

Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.

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

Department of the Treasury
Internal Revenue Service

A For the 2023 calendar year, or tax year beginning 01-01-2023 , and ending 12-31-2023

<p>B Check if applicable:</p> <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	<p>C Name of organization TUBATULABALS OF KERN VALLEY</p> <hr/> <p>Doing business as</p> <hr/> <p>Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO BOX 833</p> <hr/> <p>City or town, state or province, country, and ZIP or foreign postal code WELDON, CA 93283</p>	<p>D Employer identification number 76-0813546</p> <hr/> <p>E Telephone number</p> <hr/> <p>G Gross receipts \$ 18</p>
<p>F Name and address of principal officer: ROBERT GOMEZ PO BOX 833 WELDON, CA 93283</p>		<p>H(a) Is this a group return for subordinates? H(b) Are all subordinates included? If "No," attach a list. See instructions. H(c) Group exemption number</p>
<p>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</p>		
<p>J Website: www.tubatulabal.org</p>		
<p>K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other</p>		<p>L Year of formation: 2006 M State of formation:</p>

Part I Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: PROVIDE TRIBAL GOVERNANCE SERVICES, HEALTH, HOUSING, EMPLOYMENT AND TO PRESERVE THE TRIBES HISTORY CULTURE	
	2	Check this box <input type="checkbox"/>	
	3	Number of voting members of the governing body (Part VI, line 1a)	3
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4
	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5
	6	Total number of volunteers (estimate if necessary)	6
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b
Revenue			Prior Year
	8	Contributions and grants (Part VIII, line 1h)	345,964
	9	Program service revenue (Part VIII, line 2g)	15,788
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	76
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	361,828
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		

Expenses	14 Benefits paid to or for members (Part IX, column (A), line 4)	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	205,951
	16a Professional fundraising fees (Part IX, column (A), line 11e)	
	b Total fundraising expenses (Part IX, column (D), line 25) <u>0</u>	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	145,165
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	351,116
19 Revenue less expenses. Subtract line 18 from line 12	10,712	
Net Assets or Fund Balances		Beginning of Current Year
	20 Total assets (Part X, line 16)	37,385
	21 Total liabilities (Part X, line 26)	
	22 Net assets or fund balances. Subtract line 21 from line 20	37,385

Part II **Signature Block**

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

Sign Here	Signature of officer ROBERT GOMEZ JR CHAIRMAN	2024-04-09
	Type or print name and title	Date

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date 2024-05-02	Check <input checked="" type="checkbox"/> if self-employed	PTIN P01312695
	Firm's name Lake Isabella Precision Tax			Firm's EIN 45-5254346	
	Firm's address PO Box 920 Lake Isabella, CA 932400920			Phone no. (760) 379-1300	

May the IRS discuss this return with the preparer shown above? See Instructions. **Ye**

For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y

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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:
PROVIDE TRIBAL GOVERNANCE SERVICES, HEALTH, HOUSING, EMPLOYMENT AND TO PRESERVE THE TRIBES HISTORY, LANGUA

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured b Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the tot expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 21,808 including grants of \$) (Revenue \$)

WAVERLY FIRST NATIONS GRANT INVESTED IN NATIVE LAND STEWARDSHIP

4b	(Code:) (Expenses \$ 624 including grants of \$) (Revenue \$)
	FOOD ACQUISITION PROGRAM TO RESTRIBUTE FOOD AND RESOURCES TO LOCAL
4c	(Code:) (Expenses \$ 24,900 including grants of \$) (Revenue \$)
	TROUT UNLIMITED GRANT TO RECONSTRUCT TROUT HABITAT IN THE SEQUOIAS
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 47,332

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Part IV Checklist of Required Schedules

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
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions.	2
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
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
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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5
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
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
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
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
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10
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
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
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
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	

u	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>	11
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11
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>	11
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>	11
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>	11
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14
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>	14
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>	1
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>	1
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. See instructions.</i>	1
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>	1
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>	1
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20
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>	2

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Part IV Checklist of Required Schedules (continued)

22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	2
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	2
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	

	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	2!
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	2!
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or 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? If "Yes," complete Schedule L, Part II	2
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	2
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	2!
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	2!
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	2!
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	2
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	3
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	3
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	3
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	3
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	3
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	3!
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	3!
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	3
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	3
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	3

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

1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	4
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1

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

2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	5	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O			3
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6
7	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?			9
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders	11a		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b		

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state?		13
Note. See the instructions for additional information the organization must report on Schedule O.		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?		14
b If "Yes," has it filed a Form 720 to report these payments?If "No," provide an explanation in Schedule O		14
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		1
If "Yes," see the instructions and file Form 4720, Schedule N.		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		1
If "Yes," complete Form 4720, Schedule O.		
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?		1
If "Yes," complete Form 6069.		

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

Section A. Governing Body and Management

1a Enter the number of voting members of the governing body at the end of the tax year	1a	316
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
b Enter the number of voting members included in line 1a, above, who are independent	1b	316
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?		2
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4
5 Did the organization become aware during the year of a significant diversion of the organization's assets?		5
6 Did the organization have members or stockholders?		6
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?		7
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		7
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?		8
b Each committee with authority to act on behalf of the governing body?		8

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 in Schedule O 9

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

10a	Did the organization have local chapters, branches, or affiliates?	10
b	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?	10
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11
b	Describe on 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	12
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12
13	Did the organization have a written whistleblower policy?	1
14	Did the organization have a written document retention and destruction policy?	1
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?	
a	The organization's CEO, Executive Director, or top management official	15
b	Other officers or key employees of the organization	15
	If "Yes" to line 15a or 15b, describe the process on 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?	16
b	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?	16

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 Form 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 in Schedule O)
- 19** Describe in 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:
TINA GUERRERO PO BOX 833 WELDON, CA 93283 (760) 223-6545

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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 o 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 the instructions for definition of "key employee."

- List all of the organization's **current** key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$10,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$10,000 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 the 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 dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				
		Individual trustee or director	Officer	Key employee	Highest compensated employee	Former
(1) ROBERT GOMEZ CHAIRMAN	10 0	<input type="checkbox"/>	X			
(2) DIANA DIAZ..... VICE CHAIRMAN	3 0		X			
(3) KATHERINE GOME SECRETARY	1 0		X			
(4) BETSY JOHNSON COUNCIL	1 0			X		
(5) KENNETH ALLEN COUNCIL	5 0			X		
(6) ELAINELONGORIA COUNCIL	1 0			X		
(7) DALE HEINEMANN COUNCIL	1 0			X		
(8) TERESA BOVEY COUNCIL	1 0			X		

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted 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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)
		Individual trustee or director	<input type="checkbox"/>	Officer	Key employee	Highest compensated employee	Former		
			<input type="checkbox"/>						
1b Sub-Total									
c Total from continuation sheets to Part VII, Section A									
d Total (add lines 1b and 1c)								12,309	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000

or reportable compensation from the organization

- 3** Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual* **3**
- 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? *If "Yes," complete Schedule J for such individual* **4**
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person* **5**

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

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

Form 990 (2023)

Part VIII Statement of Revenue

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue
1a Federated campaigns . <input type="checkbox"/> 1a			
b Membership dues . . 1b			
c Fundraising events . . 1c	1,905		
d Related organizations 1d			
e Government grants (contributions) 1e			
f All other contributions, gifts, grants, and similar amounts not included above 1f	37,229		
g Noncash contributions included in lines 1a - 1f: \$ 1g			

h Total. Add lines 1a-1f 39,134

Program Service Revenue	2a FOOD ACQ GRANT	Business Code			
		624210	36,000	36,000	
	3 FIRST NATIONS ANA	611430	15,000	15,000	
	4 TROUT UNLIMITED	110000	24,900	24,900	
	5 RESOURCE LEGACY FUN	624110	23,000	23,000	
	6 WAVERLY FIRST NATIO	624110	45,000	45,000	
f All other program service revenue.					
9 Total. Add lines 2a-2f.			143,900		

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)				
	4 Income from investment of tax-exempt bond proceeds				
	5 Royalties				
	6a Gross rents	(i) Real	6a		
				(ii) Personal	
		b Less: rental expenses	6b		
		c Rental income or (loss)	6c		
	d Net rental income or (loss)				
	7a Gross amount from sales of assets other than inventory	(i) Securities	7a		
				(ii) Other	
		b Less: cost or other basis and sales expenses	7b		
		c Gain or (loss)	7c		
	d Net gain or (loss)				
	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				0	
9a Gross income from gaming activities. See Part IV, line 19	9a				
		b Less: direct expenses	9b		
		c Net income or (loss) from gaming activities			

10a Gross sales of inventory, less returns and allowances

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ObjectID: 202431359349312608 - Submission: 2024-05-14

SCHEDULE A
(Form 990)

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.

Name of the organization
TUBATULABALS OF KERN VALLEY

Emplo
76-081

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)**. (Attach Schedule E (Form 990).)
- 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)(iv)**. (Complete Part II.)
- 5 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 6 An organization that normally receives a substantial part of its support from a governmental unit or foreign organization described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 7 A community trust described in **section 170(b)(1)(A)(vii)**. (Complete Part II.)
- 8 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college of agriculture. See instructions. Enter the name, city, and state of the college or university.
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, or similar payments from the general public or the general membership of an organization; (2) no more than 33% of its support from investment income and unrelated business taxable income (less section 511 tax) from businesses acquired before September 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to support one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See instructions on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s) or by a group of individuals including the supported organization(s); the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization is vested in the supported organization(s). **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s); the management of the supporting organization is vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, one or more supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, one or more supported organization(s) (see instructions). The organization generally must satisfy a distribution requirement and an attachment requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

9	income from similar sources.				
10	Net income from unrelated business activities, whether or not the business is regularly carried on.				
11	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).				
12	Total support. Add lines 7 through 10				
13	Gross receipts from related activities, etc. (see instructions)				
14	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 509(a)(2) organization, check this box and stop here				

Section C. Computation of Public Support Percentage

- 14 Public support percentage for 2023 (line 6, column (f) divided by line 11, column (f))
- 15 Public support percentage for 2022 Schedule A, Part II, line 14
- 16a **33 1/3% support test—2023.** 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
- 16b **33 1/3% support test—2022.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 17a **10%-facts-and-circumstances test—2023.** If the organization did not check a box on line 13, 16a, or 16b, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VII how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 17b **10%-facts-and-circumstances test—2022.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VII how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
- 18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and **stop here.** Explain in Part VII how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990) 2023

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 the 33 1/3% support test. 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) 2019	(b) 2020	(c) 2021	(d) 2022
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		76,623	340,269	345,964
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				15,864
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	76,623	340,269	361,828
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) 2019	(b) 2020	(c) 2021	(d) 2022
9 Amounts from line 6. . . .		76,623	340,269	361,828
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 on 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.)		76,623	340,269	361,828
14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a secti this box and stop here.				

Section C. Computation of Public Support Percentage

15	Public support percentage for 2023 (line 8, column (f) divided by line 13, column (f))
16	Public support percentage from 2022 Schedule A, Part III, line 15

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2023 (line 10c, column (f) divided by line 13, column (f))
18	Investment income percentage from 2022 Schedule A, Part III, line 17
19a	33 1/3% support tests-2023. If the organization did not check the box on line 14, and line 15 is more than more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organiz
b	33 1/3% support tests-2022. If the organization did not check a box on line 14 or line 19a, and line 16 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported org
20	Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see

Schedule A (Form 990) 2023

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1** Are all of the organization's supported organizations listed by name in the organization's governing document? *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.*
- 2** Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization described in section 509(a)(1) or (2).*
- 3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer 3c below.*
- b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) as to the public support tests under section 509(a)(2)? *If "Yes," describe in **Part VI** when and how the organization determined.*
- c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.*
- 4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," describe in **Part VI** how the organization determined that the supported organization was not organized in the United States.*
- b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in **Part VI** how the organization had such control and discretion despite being supervised by or in connection with its supported organizations.*
- c** Did the organization support any foreign supported organization that does not have an IRS determination under section 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in **Part VI** what controls the organization used to ensure that the support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a** Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer 5b and 5c below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the 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).*
- 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 any individual other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by the supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the organization's supported organizations? *If "Yes," provide detail in **Part VI**.*
- 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? *If "Yes," complete Part I of Schedule L (Form 990).*

- 8** Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7 complete *Part I of Schedule L (Form 990)*.
- 9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or provide detail in **Part VI**.
- b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which organization had an interest? *If "Yes," provide detail in **Part VI**.*
- c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI**.*
- 10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(c) certain Type II supporting organizations, and all Type III non-functionally integrated supporting organization answer line 10b below.
- b** Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).*

Schedule A (Form 990) 2023

Part IV Supporting Organizations (continued)

- 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 on lines 11b and governing body of a supported organization?
- b** A family member of a person described on 11a above?
- c** A 35% controlled entity of a person described on line 11a or 11b above? *If "Yes" to 11a, 11b, or 11c, provide detail in **Part VI**.*

Section B. Type I Supporting Organizations

- 1** Did the officers, directors, trustees, or membership of one or more supported organizations have the power to appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *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 or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions applied to such powers during the tax year.*
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how the organization carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.*

Section C. Type II Supporting Organizations

- 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 was exercised.*

... of the organization's supported organization(s), or they, because of the close and continuous working relationship, supporting organization was vested in the same persons that controlled or managed the supported organization.

Section D. All Type III Supporting Organizations

- 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) 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?
- 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).*
- 3 By reason of the relationship described in line 2 above, did the organization's supported organizations have a voice in the organization's investment policies and in directing the use of the organization's income or assets during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played.*

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
 - a The organization satisfied the Activities Test. Complete **line 2** below.
 - b The organization is the parent of each of its supported organizations. Complete **line 3** below.
 - c The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity.
- 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 each supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those 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.*
 - b Did the activities described on line 2a, above constitute activities that, but for the organization's involvement of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 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 the supported organizations? *If "Yes" or "No," provide details in Part VI.*
 - b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each supported organization? *If "Yes," describe in Part VI the role played by the organization in this regard.*

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 (see instructions). All other Type III non-functionally integrated supporting organizations must complete Section A.

Section A - Adjusted Net Income

(A) Prior Year

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 Ye
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	

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SCHEDULE D
(Form 990)

Supplemental Financial Statements

Department of the Treasury
Internal Revenue Service

▶ **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.**

Name of the organization TUBATULABALS OF KERN VALLEY	Emplo 76-081
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accou
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b)
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised fun organization's property, subject to the organization's exclusive legal control?		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring private benefit?		

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)

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
- Preservation of land for public use (e.g., recreation or education)
 - Protection of natural habitat
 - Preservation of open space
 - Preservation of an historical
 - Preservation of a certified hi

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a cc easement on the last day 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 July 25, 2006, 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 organ tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____ 1

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

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservati ▶ _____ 50

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ea ▶ \$ _____

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Simi
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 bal historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of 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 balanc historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of 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 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

Schedule D (Form 990) 2022

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Simi

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a signifi items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt 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? . . .

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an 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?
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | |
|-----------|--|
| | |
| 1c | |
| 1d | |
| 1e | |
| 1f | |
- c** Beginning balance
 - d** Additions during the year
 - e** Distributions during the year
 - f** Ending balance
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in 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) T
1a Beginning of year balance				
b Contributions				
c Net investment earnings, gains, and losses				
d Grants or scholarships				
e Other expenditures for facilities and programs				
f Administrative expenses				
g End of year balance				

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Term endowment ▶

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:

(i) Unrelated organizations

(ii) Related organizations

b If "Yes" on 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

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

Schedule D (Form 990) 2022

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		

(11)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	Co:
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (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

(a) Description
(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 Fo

1.	(a) Description of liability
(1) Federal income taxes	

efile Public Visual Render | **ObjectId: 202431359349312608 - Submission: 2024-05-14**

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-
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.

Name of the organization TUBATULABALS OF KERN VALLEY	Emp 76-0
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Return Reference	Explanation
PART III LINE 2	TRIBE ACQUIRED NATIVE TRIBAL LANDS - KWOLOKAM. VISION IS TO REINFORCE TO TI COMMUNITY TO GATHER ON TRADITIONAL GROUND
PART V1 SEC A	BOARD MEMBERS AND HUSBAND AND WIFE - GOMEZ
PART V1 SEC B	TAX RETURN AVAILABLE UPON INSPECTION FOR TRIBAL MEMBERS AND GENERAL PUI CONFLICT OF INTEREST IS MANDATORY IN ANA GRANT PROCESS