

MAIL TO:
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470
STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
(916) 210-6400
WEBSITE ADDRESS:
www.oag.ca.gov/charities

ANNUAL REGISTRATION RENEWAL FEE REPORT TO ATTORNEY GENERAL OF CALIFORNIA

(For Registry Use Only)

**Sections 12586 and 12587, California Government Code
11 Cal. Code Regs. sections 301-306, 309, 311, and 312**

Failure to submit this report annually no later than four months and fifteen days after the end of the organization's accounting period may result in the loss of tax exemption and the assessment of a minimum tax of \$800, plus interest, and/or fines or filing penalties. Revenue & Taxation Code section 23703; Government Code section 12586.1. IRS extensions will be honored.

<p>THE PINOLE HISTORICAL SOCIETY Name of Organization</p> <hr/> <p>List all DBAs and names the organization uses or has used P O BOX 285</p> <p>Address (Number and Street) PINOLE CA 94564</p> <p>City or Town, State, and ZIP Code</p> <p>510-724-9507 Telephone Number</p> <p>INFO@PINOLEHISTORYMUSEUM.ORG</p> <p>E-mail Address</p>	<p>Check if:</p> <p><input type="checkbox"/> Change of address</p> <p><input type="checkbox"/> Amended report</p> <hr/> <p>State Charity Registration Number CT021662</p> <p>Corporation or Organization No. 0723879</p> <p>Federal Employer ID No. 23-7441316</p>
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ANNUAL REGISTRATION RENEWAL FEE SCHEDULE (11 Cal. Code Regs. sections 301-307, 311, and 312)
Make Check Payable to Department of Justice

Gross Annual Revenue	Fee	Gross Annual Revenue	Fee	Gross Annual Revenue	Fee
Less than \$25,000	0	Between \$100,001 and \$250,000	\$50	Between \$1,000,001 and \$10 million	\$150
Between \$25,000 and \$100,000	\$25	Between \$250,001 and \$1 million	\$75	Between \$10,000,001 and \$50 million	\$225
				Greater than \$50 million	\$300

PART A - ACTIVITIES

For your most recent full accounting period (beginning 01/01/19 ending 12/31/19) list:

Gross Annual Revenue \$ 15,001 Noncash Contributions \$ 0 Total Assets \$ 4,628

Program Expenses \$ 12,039 Total Expenses \$ 13,321

PART B - STATEMENTS REGARDING ORGANIZATION DURING THE PERIOD OF THIS REPORT

Note: All questions must be answered. If you answer "yes" to any of the questions below, you must attach a separate page providing an explanation and details for each "yes" response. Please review RRF-1 instructions for information required.

	Yes	No
1. During this reporting period, were there any contracts, loans, leases or other financial transactions between the organization and any officer, director or trustee thereof either directly or with an entity in which any such officer, director or trustee had any financial interest?		X
2. During this reporting period, was there any theft, embezzlement, diversion or misuse of the organization's charitable property or funds?		X
3. During this reporting period, were any organization funds used to pay any penalty, fine or judgment?		X
4. During this reporting period, were the services of a commercial fundraiser, fundraising counsel for charitable purposes, or commercial coventurer used?		X
5. During this reporting period, did the organization receive any governmental funding?		X
6. During this reporting period, did the organization hold a raffle for charitable purposes?		X
7. Does the organization conduct a vehicle donation program?		X
8. Did the organization conduct an independent audit and prepare audited financial statements in accordance with generally accepted accounting principles for this reporting period?		X
9. At the end of this reporting period, did the organization hold restricted net assets, while reporting negative unrestricted net assets?		X

I declare under penalty of perjury that I have examined this report, including accompanying documents, and to the best of my knowledge and belief, the content is true, correct and complete, and I am authorized to sign.

JEFF RUBIN	PRESIDENT		
Signature of Authorized Agent	Printed Name	Title	Date

**ANNUAL TREASURER'S REPORT
ATTORNEY GENERAL OF CALIFORNIA**

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(FORM CT-TR-1)

THE PINOLE HISTORICAL SOCIETY Name of Organization	State Charity Registration Number CT021662
P O BOX 285 Address (Number and Street)	Corporation or Organization No. 0723879
PINOLE CA 94564 City or Town, State and ZIP Code	Federal Employer I.D. No. 23-7441316

For annual accounting period (beginning 01/01/19 ending 12/31/19)**BALANCE SHEET****ASSETS**

Cash	\$	4,628
Savings	\$	0
Investment	\$	0
Land/Buildings	\$	0
Other Assets	\$	0
TOTAL ASSETS	\$	4,628

LIABILITIES

Accounts Payable	\$	0
Salary Payable	\$	0
Other Liabilities	\$	0
TOTAL LIABILITIES	\$	0

FUND BALANCE

Total Assets less Total Liabilities	\$	4,628
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REVENUE STATEMENT**REVENUE**

Cash Contributions	\$	4,414
Noncash Contributions	\$	0
Program Revenue	\$	10,502
Investments	\$	85
Special Events	\$	0
Other Revenue	\$	0
TOTAL REVENUE	\$	15,001

EXPENSES SEE STATEMENT 1

Compensation of Officers/Directors	\$	0
Compensation of Staff	\$	0
Fundraising Expenses	\$	0
Rent	\$	38
Utilities	\$	0
Supplies/Postage	\$	0
Insurance	\$	814
Other Expenses	\$	12,469

NET REVENUE

Total Revenue less Total Expenses	\$	1,680
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TOTAL EXPENSES	\$	13,321
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I hereby declare under penalty of perjury that I have examined this report, including accompanying documents, and, to the best of my knowledge and belief, the content is true, correct and complete and I am authorized to sign.

Signature of Authorized Agent	<u>JEFF RUBIN</u>	Printed Name	<u>PRESIDENT</u>	Title	_____	Date	_____
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Statement 1 - Form CT-TR-1 - Other Expenses

<u>Description</u>	<u>Amount</u>
	\$
Accounting	330
Bank Fees	40
Book Purchases	134
Misc Expense	216
Office Expenses	837
Printing Expenses	9,863
Room Rental	60
Sales Tax	98
Scholarship	250
Supplies Reimbursements	641
Total	<u>\$ 12,469</u>