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EXTENDED TO NOVEMBER 15, 2017 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www irs gov/form990pf OMB No 1545-0052

Department of the Treasury Internal Revenue Service For calendar year 2016 or tax year beginning and ending Name of foundation A Employer identification number LAULIMA FOUNDATION 81-0858179 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 2200 C/O 1100 ALAKEA STREET 808-528-3699 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 96813 HONOLULU, HI Initial return Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 2,535,090. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) (d) Disbursements for charitable purpose (cash basis only) (a) Revenue and expenses per books (c) Adjusted net income (b) Net investment income 100,000. N/A Contributions, gifts, grants, etc., received Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments STATEMENT 13,959 13,959. STATEMENT AON CENNINGOS Dividends and interest from securities 5a Gross rents b Net rental income or (loss) -172. 68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 79,888. 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Q .. 8 Income modifications Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) NO∀ 11 Other income 113,792 13,964 12 Total. Add lines 1 through 11 OGE EN. 0. 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 1,937. 484. 1.453. STMT 3 **b** Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 81. 0. STMT 4 81. 23 Other expenses 24 Total operating and administrative <u>1,45</u>3. 565 2,018 expenses. Add lines 13 through 23 82,000. 25 Contributions, gifts, grants paid 82,000. 26 Total expenses and disbursements. 84,018. 565 83,453. Add lines 24 and 25 27 Subtract line 26 from line 12: 29,774 8 Excess of revenue over expenses and disbursements 13,399 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

2016.05000 LAULIMA FOUNDATION

Form **990-PF** (2016)

Form 990-PF

| P | art l | Balance Sheets Anached schedules and amounts in the description column should be for end-of-year amounts only | (a) Pools Value | | (a) Four Market Value |
|---------------|-------|---|---|--|--|
| $\overline{}$ | _ | | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | | Cash - non-interest-bearing | | | |
| | | Savings and temporary cash investments | | | |
| Ì | | Accounts receivable | | | |
| - [| | Less: allowance for doubtful accounts | | | |
| Į | | Pledges receivable | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | The William Commission of the William Commission of the Commission | |
| | | Less; allowance for doubtful accounts | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons | | | |
| | 7 | Other notes and loans receivable | | | manufacture commence according to the compression of an experience of the second |
| ı | | Less: allowance for doubtful accounts | | | |
| 2 | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | |
| ا ت | 10a | Investments - U.S. and state government obligations | | | |
| | b | Investments - corporate stock STMT 5 | 2,000,010. | 2,535,090 | 2,535,090. |
| i | C | Investments - corporate bonds | | | |
| | 11 | Investments - land, buildings, and equipment basis | | ······································ | · |
| | | Less accumulated depreciation | | | |
| | 12 | Investments - mortgage loans | | | |
| | 13 | Investments - other | | | |
| | 14 | Land, buildings, and equipment basis | | 4 <u>R</u> . "M | |
| | | Less accumulated depreciation | | | |
| | 15 | Other assets (describe | | | |
| | 16 | Total assets (to be completed by all filers - see the | | | |
| | | instructions. Also, see page 1, item I) | 2,000,010. | 2,535,090 | 2,535,090. |
| | 17 | Accounts payable and accrued expenses | | 2,535,090 7,853 | 3. |
| | 18 | Grants payable | | | |
| ç | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| api | 21 | Mortgages and other notes payable | | | |
| Ξ | 22 | Other liabilities (describe 🕨) | | | |
| | | | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | 7,853 | 3. |
| | | Foundations that follow SFAS 117, check here | | | |
| | | and complete lines 24 through 26 and lines 30 and 31. | | | , |
| Ses | 24 | Unrestricted | | | |
| ance | 25 | Temporarily restricted | | | |
| Bal | 26 | Permanently restricted | | | |
| þ | | Foundations that do not follow SFAS 117, check here | | | ' |
| or Fund | | and complete lines 27 through 31. | | | , |
| | 27 | Capital stock, trust principal, or current funds | 2,000,010. | 2,000,010 | <u>) . </u> |
| Assets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | ` | <u>) </u> |
| | 29 | Retained earnings, accumulated income, endowment, or other funds | 0. | 527,22 | 7. |
| ş | 30 | Total net assets or fund balances | 2,000,010. | 2,527,23 | <u>7. </u> |
| | | | | | _ |
| | 31 | Total liabilities and net assets/fund balances | 2,000,010. | 2,535,090 | 0. |
| P | art | Analysis of Changes in Net Assets or Fund Ba | alances | | |
| = | | | | | |
| | | net assets or fund balances at beginning of year - Part II, column (a), line | JU | [| 2 000 010 |
| | • | t agree with end-of-year figure reported on prior year's return) | | } | 1 2,000,010. |
| | | amount from Part I, line 27a | CATMO OM TARDO | TIMENTO C | 2 29,774. |
| | | r increases not included in line 2 (itemize) UNREALIZED | GWIND ON THAF? | THUMIS | 3 497,453. 4 2,527,237. |
| | | ines 1, 2, and 3 eases not included in line 2 (itemize) | | ŀ | |
| - | | · · · · · · · · · · · · · · · · · · · | olumn (h) line 20 | | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ |
| 6_ | rotal | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | 6 2,321,231. | | |

| | | NDATION | | | | | | 81-085 | 8179 | Page 3 |
|--|--------------------|---|-----------------|----------------------|-------------------|--|---------------|---------------------------------------|-------------------------------------|--------------|
| Part IV Capital Gains a | | | | Income | 141 | Universal | · | | | |
| 2-story brick wai | ehouse; or com | f property sold (e.g., mon stock, 200 shs. | MLC Co.) | _ | (¹⁰) | How acquired - Purchase - Donation | (c) D | o., day, yr.) | (d) Dat (mo., da | |
| 1a 2127 SHS ALEXAN | | ALDWIN IN | IC - PU | BLICLY | L | | ↓ | | | |
| b TRADED SECURITY | , | | | | ├ | | | | | |
| <u>c</u> | | | | | ┼ | | | | | |
| <u>d</u> | | | | | +- | | + | | | |
| <u>e</u> | (f) Depreci | ation allowed | In) Cos | st or other basis | ١ | | | h) Gain or (loss | \ | |
| (e) Gross sales price | | lowable) | | xpense of sale | | | | plus (f) minus | | |
| a 79,888. | | | | 80,06 | _ | | | | | -172. |
| | | | | 80,00 | ٠٠ | | | | | 1/2. |
| c d | | | - | | | | | | | |
| e | | | | | | | | | | |
| Complete only for assets showing | gain in column | (h) and owned by t | he foundation | on 12/31/69 | | | (I) Gain | s (Col. (h) gain | minus | |
| (i) F.M.V. as of 12/31/69 | | sted basis 12/31/69 | | cess of col. (1) | | | | out not less that ses (from col. (| | |
| <u>a</u> | | | · | | | | | | | -172 . |
| <u>b</u> | | | | | | | | | | 1140 |
| - d | | | | | | | | | | |
| e | | | | | | | | | | |
| 2 Capital gain net income or (net cap | ortal foss) | If gain, also enter If (loss), enter -0- | in Part 1, line | 7 7 |) | 2 | | | | -172. |
| 3 Net short-term capital gain or (los. | • | • | | , | | | | | | |
| If gain, also enter in Part I, line 8, | | 3000013 1222(3) 411 | u (<i>0)</i> . | | J | | | | | |
| If (loss), enter -0- in Part I, line 8 | -16 | 4040/5\4== | 6 -33 | Tay as Nat | | 3 | | N/A | | |
| Part V Qualification Ur | | | | | | | Come | | | |
| (For optional use by domestic private | toundations sub | lject to the section 4 | 1940(a) tax on | net investment in | icome | ·.) | | | | |
| If section 4940(d)(2) applies, leave th | ıs part blank. | | | | | | | | | |
| Was the foundation liable for the sect | on 4942 tax on | the distributable am | ount of any ye | ear in the base per | riod? | | | | Yes | X No |
| If "Yes," the foundation does not quali | | | | | | | | | | |
| 1 Enter the appropriate amount in e | ach column for | each year; see the in | structions bef | ore making any e | ntries | · | ,- | | 7.0 | |
| (a) Base period years Calendar year (or tax year beginnin | ıgın) Adı | (b) justed qualifying dist | tributions | Net value of no | (c) oncha | | ets | Distri (col. (b) div | (d) oution ratio ided by col. | . (c)) |
| 2015 | | | | | | | | | | |
| 2014 | | | | | | | | | | |
| 2013 | | | | | | | | | | |
| <u>2012</u> 2011 | | | | | | | | | | |
| 2011 | | | | L | - | | | | | |
| 2 Total of line 1, column (d) | | | | | | | } | 2 | | |
| 3 Average distribution ratio for the 5 | -year base perio | od - divide the total o | on line 2 by 5, | or by the number | of ye | ars | | | | |
| the foundation has been in exister | ice if less than 5 | years | | | | | L | 3 | | |
| 4 Enter the net value of noncharitab | le-use assets for | 2016 from Part X, I | line 5 | | | | | 4 | - | |
| 5 Multiply line 4 by line 3 | | | | | | 5 | | | | |
| | o (19/ of Doub! | lina 27h\ | | | | | | 6 | | |
| 6 Enter 1% of net investment incom | 5 (176 ULTZIL), | nng 27U} | | | | | | | | |
| 7 Add lines 5 and 6 | | | | | | | <u> </u> | 7 | | |
| 8 Enter qualifying distributions from | Part XII, line 4 | | | | | | | 8 | | |
| If line 8 is equal to or greater than See the Part VI instructions. | | e box in Part VI, line | : 1b, and comp | plete that part usin | ng a 1 | % tax rate. | _ | | | |
| 528 the Fait VI instructions. | | | | | | | | | Form 990 - | -PF (2016) |

| orm 990-PF (2016) LAULIMA FOUNDATION Part VI Excise Tax Based on Investment Income (Section 4940 and Appear of Laurian Section 4940 (d)(2), check here (attach copy of letter if the section 4940 (d)(2), check here (attach copy of letter if the section 4940 (d)(2)). | 81-0858179 Page 4 |
|--|--|
| • | 1040(a) or 4948 - see instruction |
| TON TON | i0(a), 4940(b), 4940(e), |
| LAULIMA FOUNDATION (Section 40 | denter *N/A* on line 1. |
| orm 990-PF (2016) IAUDE on Investment III and | necessary-see instructions) |
| TAULIFIA Investment income (2016) Part VI Excise Tax Based on investment income (2016) 1a Exempt operating foundations described in section 4940(d)(2), check here (2016) 1a Exempt operating foundations described in section 4940(d)(2), check here (2016) 1a Exempt operating foundations letter: 1a Date of ruling or determination letter: 2b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 2ct of time 27b. Exempt foreign organizations enter | necessary-see instructions) and enter 1% |
| 18 Exempt operating foundation letter: requirements in Part V, check here | |
| Date Of Tuling of the Section 19 17 | 4% of Part I, line 12, col. (b). |
| b Domestic foundations that the Domestic foreign organizations enter | Others enter -0-) |
| of Part 1, line 2. | 268 |
| Date of ruling or determination letter: Date of ruling or determination letter: Domestic foundations that meet the section 4940(e) requirements in Part V, circumstance of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations on Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable toundations on Subtract line 4 from line 3. If zero or less, enter -0. | oly Others enter -0-) 5 |
| 2 Tax under section 311 (65.1) | 101. |
| 2 Tax under section 3 Add lines 1 and 2 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5 Tax based on investment income. | |
| 4 Subtitle A (income) tax (subtract line 4 from m | 68 |
| 5 Tax based on investment income 6 Credits/Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 a 2016 estimated tax payments and 2015 overpayment credited to 2016 because of the course | 66 3 000. |
| 6 Credits/Payments and 2015 over payments | 60 3,000. |
| a 2016 estimated tax payments and 2013 over personal at 2016 estimated tax payments and 2013 over personal at 2015 over personal at | 60 7 |
| b Exempt foreign of extension of time to | 8 |
| Tax paid with application to the errongously withheld | 20 is attached 9 2,732. |
| Darkin Willings 17 finac by fillings. | 10 0. |
| 7 Total credits and payments. Add lines 5 and tax. Check here 8 Enter any penalty for underpayment of estimated tax. Check here 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount over the amount of the total of lines 5 and 8, enter the amount or 1 and | verpaid 2,732. Refunded 11 Yes No |
| 8 Enter any penalty to other 5 and 8 is more than the 5 and 8, enter the amount of | 2,732. Reluitos |
| 9 Tax due. If the total of the total of lines of the lines of lines of the lines of the lines of lin | x esta or intervene in |
| in Overpayment to to be: Credited to 2 A ctivities | or local legislation or did it participate or little veno. |
| 11 Enter the annual Statements Regarding | -toution)? |
| Part VII-A Statements Regarding Activities 1a During the tax year, did the foundation attempt to influence any national, state, of any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political campaign? If the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift the answer is "Yes" to 1a or 1b, attach a detailed description of the lift | situal nurposes (see instructions for the sublished or |
| 1a During the lax year, and learning? | activities and copies of any materials participated and the same of the same o |
| any pointed than \$100 during the year | activines , |
| b Did it spend more "Yes" to 1a or 1b, attach a detailed | |
| If the answer is | the year: 0. |
| distributed by the foundation in connection distributed by the foundation in connection by the foundation file Form 1120-POL for this year? c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) impose 0 (2) On foundation file Form 1120-POL the foundation during the year for political expenditures that have not previously been for accounts. | ation managers. \$ adjustical expenditure tax imposed on foundation 2 |
| c Did the foundation (if any) of tax on political exponent 0. (2) On foundation | solutical expenditure tax imposed difficulties |
| d Enter the amount (**) | minor or i |
| (1) On the local (if any) pale by the local | aho IRS? |
| e Enter the reimbursement (in day). O a managers. S managers. 1 Has the foundation engaged in any activities that have not previously been for the activities. If "Yes," attach a detailed description of the activities. If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, that the foundation made any changes, not previously reported to the IRS, attach a conformed conform | epurious of incorporation, or |
| managers. Franklation engaged in any activities | in its inverning instrument, arriving |
| Has the foundation and detailed description of the administration of the ad | by of the changes N/A 4b X |
| If "Yes," attach a detailed any changes, not previously reported copy attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments? If "Yes," attach a conformed copy bylaws, or other similar instruments. It is not a conformed copy bylaws, or other similar instruments. It is not a conformed copy bylaws, or other simil | by of the criange N/A 45 X |
| 3 Has the found of similar instruments, if tes, sincome of \$1,000 of the | |
| bytaws, or or bytaws, or or this year? | on during the year? |
| 4a Dio the town at filed a tax feturn on Form 300 and schillion, or substantial contraction | |
| bylaws, or other simulation have unrelated business gross into the foundation have unrelated business gross into the fire for this year? b If "Yes," has it filed a tax return on Form 990-T for this year? b If "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction T if "Yes," attach the statement required by General Instruction T if "Yes," attach the statement required by General Instruction T are the requirements of section 508(e) (relating to sections 4941 through the requirement of the governing instrument, or the property of the first property in the governing instrument. | th 4945) satisfied either: |
| Was there a liquidation, terminate the statement required by General Instruction. If "Yes," attach the statement required by General Instruction. Are the requirements of section 508(e) (relating to sections 4941 through the requirements of section 508(e) (relating to sections 4941 through the governing instrument, or By language in the governing instrument? By state legislation that effectively amends the governing instrument? | 11 4910) State that conflict with the state law |
| Are the requirements of section 500(c) to the requirements of section 500(c) to the requirements of section 500(c) to the section 50 | so that no mandatory directions that common 7 X |
| Are the requirements of solutions of the governing instrument, or By language in the governing instruments the governing instrument By state legislation that effectively amends the governing instrument? remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the control of the foundation have at least \$5,000 in assets of with which it is reg | out II col (c), and Part XV |
| By state legislation that effectively amount | e year? If "Yes," complete Pan ", con the |
| camain in the governing instrument. | |
| - Did the foundation have at least \$5,000 | nistered (see instructions) |
| y coundation reports or with which it is to | gistered (or designate) 8b X |
| 7 Did the foundation have at least \$5,000 in assets at any time 5.7 8a Enter the states to which the foundation reports or with which it is required. | of Form 990-PF to the Attorney Country (X |
| | |
| 8a Enter the states to which the foundation reports or with which it is required. 15 If the answer is "Yes" to line 7, has the foundation furnished a copy of each state as required by General Instruction G? If "No," attaction of each state as required by General Instruction G? If "No," attaction is the foundation claiming status as a private operating foundation of year 2016 or the taxable year beginning in 2016 (see instructions for year 2016 or the taxable year beginning in 2016 (see instructions for year 2016). | within the meaning of section 4942()//07 |
| of each state as required by General move operating foundation of | within the meaning of sectors within |
| a is the foundation claiming status as a programme in 2016 (see instructions in | 277 H "Yes," attach a schedule listing una |
| year 2016 or the taxable year population of the tax ye | |
| of each state as required by General Instruction Grang foundation of each state as required by General Instruction Grang foundation of each state as required by General Instruction of state as a private operating foundation of the taxable year beginning in 2016 (see instructions for year 2016 or the taxable year beginning in 2016 (see instructions for year 2016 or the taxable year beginning in 2016 (see instructions for year 2016 or the taxable year beginning in 2016 (see instructions for year 2016 or the taxable year beginning in 2016 (see instruction). | |
| 10_0: | |
| | |

623541 11-23-16

b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 990-PF (2016)

N/A

3b

4a

X

| Form 990-PF (2016) LAULIMA FOUNDATION | | | <u>81-08581</u> | 79 Page 6 | | |
|--|---|-----------------------------|--|---|--|--|
| Part VII-B Statements Regarding Activities for Which F | orm 4720 May Be Re | equired (continu | ued) | | | |
| 5a During the year did the foundation pay or incur any amount to: | | | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | ı 4945(e)) [?] | Ye | s X No | 1 1 | | |
| (2) Influence the outcome of any specific public election (see section 4955); or | r to carry on, directly or indire | ctly, | j | | | |
| any voter registration drive? | | Ye | s X No | 1 1 | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes' | ? | Ye | s X No | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | (4) Provide a grant to an organization other than a charitable, etc., organization described in section | | | | | |
| 4945(d)(4)(A)? (see instructions) | ☐ Ye | s X No | 1 1 | | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or | İ | | | | |
| the prevention of cruelty to children or animals? | | s X No | | | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | n Regulations | | | | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instrui | | J | N/A | 5b | | |
| Organizations relying on a current notice regarding disaster assistance check hi | • | | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained | | | | | | |
| expenditure responsibility for the grant? | | | es 🔲 No | 1 1 | | |
| If "Yes," attach the statement required by Regulations section 53 4945 | | | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | • • | | 1 | | | |
| a personal benefit contract? | pay promise on | [Ye | s X No | | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | | Sb X | | |
| | orgonal bonom contract | | F | | | |
| If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax s | halter transaction? | [v | s X No | | | |
| b. If "Yes," did the foundation receive any proceeds or have any net income attribu | | L '' | | 7b | | |
| Part VIII Information About Officers, Directors, Truste | | agers. Highly | | | | |
| Paid Employees, and Contractors | cs, roundation was | iagoro, riigiiry | | | | |
| 1 List all officers, directors, trustees, foundation managers and their of | compensation. | | | | | |
| | (b) Title, and average | (c) Compensation | (d) Contributions to | (e) Expense account, other | | |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | account, other allowances | | |
| BILL D MILLS | PRESIDENT/DIR | | companiation | 4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| 1100 ALAKEA STREET, SUITE 2200 | 1 | | | | | |
| HONOLULU, HI 96813 | 0.00 | 0. | 0. | 0. | | |
| DAVID C HULIHEE | VICE PRESIDEN | | | | | |
| 822 BISHOP STREET | 110000000000000000000000000000000000000 | [| _ | | | |
| HONOLULU, HI 96813 | 0.00 | 0. | 0. | 0. | | |
| DIANE CHANG | TREASURER/DIR | | , , , , , , , , , , , , , , , , , , , | | | |
| 1100 ALAKEA STREET, SUITE 2200 | TREMBORES DER | | | | | |
| HONOLULU, HI 96813 | 0.00 | 0. | 0. | 0. | | |
| CLAIRE ANIYA | SECRETARY | ļ | | <u>~·</u> | | |
| 1100 ALAKEA STREET, SUITE 2200 | DECKETAKI | | | | | |
| 0.504.0 | 0.00 | 0. | 0. | 0. | | |
| HONOLULU, HI 96813 2 Compensation of five highest-paid employees (other than those inc | | | · | <u> </u> | | |
| | (b) Title, and average | 1 | (d) Contributions to | (e) Expense | | |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deterred | account, other allowances | | |
| NONE | טפעטנפט נט טטאווטוו | | compensation | diowances | | |
| ANON | } | | | | | |
| | | | | | | |
| | 1 | | | | | |
| | | | | | | |
| | 1 | 1 | | | | |
| | | | | | | |
| | 1 | { | | | | |
| | | | - | | | |
| | 1 | | | | | |
| | L | l | | 0 | | |
| Total number of other employees paid over \$50,000 | | | <u>P</u> | 990-PF (2016) | | |
| | | | Form | 330-LL (S019) | | |

| | 0858179 Page 7 |
|--|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) | |
| 3 Five highest-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 | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Total number of others receiving over \$50,000 for professional services | ▶ 0 |
| Part IX-A Summary of Direct Charitable Activities | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 N/A | |
| | 1 |
| | |
| 2 | - |
| | 1 |
| 3 | |
| | 1 |
| | |
| 4 | 4 |
| | 4 |
| Part IX-B Summary of Program-Related Investments | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amount |
| 1 N/A | |
| |] |
| | |
| 2 | 4 |
| | 1 |
| All other program-related investments. See instructions. | |
| 3 | 1 |
| |] |
| | 1 |
| | 4 |
| | 4 |
| Total. Add lines 1 through 3 | 0. |
| Totali / Go mica i arrogetto | Form 990-PF (2016) |

| | art X Minimum Investment Return (All domestic foundations must complete the | is part. Foreign foun | dation | s, 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 | 2,123,777. |
| ь ь | Average of monthly cash balances | l | 1b | 2,123,777. 54,962. |
| c | Fair market value of all other assets | | 10 | |
| d | Total (add lines 1a, b, and c) | 1 | 1d | 2,178,739. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | | |
| | 1c (attach detailed explanation) | 0. | } | |
| 2 | Acquisition indebtedness applicable to line 1 assets | | 2 | 0. |
| 3 | Subtract line 2 from line 1d | | 3 | 2,178,739. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | | 4 | 32,681. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | į | 5 | 2,146,058. |
| 6 | Minimum investment return. Enter 5% of line 5 | | 6 | 107,303. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private op | erating foundations and | d certai | n |
| | foreign organizations check here and do not complete this part.) | | | |
| 1 | Minimum investment return from Part X, line 6 | | 1 | 107,303. |
| 2a | Tax on investment income for 2016 from Part VI, line 5 | 268. | | |
| b | Income tax for 2016. (This does not include the tax from Part VI.) | | .i | |
| c | Add lines 2a and 2b | | 2c | 268. |
| 3 | Distributable amount before adjustments, Subtract line 2c from line 1 | | 3 | 107,035. |
| 4 | Recoveries of amounts treated as qualifying distributions | | 4 | 0. |
| 5 | Add lines 3 and 4 | 1 | 5 | 107,035. |
| 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 | 107,035. |
| P | art,XII Qualifying Distributions (see instructions) | | 1 | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | | 02.452 |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | | 1a | 83,453. |
| b | Program-related investments - total from Part IX-B | | 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: | | | |
| a | , , , , , , , , , , , , , , , , , , , | | 3a | |
| þ | , | | _3b_ | 02.452 |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | | 4 | 83,453. |
| 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 | 83,453. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | | 6_ | |
| | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating what 4940(e) reduction of tax in those years. | nether the foundation q | ualifies | for the section |
| _ | | | | Form 990-PF (2016) |

| ١ | Part XIII | Undistributed Income | (see instructions) |
|---|-----------|-----------------------------|--------------------|
| | | | |

| | (a) Corpus | (b) Years prior to 2015 | (c) 2015 | (d) 2016 |
|--|---------------|----------------------------|---|---------------------------------------|
| 1 Distributable amount for 2016 from Part XI, | 00.700 | roard prior to cond | 20.0 | 2010 |
| line 7 | | | | 107,035. |
| 2 Undistributed income, if any, as of the end of 2016 | | | | |
| a Enter amount for 2015 only | | | 3,884. | |
| b Total for prior years: | | | • | |
| , , | | 0. | | |
| 3 Excess distributions carryover, if any, to 2016: | | | | |
| a From 2011 | | | | |
| b From 2012 | | | | , |
| c From 2013 | | | | , |
| d From 2014 | | | | |
| e From 2015 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2016 from | | | | , |
| Part XII, line 4: ►\$ 83,453. | , ** | | name at the first and the first properties. And the first | , |
| a Applied to 2015, but not more than line 2a | , | | 3,884. | |
| b Applied to undistributed income of prior | | | | * |
| years (Election required - see instructions) | | 0. | * * * | , , , , , , , , , , , , , , , , , , , |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2016 distributable amount | | | , | 79,569. |
| e Remaining amount distributed out of corpus | 0. | | ` | * * * ** |
| 5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a).) | 0. | , %** 4 | , | O |
| 6 Enter the net total of each column as indicated below: | | | ,` ` | , |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0. | | * | , |
| b Prior years' undistributed income. Subtract | , | | | |
| line 4b from line 2b | × | 0. | | |
| 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 assessed | | 0. | | , |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2015. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2016. Subtract | | | | ``` |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2017 | | | | 27,466. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | , | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2011 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2017. | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2012 | | | | |
| b Excess from 2013 | | | | |
| c Excess from 2014 | | | | |
| d Excess from 2015 | 1 | | | |
| e Excess from 2016 | L | L | <u> </u> | |
| 623581 11-23-16 | | | | Form 990-PF (2016) |

623581 11-23-16

| | FOUNDATION | | | | 58179 Page 10 |
|--|---------------------------------------|---------------------------------------|---------------------------|----------------------------|---------------------------|
| Part XIV Private Operating Fo | | | A, question 9) | N/A | |
| 1 a If the foundation has received a ruling or | | | | | |
| foundation, and the ruling is effective for | • | • | ▶ ـ | <u> </u> | |
| b Check box to indicate whether the found | | ing foundation described in | | 4942(j)(3) or4 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | (L) 0015 | Prior 3 years | T (4) 0040 | . |
| income from Part I or the minimum | (a) 2016 | (b) 2015 | (c) 2014 | (d) 2013 | (e) Total |
| investment return from Part X for | I | | | | |
| each year listed | | - | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | · · · · · · · · · · · · · · · · · · · | | | | |
| d Amounts included in line 2c not | I | | | | |
| 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: | 1 | | | | |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | - | | + | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum 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) | | 1 | | | |
| (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 | | <u> </u> | | | <u>l.,</u> |
| Part XV Supplementary Info | | | the foundation | had \$5,000 or mo | re in assets |
| at any time during the | | ructions.) | | | |
| 1 Information Regarding Foundation | = | | | | |
| a List any managers of the foundation who year (but only if they have contributed m | | | ibutions received by the | foundation before the clos | se of any tax |
| BILL D MILLS | 1010 than \$0,000). (Occ | 3000011 307 (4)(2).) | | | |
| b List any managers of the foundation who | | | or an equally large porti | on of the ownership of a p | artnership or |
| other entity) of which the foundation has | a 10% or greater intere | est | | | |
| NONE | | · · · · · · · · · · · · · · · · · · · | | | |
| 2 Information Regarding Contribution | | | | | |
| Check here X if the foundation of the foundation makes gifts, grants, etc. (| | | | | |
| a The name, address, and telephone numb | • | - | | | |
| | | | | | |
| b The form in which applications should b | e submitted and inform | ation and materials they sh | ould include: | | |
| c Any submission deadlines: | | | | | |
| d Any restrictions or limitations on awards | s, such as by geographi | cal areas, charitable fields, | kınds of institutions, or | other factors: | |
| | | | | | |
| 623601 11-23-16 | | | | | Form 990-PF (2016) |

Form 990-PF (2016)

| or arnce amounts upless athenues and anted | Unrelated h | usiness income | Excluded h | y section 512, 513, or 514 | /-> |
|--|---------------------------|-----------------------|--|----------------------------|--------------------------|
| er gross amounts unless otherwise indicated. | (a) Business | (b) | (C) Exclu- sion | (d) | (e) Related or exempt |
| Program service revenue: | code | Amount | code | Amount | function income |
| a | | | 4-4- | | |
| b | | | | | |
| : | | | | | |
| d | | | | | |
| · | | | | | |
| · | | | | | |
| Fees and contracts from government agencies | | | -4 | | |
| Membership dues and assessments | ļ | | -+ | | |
| nterest on savings and temporary cash | | | | _ | |
| nvestments | | | 14 | 5. | |
| Dividends and interest from securities | | | 14 | 13,959. | |
| Net rental income or (loss) from real estate: | | | | | |
| Debt-financed property | <u> </u> | | | | |
| Not debt-financed property | | | | | |
| let rental income or (loss) from personal | | | | | |
| property | ļ | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other | 1 1 | | | 470 | |
| han inventory | | | 18 | -172. | |
| let income or (loss) from special events | | | _ _ | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue: | | | 1 | | |
| a | | | | | |
| · | | | | | |
| · | i i | | _ | | |
| d | | | | · | |
| | | | | 12 702 | |
| Subtotal. Add columns (b), (d), and (e) | | 0 | <u></u> | 13,792. | |
| Total. Add line 12, columns (b), (d), and (e) | _ | | | 13 | 13,79 |
| worksheet in line 13 instructions to verify calculatio | | | | | |
| | es to the Accomi | aliahmant of E | xemnt Pu | rposes | |
| rt XVI-B Relationship of Activiti | | onsument of E | xope . c | | |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |
| e No. Explain below how each activity for whic | h income is reported in c | olumn (e) of Part XVI | -A contributed | | olishment of |

Form **990-PF** (2016)

623621 11-23-16

| Fırm's EIN | ▶86-1065772 |
|------------|--------------|
| Phone no. | 808-543-0700 |

Form 990-PF (2016)

X Yes

P00290855

Sign Here

Paid

Preparer

Use Only

Under penalties of perfury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge

Preparer's signature

and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any kno

Firm's address ▶ 999 BISHOP ST, SUITE 2700

HONOLULU, HI 96813-4454

PRESIDENT

Check [

self-employed

Title

11/10/17

Date

Signature of officer or trustee

Print/Type preparer's name

GREGG K FURUYA

Firm's name ► DELOITTE TAX

Schedule B

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

Department of the Treasury Internal Revenue Service

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

| Name of the | e organization | Employer identification number | | | | | |
|-------------------|--|--------------------------------|--|--|--|--|--|
| | LAULIMA FOUNDATION | 81-0858179 | | | | | |
| Organizatio | n type (check one) | | | | | | |
| Filers of: | Section: | | | | | | |
| Form 990 or | 990-EZ 501(c)() (enter number) organization | | | | | | |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation | | | | | | |
| | 527 political organization | | | | | | |
| Form 990-P | 501(c)(3) exempt private foundation | | | | | | |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation | | | | | | |
| | 501(c)(3) taxable private foundation | | | | | | |
| | | | | | | | |
| • | r organization is covered by the General Rule or a Special Rule. I section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru | le See instructions. | | | | | |
| General Ru | е | | | | | | |
| | an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling perty) from any one contributor. Complete Parts I and II. See instructions for determining a contributor | · · · · · · · | | | | | |
| Special Rul | es e | | | | | | |
| se an | an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support stions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount ii) Form 990-EZ, line 1 Complete Parts I and II | or 16b, and that received from | | | | | |
| yea | 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, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III | | | | | | |
| yea Is c pu | For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year | | | | | | |
| | organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fanswer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its F | orm 990, 990-EZ, or 990-PF), | | | | | |

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

| Name of or | B (FORM 990, 990-EZ, or 990-PF) (2016) | | Employer identification number | |
|------------|---|---------------------------|---|--|
| | | | | |
| Part I | MA FOUNDATION Contributors (See instructions). Use duplicate copies of Part I if a | 81-0858179 | | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contribution | (d) | |
| 1 | BILL D MILLS 1100 ALAKBA STREET, SUITE 2200 HONOLULU, HI 96813 | \$100,0 | Person X Payroll Noncash (Complete Part II for noncash contributions) | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contribution | (d) Type of contribution | |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions) | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contribution | (d) Type of contribution | |
| | | s | Person Payroll Noncash (Complete Part II for noncash contributions) | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contribution | (d) Type of contribution | |
| | | | Person Payroll Noncash (Complete Part II for noncash contributions.) | |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contribution | (d) Type of contribution | |
| | | \ | Person Payroll Noncash | |

623452 10-18-16

(a)

No.

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Person Payroll Noncash (Complete Part II for noncash contributions)

(Complete Part II for noncash contributions)

(d)

Type of contribution

(b)

Name, address, and ZIP + 4

(c)

Total contributions

Name of organization

Employer identification number

LAULIMA FOUNDATION

81-0858179

| ===== | | | |
|------------------------------|--|--|-----------------------------|
| Part II | 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 |
| | | \$ | 000 000 E7 or 000 PEV/2016V |

623453 10-18-16

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

623454 10-18-16

| FORM 990-PF INTERE | ST ON SAVII | NGS AND TEM | PORARY C | ASH IN | VESTMENTS | STATEMENT 1 | |
|---------------------|-----------------|------------------------------|---------------------------|------------------------------|-------------------------------|-------------------------------|--|
| SOURCE | | (A REVEI PER BO | NUE | (B) NET INVESTMENT INCOME 5. | | (C) ADJUSTED NET INCOME | |
| MERRILL LYNCH | | 5. | | | | | |
| TOTAL TO PART I, LI | NE 3 | | 5. | | 5. | | |
| FORM 990-PF | DIVIDEND | S AND INTER | EST FROM | I SECUR | ITIES | STATEMENT 2 | |
| SOURCE | GROSS AMOUNT | CAPITAL GAINS DIVIDEND | REV | A) ENUE BOOKS | (B) NET INVES MENT INCO | | |
| MERRILL LYNCH | 13,959 | • | 0. 1 | 3,959. | 13,95 | 9. | |
| TO PART I, LINE 4 | 13,959 | • | 0. 1 | 3,959. | 13,95 | 9. | |
| FORM 990-PF | | ACCOUNTI | NG FEES | | | STATEMENT 3 | |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | (B) NET INV MENT IN | EST- | (C) ADJUSTED NET INCOM | | |
| ACCOUNTING FEES | _ | 1,937. | | 484. | | 1,453. | |
| TO FORM 990-PF, PG | 1, LN 16B | 1,937. | ======= | 484. | | 1,453. | |
| FORM 990-PF | | OTHER E | XPENSES | | | STATEMENT 4 | |
| DESCRIPTION | | (A) EXPENSES PER BOOKS | (B) NET INV MENT IN | /EST- | (C) ADJUSTED NET INCOM | | |
| BUSINESS EXPENSES | | 81. | | 81. | | 0. | |
| TO FORM 990-PF, PG | 1, LN 23 | 81. | | 81. | | 0. | |
| | | | | | | | |

| FORM 990-PF C | CORPORATE STOCK | | STATEMENT 5 |
|-----------------------------------|-----------------|------------|----------------------|
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE |
| ALEXANDER & BALDWIN INC | - | 2,535,090. | 2,535,090. |
| TOTAL TO FORM 990-PF, PART II, LI | INE 10B | 2,535,090. | 2,535,090. |