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For Paperwork Reduction Act Notice, see the separate instructions. DAA

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.

Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013 Open to Public Inspection

A	For the 20	13 calendar year, or tax year beginning , and ending					
В	Check if applica			D Emplo	yer identification number		
	Address change			-	1550010		
	Name change	Doing Business As	Lacorton		-1579949		
\Box	Initial return	Number and street (or P O box if mail is not delivered to street address)	Room/suite				
Ē.	Terminated	2959 UMI STREET City or town, state or province, country, and ZIP or foreign postal code	201	808	3-632-2005		
\equiv					700 000		
\equiv	Amended return	F Name and address of principal officer	1	G Gross rec	eipts\$ 780,886		
	Application pen	MARK HUBBARD	H(a) Is this a	group return for subordinates? Yes X			
		SAME AS C ABOVE	H(b) Are all s	ubordinates incl	uded? Yes No		
		STATE THE C TABOVE			(see instructions)		
	Tax-exempt st	tatus X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527					
	Website >	www.kauainetwork.org	H(c) Group e	xemption numbe	er >		
ĸ	Form of organi		L Year of formation		M State of legal domicile H I		
P	art I	Summary			<u> </u>		
	1 Brief	fly describe the organization's mission or most significant activities	- · · -				
ø	1	O ADDRESS URGENT PUBLIC ISSUES THRU CROSS-SECTOR PL	ANNING & A	CTION			
auc	1						
ern							
Š	2 Che	ck this box $lacktriangle$ if the organization discontinued its operations or disposed of more tha	in 25% of its net a	ssets			
oŏ	3 Num	ber of voting members of the governing body (Part VI, line 1a)		3	11		
ies	4 Num	ber of independent voting members of the governing body (Part VI, line 1b)		4	11		
Activities & Governance	5 Tota	il number of individuals employed in calendar year 2013 (Part V, line 2a)		5	4		
Act	6 Tota	I number of volunteers (estimate if necessary)	6	65			
	7a Tota	l unrelated business revenue from Part VIII, column (C), line 12		7a	0		
	b Net	unrelated business taxable income from Form 990-T, line 34		7b	0		
		Ambutuana and accepts (Park VIIII Iven 4b)	Prior Y		Current Year		
e	1	tributions and grants (Part VIII, line 1h)		70,596 10,320	<u>780,278</u>		
Revenue		gram service revenue (Part VIII, line 2g)		10,320	608		
æ	1	er revenue (Part VIII, column (A), lines 3, 4, and 7d)		0			
	12 Tota	I revenue – add lines 8 through 11 (must equal Part VIII, column (A) line 12)	7,9	30,916	780,886		
	13 Gran	nts and similar amounts paid (Part IX, column (A), Lines 1,33)	/ /	JU, JIU	700,000		
		efits paid to or for members (Part IX, column (A)\line 4)\line		0			
10	15 Sala	ries, other compensation, employee benefits (Part IX, column (A) lines 8-10)	1 0	58,229	203,989		
penses		essional fundraising fees (Part IX, column (A), line 11e)		301223	0		
ber		I fundraising expenses (Part IX, column (D), line 25) 5, 282			- <u> </u>		
X	17 Othe	er expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	47	74,257	571,693		
	1	I expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		32,486	775,682		
	19 Reve	enue less expenses Subtract line 18 from line 12	14	18,430	5,204		
Net Assets or Fund Balances			Beginning of C		End of Year		
sset 3alai	20 Tota	l assets (Part X, line 16)		9,875	199,250		
et A	21 Tota	l liabilities (Part X, line 26)		20,447	4,616		
		assets or fund balances Subtract line 21 from line 20		<u>89,428</u>	194,634		
	art II	Signature Block		 			
		es of perjury, I declare that I have examined this return, including accompanying schedules and sta and complete. Declaration of preparer (other than officer) is based on all information of which prepa			owledge and belief, it is		
		1					
Sig	ın P	Signature of officer		Date			
He		$\Delta \Delta $	ASURER	7/10/	ONUL		
	·	Type or print name and title	1001/11/	1101	<u> </u>		
	Prir	nt/Type preparer's name	Date	Check	X If PTIN		
Paid	d $\Big _{\mathrm{La}_1}$	ura Wiley		0/14 self-em	·)		
Pre	narer	m's name ▶ Laura Wiley, CPA	1 1	Firm's EIN	27-1628293		
Use	Only	PO Box 1202	/				
	Firm	n's address Lihue, HI 96766		Phone no	808-639-2137		
May		scuss this return with the preparer shown above? (see instructions)			X Yes No		

914

Form **990** (2013)

Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Χ	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	1		
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
7	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	ĺ
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	7	- 21	
•	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			l
	Part III	5		Х
6	·			
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			l
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	6		Х
7	"Yes," complete Schedule D, Part I	-		_^
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		v
_	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,"			V
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			i
	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		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	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			ĺ
	VII, VIII, IX, or X as applicable			ĺ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			İ
	complete Schedule D, Part VI	11a	Χ	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			ļ
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			ĺ
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	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	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Χ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			ĺ
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Χ
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			ĺ
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			į
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate		1	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Χ
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 II and IV	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 III and IV	16		Χ
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 (see instructions)	_17		Χ
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		Χ
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		X_
20a		20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	tit tv Checklist of Required Contended)		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		163	140
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or 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		X
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		X
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	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		
25a	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		Χ
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	25 b	<u></u>	X
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 so, complete Schedule L, Part II	26		Χ
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	27	<u></u>	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)			
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? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	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	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	ļ	<u>X</u>
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> </u>	X
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	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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	35b	ļ <u>'</u>	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			17
-	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,			v
20	Part VI	37	 	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		,	

Form 990 (2013)

Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V Yes No Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a Statements, filed for the calendar year ending with or within the year covered by this return If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b 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 If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c Does the organization have annual gross receipts that are normally greater than \$100,000, and did the 6a organization solicit any contributions that were not tax deductible as charitable contributions? 6a 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). 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 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7с If "Yes." indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? g 7g If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h h 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 9 Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966? 9a Did the organization make a distribution to a donor, donor advisor, or related person? 9b b 10 Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b b Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a а Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note. See the instructions for additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 14a If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2013) KAUAI PLANNING & ACTION ALLIANCE. 20-1579949 Page 6 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 Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 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 11 Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Χ any other officer, director, trustee, or key employee? 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 6 6 Did the organization have members or stockholders? 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? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8a Each committee with authority to act on behalf of the governing body? d8 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) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? 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? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b 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 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a Χ 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? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ None 17 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 | X | Another's website | X | 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 State the name, physical address, and telephone number of the person who possesses the books and records of the organization > DIANE ZACHARY 2959 UMI ST. #201

808-632-2005

HI 96766

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Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and **Independent Contractors**

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

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations 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 organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				s both	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations	
(1)BERYL BLAICH	2.00										
	0.00	X	<u> </u>		<u> </u>			0	0	0	
(2) DR. HELEN COX											
	1.00	,,									
DIRECTOR	0.00	X	<u> </u>		├—	-		0	0	0	
(3) MARK HUBBARD	2.00										
CHAIR	0.00	X		Х				0	0	0	
(4) KARISSA JONAS	0.00	\ <u>^</u>		^					<u> </u>	0	
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2.00										
TREASURER	0.00	X		Х				0	0	0	
(5) GILBERT PETER KI	LA .									-	
	2.00										
VICE CHAIR	0.00	X		X				0	0	0	
(6) JODY KONO KJELDS	1										
	1.00	\ ,						0	_		
(7) ERIC KNUTZEN	0.00	X		<u> </u>		\vdash		0	0	0	
()ERIC KNOIZEN	1.00										
DIRECTOR	0.00	X						0	0	0	
(8) JOY KOERTE		1									
• •	2.00										
SECRETARY	0.00	X		Х				0	0	0	
(9) JENNIFER LUCK											
	1.00	l									
DIRECTOR	0.00	X	<u> </u>	_		_		0	0	0	
(10) OWEN MOE	1 00										
DIDECMOD	1.00	X						0	_		
DIRECTOR (11) WANDA KAU SHIBA'		┼≏		-	\vdash	\vdash			0	0	
WANDA NAU SHIBA	1.00										
DIRECTOR	0.00	X						0	0	0	
DAA	· · · · · · · · · · · · · · · · · · ·						-		<u> </u>	Form 990 (2013)	

Part VII Section A. Office (A) Name and title	(B) Average hours per week (list any hours for	(d	o not ox, unle	Pos check ess pe	C) sition more erson directo	than o	ne an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Estim amou oth compen	(F) Estimated amount of other compensation from the	
	related organizations below dotted line)	ndividual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organiz and re organiz	lated	
(12) DIANE ZACHARY		\dagger		-	ļ	-						
PRESIDENT (13)	40.00			Х				78,050	0		5,	439
·					_							
(14)												
(15)												
(16)												
(17)												
(18)												
(19)												
1b Sub-total c Total from continuation sl	neets to Part VIII	Soct	ion /			<u></u>	•	78,050			5,	439
d Total (add lines 1b and 1c Total number of individuals reportable compensation from) (including but not	limite	ed to		e lis	ted a	bove	78,050 e) who received more than	\$100,000 in		5,	439
3 Did the organization list any employee on line 1a? If "Ye	former officer, di	recto	r, or					oyee, or highest compensa	ted	3	Yes	No X
For any individual listed on lorganization and related organization.	line 1a, is the sum	of re	port	able	com	pens	atio			4		X
5 Did any person listed on line for services rendered to the	organization? If "								ındıvidual	5		X
Section B. Independent Contract Complete this table for your	five highest comp	ensa	ated	ınde	pend	lent c	ontr	actors that received more	than \$100,000 of		·	
	(A) and business address	omp	ensa	ition	for t	he ca	lend		in the organization's tax year (B) ion of services	a	(C) empensa	ation
PONO PACIFIC LAND I		LL(1 6		DING AVENUE, UNI				1,701
	- "											
	 											
										_		
2 Total number of independer								se listed above) who				
received more than \$100,00	or compensatio	ii trof	n the	⇒ org	anız	ation	<u> </u>		1	For	m 99	0 (2013)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (C) (D) Revenue Total revenue Unrelated exempt excluded from tax function under sections 512-514 revenue 1a Federated campaigns 1a b Membership dues 1b 1c c Fundraising events d Related organizations 1d 653,217 Contributions, and Other Sim e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 127,061 g Noncash contributions included in lines 1a-1f \$ 780,278 h Total. Add lines 1a-1f Program Service Revenue Busn Code 900099 608 608 2a STRATEGIC PLANNING SERVICES b f All other program service revenue 608 ▶ g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds ▶ Royalties (i) Real (II) Personal 6a Gross rents **b** Less rental exps c Rental inc or (loss) d Net rental income or (loss) 7a Gross amount from (i) Securities (II) Other sales of assets other than inventory **b** Less cost or other basis & sales exps c Gain or (loss) \triangleright d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events \triangleright 9a Gross income from gaming activities See Part IV, line 19 b b Less direct expenses c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances а b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b All other revenue Total. Add lines 11a-11d \triangleright 780,886 608 Total revenue. See instructions 0

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 (B) Program service Do not include amounts reported on lines 6b. (A) (D) Total expenses Fundraising Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV. line 22 Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 158,408 128,968 25,595 Other salaries and wages 3,845 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 45,581 36,320 985 10 Payroll taxes Fees for services (non-employees) Management Legal b 7,001 7,001 Accounting С Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other (If line 11g amount exceeds 10% of line 25, column 511,293 510,773 520 (A) amount, list line 11g expenses on Schedule O) Advertising and promotion 1,395 395 12 740 1,509 769 13 Office expenses Information technology 1,127 287 840 14 15 Royalties Occupancy 22,811 20,941 715 16 155 287 3,016 265 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 3,188 3,057 131 19 20 21 Payments to affiliates 22 2,766 2,711 55 Depreciation, depletion, and amortization 941 23 941 Insurance 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) **4,**303 4,083 TRAINING & PROF DEVELOPMT 220 а SUPPLIES 4,222 947 b 2,275 2,858 TELEPHONE 567 2,291 c 762 <u>2,7</u>62 EQPT RENTAL/LEASING 230 e All other expenses 230 775,682 714,805 55**,**595 Total functional expenses. Add lines 1 through 24e 282 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 ▶

following SOP 98-2 (ASC 958-720)

Balance Sheet Part X Check if Schedule O contains a response or note to any line in this Part X (B) (A) End of year Beginning of year 206,769 194,363 Cash-non-interest bearing 2 2 Savings and temporary cash investments Pledges and grants receivable, net 3 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 Notes and loans receivable, net 8 Inventories for sale or use 1,959 1,987 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or 15,695 other basis Complete Part VI of Schedule D 10a 13,795 147 1,900 b Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments-program-related See Part IV, line 11 14 14 Intangible assets ,000 1,000 15 Other assets See Part IV, line 11 15 2<u>09,</u>875 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 20,447 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 20,447 4,616 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 189,428 194,634 32 Retained earnings, endowment, accumulated income, or other funds 32 189,428 194,634 Total net assets or fund balances 33 209,875 199,250 Total liabilities and net assets/fund balances

Form **990** (2013)

Form	990.(2013) KAUAI PLANNING & ACTION ALLIANCE, 20-1579949			Pa	ige 12	
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1_1_		80,		
2	Total expenses (must equal Part IX, column (A), line 25)	2	<u> </u>		682	
3	Revenue less expenses Subtract line 2 from line 1	3	ļ	5,204		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	189,42			
5	Net unrealized gains (losses) on investments	5	<u> </u>			
6	Donated services and use of facilities	_ 6_				
7	Investment expenses	7	ļ			
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9			2	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line	İ	-			
	33, column (B))	10	11	94,	<u>634</u>	
Pa	art XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990 Cash Accrual X Other TAX					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O			l		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<u> 2a</u>	X	↓	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both					
	X Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		<u>2b</u>	<u> </u>	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	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	X	ļ	
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?		3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		1			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		<u> </u>	
			Fo	orm 99 0	0 (2013)	

SCHEDULE A: (Form 990 or 990-EZ)

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.

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

INC.

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

KAUAI PLANNING & ACTION ALLIANCE, Employer iden

Employer identification number 20-1579949

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.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 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 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 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 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) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 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 that describes the type of supporting organization and complete lines 11e through 11h c | Type III-Functionally integrated Type II d Type III-Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Nο (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)

1,									L V) /I
h Provide the fo	ollowing information about the	he supported organization(s)							
(i) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1–9 above or IRC section (see instructions))	ın col (i) lı	organization sted in your document?	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(VII) Amount of monetary support
		,,,	Yes	No	Yes	No	Yes	No	
(A)									
(B)					• •				
(C)									
(D)									
(E)									
Total									

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

Schedule A (Form 990 or 990-EZ) 2013

		17 T T T 7 N 1 N 1 T		TAN DITT	NOT 00	1570040	
	edule A (Form 990 or 990-EZ) 2013 KAT art II Support Schedule for O	rganizations [ING & ACT Described in S	Sections 170(b	$\frac{NCE}{NC}$	J-15/9949_ 170(b)(1)(A)(vi	Page 2
	(Complete only if you che	cked the box o	n line 5, 7, or 8	B of Part I or if t	the organization	n failed to qualify	
800	Part III. If the organization tion A. Public Support	fails to qualify	under the test	s listed below,	please comple	te Part III)	
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	0.6	· · ·	1	1	, ,	- '	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4				‡		
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on	-					
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc	(see instructions)				12	<u> </u>
13	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	ourth, or fifth tax ye	ear as a section 50	1(c)(3)	
	organization, check this box and stop her		,				>
Sec	tion C. Computation of Public S					 	
14	Public support percentage for 2013 (line 6		•	nn (f))		14	%_
15	Public support percentage from 2012 Sch	· · · · · · · · · · · · · · · · · · ·			///		%
16a	J.				33 1/3% or more,	check this	. —
	box and stop here. The organization qua				45 - 00 4/00/		
b	33 1/3% support test—2012. If the organ				15 is 33 1/3% or m	nore,	
170	check this box and stop here. The organi			=	Co. or 1Ch. and lin	. 14	▶ _
174	10%-facts-and-circumstances test—20 10% or more, and if the organization mee	-		•	•		
	Part IV how the organization meets the "fa			•	•		
	organization	20.0 4110 01104111314		gamzation quante	a a a publicly sup	porteu	> [
b	10%-facts-and-circumstances test—20	12. If the organizat	ion did not check	a box on line 13-1	6a. 16b. or 17a. ai	nd line	
-	15 is 10% or more, and if the organization	-					
	Explain in Part IV how the organization m						
	supported organization			J		•	▶ □

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

18

instructions

20-1579949

Page 3

Support Schedule for Organizations Described in Section 509(a)(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.)

Sec	tion A. Public Support	<u></u>					
Caler	dar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	308,580	895,993	368,632	770,596	780,278	3,124,079
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	61,487	31,276	4,463	10,320	608	108,154
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	370,067	927,269	373,095	780,916	780,886	3,232,233
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	375					375
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	Add lines 7a and 7b	375					375
8	Public support (Subtract line 7c from line 6)			<u> </u>			3,231,858
Sec	tion B. Total Support						
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	370,067	927,269	373,095	780,916	780,886	3,232,233
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	370,067	927,269	373,095	780,916	780,886	3,232,233
14	First five years. If the Form 990 is for the	organization's first	, second, third, for	irth, or fifth tax yea	r as a section 501	(c)(3)	
	organization, check this box and stop here			_			▶
	tion C. Computation of Public Su						
15	Public support percentage for 2013 (line 8	• • •	•	n (f))		15	99.99%
16	Public support percentage from 2012 Sche				· ·		99.97%
<u>3ec</u> 17	tion D. Computation of Investme			column (f)		47	0/
18	Investment income percentage for 2013 (Investment income percentage from 2012)			Column (1))		17	<u>%</u> %
19a	33 1/3% support tests—2013. If the orga	· ·		14, and line 15 is	more than 33 1/39		
	17 is not more than 33 1/3%, check this bo	ox and stop here .	The organization q	ualifies as a public	ly supported orgai	nization	► X
b	33 1/3% support tests—2012. If the orga line 18 is not more than 33 1/3%, check the						▶ []
20	Private foundation. If the organization did	d not check a box o	n line 14, 19a, or	19b, check this box	and see instruction	ons	>

SCHEDULE C. (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► See separate instructions. Information about Schedule C (Form 990 or 990-EZ) and its

instructions is at www.irs.gov/form990.

Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-F7, Part V, line 35c (Proxy Tax), then

	section 501(c)(4), (5), or (6) organizations Complete Part I	· · ·	-C2, 1 art v, illie 55	to (Froxy Tax), then	
Nan	ne of organization KAUAI PLANNING & ACT	TION ALLIANCE,		Employer identification	
Pai	t I-A Complete if the organization is exer	mpt under section 501(c	c) or is a section	n 527 organizati	on.
1 2 3	Provide a description of the organization's direct and indi Political expenditures Volunteer hours	rect political campaign activities	s in Part IV	▶ \$	
Pai	t i-B Complete if the organization is exe	mpt under section 501(c	c)(3).		
1	Enter the amount of any excise tax incurred by the organ	ization under section 4955		▶ \$	
2	Enter the amount of any excise tax incurred by organizati	on managers under section 49	55	▶ \$	
3	If the organization incurred a section 4955 tax, did it file F	form 4720 for this year?			Yes No
4a	Was a correction made?				Yes No
b	If "Yes," describe in Part IV				
Pa	t I-C Complete if the organization is exe	mpt under section 501(c), except secti	ion 501(c)(3).	
1	Enter the amount directly expended by the filing organiza	tion for section 527 exempt fun	ction		
	activities			▶ \$	
2	Enter the amount of the filing organization's funds contrib	outed to other organizations for	section		
	527 exempt function activities			▶ \$	
3	Total exempt function expenditures Add lines 1 and 2 E	nter here and on Form 1120-P0	DL,		
	line 17b			▶ \$	
4	Did the filing organization file Form 1120-POL for this ye				Yes No
5	Enter the names, addresses and employer identification		-	-	
	organization made payments For each organization liste				
	the amount of political contributions received that were pi	• •	•	•	
	as a separate segregated fund or a political action comm				(a) Amount of polytopi
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)					
(2)					
(3)					
(4)					

(5)

Schedule C (Form 990 or 990-EZ) 2013 KAU	AI PLANNING &	ACTION AL	LIANCE,	20-1579949	9 Page 2
Part II-A Complete if the org					election under
<u>section 501(h)).</u>	<u>-</u>				
	ation belongs to an			_	roup member's
	IN, expenses, and s			•	
	ration checked box		itroi" provisior	·	
	Lobbying Expendit			(a) Filing organization's totals	(b) Affiliated group totals
(The term "expenditure				organization's totals	group totals
1a Total lobbying expenditures to influence		,	-		
b Total lobbying expenditures to influencec Total lobbying expenditures (add lines		ect lobbying)	-		
d Other exempt purpose expenditures	ra anu rb)		<u> </u>		
e Total exempt purpose expenditures (a	dd lines 1c and 1d)		<u> </u>		
f Lobbying nontaxable amount Enter th	•	ung table in both	-	·	
columns	e amount nom the follow	mig table in both			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxat	ole amount is			
Not over \$500,000	20% of the amount on li	ne 1e			
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of th	ne excess over \$500,000			
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of th	ne excess over \$1,000,000			
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,000			
Over \$17,000,000	\$1,000,000	 .	_		
g Grassroots nontaxable amount (enter	•		<u> </u>		ļ
h Subtract line 1g from line 1a If zero or	•		-		
i Subtract line 1f from line 1c If zero or	·		L		
j If there is an amount other than zero o		, did the organization	file Form 4720		П. П.
reporting section 4911 tax for this year	·?				Yes No
	4-Year Averagi	ing Period Under S	Section 501(h)		
(Some organization	ns that made a section	on 501(h) election	do not have to	o complete all of the	five
columi	ns below. See the ins	structions for lines	2a through 2	f on page 4.)	
	Lobbying Expendite	ures During 4-Yea	r Averaging P	eriod	
Calendar year (or fiscal year					
beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

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Page	,

KAUAI PLANNING & ACTION ALLIANCE, Schedule C (Form 990 or 990-EZ) 2013 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B (election under section 501(h)). (b) For each "Yes," response to lines 1a through 11 below, provide in Part IV a detailed Yes No **Amount** description of the lobbying activity. During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Χ a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Χ c Media advertisements? Χ d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? Χ f Grants to other organizations for lobbying purposes? Χ 360 g Direct contact with legislators, their staffs, government officials, or a legislative body? Χ h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? 360 i Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section Part III-A 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2b b Carryover from last year 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Supplemental Information Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information Schedule C, Part II-B, Line 1 THE PRESIDENT MET WITH STATE LAWMAKERS TO SUPPORT ADDITIONAL FUNDING FOR STATE PARKS CAREGIVERS AND TO SUPPORT THE KEIKI TO CAREER INITIATIVE WHICH ENSURES APPROPRIATE SYSTEMS AND SUPPORT ARE IN PLACE FOR

YOUTH TO BE HEALTHY, COMPETENT, CONFIDENT AND CARING.

SCHEDULE D. (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2013

Open to Public

Inspection

Name of the organization Employer identification number KAUAI PLANNING & ACTION ALLIANCE, 20-1579949 INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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? 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes violations, and enforcement of the conservation easements it holds? 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes (i) and section 170(h)(4)(B)(ii)? 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" to 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 (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sche	dule D (Form 990) 2013 KAUAI PI					579949	Page 2
Pa	rt III Organizations Maintainir	ng Collections of	Art, Historic	al Treasures	, or Othe	er Similar Assets	(continued)
3	Using the organization's acquisition, acces collection items (check all that apply)	sion, and other record	ls, check any of t	ne following that	are a signif	icant use of its	
а	Public exhibition	d 🗍	Loan or exchang	e programs			
b	Scholarly research	е 🗌	Other				
С	Preservation for future generations	_					
4	Provide a description of the organization's XIII	collections and explain	n how they furthe	r the organization	n's exempt	purpose in Part	
5	During the year, did the organization solicit	or receive donations	of art, historical t	easures, or othe	r sımılar		
	assets to be sold to raise funds rather than	to be maintained as j	part of the organi	ation's collection	17		Yes No
Pa	rt IV Escrow and Custodial A	rrangements.			•		
	Complete if the organization 990, Part X, line 21	on answered "Yes	" to Form 990	, Part IV, line	9, or repo	orted an amount o	on Form
1a	Is the organization an agent, trustee, custo	dian or other intermed	liary for contribut	ons or other ass	ets not		
	included on Form 990, Part X?		•				Yes No
b	If "Yes," explain the arrangement in Part XI	II and complete the fo	llowing table				
							Amount
С	Beginning balance					1c	
d	Additions during the year					1d	
е	Distributions during the year					1e	
f	Ending balance					1f	
2a	Did the organization include an amount on	Form 990, Part X, line	21?				Yes No
	If "Yes," explain the arrangement in Part X	II Check here if the e	xplanation has be	en provided in F	art XIII		
Pa	ert V Endowment Funds.						
	Complete if the organization	on answered "Yes	<u>" to Form 990</u>	<u>, Part IV, line</u>	10	· · · · · · · · · · · · · · · · · · ·	
		(a) Current year	(b) Prior yea	(c) Two y	ears back	(d) Three years back	(e) Four years back
1a	Beginning of year balance						
b	Contributions						
С	Net investment earnings, gains, and losses						
d	Grants or scholarships						
е	Other expenditures for facilities and						
	programs						
f	Administrative expenses			- -			
g	End of year balance		L	<u> </u>	···	<u> </u>	
2	Provide the estimated percentage of the cu		e (line 1g, colum	n (a)) held as			
	Board designated or quasi-endowment ▶	%					
	Permanent endowment ▶ %						
С	Temporarily restricted endowment ▶	%					
_	The percentages in lines 2a, 2b, and 2c sh	•					
3a	Are there endowment funds not in the poss	session of the organiza	ation that are hel	and administer	ed for the		
	organization by						Yes No
	(i) unrelated organizations						3a(i)
_	(ii) related organizations		on Cabadula D2				3a(ii)
D	If "Yes" to 3a(ii), are the related organization	•					3b
- 4	Describe in Part XIII the intended uses of the land, Buildings, and Eq.		owment tunas			 	
ГФ	Complete if the organization	•	" to Form 990	Part IV line	112 See	Form 990 Part)	Cline 10
	Description of property	(a) Cost or other	ĭ	ost or other basis		Accumulated	(d) Book value
	besomption of property	(investment)	'	(other)	1 ' '	epreciation	(a) Book value
10	Land	,		· · ·	 	·	
	Buildings				 		
	Leasehold improvements				 		
	Equipment			15,190		13,290	1,900
	Other			505		505	
	I. Add lines 1a through 1e (Column (d) mus	t equal Form 990, Pai	t X, column (B). I		•		1,900
							

Schedule.D (I	Form 990) 2013 KAUAI PLANNING & ACT Investments—Other Securities.	TON ALLIANCE,	20-1579949	Page
	Complete if the organization answered "Yes" to	o Form 990, Part IV, line	11b See Form 990, Pa	rt X, line 12
	(a) Description of security or category	(b) Book value	(c) Method of v	
 -	(including name of security)		Cost or end-of-year	market value
(1) Financial				
	eld equity interests			· · · · · · · · · · · · · · · · · · ·
(3) Other				
(A)				
(B)				
(C)			-	<u> </u>
(D)		-		
(E)				
(F)				
(G) (H)				
	on (h) must oqual Form 000. Bart V. col. (R) line 12.)			
Part VIII	nn (b) must equal Form 990, Part X, col_(B) line 12) ► Investments—Program Related.			. ". –
Latt Alit	Complete if the organization answered "Yes" to	n Form 990 Part IV line	11c See Form 990 Pa	rt X line 13
	(a) Description of investment	(b) Book value	(c) Method of v	
	(4)	(-,	Cost or end-of-year	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)		~		
(9)		-		
	nn (b) must equal Form 990, Part X, col. (B) line 13)▶			
Part IX	Other Assets.		<u> </u>	··
	Complete if the organization answered "Yes" to	o Form 990, Part IV, line	<u>e 11d See Form 990, Pa</u>	rt X, line 15
	(a) Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
_(6)				
(7)				
(8)				
<u>(9)</u>				
	nn (b) must equal Form 990, Part X, col (B) line 15)		•	
Part X	Other Liabilities. Complete if the organization answered "Yes" to	n Form 990 Part IV line	a 11e or 11f Soo Form 0	00 Part Y
	line 25.	or onn 330, raicry, line	e rie or rir dee roilir s	30, Fait A,
1.	(a) Description of liability	(b) Book value		
	Il income taxes	(a) Book value	1	
(2)	in income taxes		1	
(3)			1	
(4)			†	
(5)		<u> </u>	1	
(6)			1	
_(0) _(7)			1	
			1	
(8)			1	
(9)	nn (b) must equal Form 990, Part X, col. (B) line 25.) ▶	 	1	
	or uncertain tax positions. In Part XIII, provide the text of the f	ontrote to the organization's f	financial statements that report	ts the
-	s liability for uncertain tax positions under FIN 48 (ASC 740)		•	
organization:	a maping for uncertain tax positions under 1 ii 40 (AGO 740)	COCK THOSE IT THE TEXT OF THE	Comoto nas peon provided in	WIT VIII

Sche	dule,D (Form 990) 2013 KAUAI PLANNING & ACTION A	LLIANCE, 20-	-1579949	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial St	atements With Reven	ue per Return.	
	Complete if the organization answered "Yes" to Form 9	90, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а	Net unrealized gains on investments	2a		
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII)			
С	Add lines 4a and 4b	4c		
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	<u> </u>	5	
Pa	art XII Reconciliation of Expenses per Audited Financial S	Statements With Expe	nses per Return.	
	Complete if the organization answered "Yes" to Form 9	90, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
С	Other losses	2c		
d	Other (Describe in Part XIII)			
е	Add lines 2a through 2d	2e		
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIII)			
C	Add lines 4a and 4b		4c	
5	Total expenses, Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	5		

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

SCHEDULE O (Form 990 or 990-EZ)

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.

2013

Open to Public

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Inspection

Name of the organization

KAUAI PLANNING & ACTION ALLIANCE,

Employer identification number 20-1579949

Form 990, Part III, Line 4d - All Other Accomplishment

KPAA BEGAN PREPARATION OF THE 4TH EDITION OF "MEASURING WHAT MATTERS FOR

KAUAI - COMMUNITY INDICATORS REPORT 2012", A REFERENCE FOR DECISION-MAKERS.

KPAA FACILITATED DEVELOPMENT OF A COUNTY OPERATIONS SUSTAINABILITY PLAN.

KPAA HOLDS TRI-ANNUAL MEETINGS FOR KPAA MEMBERS.

Form 990, Part VI, Line 3 - Management Delegated

KPAA RETAINS THE SERVICES OF ALTRES, INC. TO ADMINISTER MATTERS RELATING TO

PAYROLL, HEALTH INSURANCE, EMPLOYER TAXES, TEMPORARY DISABILITY INSURANCE

(TDI), HUMAN RESOURCES ADMINISTRATION, WORKERS' COMPENSATION AND/OR OTHER

ADMINISTRATIVE ASPECTS OF EMPLOYMENT.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

KPAA HAS GENERAL MEMBERS THAT ELECT THE BOARD OF DIRECTORS EACH YEAR AT THE

ANNUAL MEETING.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

GENERAL MEMBERS ELECT THE BOARD OF DIRECTORS EACH YEAR AT THE ANNUAL

MEETING

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members THE BOARD OF DIRECTORS MAKES RECOMMENDATIONS TO THE GENERAL MEMBERS REGARDING ANY CHANGES TO THE ORGANIZATION'S MISSION, ARTICLES OF INCORPORATION, BY-LAWS OR MAJOR GOALS, ALL OF WHICH ARE SUBJECT TO THE APPROVAL OF THE GENERAL MEMBERS.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 KPAA'S CPA REVIEWS THE FORM 990 IN DETAIL WITH THE PRESIDENT AND THE TREASURER. THE FORM 990 IS THEN MADE AVAILABLE TO ALL BOARD MEMBERS FOR REVIEW, DISCUSSION & APPROVAL. THE TREASURER THEN SIGNS AND SUBMITS THE FORM 990.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
ANNUALLY, EACH DIRECTOR SIGNS A STATEMENT THAT AFFIRMS SUCH PERSON HAS

- A) RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY
- B) READ AND UNDERSTANDS THE POLICY
- C) AGREES TO COMPLY WITH THE POLICY
 THE BOARD CHAIR AND SECRETARY ENFORCE THE POLICY THROUGHOUT THE YEAR AS
 NEEDED.

Form 990, Part VI, Line 15a - Compensation Process for Top Official THE PRESIDENT/CEO IS EVALUATED ANNUALLY BY THE BOARD OF DIRECTORS. IN CONJUNCTION WITH THIS PERFORMANCE REVIEW, THE INTERNAL AFFAIRS COMMITTEE CONDUCTS A REVIEW OF SALARIES IN COMPARABLE ORGANIZATIONS. BASED ON THE RESULTS OF THE PERFORMANCE EVALUATION AND THE SALARY SURVEY, THE INTERNAL AFFAIRS COMMITTEE MAKES SALARY RECOMMENDATIONS TO THE FULL BOARD FOR APPROVAL.

Form 990, Part VI, Line 15b - Compensation Process for Officers

EACH YEAR, AS PART OF THE BUDGET PROCESS, THE PRESIDENT RECOMMENDS THE

COMPENSATION FOR ALL OTHER EMPLOYEES BASED ON COMPARABLE SALARIES AND

PERFORMANCE REVIEWS. THE BOARD OF DIRECTORS APPROVES THE BUDGET.

Name of the organization

KAUAI PLANNING & ACTION ALLIANCE,

Employer identification number 20-1579949

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation KPAA's FORM 990 AND GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST. THE FORM 990 IS ALSO ON GUIDESTAR.

Form 990, Part IX, Line 11g - Other Fees for Services
Description

]	Progran	n Service	Mgt & Gener	cal	Fundraising	g		
PROFESSIONAL SERVICES								
	\$	442,378	\$	520	\$	0		
PROFESSIONAL	SERVI	CES						
	\$	16,804	\$	0	\$	0		
PROFESSIONAL SERVICES								
	\$	36,572	\$	0	\$	0		
PROFESSIONAL SERVICES								
	\$	15,019	\$	0	\$	0		
E 000 Do	note VT	Time O Other C	hanges in Ne	at Aggeta Ev	nlanation			

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation rounding \$

2

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

20172

2013

Department of the Treasury Internal Revenue Service

(99) See separate instructions.

► Attach to your tax return.

ttachment equence No 1

vame(s) shown on return $KAUAI$.	PLANNING &	ACTION ALLIA	NCE,				ng num! 157	_{ber} 9949
			 				120	<u> </u>	
	ss or activity to which this form relates adirect Depreciat	ion							
			erty Under Section	170					
ra			, complete Part V be		omnle	to Part	ı		
1			, complete rait v be	siore you c	Ompi	ste i ait	<u> </u>	1	500,000
	Maximum amount (see instruction		o instructions)					2	4,519
2	Total cost of section 179 property	•	·	tions)				3	2,000,000
3	Threshold cost of section 179 pro Reduction in limitation. Subtract li	•		tions)				4	2,000,000
4			•			t.ana		5	500,000
5	Dollar limitation for tax year Subtract li			ny Separately, S ost (business use			Elected cost	-	300,000
6	(a) Descriptio	n or property	(b) C(ost (Dusiness use	Of Hy)	(6)	ziecieu cosi	-	
-				·				\dashv	
	Lated and Established	from the 20			7		<u> </u>		
7	Listed property Enter the amount		in in antiiman (a) liman 6 a	- d 7				8	
8	Total elected cost of section 179			na 7				9	0
9	Tentative deduction Enter the sn							10	4,124
10	Carryover of disallowed deduction			> !	E (\	11	9,124
11	Business income limitation Enter				o (see	instruction	15)		0
12	Section 179 expense deduction /	·		line 11	40			12 124	U
13 Note	Carryover of disallowed deduction Do not use Part II or Part III below				13		4,	124	
				ion (Do no	- 4 .p.o	udo liete	d propo	rtv / /	Soc instructions \
	·····		nd Other Depreciat			ude iiste	a prope	l Ly)	See mstructions)
14	Special depreciation allowance for		ther than listed property)	piaced in ser	vice				2,259
	during the tax year (see instruction							14	2,239
15	Property subject to section 168(f)	• •						15	
16 Da	Other depreciation (including ACF		ide listed property \	(See instru	otions	. \		16	
Pa	rt III MACRS Deprecia	tion (Do not incit	ude listed property) Section A	See msuu	CHOIN	». <i>)</i>			
4-	MAGDO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			040				47	55
17	MACRS deductions for assets pla						. □	17	00
18	If you are electing to group any assets place		ear into one or more general asservice During 2013 Tax Y			ral Done	nciation S	vetom	
	Section 6—		(c) Basis for depreciation		e Gen	alai Depit	Ciation 3	ystein	
	(a) Classification of property	(b) Month and year placed in service	(business/investment use only-see instructions)	(d) Recovery period	(e) C	Convention	(f) Meth	od	(g) Depreciation deduction
19a	3-year property	4			<u> </u>				
b_	5-year property	4	2,260	5.0	<u> </u>	<u>HY</u>	200	DB	452
С	7-year property	4			ļ				
d	10-year property	4			 				
<u>e</u>	15-year property	4		-	<u> </u>				
f	20-year property	4		 					
<u>g</u>				25 yrs			S/L		
h	Residential rental			27 5 yrs		MM	S/L		
	property			27 5 yrs		MM	S/L		
i	Nonresidential real			39 yrs	 	MM	S/L		
	property	<u> </u>				MM	S/L		
	Section C—As	ssets Placed in Serv	ice During 2013 Tax Ye	ar Using the	Altern	ative Dep			m
<u>20a</u>	Class life	-}		1	-		S/L		
	12-year	·		12 yrs	-		S/L		·- ·- ·
	40-year		<u> </u>	40 yrs	J	MM	S/L		
	irt IV Summary (See ins								
21	Listed property Enter amount fro							21	
22	Total. Add amounts from line 12,					nter here			
	and on the appropriate lines of yo				s	1		22	2,766
23	For assets shown above and place		the current year, enter the	•					
	portion of the basis attributable to	section 263A costs		 	23				