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Department of the Treasury Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Tr ust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made p ublic.
Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

| For | :alen | idar year 2016 or tax year beginning | | , and ending | | |
|--|--------------|--|------------------------------------|---------------------------|---|---|
| Nar | ne of | foundation | | - | A Employer identification | number |
| P | RI | SCILLA AND MICHAEL BALD | 20-5265903 | | | |
| | | and street (or P O box number if mail is not delivered to street | B Telephone number | | | |
| | | 3 BISHOP ST. | | 1200 | 808 394-81 | 20 |
| | | own, state or province, country, and ZIP or foreign p OLULU, HI 96813 | postal code | | C If exemption application is pe | ending, check here |
| | | all that apply: Initial return | Initial return of a fo | ormer public charity | D 1. Foreign organizations | s, check here |
| | | Final return | Amended return | | 0 - | |
| | | Address change | Name change | | Foreign organizations me check here and attach con | eting the 85% test, mputation |
| H C | heck | type of organization: X Section 501(c)(3) e. | xempt private foundation | | E If private foundation sta | tus was terminated |
| |]_ <u>Se</u> | ection 4947(a)(1) nonexempt charitable trust | Other taxable private founda | ation | under section 507(b)(1) | |
| 1 Fa | ır ma | · 1 | ting method; X Cash | Accrual | F If the foundation is in a | 60-month termination |
| | | | ther (specify) | | under section 507(b)(1) | (B), check here |
| | \$ | | ımn (d) must be on cash b | | | (40) |
| | <u>rt I</u> | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 1,063,801. | | | |
| | 2 | Check If the foundation is not required to attach Sch. B | | | | |
| | 3 | Interest on savings and temporary cash investments | 110. | 110. | 110. | STATEMENT 1 |
| | 4 | Dividends and interest from securities | | | | |
| | 5a | Gross rents | | | | 303 |
| | | Net rental income or (loss) | <u> </u> | | | |
| ē | 6a | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | - | | | |
| evenue | ь 7 | assets on line 6a Capital gain net income (from Part IV, line 2) | | 0. | | |
| Be Be | 8 | Net short-term capital gain | | | | |
| | q | Income modifications | | | | 2 00 |
| | 10a | Gross sales less returns | | | | L 13 m |
| | | Less Cost of goods sold | | | | 1 7 0 |
| | C | Gross profit or (loss) | | | | |
| | 11 | Other income | | | | IRS-USC |
| _ | 12 | Total Add lines 1 through 11 | 1,063,911. | 110. | 110. | |
| (44) | 13 | Compensation of officers, directors, trustees, etc | 0. | 0. | 0. | 0. |
| 96 | 14 | Other employee salaries and wages | | | | |
| 6 | 15 | Pension plans, employee benefits | | | | |
| ଞ୍ଚ | 16a | Legal fees | 3,351. | 110. | 110. | 3,241. |
| | . 0 | Accounting fees STMT 2 Other professional fees | 3,331. | 110. | 110. | 3,441. |
| 3 | 17 | Interest | <u> </u> | | | |
| SCANNIST LAB S | 18 | Taxes | | | | |
| | 19 | Depreciation and depletion | - | | | |
| | 20 | Occupancy | | | | |
| \(\text{\$\oldsymbol{\oldsymbol{\text{\$\oldsymbol{\text{\$\oldsymbol{\oldsymbol{\text{\$\oldsymbol{\text{\$\oldsymbol{\text{\$\oldsymbol{\text{\$\oldsymbol{\ol{\oldsymbol{\oldsymbol{\oldsymbol{\oldsymbol{\oldsymbol{\oldsymbo | 21 | Travel, conferences, and meetings | | | | |
| @ <u></u> | 22 | Printing and publications | | | | |
| | | Other expenses | | | | |
| atir | 24 | Total operating and administrative | | | | |
| Operating | | expenses. Add lines 13 through 23 | 3,351. | 110. | 110. | 3,241. 1,015,300. |
| 0 | 25 | Contributions, gifts, grants paid | 1,015,300. | | | 1,015,300. |
| | 26 | Total expenses and disbursements. | 1 010 555 | 444 | | 1 010 541 |
| | | Add lines 24 and 25 | 1,018,651. | 110. | 110. | 1,018,541. |
| | | | 45,260. | | | _ |
| | | Excess of revenue over expenses and disbursements | 45,400. | 0. | | |
| | 0 | Net investment income (if negative, enter -0-) | | | 0. | |

| P | art | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
|-------------|------|--|------------------|----------------|---------------------------|
| _ | 1 | Cash - non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 5,101. | 50,361. | 50,361. |
| | , | Accounts receivable | | | |
| | | Less: allowance for doubtful accounts | | | |
| | 4 | Pledges receivable | | | |
| | ¦ | Less: allowance for doubtful accounts | | | |
| | 5 | Grants receivable | | | |
| | ľ | Receivables due from officers, directors, trustees, and other | | | |
| | ľ | disqualified persons | } | | |
| | ١, | Other notes and loans receivable | | | |
| | ′ | Less: allowance for doubtful accounts | | | |
| | | Inventories for sale or use | | | |
| ets | - | | + | | |
| Assets | 1 | Prepaid expenses and deferred charges | | | |
| • | J | Investments - U.S. and state government obligations | | | |
| | l . | Investments - corporate stock | | | |
| | | Investments - corporate bonds | | | |
| | 11 | Investments - land, buildings, and equipment basis | | | |
| | _ ا | Less accumulated depreciation | | | |
| | l . | Investments - mortgage loans | | | |
| | 13 | Investments - other | + | | |
| | 14 | Land, buildings, and equipment; basis | | | |
| | | Less accumulated depreciation | | | |
| | | Other assets (describe - | | | |
| | 16 | Total assets (to be completed by all filers - see the | F 101 | E0 2C1 | E0 2C1 |
| _ | _ | instructions. Also, see page 1, item 1) | 5,101. | 50,361. | 50,361. |
| | | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| S | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| jab | 21 | Mortgages and other notes payable | | | |
| _ | 22 | Other liabilities (describe | | | |
| | 1 | | | • | |
| _ | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | |
| | ł | Foundations that follow SFAS 117, check here | | | |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| ces | 24 | Unrestricted | | | |
| Fund Balanc | 25 | Temporarily restricted | | | |
| Ba | 26 | Permanently restricted | | | |
| 밑 | Ì | Foundations that do not follow SFAS 117, check here | | | |
| Ī | | and complete lines 27 through 31 | | | |
| s or | 27 | Capital stock, trust principal, or current funds | 2,126. | 2,126. | |
| Assets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | 0. | |
| | 29 | Retained earnings, accumulated income, endowment, or other funds | 2,975. | 48,235. | |
| Net | 30 | Total net assets or fund balances | 5,101. | 50,361. | |
| _ | | | | | |
| | 31 | Total liabilities and net assets/fund balances | 5,101. | 50,361. | |
| Ē | art | Analysis of Changes in Net Assets or Fund Bal | ances | | |
| = | | | | | |
| 1 | Tota | l net assets or fund balances at beginning of year - Part II, column (a), line 3 | 30 |]] | |
| | | st agree with end-of-year figure reported on pnor year's return) | | 1 | 5,101. |
| 2 | Ente | r amount from Part I, line 27a | | 2 | 45,260. |
| 3 | Othe | r increases not included in line 2 (itemize) | | 3 | 0. |
| 4 | Add | lines 1, 2, and 3 | | 4 | 50,361. |
| 5 | Decr | eases not included in line 2 (itemize) | | | 0. |
| 6 | Tota | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | lumn (b), Ine 30 | 6 | 50,361. |
| | | | - | | Form 990-PF (2016) |

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Form, 990-PF (2016) PRISCILLA AND MICHAEL BALDWIN FOUNDATION

See the Part VI instructions.

| | | -5265 | | 4: | Page 4 |
|----|--|-------------|----------------|-------|--------------|
| | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - | see in | struc | tions | } |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | 1 | | | |
| | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | لــيــ |
| þ | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | | | | 0. |
| | of Part I, line 27b | } | | | j |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | | 0. |
| 3 | Add lines 1 and 2 | <u> </u> | | | 0. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | | | 0. |
| 6 | Credits/Payments: | | | | j |
| a | 2016 estimated tax payments and 2015 overpayment credited to 2016 |) | | | , |
| b | Exempt foreign organizations - tax withheld at source | ļ | | | Ì |
| C | Tax paid with application for extension of time to file (Form 8868) | 1 | | | l |
| d | Backup withholding erroneously withheld 6d | 1 | _ | | J |
| 7 | Total credits and payments. Add lines 6a through 6d | T | | | 0. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | 7 | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 1 | | | 0. |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | | |
| | Enter the amount of line 10 to be: Credited to 2017 estimated tax | | | | |
| | rt VII-A Statements Regarding Activities | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | | | Yes | No |
| | any political campaign? | | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or | | | | |
| | distributed by the foundation in connection with the activities | | } } | | |
| C | Did the foundation file Form 1120-POL for this year? | | 1c | | X |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | |
| | (1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 . | | 1 1 | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | i |
| | managers. ► \$ 0. | | l ! | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | 2 | | X |
| | If "Yes." attach a detailed description of the activities. | | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | | 1 | | 1 |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | 3 | | X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | 4a | | X |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | N/A | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | 5 | | X |
| | If "Yes," attach the statement required by General Instruction T. | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | 1 1 | | |
| | By language in the governing instrument, or | | 1 1 | | i |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law | | 1 1 | | j |
| | remain in the governing instrument? | | 6 | | X |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV | | 7 | X | |
| | | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | |] | | j |
| | CO | | 1 1 | | 1 |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | | |
| | of each state as required by General Instruction G? If "No," attach explanation | | 8b | X | |
| 9 | 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar | | | | |
| | year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STM" | | 10 | X | |
| | | Fo | rm 99 0 | -PF | (2016) |

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| Form 990-PF (2016) PRISCILLA AND MICHAEL BA | LDWIN FOUNDAT | ION | 20-52659 | 03 Page 6 |
|--|---|----------------------------|--|--------------------------------|
| Part VII-B Statements Regarding Activities for Which F | orm 4720 May Be R | equired _{(contin} | | |
| 5a During the year did the foundation pay or incur any amount to: | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | 1 4945(e))? | Y | es 🗓 No | |
| (2) Influence the outcome of any specific public election (see section 4955); o | | · · | | |
| any voter registration drive? | | | es X No | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | | es X No | - } |
| (4) Provide a grant to an organization other than a charitable, etc., organization | | | | 1 1 1 |
| 4945(d)(4)(A)? (see instructions) | II document | | es X No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational nurnoses or f | | 30 (22) 110 | |
| the prevention of cruelty to children or animals? | or educational purposes, or i | | es X No | 1 1 |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni | dar the exceptions described | | 3 LAL 140 | 1 1 1 |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | | ii negulations | N/A | 5b |
| · · · · · · · · · · · · · · · · · | • | | | 35 |
| Organizations relying on a current notice regarding disaster assistance check his | | nad | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | | | | |
| expenditure responsibility for the grant? | | 1/A Y | es L No | |
| If "Yes," attach the statement required by Regulations section 53 4945 | | | ļ. | 1 1 |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p | pay premiums on | | □ ₹ | |
| a personal benefit contract? | | Y | es 🗶 No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | - | 6b X |
| If "Yes" to 6b, file Form 8870. | | _ | | 1 1 1 |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | | Ye | es 🗓 No | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | N/A | 7b |
| Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors | es, Foundation M ar | nagers, Highly | | |
| | | | | |
| 1 List all officers, directors, trustees, foundation managers and their of | | (c) Compensation | (d) Contributions to | (-) Funcasa |
| (a) Name and address | (b) Title, and average hours per week devoted | (If not paid, | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other |
| (a) manio and abarross | to position | `enter -0-)' | compensation | allowances |
| | | 1 | | |
| | | | _ | |
| SEE STATEMENT 4 | | 0. | 0. | 0. |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | ł | } | } |
| | | | l | |
| | | | | |
| | | | ļ | |
| | | | | |
| 2 Compensation of five highest-paid employees (other than those incl | | enter "NONE." | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | (d) Contributions to employee benefit plans | (e) Expense |
| (a) Name and address of each employee paid more than \$50,000 | devoted to position | (c) Compensation | and deferred compensation | l account, other allowances |
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | 1 | | |
| | | \ | | |
| | | | | |
| | | } | | |
| | | | | |
| | | ł | | |
| Total number of other employees paid over \$50,000 | <u> </u> | | · | |

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|---|---|---------------------|------------------|
| Part VIII | Paid Employees, and Contractors (continued) | | |
| 3 Five high | nest-paid independent contractors for professional services. If none, enter "NONE | | |
| | (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| | NONE | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | 1 |
| | | | |
| | | | |
| | | | |
| Total numbe | r of others receiving over \$50,000 for professional services | | <u>▶</u> 0 |
| VALUE | Summary of Direct Charitable Activities | | |
| List the foun number of o | dation's four largest direct charitable activities during the tax year. Include relevant statistical infor ganizations and other beneficiaries served, conferences convened, research papers produced, etc | mation such as the | Expenses |
| 1 | N/A | | |
| | | | |
| | | | |
| 2 | | | |
| | | | |
| | | | |
| 3 | | | |
| | | | |
| | | | |
| * | | | |
| | | | |
| PartilX: | Summary of Program-Related Investments | | |
| | two largest program-related investments made by the foundation during the tax year on lines 1 ai | nd 2. | Amount |
| 1 | N/A | | |
| | | | |
| | | | |
| 2 | | | |
| | | | |
| , , , , , , , , , , , , , , , , , , , | | | |
| All other pro | gram-related investments. See instructions. | | |
| 3 | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Cotal Add I | nes 1 through 3 | | 0. |

| = | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | dations, | see instructions.) |
|----|--|--------------|--------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities | 1a | 0. |
| | Average of monthly cash balances | 1b | 27,442. |
| | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 27,442. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| _ | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 27,442. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 412. |
| 5 | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 27,030. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 1,352. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an | d certain | |
| | foreign organizations check here and do not complete this part.) | | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 1,352. |
| 2a | Tax on investment income for 2016 from Part VI, line 5 | | |
| b | | | J |
| C | Add lines 2a and 2b | 2c | 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 1,352. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 1,352. |
| 6 | Deduction from distributable amount (see instructions) | 6 | 0. |
| 7. | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 1,352. |
| P | art XII Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 1,018,541. |
| b | D. D | 1b | 0. |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 1,018,541. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 1,018,541. |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q | ualifies for | the section |
| | 4940(e) reduction of tax in those years. | | |

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Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Years prior to 2015 2015 2016 Corpus 1 Distributable amount for 2016 from Part XI, 1,352. line 7 Undistributed income, if any, as of the end of 2018 0. a Enter amount for 2015 only b Total for prior years: 0. 3 Excess distributions carryover, if any, to 2016: 500,383. a From 2011 920,015. **b** From 2012 194,310. c From 2013 576,874 d From 2014 745,208. e From 2015 3,936,790. f Total of lines 3a through e 4 Qualifying distributions for 2016 from Part XII, line 4: \triangleright \$ 1,018,541. 0. a Applied to 2015, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 1.352.d Applied to 2016 distributable amount 1,017,189. e Remaining amount distributed out of corpus Ō. 0. Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 4,953,979 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0. assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2015. Subtract line 0. 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2017 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0. may be required - see instructions) 8 Excess distributions carryover from 2011 500,383. not applied on line 5 or line 7 9 Excess distributions carryover to 2017. 4,453,596. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: 920,015. a Excess from 2012 194,310. b Excess from 2013 576,874. c Excess from 2014 745,208. d Excess from 2015

e Excess from 2016

017,189

| | LA AND MICH | | | 20-52 | 55903 Page 10 |
|--|------------------------------|-------------------------------|-----------------------------|----------------------------|-------------------|
| Part XIV Private Operating Fo | | | A, question 9) | N/A | |
| 1 a If the foundation has received a ruling of | r determination letter that | ıt ıs a private operating | | | |
| foundation, and the ruling is effective for | r 2016, enter the date of t | he ruling | ▶ ∟ | | |
| b Check box to indicate whether the found | lation is a private operatin | g foundation described in | | 4942(j)(3) or 49 | 42(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | L | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(1)(3)(B)(1) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minmum investment return shown in Part X, line 6 for each year | | | | | |
| listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, | | | | | |
| dividends, rents, payments on securities loans (section | | | | | |
| 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public | | | | | |
| and 5 or more exempt organizations as provided in | | | | | |
| section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | 11.2 | 41 | 1 05 000 | |
| Part XV Supplementary Information at any time during the | | | the foundation n | iad \$5,000 or more | e in assets |
| | | ictions.j | | | |
| 1 Information Regarding Foundation | • | h 00/ -fib- t-t-lt | h | | -6 |
| a List any managers of the foundation who year (but only if they have contributed m | | | buttons received by the n | oundation before the close | or any tax |
| SEE STATEMENT 5 | .0.0 2.2 40,000,0 (200 00 | (0)(2), | | | |
| b List any managers of the foundation who | o own 10% or more of the | stock of a corporation (c | or an equally large portion | of the ownership of a par | tnership or |
| other entity) of which the foundation has | | | or an equality large person | or the ownership or a par | alcromp of |
| NONE | | | | | |
| 2 Information Regarding Contributi | on, Grant, Gift, Loan, | Scholarship, etc., Pro | grams: | | |
| Check here ► 🛣 if the foundation o | | - · | - | t accept unsolicited reque | sts for funds. If |
| the foundation makes gifts, grants, etc. (| | | | | |
| a The name, address, and telephone numb | per or e-mail address of th | e person to whom applic | ations should be address | ed: | |
| | | | | | |
| | | <u> </u> | | | |
| b The form in which applications should b | e submitted and informat | ion and materials they sh | ould include | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on awards | s, such as by geographica | l areas, charitable fields, l | kinds of institutions, or o | ther factors: | |

Part XVI-A Analysis of Income-Producing Activities

| | Unrelate | d business income | Exclu | ded by section 512, 513, or 514 | (0) |
|---|-------------------|----------------------------|-----------------------|---------------------------------|---------------------------------------|
| Enter gross amounts unless otherwise indicated. | (a) Business | (b) | (C) Exclu- sion | (d) | (e) Related or exempt |
| 1 Program service revenue: | code | Amount | code | Amount | function income |
| a | | | | | |
| b | | | | | |
| c | | | | | · · · · · · · · · · · · · · · · · · · |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | 14 | 110. | |
| 4 Dividends and interest from securities | | | | | |
| 5 Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | | | |
| 9 Net income or (loss) from special events | | • • | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | |
| 11 Other revenue: | | | | | |
| a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Subtotal. Add columns (b), (d), and (e) | | 0. | | 110. | 0. |
| 3 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 110. |
| See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities to | the Acco | mplishment of Exe | empt | Purposes | |
| | | | | | |
| Line No. Evalua holou hou each activity for which inco | ma ic rapartad ii | a column (a) of Part VII-A | contrib | | nlichment of |
| Line No Explain below how each activity for which inco | | | contrib | outed importantly to the accom | plishment of |
| Explain below how each activity for which inco the foundation's exempt purposes (other than | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | ured importantly to the accom | plishment of |
| | | | contrib | uued importantiy to the accom | plishment of |
| | | | contrib | ured importantly to the accom | plishment of |
| | | | contrib | uued importantiy to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | ured importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |
| | | | contrib | uted importantly to the accom | plishment of |

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncha ritable **Exempt Organizations**

| 1 | Did the or | rganization directly or indir | rectly engage in an | y of the followin | g with any other organization | n described in section | on 501(c) of | | Yes | No |
|---|-------------|-------------------------------------|-------------------------|---------------------|--|-----------------------------|-------------------------------------|-------------|------------------------|----------|
| the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | | | | | | | | | |
| a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | | | | | | | | |
| (1) Cash | | | | | | | 1a(1) | | X | |
| | (2) Other | r assets | | | | | | 1a(2) | | X |
| b | Other tran | isactions: | | | | | | | | |
| | (1) Sales | of assets to a noncharital | ble exempt organiza | ation | | | | 1b(1) | | X |
| | (2) Purcl | hases of assets from a nor | ncharitable exempt | organization | | | | 1b(2) | | X |
| | (3) Renta | al of facilities, equipment, | or other assets | | | | | 1b(3) | | X |
| | (4) Reim | bursement arrangements | | | | | | 1b(4) | | X |
| | (5) Loans | s or Ioan guarantees | | | | | | 1b(5) | | <u> </u> |
| (6) Performance of services or membership or fundraising solicitations | | | | | | 1b(6) | | X | | |
| C | Sharing o | f facilities, equipment, mai | iling lists, other ass | sets, or paid em | ployees | | | 1c | | X |
| d | If the answ | wer to any of the above is | "Yes," complete the | e following sche | dule. Column (b) should alv | ways show the fair m | arket value of the goods, otl | er ass | ets, | |
| | | | | | ed less than fair market valu | e in any transaction (| or sharing arrangement, sho | w in | | |
| | | i) the value of the goods, o | | | | | | | | |
| (a) L | ine no | (b) Amount involved | (c) Name (| | exempt organization | (d) Description | of transfers, transactions, and sha | ring arra | angemer | its |
| | | | | N/A | | | | | | |
| | | <u></u> | | | | | | | | |
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| 0- | la tha fau | ndation directly or indirect | the offiliated with a | r related to ano | or more toy exempt ergen: | zahana dasarihad | | | | |
| 24 | | 1501(c) of the Code (other | - | | or more tax-exempt organi | ZAUDIIS DESCIDED | <u> </u> | Yes | T | No |
| h | | omplete the following sch | • | c)(3)) or iii secu | OII 521 7 | | |] 165 | [2] | _ INO |
| U | 11 165, 61 | (a) Name of org | | | (b) Type of organization | | c) Description of relationshi | | | |
| | | N/A | Jan Zation | | (b) Type of organization | | of Boodinphon of Fuldhorisin | | | |
| | | П/ А | | - | | | | | | |
| | | | | | " | | | | | |
| | | | | | | | | | | |
| | | | | | ——— · | | | | _ | |
| | | | | | accompanying schedules and st | | | ne (05 c | iscuss t | hie - |
| Si | gn and be | elief, it is true, correct, and com | plete Declaration of pr | reparer (other than | taxpayer) is based on all informat | tou of which bite. July had | return | with the | e prepare (see inst | er e |
| Нє | ere | Driet | JAP Xa | rl I | 13/2/17 | TREASU | | Yes | |] No |
| | Sigr | nature of officer or trustee | | | Date | Title | | , | | |
| | | Print/Type preparer's na | | Preparer's si | | | Check If PTIN | | - | |
| | | | | 1 | | 2/2/2 | self- employed | | | |
| Pa | ıid | JOANNE HOE | / | Many | ~ 11/- | 2/13/17 | P00 | 158 | 852 | |
| Pr | eparer | Firm's name ► GIL | FORD SATO | ASSO | CIATES, CPAS | INC. | Firm's EIN ▶ 99-03 | | | |
| Us | e Only | | | | ., | - | | | - | |
| | | Firm's address ▶ 71 | 1 KAPIOLI | ANI BLVI | O., SUITE 100 | 0 | | | _ | |
| | | 1 | NOLULU, H | | Territoria de la companya della companya della companya de la companya della comp | | Phone no. (808) | 942 | -88 | 68 |
| | | | | | | | | | | (2016) |

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

PRISCILLA AND MICHAEL BALDWIN FOUNDATION

Employer identification number

20-5265903

| Organization type (check one) | | | | | | | |
|-------------------------------|---|--|--|--|--|--|--|
| Filers of | f. | Section: | | | | | |
| Form 99 | 0 or 990-EZ | 501(c)() (enter number) organization | | | | | |
| | | 4947(a)(1) nonexempt chantable trust not treated as a private foundation | | | | | |
| | | 527 political organization | | | | | |
| Form 99 | 0-PF | X 501(c)(3) exempt private foundation | | | | | |
| | | 4947(a)(1) nonexempt charatable trust treated as a private foundation | | | | | |
| | | 501(c)(3) taxable private foundation | | | | | |
| Note: Or | nly a section 501(c)(7 | covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or | | | | | |
| | = | one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions | | | | | |
| Special | Rules | | | | | | |
| | sections 509(a)(1) a any one contributor | described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from , during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II | | | | | |
| | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III. | | | | | | |
| | year, contributions is checked, enter he purpose Don't com | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., aplete any of the parts unless the General Rule applies to this organization because it received nonexclusively, etc., contributions totaling \$5,000 or more during the year | | | | | |
| but it m u | u st answer "No" on I | at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to e filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) | | | | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

PRISCILLA AND MICHAEL BALDWIN FOUNDATION

20-5265903

| Part I | Contributors (See instructions) Use duplicate copies of Part I ifadditional | al space is needed. | |
|------------|---|----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | MICHAEL BALDWIN C/O 1003 BISHOP ST, SUITE 1200 HONOLULU, HI 96813 | \$1,015,300. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |

Name of organization

Employer identification number

PRISCILLA AND MICHAEL BALDWIN FOUNDATION

20-5265903

| PartII | Noncash Property (See instructions). Use duplicate copies of Part II if a | additional space is needed | |
|------------------------------|---|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions) | (d) Date received |
| | | \$ | |

Page 4 Employer identification number Name of organization AND MICHAEL BALDWIN FOUNDATION 20-5265903 PRISCILLA Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Partill completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this into once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

PRISCILLA AND MICHAEL BALDWIN FOUNDATION 20-5265903

| 3 Grants and Contributions Paid During th | ne Year (Continuation) | | | |
|--|---|------------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or | |
| Name and address (home or business) | any foundation manager or substantial contributor | status of recipient | Purpose of grant or contribution | Amount |
| ARIZONA-SONORA DESERT MUSEUM 2021 N KINNEY ROAD TUCSON, AZ 85743 | N/A | - | ART INSTITUTE FUNDING | 95,00 |
| ARIZONA-SONORA DESERT MUSEUM 2021 N KINNEY ROAD FUCSON, AZ 85743 | N/A | | ART INSTITUTE FUNDING | 36,79 |
| ARIZONA-SONORA DESERT MUSEUM 2021 N KINNEY ROAD FUCSON, AZ 85743 | N/A | | ART INSTITUTE FUNDING | 132,01 |
| ARIZONA-SONORA DESERT MUSEUM 2021 N KINNEY ROAD PUCSON, AZ 85743 | N/A | | ART INSTITUTE FUNDING | 250,00 |
| ARIZONA-SONORA DESERT MUSEUM 2021 N KINNEY ROAD TUCSON, AZ 85743 | N/A | | ART INSTITUTE FUNDING | 159,59 |
| ARIZONA-SONORA DESERT MUSEUM 2021 N KINNEY ROAD TUCSON, AZ 85743 | N/A | | ART INSTITUTE FUNDING | 30,00 |
| ARIZONA-SONORA DESERT MUSEUM 2021 N KINNEY ROAD TUCSON, AZ 85743 | N/A | | ART INSTITUTE FUNDING | 118,25 |
| | | | | |
| | | | | , p. = |
| | | | | |
| Total from continuation sheets | | . <u></u> | | 821,65 |

MICHAEL BALDWIN

| FORM 990-PF INTEREST ON SAVI | INGS AND TEM | PORARY | CASH IN | IVESTMENTS | STATEMENT 1 |
|------------------------------|------------------------------|---|---------|-------------------------------|-------------|
| SOURCE | REVE | (A) (B) REVENUE NET INVESTMENT PER BOOKS INCOME | | (C) ADJUSTED NET INCOME | |
| GOLDMAN SACHS | | 110. | | 110. | 110. |
| TOTAL TO PART I, LINE 3 | | 110. | | 110. | 110. |
| FORM 990-PF | ACCOUNTI | NG FEES | 3 | | STATEMENT 2 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B NET IN MENT I | WEST- | (C) ADJUSTED NET INCOM | |
| ACCOUNTING FEES | 3,351. | | 110. | 11 | 0. 3,241. |
| TO FORM 990-PF, PG 1, LN 16B | 3,351. | | 110. | 11 | 3,241. |
| | SUBSTANTIA PART VII-A, 1 | | | <u> </u> | STATEMENT 3 |
| NAME OF CONTRIBUTOR | ADDR | ESS | | | |

C/O 1003 BISHOP ST., SUITE 1200 HONOLULU, HI 96813

| FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS | | | STATEMENT 4 | |
|--|--------------------------|----|---------------------------------|---------|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | EXPENSE |
| PRISCILLA V. BALDWIN 1003 BISHOP ST., SUITE 1200 HONOLULU, HI 96813 | PRESIDENT 5.00 | 0. | 0. | 0. |
| MICHAEL C. BALDWIN 1003 BISHOP ST., SUITE 1200 HONOLULU, HI 96813 | SECRETARY 5.00 | 0. | 0. | 0. |
| GARY BROTHERS 1003 BISHOP ST., SUITE 1200 HONOLULU, HI 96813 | DIRECTOR 1.00 | 0. | 0. | 0. |
| ROBERT EDISON 1003 BISHOP ST., SUITE 1200 HONOLULU, HI 96813 | DIRECTOR 1.00 | 0. | 0. | 0. |
| WENDY MOORE 1003 BISHOP ST., SUITE 1200 HONOLULU, HI 96813 | DIRECTOR 1.00 | 0. | 0. | 0. |
| THEODORE RACHLIN 1003 BISHOP ST., SUITE 1200 HONOLULU, HI 96813 | TREASURER 1.00 | 0. | 0. | 0. |
| MICHAEL E. BALDWIN 1003 BISHOP ST., SUITE 1200 HONOLULU, HI 96813 | DIRECTOR 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6 | , PART VIII | 0. | 0. | 0. |

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT 5

NAME OF MANAGER

PRISCILLA V. BALDWIN MICHAEL C. BALDWIN

Laulima Tax Advisory Group 1003 Bishop Street, Suite 1200 Honolulu, HI 96813

2016 RETURN OF PRIVATE FOUNDATION

Form 990-PF

| ID# | NAME | Amount Due | Check # |
|------------|--|------------|---------|
| | | | |
| 20-5265903 | Priscilla and Michael Baldwin Foundation | None | N/A |
| | | | |
| | | | |

Mail to:

Department of the Treasury
Internal Revenue Service Center
Ogden, UT 84201-0027