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Form **990** 

## Return of Organization Exempt From Income Tax

2000 9

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

QUUS
Open to Public

		nue Sernica Pie organization may have to use a copy of this return t				inspection	
<u>A</u>	For th	, , , , , , , , , , , , , , , , , , , ,	2009, and end	ing JUN		, <u>20 10</u>	
В	Ineck if a	applicable Please C Name of organization RECYCLE HAWAII				er identification number	
Ki A	Address	change label or Comy business As				-0293381	
	Name ci	nange print or Number and street (or P.O. box if mail is not delivered to street address	ss) Room/s	unte	E Telepho		
	nitial re:	turn See 165 KEAWE STREET, SUITE 108	<u> </u>		(808	) 965-9984	
,	Termina	sted Instruc- City or town, state or country and ZIP + 4					
$\Box$	\menda	ed return tions HTLO, HJ 96720			G Gross res	ceips <b>s</b> 1,059,247	
		on pending F Name and address of principal officer PAUL BUKLAREV	WICZ	H(a) Is this	a group return	for affifiales? Yes No	
	•	SAME AS C ABOVE.				ncluded?  Yes No	
1	Tax-exe	empt status.   ⊠ 501(c) (3 )   (insert no.)  □ 4947(a)(1) or □ 527		II ~N	o,* attach a l	ist (see instructions)	
J	Websi	ite ▶WWW.RECYCLEHAWAII.ORG		H(c) Group	exemption num	nber 🕨	
K	Form of	organization ⊠ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of forma	ation 1992	M · State of	legal domicile H.I.	
P		Summary					
		Briefly describe the organization's mission or most significant active	vities TO F	PROMOTE	RESOU	RCE AWARENESS	
		AND RECYCLING ENTERPRISES IN HAWAII.			ATING	THE COMMUNITY	
อ		ABOUT SOUND RESOURCE MANAGEMENT AND R	RECYCLIN	G OPPOR	TUNIT:	IES FOR A MORE	
rua Lua		ENVIRONMENTALLY SUSTAINABLE FUTURE.					
Governance		Check this box ▶ ☐ if the organization discontinued its operations or disposed of	of more than 25%	6 of its net asset	'S		
	:	Number of voting members of the governing body (Part VI, line 1)		,	3	7	
တို ဟ		Number of independent voting members of the governing body (Fax Vi, line of		h)	4	7	
Activities	l .		art VI, mic i	U,	5	12	
ŧ	1	Total number of employees (Part V. line 2a)		•	6	50	
⋖		Total number of volunteers (estimate if necessary)			7a	0	
		Total gross unrelated business revenue from Part VIII, column (C) Net unrelated business taxable income from Form 990-T, line 34	), ine 12		7b		
	J	14et (Attended Doubless taxable treetine north forth 300-1, the 04	<u> </u>	Prior Y		Current Year	
	_				6,191	867,181	
re	1	Contributions and grants (Part VIII, line 1h)	•		4,041	188,474	
Revenue		Program service revenue (Part VIII, line 2g)	•	13	278	130,474	
å		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	•				
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and	111e) .		1,094	3,414	
		Total revenue—add lines 8 through 11 (must equal Part VII) column		38	1;604	1,059,247	
		Grants and similar amounts paid (Part-IX_column (A), Mines_1-3)	.	ļ <u>.</u>		0	
	14	Benefits paid to or for members (Parl IX, column (A), line 4)	윘 .		1 007	100 101	
Ses		Salaries, other compensation, employed benefits (Part &, 2011) (A)	Jines 5–10)	29	1,227	406,181	
sasuadxe		Professional fundraising fees (Part IX, column (A), line 11e)	5			C	
Ä		Total fundraising expenses (Part IX, column (B) Line 25) ▶ □ α	$\{1,7,189\}$	ļ	2 2 2 2		
		Other expenses (Part IX, column (A), lines 7 (2) (N) 11 -247)	1 .		0,789	677,820	
	18	Total expenses Add lines 13-17 (must equal art IX, column (A),	line 25)		2,016	1,084,001	
		Revenue less expenses. Subtract line 18 from line 12 .		11	<del></del>	(24,754)	
s or				Beginning of C		End of Year	
Assots d Balan	20	Total assets (Part X, line 16).		25	3,815	179,874	
A P	21	Total liabilities (Part X, line 26)		7	8,207	29,020	
Net A		Net assets or fund balances Subtract line 21 from line 20	<del></del>	17	<u>5,608 </u>	150,854	
	Ji II	Signature Block					
		. Under penalties of perjury. I declare that I have examined this return, including actification of preparer (other than of	companying scale	edules and state	ments, and to	o the best of my knowledge	
		and belief, it is the confer and comblete bedatation of preparer (other than of	incer) is based t				
Sig	วูก	- Vaya Coses		L.	lay 13	, 2011	
He	-	Signal crelor Officely		Da	te		
		J. Jay West, President			•		
		Type or print name and title	· · · · · · · · · · · · · · · · · · ·				
	Preparer's Date Check if Preparer's identifying number						
0-1		signature 10 4		self. employed ► 🏻	(see instruct	uons)	
Paid		1 64/6/1. 13/	13/11 :	•	_ P	00994702	
	parer's	Tram's name (or yours AWLEX J. SMITH, CPA		EIN	>		
Use	Only	address, and ZIP - 4 1403 FRANK ST., HONOLULI	J, HT 96	5816 Phone (	no ▶ (80	08)737-7761	
Ma	v the	IRS discuss this return with the preparer shown above? (see inst				. X Yes No	

1 Breifly describe the organization's mission TO PROMOTE RESOURCE AWARENESS AND RECYCLING ENTERPRISES IN HAWAII. INCLUDES EDUCATING THE COMMUNITY ABOUT SOUND RESOURCE MANAGEMENT AND RECYCLING OPPORTUNITIES FOR A MORE ENVIRONMENTALLY SUSTAINABLE FUTURE.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Par	t III Statement of Program Service Accomplishments
INCLUDES EDUCATING THE COMMUNITY ABOUT SOUND RESCURCE MANAGEMENT AND RECYCLING OPPORTUNITIES FOR A MORE ENVIRONMENTALLY SUSTAINABLE FUTURE.  2 Did the organization creates any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If 'Yes,' describe these new services on Schedule O  Dut the organization crease conducting, or make significant changes in how it conducts, any program services?  If 'Yes,' describe these changes on Schedule O  Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 947(a)(1) trusts 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	1	Briefly describe the organization's mission
RECYCLING OPPORTUNITIES FOR A MORE ENVIRONMENTALLY SUSTAINABLE FUTURE.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E27		TO PROMOTE RESOURCE AWARENESS AND RECYCLING ENTERPRISES IN HAWAII.
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<del></del>	4d	
	4e	Total program service expenses ► 990,580

Par	Checklist of Required Schedules		· ·	- N
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		<u>x</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		_x_
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8	· · · · · · · · · · · · · · · · · · ·	X
9	Did the organization report an amount in Part X, line 21, 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	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Х	24.44
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI			
•	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			
•	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		هي ه سو ،	
•	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	,		* \$7,
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	·		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13	ļ	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	X_
b	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I.	14b		<u>x</u> _
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15_	-	Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		х
<u>20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	000	X

Pai	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	-	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
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)		1 83	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<u>X</u>
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? <i>If "Yes," complete Schedule R, Part I</i>	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		_X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			177
38	Part VI	37	Х	<u> </u>
			_	40000

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
		ا ــــــ	Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns Enter -0- if not applicable		. e .	\$ . W. W
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		1	4
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c	<b>Y</b>	"
	gaming (gambling) winnings to prize winners?	. 1/3	m ,1	-31
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 12	-4 giv. 14	*** ; ;	1 163
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	"ivs. Afri	**, '*, '	
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	· <sub>x</sub> · ·	<u>*</u> X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b		
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)?	4a		X
b	If "Yes," enter the name of the foreign country	٠. ا	,	
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	ا ا ا	, s	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	_		
٠.	Prohibited Tax Shelter Transaction?	5c 6a		X
	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?	Ja		<u> </u>
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	*	5. ,	· 👊
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	ــــــــــــــــــــــــــــــــــــــ	X
	and services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Х	
d	If "Yes," indicate the number of Forms 8282 filed during the year	1	,	, 9,
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	1	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		х
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	]		
	organization, have excess business holdings at any time during the year?	8		ļ
	Sponsoring organizations maintaining donor advised funds.			
_	Did the organization make any taxable distributions under section 4966?	9a 9b		
b 10	Did the organization make a distribution to a donor, donor advisor, or related person?	30		
10 a	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	]		
11	Section 501(c)(12) organizations. Enter	]		
	Gross income from members or shareholders	<b>j</b>		
	Gross income from other sources (Do not net amounts due or paid to other sources against			
122	amounts due or received from them)	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b			

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

Sec	tion A. Governing Body and Management			
	f 1 _	33 Jakia	Yes	No ************************************
1a	Enter the number of voting members of the governing body		्रभ्य ्र	
b	Enter the number of voting members that 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?	2		_X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Χ
6	Does the organization have members or stockholders?	6	Χ	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	Χ	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			8
•	the year by the following	 		المداعدت
а	The governing body?	8a	Х	
		8b	Х	
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	9a		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte			
	renue Code )			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
100	Dece the experimental have lead charters branches or offiliates?	10a		X
	Does the organization have local chapters, branches, or affiliates?			
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	105		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11	х	
444	form?	•••		ī
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	х	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	IZa		
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	42h	v	
	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	Х	
4.0	describe in Schedule O how this is done	13	^	Х
13	Does the organization have a written whistleblower policy?	14		X
14	Does the organization have a written document retention and destruction policy?	14		
15	Did the process for determining compensation of the following persons include a review and approval by	Ján,	1	-46
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			لـنــــــــــــــــــــــــــــــــــــ
а	The organization's CEO, Executive Director, or top management official	15a	X	
b		15b		X 4
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	*		3
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?	16a		<u>X_</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	**	`	*;
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► HAWAII			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	)(3)s	only)	
	available for public inspection. Indicate how you make these available. Check all that apply			
	☐ Own website ☒ Another's website ☒ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rds o	f the	
	organization ► PAUL BUKLAREWICZ, 165 KEAWE ST, #108, HILO HI 96720-(80	8)9	69-	2012

## 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. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees 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 the organization did not con	mpensate a	any ci	ırre	nt o	ffic	er, dır	ecto	or, or trustee		
(A)	(B) (C) (D) (E) Average Position (check all that apply) Reportable Reportable							(F)		
Name and Title	Average hours per week	দাdividual trustee e or director	nstitutional trustee	Officer	Key employee	Highest compensated at employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
JAY WEST										
PRESIDENT	2.5	X		X			L	0	0	0
MEALOHA KRAUS										
VICE PRESIDENT	2.5	X		Х				0	0	0
SHANNON V. HARBAUGH										
SECRETARY	2.5	X		Х				0	0	0
GAIL E. MADIE										
TREASURER	2.5	X		X			L	0	0	0
WILEY KNIGHT					ļ					
DIRECTOR	1.0	X						0	0	0
TERRI R. MARKOVICH										
DIRECTOR	1.0	X						0	0	0
DIANE WOLKING				1						
DIRECTOR	1.0	Х		į				0	0	0
PAUL BUKLAREWICZ EXECUTIVE DIRECTOR	40.0	Х						50,774	5,281	0

Part VII Section A. Officers, Directors, Tr	ustees, Key	/ Emp	loy	ees	, an	d Hig	hes	t Compensate	nsated Employees (continued)				
(A)	(B)			•	C)			(D)	(E)	(F)			
Name and title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations			
	-												
	-												
								.,					
	-						_						
	- -												
	-		ļ <u>-</u>										
	-			_									
	-				L			_					
	-				_								
	-												
1b Total	<u> </u>						<b>&gt;</b>	50,774	5,281				
2 Total number of individuals (including but reportable compensation from the organization)	not limited : ation ▶	to tho	se	liste		bove) O	wh	o received moi	re than \$100,00	00 in			
						<u>-</u>		<del></del>		Yes No			
3 Did the organization list any former office	er. director	or tru	ste	e. k	ev (	empla	vee	or highest co	mpensated	, , , %			
employee on line 1a? If "Yes," complete 5							΄.			3 X			
4 For any individual listed on line 1a, is the the organization and related organizations	sum of repo	ortabl n \$15	e co 50,0	omp	ens	ation Yes,"	and con	l other comper	nsation from le J for such				
<ul><li>individual</li><li>5 Did any person listed on line 1a receive</li></ul>	or accrue	comp	ens	satio	on f	rom a	iny	unrelated orga		4 X			
services rendered to the organization? If Section B. Independent Contractors	res, comp	nete s	SCII	eou	ie J	101 5	ucn	person	· · ·	5 X			
Complete this table for your five highest compensation from the organization	ompensated	d inde	per	nder	nt co	ontrac	tors	that received	more than \$10	0,000 of			
(A) Name and business ad	dress							(B) Description of se	ervices	(C) Compensation			
			_	_									
						_	_						
	-				_		_			<del></del>			
										<del></del>			
Total number of independent contractors (i more than \$100,000 in compensation from					to th	iose li	sted	d above) who re	eceived				

Form 9	90 (20	009)					Page 9
Part	VIII	Statement of Revenue					
***	· · ·			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants Program Service Revenue and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f Total. Add lines 1a-1f  REUSE CENTER SALES	Business Code 453310	867,181	188,474		
Program		All other program service revenue  Total. Add lines 2a–2f		188,474	S. S. S. S. S. S.		a signi - sign
	3 4 5	Investment income (including divid	lends, interest, and	178	0	0	178
	b c d	Gross Rents Less rental expenses Rental income or (loss)	(ii) Personal  O O  L L D  Other				
ļ	С	Less cost or other basis and sales expenses . Gain or (loss) . Net gain or (loss)	0 0	0	, vi.	* . * * * * * * * * * * * * * * * * * *	£ 100 (c)
Other Revenue	b	Gross income from fundraising events (not including \$ of contributions reported on line 10 See Part IV, line 18.  Less direct expenses  Net income or (loss) from fundraising events.	a b	* * *	2 #	***	,
	9a b	Gross income from gaming activities See Part IV, line 19	s a	0	* * /		\$
	b	Gross sales of inventory, learner and allowances Less cost of goods sold Net income or (loss) from sales of in Miscellaneous Revenue	a 496 . b	496	496	0	0
	b c	OTHER INCOME	900099	2,918	2,918	0	0
		All other revenue  Total. Add lines 11a–11d .  Total Revenue. See instructions	<b>&gt;</b>	2,918 1,059,247	191,888	0	178

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

-	All other organizations must complete col				<del></del>
	o not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				, ,
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22			San Strait	many or the state of the state
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			And the	the section in the
5	Compensation of current officers, directors, trustees, and key employees	56,055	32,600	18,299	5,156
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	261,080	248,026	13,054	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	68,614	60,723	6,862	1,029
10	Payroll taxes	20,432	18,082	2,043	307
11	Fees for services (non-employees)				
а	Management	-			
	Legal	20 720	1 1 2 17	21.264	227
	Accounting	22,728	1,137	21,364	227
	Lobbying		w. 4		
_	Professional fundraising services. See Part IV, line 17		, ,	,	
f	Investment management fees	8,185		8,185	
g 12	Other	12,731	12,731	0,103	
13	Advertising and promotion	27,695	20,129	7,224	342
14	Information technology			.,	
15	Royalties				
16	Occupancy	5,866	5,191	587	88
17	Travel	36,203	32,583	3,620	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	2,652	2,347	265	40
23	Insurance	6,155	3,077	3,078	
24	Other expenses Itemize expenses not covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	SUBCONTRACTORS	232,608	232,608		
b	PROGRAM FREIGHT COSTS	228,143	228,143		
С	MATERIALS	55,736	55,736		
d	STORAGE SPACE BAD DEBT EXPENSE	21,949	21,949		<del></del> ,
e		6,332 10,837	6,332 9,186	1 651	
f 25	All other expenses OTHER EXP.  Total functional expenses. Add lines 1 through 24f	1,084,001	990,580	1,651 86,232	7,189
26	Joint Costs. Check here ▶ ☐ If following	1,001,001	2,0,000	30,232	,,105
_ •	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				

Pa	irt X	Balance Sheet		,	<del></del>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	26,845	1	54,348
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3_	
	4	Accounts receivable, net	207,945	4	101,759
	5	Receivables from current and former officers, directors, trustees, key	\$ \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	11	Service from
	_	employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$ Complete Part II of Schedule L		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges	8,725	9	5,258
	10a	Land, buildings, and equipment cost or 10a 17,275	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- Ag	
		other basis Complete Part VI of Schedule D	Se 12 - 34 13	<u> </u>	
	b	Less accumulated depreciation	7,255	10c	5,566
	11	Investments—publicly traded securities		11	
•	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets	2 045	14	10.042
	15	Other assets See Part IV, line 11	3,045	15	12,943
	16	Total assets. Add lines 1 through 15 (must equal line 34)	253,815	16	179,874
	17	Accounts payable and accrued expenses	78,207	17	29,020
	18	Grants payable		18 19	
	19	Deferred revenue		20	
10	20	Tax-exempt bond liabilities		21	•
Liabilities	21	Escrow or custodial account liability Complete Part IV of Schedule D	, , , , , ,	21	· .
≣	22	Payables to current and former officers, directors, trustees, key		6	* 10 2
Ë.		employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	<u> </u>	22	<u> </u>
			<u> </u>	23	
	23	Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties		24	
	24	Other liabilities Complete Part X of Schedule D	-	25	
	26	Total liabilities. Add lines 17 through 25	78,207	26	29,020
ces		Organizations that follow SFAS 117, check here ▶ 🏻 and complete lines 27 through 29, and lines 33 and 34.	, G / 2 G /	* *	* * * * * *
	27	Unrestricted net assets	175,608	27	150,854
3a	28	Temporarily restricted net assets		28	
<u></u>	29	Permanently restricted net assets		29	*
Net Assets or Fund Balan	23	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			*
S	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
<u>e</u>	33	Total net assets or fund balances	175,608	33	150,854
Z	34	Total liabilities and net assets/fund balances	253,815		179,874

Form **990** (2009)

Pai	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990			
22	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
	Were the organization's financial statements audited by an independent accountant?	2b	Х	
	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			-
2.	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
Ja	the Single Audit Act and OMB Circular A-133?	3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

# SCHEDULE A . (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

Employer identification number

RE(	CYC	CLE HAWA	AI <u>I</u>							99-02	293381			
Pa	rt I	Reason	for Public Ch	narity Status (All or	ganızatı	ons mus	t comple	ete this	part ) Se	e instru	ctions			
The	orga			dation because it is										
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)												
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).												
4														
			ime, city, and sta											
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	X	An organization that normally receives a substantial part of its support from a governmental unit or from the general public												
	_	described in section 170(b)(1)(A)(vi). (Complete Part II)												
8	$\sqcup$			in section 170(b)(1)										
9	Ш			receives (1) more th										
		receipts from	n activities relate	ed to its exempt functi	ons—sub	ject to ce	ertain exc	eptions,	and (2) r	io more ti	e than 331/3% of its			
				ent income and unrel after June 30, 1975						oii (ax)	nom businesses			
40			•							/=\/A\				
10				nd operated exclusive							to caray out the			
11	Ч			and operated exclusive olicly supported organ										
				it describes the type of										
		a 🗌 Type				oe III–Fur				_	Type III-Other			
e				ify that the organizati			•	•		_	, , i			
·	_			n managers and other										
		-	section 509(a)(2	——————————————————————————————————————			. ,	• •	J					
f		If the organ	zation received	a written determination	on from t	the IRS t	hat it is	a Type I	Type II.	or Type	III supporting			
		•	, check this box								<i>.</i> .			
g		•		the organization acce	pted any	gift or co	ontributio	n from ar	y of the		<del></del>			
Ī		following pe		•		•			•					
				indirectly controls, e				persons	describe	ed in (ii)	Yes No			
		and (III)	below, the gover	ning body of the supp	orted org	ganızatıor	۱۶ .				11g(ı)			
			member of a person described in (i) above?							11g(ii)				
				of a person described							11g(iii)			
h			1	ation about the suppo			<u> </u>							
(1)		e of supported janization	(ii) EIN	(iii) Type of organization (described on lines 1–9	in col (i) listed in your governing document? the organization in col (i) of your support?		(vi) Is the organization in col		(vii) Amount of support					
	0.5			above or IRC section			col (i) of your		(i) organi	zed in the	30,500			
				(see instructions))			<del>                                     </del>		US?		4			
					Yes	No	Yes	No	Yes	No				
						-								
										1				
		-												
				j					l .					
			ļ											
					-	-								
Tota	ıl										0			

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

Schedule A (Form 990 or 990-EZ) 2009

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not 149,643 86,426 442,825 746,191 867,181 2,292,266 include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 149, . 825 746,191 867.181 643 426 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or なない لأشدية できる Graph. 72 publicly supported organization) included on line 1 that exceeds 2% of the amount 15/2/1. 4/14 shown on line 11, column (f) 2,292,266 Public support. Subtract line 5 from line 4 Section B. Total Support (c) 2007 (d) 2008 (a) 2005 (b) 2006 (f) Total (e) 2009 Calendar year (or fiscal year beginning in) ▶ 867,181 2,292,266 86,426 442,825 746,191 149,643 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 233 278 178 709 10 10 sources . . . Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets 873 1.094 2,918 4,885 (Explain in Part IV) . . . . . it it is 温瀛宝 2,297,860 11 Total support. Add lines 7 through 10 . 12 1,016,696 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . 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 Section C. Computation of Public Support Percentage 99.76% Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 14 99.87% 15 Public support percentage from 2008 Schedule A, Part II, line 14 16a 331/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box b 331/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3 % or more, check this 17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . . . . . . b 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

	dule A (Form 990 or 990-EZ) 2009						Page 3
	Support Schedule for Orga (Complete only if you checked)	inizations De ed the box or	escribed in S Ine 9 of Pa	Section 509( rt l.)	a)(2) 		·
	tion A. Public Support		1		<u> </u>		
Ca	llendar year (or fiscal year beginning ın) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						-
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5				ļ	-	-
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b						
Sec	tion B. Total Support		3 440,000,000,000	. K. 1980.3-1. X	11.2		
	llendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6						
	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar sources						
b	rents, royalties and income from similar						
	rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses						
С	rents, royalties and income from similar sources						
c 11	rents, royalties and income from similar sources						
c 11 12	rents, royalties and income from similar sources						F04/->/2>
c 11	rents, royalties and income from similar sources						
11 12 13 14	rents, royalties and income from similar sources	here				ear as a section	
11 12 13 14 Sec	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (Add lines 9, 10c, 11, and 12).  First five years. If the Form 990 is for organization, check this box and stop time.	here pport Perce	ntage	· · · · · ·	<u>, , , , , , , , , , , , , , , , , , , </u>	· · · · · · · · · · · · · · · · · · ·	. , .▶ □
11 12 13 14 Sec 15 16	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for organization, check this box and stop tion C. Computation of Public Support percentage for 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (Iir Public support percentage from 2008 Stop section C. 2009 (III Public support percentage from 2008 Stop section C. 2009 (III Public support percentage from 2008 Stop section C. 2009 (III Public support percentage from 2008 Stop section C. 2009 (III Public support percentage from 2008 Stop section C. 2009 (III Public support percentage from 2008 Stop section C. 2009 (III Public support percentage from 2008 Stop section C. 2009 (III Public support percentage from 2008 Stop section C. 2009 (III Public support percentage from 2008 Stop section C. 2009 (III Public support percentage from 2008 Stop section C. 2009 (III Public support percentage from 2008 Stop section C. 2009 (III Public	here pport Perce e 8, column (f Schedule A, Pa		· · · · · ·	<u>, , , , , , , , , , , , , , , , , , , </u>		
11 12 13 14 Sec 15 16 Sec	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for organization, check this box and stop tion C. Computation of Public Support percentage for 2009 (line Public support percentage from 2008 Stop D. Computation of Investme	here pport Perce e 8, column (f Schedule A, Pa nt Income Po	ntage ) divided by lin art III, line 15 ercentage	e 13, column	(f))	15 16	▶ □ %
11 12 13 14 Sec 15 16 Sec	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for organization, check this box and stop tion C. Computation of Public Support percentage for 2009 (ling Public support percentage from 2008 Ston D. Computation of Investme Investment income percentage for 2009 (ling support percentage for 2009 (ling public support percentage for 200	pport Perce e 8, column (f schedule A, Pa nt Income Po 9 (line 10c, co	ntage ) divided by lin int III, line 15 ercentage	e 13, column	(f))	15	▶ □
11 12 13 14 Sec 15 16 Sec 17 18	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for organization, check this box and stop tion C. Computation of Public Support percentage for 2009 (line Public support percentage from 2008 Stop D. Computation of Investme	pport Perce se 8, column (f Schedule A, Pe nt Income Pe 9 (line 10c, co	ntage ) divided by lin int III, line 15 ercentage lumn (f) divide A, Part III, line	e 13, column d by line 13, c	(f))	15 16 17 18	% % %

b 33½ % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33½%, and line 18 is not more than 33½%, 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 ▶ ☐

#### SCHEDULE D (Form 990)

#### **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

ŁΕ(	YCLE HAWAII		99-0293381
Pai	Organizations Maintaining Do	onor Advised Funds or Other Similar F	unds or Accounts. Complete if
	the organization answered "Yes	(a) Donor advised funds	(b) Funds and other accounts
	<del></del>	(a) Donor advised funds	(b) i unus and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	funds are the organization's property, sub	d donor advisors in writing that the assets hell ject to the organization's exclusive legal cont	rol? Yes 🗌 N
6	used only for charitable purposes and not	donors, and donor advisors in writing that gra tor the benefit of the donor or donor advisor benefit?	, or for any other
Pa	Conservation Easements. Con	plete if the organization answered "Yes" to	Form 990, Part IV, line 7
1	· · · · · · · · · · · · · · · · · · ·	ld by the organization (check all that apply)	<u> </u>
•	Preservation of land for public use (e	_	of an historically important land area
	☐ Protection of natural habitat	· _	n of a certified historic structure
	☐ Preservation of open space		
2		zation held a qualified conservation contribution	on in the form of a conservation
			Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b		easements	
C	<u> </u>	certified historic structure included in (a)	1 = 1
d	Number of conservation easements include	ded in (c) acquired after 8/17/06	2d
		fied, transferred, released, extinguished, or te	
	*	to conservation easement is located 🕨	
;		cy regarding the periodic monitoring, inspection	
;		itoring, inspecting, and enforcing conservation	
,	Amount of expenses incurred in monitorin	g, inspecting, and enforcing conservation eas	sements during the year
3		ed on line 2(d) above satisfy the requirements?	
9	In Part XIV, describe how the organizatio	n reports conservation easements in its rever the text of the footnote to the organization's f	nue and expense statement, and
'ai		lections of Art, Historical Treasures, or wered "Yes" to Form 990, Part IV, line 8	Other Similar Assets.
а	art, historical treasures, or other similar as	nder SFAS 116, not to report in its revenue s sets held for public exhibition, education, or re to its financial statements that describes th	search in furtherance of public service
b	historical treasures, or other similar asserprovide the following amounts relating to		search in furtherance of public service
	(i) Revenues included in Form 990, Part (ii) Assets included in Form 990, Part X		<b>▶</b> \$
2	If the organization received or held work following amounts required to be reported	s of art, historical treasures, or other similar I under SFAS 116 relating to these items	assets for financial gain, provide the
a	_	, line 1	<b>▶</b> \$
h	Assets included in Form 990, Part X		<b>▶</b> \$

Par	t III Organizations Maintain	ing Collections	of Art, His	storic	al Treasures,	or O	ther Similar As	sets (c	ontin	ued)
3	Using the organization's acquisition collection items (check all that apply		other recor	ds, ch	eck any of the f	ollow	ıng that are a ຣເເ	gnifican	i use	of its
а	Public exhibition		d		Loan or exchan					
b	Scholarly research		е		Other					_
С	Preservation for future general	tions								
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV									
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									
Par	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21									
	Is the organization an agent, trusted included on Form 990, Part X?					or o			es 🗆	] No
b	If "Yes," explain the arrangement in	Part XIV and cor	nplete the t	followi	ng table		1 0-			
							An	nount		
С	Beginning balance					1c	<del></del>			
d	Additions during the year					1d				
е	Distributions during the year .					<u>1e</u>				
f	Ending balance					1f				
	Did the organization include an amount "Yes," explain the arrangement in		), Part X, III	ne 211				<b>□ Y</b>	es L	」No ——
Par	t V Endowment Funds. Co	mplete if the or	ganızatıon	ansv	vered "Yes" to	Forn	n 990, Part IV,	line 10	)	
		(a) Current year	(b) Prior	year	(c) Two years ba		(d) Three years back		<del> </del>	
1a	Beginning of year balance								,** <u>,</u> *	(美)
b	Contributions				f will did		<b>以外心</b> 心中的	10 - Car	for the	*
C	Net investment earnings, gains, and losses					2				
ч	Grants or scholarships				~ Marchan Co.	481	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Set 2.	
e	Other expenditures for facilities				a the second		Sala Sala Sala			36.0
Č	and programs					*			\$	3.5
f g	Administrative expenses End of year balance				Sind, d	ng - 1,1" -	or de stourn	ž , ,	ko 87., š ** ***	رسي مد سر" مه
2	Provide the estimated percentage of	f the year end ba	lance held	as						
а	Board designated or quasi-endowm	ent ►	%							
b	Permanent endowment ▶									
	Term endowment ▶ 9									
	Are there endowment funds not in th		ne oroanizat	tion th	at are held and a	dmin	istered for the			
	organization by	, possoson on a	io organiza						Yes	No
	(i) unrelated organizations							3a(i)		
								3a(ii)		
b	If "Yes" to 3a(II), are the related org	anızatıons listed a	as required	on Sc	hedule R? .	: :		3b		
4	Describe in Part XIV the intended u									
Par	t VI Investments—Land, Bu	uildings, and E	quipment	.See	Form 990, Par	t X, I	ine 10.			
	Description of investment	(a) Cost or o	ther basis	(b) C	ost or other sis (other)	(c) A	ccumulated preciation	( <b>d</b> ) Boo	k value	e
1a	Land						. *.			
b	Buildings									
Č	Leasehold improvements									
d	Equipment		1		17,275		11,709		5,	566
	Other									
	I. Add lines 1a through 1e (Column (d)	must equal Form	990, Part X,	colum	n (B), line 10(c) )		•		5,	566

Schedule D (Form 990) 2009

Part VII Investments—Other Securities	. See Form 990, Part	X, line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuat Cost or end-of-year mark	ion et value
Financial derivatives			
Closely-held equity interests			<del></del>
Other			<u> </u>
			<del></del>
		<del></del>	
	<del></del>		
		-	<del> </del>
	· · · <del></del>		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		a to toute in the 12th of the thing was a 102 - 61	A Rod Dale Good
Part VIII Investments—Program Relate	d. See Form 990, Part		
(a) Description of investment type	(b) Book value	(c) Method of valua Cost or end-of-year man	
	<u> </u>		
	<u> </u>	-	
Total (Column (b) must equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Pa	rt X line 15	7 7 5 8	
Cinci Acces, cee i cini coc, i a	(a) Description		(b) Book value
SECURITY DEPOSITS	· · · · · · · · · · · · · · · · · · ·		10,553
ADVANCES TO EMPLOYEES	· · ·		2,390
			-
Total. (Column (b) must equal Form 990, Part X, col			12,943
Part X Other Liabilities. See Form 990,	T ·		<del></del>
1. (a) Description of liability	(b) Amount		,
Federal income taxes		<del> </del>	•
	<del></del>		
		_	
	<del></del>	<del></del>	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25 ) ▶			
		· · · · · · · · · · · · · · · · · · ·	

2. FIN 48 Footnote. In Part XIV, 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.

SCHE	10le D (Form 990) 2009		
Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	taten	nents
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,059,247
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,084,001
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	(24,754
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV )	8	
9	Total adjustments (net) Add lines 4 through 8	9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	(24,754
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenu	e pe	r Return
1	Total revenue, gains, and other support per audited financial statements	1	1,059,247
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	10	
a	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV )		7
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,059,247
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	20	*
•	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		*/
a b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	· 0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		1,059,247
Pa	Reconciliation of Expenses per Audited Financial Statements With Expen		<del></del>
1	Total expenses and losses per audited financial statements	1	1,084,001
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	\$ 7	
_	Donated services and use of facilities		
a	Defiated Services and use of identities	-	
b	Prior year adjustments		
C	Other losses	٦,	
d	Other (Describe in Fait XIV).	26	0
_		3	1,084,001
3			+ 10 av 4
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	investment expenses not included on Form 550, Fait Vin, into Fb		<b>*</b>
b	Other (Describe in Part XIV)	4c	·
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		
	t XIV Supplemental Information		1 2/001/002
Con	nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a ar 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d a part to provide any additional information		

#### SCHEDULE O (Form 990)

### Supplemental Information to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Employer identification number Name of the organization 99-0293381 RECYCLE HAWAII PART VI, SECTION A, 1a - MEMBERS OF THE EXECUTIVE COMMITTEE: JAY WEST - PRESIDENT, MEALOHA KRAUS - VICE PRESIDENT, SHANNON V. SECRETARY, AND GAIL E. MADIE - TREASURER PART VI, SECTION A, 7a - THE INDIVIDUAL MEMBERS ELECT THE BOARD OF DIRECTORS. PART VI, SECTION A, 7b - BYLAW CHANGES ARE APPROVED BY THE INDIVIDUAL MEMBERS. PART VI, SECTION B, 11A - THE INTERNAL AFFAIRS COMMITTEE REVIEWS THE 990 BEFORE AN OFFICER IS AUTHORIZED TO SIGN. DUE TO TIMING THE FULL BOARD WILL NOT SEE A COPY OF THE 990 UNTIL THE NEXT BOARD MEETING PART VI, SECTION B, 12c - EACH BOARD MEMBER WILL SIGN THEIR AGREEMENT WITH THE POLICY AT THE ANNUAL MEETING. PART VI, SECTION B, 15a - THE PRESIDENT OF THE BOARD IS SUPPOSED TO OVERSEE THE EVEALUATION OF THE EXECUTIVE DIRECTOR ON AN ANNUAL BASIS. HOWEVER, THIS PROCEDURE HAS NOT BEEN FOLLOWED FOR SEVERAL YEARS. COMPENSATION IS BASED ON PERFORMANCE, ACHIEVEMENTS AND BUDGET. PART VI, SECTION C, 19 - THE ORGANIZATION'S GOVERNING DOCUMENTS, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE ON A CASE BY CASE BASIS UPON REQUEST.