Suite C		Bakersfield		93301	94-0362650	1,250 00
2686	Chosen People Ministries	241 East 51st Street		New York	×	10022-6502	13-1659171	1,200 00
2688	International Christian Ministries	P O Box 9071		Bakersfield	CA	93389-9071	62-1465626	1,200 00
3530	Center of the World Festival, Inc	P O Box 1929		Frazier Park	CA	93225	80-0516825	1,192 47
1837	Kern River Valley Art Association	P O Box 588		Kemville	CA	93238-0588	95-3082127	1,100 00
3328	Flood Bakersfield Ministries, Inc	3509 Union Avenue		Bakersfield	CA	93305	26-2780103	1,089 53
1601	Bakersfield Pregnancy Center	1801 21st Street, #1		Bakersfield	CA	93301-1829	77-0024688	1,050 00
3992	Don't Trash Me dba Kern Green	3500 Coffee Road, Ste B		Bakersfield	CA	93308	27-3496863	1,000 00
	Don't Trash Me	3500 Coffee Road, Ste B		Bakersfield	δ	93308	27-3496863	25 00
1755	Independent Living Center of Kern County	5251 Office Park Dr, Ste 200		Bakersfield	¥ ک	93301-1907	77-0384453	1,025 00
1681	Desert Community Orchestra Association	P O Box 1988		Ridgecrest	Y S	93556-1988	95-2549022	1,025 00
6061	Sharter Historical Society	7 U BOX 1088		Sharer	5 5	93263-1088	95-3445097	1,025 00
2178	Shringes Hospital for Children - Los Angeles	3160 Geneva Street		Loc Angeles	5 2	92201	36.2103608	1010
4117	Esalen Institute	26435 Carmel Rancho Blvd		Carmel	8	93923	94-6114235	1,000 00
1821	Kern Environmental Education Foundation Program (KEEP)	1300 17th Street		Bakersfield	Š	93301-4504	77-0306470	1,000 00
3619	Ridgecrest Chamber Music Society	PO Box 264		Ridgecrest	Ċ	93556	61-1539533	1,000 00
3521	Porterville High School	465 West Olive Avenue		Porterville	క	93257		1,000 00
1682	Desert Group Search and Rescue Volunteers	P O Box 1470		Rosamond	5	93560-1470	77-0360048	1,000 00
2390	Kern County Sheriff's Activities League	1700 Flower Street		Bakersheld	5 5	93305	86-1120697	1,000 00
000	Bakersheid Art Association	7 U Box 386		Tobobo	5 5	93302-0366	95-6092498	1,000 00
4254	Invareity of the Dacific	Advancement Secures	3601 Danific Avenue	Stockton	5 2	95501	94-1156266	00000
1844	Kern River Valley Senior Citizens	P.O. Box 2664	ממחוב שמווים ש	l ake kahella	5 2	93240-2664	95-3740281	000,1
3814	UC Repents	Athletic Development	1 Shields Avenue	Davis	5 5	95616	94-6036494	1,000 00
3462	University of California, San Diego	9500 Gilman Drive #0021		La Jolla	S	92093-0021	95-2544535	1,000 00
4319	Trinity United Methodist Church	724 Niles Street		Bakersfield	CA	93305		1,000 00
4078	University Hospitals Health System, Inc	11100 Euclid Avenue		Cleveland	Ю	44109	34-0714775	1,000 00
1872	Maturango Museum of The Indian Wells Valley	100 E Las Flores Avenue		Ridgecrest	CA	93555-3654	95-2232881	1,000 00
2179	California Living Museum Foundation	10500 Afred Harrell Hwy		Bakersfield	ا	93306	77-0420446	1,000 0
3982	Advancing Parenting	3600 Brisbane Avenue		Bakersfield	5	93313	46-0951376	1,000 00
4229	Kern Kiver Valley Family Resource Center	PO Box 2905		Lake Isabella	<u>5</u>	93240	100000	1,000 00
1991	California Family Counseling Network Inc	PO Box 1929		Frazier Park	5 2	93225	95-4584055	1,000 0
4233	San Jose State University Alumni Association	One Washington Square		San Jose	5 5	95192-0126	94-1166423	000001
7000	Imagine ballet company	F0 B0X 41344		Bakersneid	<u>₹</u> [2	93384	77-0335833	000001
2000	Source Foresticon Society	1535 H Siffeet NW		Washington	3 5	20005	01.2154817	00 000'
3421	UC Davis Foundation	Gifts Administration	One Shields Avenue	Davis	SS	93230	94-6081352	1,000
4056	Panama Union School District Parent Council	8900 Westwold Drive		Bakersfield	S	93309	77-0159339	1,000 00
4305	Cathey's K-9 Rescue	PO Box 622		Lake Isabella	Ą	93240	91-2134340	1,000 00
3825	Wind in The Willows Preschool	P O Box 625		Boron	CA	93596	91-2167306	1,000 00
3856	Frazier Mountain FOCUS Central	1280 Dusty Road		Frazier Park	CA	93225	04-3618856	1,000 00
3998	He Cares Fellowship Inc	PO Box 1612		Weldon	٧	93283	20-0867773	1,000 00
2092	North High School	300 Galaxy Ave		Bakersfield	V.	93308	95-6001764	209 00
	Kern Adult Literacy Council	331 18th St		Bakersheid	Š	93301-4928	23-7312722	637 90

Kern Community Foundation EIN- 77-0555874 2013 Form 990 Grant Report

		****	CCC	2	LIVE	22	_	
40200	Oraniee ACLU Forindation	AUDRESS 125 Broad Street	AUURE334	New York	N V	10004	┰	550 00
1555	Alliance Against Family Violence and Sexual Assault	1921 19th Street		Bakersfield	. ₹	93301	95-3604240	200 009
-	Alliance Against Violence	1921 19th Street		Bakersfield	Ą	93301	95-3604240	50 00
1775	Juvenile Diabetes Research Foundation	1712 19th St, #200		Bakersfield	Ϋ́	93301		920 00
4018	Bakersfield Homeless Center	1600 E Truxtun Avenue		Bakersfield	CA	93305	95-2858936	539 15
1564	Arts Council of Kern	1330 Truxtun Avenue, Suite B		Bakersfield	8	93301	95-3098602	521 28
4255	Cottey College	1000 W Austin Blvd, RM G25		Nevada	Q	64772-9982	44-0545271	200 00
1138	Bakersfield City Schools District	1300 Baker Street		Bakersfield	₹	93305	2007007.7	200 00
3806	Concern for Children	1997 Deer Meadow Blvd		Streetsboro	5 5	44241	34-1204066	200 00
280	Cast Deformed Line School	2200 Omes Steet		Bakersileid	5 2	90308	05-6001764	0000
1725	Greater Bakersfield Vision 20-20 Inc	P.O. Box 12020		Rakersfield	C V	93389	77-0521204	200 00
4320	American Cancer Society	Valley of Hope	1831 Truxton Avenue, Sur	uit Bakersfield	55	93301	13-1788491	200 00
4116	University of Wisconsin Foundation	US Bank Lockbox	Box 78807		ī	53278-0807	39-0743975	200 00
3502	Life Church of Bakersfield	4005 Whirtward Drive		Bakersfield	CA	93313	16-1679738	200 00
2288	St Francis School	2516 Palm		Bakersfield	Ċ	93301	77-0100496	482 00
2148	Northeast Branch of Kern County Library	3725 Columbus Drive		Bakersfield	Š	93306	95-4040808	423 00
3843	Covenant Community Services, Inc	1700 N Chester Avenue		Bakersfield	્ ક	93308	42-1584502	366 64
4736	Irinity Anglican Church	5500 Olive Drive, Building 3	Dec. 484	Bakersheid	<u> </u>	93308	27 1442110	350 00
9079	Anglican Foundation of Kern County	4208 Rosedale Hwy 302	Lot xoa	Bakersneid		93308	77 0508777	275 00
4084	Fithos Asia-USA Ministries	P.O. Box 789		Corona	5 5	92420	33-0265792	250 00
3433	The USO	P O Box 96860		Washington		20077-7677	13-1610451	250 00
4064	St Francis Asissi Church	900 H Street		Bakersfield		93304	53-0196617	225 00
	St Francis Assisi Church	900 H Street		Bakersfield	CA	93304	53-0196617	25 00
3374		P O Box 29		Lee Vining	Ą	93541	77-0051124	250 00
3799	Kern County Sheriff's Dept Search and Rescue - Kern Valley Unit	P O Box 1287		Lake Isabella	V)	93240	77-0439207	246 50
4216	Kern Partnership for Children and Families	A Minam Jamison Children's Center	PO Box 187	Bakersfield	ઇ ડે	93302	20-5536572	200 00
408 408	Empty Space Productions	706 Oak Street		Bakerstield	\$ 5	93304	26-23/0660	700 00
4050	Podes Bible Church MODE	12225 Stockdale Highway		Bakersheid	5 5	93303	20 0643004	200 002
4121	I onofellow School Community Booster Clirib	1900 Stockton Street		Rakersfield	Z Z	93304	51-0190309	2000
4315		900 Hilpard Avenue		Los Angeles	5	90024	95-4158455	200 00
4097	Frontier Blue Crew Band Boosters	6401 Allen Road		Bakersfield	CA	93314	20-5919211	200 00
4251	School City of Hobart Educational Foundation Inc.	32 E 7th Street		Hobart	<u>z</u>	46342	35-2035071	200 00
4206	Philippine Medical Society of Northern California	3470 Sunburst Court		Napa	S	94558	94-2922490	200 00
3987	Bakersfield Crisis Pregnancy Center Inc	1801 21st Street, Ste 1		Bakersfield	δ.	93301	77-0024688	150 00
2478	Bakerslied College	1801 Panorama Drive	400 04th Careet	Bakersheid	\$ 6	93305	51-0151490	150 00
7600	Bakersheld Ronald McDonald House	Bakersfield Memoral Hospital	420 34th Street	Bakersfield	5 5	93301	95-3167869	20 02
3179	Food Bank for Monterey County	815 West Market Street #5	12000	Salinas	5	93901	77-0270228	100 001
4145	Christian Housing Relief Project	PO Box 11271		Bakersfield	CA	93389	26-0430428	100 00
3209	Mazon, Inc	10495 Santa Monica Blvd, Ste 100		Los Angeles	CA	90025	22-2624532	100 00
4021	The Carmel Foundation	P O Box 1050		Carmel	ð	93921	94-1225368	100 00
4203	Fort Zumwalt School District	110 Virgil Street		O'Fallon	<u></u>	63366	43-6000687	100 00
4103	Salvation Army County for the Demonstree of Carolle to America of Marketine	PO Box 34595		Phoenix	¥ 5	85067	13-2923/01	100 00
4109	Kids Around the World Inc.	2424 Charles Street		Rockford	5 =	93942 61108	36-4007250	
4204	Norris Elementary School District	6940 Calloway Drive		Bakersfield	<u>.</u> ₹	93312		100 001
1561	American Cancer Society	1523 California Avenue		Bakersfield	CA	93304	13-1788491	100 00
4073	National Kidney Foundation, Inc	Bldg 3, Suite 204	6405 Metcalf Avenue	Overland Park	KS	66202	М	100 00
4089	Autism Speaks - Los Angeles	5455 Wilshire Blvd, Ste 2250		Los Angeles	CA	90036-4272	20-2329938	100 00
2071	First Congregational Church United Church of Christ	5 Real Road		Bakersfield	ð	93309	_	100 00
4031	American Cancer Society, Inc	1205 E Saginaw		Lansing	Σ	48906	38-1387120	75 00
4144	Caring For Our Children Foundation	PO Box 922		Marysville	W W	98270	91-2125851	65 00
4083 4083	Society of St. Phys. X.St. Mary's Inc.	S223 Baldwin Street	PO Boy 159	Cakiand St Man/s	ξ <u>γ</u>	94621	94-1322202	00 00
4240	National Audubon Society	PO Box 1662	C 200 133	Weldon	2 5	93283	0670600-04	2000
4239	Honor Flight Kern County	11000 Brimhall Road, Suite E, Box E-81		Bakersfield	5	93312	45-4520992	20 00
4194	City of Clay Center	Anımal Shelter	629 Bridge St	Clay Center	KS	67432		50 00
4091	Diathe Committee Association	1454 W Praine Terrace		Olathe	3/1	10000		

Kern Community Foundation EIN. 77-0555874 2013 Form 990

Grant Report

10/CODE Grantee 3184 Hoffmann Hospice of the V 4352 Sequota and Kings Carryot 4350 Disabled American Veteral 4101 Helping Animals Live Tom 3963 Gri Scouts of Central Calif 4258 Norbetine Association of Si 4281 Friends of the Elephant Se 4281 Friends of the Elephant Se 4281 Friends of the Elephant Se 4281 Friends of the Elephant Se 4281 Friends of the Elephant Se 4281 Friends of Life Alzheimer's Disease Rese 3053 Romald Mozbaid House C 4061 Alzheimer's Disease Rese 4061 Alzheimer's Disease Rese 4061 Alzheimer's Disease Rese 4061 Alzheimer's Disease Rese 4075 Southern Poverity Law Cen 4217 Bakersfield Recovery Serv 4075 Catholic Cannus in Carlot 4217 The Breast Cancer Societ 4218 Bakersfield Recovery Serv 4075 Catholic Cantrules of Califo 4306 Jentis Bakersfield Children's Researd 4154 Si Jude Children's Researd 4154 Si Jude Children's Researd 4154 Si Jude Children's Researd 4154 Boxax Vistior Center Foun 4033 Plowshares Peace and Jud 4035 Bikes for Bakersfield Lornaldser Can 4063 Bikes for Bakersfield Lornaldser Can 4068 Bikes for Bakersfield Lornaldser Can 4068 Bikes for Bakersfield Bikes for Bikes for Bakersfield Bikes for Bakersfield Bikes for Bakersfield Bikes for Bikesfield Bikesf	Figure 1997 Hoffmann Hospice of the Valley Sequora and Kings Canyon National Park Foundation Disabled American Veterans Charitable Service Trust, Inc Disabled American Veterans Charitable Service Trust, Inc Disabled American Veterans Charitable Service Trust, Inc Disabled American Veterans Charitable Service Trust, Inc Disabled American Veterans Charitable Service Trust, Inc Disabled Security Californa South Norbertine Association of St. Joseph Ferends of the Elephant Seal Cardiour Relief Services, Inc Si Patrick's Church Links for Life Ronald McDonald House Charites of Southern Carldonia Bakersfield Society for the Prevention of Cruelty to Animals Kern Community Radio Bakersfield Society for the Prevention of Cruelty to Animals Rena Community Radio Sain Ramon Valley Christian Academy Bakersfield Recovery Services, Inc Puppy Rescue and Adoption Program San Ramon Valley Christian Denks Public Schools Denks Research and Educational Foundation Learning Dynamics, Inc American National Red Cross St. Jude Children's Research Hospital Borax Visitor Center Foundation Plowshares Peace and Justice Center Buck St. Makersfield Borax Visitor Center Foundation Plowshares Peace and Justice Center Plor Christian Life Assembly	AUDKESS1 8501 Brmhall Road, Bidg 100 PO Box 3047 PO Box 13301 PO Box 13301 PO Box 13301 PO Box 13301 PO Box 1300 250 San Simeon Avenue PO Box 17090 PO Box 17090 PO Box 17090 1706 Chester Avenue #200 34 Washington St , Suite 200 755 S Pasadena Ave 1200 New Stine 3000 Glabson Street PO Box 2308	ADDRESSZ	CILY Bakersfield Visalia Cincinnati	OH CARE	93278 45250 93302		50 00 50 00 50 00
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	mentany Carly Training Tears Controlled Inc. mais Live Tomorrow Rescue mais Live Tomorrow Rescue mais Live Tomorrow Rescue for Central California South Association of St. Joseph file Elephant Seal allef Services, Inc file Services, Inc for Donald House Charites of Southern California School Donald House Charites of Southern California School View The Prevention of Cruelty to Animals munity Radio file Collection Schools for Services, Inc Alatonal Red Cross Alatonal Red Cross Matonal Red Cross Muldicharis Research Hospital or Center Foundation or Center Foundation Se Peace and Justice Center Services Inc.	PO Box 14301		Cincinnati	[] []	45250 93302	52-1521276 80-0297671	808
	mais Live Tomorrow Rescue Association of St. Joseph Association of St. Joseph Association of St. Joseph Are Elephant Seal allef Services, Inc Sociation Donald House Charites of Southern California School Toward House Charites of Southern California School Society for the Prevention of Cruelty to Animals Thurly Radio	PO Box 733 1831 Bundage Lane 1831 Bundage Lane 1831 Water Caryon Road 256 San Simeon Avenue PO Box 17090 PO Box 17090 34 Washington St. Suite 200 765 S Pasadena Ave 1706 New Stine 1300 New Stine 3000 New Stine 3000 Box 2308 PO		1		93302	80-0297671	000
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	Association of St. Joseph he Elephant Seal he Elephant Seal he Elephant Seal he Elephant Seal he Services, Inc st. Disease Research Foundation Somoid House Charites of Southern California School Society for the Prevention of Cruelty to Animals munity Radio Native Charites Academy I Recovery Services, Inc cue and Adoption Program Program Society Inc cue and Adoption Program I Recovery Services, Inc cue and Adoption Program Caner Society Inc harites of California Inc Schools Inc Schools Inc Schools Inc Schools Inc Schools Inc Schools Inc Schools Inc Schools Inc Schools Inc Schools Inc Schools Inc Schools Inc Schools Inc Schools Incharites of California Incharites and Justice Center Alatonia Rea Cross Incharites and Justice Center SP Peace and Justice Center SP Peace and Justice Center Services Incharites	18831 Water Canyon Road 250 San Simeon Avenue 250 San Simeon Avenue 250 San Simeon Avenue PO Box 1709		Bakersfield	S	93304	94-6000662	20 00
	he Elephant Seal slef Services, Inc clouded solution and search Foundation Donald House Chamtes of Southern California School Society for the Prevention of Cruelty to Animals numity Radio Naley Chinstian Academy Naley Christian Academy Naley Christian Academy I Recovery Services, Inc cue and Adoption Program Overty Law Center Coule and Adoption Program Inc Schools Include and California Inc Schools Includency Recenter Includency Research Hospital Includency Research Hospital Or Center Foundation Services and Justice Center Services and Justice Center Services Includency National Red Cross Authorist Red Cross Includency Research Hospital Or Center Foundation Services and Justice Center Services Includency Services Inc	250 San Simeon Avenue		Tehachapi	Ċ	93561		20 00
	s Schuch le Subsequences, Inc solution Subsequences, Inc subsequences, Inc subsequences, Inc subsequences, Inc Subsequen	PO Box 17090 PO Box 360 1706 Chester Avenue #200 34 Washington St, Suite 200 765 S Pasadena Ave 1200 New Stine 3000 Gibson Street PO Box 2308		San Simeon	S	93428	77-0481003	20 00
	Extruction Subsease Research Foundation Solution Solution To Valley Charites of Southern California Sociol Sociol for the Prevention of Cruelty to Animals Thurity Radio Thurity R	PU Box 860 1706 Chester Avenue #200 34 Washington St, Suite 200 765 S Pasadena Ave 1200 New Stine 3000 Gibson Street PO Box 2308		Baltmore	Q d	21297-0303	13-5563422	50 00
	i Disease Research Foundation Donaid House Chantes of Southern California School Society for the Prevention of Cruelty to Animals numby Readio n'Alley Christian Academy Recovery Services, Inc cute and Adoption Program Oversty Law Center Course and Adoption Program Coverty Law Center Canners Society Inc narties of California Enc Schools arich and Educational Foundation Animucs, Inc Wational Red Cross Animucs, Inc Cather Foundation Or Center Foundation S Peace and Justice Center S Feace and Justice Center	1706 Chester Avenue #200 34 Washington St, Suite 200 765 S Pasadena Ave 1200 New Stine 3000 Gloson Street PO Box 2308		Arroyo Grande	5 3	93421	53-0196617	20 00
	i Disease Research Foundation Doublid House Charites of Southern California School Society for the Prevention of Cruelty to Animals numity Radio numity Radio New York Jaw Center I Recovery Services, Inc cue and Adoption Program Program Cancer Society Inc Intervent Law Center Cancer Society Inc Intervent and Educational Foundation Intervent and Educational Foundation Animal Red Cross Intervent and Educational Foundation Animal Red Cross Intervent Ani	34 Washington St. Suite 200 765 S Pasadena Ave 1200 New Sune 3000 Gibson Street PO Box 2308		Bakersfield	S		93-1088003	20 00
	Donald House Chantles of Southern California School School School Society for the Prevention of Cruelty to Animals nunity Radio nunity Radio Native Charstan Academy Native Charstan Academy Recovery Services, Inc. Cue and Adoption Program Verity Law Center Cacres Society Inc Tarrities of California Itic Schools Itic Academy Native and California Itic Schools Itic Assembly Itid A	765 S Pasadena Ave 1200 New Stine 3000 Gibson Street PO Box 2308		Wellesley	WA	1903	52-2396428	20 00
	Scriool Scolety for the Prevention of Cruelty to Animals Injurity Radio In Valley Christian Academy I Recovery Services, Inc Can and Adoption Program Yoverty Law Center Cancer Society Inc I raties of California I raties of Califo	3000 Gloson Street PO Box 2308		Pasadena	5 5		95-3167869	20 00
	nunity and and and and and and and and and and	PO Box 2308		Bakersheid	5 2	93309	05.2141700	2000
	n Valley Christian Academy Recovery Services, Inc Cuce and Adoption Program Overst Law Center Cancer Society Inc Sarries of Californa Sarries of Californa Sarries of Californa Sarries of Californa Sarries of Californa Sarries of Californa Sarries of Californa Sarries of Californa Sarries of Californa Sarries and Sarries Canter Material Research Hospital Or Center Foundation S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Sarries Inc	- C DOX ECOCO		Bakerefield	5 2	93312	26-2575370	200
	Recovery Services, Inc. cue and Adoption Program Program Program Adoption Program Certain Center Schools Its Schools Its Schools Inc. S	1220 W El Pintado Road		Danville	5	94526	20000	20 00
	cue and Adoption Program Verity Law Center Carcer Society Inc Tarties of California Ic Schools Schools Ic Assembly Middrain's Research Hospital Inc Assembly Inc Assembly Inc Assembly Inc Assembly Inc Assembly Inc Assembly Inc Assembly Include is Research Hospital Or Center Foundation S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace and Justice Center S Peace	PO Box 3218		Bakersfield	S	93385	77-0168396	20 00
	Voerty Law Center Cancer Society Inc Cancer Society Inc Cancer Society Inc Inc Schools Inc Schools Inc Schools Assembly Matural Red Cross Ind Assembly Indian's Research Hospital Or Center Foundation Sears and Justice Center Search and Sears and Justice Center Search and Sears and Sears and Search and S	Precious Friends Puppy Rescue and Adopt 114 Kraft Street, Bldg D	of 114 Kraft Street, Bldg D	Clarksville	Z.	37040	62-1513003	20 00
	Cancer Society Inc. Tainles of California Tainles of California Tainles of California Tainles of California Tainles and Educational Foundation Tainles and Cassand Tainles and Assembly Tainles and Tainles The Seesarch Hospital To Center Foundation To Center Foun	400 Washington Avenue		Montgomery	٩ľ	36104	63-0598743	20 00
	arentes of California re Schools rec's Schools ranch and Educational Foundation ynamics, Inc dational Red Cross Massemby Inidien's Research Hospital or Center Foundation S Peace and Justice Center	6666 Odana Road #700		Madison	<u>×</u>	53719	26-0237089	35 00
	in Scritous arch and Educational Foundation ynamics, Inc. Vational Red Cross life Assembly hildren's Research Hospital or Certier Foundation S Peace and Justice Center	1119 K Street, 2nd Floor		Sacramento	5 2	74027	95-4098671	22.08
	Ynamics, Inc. Ynamics, Inc. Vational Red Cross Vational Red Cross If Assembly If Assembly Or Center Foundation S Peace and Justice Center S Peace and Justice Center S Peace Inc. S Peace	1703 Now Departure Avenue NIM		Machinaton	5 2	20000	52-1338072	25.00
	datonal Red Cross file Assembly Inidren's Research Hospital or Certler Foundation s Peace and Justice Certler Service for Assembly s Peace and Justice Certler such and a file for the foundation for the formation PO Box 5593		Rakersfield	3 5		27-036012	25.00	
	fie Assembly Inidren's Research Hospital or Certier Foundation s Peace and Justice Certier Austrisfield Austriand Australia	520 West 49th Street		New York	ž		53-0196605	25 00
	nidren's Research Hospital or Center Foundation s Peace and Justice Center Peace and Justice Center Authorise Inc.	920 Valley Blvd		Tehachapi	ð			25 00
	or Center Foundation S Peace and Justice Center Peace State State S Peace State State S Peace State S Peace State S Peace S Pe	501 St Jude Place		Memphis	N.	38105	62-0646012	25 00
	s Peace and Justice Center lakersfield	14486 Borax Road		Boron	CA	93516	77-0480092	25 00
\Box	akersfield	PO Box 475		Ukiah	S	95482	68-0218781	25 00
T	vintainaare Inc	1708 Chester Avenue		Bakersfield	S	93301	27-1019534	25 00
	Julianibers, nic	710 10th Street, Surte 120	1 0000	Golden	8	80401	65-0200163	25 00
T	Bakerstield Homeless Center	Bakersheld Homeless Center	1600 E Iruxtun Avenue	Bakersheid	5 ≥	93305	45-2858936	75 00
T	Alznemer's Association	465 East Hight Street, Suite 200		Lexington	2 2	20036	13-3039601	25 00
T	Furnan Rights Campaign Foundation	DO Dov 5224		Washington	3 2	20036	22.4430180	25.00
4257 Pilipino-Ame	Piliping American Accounting of Proceeds County inc	2020 E Oakland		Hernet	ع ا	į	26-1415530	25.00
Т		3813 Mesa Grande		Rakersfield	5 5		27-1415333	25 00
Т	Optimal Hospice Foundation	1315 Boughton Drive		Bakersfield	 	93308	95-3334909	25 00
Π	Boron Senior Citizens, Inc	27177 Twenty Mule Team Road		Boron	S	93516-1643	95-3675800	25 00
Г	Valley Bible Fellowship Soul Factory Inc	P O Box 6266		Bakersfield	Ą	93386	20-1444553	25 00
4095 Living Grace	Living Grace Community Church	PO Box 21690		Bakersfield	Ą	93390	27-2597132	25 00
Г	dis Church	900 H Street		Bakersfield	CA	93304	94-1294942	25 00
	Taft College Foundation	29 Emmons Park Drive		Taft	ςĄ		43-2023035	25 00
	Awakening Services, Inc	1904 Clarendon		Bakersfield	S		77-0708032	25 00
1	Garces Memorial High School Foundation	2800 Loma Linda Drive		Bakersfield	<u></u>	93305		25 00
1.	Kern County Museum Foundation	3801 Chester Ave		Bakersheld	5 1	93307	7,502720-77	72 00
43321 CHUICH OF 35	Charles Operated Control of Latter Day Saints	20 E N Temple		Sail Lake City	5 5	04130	20 0171602	25.00
T	Advanced Center for Eve Care	1701 Westward Dr. Suite 101		Bakerefield	5 2		27-3257780	25 00
Ī	Veterans of Foreign Wars Foundation	National Headquarters	406 W 34th Street. Suite 97		§ <u></u>		43-1758998	25 00
Г	San Lauren Elementary Parent Teacher Organization Inc	5210 Victor Street		Bakersfield	S		37-1544230	25 00
4027 Wounded W	Wounded Warrior Project Inc	4899 Belfort Road, Suite 300		Jacksonville	F	32256	20-2370934	25 00
3756 Salvation Ar	Salvation Army Golden State Division	832 Folsom Street		San Francisco	δ	94107	13-2923701	24 04
	Mercy Foundation - Bakersfield	Friends of Mercy Foundation	P O Box 119	Bakersfield	ςĄ	93302	77-0201321	15 00
Ī	nswers, Inc	PO Box 199000		San Diego	ð	92159	95-3754404	15 00
T	Wichita State University Foundation	KMUW Public Radio	3317 E 17th Street	Wichita	ξŞ	- 1	48-6121167	15 00
A279 American Ce	American Center for Law and Justice	200 Town Access 5:15 200		Washington	200	-0555	52-2042771	10 00
Τ	Retrested Rotary West Foundation	D O Box 0502		Bakersheld	5 5	93301	77-0371605	000
ئِر	KORIY West roundanon	F U DOX 9302		Bakersheiu	5	80008	77-03/ 1080	1 640 619 00

Kern Community Foundation EIN 77-0555874 2013 Form 990

Grant Report

CITY Sum of GRANTAMT IDCODE | Grantee

STATE ZIP

Form **8868** (Rev. January 2014)

File a separate application for each return.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury

Information about Form 8868 and its instructions is at www.irs.gov/form8868.

IIIGHHAI NOV	anda Sarvica					
■ If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box		>	X
	are filing for an Additional (Not Automatic) 3-Month Ex			this form).		
Do not c	omplete Part II unless you have already been granted	an automa	tic 3-month extension on a previous	ly filed For	n 8868.	
	ic filing (e-file). You can electronically file Form 8868 if y					
	to file Form 990-T), or an additional (not automatic) 3-mo					
	file any of the forms listed in Part I or Part II with the ex					
Personal	Benefit Contracts, which must be sent to the IRS in page	oer format	(see Instructions). For more details o	on the elect	ronlc filing of this fo	orm,
	v.irs.gov/efile and click on e-file for Charities & Nonprofits	S				
Part I						
Part I on	ation required to file Form 990·T and requesting an autory y					
	corporations (including 1120-6 filers), partnerships, rich ome tax returns.	nos, and a	usts must use i om i out to requee		's identifying num	ber
Type or	Name of exempt organization or other filer, see instru	etions.			identification numb	
print	Marile of exempt organization of other more occurrence	301101101				(,
print	KERN COMMUNITY FOUNDATION				77-055587	4
File by the due date fo	Number street and seem aroulto no If a D.O. hay o	see instruc	tions.	Social sec	urity number (SSN)
filing your	3300 TRUXTUN AVENUE, SUITE					
return See Instructions			ress, see instructions.			
	Difference Lamb Grand District					
Enter the	Return code for the return that this application is for (fil	e a separa	te application for each return)			0 1
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Applicat	ion	Return	Application			Return
Is For		Code	Is For			Code
	0 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 99		02	Form 1041-A			09
	20 (ındividual)	04	Form 4720 (other than individual) Form 5227			10
Form 99	0-Fr 0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	0-T (trust other than above)	06	Form 8870			12
1 01111 33	DANETTE RINEHA					
• The h	books are in the care of 3300 TRUXTUN A		TE. 220 - BAKERSFI	ELD,	CA 93301	
	hone No. > 661-325-5346	<u>, , </u>	Fax No. ▶			
•	organization does not have an office or place of busines	s in the Ur				
	Is for a Group Return, enter the organization's four digit					check this
box ►						
1 In	equest an automatic 3-month (6 months for a corporatio					
			ation return for the organization nam		The extension	
	for the organization's return for:					
>	X calendar year 2013 or					
>	tax year beginning	, ar	nd ending		_ ·	
2 If	the tax year entered in line 1 is for less than 12 months,	check reas	son: Initial return	Final retur	า	
	Change in accounting period	<u>. </u>		<u> </u>		
	this application is for Forms 990-BL, 990-PF, 990 T, 4720	D, or 6069,	enter the tentative tax, less any			^
	onrefundable credits. See instructions.			3a	\$	0.
	this application is for Forms 990 PF, 990 T, 4720, or 606					^
	stimated tax payments made. Include any prior year over			3b	\$	0.
	alance due. Subtract line 3b from line 3a. Include your p					0
	y using EFTPS (Electronic Federal Tax Payment System)			3c	5 0070 FO 1	0.
Caution	n. If you are going to make an electronic funds withdrawa ions.	ai (direct de	BOIL) WITH THIS FORM 8868, SOO FORM	0403.EU ai	iu roim 88/9·EO (payment
LHA 323841 12-31-13	For Privacy Act and Paperwork Reduction Act Notice	, see instr	ructions.		Form 8868 (F	Rev. 1-2014

Form **8868**

(Rev. January 2014)

Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs gov/form8868 •

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extension, complete	te only Pa	irt I and check this box		•	X
	are filing for an Additional (Not Automatic) 3-Month Ex			this form)		
Do not	complete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	sly filed Fo	rm 8868.	
Electro	nic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tin	ne to file (6	6 months for a corp	oration
	to file Form 990-T), or an additional (not automatic) 3-mol					
	to file any of the forms listed in Part I or Part II with the exc					
	al Benefit Contracts, which must be sent to the IRS in pap					
	www.irs.gov/efile and click on e-file for Charities & Nonprofits		,		J	·
Part			submit original (no copies nee	eded).		
	oration required to file Form 990-T and requesting an autor					
Part I o	•				•	- 🗆
	, r corporations (including 1120-C filers), partnerships, REM	IICs. and t	rusts must use Form 7004 to reques	t an exten	sion of time	
	come tax returns.		••••••••••••••••••••••••••••••••••••••		er's identifying nu	mber
Type o	Name of exempt organization or other filer, see instru	ctions	· · · · · ·		r identification num	
print	Haine of exempt enganization of earlier mor, eee meta-	01.01.01				DOI (EII 1) OI
print	KERN COMMUNITY FOUNDATION				77-05558	74
File by the) N 1	ee instriic	tions	Social se	curity number (SSI	
due date filing your	* · · · · · · · · · · · · · · · · · ·		noris.	Goolal Sc	carry riamber (cor	*/
return Se instructio	City, town or post office, state, and ZIP code. For a fo		lress, see instructions.			
	BAKERSFIELD, CA 93301					
						[0]]
Enter th	ne Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
		ι	T			T
Applica	ation	Return	Application			Return
Is For		Code	Is For			Code
	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 9		02	Form 1041-A			08
	720 (Individual)	03	Form 4720 (other than individual)			09
Form 9		04	Form 5227			10
	90-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 9	90-T (trust other than above)	06	Form 8870			12
	DANETTE RINEHAI		mm 220 DAWEDGET	TI D	az 02201	
	books are in the care of 3300 TRUXTUN A	<u> VE, S</u>		ELD,	CA 93301	
	phone No. ► 661-325-5346		Fax No.			
	e organization does not have an office or place of busines				•	• 🗀
• If th	s is for a Group Return, enter the organization's four digit	-				
box	If it is for part of the group, check this box				ers the extension i	s for.
1 1	request an automatic 3-month (6 months for a corporation ${ m AUGUST} \ 15$, 2014 , to file the exemp		to file Form 990-T) extension of time tion return for the organization nam		The extension	
15	for the organization's return for:					
	X calendar year 2013 or					
	tax year beginning	, an	id ending		·	
2 1	the tax year entered in line 1 is for less than 12 months, o	heck reas	on: Initial return	Final retur	m	
	Change in accounting period					
3a I	this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			
r	onrefundable credits. See instructions.			3a	\$	0.
b ii	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and			
	stimated tax payments made. Include any prior year over			3b	\$	0.
_	lalance due. Subtract line 3b from line 3a. Include your pa					
	y using EFTPS (Electronic Federal Tax Payment System).			3с	\$	0.
	n. If you are going to make an electronic funds withdrawal			3453-EO a	nd Form 8879-EO f	or payment
LHA 323841	For Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form 8868 (F	Rev. 1-2014)
323841 12-31-13						

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

▶ Information about Form 8868 and its instructions is at $_{www.irs.gov/form8868}$.

OMB No. 1545-1709

● If you a	re filing for an Automatic 3-Month Extension, complete	te only Pa	rt I and check this box		>	
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form).		
Do not co	mplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	sly filed Fo	rm 8868.	
Electroni	c filing _(e-file) . You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tir	ne to file (6	months for a corpo	oration
required t	o file Form 990-T), or an additional (not automatic) 3-moi	nth extens	sion of time. You can electronically f	ile Form 88	368 to request an ex	ktension
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers A	Associated With Cei	rtain
Personal I	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details	on the elec	tronic filing of this f	orm,
visit www	ırs.gov/efile and click on e-file for Charities & Nonprofits	•				
Part I	Automatic 3-Month Extension of Time	Only s	submit original (no copies ne	eded).		
A corpora	tion required to file Form 990-T and requesting an autor	natic 6-mc	onth extension - check this box and	complete	- · · · · · · · · · · · · · · · · · · ·	
Part I only	- · · · · · · · · · · · · · · · · · · ·				•	X
All other o	orporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time	
	ome tax returns.				r's identifying nun	ber
Type or	Name of exempt organization or other filer, see instru	ctions		Employer	identification numb	er (EIN) or
print	,			` *		` '
	KERN COMMUNITY FOUNDATION				77-055587	4
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.	Social se	curity number (SSN)
filing your	3300 TRUXTUN AVENUE, SUITE				. ,	,
return See instructions	City, town or post office, state, and ZIP code. For a fo		Iress, see instructions.	*		
	BAKERSFIELD, CA 93301	Ů	,			
	· · · · · · · · · · · · · · · · · · ·					
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			07
Eritor tiro	riotain ood for the rotain that the approximation is	,	,			
Applicati	on	Return	Application	··		Return
Is For	-··	Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
	0 (individual)	03	Form 4720 (other than individual)			09
Form 990		04	Form 5227			10
		05	Form 6069			11
	-T (sec 401(a) or 408(a) trust)	06	Form 8870	-		12
romi 990	T (trust other than above) DANETTE RINEHAI		1 0/111 0870			1
• 75 6	ooks are in the care of > 3300 TRUXTUN AV		TE. 220 - BAKERSET	תוא	ሮ ኔ 933በ1	
	one No. ► 661-325-5346	ИП, В		, עעע	C21	_
		46 - 11-	Fax No.			
	organization does not have an office or place of business			14 Al		المسلما
r	s for a Group Return, enter the organization's four digit	1				
box 🕨 l			ach a list with the names and EINs o		ers the extension is	tor
1 Ire	quest an automatic 3-month (6 months for a corporation					
	NOVEMBER 15, 2014, to file the exemp	t organiza	tion return for the organization nam	ed above.	The extension	
	or the organization's return for:					
▶ļ	$\overline{\mathbf{X}}$ calendar year 2013 or					
▶l	tax year beginning	, an	d ending		_	
2 If th	ne tax year entered in line 1 is for less than 12 months, c	heck reas	on: L Initial return L	Final retur	n	
	Change in accounting period					
3a If th	nis application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6069,	enter the tentative tax, less any			
nor	refundable credits. See instructions.			3a	\$	0.
b If th	nis application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and			
	mated tax payments made. Include any prior year over			3b	\$	0.
	ance due. Subtract line 3b from line 3a. Include your pa					
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
	If you are going to make an electronic funds withdrawal			8453-EO ai	nd Form 8879-EO fo	r payment
instructio		,	,			

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

LHA 323841 12-31-13

Form 8868 (Rev. 1-2014)