20

E Telephone number

G Gross receipts \$

H(c) Group exemption number ▶

2010

H(a) Is this a group return for subordinates? Yes No H(b) Are all subordinates included? 🔲 Yes 🔲 No

If "No," attach a list (see instructions)

M State of legal domicile

D Employer identification number

27-4346053

OMB No 1545-0047

2018

Open to Public

Inspection

н

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public!

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

) ◀ (insert no) ☐ 4947(a)(1) or

Briefly describe the organization's mission or most significant activities: Kauai Energy Institute (KEI) is a scientific research

and education organization whose mission is the study of weak energies to determine how such weak energies can be observed,

Robert Reading

c/o Scarborough McNeese, 5 Centerpointe Drive, Lake Oswego, OR 97035

2018, and ending

L Year of formation

SCANNED

Department of the Treasury

Check if applicable

Final return/terminated

Amended return

Tax-exempt status

Summary

Website: ▶

Part I

Address change

Name change Initial return

For the 2018 calendar year, or tax year beginning

Application pending F Name and address of principal officer

Doing business as

Lake Oswego, OR 97035

Form of organization
☐ Corporation ☐ Trust ☐ Association ☐ Other ▶

C Name of organization Kauai Energy Institute

Number and street (or P O box if mail is not delivered to street address)

c/o Scarborough McNeese et al, 5 Centerpointe Drive City or town, state or province, country, and ZIP or foreign postal code

Internal Revenue Service

Cat No 11282Y

Form 990 (2018)

	90 (2018)	4 Days	A			Page
arı		f Program Service	Accomplishments esponse or note to any line in this Pa	ort 111		. [
1		organization's mission			· · · ·	<u>. L</u>
•		•	research and education organization who	se mission is the study of wea	k energies to	1
			observed, recorded, measured and quar			
		ants, animals, and hun				
	<u> </u>			<u>.</u> .		
2	Did the organization prior Form 990 or 9		ificant program services during the yea	ar which were not listed on th		
	•	nese new services on	Schodulo O		☐ Yes	✓ NC
3			g, or make significant changes in ho	ow it conducts any prograi	m	
	services?	· · · · · ·			 □ Yes	☑ No
	If "Yes," describe th	nese changes on Sch	edule O.			
4		-	rvice accomplishments for each of its	three largest program service	es, as measi	ured l
			4) organizations are required to report	the amount of grants and al	locations to	othe
	the total expenses,	and revenue, if any, f	or each program service reported.			
la			ıncluding grants of \$)
			chase and renovation as a research facil		ice at such ti	me as
	the facility is ready for	or use			•••••	
		•••••••			·	
					~	
	** *** * *** **************************					
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				
					······································	
4b			442,000 including grants of \$	442,000 ) (Revenue \$		)
łb	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
łb	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
lb	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
lb	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
lb	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
b	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
łb	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
lb	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
1b	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
lb	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
lb	KEI received a grant	in the amount of \$440,	442,000 including grants of \$	442,000 ) (Revenue \$	31, 2018.	)
	KEI received a grant KEI distributed grant	in the amount of \$440, ts to qualified unrelated	442,000 including grants of \$	442,000 ) (Revenue \$ ibuted on or before December : of \$442,000 before December	31, 2018.	)
	KEI received a grant KEI distributed grant	in the amount of \$440, ts to qualified unrelated	442,000 including grants of \$ 125 in 2017 that was required to be districted to be districted to the amount	442,000 ) (Revenue \$ ibuted on or before December : of \$442,000 before December	31, 2018.	)
	KEI received a grant KEI distributed grant	in the amount of \$440, ts to qualified unrelated	442,000 including grants of \$ 125 in 2017 that was required to be districted to be districted to the amount	442,000 ) (Revenue \$ ibuted on or before December : of \$442,000 before December	31, 2018.	)
	KEI received a grant KEI distributed grant	in the amount of \$440, ts to qualified unrelated	442,000 including grants of \$ 125 in 2017 that was required to be districted to be districted to the amount	442,000 ) (Revenue \$ ibuted on or before December : of \$442,000 before December	31, 2018.	)
1b	KEI received a grant KEI distributed grant	in the amount of \$440, ts to qualified unrelated	442,000 including grants of \$ 125 in 2017 that was required to be districted to be districted to the amount	442,000 ) (Revenue \$ ibuted on or before December : of \$442,000 before December	31, 2018.	)

				***************************************	
	*************				
		***************************************			
4d	Other program serv	rices (Describe in Schedule O )			
	(Expenses \$	including grants of \$	) (Revenue \$	)	

Form 99	0 (2018)	)	ı	Page \$
Part				
*			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		✓_
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>	4		✓
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $V$ .	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		✓
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	1	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	1	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		1
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1

Part	Checklist of Required Schedules (continued)			·
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<b>✓</b>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
·	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		<b>✓</b>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV .	28c		<b>✓</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<b>√</b> _
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<b>✓</b>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		<b>√</b>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		<b>√</b>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		✓
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>✓</u>
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	✓_	
Part '				
	Check if Schedule O contains a response or note to any line in this Part V	•••	· ·	<u> </u>
12	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable   1a		105	No I
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 1		
	Did the organization comply with backup withholding rules for reportable payments to vendors and			ı
	reportable gaming (gambling) winnings to prize winners?	1c		$\overline{\checkmark}$
		Forr	n 990	(2018)

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)		,	_
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			ہا
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			<u>√</u>
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		7
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		✓
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<u> </u>		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>√</b>
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>✓</b>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Ju		
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
_	and services provided to the payor?	7a		<b>✓</b>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year			<u> </u>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<b>✓</b>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		✓_
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		✓
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<del></del> -		
9	sponsoring organization have excess business holdings at any time during the year?	-		
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			1
11	Section 501(c)(12) organizations. Enter.  Gross income from members or shareholders			
a	Gross income from members or shareholders			1
b	against amounts due or received from them.)			i
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			1
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	L,		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			1
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			İ
С	the organization is licensed to issue qualified health plans			ŀ
l4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>√</b>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		<u> </u>
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N.			
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O	L	n <b>990</b>	(2019)
		FOIT		(2010)

_. Part								
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S							
Secti	Check if Schedule O contains a response or note to any line in this Part VI	<del>· · ·</del>	-	. ⊻				
0000	on A. dovorning body and management		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year   1a   3							
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O							
b	Enter the number of voting members included in line 1a, above, who are independent .    1b 3							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		<b>√</b>				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		<b>√</b>				
6	Did the organization have members or stockholders?	6		<b>✓</b>				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		1				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	✓					
b	Each committee with authority to act on behalf of the governing body?	8b	✓_					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1				
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reveni	ue Co		1				
		-10	Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u>/</u>	ļ.,				
b 100	Describe in Schedule O the process, if any, used by the organization to review this Form 990	100	<del></del>					
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	1	-				
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	V					
	describe in Schedule O how this was done	12c	✓					
13	Did the organization have a written whistleblower policy?	13		✓				
14	Did the organization have a written document retention and destruction policy?	14		✓				
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a		✓				
b	Other officers or key employees of the organization	15b		1				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		<b>✓</b>				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the							
		16b						
Secti	on C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ▶ HI							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  Upon request  Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte financial statements available to the public during the tax year.			, and				
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	ords	<b>&gt;</b>					
	Patrick D Bryson, 5 Centerpointe Drive, Suite 240, Lake Oswego, OR 97035							

	•		
Form	gan	/2018	١

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ated any currer	it officer, directo	r, or trustee.
				((	C)					
(A)	(B)	Position						(D)	(E)	(F)
Name and Title	Average hours per week (list any	box,	(do not check more than one box, unless person is both an officer and a director/trustee)			an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other	
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Robert Reading, President/Director	2	1		✓				0	0	0
(2) Rod Easterly, Director	1	<b>\</b>						0	0	0
(3) John Lenahan, Director, Secretary/Treasurer	1	1		1				0	О	0
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)									-	
(13)		-					-	-		
(14)										

_" Part	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees			lighe	st C	ompensated E	mployees (co	ntınued	<u>0</u>		
					•	C) ition			<u> </u>					
	(A) Name and title	(B)	(do not check more than box, unless person is bot						(D) Reportable	(E) Reportable			(F) matad	,
	Name and title	Average hours per					is both or/trus		compensation	compensation from				
		week (list any						τ <u>΄</u>	from the	related			ther	^^
		hours for related	d M	state	Officer	ey e	ghe	Former	organization	organizations (W-2/1099-MIS		compe	ensau n the	וזכ
		organizations	cto	T OS	-	를	yee yee	"	(W-2/1099-MISC)				nizatio	
		below dotted line)	Individual trustee or director	al tr		Key employee	ļ ğ	1					related ization	
			tee	Institutional trustee		"	Highest compensated employee					Ū		
				ñ			Ē	1	1	ļ				
(15)			·-											
			<u> </u>				<u> </u>							
(16)														
			<u> </u>		<u> </u>	ļ	ļ							
(17)			Į				ŀ	ĺ						
		ļ		ļ				L_						
(18)														
44.53					<u> </u>						—			
(19)	·····	{	-											
(00)			<u> </u>	ļ			<b></b>							
(20)														
(21)					-	-	-							
(21)		<b></b>												
(22)					<u> </u>						+			
(22)		<del> </del> -												
(23)	<del></del>						-							
<u>1-9/</u>		ļ			1		}	1	1	}	- 1			
(24)		· · · · · · · · · · · · · · · · · · ·		_	$\vdash$			┢			<del></del>			<del></del> -
37.:/			ł								-			
(25)										-				
							ļ		1		- 1			
1b	Sub-total			•				<u></u>						
С	Total from continuation sheets to Part	VII, Sectio	n A					▶						
d	Total (add lines 1b and 1c)		·					<b>&gt;</b>						
2	Total number of individuals (including but	not limited				ed a	above	e) w	ho received m	ore than \$100	,000 of	:		
	reportable compensation from the organi	zation >		_										
											_		Yes	No
3	Did the organization list any former of							emp	loyee, or high	est compens	ated ,			-
	employee on line 1a? If "Yes," complete											_3		✓
4	For any individual listed on line 1a, is the											ľ		ĺ
	organization and related organizations	-								edule J for s	iuch			<del> </del> -
_											}	4		✓.
5	Did any person listed on line 1a receive of									ation or indivi	duai	<del></del> -	—	<del></del>
Contin	for services rendered to the organization	rii res, c	отрі	ere	SCII	euu	ile J i	Or S	uch person	· · · ·	<u>·</u>	5		
	n B. Independent Contractors													
1	Complete this table for your five highest of compensation from the organization. Rep												n'e t	2
	year.	on compe	isalic	) I IC	וווו	ie C	alenu	ai y	real ending wit	ii or within the	organ	izalio	11151	ax
	(A)								(B)	T -		(C)		
	Name and business add	ress							Description of s	ervices	Con	npensa	ation	
								<u> </u>			-			
								-	· · · · · · · · · · · · · · · · · · ·					
								_						
									<del></del>					
2	Total number of independent contractor	rs (includin	na bu	t no	ot l	imıt	ed to	th	ose listed abo	ove) who				
_	received more than \$100,000 of compens									,				

_. Part	VIII							
Ī	_	Check if Schedule C	contains a	response or note to	O any line in this  (A)  Total revenue	Part VIII  (B)  Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts	1a	Federated campaigns		1a 0				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	_	1b 0				
S, E	С	Fundraising events .		1c 0	1			
ar /	d	Related organizations	_	1d 0				
s, G	e	Government grants (cor		1e 0				
ion	f	All other contributions, g						
hei		and similar amounts not inc	1	1f o				
풀	g	Noncash contributions includ	_					
Sor	h	Total. Add lines 1a-1						
		TOTALLY (GG IIII GG III		Business Code				· · · · · · · · · · · · · · · · · · ·
enn	2a							
Rev	b							
-8 -	c							
ervi	d						-	
u S	e			- 1				
Jrar	f	All other program ser					-	-
Program Service Revenue	g	Total. Add lines 2a-2			- +			
_	3	Investment income						· · · · · · · · · · · · · · · · · · ·
		and other similar amo		>	3,085	٥	0	156
	4	Income from investmen		ot bond proceeds	0,000	0	0	0
	5			b liberta proceduce	0	0	0	0
	•	noyanics	(ı) Real	(ii) Personal				i
	6a	Gross rents	· · · ·	· · · · · · · · · · · · · · · · · · ·				
	b	Less rental expenses						
	C	Rental income or (loss)						
	d	Net rental income or	(loss)	•	0	0	0	0
		Gross amount from sales of	(i) Secunties		- 4	<del>_</del>		i
	7a	assets other than inventory	484,	075				
	<b>.</b>	Less cost or other basis	404,	073				
	b	and sales expenses .	604.	405				
	С	Gain or (loss) .	(120,3	<del></del>				
	ď	Net gain or (loss) .	-		(120,330)	0	0	0
une		Gross income from fu			(120,330)			
eveni	Oa	events (not including \$						
Other Reve		•		a				
ਰ	b	Less: direct expenses		b				<u> </u>
	с 9а	Net income or (loss) f Gross income from ga	aming activitie	s.	0		0	0
		Less: direct expenses						ļ
		Net income or (loss) f			0	0	0	0
	10a	Gross sales of in returns and allowance	-					
	b	Less: cost of goods s	old	b				
	С	Net income or (loss) f	rom sales of	inventory ►	0	0	0	0
		Miscellaneous F	levenue	Business Code				
	11a							
	b							
	С							
	đ	All other revenue .						
	е	Total. Add lines 11a-	11d					
	12	Total revenue. See it	nstructions	•	(117 245)	0		156

Part IX Statement of Functional Expenses

Section	on 501(c)(3) and 501(c)(4) organizations must com			s must complete co	olumn (A).
	Check if Schedule O contains a respon-	se or note to any li		<u> </u>	<u> </u>
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations	<u></u>			
	and domestic governments. See Part IV, line 21	442,000	0		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	0	0		
4 5	Benefits paid to or for members Compensation of current officers, directors,	0	0		
3	trustees, and key employees				
6	Compensation not included above, to disqualified	0		0	
O	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	0	0	o
7	Other salaries and wages	0	0	0	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	o	0	0	o
9	Other employee benefits	0	0		0
10	Payroll taxes	0	0	0	0
11	Fees for services (non-employees)				
а	Management	0	0	0	0
b	Legal [	8,801	0	8,801	0
С	Accounting	0	0	0	0
d	Lobbying	0	0	0	0
е	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	10,352	0	10,352	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O.)	1,296	0	1,296	0
12	Advertising and promotion	0	0	0	0
13 14	Office expenses	7,068	0	7,068	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	0	0		0
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	o	o	0	0
19	Conferences, conventions, and meetings .	0	0	0	
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	
23	Insurance	0	0	0	0
24	Other expenses. Itemize expenses not covered		ł		ł
	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
_	``'				
a	Registered Agent Fee (HI)	393	0	393	0
b	Foreign Tax Withheld	162	0	162	0
c d		0		0	
e	All other expenses	0	0	0	
25	Total functional expenses. Add lines 1 through 24e	470,072	0	28,072	0
26	Joint costs. Complete this line only if the	470,072		20,012	
	organization reported in column (B) joint costs from a combined educational campaign and			ļ	
	fundraising solicitation. Check here			ļ	
	following SOP 98-2 (ASC 958-720)				

Form 990 (2018) Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X . . . . . . (B) (A) Beginning of year End of year 1 Cash—non-interest-bearing . 23,044 0 2 486,885 2 3 Pledges and grants receivable, net . . . ol 3 0 4 ol 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . 0 0 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L . . . . . . . . 6 0 al Notes and loans receivable, net 7 0 0 Inventories for sale or use . . 8 8 o 0 Prepaid expenses and deferred charges . n 9 9 0 Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 10b 0 10c Less: accumulated depreciation b 0 Investments—publicly traded securities 3,043,287 11 11 2,512,338 0 12 Investments—other securities. See Part IV, line 11 12 0 13 Investments—program-related. See Part IV, line 11 0 13 0 14 14 Intangible assets 0 0 Other assets. See Part IV, line 11 . . . 15 15 440,125 856,125 16 Total assets. Add lines 1 through 15 (must equal line 34). 3,506,456 16 3,855,348 Accounts payable and accrued expenses . . . . . . 17 0 17 0 (416,000) 18 (440,125) 18 19 Deferred revenue . 0 19 0 20 Tax-exempt bond liabilities 0 20 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D . 0 21 0 Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . 0 22 0 23 23 Secured mortgages and notes payable to unrelated third parties 0 0 24 Unsecured notes and loans payable to unrelated third parties . . . 0 0 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 n 0 26 26 Total liabilities. Add lines 17 through 25 (416,000)(440, 125)Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and **Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets . . . . . . Temporarily restricted net assets . 28 28 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 30 through 34. 30 30' Capital stock or trust principal, or current funds . . . . . . . 3,506,456 3,855,348 Paid-in or capital surplus, or land, building, or equipment fund . 31 31 40 0 32 32 Retained earnings, endowment, accumulated income, or other funds . n 0

33

Total net assets or fund balances . . .

Total liabilities and net assets/fund balances

33

34

3,855,348

3,439,348

Form **990** (2018)

3,506,456

3.066.331

, Par	t XI Reconciliation of Net Assets		_		
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗸
1	Total revenue (must equal Part VIII, column (A), line 12)	1		(1	17,245)
2	Total expenses (must equal Part IX, column (A), line 25)	2		4	170,072
3	Revenue less expenses. Subtract line 2 from line 1	3		(5	87,317)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	<del></del>	3,5	06,456
5	Net unrealized gains (losses) on investments	5		(1,8	50,509)
6	Donated services and use of facilities	6			0
7	Investment expenses	7		_	0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		4	16,000
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
_	33, column (B))	10		3,8	<u> 55,348</u>
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u> </u>	<u> </u>	<u>,                                    </u>
				Yes	No
1	Accounting method used to prepare the Form 990.		-		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ı	n		
_	Schedule O.		<del>-</del>	_	-
2a			2a	<del> </del> —	<b>↓</b> ✓
	If "Yes," check a box below to indicate whether the financial statements for the year were com-	oiled a	or		
	reviewed on a separate basis, consolidated basis, or both		ļ		
	Separate basis Consolidated basis Both consolidated and separate basis		-	-	╌╌┙
D	Were the organization's financial statements audited by an independent accountant?		. <u>2b</u>	+	<b>↓</b> ✓ ,
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on	a		
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				-
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account				
	·			+-	+
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	piairi i	''		
20		forth ::	ຸ ∤—	-	-
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		. За		<b>✓</b>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under			1	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	3b		⊥
			Fo	rm <b>99</b>	0 (2018)

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

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

**Employer identification number** 

Kauai Energy Institute 27-4346053 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university. An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations. Provide the following information about the supported organization(s) (i) Name of supported organization (III) Type of organization (v) Amount of monetary (a) FIN (iv) is the organization (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see document? above (see instructions)) instructions) instructions) Yes Nο (A) (B) (C) (D) (E)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to gualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") . . . 5400 5400 revenues levied for organization's benefit and either paid to or expended on its behalf . . . 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . 0 Total. Add lines 1 through 3. . . . 5400 0 0 n 5400 5 The portion of total contributions by each person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . Public support. Subtract line 5 from line 4 5400 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 7 Amounts from line 4 . . . . . 0 5400 0 0 0 5400 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . . 1726 1886 3085 1441 1441 9579 Net income from unrelated business activities, whether or not the business is regularly carried on . . . . Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI.) . . . . . . Total support. Add lines 7 through 10 11 14979 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) . . . 14 Public support percentage from 2017 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . . . . 15 15 331/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this b 331/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization . . . 17a 10%-facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . b 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Supplemental Financial Statements**

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB № 1545-0047

Open to Public Inspection

Employer identification number

Kauai	Energy Institute		27-4346053_
Pai			
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6	<u>,                                     </u>
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor		
	funds are the organization's property, subject to the	ne organization's exclusive legal contr	ol? 🗌 Yes 🗌 No
6	Did the organization inform all grantees, donors, a	and donor advisors in writing that gra	int funds can be used
	only for charitable purposes and not for the bene	fit of the donor or donor advisor, or t	for any other purpose
	conferring impermissible private benefit?	<u> </u>	· · · · · · · · Yes 🗌 No
Par	Conservation Easements.		
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 7	·
1	Purpose(s) of conservation easements held by the	organization (check all that apply)	
	Preservation of land for public use (e.g., recrea	ition or education) 🔲 Preservation o	of a historically important land area
	☐ Protection of natural habitat	☐ Preservation o	of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization he	eld a qualified conservation contribute	on in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Yea
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easemen	ts	2b
С	Number of conservation easements on a certified	historic structure included in (a)	2c
d	Number of conservation easements included in	(c) acquired after 7/25/06, and not	on a
	historic structure listed in the National Register .		· ·   2d
3	Number of conservation easements modified, tran	sferred, released, extinguished, or ter	minated by the organization during the
	tax year ▶		
4	Number of states where property subject to conse		
5	Does the organization have a written policy re		
	violations, and enforcement of the conservation ea	asements it holds?	· · · · · · · · · · · · · · · · · · ·
6	Staff and volunteer hours devoted to monitoring, inspe	cting, handling of violations, and enforcing	ng conservation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspectir	ng, handling of violations, and enforcing	conservation easements during the year
	▶\$	•	
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	f section 170(h)(4)(B)(i)
	and section $170(h)(4)(B)(ii)$ ?		· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization reports	conservation easements in its revenue	and expense statement, and
	balance sheet, and include, if applicable, the text of	of the footnote to the organization's fir	nancial statements that describes the
	organization's accounting for conservation easeme	ents.	
Part	III Organizations Maintaining Collection	s of Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 8.	<u>.                                    </u>
1a	If the organization elected, as permitted under SF	AS 116 (ASC 958), not to report in its	s revenue statement and balance shee
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the f	footnote to its financial statements tha	at describes these items.
b	If the organization elected, as permitted under S	SFAS 116 (ASC 958), to report in its	revenue statement and balance shee
	works of art, historical treasures, or other similar	r assets held for public exhibition, ed	ducation, or research in furtherance of
	public service, provide the following amounts relat		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art		
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1 .		▶ \$
	Assets included in Form 990 Part X		<b>b</b> ¢

∘Par									
3	Using the organization's acquisition, collection items (check all that apply):		her reco	rds, chec	k any of the	e follov	ving that are a	significant u	ise of its
а	☐ Public exhibition		d	□ Loan	or exchang	e progi	rams		
b	☐ Scholarly research								
С	Preservation for future generations	s					•		
4	Provide a description of the organiza XIII.		ınd expla	an how t	hey further	the org	anization's exe	mpt purpos	e ın Part
5	During the year, did the organization assets to be sold to raise funds rather								□ No
Par	IV Escrow and Custodial Arra								
	Complete if the organization 990, Part X, line 21.								orm
1a	Is the organization an agent, trustee included on Form 990, Part X?						other assets n		□ No
b	If "Yes," explain the arrangement in P	art XIII and comple	te the fo	llowing to	able:	ſ	<del></del>	mount	
_	Decimine balance					100	+	·····	
C	Beginning balance		•			1c			
d	Additions during the year		•			1d			
e	Distributions during the year					1e	<del></del>		
f n-	Ending balance					1f		.0 [] Vaa	
2a	Did the organization include an amount "Yes," explain the arrangement in P								
Par		art Alli Check here	en me e	Сріапаціон	II IIas Deeli	provide	u on Fart Alli .	<del></del>	
ı aı	Complete if the organization	answered "Ves"	on For	m gan i	Part IV line	10			
	Complete if the organization	(a) Current year		or year	(c) Two years		(d) Three years bac	k (e) Four ye	ars back
1a	Beginning of year balance	(a) canoni you	(-, -, -, -, -, -, -, -, -, -, -, -, -, -		(0)		(4)	10,100.70	
b	Contributions		_			-	<del> </del>		
C	Net investment earnings, gains, and						<del></del>	<del></del>	
C	losses								
a		-		<del> </del>				<u>'</u>	
d	Grants or scholarships Other expenditures for facilities and							<del> </del>	
е	programs				!				
	· •							<del></del>	
f	Administrative expenses								
g	End of year balance	the current upor on	d balana	o (lino 1 o	L column (a)	\\ bold (		<u> </u>	
2	Provide the estimated percentage of t	-		e (iiiie 1g	j, column (a)	)) neid a	15.		
a	Board designated or quasi-endowment Permanent endowment ▶		-%						
b		[%]							
С	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and		000/						
За	Are there endowment funds not in the			zation the	at are held :	and adi	ministered for th	20	
Ja	organization by:	e possession or in	e organi.	Zation the	at are new t	and adi	ministered for th		es No
	(i) unrelated organizations							3a(i)	ES 140
	(ii) related organizations					•		3a(ii)	<del></del>
b	If "Yes" on line 3a(ii), are the related o				 shodula P2			3b	
4	Describe in Part XIII the intended uses							[30]	
Part			ii s chac	- TOTAL TO	<u> </u>		<del></del>		
	Complete if the organization		on For	m 990 F	Part IV line	11a 9	See Form 990	Part X In	e 10
-	Description of property	(a) Cost or oth			or other basis		Accumulated	(d) Book v	
	Description of property	(investme			ther)		preciation	(a) Dook (	aiue
1a	Land	<u> </u>							
b	Buildings								
c	Leasehold improvements .	·							
d	Equipment	·							
e	Other	<del> </del>					<del></del>		
	Add lines 1a through 1e (Column (d) n	nust equal Form 90	0 Part	Column	(B) line 10	c )			
. J.a.	miss in mough to (column la) II	.co. oquar i orini go	o, ruit/	.,	. ,_,,,	-·, · <u>·</u>			

Part VII	Investments - Other Securities				
	Complete if the organization ans	swered "Yes" on Forn	990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or categor (including name of security)	ry	(b) Book value		hod of valuation -of-year market value
(1) Financial	derivatives				
(2) Closely-h	neld equity interests	[			
(3) Other			<u></u>		<u> </u>
(^)			- <del></del>		
(C)					
			<del></del>		<u> </u>
					<u> </u>
(F) (G)					
(G) (H)	•••••		<del></del>		<del> </del>
	b) must equal Form 990, Part X, col (B) line 12.)		<del> </del>		
Part VIII	Investments – Program Relate		<del>-</del>	<u> </u>	
T GITC VIII.	Complete if the organization ans		n 990. Part IV. lin	e 11c. See Form	990. Part X. line 13.
	(a) Description of investment	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(b) Book value	(c) Method of valuation Cost or end-of-year market value	
(1)	<del></del>		· · · · · · · · · · · · · · · · · · ·		<del></del>
(2)					<del></del>
(3)					
(4)					
(5)					
(6)			·		
_(7)	<del> </del>				
_(8)	<del></del>				
(9)	b) must equal Form 990, Part X, col (B) line 13 )				<del></del>
Part IX	Other Assets.			. 11d Cas Farm	OOO Dort V line 15
	Complete if the organization ans	(a) Description	1 990, <u>Part I</u> V, IIII	e i id. See Foiiii	(b) Book value
(1) Cash or	other equivalents	, , , , , , , , , , , , , , , , , , ,			416,000
(2)	other equivalents				
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	(1)	1 (5) ( 45)			
	mn (b) must equal Form 990, Part X, c	coi (B) line 15 )	<u> </u>	<i>.</i> ▶	416,000
Part X	Other Liabilities.  Complete if the organization ans line 25.	wered "Yes" on Form	n 990, Part IV, lın	e 11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability	(b) Book value			
(1) Federal in	come taxes		$\neg$		
(2) Grant pa	yable	416	,000		ı
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)	a) must a gual Farma 000 Dest V and 100 line 05 b				
	n) must equal Form 990, Part X, col. (B) line 25.)	l	- 4- 46	de français etatama	ata that you are the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

20**18** 

Employer identification number

27-4346053

Department of the Treasury Internal Revenue Service Name of the organization

Kauai Energy Institute

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Part VI, Line 11b KEI's Directors review the draft 900 after it is presented by KEI's outside preparer. Any corrections are provided by KEI's
Directors to the preparer The final return is reviewed by KEI's Directors prior to filing
1
Part VI, Line 12c. KEI's Directors and Officers are subject to a conflict of interest policy requiring decision-making on any transaction that
would affect any of those individual's material financial interest(s) or would significantly affect their personal interests to be effected only by
action of the entire Board, after the Board has been given prior notice of the individual(s) and the conflict(s), and with only Directors who are
independent of the party with the actual or perceived conflict participating. Question as to whether an individual has a conflict falling within
the policy is decided by the Board, not including in its deliberations or vote the party or parties whose potential conflict is at issue.
Part VI, Line 19 KEI's governing documents, conflict of interest policy, and financial statements are available to the public via a request made
address listed in Part VI, Line 20
, Table commence of the commen
Part XI, Line 9. KEI received a grant payable in the amount of 416,000 that will be distributed to one or more public charities prior to the end of
2019
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