

Return of Organization Exempt From Income Tax

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

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

A For the **2020** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization KERN COMMUNITY FOUNDATION		D Employer identification number 77-0555874
	Doing business as		
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 3300 TRUXTUN AVENUE, SUITE 220		E Telephone number 661-325-5346
	City or town, state or province, country, and ZIP or foreign postal code BAKERSFIELD, CA 93301		G Gross receipts \$ 10,391,452.
F Name and address of principal officer: KRISTEN A. BEALL WATSON 3300 TRUXTUN AVE., STE. 220, BAKERSFIELD, CA			H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.KERNFOUNDATION.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1999 M State of legal domicile: CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: KERN COMMUNITY FOUNDATION'S MISSION IS GROWING COMMUNITY AND GROWING PHILANTHROPY.
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.
	3 Number of voting members of the governing body (Part VI, line 1a) 12
	4 Number of independent voting members of the governing body (Part VI, line 1b) 12
	5 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5
	6 Total number of volunteers (estimate if necessary) 75
	7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 0.
Revenue	8 Contributions and grants (Part VIII, line 1h) 6,392,286.
	9 Program service revenue (Part VIII, line 2g) 357,498.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 849,371.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 7,599,155.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 2,159,062.
	14 Benefits paid to or for members (Part IX, column (A), line 4) 0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 428,726.
	16a Professional fundraising fees (Part IX, column (A), line 11e) 0.
	b Total fundraising expenses (Part IX, column (D), line 25) 190,104.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 784,210.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 3,371,998.
Net Assets or Fund Balances	19 Revenue less expenses. Subtract line 18 from line 12 4,227,157.
	20 Total assets (Part X, line 16) 27,432,024.
	21 Total liabilities (Part X, line 26) 3,667,783.
	22 Net assets or fund balances. Subtract line 21 from line 20 23,764,241.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer: <i>Kristen A. Beall Watson</i>	Date: 9/9/21
	Type or print name and title: KRISTEN A. BEALL WATSON, PRESIDENT & CEO	
Paid Preparer Use Only	Print/Type preparer's name: MARIANNE A. DIAZ, EA	Preparer's signature: _____
	Firm's name: DANIELLS PHILLIPS VAUGHAN & BOCK	Firm's EIN: 95-2972229
	Firm's address: 300 NEW STINE ROAD BAKERSFIELD, CA 93309	Phone no. 661-834-7411

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: KERN COMMUNITY FOUNDATION'S MISSION IS GROWING COMMUNITY AND GROWING PHILANTHROPY.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? No

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 3,383,238. including grants of \$ 2,622,824.) (Revenue \$ 402,387.) KERN COMMUNITY FOUNDATION IS IN BUSINESS TO SERVE AS A CHARITABLE RESOURCE FOR LOCAL DONORS AND CORPORATIONS AND TO GENERATE CAPITAL THAT PROVIDES PHILANTHROPIC SOLUTIONS TO HELP MAKE KERN COUNTY A BETTER PLACE TO LIVE, TO WORK AND TO VISIT. THE FOUNDATION IS HOME FOR LOCAL PHILANTHROPISTS, WITH MORE THAN 175 NAMED FUNDS THAT HELP DONORS ORGANIZE AND ACHIEVE MEANINGFUL RESULTS FROM THEIR CHARITABLE GIVING. THE FOUNDATION IS A RESULTS-ORIENTED GRANTMAKER, AWARDING APPROXIMATELY \$2,622,824 IN GRANTS IN 2020. THE FOUNDATION IS A TRUSTED COMMUNITY LEADER FOCUSING ON INITIATIVES SUCH AS COLLEGE ACCESS AND NONPROFIT STRENGTHENING.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 3,383,238.

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)? <i>If "Yes," complete Schedule A</i>	1 X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i>	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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7	X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8	X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	9	X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	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? <i>If "Yes," complete Schedule D, Part VII</i>	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? <i>If "Yes," complete Schedule D, Part VIII</i>	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 Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d	X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	12b X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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 or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16	X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17	X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19	X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a	X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21 X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question number, Yes, No. Rows 22-38 covering various organizational requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question number, Yes, No. Rows 1a, 1b, 1c regarding Form 1096 and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 16 regarding employee counts, tax filings, foreign accounts, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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 on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **CA**
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records **DANETTE RINEHART - 661-325-5346**
3300 TRUXTUN AVE, STE. 220, BAKERSFIELD, CA 93301

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. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KRISTEN A. BEALL WATSON PRESIDENT & CEO	40.00	X		X				152,727.	0.	0.
(2) DIANE WHITE CHAIR	1.00	X		X				0.	0.	0.
(3) KATE TANDY VICE CHAIR	1.00	X		X				0.	0.	0.
(4) CARLOS SANCHEZ TREASURER	1.00	X		X				0.	0.	0.
(5) KEVIN C. FINDLEY SECRETARY	1.00	X		X				0.	0.	0.
(6) JOE GREGORY DIRECTOR	1.00	X						0.	0.	0.
(7) DAVID DENISON DIRECTOR	1.00	X						0.	0.	0.
(8) JOHN C. HERSHEY III DIRECTOR	1.00	X						0.	0.	0.
(9) JEFFREY GUTIERREZ DIRECTOR	1.00	X						0.	0.	0.
(10) JUSTIN LELAND DIRECTOR	1.00	X						0.	0.	0.
(11) STEPHEN SANDERS DIRECTOR	1.00	X						0.	0.	0.
(12) MARTHA TERRAZAS DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal							152,727.	0.	0.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							152,727.	0.	0.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **1**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PROFORMA SOLUTIONS FOR PRINTING AND PROMOTI 3434 TRUXTUN AVE STE 170, BAKERSFIELD, CA 9	MARKETING	367,174.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **1**

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	4,795,703.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 798,063.				
	h Total. Add lines 1a-1f		4,795,703.				
Program Service Revenue	2 a MANAGEMENT FEES	Business Code					
		541610	402,387.	402,387.			
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f		402,387.					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		395,291.			395,291.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	4,797,875.	196.		
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	3,458,960.	0.			
	c Gain or (loss)	7c	1,338,915.	196.			
d Net gain or (loss)		1,339,111.			1,339,111.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			6,932,492.	402,387.	0.	1,734,402.	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,622,824.	2,622,824.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	152,728.	76,364.	57,273.	19,091.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	203,958.	101,979.	76,484.	25,495.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	44,988.	22,494.	16,871.	5,623.
9 Other employee benefits				
10 Payroll taxes	21,593.	10,796.	8,098.	2,699.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	17,425.	8,713.	6,534.	2,178.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	434,705.		434,705.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	249,650.	124,825.	93,619.	31,206.
12 Advertising and promotion				
13 Office expenses	17,554.	8,777.	6,583.	2,194.
14 Information technology				
15 Royalties				
16 Occupancy	49,971.	24,985.	18,739.	6,247.
17 Travel	2,782.	1,391.	1,043.	348.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	67,067.	33,533.	25,150.	8,384.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	301.	150.	113.	38.
23 Insurance	7,078.	3,539.	2,654.	885.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a CONTRACT LABOR	575,116.	287,547.	215,677.	71,892.
b DUES AND SUBSCRIPTIONS	56,741.	28,371.	21,278.	7,092.
c PRINTING AND MARKETING	31,328.	15,664.	11,748.	3,916.
d UTILITIES	7,448.	3,724.	2,793.	931.
e All other expenses	15,100.	7,562.	5,653.	1,885.
25 Total functional expenses. Add lines 1 through 24e	4,578,357.	3,383,238.	1,005,015.	190,104.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	6,211,295.	2	7,992,981.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	126,197.	4	422,862.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	34,360.	9	34,520.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 36,095.		
	b Less: accumulated depreciation	10b 35,532.	10c	563.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11	21,059,309.	12	24,014,294.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	27,432,024.	16	32,465,220.	
Liabilities	17 Accounts payable and accrued expenses	26,001.	17	308,840.
	18 Grants payable	126,600.	18	107,500.
	19 Deferred revenue	42,134.	19	282,000.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	3,473,048.	25	4,904,730.
	26 Total liabilities. Add lines 17 through 25	3,667,783.	26	5,603,070.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	22,814,241.	27	25,912,150.
	28 Net assets with donor restrictions	950,000.	28	950,000.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	23,764,241.	32	26,862,150.
33 Total liabilities and net assets/fund balances	27,432,024.	33	32,465,220.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,932,492.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,578,357.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,354,135.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	23,764,241.
5	Net unrealized gains (losses) on investments	5	743,774.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	26,862,150.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2020)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

KERN COMMUNITY FOUNDATION

Employer identification number

77-0555874

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 [] A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2 [] A school described in section 170(b)(1)(A)(ii).
3 [] A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4 [] A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii).
5 [] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).
6 [] A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).
8 [] A community trust described in section 170(b)(1)(A)(vi).
9 [] An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture.
10 [] An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions...
11 [] An organization organized and operated exclusively to test for public safety.
12 [] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations...
a [] Type I. A supporting organization operated, supervised, or controlled by its supported organization(s)...
b [] Type II. A supporting organization supervised or controlled in connection with its supported organization(s)...
c [] Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s)...
d [] Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated...
e [] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations []

g Provide the following information about the supported organization(s).

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,537,346.	2,789,025.	3,183,080.	6,392,286.	4,795,703.	19,697,440.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge ...						
4 Total. Add lines 1 through 3	2,537,346.	2,789,025.	3,183,080.	6,392,286.	4,795,703.	19,697,440.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						19,697,440.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	2,537,346.	2,789,025.	3,183,080.	6,392,286.	4,795,703.	19,697,440.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...	280,815.	318,281.	382,205.	483,663.	395,291.	1,860,255.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						21,557,695.
12 Gross receipts from related activities, etc. (see instructions)					12	1,282,580.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)).....	14	91.37 %
15 Public support percentage from 2019 Schedule A, Part II, line 14	15	90.61 %
16a 33 1/3% support test - 2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2019 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described in line 11a above?		
11b		
c A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		Yes	No
2a			
b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.			
2b			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI .			
3a			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.			
3b			

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2020 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020			
a From 2015			
b From 2016			
c From 2017			
d From 2018			
e From 2019			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016			
b Excess from 2017			
c Excess from 2018			
d Excess from 2019			
e Excess from 2020			

Schedule A (Form 990 or 990-EZ) 2020

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Multiple horizontal lines for supplemental information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **KERN COMMUNITY FOUNDATION** Employer identification number **77-0555874**

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	63	
2 Aggregate value of contributions to (during year)	2,023,955.	
3 Aggregate value of grants from (during year)	1,635,769.	
4 Aggregate value at end of year	12,094,150.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2020

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,290,136.	1,087,588.	1,204,670.	1,061,613.	532,072.
b Contributions				50,000.	509,298.
c Net investment earnings, gains, and losses	197,633.	275,760.	-21,330.	138,747.	39,886.
d Grants or scholarships	27,500.	46,750.	70,000.	22,500.	4,800.
e Other expenditures for facilities and programs					
f Administrative expenses	27,971.	26,463.	25,751.	23,190.	14,843.
g End of year balance	1,432,297.	1,290,136.	1,087,588.	1,204,670.	1,061,613.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 33.6730 %
 - b Permanent endowment 66.3260 %
 - c Term endowment .0000 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		36,095.	35,532.	563.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				563.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) AGENCY ACCOUNT	24,014,294.	END-OF-YEAR MARKET VALUE
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	24,014,294.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

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

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FUNDS HELD FOR OTHERS	4,860,398.
(3) ACCRUED PAYROLL LIABILITIES	44,332.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	4,904,730.

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

THE ORGANIZATION INTENDS TO USE ITS ENDOWMENT TO FUND VARIOUS SCHOLARSHIPS AND SUPPORT THE BAKERSFIELD SYMPHONY ORCHESTRA.

PART X, LINE 2:

THE FOUNDATION HAS ADOPTED THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, THE FOUNDATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES, BASED ON THE TECHNICAL MERITS OF THE

Part XIII Supplemental Information (continued)

POSITION. THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT. THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2020

**Open to Public
Inspection**

Name of the organization **KERN COMMUNITY FOUNDATION** Employer identification number **77-0555874**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
911 AT EASE INTERNATIONAL, INC PO BOX 30363 SANTA BARBARA, CA 93130	84-5130619	501(C)(3)	150,000.	0.			CHARITABLE
ADVENTIST HEALTH BAKERSFIELD FOUNDATION - 1524 27TH STREET STE 200 - BAKERSFIELD, CA 93301	95-2294234	501(C)(3)	28,750.	0.			CHARITABLE
ALLIANCE AGAINST FAMILY VIOLENCE AND SEXUAL ASSAULT - 1921 19TH STREET - BAKERSFIELD, CA 93301	95-3604240	501(C)(3)	8,000.	0.			CHARITABLE
ALPHA HOUSE A PLACE FOR NEW BEGINNINGS - PO BOX 712 - TAFT, CA 93268	77-0366593	501(C)(3)	10,000.	0.			CHARITABLE
ALPHA TAU OMEGA FOUNDATION 333 N. ALABAMA STREET STE 220 INDIANAPOLIS, IN 46204	23-7154214	501(C)(3)	7,000.	0.			CHARITABLE
ALZHEIMER'S DISEASE ASSOCIATION OF KERN COUNTY, INC. (ADAKC) - 4203 BUENA VISTA ROAD - BAKERSFIELD, CA 93311	77-0017561	501(C)(3)	17,625.	0.			CHARITABLE

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶ 305.**

3 Enter total number of other organizations listed in the line 1 table **▶ 0.**

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

Schedule I (Form 990) 2020

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICA'S CHARITIES 14150 NEWBROOK DRIVE, SUITE 110 CHANTILLY, VA 20151	54-1517707	501(C)(3)	6,000.	0.			CHARITABLE
BAGS4KIDS 10701 APPLEWOOD DRIVE CALIFORNIA CITY, CA 93505	42-1567374	501(C)(3)	20,250.	0.			CHARITABLE
BAKERSFIELD COLLEGE FOUNDATION 1801 PANORAMA DRIVE BAKERSFIELD, CA 93305	51-0151490	501(C)(3)	19,800.	0.			CHARITABLE
BAKERSFIELD FIREFIGHTERS HISTORICAL SOCIETY - 8200 STOCKDALE HWY M10-295 - BAKERSFIELD, CA 93311	47-3099227	501(C)(3)	20,000.	0.			CHARITABLE
BAKERSFIELD HIGH SCHOOL PARENT TEACHER STUDENT ORGANIZATION - PO BOX 866 - BAKERSFIELD, CA 93302	82-2183657	501(C)(3)	22,593.	0.			CHARITABLE
BAKERSFIELD HOMELESS CENTER 1600 E TRUXTUN AVENUE BAKERSFIELD, CA 93305	95-2858936	501(C)(3)	23,412.	0.			CHARITABLE
BAKERSFIELD MEMORIAL HOSPITAL FOUNDATION - PO BOX 2401 - BAKERSFIELD, CA 93303	95-3555043	501(C)(3)	8,500.	0.			CHARITABLE
BAKERSFIELD MUSEUM OF ART 1930 R STREET BAKERSFIELD, CA 93301	77-0125694	501(C)(3)	23,066.	0.			CHARITABLE
BAKERSFIELD POLICE ACTIVITIES LEAGUE - 301 E. 4TH STREET - BAKERSFIELD, CA 93307	77-0375436	501(C)(3)	15,000.	0.			CHARITABLE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAKERSFIELD SENIOR CENTER, INC. 530 4TH STREET BAKERSFIELD, CA 93304-2217	77-0013149	501(C)(3)	17,000.	0.			CHARITABLE
BAKERSFIELD SYMPHONY ORCHESTRA INC. - PO BOX 751 - BAKERSFIELD, CA 93302	95-6001765	501(C)(3)	55,586.	0.			CHARITABLE
BETHESDA TEACHING MINISTRY PO BOX 20028 EL CAJON, CA 92021-0900	95-3248137	501(C)(3)	25,000.	0.			CHARITABLE
BLUEBIRD MINISTRIES 1311 SE BLUE BIRD DR GRANTS PASS, OR 97526	84-2960173	501(C)(3)	10,000.	0.			CHARITABLE
BOYS & GIRLS CLUBS OF KERN COUNTY 801 NILES STREET, BIN 5J BAKERSFIELD, CA 93385	95-2462246	501(C)(3)	169,495.	0.			CHARITABLE
CALIFORNIA FARMWORKER FOUNDATION 800 10TH AVE. DELANO, CA 93215	81-3960575	501(C)(3)	10,000.	0.			CHARITABLE
CALIFORNIA LIVING MUSEUM FOUNDATION - 1300 17TH STREET - BAKERSFIELD, CA 93301	77-0420446	501(C)(3)	6,500.	0.			CHARITABLE
CALIFORNIA POLYTECHNIC STATE UNIVERSITY, SAN LUIS OBISPO - CAL POLY FINANCIAL AID OFFICE - SAN LUIS OBISPO, CA 93407-0201	20-4927897	501(C)(3)	13,000.	0.			CHARITABLE
CALIFORNIA RURAL LEGAL ASSISTANCE, INC. - 1430 FRANKLIN ST STE 103 - OAKLAND, CA 94612	95-2428657	501(C)(3)	10,000.	0.			CHARITABLE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA STATE UNIVERSITY, BAKERSFIELD - 9001 STOCKDALE HIGHWAY - BAKERSFIELD, CA 93311	95-2643086	501(C)(3)	35,900.	0.			CHARITABLE
CALIFORNIA STATE UNIVERSITY, FRESNO - 5150 NORTH MAPLE AVENUE, JA64 - FRESNO, CA 93740	94-6003272	501(C)(3)	17,250.	0.			CHARITABLE
CALIFORNIA TROUT 360 PINE STREET 4TH FLOOR SAN FRANCISCO, CA 94609	23-7097680	501(C)(3)	52,895.	0.			CHARITABLE
CALIFORNIA VETERANS ASSISTANCE FOUNDATION, INC. - 2215 BUENA VISTA ST. #1 - BAKERSFIELD, CA 93304	30-0186044	501(C)(3)	27,500.	0.			CHARITABLE
CALIFORNIA WATERFOWL ASSOCIATION 1346 BLUE OAKS BLVD ROSEVILLE, CA 95678	94-1149574	501(C)(3)	10,000.	0.			CHARITABLE
CATHOLIC CHARITIES 825 CHESTER AVENUE BAKERSFIELD, CA 93301	94-1678938	501(C)(3)	14,000.	0.			CHARITABLE
CLIFFORD & BRADFORD ATHLETIC FOUNDATION - 1800 19TH ST - BAKERSFIELD, CA 93301-4315	26-3576493	501(C)(3)	9,000.	0.			CHARITABLE
COMMUNITY ACTION PARTNERSHIP OF KERN - 5005 BUSINESS PARK NORTH - BAKERSFIELD, CA 93309-1651	95-2402760	501(C)(3)	47,500.	0.			CHARITABLE
COMMUNITY FOUNDATION FOR MONTEREY COUNTY - 2354 GARDEN ROAD - MONTEREY, CA 93940	94-1615897	501(C)(3)	55,000.	0.			CHARITABLE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CSUB FOUNDATION 9001 STOCKDALE HIGHWAY BAKERSFIELD, CA 93311	95-2643086	501(C)(3)	30,100.	0.			CHARITABLE
EPILEPSY SOCIETY OF KERN COUNTY 5117 OFFICE PARK DRIVE BAKERSFIELD, CA 93309-0658	95-6006481	501(C)(3)	11,500.	0.			CHARITABLE
FAITH AND LEARNING INTERNATIONAL NFP - 209 E LIBERTY DR - WHEATON, IL 60187	20-0743864	501(C)(3)	86,745.	0.			CHARITABLE
FRIENDS OF MERCY FOUNDATION PO BOX 119 BAKERSFIELD, CA 93302	77-0201321	501(C)(3)	39,700.	0.			CHARITABLE
GARCES MEMORIAL HIGH SCHOOL FOUNDATION - 2800 LOMA LINDA DR - BAKERSFIELD, CA 93305	77-0220126	501(C)(3)	11,000.	0.			CHARITABLE
GARDEN PATHWAYS, INC. 1616 29TH STREET BAKERSFIELD, CA 93301	77-0442212	501(C)(3)	44,500.	0.			CHARITABLE
GOLDEN EMPIRE GLEANERS 1326 30TH STREET, UNIT A BAKERSFIELD, CA 93301	77-0084637	501(C)(3)	9,100.	0.			CHARITABLE
GREATER BAKERSFIELD VISION 2000 INC - PO BOX 1947 - BAKERSFIELD, CA 93303	77-0521204	501(C)(3)	7,000.	0.			CHARITABLE
HARTLAND CHRISTIAN CAMP 57611 ESHOM VALLEY DRIVE BADGER, CA 93603	94-1639159	501(C)(3)	25,000.	0.			CHARITABLE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HENRIETTA WEILL MEMORIAL CHILD GUIDANCE CLINIC - 3628 STOCKDALE HIGHWAY - BAKERSFIELD, CA 93309	95-1643391	501(C)(3)	20,825.	0.			CHARITABLE
HERITAGE BIBLE CHURCH 2401 BERNARD STREET BAKERSFIELD, CA 93306	95-2252180	501(C)(3)	125,000.	0.			CHARITABLE
HOFFMANN HOSPICE 4325 BUENA VISTA ROAD BAKERSFIELD, CA 93311	77-0386207	501(C)(3)	6,250.	0.			CHARITABLE
HOLY CROSS COLLEGE, INC. PO BOX 308 NOTRE DAME, IN 46556	35-1148835	501(C)(3)	10,000.	0.			CHARITABLE
HOPE CHARITY INTERNATIONAL 350 VINTON AVENUE POMONA, CA 91767	20-8886288	501(C)(3)	10,000.	0.			CHARITABLE
HUME LAKE CHRISTIAN CAMPS INC 5545 E HEDGES AVENUE FRESNO, CA 93727	94-1251111	501(C)(3)	50,000.	0.			CHARITABLE
JIM BURKE EDUCATION FOUNDATION P.O. BOX 316 BAKERSFIELD, CA 93302	77-0387337	501(C)(3)	8,500.	0.			CHARITABLE
KECK MEDICINE OF USC 1150 SOUTH OLIVE STREET, 25TH FLOOR LOS ANGELES, CA 90015	95-1642394	501(C)(3)	25,000.	0.			CHARITABLE
KERN COUNTY MUSEUM FOUNDATION 3801 CHESTER AVE BAKERSFIELD, CA 93301	77-0272697	501(C)(3)	17,100.	0.			CHARITABLE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KERN HIGH SCHOOL DISTRICT EDUCATIONAL FOUNDATION - 5801 SUNDALE AVENUE - BAKERSFIELD, CA 93309	77-0235452	501(C)(3)	26,000.	0.			CHARITABLE
KERN LITERACY COUNCIL 331 18TH STREET BAKERSFIELD, CA 93301-4928	23-7312722	501(C)(3)	35,000.	0.			CHARITABLE
KERN RIVER VALLEY FAMILY RESOURCE CENTER - 5109 LAKE ISABELLA - LAKE ISABELLA, CA 93240	95-6001766	501(C)(3)	10,000.	0.			CHARITABLE
LAURELGLEN BIBLE CHURCH 2801 ASHE ROAD BAKERSFIELD, CA 93309	95-3284978	501(C)(3)	10,000.	0.			CHARITABLE
LEGACY CHRISTIAN ACADEMY 5500 OLIVE DRIVE, BLDG 6 BAKERSFIELD, CA 93308	45-2901666	501(C)(3)	25,000.	0.			CHARITABLE
LINKS FOR LIFE 5301 OFFICE PARK DR., SUITE 370 BAKERSFIELD, CA 93309	93-1088003	501(C)(3)	17,000.	0.			CHARITABLE
MISSION AT KERN COUNTY PO BOX 2222 BAKERSFIELD, CA 93303-2222	95-1890705	501(C)(3)	30,981.	0.			CHARITABLE
MOUNTAIN COMMUNITIES FAMILY RESOURCE CENTER, INC - P.O. BOX 1902 - FRAZIER PARK, CA 93225	80-0719925	501(C)(3)	11,500.	0.			CHARITABLE
NAMI KERN COUNTY P.O. BOX 9144 BAKERSFIELD, CA 93389	77-0289372	501(C)(3)	10,000.	0.			CHARITABLE

Schedule I (Form 990)

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NORTH KERN CHRISTIAN SCHOOL 710 PETERS STREET WASCO, CA 93280	95-3159575	501(C)(3)	10,220.	0.			CHARITABLE
OUR LADY OF GUADALUPE PARISH SCHOOL - 609 E CALIFORNIA AVENUE - BAKERSFIELD, CA 93307	77-0320170	501(C)(3)	8,400.	0.			CHARITABLE
PLUMAS CORPORATION PO BOX 3880 QUINCY, CA 95971	68-0016418	501(C)(3)	34,287.	0.			CHARITABLE
RONALD MCDONALD HOUSE CHARITIES OF SOUTHERN CALIFORNIA - 420 34TH STREET - BAKERSFIELD, CA 93301	95-3167869	501(C)(3)	12,900.	0.			CHARITABLE
SAINT ELIZABETH ANN SETON CATHOLIC CHURCH - 12300 REINA ROAD - BAKERSFIELD, CA 93312	94-1294942	501(C)(3)	10,500.	0.			CHARITABLE
SAINT FRANCIS CHURCH 900 H STREET BAKERSFIELD, CA 93304	94-1294942	501(C)(3)	11,100.	0.			CHARITABLE
SALVATION ARMY 1854 FULTON STREET FRESNO, CA 93721	94-1156347	501(C)(3)	6,749.	0.			CHARITABLE
SALVATION ARMY 4417 WILSON ROAD BAKERSFIELD, CA 93309	13-2923701	501(C)(3)	11,000.	0.			CHARITABLE
SAN DIEGO STATE UNIVERSITY 5500 CAMPANILE DR. SAN DIEGO, CA 92182	95-6042721	501(C)(3)	5,500.	0.			CHARITABLE

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SANTA BARBARA POLICE FOUNDATION PO BOX 91929 SANTA BARBARA, CA 93190	27-2138540	501(C)(3)	61,500.	0.			CHARITABLE
SOUTHERN SIERRA COUNCIL BOY SCOUTS OF AMERICA - 2417 M STREET - BAKERSFIELD, CA 93301	95-1642363	501(C)(3)	18,500.	0.			CHARITABLE
ST. PHILIP THE APOSTLE CHURCH 7100 STOCKDALE HIGHWAY BAKERSFIELD, CA 93309	94-1294942	501(C)(3)	6,185.	0.			CHARITABLE
TAFT COLLEGE FOUNDATION 29 COUGAR CT. TAFT, CA 93268	43-2023035	501(C)(3)	6,500.	0.			CHARITABLE
THE MISSION AT KERN COUNTY 816 E. 21ST ST. BAKERSFIELD, CA 93305	95-1890705	501(C)(3)	20,000.	0.			CHARITABLE
THE PLANK FOUNDATION P.O. BOX 173 BAKERSFIELD, CA 93302	77-0114147	501(C)(3)	9,695.	0.			CHARITABLE
THE SALVATION ARMY RIDGECREST CORPS - PO BOX 189 - RIDGECREST, CA 93555	22-2406433	501(C)(3)	17,651.	0.			CHARITABLE
THE SALVATION ARMY, BAKERSFIELD CITADEL CORPS - 4417 WILSON RD - BAKERSFIELD, CA 93309	94-1156347	501(C)(3)	32,500.	0.			CHARITABLE
THE UNITED STATES CONFERENCE OF THE MENNONITE BRETHREN CHURCHES - PO BOX 20200 - WICHITA, KS 67208	48-0699199	501(C)(3)	7,500.	0.			CHARITABLE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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TRANSITIONAL YOUTH MOBILIZING FOR CHANGE (TYM4CHANGE) - PO BOX 9041 - BAKERSFIELD, CA 93389-9041	83-1857419	501(C)(3)	10,000.	0.			CHARITABLE
TRINITY ANGLICAN CHURCH 11300 CAMPUS PARK DRIVE BAKERSFIELD, CA 93311	46-2881977	501(C)(3)	10,000.	0.			CHARITABLE
UNITED WAY FRESNO AND MADERA COUNTIES - 4949 E. KINGS CANYON ROAD - FRESNO, CA 93727	94-1156514	501(C)(3)	50,000.	0.			CHARITABLE
UNITED WAY OF KERN COUNTY INC. 5405 STOCKDALE HWY., SUITE 200 BAKERSFIELD, CA 93309	95-2274560	501(C)(3)	7,500.	0.			CHARITABLE
UNITED WAY OF VENTURA COUNTY INC 702 COUNTY SQUARE DRIVE, SUITE 100 VENTURA, CA 93003	95-1945833	501(C)(3)	20,500.	0.			CHARITABLE
UNIVERSITY OF CALIFORNIA, BERKELEY 16 SPROUL HALL #1960 BERKELEY, CA 94720-1960	94-6002123	501(C)(3)	7,500.	0.			CHARITABLE
UNIVERSITY OF CALIFORNIA, DAVIS PO BOX 989062 WEST SACRAMENTO, CA 95798-9062	94-6036494	501(C)(3)	7,000.	0.			CHARITABLE
UNIVERSITY OF CALIFORNIA, LOS ANGELES - BOX 957089, 1125 MURPHY HALL - LOS ANGELES, CA 90095-7089	95-2250801	501(C)(3)	14,000.	0.			CHARITABLE
UNIVERSITY OF CALIFORNIA, SANTA BARBARA - FINANCIAL AID OFFICE - SANTA BARBARA, CA 93106-3180	95-6006145	501(C)(3)	9,750.	0.			CHARITABLE

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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VENTURA COUNTY COMMUNITY FOUNDATION - 4001 MISSION OAKS BLVD STE A - CAMARILLO, CA 93012	77-0165029	501(C)(3)	50,000.	0.			CHARITABLE
WOMAN'S CLUB OF BAKERSFIELD 2030 18TH STREET BAKERSFIELD, CA 93301	95-1385787	501(C)(3)	100,000.	0.			CHARITABLE
WOUNDED HEROES FUND 3121 STANDARD STREET BAKERSFIELD, CA 93308	80-0215850	501(C)(3)	30,500.	0.			CHARITABLE
YOUTH 2 LEADERS EDUCATION FOUNDATION - PO BOX 9051 - BAKERSFIELD, CA 93389	77-0398516	501(C)(3)	6,036.	0.			CHARITABLE
YOUTH UNLIMITED GOSPEL OUTREACH PO BOX 1355 CHULA VISTA, CA 91912-1355	95-6150002	501(C)(3)	9,000.	0.			CHARITABLE
AG ONE FOUNDATION 2910 E. BARSTOW AVE. MSOF115 FRESNO, CA 93740	94-2685442	501(C)(3)	5,000.	0.			CHARITABLE
BAKERSFIELD PREGNANCY CENTER 1801 21ST STREET, SUITE 1 BAKERSFIELD, CA 93301-1829	77-0024688	501(C)(3)	5,000.	0.			CHARITABLE
COLORADO SCHOOL OF MINES 1200 16TH STREET GOLDEN, CO 80401	84-0509064	501(C)(3)	5,000.	0.			CHARITABLE
SHAFTER HISTORICAL SOCIETY PO BOX 1088 SHAFTER, CA 93263	95-3445097	501(C)(3)	5,000.	0.			CHARITABLE

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KERN DANCE ALLIANCE PO BOX 12407 BAKERSFIELD, CA 93389	77-0437598	501(C)(3)	5,000.	0.			CHARITABLE
LEUKEMIA AND LYMPHOMA SOCIETY 1800 30TH STREET FOURTH FLOOR BAKERSFIELD, CA 93301	13-5644916	501(C)(3)	5,000.	0.			CHARITABLE
ROD'S HEART CHARITABLE FOUNDATION 43620 HIGHWAY 58 BUTTONWILLOW, CA 93206	81-1423552	501(C)(3)	5,000.	0.			CHARITABLE
THE VENTURA POLICE COMMUNITY FOUNDATION INC - PO BOX 3262 - VENTURA, CA 93006-3262	91-1823315	501(C)(3)	5,000.	0.			CHARITABLE
ST. FRANCIS PARISH SCHOOL 2516 PALM BAKERSFIELD, CA 93301	77-0100496	501(C)(3)	4,911.	0.			CHARITABLE
GARCES MEMORIAL HIGH SCHOOL 2800 LOMA LINDA DRIVE BAKERSFIELD, CA 93305	77-0220126	501(C)(3)	4,850.	0.			CHARITABLE
CRITTERS WITHOUT LITTERS 4300 STINE ROAD, SUITE 720 BAKERSFIELD, CA 93313	27-1606167	501(C)(3)	4,500.	0.			CHARITABLE
SAINT VINCENT DE PAUL 300 BAKER STREET BAKERSFIELD, CA 93305	95-1853364	501(C)(3)	4,450.	0.			CHARITABLE
CALIFORNIA STATE UNIVERSITY, CHANNEL ISLANDS - ONE UNIVERSITY DRIVE - CAMARILLO, CA 93012	77-0433230	501(C)(3)	4,250.	0.			CHARITABLE

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ALLIANCE AGAINST VIOLENCE 1921 19TH STREET BAKERSFIELD, CA 93301	95-3604240	501(C)(3)	4,200.	0.			CHARITABLE
HARVARD UNIVERSITY 953 SMITH CAMPUS CENTER HYDE PARK, MA 02138	04-2103580	501(C)(3)	4,000.	0.			CHARITABLE
MARE RIDING CENTER 18200 JOHNSON ROAD BAKERSFIELD, CA 93314	77-0297678	501(C)(3)	4,000.	0.			CHARITABLE
UNIVERSITY OF CALIFORNIA, SAN DIEGO - 9500 GILMAN DRIVE, MAIL CODE 0013 - LA JOLLA, CA 92093-0013	95-2872494	501(C)(3)	4,000.	0.			CHARITABLE
CHRISTIAN YOUTH FILM SOCIETY INC PO BOX 1474 BAKERSFIELD, CA 93302	46-2691974	501(C)(3)	3,500.	0.			CHARITABLE
IMPACT AUSTIN FOUNDATION PO BOX 28148 AUSTIN, TX 78755	56-2367666	501(C)(3)	3,500.	0.			CHARITABLE
TAFT UNION HIGH SCHOOL 701 WILDCAT WAY TAFT, CA 93268		501(C)(3)	3,500.	0.			CHARITABLE
WESTSIDE COMMUNITY COUNCIL 675 E. SANTA CLARA ST. #2690 VENTURA, CA 93002	31-1625191	501(C)(3)	3,500.	0.			CHARITABLE
CALIFORNIA STATE UNIVERSITY, LONG BEACH - 1250 BELLFLOWER BLVD - LONG BEACH, CA 90840	33-0579971	501(C)(3)	3,250.	0.			CHARITABLE

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UNIVERSITY OF CALIFORNIA, IRVINE 102 ALDRICH HALL IRVINE, CA 92697-2825	95-2226406	501(C)(3)	3,250.	0.			CHARITABLE
VANGUARD UNIVERSITY 55 FAIR DRIVE COSTA MESA, CA 92626	95-6002998	501(C)(3)	3,250.	0.			CHARITABLE
A DREAM SHARED 307 19TH STREET BAKERSFIELD, CA 93301	83-2211954	501(C)(3)	3,200.	0.			CHARITABLE
ARTS COUNCIL OF KERN 1330 TRUXTUN AVENUE, SUITE B BAKERSFIELD, CA 93301	95-3098602	501(C)(3)	3,000.	0.			CHARITABLE
BAKERSFIELD ROTARY WEST FOUNDATION PO BOX 9502 BAKERSFIELD, CA 93389	77-0371695	501(C)(3)	3,000.	0.			CHARITABLE
CALIFORNIA TAX FOUNDATION INC 1215 K ST. STE1250 SACRAMENTO, CA 95814-3945	94-2679673	501(C)(3)	3,000.	0.			CHARITABLE
SAINT ANDREWS ABBEY PO BOX 40 VALYERMO, CA 93563-0040	95-1904411	501(C)(3)	3,000.	0.			CHARITABLE
TAFT CITY SCHOOL DISTRICT 820 6TH STREET TAFT, CA 93268		501(C)(3)	2,807.	0.			CHARITABLE
MARLEY'S MUTTS DOG RESCUE 1121 WEST VALLEY BLVD. TEHACHAPI, CA 93561	30-0636031	501(C)(3)	2,506.	0.			CHARITABLE

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BOYS & GIRLS CLUB OF TULARE COUNTY 215 W. TULARE AVE. VISALIA, CA 93277	77-0469369	501(C)(3)	2,500.	0.			CHARITABLE
BOYS & GIRLS CLUBS OF FRESNO COUNTY - 540 N. AUGUSTA - FRESNO, CA 93701	94-1149171	501(C)(3)	2,500.	0.			CHARITABLE
CLINICA SIERRA VISTA 1509 E. 11TH STREET BAKERSFIELD, CA 93307	95-2707101	501(C)(3)	2,500.	0.			CHARITABLE
CLINICA SIERRA VISTA 1430 TRUXTUN AVENUE, SUITE 400 BAKERSFIELD, CA 93301	95-2707101	501(C)(3)	2,500.	0.			CHARITABLE
GIRL SCOUTS OF CENTRAL CALIFORNIA SOUTH - 1831 BRUNDAGE LANE - BAKERSFIELD, CA 93304	94-6000662	501(C)(3)	2,500.	0.			CHARITABLE
KERN COUNTY LULAC PO BOX 21173 BAKERSFIELD, CA 93390	82-4142867	501(C)(3)	2,500.	0.			CHARITABLE
KERN COUNTY TAXPAYERS EDUCATION FUND INC. - 1401 19TH STREET, SUITE 200 - BAKERSFIELD, CA 93301	26-3021614	501(C)(3)	2,500.	0.			CHARITABLE
MIGHTY RIVER / FAITH FAMILY CHURCH 10008 ROEHAMPTON AVE BAKERSFIELD, CA 93312	27-3122628	501(C)(3)	2,500.	0.			CHARITABLE
NORWICH UNIVERSITY 158 HARMON DR NORTHFIELD, VT 05663	03-0179424	501(C)(3)	2,500.	0.			CHARITABLE

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OMNI FAMILY HEALTH 4900 CALIFORNIA AVENUE BAKERSFIELD, CA 93307	95-3218000	501(C)(3)	2,500.	0.			CHARITABLE
RIVER VALLEY CHURCH OF TULARE 554 S. BLACKSTONE STREET TULARE, CA 93274	77-0380410	501(C)(3)	2,500.	0.			CHARITABLE
TEXAS A&M UNIVERSITY PO BOX 30016 COLLEGE STATION, TX 77842-3016	74-6000531	501(C)(3)	2,500.	0.			CHARITABLE
THE LIGHTHOUSE RESCUE MISSION 111 W KERN AVE TULARE, CA 93274	03-0551530	501(C)(3)	2,500.	0.			CHARITABLE
UNITED WAY OF TULARE COUNTY 1601 E PROSPERITY TULARE, CA 93274	94-6100424	501(C)(3)	2,500.	0.			CHARITABLE
VALLEY CENTER FOR THE BLIND 1707 EYE STREET BAKERSFIELD, CA 93301	94-2255626	501(C)(3)	2,500.	0.			CHARITABLE
VENTURA COMMERCE AND EDUCATION FOUNDATION - 505 POLI ST - VENTURA, CA 93001-4964	20-0391438	501(C)(3)	2,500.	0.			CHARITABLE
VISALIA EMERGENCY AID COUNCIL 217 N. E. 3RD AVE. VISALIA, CA 93291	94-1294955	501(C)(3)	2,500.	0.			CHARITABLE
VISALIA GLEANING SENIORS PO BOX 3835 VISALIA, CA 93278	77-0282603	501(C)(3)	2,500.	0.			CHARITABLE

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VISALIA RESCUE MISSION 741 N. SANTA FE STREET VISALIA, CA 93291	94-2902666	501(C)(3)	2,500.	0.			CHARITABLE
YOUTH FOR CHRIST OF KERN COUNTY PO BOX 763 BAKERSFIELD, CA 93302	95-2597393	501(C)(3)	2,500.	0.			CHARITABLE
BAKERSFIELD SPCA 3000 GIBSON STREET BAKERSFIELD, CA 93308-6110	95-2141790	501(C)(3)	2,350.	0.			CHARITABLE
GARDEN COMMUNITY CHURCH 2010 O ST BAKERSFIELD, CA 93301-4725	23-7310723	501(C)(3)	2,150.	0.			CHARITABLE
KERN COUNTY MUSIC EDUCATORS ASSOCIATION - 3004 KENNEDY WAY - BAKERSFIELD, CA 93309	95-2567265	501(C)(3)	2,078.	0.			CHARITABLE
AUSTIN COMMUNITY FOUNDATION 4315 GUADALUPE ST. SUITE 300 AUSTIN, TX 78751	74-1934031	501(C)(3)	2,000.	0.			CHARITABLE
BUENA VISTA MUSEUM OF NATURAL HISTORY INC. - 2018 CHESTER AVENUE - BAKERSFIELD, CA 93301	77-0401050	501(C)(3)	2,000.	0.			CHARITABLE
CALIFORNIA LUTHERAN UNIVERSITY 60 W. OLSEN RD #1375 THOUSAND OAKS, CA 91360	95-2962604	501(C)(3)	2,000.	0.			CHARITABLE
CALIFORNIA POLYTECHNIC STATE UNIVERSITY, POMONA - 3801 WEST TEMPLE AVENUE - POMONA, CA 91768	20-4927897	501(C)(3)	2,000.	0.			CHARITABLE

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CITYSERVE NETWORK 7001 AUBURN STREET BAKERSFIELD, CA 93306	47-3888466	501(C)(3)	2,000.	0.			CHARITABLE
DORDT UNIVERSITY 700 &TH STREET NE SIOUX CENTER, IA 51250		501(C)(3)	2,000.	0.			CHARITABLE
DRESS FOR SUCCESS BAKERSFIELD 1416 17TH STREET BAKERSFIELD, CA 93301	90-0846187	501(C)(3)	2,000.	0.			CHARITABLE
HONOR FLIGHT KERN COUNTY 8200 STOCKDALE HWY, SUITE M-10 BAKERSFIELD, CA 93311	45-4520992	501(C)(3)	2,000.	0.			CHARITABLE
HORATIO ALGER ASSOCIATION OF DISTINGUISHED AMERICANS INC - 99 CANAL CENTER PLAZA, SUITE 320 - ALEXANDRIA, VA 22314	13-1669975	501(C)(3)	2,000.	0.			CHARITABLE
MADOROM FOUNDATION 4200 TRUXTUN AVE STE 300 BAKERSFIELD, CA 93309	46-4477884	501(C)(3)	2,000.	0.			CHARITABLE
MAKE A WISH FOUNDATION 5330 OFFICE CENTER COURT, STE 62 BAKERSFIELD, CA 93309	77-0116530	501(C)(3)	2,000.	0.			CHARITABLE
UNIVERSITY OF CALIFORNIA, RIVERSIDE - 900 UNIVERSITY AVENUE - RIVERSIDE, CA 92521	95-6006142	501(C)(3)	2,000.	0.			CHARITABLE
CHRISTAR INTERNATIONAL 1500 INTERNATIONAL PKWY, SUITE 300 RICHARDSON, TX 75081	27-4567638	501(C)(3)	1,800.	0.			CHARITABLE

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NORTHMINSTER PRESBYTERIAN CHURCH 3700 UNION AVENUE BAKERSFIELD, CA 93305	95-2473446	501(C)(3)	1,750.	0.			CHARITABLE
SPECIAL OLYMPICS SOUTHERN CALIFORNIA - P.O. BOX 2544 - BAKERSFIELD, CA 93303	95-4538450	501(C)(3)	1,700.	0.			CHARITABLE
TRINITY UNITED METHODIST CHURCH 724 NILES STREET BAKERSFIELD, CA 93305		501(C)(3)	1,660.	0.			CHARITABLE
COURT APPOINTED SPECIAL ADVOCATES OF KERN COUNTY (CASA) - 1717 COLUMBUS STREET - BAKERSFIELD, CA 93305	77-0344298	501(C)(3)	1,600.	0.			CHARITABLE
TRINITY MEDICAL TRANSPORT FOUNDATION - 9415 MEACHAM ROAD - BAKERSFIELD, CA 93312	83-3520116	501(C)(3)	1,525.	0.			CHARITABLE
ADVANCED CENTER FOR EYECARE 1721 WESTWIND DRIVE, SUITE B BAKERSFIELD, CA 93301	27-3257780	501(C)(3)	1,500.	0.			CHARITABLE
ALL SEATED IN A BARN 13116 AMANDA COURT BAKERSFIELD, CA 93314	82-5455179	501(C)(3)	1,500.	0.			CHARITABLE
BAKERSFIELD PREGNANCY CENTER 1801 18TH STREET BAKERSFIELD, CA 93301	77-0024688	501(C)(3)	1,500.	0.			CHARITABLE
CALIFORNIA STATE UNIVERSITY, CHICO 400 WEST FIRST STREET, SSC 250 CHICO, CA 95929-0705	95-1230865	501(C)(3)	1,500.	0.			CHARITABLE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COALINGA POLICE K9 FOUNDATION INC 305 STANFORD AVE COALINGA, CA 93210	84-3819868	501(C)(3)	1,500.	0.			CHARITABLE
DESERT AREA RESOURCES AND TRAINING 201 E. RIDGECREST BLVD. RIDGECREST, CA 93555	95-2866228	501(C)(3)	1,500.	0.			CHARITABLE
FARMWORKER INSTITUTE OF EDUCATION AND LEADERSHIP DEVELOPMENT - 122 E. TEHACHAPI BLVD - TEHACHAPI, CA 93561	95-3276531	501(C)(3)	1,500.	0.			CHARITABLE
GLOBAL FAMILY CARE NETWORK PO BOX 13160 BAKERSFIELD, CA 93389	20-8346599	501(C)(3)	1,500.	0.			CHARITABLE
INDEPENDENCE THROUGH GRACE 1830 TRUXTUN AVENUE, SUITE 101 BAKERSFIELD, CA 93301	45-5228488	501(C)(3)	1,500.	0.			CHARITABLE
KERN COUNTY AUTISM CENTER 14150 SUNSET BLVD ARVIN, CA 93203	77-0024425	501(C)(3)	1,500.	0.			CHARITABLE
KERN RIVER VALLEY HISTORICAL SOCIETY - PO BOX 651 - KERNVILLE, CA 93238	95-3702689	501(C)(3)	1,500.	0.			CHARITABLE
LEAGUE OF DREAMS, INC. 7737 MEANY AVE STE B5 BAKERSFIELD, CA 93308	20-2495631	501(C)(3)	1,500.	0.			CHARITABLE
MOTHERS AGAINST DRUNK DRIVING, KERN COUNTY - PO BOX 5102 - BAKERSFIELD, CA 93388	94-2707273	501(C)(3)	1,500.	0.			CHARITABLE

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NEW ARISING DESTINY CENTER (NADC) 4620 NEW HORIZON BLVD. BAKERSFIELD, CA 93313	20-8212736	501(C)(3)	1,500.	0.			CHARITABLE
PREGNANCY RESOURCE CENTER OF THE KERN RIVER VALLEY - PO BOX 3015 - LAKE ISABELLA, CA 93240	27-1151228	501(C)(3)	1,500.	0.			CHARITABLE
PROJECT CLEAN AIR 4949 BUCKLEY WAY, #206 BAKERSFIELD, CA 93309	33-0472571	501(C)(3)	1,500.	0.			CHARITABLE
RONALD MCDONALD HOUSE CHARITIES OF SOUTHERN CALIFORNIA - 4560 FOUNTAIN AVENUE - LOS ANGELES, CA 90029	95-3167869	501(C)(3)	1,500.	0.			CHARITABLE
THE DAVID MARCUS THUMBS UP SCHOLARSHIP FOUNDATION - 8207 MAPLE GROVE LANE - BAKERSFIELD, CA 93312	84-3087271	501(C)(3)	1,500.	0.			CHARITABLE
THE SALVATION ARMY BAKERSFIELD ADULT REHABILITATION CENTER - 200 NINETEENTH STREET - BAKERSFIELD, CA 93301-4904	94-1156347	501(C)(3)	1,500.	0.			CHARITABLE
VOLUNTEER CENTER OF KERN COUNTY INC. - 1311 EYE STREET - BAKERSFIELD, CA 93301	95-2676423	501(C)(3)	1,500.	0.			CHARITABLE
Y-EMPOWERMENT INC 1707 EYE STREET SUITE 111 BAKERSFIELD, CA 93311	45-4187732	501(C)(3)	1,500.	0.			CHARITABLE
YOUTH 2 LEADERS EDUCATION FOUNDATION - 1701 WESTWIND DR. STE 116 - BAKERSFIELD, CA 93301	77-0398516	501(C)(3)	1,500.	0.			CHARITABLE

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BAKERSFIELD CITY SCHOOL DISTRICT 1300 BAKER STREET BAKERSFIELD, CA 93305		501(C)(3)	1,450.	0.			CHARITABLE
PUBLIC SAFETY PROFESSIONALS RETREAT - 2204 TRUXTUN AVE - BAKERSFIELD, CA 93301	84-2757973	501(C)(3)	1,328.	0.			CHARITABLE
UNIVERSITY OF CALIFORNIA, MERCED 5200 N. LAKE ROAD MERCED, CA 95343	94-3250114	501(C)(3)	1,250.	0.			CHARITABLE
COUNTRY OAKS BAPTIST CHURCH 20915 SCHOUT ROAD TEHACHAPI, CA 93561		501(C)(3)	1,211.	0.			CHARITABLE
CHRISTIAN MISSIONS IN MANY LANDS PO BOX 13 SPRING LAKE, NJ 07762-0013	13-2688413	501(C)(3)	1,200.	0.			CHARITABLE
DYNAMIC CHURCH PLANTING INTERNATIONAL - PO BOX 4119 - OCEANSIDE, CA 92052	33-0647375	501(C)(3)	1,200.	0.			CHARITABLE
INTERNATIONAL TEAMS 2155 POINT BLVD STE 200 ELGIN, IL 60123	36-6069820	501(C)(3)	1,200.	0.			CHARITABLE
SHRINERS HOSPITAL FOR CHILDREN - LOS ANGELES - 909 S. FAIR OAKS AVENUE - PASADENA, CA 91105	36-2193608	501(C)(3)	1,163.	0.			CHARITABLE
BC ARCHIVES ASSOCIATION 1801 PANORAMA DRIVE BAKERSFIELD, CA 93305	51-0151490	501(C)(3)	1,150.	0.			CHARITABLE

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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SAN ARDO UNION ELEMENTARY SCHOOL DISTRICT - 62428 CENTER STREET - SAN ARDO, CA 93450	77-0244451	501(C)(3)	1,092.	0.			CHARITABLE
ADAMS STATE UNIVERSITY 208 EDMONT BLVD ALAMOSA, CO 81101	84-6027518	501(C)(3)	1,000.	0.			CHARITABLE
AMP MINISTRIES, DBA - HANDS IN THE COMMUNITY - 4146 SOUTH DEMAREE STREET - VISALIA, CA 93277	20-8356647	501(C)(3)	1,000.	0.			CHARITABLE
BAKERSFIELD PLAY CENTER 1620 KENTUCKY ST BAKERSFIELD, CA 93305	95-1738185	501(C)(3)	1,000.	0.			CHARITABLE
BE FINALLY FREE PO BOX 11851 BAKERSFIELD, CA 93389	27-2564485	501(C)(3)	1,000.	0.			CHARITABLE
BRIDGE FOR HOPE 21750 WOODFORD TEHACHAPI ROAD TEHACHAPI, CA 93561	82-2657392	501(C)(3)	1,000.	0.			CHARITABLE
CALIFORNIA STATE UNIVERSITY, FULLERTON - PO BOX 6808 - FULLERTON, CA 92834-6808	95-6006691	501(C)(3)	1,000.	0.			CHARITABLE
CALIFORNIA STATE UNIVERSITY, NORTHRIDGE - 18111 NORDHOFF STREET - NORTHRIDGE, CA 91330-8207	95-6196006	501(C)(3)	1,000.	0.			CHARITABLE
CALIFORNIA STATE UNIVERSITY, SACRAMENTO - 6000 J STREET, MS 6052 - SACRAMENTO, CA 95819	94-1347023	501(C)(3)	1,000.	0.			CHARITABLE

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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DAT KREW 2901 VIRGINIA AVENUE BAKERSFIELD, CA 93307	81-4994614	501(C)(3)	1,000.	0.			CHARITABLE
FEEDING AMERICA 161 NORTH CLARK ST. STE 700 CHICAGO, IL 60601	36-3673599	501(C)(3)	1,000.	0.			CHARITABLE
FIRST GRADUATE 2973 16TH ST, SUITE 400 SAN FRANCISCO, CA 94103	94-3381171	501(C)(3)	1,000.	0.			CHARITABLE
GOLDEN EMPIRE YOUTH TACKLE FOOTBALL & CHEER - 5650 DISTRICT BLVD. - BAKERSFIELD, CA 93313	11-3665191	501(C)(3)	1,000.	0.			CHARITABLE
GRAND CANYON UNIVERSITY 3300 WEST CAMELBACK ROAD PHOENIX, AZ 85017	90-0615620	501(C)(3)	1,000.	0.			CHARITABLE
HABITAT FOR HUMANITY OF TULARE/KINGS COUNTIES - PO BOX 848 - VISALIA, CA 93279	77-0369291	501(C)(3)	1,000.	0.			CHARITABLE
HAPPY TRAILS RIDING ACADEMY PO BOX 572 VISALIA, CA 93279	94-2882855	501(C)(3)	1,000.	0.			CHARITABLE
INFLUENCERS BAKERSFIELD PO BOX 22811 BAKERSFIELD, CA 93390	20-1174631	501(C)(3)	1,000.	0.			CHARITABLE
JUVENILE DIABETES RESEARCH FOUNDATION - 1522 18TH STREET, STE 206 - BAKERSFIELD, CA 93301	23-1907729	501(C)(3)	1,000.	0.			CHARITABLE

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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

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JUVENTUD ENRIQUECIMIENTO MUSICA Y ARTES FOUNDATION - POST OFFICE BOX 845 - VISALIA, CA 93292	84-3053070	501(C)(3)	1,000.	0.			CHARITABLE
KERN ATHLETIC FENCING FOUNDATION 10717 LOUGHTON AVE BAKERSFIELD, CA 93311	45-3586412	501(C)(3)	1,000.	0.			CHARITABLE
KERN COUNTY WRESTLING ASSOCIATION 706 CARROLL WAY TEHACHAPI, CA 93561	47-4849720	501(C)(3)	1,000.	0.			CHARITABLE
KERN PARTNERSHIP FOR CHILDREN AND FAMILIES - 100 E. CALIFORNIA AVENUE - BAKERSFIELD, CA 93307	20-5536572	501(C)(3)	1,000.	0.			CHARITABLE
KERN VALLEY HOSPITAL FOUNDATION PO BOX 1628 LAKE ISABELLA, CA 93240	33-0176789	501(C)(3)	1,000.	0.			CHARITABLE
MT SAN JACINTO COLLEGE 1499 N STATE ST SAN JACINTO, CA 92583-2325	95-3871238	501(C)(3)	1,000.	0.			CHARITABLE
MY FUNSPORTS 11606 TRAVISO AVE BAKERSFIELD, CA 93312	20-3159463	501(C)(3)	1,000.	0.			CHARITABLE
ONE SPADE YOUTH PACKERS 9765 SIERRA WAY KERNVILLE, CA 93238	23-7408807	501(C)(3)	1,000.	0.			CHARITABLE
PARENT INSTITUTE FOR QUALITY EDUCATION - 22 WEST 35TH STREET, SUITE 201 - NATIONAL CITY, CA 91950	33-0259359	501(C)(3)	1,000.	0.			CHARITABLE

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PORTERVILLE HIGH SCHOOL 465 WEST OLIVE AVENUE PORTERVILLE, CA 93257		501(C)(3)	1,000.	0.			CHARITABLE
PURDUE UNIVERSITY NORTHWEST 2200 - 169TH STREET HAMMOND, IN 46323	35-6002041	501(C)(3)	1,000.	0.			CHARITABLE
ROOTS CHRISTIAN FELLOWSHIP PO BOX 2506 TEHACHAPI, CA 93581	36-4779201	501(C)(3)	1,000.	0.			CHARITABLE
SAN JOSE STATE UNIVERSITY ALUMNI ASSOCIATION - ONE WASHINGTON SQUARE - SAN JOSE, CA 95192-0126	94-1166423	501(C)(3)	1,000.	0.			CHARITABLE
STRENGTH OF SHADOW DOG RESCUE, INC. - PO BOX 97 - BODFISH, CA 93205	82-5240973	501(C)(3)	1,000.	0.			CHARITABLE
TAFT COLLEGE 29 COUGAR COURT TAFT, CA 93268	43-2023035	501(C)(3)	1,000.	0.			CHARITABLE
TREE FOUNDATION OF KERN PO BOX 2871 BAKERSFIELD, CA 93303	77-0359397	501(C)(3)	1,000.	0.			CHARITABLE
TULARE COUNTY CHILD ABUSE PREVENTION COUNCIL - PO BOX 1062 - VISALIA, CA 93279	94-2848581	501(C)(3)	1,000.	0.			CHARITABLE
UNITED STATES MILITARY ACADEMY 626 SWIFT ROAD WEST POINT, NY 10996		501(C)(3)	1,000.	0.			CHARITABLE

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UNIVERSITY OF THE PACIFIC 3601 PACIFIC AVENUE STOCKTON, CA 95211	94-1156266	501(C)(3)	1,000.	0.			CHARITABLE
SAN LUCAS UNION ELEMENTARY SCHOOL DISTRICT - 53675 SAN BENITO STREET - SAN LUCAS, CA 93954	77-0320725	501(C)(3)	993.	0.			CHARITABLE
DALLAS THEOLOGICAL SEMINARY PO BOX 734215 DALLAS, TX 75373	75-0827421	501(C)(3)	900.	0.			CHARITABLE
UNIVERSITY OF LA VERNE 1950 THIRD STREET LA VERNE, CA 91750	95-1644026	501(C)(3)	812.	0.			CHARITABLE
ADVENTIST HEALTH TEHACHAPI VALLEY FOUNDATION - 115 WEST E STREE - TEHACHAPI, CA 93561	81-2240617	501(C)(3)	800.	0.			CHARITABLE
CASA ESPERANZA TRANSITIONAL HOME FOR WOMEN - 5501 STOCKDALE HWY UNIT 13104 - BAKERSFIELD, CA 93389	47-4019231	501(C)(3)	750.	0.			CHARITABLE
MARICOPA UNIFIED SCHOOL DISTRICT 955 STANISLAUS STREET MARICOPA, CA 93252		501(C)(3)	750.	0.			CHARITABLE
SAN JOSE STATE UNIVERSITY ONE WASHINGTON SQUARE SAN JOSE, CA 95192	94-6017638	501(C)(3)	750.	0.			CHARITABLE
OUR LADY OF PERPETUAL HELP SCHOOL 124 COLUMBUS STREET BAKERSFIELD, CA 93305	77-0320170	501(C)(3)	650.	0.			CHARITABLE

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AMERICAN RED CROSS - CENTRAL VALLEY REGION - PO BOX 37839 - BOONE, IA 50037-0839	53-0196605	501(C)(3)	500.	0.			CHARITABLE
ARVIN HIGH SCHOOL 900 VARSITY AVENUE ARVIN, CA 93203	77-0235452	501(C)(3)	500.	0.			CHARITABLE
BAKERSFIELD IVY LEGACY FOUNDATION PO BOX 12556 BAKERSFIELD, CA 93389-2556	47-4040857	501(C)(3)	500.	0.			CHARITABLE
BRIDGEHOPE P.O. BOX 1214 LITTLETON, CO 80160	82-3008372	501(C)(3)	500.	0.			CHARITABLE
CONGREGATIONAL BIBLE CHURCH OF SHAFTER - 430 EAST TULARE AVENUE - SHAFTER, CA 93263	36-6073463	501(C)(3)	500.	0.			CHARITABLE
DHARMA DRUM MOUNTAIN 4530 N. PECK RD EL MONTE, CA 91732	20-1814470	501(C)(3)	500.	0.			CHARITABLE
EAST TEXAS BAPTIST UNIVERSITY 1 TIGER DR MARSHALL, TX 75670-1412	75-0859801	501(C)(3)	500.	0.			CHARITABLE
FARMER VETERAN COALITION 4614 2ND STREET, SUITE 4 DAVIS, CA 95618	46-2362098	501(C)(3)	500.	0.			CHARITABLE
FIRST BAPTIST CHURCH ROCKWALL 610 SOUTH GOLIAD ROCKWALL, TX 75087		501(C)(3)	500.	0.			CHARITABLE

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FIRST PRESBYTERIAN CHURCH 1705 17TH STREET BAKERSFIELD, CA 93301	48-2604686	501(C)(3)	500.	0.			CHARITABLE
FOOD FOR THE POOR 6401 LYONS ROAD COCONUT CREEK, FL 33073	59-2174510	501(C)(3)	500.	0.			CHARITABLE
FOX THEATER FOUNDATION 2001 H STREET BAKERSFIELD, CA 93301	77-0306813	501(C)(3)	500.	0.			CHARITABLE
GREENFIELD UNION SCHOOL DISTRICT 1624 FAIRVIEW ROAD BAKERSFIELD, CA 93307	95-6001513	501(C)(3)	500.	0.			CHARITABLE
KERN RIVER PARKWAY FOUNDATION PO BOX 1602 BAKERSFIELD, CA 93302-1602	95-3842364	501(C)(3)	500.	0.			CHARITABLE
LOVE AND RESPECT MINISTRIES INC 606 E DIVISION STE C ROCKFORD, MI 49341	38-3555199	501(C)(3)	500.	0.			CHARITABLE
MAIN STREET TEHACHAPI INC PO BOX 830 TEHACHAPI, CA 93581	77-0518212	501(C)(3)	500.	0.			CHARITABLE
MENDIBURU MAGIC FOUNDATION PO BOX 20687 BAKERSFIELD, CA 93390	31-1742956	501(C)(3)	500.	0.			CHARITABLE
NORTH OF THE RIVER RECREATION FOUNDATION - 3825 RIVERLAKES DR - BAKERSFIELD, CA 93312	77-0331098	501(C)(3)	500.	0.			CHARITABLE

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OUTSTANDING FARMERS OF AMERICA 14970 WEST BUICH ROAD PEARL CITY, IL 61062	36-4175572	501(C)(3)	500.	0.			CHARITABLE
PORTRAIT OF A WARRIOR GALLERY KERN COUNTY - 7817 DAVIN PARK DR - BAKERSFIELD, CA 93308	83-2192550	501(C)(3)	500.	0.			CHARITABLE
SAINT JOHN VIANNEY ACADEMY 512 JAMAICA WAY BAKERSFIELD, CA 93309	82-0661250	501(C)(3)	500.	0.			CHARITABLE
SPOTLIGHT THEATRE 1626 19TH STREET, SUITE 23 BAKERSFIELD, CA 93301	77-0543866	501(C)(3)	500.	0.			CHARITABLE
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38105	62-0646012	501(C)(3)	500.	0.			CHARITABLE
TEJON RANCH CONSERVANCY PO BOX 216 FRAZIER PARK, CA 93225	26-2839563	501(C)(3)	500.	0.			CHARITABLE
UC DAVIS FOUNDATION ONE SHIELDS AVENUE DAVIS, CA 95616	94-6081352	501(C)(3)	500.	0.			CHARITABLE
UNION COLLEGE 807 UNION STREET SCHENECTADY, NY 12308	14-1338580	501(C)(3)	500.	0.			CHARITABLE
UNITED WAY OF SANTA BARBARA COUNTY INC. - 320 E GUTIERREZ ST - SANTA BARBARA, CA 93101	95-1641968	501(C)(3)	500.	0.			CHARITABLE

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KERN HIGH SCHOOL DISTRICT 5801 SUNDALE AVENUE BAKERSFIELD, CA 93309	95-6001764	501(C)(3)	482.	0.			CHARITABLE
UNBOUND PO BOX 219114 KANSAS CITY, MO 64121	43-1243999	501(C)(3)	480.	0.			CHARITABLE
ROSEDALE UNION SCHOOL DISTRICT 2553 OLD FARM ROAD BAKERSFIELD, CA 93312		501(C)(3)	412.	0.			CHARITABLE
KERN COUNTY LIBRARY FOUNDATION 701 TRUXTUN AVENUE BAKERSFIELD, CA 93301-4816	95-4040808	501(C)(3)	352.	0.			CHARITABLE
CATHOLIC ANSWERS, INC. 2020 GILLESPIE WAY EL CAJON, CA 92020	95-3754404	501(C)(3)	275.	0.			CHARITABLE
IMMACULATE HEART MEDIA, INC. (DBA RELEVANT RADIO) - PO BOX 10707 - GREEN BAY, WI 54307	39-2003067	501(C)(3)	275.	0.			CHARITABLE
ASSISTANCE LEAGUE BAKERSFIELD PO BOX 2286 BAKERSFIELD, CA 93303-2286	95-3502393	501(C)(3)	250.	0.			CHARITABLE
BRISTOL HOSPICE FOUNDATION OF CALIFORNIA - 1227 CHESTER AVE - BAKERSFIELD, CA 93301	95-3334909	501(C)(3)	250.	0.			CHARITABLE
HAGGAI INSTITUTE FOR ADVANCED LEADERSHIP TRAINING, INC. - 4725 PEACHTREE CORNERS CIRCLE, SUITE 200 - NORCROSS, GA 30092-2553	58-0898309	501(C)(3)	250.	0.			CHARITABLE

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KERN COMMUNITY TENNIS ASSOCIATION PO BOX 11915 BAKERSFIELD, CA 93389	95-2418773	501(C)(3)	250.	0.			CHARITABLE
UNIVERSITY HOSPITALS HEALTH SYSTEM, INC. - 11100 EUCLID AVENUE - CLEVELAND, OH 44109	34-0714775	501(C)(3)	250.	0.			CHARITABLE
WEST HIGH SCHOOL 1200 NEW STINE BAKERSFIELD, CA 93309		501(C)(3)	250.	0.			CHARITABLE
PANAMA BUENA VISTA UNION SCHOOL DISTRICT - 4200 ASHE ROAD - BAKERSFIELD, CA 93313		501(C)(3)	246.	0.			CHARITABLE
EMERGE CENTER AGAINST DOMESTIC ABUSE - 2545 E ADAMS STREET - TUCSON, AZ 85716	86-0312162	501(C)(3)	225.	0.			CHARITABLE
AMERICAN LUNG ASSOCIATION IN CALIFORNIA - 2020 CAMINO DEL RIO SUITE 200 - SAN DIEGO, CA 92108	13-1632524	501(C)(3)	200.	0.			CHARITABLE
GRIMM FAMILY EDUCATION FOUNDATION 11001 RIVER RUN BLVD SUITE 101 BAKERSFIELD, CA 93311	27-3194151	501(C)(3)	200.	0.			CHARITABLE
ST. ANTHONY RETREAT CENTER PO BOX 249 THREE RIVERS, CA 93271	94-1294942	501(C)(3)	200.	0.			CHARITABLE
THE NORBERTINE CANONESSES OF THE BETHLEHEM PRIORY OF ST. JOSEPH - 17831 WATER CANYON ROAD - TEHACHAPI, CA 93561	46-1244943	501(C)(3)	200.	0.			CHARITABLE

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BEARDSLEY SCHOOL COMMUNITY FOUNDATION INC - 1001 ROBERTS LN - BAKERSFIELD, CA 93308-4503	77-0098591	501(C)(3)	150.	0.			CHARITABLE
DYNAMIC CATHOLIC INSTITUTE 5081 OLYMPIC BLVD ERLANGER, KY 41018	26-4549213	501(C)(3)	110.	0.			CHARITABLE
AMERICAN CANCER SOCIETY 1831 TRUXTUN AVENUE, SUITE 150 BAKERSFIELD, CA 93301	13-1788491	501(C)(3)	100.	0.			CHARITABLE
BAKERSFIELD ASSOCIATION OF REALTORS CHARITABLE FOUNDATION INC - 2300 BAHAMAS DRIVE - BAKERSFIELD, CA 93309	47-3299859	501(C)(3)	100.	0.			CHARITABLE
BAKERSFIELD MASTER CHORALE PO BOX 1814 BAKERSFIELD, CA 93303	46-3026444	501(C)(3)	100.	0.			CHARITABLE
KERN COUNTY SPECIAL OLYMPICS 1800 OAK ST. STE B BAKERSFIELD, CA 93301	52-0889518	501(C)(3)	100.	0.			CHARITABLE
MORNING STAR FRESH FOOD MINISTRY 901 SACRAMENTO STREET BAKERSFIELD, CA 93305	46-1231061	501(C)(3)	100.	0.			CHARITABLE
TRISOMY 18 FOUNDATION PO BOX 320 FLUSHING, MI 48433	77-0600393	501(C)(3)	100.	0.			CHARITABLE
VALLEY PUBLIC RADIO 2589 ALLUVIAL CLOVIS, CA 93611	94-2297746	501(C)(3)	75.	0.			CHARITABLE

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(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, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAKERSFIELD JAZZ WORKSHOP 7304 ALAMOSA LN BAKERSFIELD, CA 93309	26-0558381	501(C)(3)	50.	0.			CHARITABLE
CATHOLIC LEAGUE FOR RELIGIOUS AND CIVIL RIGHTS - 450 7TH AVENUE 34TH FLR - NEW YORK, NY 10123	23-7279981	501(C)(3)	50.	0.			CHARITABLE
THE CATHOLIC FOUNDATION OF NORTHERN COLORADO - 6160 S. SYRACUSE WAY, SUITE 211 - GREENWOOD VILLAGE, CO 80111	84-1481641	501(C)(3)	50.	0.			CHARITABLE
SHAR-ON CORPORATION 508 WOODROW ST. TAFT, CA 93268	47-2375097	501(C)(3)	40.	0.			CHARITABLE
DUCKS UNLIMITED INC. 200 W. WILLMOTT AVENUE LOS BANOS, CA 93635	13-5643799	501(C)(3)	35.	0.			CHARITABLE
PARKINSON'S FOUNDATION INC 200 SE 1ST STREET SUITE 800 MIAMI, FL 33131	13-1866796	501(C)(3)	500.	0.			CHARITABLE
THOMAS MORE SOCIETY 309 W. WASHINGTON ST, SUITE 1250 CHICAGO, IL 60606	36-4270023	501(C)(3)	35.	0.			CHARITABLE

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE USE OF GRANT FUNDS IS MONITORED BY THE BOARD OF DIRECTORS

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2020

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

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

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 Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|--|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KRISTEN A. BEALL WATSON PRESIDENT & CEO	(i)	143,535.	0.	9,192.	0.	0.	152,727.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Multiple horizontal lines for supplemental information.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2020

Open to Public Inspection

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

Name of the organization **KERN COMMUNITY FOUNDATION** Employer identification number **77-0555874**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
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	X	3	798,063.FMV	
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

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

Schedule M (Form 990) 2020

Part II **Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Multiple horizontal lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2020

Open to Public
Inspection

Name of the organization

KERN COMMUNITY FOUNDATION

Employer identification number

77-0555874

FORM 990, PART VI, SECTION B, LINE 11B:

THE FOUNDATION'S BOARD OF DIRECTORS REVIEWS FORM 990 PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

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:

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:

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 XII LINE 2C

THE ORGANIZATION'S FINANCIAL STATEMENTS WERE AUDITED ON A CONSOLIDATED BASIS, AS IN PRIOR YEAR.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization **KERN COMMUNITY FOUNDATION** Employer identification number **77-0555874**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
KERN REAL ESTATE FOUNDATION - 46-2637218 3300 TRUXTUN AVENUE, SUITE 220 BAKERSFIELD, CA 93301	TO BENEFIT AND SUPPORT THE KERN COMMUNITY FOUNDATION	CALIFORNIA	501(C)(3)	LINE 12A, I			X

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

Schedule R (Form 990) 2020

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 country)	(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	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		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.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

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, III, 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?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		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.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

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) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.?		(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- tionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for supplemental information.