# TAX RETURN FILING INSTRUCTIONS

**FORM 990**

**FOR THE YEAR ENDING**

**DECEMBER 31, 2015**

| Prepared for | WAIANAE COMMUNITY RE-DEVELOPMENT CORPORATION  
|              | P.O. BOX 441  
|              | WAIANAE, HI 96792 |

| Prepared by | SCHLISSEL & ASSOCIATES LLC  
|             | 1164 BISHOP STREET - STE 1612  
|             | HONOLULU, HI 96813 |

| Amount due or refund | NOT APPLICABLE |

| Make check payable to | NOT APPLICABLE |

| Mail tax return and check (if applicable) to | NOT APPLICABLE |

| Return must be mailed on or before | NOT APPLICABLE |

| Special instructions | THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-EO TO OUR OFFICE. WE WILL THEN SUBMIT THE ELECTRONIC RETURN TO THE IRS. DO NOT MAIL A PAPER COPY OF THE RETURN TO THE IRS. |
Name of Exempt Organization: WAIANAIE COMMUNITY RE-DEVELOPMENT CORPORATION

Employer Identification Number: 99-0350803

Name and Title of Officer: J KUKUI MAUNAKEA-FORTH EXECUTIVE DIRECTOR

Type of Return and Return Information (Whole Dollars Only):

1a Form 990 check here □ 1b Total revenue, if any (Form 990, Part VIII, column (A), line 12) □ 1,820,523.

2a Form 990-EZ check here □ 2b Total revenue, if any (Form 990-EZ, line 9) □

3a Form 1120-POL check here □ 3b Total tax (Form 1120-POL, line 22) □

4a Form 990-PF check here □ 4b Tax based on investment income (Form 990-PF, Part VI, line 5) □

5a Form 8868 check here □ 5b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c) □

Declaration and Signature Authorization of Officer:

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization’s 2015 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization’s electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization’s return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization’s federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at -888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization’s electronic return and, if applicable, the organization’s consent to electronic funds withdrawal.

Officer’s PIN: check one box only

□ I authorize SCHLISSEL & ASSOCIATES LLC to enter my PIN 12345

□ Enter five numbers, but do not enter all zeros

□ As an officer of the organization, I will enter my PIN as my signature on the organization’s tax year 2015 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(es) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return’s disclosure consent screen.

□ Date

Certification and Authentication:

EROS EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

□ 99143912345 do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2015 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4183, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

EROS signature □ Date

EROS Must Retain This Form - See Instructions
Do Not Submit This Form To the IRS Unless Requested To Do So

Form 8879-EO (2015)
**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.

**A For the 2015 calendar year, or tax year beginning and ending 2015.**

**B Check if applicable:**

<table>
<thead>
<tr>
<th>Name of organization</th>
<th>Employer Identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>WAIANAE COMMUNITY RE-DEVELOPMENT CORPORATION</td>
<td>99-0350803</td>
</tr>
</tbody>
</table>

**D Employer Identification number**

- E Telephone number: (808) 696-5569
- F Gross receipts: 2,371,463.

**F Name and address of principal officer:**

- J KUKUI MAUNAKEA-FORTH
- SAME AS C ABOVE

**H(a) Is this a group return?**

- Yes [ ] No [x]

**H(b) Are all subordinates included?**

- Yes [ ] No [x]

**I Tax-exempt status:**

- [ ] 501(c)(3) [ ] 501(c) ( ) [ ] 4947(a)(1) or 527

**J Website:** [HTTP://MACORGANICFARMS.ORG/](http://MACORGANICFARMS.ORG/)

**K Form of organization:**

- Corporation [x] Trust [ ] Association [ ] Other [ ]

**L Year of formation:** 2000

**Part I Summary**

1. Briefly describe the organization's mission or most significant activities: **PROVIDE EDUCATIONAL AND EMPLOYMENT OPPORTUNITIES, FOCUSED TOWARD YOUTH, THROUGH THE**

2. Check this box [ ] 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) 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 2015 (Part V, line 2a) 5

6. Total number of volunteers (estimate if necessary) 6

7. Total unrelated business revenue from Part VIII, column (C), line 12 7a

b. Net unrelated business taxable income from Form 990-T, line 34 7b

<table>
<thead>
<tr>
<th>Activity</th>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 Contributions and grants (Part VIII, line 1h)</td>
<td>2,052,819</td>
<td>1,737,640</td>
</tr>
<tr>
<td>9 Program service revenue (Part VIII, line 2g)</td>
<td>64,736</td>
<td>40,416</td>
</tr>
<tr>
<td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td>
<td>6,487</td>
<td>14,496</td>
</tr>
<tr>
<td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td>
<td>43,313</td>
<td>27,971</td>
</tr>
<tr>
<td>12 Total revenue - add lines 8 through 11: must equal Part VIII, column (A), line 12</td>
<td>2,187,355</td>
<td>1,820,523</td>
</tr>
<tr>
<td>13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>14 Benefits paid to or for members (Part IX, column (A), line 4)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</td>
<td>538,438</td>
<td>669,484</td>
</tr>
<tr>
<td>16a Professional fundraising fees (Part IX, column (A), line 11e)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>b Total fundraising expenses (Part IX, column (D), line 25)</td>
<td>85,474</td>
<td>85,474</td>
</tr>
<tr>
<td>17 Other expenses (Part IX, column (A), lines 11a through 11f)</td>
<td>1,449,191</td>
<td>1,404,303</td>
</tr>
<tr>
<td>18 Total expenses. Add lines 13-17: must equal Part IX, column (A), line 25</td>
<td>1,987,629</td>
<td>2,073,787</td>
</tr>
<tr>
<td>19 Revenue less expenses. Subtract line 18 from line 12</td>
<td>179,726</td>
<td>-253,264</td>
</tr>
</tbody>
</table>

**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
- Date

**Type or print name and title**

- J KUKUI MAUNAKEA-FORTH, EXECUTIVE DIRECTOR

**Paid**

- Print/Type preparer's name: ALAN M. SCHLISSEL
- Preparer's signature
- Date
- Check if self-employed [ ]
- PTIN: 001451320

**Preparer**

- Firm's name: SCHLISSEL & ASSOCIATES LLC
- Firm's EIN: 27-3670123
- Firm's address: 1164 BISHOP STREET - STE 1612
- HONOLULU, HI 96813
- Phone no. 808-732-7232

**May the IRS discuss this return with the preparer shown above?**

- Yes [x] No [ ]

**See Schedule O for Organization Mission Statement Continuation**
WAIANAE COMMUNITY RE-DEVELOPMENT CORPORATION 99-0350803 Page 2

Part III Statement of Program Service Accomplishments

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

Briefly describe the organization's mission:

PROVIDE EDUCATIONAL AND EMPLOYMENT OPPORTUNITIES, FOCUSED TOWARD YOUTH, THROUGH THE OPERATION OF A COMPREHENSIVE RANGE OF COMMUNITY-BASED INTER-WOVEN ACTIVITIES, INCLUDING AN ORGANIC FARM, COLLEGE DEGREE PROGRAMS, INTERNSHIPS, AND IN SCHOOL CURRICULUM BASED

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? 

☐ Yes ☒ No

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? 

☐ Yes ☒ No

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 by expenses.

Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses $1,674,208, including grants of $ ) (Revenue $70,831.)

THE ORGANIZATION'S SINGLE PROGRAM IS "EDUPRISE" WHICH FOCUSES ON THE IMPLEMENTATION OF SOCIAL ENTERPRISE IN ORGANIC FARMING THROUGH OPERATION OF A COMPREHENSIVE RANGE OF YOUTH LEADERSHIP PROGRAMS.

THE EDUPRISE PROGRAM IS TARGETED TOWARD YOUTH RANGING FROM INTERMEDIATE THROUGH COLLEGE LEVEL. PROGRAM ACTIVITIES INCLUDE FARM TO SCHOOL GARDEN CURRICULUM; PROGRAM INSTRUCTION AND ENRICHMENT ACTIVITIES; CAREER AND HIGHER EDUCATION COUNSELING/SERVICES; HIGH SCHOOL AND COLLEGE INTERNSHIPS/APPRENTICESHIPS; AND COMMUNITY WORKSHOPS, OUTREACH PROGRAMS, AND ACTIVITIES.

THESE SOCIAL ENTERPRISES PROVIDE ENTREPRENEURIAL TRAINING, EDUCATIONAL

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

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

4d Other program services (Describe in Schedule O.)

(Expenses $ including grants of $ ) (Revenue $ )

4e Total program service expenses $1,674,208.

SEE SCHEDULE O FOR CONTINUATION(S)
1. Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
   If "Yes," complete Schedule A
   
   Yes   No
   1     X

2. Is the organization required to complete Schedule B, Schedule of Contributors?

   Yes   No
   2     X

3. Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

   Yes   No
   3     X

4. Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

   Yes   No
   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 98-197? If "Yes," complete Schedule C, Part III

   Yes   No
   5     X

6. Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

   Yes   No
   6     X

7. Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II

   Yes   No
   7     X

8. Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

   Yes   No
   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? If "Yes," complete Schedule D, Part IV

   Yes   No
   9     X

10. Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V

    Yes   No
    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? If "Yes," complete Schedule D, Part VI

      Yes   No
      11a   X

   b. Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII

      Yes   No
      11b   X

   c. Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII

      Yes   No
      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? If "Yes," complete Schedule D, Part IX

      Yes   No
      11d   X

   e. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X

      Yes   No
      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)? If "Yes," complete Schedule D, Part X

      Yes   No
      11f   X

12a. Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII

    Yes   No
    12a   X

   b. Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional

      Yes   No
      12b   X

13. Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

    Yes   No
    13     X

14a. Did the organization maintain an office, employees, or agents outside of the United States?

    Yes   No
    14a   X

15. Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts I and IV

    Yes   No
    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? If "Yes," complete Schedule F, Parts II and IV

    Yes   No
    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 11a? If "Yes," complete Schedule G, Part I

    Yes   No
    17     X

18. Did the organization report more than $15,000 of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

    Yes   No
    18     X

19. Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

    Yes   No
    19     X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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? If "Yes," complete Schedule I, Parts I and II

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? If "Yes," complete Schedule I, Parts I and III

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization’s current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

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?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

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? If "Yes," complete Schedule L, Part I

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 II

26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than $25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

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

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

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

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

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

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

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?
<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Enter the number reported in Box 3 of Form 1096. Enter O if not applicable</td>
<td>Yes</td>
</tr>
<tr>
<td>1b Enter the number of Forms W-2G included in line 1a. Enter O if not applicable</td>
<td>0</td>
</tr>
<tr>
<td>c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (if any) winnings to prize winners?</td>
<td>X</td>
</tr>
<tr>
<td>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</td>
<td>9</td>
</tr>
<tr>
<td>b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?</td>
<td>X</td>
</tr>
<tr>
<td>Note. If the sum of lines 2a and 2b is greater than 250, you may be required to e-file (see instructions)</td>
<td></td>
</tr>
<tr>
<td>3a Did the organization have unrelated business gross income of $1,000 or more during the year?</td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; has it filed a Form 990-T for this year? If &quot;No,&quot; to line 3b, provide an explanation in Schedule O</td>
<td></td>
</tr>
<tr>
<td>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)?</td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; enter the name of the foreign country:</td>
<td></td>
</tr>
<tr>
<td>5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?</td>
<td>X</td>
</tr>
<tr>
<td>b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?</td>
<td>X</td>
</tr>
<tr>
<td>c If &quot;Yes,&quot; to line 5a or 5b, did the organization file Form 886-T?</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?</td>
<td></td>
</tr>
<tr>
<td>7 Organizations that may receive deductible contributions under section 170(c).</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; did the organization notify the donor of the value of the goods or services provided?</td>
<td></td>
</tr>
<tr>
<td>c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?</td>
<td>X</td>
</tr>
<tr>
<td>d If &quot;Yes,&quot; indicate the number of Forms 8282 filed during the year</td>
<td></td>
</tr>
<tr>
<td>e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?</td>
<td></td>
</tr>
<tr>
<td>f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</td>
<td></td>
</tr>
<tr>
<td>g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?</td>
<td></td>
</tr>
<tr>
<td>h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?</td>
<td></td>
</tr>
<tr>
<td>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?</td>
<td></td>
</tr>
<tr>
<td>9 Sponsoring organizations maintaining donor advised funds.</td>
<td></td>
</tr>
<tr>
<td>a Did the sponsoring organization make any taxable distributions under section 4966?</td>
<td></td>
</tr>
<tr>
<td>b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?</td>
<td></td>
</tr>
<tr>
<td>10 Section 501(c)(7) organizations. Enter:</td>
<td></td>
</tr>
<tr>
<td>a Initiation fees and capital contributions included on Part VIII, line 12</td>
<td></td>
</tr>
<tr>
<td>b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities</td>
<td></td>
</tr>
<tr>
<td>11 Section 501(c)(12) organizations. Enter:</td>
<td></td>
</tr>
<tr>
<td>a Gross income from members or shareholders</td>
<td></td>
</tr>
<tr>
<td>b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)</td>
<td></td>
</tr>
<tr>
<td>12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?</td>
<td></td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; enter the amount of tax-exempt interest received or accrued during the year</td>
<td></td>
</tr>
<tr>
<td>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</td>
<td></td>
</tr>
<tr>
<td>a Is the organization licensed to issue qualified health plans in more than one state?</td>
<td></td>
</tr>
<tr>
<td>Note. See the instructions for additional information the organization must report on Schedule O.</td>
<td></td>
</tr>
<tr>
<td>b Enter the amount of reserves the organization is required to maintain in the states in which the organization is licensed to issue qualified health plans</td>
<td></td>
</tr>
<tr>
<td>c Enter the amount of reserves on hand</td>
<td></td>
</tr>
<tr>
<td>14a Did the organization receive any payments for indoor tanning services during the tax year?</td>
<td>X</td>
</tr>
<tr>
<td>b If &quot;Yes,&quot; has it filed a Form 720 to report these payments? If &quot;No,&quot; provide an explanation in Schedule O</td>
<td></td>
</tr>
</tbody>
</table>
Section A. Governing Body and Management

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 in Schedule O.  
   
1b Enter the number of voting members included in 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?  

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?  

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?  

5 Did the organization become aware during the year of a significant diversion of the organization's assets?  

6 Did the organization have members or stockholders?  

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?  

7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?  

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  

8a The governing body.  

8b Each committee with authority to act on behalf of the governing body.  

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 in Schedule O.  

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

10a Did the organization have local chapters, branches, or affiliates?  

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?  

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  

12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  

12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.  

13 Did the organization have a written whistleblower policy?  

14 Did the organization have a written document retention and destruction policy?  

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  

15b Other officers or key employees of the organization  

15b 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?  

16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint ventures 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.  

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 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:  

J KUKUI MAUNAKEA-FOORTH - (808) 696-5569  
86-148 PUHAWAIS ROAD, WAIANAE, HI 96792
### Part VII: Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### 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 1-2 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.

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 MARENETTIE AH NEE BENHAM</td>
<td>4.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>PRESIDENT/DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 KAIMANA PINE</td>
<td>4.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>VICE PRESIDENT/DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 EDWARD KENNY</td>
<td>4.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>SECRETARY/DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 NEIL HANNAHS</td>
<td>4.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>TREASURER/DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 KRISTEN KENNEY</td>
<td>1.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 KINOSH GOMES</td>
<td>2.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 ALIKA K. MAUNAKEA</td>
<td>2.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 MANAE MORTON</td>
<td>2.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 PAULA AKANA</td>
<td>2.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 KEONI LEE</td>
<td>2.00</td>
<td>X</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 GARY MAUNAKEA-FORTH</td>
<td>40.00</td>
<td>X</td>
<td>92,500.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>OPERATIONS DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 J KUKUI MAUNAKEA-FORTH</td>
<td>40.00</td>
<td>X</td>
<td>92,500.</td>
<td>0.</td>
<td>16,345.</td>
</tr>
<tr>
<td>EXECUTIVE DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**WAIANAE COMMUNITY RE-DEVELOPMENT CORPORATION**

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

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week (list any hours for related organizations below line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Individual trustee or director</td>
<td>Officer</td>
<td>Key employee</td>
<td>Highest compensated officer</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Individual trustee or director</td>
<td>Officer</td>
<td>Key employee</td>
<td>Highest compensated officer</td>
</tr>
</tbody>
</table>

1b Sub-total: 185,000.

c Total from continuation sheets to Part VII, Section A: 0.

d Total (add lines 1b and 1c): 185,000.

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: 0.

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: Yes.

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: Yes.

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: Yes.

**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.

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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: 0.

Form 990 (2015)
### Statement of Revenue

**Contributions, Gifts, Grants and Other Similar Amounts**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total Revenue</th>
<th>(B) Related or Exempt Function Revenue</th>
<th>(C) Unrelated Business Revenue</th>
<th>(D) Revenue Excluded from Tax Under Sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Federated campaigns</td>
<td>743.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b</td>
<td>Membership dues</td>
<td>43,310.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c</td>
<td>Fundraising events</td>
<td>462,183.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d</td>
<td>Related organizations</td>
<td>1,231,404.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e</td>
<td>Government grants (contributions)</td>
<td>1,737,640.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f</td>
<td>All other contributions, gifts, grants, and similar amounts not included above</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1g</td>
<td>Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1h</td>
<td>Total, Add lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a CONTRACT &amp; TRAINING</td>
<td>611710 27,431. 27,431.</td>
</tr>
<tr>
<td>2b WORKSHOPS &amp; TOURS</td>
<td>611710 12,985. 12,985.</td>
</tr>
</tbody>
</table>

**Investment Income (including dividends, interest, and other similar amounts)**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total Revenue</th>
<th>(B) Related or Exempt Function Revenue</th>
<th>(C) Unrelated Business Revenue</th>
<th>(D) Revenue Excluded from Tax Under Sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>2c</td>
<td>Income from investment of tax-exempt bond proceeds</td>
<td>4,921.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td>Royalties</td>
<td>40,416.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Gross Rents**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(I) Real</th>
<th>(I) Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Less: rental expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Rental income or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Net rental income or (loss)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Gross Amount from Sales of Assets Other than Inventory**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(I) Securities</th>
<th>(I) Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>6a</td>
<td>Gross amount from sales of assets other than inventory</td>
<td>9,575.</td>
<td></td>
</tr>
<tr>
<td>6b</td>
<td>Less: cost or other basis and sales expenses</td>
<td>0.</td>
<td></td>
</tr>
<tr>
<td>6c</td>
<td>Gain or (loss)</td>
<td>9,575.</td>
<td></td>
</tr>
<tr>
<td>6d</td>
<td>Net gain or (loss)</td>
<td>9,575.</td>
<td></td>
</tr>
</tbody>
</table>

**Gross Income from Fundraising Events**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total Revenue</th>
<th>(B) Related or Exempt Function Revenue</th>
<th>(C) Unrelated Business Revenue</th>
<th>(D) Revenue Excluded from Tax Under Sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>8a</td>
<td>Gross income from fundraising events (not including $43,310. of contributions reported on line 1c). See Part IV, line 18</td>
<td>0.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8b</td>
<td>Less: direct expenses</td>
<td>2,444.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8c</td>
<td>Net income or (loss) from fundraising events</td>
<td>-2,444.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Gross Income from Gaming Activities**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total Revenue</th>
<th>(B) Related or Exempt Function Revenue</th>
<th>(C) Unrelated Business Revenue</th>
<th>(D) Revenue Excluded from Tax Under Sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>9a</td>
<td>Gross income from gaming activities. See Part IV, line 19</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b</td>
<td>Less: direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9c</td>
<td>Net income or (loss) from gaming activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Gross Sales of Inventory, Less Returns and Allowances**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total Revenue</th>
<th>(B) Related or Exempt Function Revenue</th>
<th>(C) Unrelated Business Revenue</th>
<th>(D) Revenue Excluded from Tax Under Sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a</td>
<td>Gross sales of inventory, less returns and allowances</td>
<td>571,028.</td>
<td>22,532.</td>
<td>22,532.</td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Less: cost of goods sold</td>
<td>548,496.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c</td>
<td>Net income or (loss) from sales of inventory</td>
<td>22,532.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Miscellaneous Revenue**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total Revenue</th>
<th>(B) Related or Exempt Function Revenue</th>
<th>(C) Unrelated Business Revenue</th>
<th>(D) Revenue Excluded from Tax Under Sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>11a</td>
<td>OTHER REVENUE</td>
<td>7,883.</td>
<td>7,883.</td>
<td>7,883.</td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11d</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11e</td>
<td>Total, Add lines 11a-11d</td>
<td>7,883.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total revenue. See instructions.**

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>(A) Total Revenue</th>
<th>(B) Related or Exempt Function Revenue</th>
<th>(C) Unrelated Business Revenue</th>
<th>(D) Revenue Excluded from Tax Under Sections 512-514</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td></td>
<td>1,820,523.</td>
<td>70,831.</td>
<td>0.</td>
<td>12,052.</td>
</tr>
</tbody>
</table>
### 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 [X]

<table>
<thead>
<tr>
<th>(A) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</th>
<th>(B) Total expenses</th>
<th>(C) Program service expenses</th>
<th>(D) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Grants and other assistance to domestic individuals. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Benefits paid to or for members</td>
<td>111,000.</td>
<td>27,750.</td>
<td>41,625.</td>
<td>41,625.</td>
</tr>
<tr>
<td>5 Compensation of current officers, directors, trustees, and key employees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)</td>
<td>409,643.</td>
<td>360,336.</td>
<td>49,307.</td>
<td></td>
</tr>
<tr>
<td>7 Other salaries and wages</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>77,070.</td>
<td>69,435.</td>
<td>3,406.</td>
<td>4,229.</td>
</tr>
<tr>
<td>9 Other employee benefits</td>
<td>71,771.</td>
<td>62,731.</td>
<td>5,102.</td>
<td>3,938.</td>
</tr>
<tr>
<td>10 Payroll taxes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Legal</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Accounting</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Lobbying</td>
<td>12,855.</td>
<td>12,323.</td>
<td>532.</td>
<td></td>
</tr>
<tr>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Investment management fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)</td>
<td>208,707.</td>
<td>159,762.</td>
<td>48,945.</td>
<td></td>
</tr>
<tr>
<td>12 Advertising and promotion</td>
<td>4,313.</td>
<td>4,313.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Office expenses</td>
<td>11,684.</td>
<td>951.</td>
<td>9,564.</td>
<td>1,169.</td>
</tr>
<tr>
<td>14 Information technology</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Occupancy</td>
<td>12,855.</td>
<td>12,323.</td>
<td>532.</td>
<td></td>
</tr>
<tr>
<td>17 Travel</td>
<td>24,447.</td>
<td>16,100.</td>
<td>8,347.</td>
<td></td>
</tr>
<tr>
<td>18 Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Conferences, conventions, and meetings</td>
<td>1,615.</td>
<td>719.</td>
<td>654.</td>
<td>242.</td>
</tr>
<tr>
<td>20 Interest</td>
<td>8,791.</td>
<td></td>
<td>4,933.</td>
<td>3,858.</td>
</tr>
<tr>
<td>21 Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Depreciation, depletion, and amortization</td>
<td>172,117.</td>
<td>86,059.</td>
<td>86,058.</td>
<td></td>
</tr>
<tr>
<td>23 Insurance</td>
<td>26,524.</td>
<td>12,977.</td>
<td>13,017.</td>
<td>530.</td>
</tr>
<tr>
<td>24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a STIPENDS</td>
<td>467,420.</td>
<td>467,420.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b TUTION</td>
<td>157,222.</td>
<td>157,222.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c PROGRAM ACTIVITIES</td>
<td>111,478.</td>
<td>111,478.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d AUTO &amp; TRUCK EXPENSES</td>
<td>39,782.</td>
<td>36,048.</td>
<td>1,745.</td>
<td>1,989.</td>
</tr>
<tr>
<td>e All other expenses</td>
<td>157,345.</td>
<td>92,897.</td>
<td>36,557.</td>
<td>27,894.</td>
</tr>
<tr>
<td>25 Total functional expenses. Add lines 1 through 24e</td>
<td>2,073,787.</td>
<td>1,674,208.</td>
<td>314,109.</td>
<td>85,474.</td>
</tr>
</tbody>
</table>

---

**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)
## Balance Sheet

### Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Line 1</th>
<th>Line 2</th>
<th>Line 3</th>
<th>Line 4</th>
<th>Line 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash - non-interest-bearing</td>
<td>1</td>
<td>355,390</td>
<td>1</td>
<td>333,375</td>
<td></td>
</tr>
<tr>
<td>Savings and temporary cash investments</td>
<td>2</td>
<td>259,864</td>
<td>2</td>
<td>266,745</td>
<td></td>
</tr>
<tr>
<td>Pledges and grants receivable, net</td>
<td>3</td>
<td>125,018</td>
<td>3</td>
<td>68,766</td>
<td></td>
</tr>
<tr>
<td>Accounts receivable, net</td>
<td>4</td>
<td>230,975</td>
<td>4</td>
<td>34,737</td>
<td></td>
</tr>
<tr>
<td>Loans and other receivables from current and former officers, directors,</td>
<td>5</td>
<td></td>
<td></td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loans and other receivables from other disqualified persons (as defined</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>under section 4958(b)(1)), persons described in section 4958(c)(3)(B), and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>contributing employers and sponsoring organizations of section 501(c)(9)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>voluntary employees' beneficiary organizations (see instr.). Complete Part II of Schedule L</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Notes and loans receivable, net</td>
<td>7</td>
<td>34,250</td>
<td>7</td>
<td>33,624</td>
<td></td>
</tr>
<tr>
<td>Inventories for sale or use</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Prepaid expenses and deferred charges</td>
<td>9</td>
<td>6,274</td>
<td>9</td>
<td>12,488</td>
<td></td>
</tr>
<tr>
<td>Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>10a</td>
<td>2,740,089</td>
<td>10a</td>
<td>1,961,384</td>
<td></td>
</tr>
<tr>
<td>Less: accumulated depreciation</td>
<td>10b</td>
<td>882,270</td>
<td>10b</td>
<td>1,857,819</td>
<td></td>
</tr>
<tr>
<td>Investments - publicly traded securities</td>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Investments - other securities. See Part IV, line 11</td>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Investments - program-related. See Part IV, line 11</td>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intangible assets</td>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other assets. See Part IV, line 11</td>
<td>15</td>
<td>2,094</td>
<td>15</td>
<td>2,094</td>
<td></td>
</tr>
<tr>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>16</td>
<td>2,975,249</td>
<td>16</td>
<td>2,609,648</td>
<td></td>
</tr>
</tbody>
</table>

### Liabilities

<table>
<thead>
<tr>
<th>Description</th>
<th>Line 1</th>
<th>Line 2</th>
<th>Line 3</th>
<th>Line 4</th>
<th>Line 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>17</td>
<td>362,871</td>
<td>17</td>
<td>199,293</td>
<td></td>
</tr>
<tr>
<td>Grants payable</td>
<td>18</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>19</td>
<td>147,887</td>
<td>19</td>
<td>229,007</td>
<td></td>
</tr>
<tr>
<td>Tax-exempt bond liabilities</td>
<td>20</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td>21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loans and other payables to current and former officers, directors, trustees,</td>
<td>22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>key employees, highest compensated employees, and disqualified persons.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complete Part II of Schedule L</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Secured mortgages and notes payable to unrelated third parties</td>
<td>23</td>
<td>95,259</td>
<td>23</td>
<td>66,324</td>
<td></td>
</tr>
<tr>
<td>Unsecured notes and loans payable to unrelated third parties</td>
<td>24</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other liabilities (including federal income tax, payables to related third</td>
<td>25</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total liabilities. Add lines 17 through 25</td>
<td>26</td>
<td>623,407</td>
<td>26</td>
<td>600,452</td>
<td></td>
</tr>
</tbody>
</table>

### Organizations that follow SFAS 117 (ASC 958)

<table>
<thead>
<tr>
<th>Description</th>
<th>Line 1</th>
<th>Line 2</th>
<th>Line 3</th>
<th>Line 4</th>
<th>Line 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unrestricted net assets</td>
<td>27</td>
<td>2,015,169</td>
<td>27</td>
<td>1,716,321</td>
<td></td>
</tr>
<tr>
<td>Temporarily restricted net assets</td>
<td>28</td>
<td>52,310</td>
<td>28</td>
<td>1,630</td>
<td></td>
</tr>
<tr>
<td>Permanently restricted net assets</td>
<td>29</td>
<td>284,363</td>
<td>29</td>
<td>291,245</td>
<td></td>
</tr>
<tr>
<td>Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Net Assets or Fund Balances

<table>
<thead>
<tr>
<th>Description</th>
<th>Line 1</th>
<th>Line 2</th>
<th>Line 3</th>
<th>Line 4</th>
<th>Line 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capital stock or trust principal, or current funds</td>
<td>30</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>31</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retained earnings, endowment, accumulated income, or other funds</td>
<td>32</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total net assets or fund balances</td>
<td>33</td>
<td>2,351,842</td>
<td>33</td>
<td>2,009,196</td>
<td></td>
</tr>
<tr>
<td>Total liabilities and net assets/fund balances</td>
<td>34</td>
<td>2,975,249</td>
<td>34</td>
<td>2,609,648</td>
<td></td>
</tr>
</tbody>
</table>
### Part XI Reconciliation of Net Assets

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>$1,820,523</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>$2,073,787</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>-$253,264</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>$2,351,842</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
<td>-$7,615</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>-$81,767</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
<td>$2,009,196</td>
</tr>
</tbody>
</table>

### Part XII Financial Statements and Reporting

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990: Cash</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Accrual</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; 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?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>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?</td>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Form 990 (2015)
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.

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

Name of the organization: WAIANAE COMMUNITY RE-DEVELOPMENT

Employer identification number: 99-0350803

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 11, 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 or 990-EZ).)
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). Enter the hospital's name, city, and state:
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). (Complete Part II.)
6. A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. 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)(vii). (Complete Part II.)
8. A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
9. An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
10. An organization organized and operated exclusively for testing public safety. See section 509(a)(4).
11. 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 described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.

a. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. 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), by having control or management of the supporting organization 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, its 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 its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.

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:

Provide the following information about the supported organization(s):

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-9 above (see instructions))</th>
<th>(iv) Is the organization listed in your governing document?</th>
<th>(v) Amount of monetary support (see instructions)</th>
<th>(vi) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total

LHA For Paperwork Reduction Act Notice, see the instructions for Schedule A (Form 990 or 990-EZ) 2015

Form 990 or 990-EZ 532021 09-23-15
## WAIANAE COMMUNITY RE-DEVELOPMENT

### Schedule A (Form 990 or 990-EZ) 2015 Corporation 99-0350803 Page 2

#### 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

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2011</th>
<th>(b) 2012</th>
<th>(c) 2013</th>
<th>(d) 2014</th>
<th>(e) 2015</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>membership fees received. (Do not</td>
<td>734,003</td>
<td>919,445</td>
<td>933,849</td>
<td>2052819</td>
<td>1737640</td>
<td>6377756</td>
</tr>
<tr>
<td>include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Tax revenues levied for the</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization's benefit and either paid to</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 The value of services or facilities</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>furnished by a governmental unit to</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3</td>
<td>734,003</td>
<td>919,445</td>
<td>933,849</td>
<td>2052819</td>
<td>1737640</td>
<td>6377756</td>
</tr>
<tr>
<td>5 The portion of total contributions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>by each person (other than a governmental</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>unit or publicly supported organization</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>included on line 1 that exceeds 2% of</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Public support. Subtract line 5 from</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2011</th>
<th>(b) 2012</th>
<th>(c) 2013</th>
<th>(d) 2014</th>
<th>(e) 2015</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4</td>
<td>734,003</td>
<td>919,445</td>
<td>933,849</td>
<td>2052819</td>
<td>1737640</td>
<td>6377756</td>
</tr>
<tr>
<td>8 Gross income from interest,</td>
<td></td>
<td></td>
<td></td>
<td>7,125</td>
<td>6,487</td>
<td>14,496</td>
</tr>
<tr>
<td>dividends, payments received on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>securities loans, rents, royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Net income from unrelated business</td>
<td></td>
<td></td>
<td></td>
<td>11,683</td>
<td>57,007</td>
<td>7,883</td>
</tr>
<tr>
<td>activities, whether or not the business</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Other income. Do not include gain or</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>loss from the sale of capital</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through</td>
<td>734,003</td>
<td>919,445</td>
<td>933,849</td>
<td>2052819</td>
<td>1737640</td>
<td>6377756</td>
</tr>
<tr>
<td>12 Gross receipts from related activities,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>etc. (see instructions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 First five years. If the Form 990 is for</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>the organization's first, second, third,</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>fourth, or fifth tax year as a section 501(c)(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>organization, check this box and stop</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

| 14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) | 14 | 72.95 | % |
| 15 Public support percentage from 2014 Schedule A, Part II, line 14 | 15 | 75.95 | % |

16a 33 1/3% support test - 2015. 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.

17a 10% -facts-and-circumstances test - 2015. 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.

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.
## Part III Support Schedule for Organizations Described in Section 501(c)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

### Section A. Public Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2011</th>
<th>(b) 2012</th>
<th>(c) 2013</th>
<th>(d) 2014</th>
<th>(e) 2015</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Section B. Total Support

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2011</th>
<th>(b) 2012</th>
<th>(c) 2013</th>
<th>(d) 2014</th>
<th>(e) 2015</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>□</td>
</tr>
</tbody>
</table>

### Section C. Computation of Public Support Percentage

| Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) |          |          |          |          |          |          | 15 % |
| Public support percentage from 2014 Schedule A, Part III, line 15 |          |          |          |          |          |          | 16 % |

### Section D. Computation of Investment Income Percentage

| Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f)) |          |          |          |          |          |          | 17 % |
| Investment income percentage from 2014 Schedule A, Part III, line 17 |          |          |          |          |          |          | 18 % |

19a 33 1/3% support tests - 2015. 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 - 2014. 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.
Section A. All Supporting Organizations

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3c</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4c</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5b</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5c</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9b</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9c</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>----------</td>
<td>-----</td>
<td>----</td>
</tr>
<tr>
<td>11a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Section B. Type I Supporting Organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Section C. Type II Supporting Organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Section D. All Type III Supporting Organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Section E. Type III Functionally-Integrated Supporting Organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule A (Form 990 or 990-EZ) 2015

99-0350803

Page 5
### Part V: Type III Non-Functionally Integrated 501(c)(3) Supporting Organizations

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 Sections A through E.

#### Section A - Adjusted Net Income

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Net short-term capital gain</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Recoveries of prior-year distributions</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Other gross income (see instructions)</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Add lines 1 through 3</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Depreciation and depletion</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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)</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Other expenses (see instructions)</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)</td>
<td>8</td>
</tr>
</tbody>
</table>

#### Section B - Minimum Asset Amount

<table>
<thead>
<tr>
<th></th>
<th>(A) Prior Year</th>
<th>(B) Current Year (optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Average monthly value of securities</td>
<td>1a</td>
</tr>
<tr>
<td></td>
<td>b Average monthly cash balances</td>
<td>1b</td>
</tr>
<tr>
<td></td>
<td>c Fair market value of other non-exempt-use assets</td>
<td>1c</td>
</tr>
<tr>
<td></td>
<td>d Total (add lines 1a, 1b, and 1c)</td>
<td>1d</td>
</tr>
<tr>
<td></td>
<td>e Discount claimed for blockage or other factors (explain in detail in Part VI):</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Acquisition indebtedness applicable to non-exempt-use assets</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2 from line 1d</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Net value of non-exempt-use assets (subtract line 4 from line 3)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Multiply line 5 by .035</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Recoveries of prior-year distributions</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Minimum Asset Amount (add line 7 to line 6)</td>
<td>8</td>
</tr>
</tbody>
</table>

#### Section C - Distributable Amount

<table>
<thead>
<tr>
<th></th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Adjusted net income for prior year (from Section A, line 8, Column A)</td>
</tr>
<tr>
<td>2</td>
<td>Enter 85% of line 1</td>
</tr>
<tr>
<td>3</td>
<td>Minimum asset amount for prior year (from Section B, line 8, Column A)</td>
</tr>
<tr>
<td>4</td>
<td>Enter greater of line 2 or line 3</td>
</tr>
<tr>
<td>5</td>
<td>Income tax imposed in prior year</td>
</tr>
<tr>
<td>6</td>
<td>Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)</td>
</tr>
</tbody>
</table>

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)

<table>
<thead>
<tr>
<th>Section D - Distributions</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Amounts paid to supported organizations to accomplish exempt purposes</td>
</tr>
<tr>
<td>2</td>
<td>Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity</td>
</tr>
<tr>
<td>3</td>
<td>Administrative expenses paid to accomplish exempt purposes of supported organizations</td>
</tr>
<tr>
<td>4</td>
<td>Amounts paid to acquire exempt-use assets</td>
</tr>
<tr>
<td>5</td>
<td>Qualified set-aside amounts (prior IRS approval required)</td>
</tr>
<tr>
<td>6</td>
<td>Other distributions (describe in Part VI). See instructions.</td>
</tr>
<tr>
<td>7</td>
<td>Total annual distributions. Add lines 1 through 6.</td>
</tr>
<tr>
<td>8</td>
<td>Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.</td>
</tr>
<tr>
<td>9</td>
<td>Distributable amount for 2015 from Section C, line 6</td>
</tr>
<tr>
<td>10</td>
<td>Line 8 amount divided by Line 9 amount</td>
</tr>
</tbody>
</table>

#### Section E - Distribution Allocations (see instructions)

<table>
<thead>
<tr>
<th></th>
<th>(i) Excess Distributions</th>
<th>(ii) Underdistributions Pre-2015</th>
<th>(iii) Distributable Amount for 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Distributable amount for 2015 from Section C, line 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Excess distributions carryover, if any, to 2015:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>From 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>From 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Total of lines 3a through 3e</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Applied to 2015 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Carryover from 2010 not applied (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Remainder. Subtract lines 3g, 3h, and 3i from 3f.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Distributions for 2015 from Section D, line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Applied to underdistributions of prior years</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Applied to 2015 distributable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Remainder. Subtract lines 4a and 4b from 4.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Excess distributions carryover to 2016. Add lines 3j and 4c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Breakdown of line 7:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Excess from 2013</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Excess from 2014</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Excess from 2015</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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, 3b, 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.)
<table>
<thead>
<tr>
<th>Contributor's Name</th>
<th>Total Contributions</th>
<th>Excess Contributions</th>
</tr>
</thead>
<tbody>
<tr>
<td>KAMEHAMEHA SCHOOLS</td>
<td>1,679,189</td>
<td>1,549,540</td>
</tr>
<tr>
<td>KL FELICITAS FOUNDATION</td>
<td>318,628</td>
<td>188,979</td>
</tr>
<tr>
<td>THE KRESGE FOUNDATION</td>
<td>150,000</td>
<td>20,351</td>
</tr>
</tbody>
</table>

Total Excess Contributions to Schedule A, Part II, Line 5: 1,758,870.
Name of the organization: WAIANAE COMMUNITY RE-DEVELOPMENT CORPORATION

Employer identification number: 99-0350803

Organization type (check one):

- [X] 501(c)(3) (enter number) organization
- 4947(a)(1) nonexempt charitable trust not treated as a private foundation
- 527 political organization
- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

- [X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vii), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) $5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling $5,000 or more during the year

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)
<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>U.S. DEPT OF HEALTH &amp; HUMAN SERVICES-ADMINISTRATION FOR NATI 400 MARYLAND AVE, SW WASHINGTON, DC 20202</td>
<td>$244,651</td>
<td>Person ☑</td>
</tr>
<tr>
<td>2</td>
<td>KAMEHAMEHA SCHOOLS 567 S KING STREET HONOLULU, HI 96813</td>
<td>$576,841</td>
<td>Person ☑</td>
</tr>
<tr>
<td>3</td>
<td>HAWAII ALLIANCE FOR COMMUNITY 677 ALA MOANA BLVD - STE 702 HONOLULU, HI 96813</td>
<td>$257,186</td>
<td>Person ☑</td>
</tr>
<tr>
<td>4</td>
<td>OFFICE OF HAWAIIAN AFFAIRS 560 N NIMITZ HWY #200 HONOLULU, HI 96817</td>
<td>$163,823</td>
<td>Person ☑</td>
</tr>
<tr>
<td>5</td>
<td>U.S. DEPT OF HEALTH &amp; HUMAN SERVICES-ASSETS FOR INDEPENDENCE 200 INDEPENDENCE AVE, SW WASHINGTON, DC 20201</td>
<td>$53,709</td>
<td>Person ☑</td>
</tr>
<tr>
<td>6</td>
<td>RESEARCH CORPORATION OF THE UNIVERSITY OF HAWAII 2800 WOODLAWN DRIVE - STE 200 HONOLULU, HI 96822</td>
<td>$114,840</td>
<td>Person ☑</td>
</tr>
<tr>
<td>(a) No.</td>
<td>(b) Name, address, and ZIP + 4</td>
<td>(c) Total contributions</td>
<td>(d) Type of contribution</td>
</tr>
<tr>
<td>---------</td>
<td>--------------------------------</td>
<td>-------------------------</td>
<td>-------------------------</td>
</tr>
<tr>
<td>7</td>
<td><strong>THE KL FELICITAS FOUNDATION</strong></td>
<td>$208,628</td>
<td>Person [X]</td>
</tr>
<tr>
<td></td>
<td>707 GRANT STREET - STE 1140</td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td>PITTSBURGH, PA 15219</td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Person</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Complete Part II for noncash contributions.)</td>
</tr>
</tbody>
</table>

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)
<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Description of noncash property given</th>
<th>(c) FMV (or estimate) (see instructions)</th>
<th>(d) Date received</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information.) $5.

Use duplicate copies of Part III if additional space is needed.

<table>
<thead>
<tr>
<th>(a) No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
<th>(e) Transfer of gift</th>
<th>Transferee's name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**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.

<table>
<thead>
<tr>
<th></th>
<th>(a) Donor advised funds</th>
<th>(b) Funds and other accounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total number at end of year</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Aggregate value of contributions (during year)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Aggregate value of grants from (during year)</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Aggregate value at end of year</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>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?</td>
<td>☐ Yes ☐ No</td>
</tr>
<tr>
<td>6</td>
<td>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?</td>
<td>☐ Yes ☐ No</td>
</tr>
</tbody>
</table>

**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 (e.g., recreation or education)
   - Protection of natural habitat
   - Preservation of a historically important land area
   - 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.
   - Total number of conservation easements
   - Total acreage restricted by conservation easements
   - Number of conservation easements on a certified historic structure included in (a)
   - Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

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? ☐ Yes ☐ No

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)? ☐ Yes ☐ No

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 SFAS 116 (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 SFAS 116 (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:
   - Revenue included on Form 990, Part VIII, line 1
   - Assets included on 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 SFAS 116 (ASC 958) relating to these items:
   - Revenue included on Form 990, Part VIII, line 1
   - Assets included on Form 990, Part X
### 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 are a significant use of its collection items (check all that apply):
   - a. Public exhibition
   - d. Loan or exchange programs
   - b. Scholarly research
   - e. Other
   - c. Preservation for future generations

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

1b. If "Yes," explain the arrangement in Part XIII and complete the following table:

<table>
<thead>
<tr>
<th>Amount</th>
<th>1c</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2a. Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? □ Yes □ No

2b. 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.

1a. Beginning of year balance

<table>
<thead>
<tr>
<th>(a) Current year</th>
<th>(b) Prior year</th>
<th>(c) Two years back</th>
<th>(d) Three years back</th>
<th>(e) Four years back</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b. Contributions

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

1c. Net investment earnings, gains, and losses

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

1d. Grants or scholarships

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

1e. Other expenditures for facilities and programs

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

1f. Administrative expenses

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

1g. End of year balance

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

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. Temporarily restricted 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 □ 3a(i)
   - (ii) related organizations □ 3a(ii)

3b. If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? □ 3b

### 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.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a. Land</td>
<td>1,343,372</td>
<td></td>
<td>1,343,372</td>
<td></td>
</tr>
<tr>
<td>b. Buildings</td>
<td>163,568</td>
<td>27,261</td>
<td>136,307</td>
<td></td>
</tr>
<tr>
<td>c. Leasehold improvements</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Equipment</td>
<td>474,893</td>
<td>294,241</td>
<td>180,652</td>
<td></td>
</tr>
<tr>
<td>e. Other</td>
<td>758,256</td>
<td>560,768</td>
<td>197,488</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c) ▶ 1,857,819.
**WAIANAE COMMUNITY RE-DEVELOPMENT CORPORATION**  
99-0350803  Page 3

**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.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(F)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(G)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total. (Col. (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, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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.

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
</tr>
<tr>
<td>(8)</td>
<td></td>
</tr>
</tbody>
</table>

**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**
<table>
<thead>
<tr>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
</tr>
<tr>
<td>2. CREDIT CARD PAYABLE 9,937.</td>
</tr>
<tr>
<td>(3) ACCRUED SALARIES &amp; WAGES 66,639.</td>
</tr>
<tr>
<td>(4) LINE OF CREDIT 29,252.</td>
</tr>
<tr>
<td>(5)</td>
</tr>
<tr>
<td>(6)</td>
</tr>
<tr>
<td>(7)</td>
</tr>
<tr>
<td>(8)</td>
</tr>
<tr>
<td>(9)</td>
</tr>
</tbody>
</table>

**Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)** 105,828.

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

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

### 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.

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

### Part III: 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 X, Line 2:**

**FOOTNOTE TO FINANCIAL STATEMENTS - INCOME TAXES:** The organization is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code and is classified as an organization that is not a private foundation as defined in Section 509(a) of the Internal Revenue Code. The organization is also exempt from state income taxes under Section 235 of the Hawaii Revised Statutes.

---

**IN EVALUATING A TAX POSITION FOR RECOGNITION, THE ORGANIZATION EVALUATES WHETHER IT IS MORE-LIKELY-THAN-NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION, INCLUDING RESOLUTION OF RELATED APPEALS OR LITIGATION PROCESSES, BASED ON THE TECHNICAL MERITS OF THE POSITION. IF A TAX**
POSITION MEETS THE MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD, THE TAX
POSITION IS MEASURED AND RECOGNIZED AS THE LARGEST AMOUNT OF TAX BENEFIT
THAT, IN MANAGEMENT'S JUDGMENT, IS GREATER THAN 50% LIKELY OF BEING
REALIZED UPON ULTIMATE SETTLEMENT.

IT IS THE ORGANIZATION'S POLICY TO RECOGNIZE ACCRUED INTEREST RELATED TO
ANY UNRECOGNIZED TAX BENEFITS, AS WELL AS, ANY RELATED PENALTIES IN OTHER
EXPENSES. THE ORGANIZATION DID NOT RECOGNIZE ANY INTEREST OR PENALTIES
ASSOCIATED WITH UNRECOGNIZED TAX BENEFITS AT DECEMBER 31, 2014 AND 2013.

PART XI, LINE 2D - OTHER ADJUSTMENTS:
FUNDRAISING EXPENSE NETTED WITH FUNDRAISING INCOME 1,005.

PART XI, LINE 4B - OTHER ADJUSTMENTS:
DEFERRED REVENUE 81,320.

PART XII, LINE 2D - OTHER ADJUSTMENTS:
FUNDRAISING EXPENSE NETTED WITH FUNDRAISING INCOME 1,005.
PENALTIES 447.
TOTAL TO SCHEDULE D, PART XII, LINE 2D 1,452.
**Part I. Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1. Indicate whether the organization raised funds through any of the following activities. Check all that apply:
   - Mail solicitations
   - Internet and email solicitations
   - Phone solicitations
   - In-person solicitations
   - Solicitation of non-government grants
   - Solicitation of government grants
   - Special fundraising events

2. a. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?
   - Yes
   - No

   b. If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

<table>
<thead>
<tr>
<th>(i) Name and address of individual or entity (fundraiser)</th>
<th>(ii) Activity</th>
<th>(iii) Did fundraiser have custody or control of contributions?</th>
<th>(iv) Gross receipts from activity</th>
<th>(v) Amount paid to (or retained by) fundraiser listed in col. (i)</th>
<th>(vi) Amount paid to (or retained by) organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

---

**Schedule G (Form 990 or 990-EZ) 2015**

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

**Name of the organization**

**CORPORATION**

**Employer Identification number**

99-0350803
### Part II Fundraising Events

Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1</th>
<th>(b) Event #2</th>
<th>(c) Other events NONE</th>
<th>(d) Total events (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gross receipts</td>
<td>43,310.</td>
<td>43,310.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Less: Contributions</td>
<td>43,310.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Gross income (line 1 minus line 2)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Cash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Noncash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Food and beverages</td>
<td>1,005.</td>
<td>1,005.</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Entertainment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Other direct expenses</td>
<td>1,439.</td>
<td>1,439.</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Direct expense summary. Add lines 4 through 9 in column (d)</td>
<td></td>
<td>2,444.</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Net income summary. Subtract line 10 from line 3, column (d)</td>
<td></td>
<td>-2,444.</td>
<td></td>
</tr>
</tbody>
</table>

### Part III Gaming

Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col. (a) through col. (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gross revenue</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Cash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Noncash prizes</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Other direct expenses</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Volunteer labor</td>
<td>Yes %</td>
<td>Yes %</td>
<td>Yes %</td>
</tr>
<tr>
<td>7</td>
<td>Direct expense summary. Add lines 2 through 5 in column (d)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Net gaming income summary. Subtract line 7 from line 1, column (d)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain:

[Space for explanation]

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain:

[Space for explanation]
11 Does the organization conduct gaming activities with nonmembers? □ Yes □ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? □ Yes □ No

13 Indicate the percentage of gaming activity conducted in:
   a The organization’s facility ........................................... 13a %
   b An outside facility ..................................................... 13b %

14 Enter the name and address of the person who prepares the organization’s gaming/special events books and records:
   Name ▶
   Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? □ Yes □ No

b If “Yes,” enter the amount of gaming revenue received by the organization ▶ $ ___________ and the amount of gaming revenue retained by the third party ▶ $ ___________.

c If “Yes,” enter name and address of the third party:
   Name ▶
   Address ▶

16 Gaming manager information:
   Name ▶
   Gaming manager compensation ▶ $ ___________
   Description of services provided ▶

   □ Director/officer □ Employee □ Independent contractor

17 Mandatory distributions:
   a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? □ Yes □ No
   b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization’s own exempt activities during the tax year ▶ $

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).
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.

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

Name of the organization: WAIANAE COMMUNITY RE-DEVELOPMENT CORPORATION

Employer identification number: 99-0350803

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
OPERATION OF A COMPREHENSIVE RANGE OF COMMUNITY-BASED INTER-WOVEN ACTIVITIES, INCLUDING AN ORGANIC FARM, COLLEGE DEGREE PROGRAMS, INTERNSHIPS, AND IN SCHOOL CURRICULUM BASED CLASSES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CLASSES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
PRODUCTS/SERVICES AND PROMOTES/ builds a community building movement focused on cultural connection, youth empowerment, community, food security, social advocacy/capacity and "green" workforce/career pathways.

YOUNG ADULTS FROM THE WAIANAE COAST PARTICIPATE IN THE EDU-PRISE PROGRAM AS ORGANIC FARMING INTERNS. MOST ARE FIRST IN THEIR FAMILIES TO ENTER COLLEGE LEVEL COURSES, WITH THE AVERAGE HOUSEHOLD INCOME BELOW THE STATE POVERTY LINE. THE ORGANIZATION HAS MADE INROADS IN THE LOCAL EDUCATION SYSTEM, ALLOWING FOR GREATER COMMUNITY INPUT IN HOW "AT-RISK" YOUTH ARE ABLE TO ENTER AND SUCCEED IN HIGHER EDUCATION. THE ORGANIZATION IS HELPING TO CREATE A CULTURE OF COLLEGE IN A COMMUNITY THAT HAS BEEN TRADITIONALLY UNDER-REPRESENTED IN HIGHER EDUCATION.

IN 2015 YOUTH FROM PRE-K TO POST-SECONDARY PARTICIPATED IN THE EDU-PRENEURIAL PROGRAMS OF THE ORGANIZATION. THE FLAGSHIP PROGRAM IS THE YOUTH LEADERSHIP TRAINING PROGRAM IN WHICH YOUTH IDENTIFIED AT RISK.
FOR POST SECONDARY OPPORTUNITY ARE ENGAGED AND SUPPORTED TO PARTICIPATE
AS FULL TIME COLLEGE STUDENTS WHILE PERFORMING AS ENTREPRENEURS IN THE
KAUHALE SOCIAL ENTERPRISES WHICH INCLUDE MA'O ORGANIC FARMS, SEARIDER
PRODUCTIONS AND MAKAHA STUDIOS.

THE ORGANIZATION'S GOAL IS TO ASSIST YOUTH IN RETENTION, MATRICULATION
AND ATTAINMENT OF A POST-SECONDARY DEGREE. TO DO THAT, THE ORGANIZATION
PROVIDES A CONTEXT THAT EMPOWERS YOUTH LEADERS TO KNOW THEIR CULTURAL
IDENTITY, COMMUNAL RESOURCES, THE COLLEGE CONTEXT AND NAVIGATION OF
THEIR FINANCIAL AND SOCIAL STATUS.

THE ORGANIZATION'S ARRAY OF 'AUWAI PROGRAMS PRODUCED 7,250 VISITORS,
1,200 STUDENTS SERVED IN THE FARM TO FORK PROGRAMMING (PRE-K TO 12TH
GRADE) AND 252 HIGH SCHOOL AND COLLEGE INTERNSHIPS. THE QUALITY OF THE
ORGANIZATION'S ENGAGEMENT IS EXCELLENT (COMPAARED TO MAINSTREAM,
CONVENTIONAL STATISTICS) AND IS STEADILY IMPROVING; RETENTION IS STEADY
AT 52%, ATTAINMENT CURRENTLY AT 42% IS CONINTUALLY IMPROVING AND
MATRICULATION TO A POST-SECONDARY DEGREE IS 90%.

FORM 990, PART VI, SECTION A, LINE 2:
DIRECTOR EDWARD KENNEY AND DIRECTOR KRISTEN KENNEY ARE HUSBAND AND WIFE.

OPERATIONS DIRECTOR GARY MAUNAKEA-FORTH AND EXECUTIVE DIRECTOR J KUKUI
MAUNAKEA-FORTH ARE HUSBAND AND WIFE

FORM 990, PART VI, SECTION B, LINE 11:
The executive director and operations director review the form 990 for
accuracy and completeness and approve the filing of the return. A copy of
THE FORM 990 (ELECTRONIC OR PAPER) IS ALSO PROVIDED TO EACH MEMBER OF THE BOARD OF DIRECTORS FOR REVIEW.

FORM 990, PART VI, SECTION B, LINE 12C:
THE BOARD OF DIRECTORS REVIEWS THE CONFLICT OF INTEREST POLICY ANNUALLY. ALSO, EACH YEAR ALL BOARD MEMBERS ARE REQUIRED TO SUBMIT A CONFLICT OF INTEREST DECLARATION TO INCLUDE ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST. THE BOARD REVIEWS THE CONFLICT DECLARATIONS AND MAKES ANY REQUIRED DETERMINATIONS REGARDING THE DECLARATIONS MADE.

FORM 990, PART VI, SECTION B, LINE 15A:
COMPENSATION OF THE EXECUTIVE DIRECTOR AND OPERATIONS DIRECTOR IS DETERMINED BY THE BOARD OF DIRECTORS THROUGH A REVIEW OF COMPARABLE COMPENSATION FOR SIMILAR POSITIONS BASED ON COMPENSATION GUIDELINES OBTAINED FROM NON-PROFIT ORGANIZATION RESOURCES. ANNUAL PERFORMANCE REVIEWS ARE ALSO CONDUCTED TO DETERMINE THE APPROPRIATENESS OF THE COMPENSATION LEVELS.

FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION’S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:
OTHER:
PROGRAM SERVICE EXPENSES 159,762.
MANAGEMENT AND GENERAL EXPENSES 48,945.
FUNDRAISING EXPENSES 0.
TOTAL EXPENSES 208,707.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 208,707.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

DEFERRED REVENUE -81,320.

PENALTIES NOT INCLUDED ON FORM 990 -447.

TOTAL TO FORM 990, PART XI, LINE 9 -81,767.