### **Return of Private Foundation**

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

►Do not enter social security numbers on this form as it may be made public. \Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

	me of for	lar year 2018 or tax year beginning 07/01/18,	and ending Ub,	30/19	A Empl	oyer identification number	
		EA EDUCATIONAL & CULTURAL				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
_ <u> </u>	SSO	CIATION			99	-6005136	
		street (or P O box number if mail is not delivered to street address)		Room/suite	1	hone number (see instruction:	s)
		BOX 595 , state or province, country, and ZIP or foreign postal code			80	8-338-1425	
	AIM	· · · · · · · · · · · · · · · · · · ·	595		C If exe	mption application is pending,	check here
G	Check	all that apply Initial return Initial retu	rn of a former public	charity	D 1 F	oreign organizations, check he	ere 🕨
		Final return Amended	return		2 Fc	oreign organizations meeting t	he
		Address change Name cha	ange		85	% test, check here and attach	computation •
H	Check	ype of organization X Section 501(c)(3) exempt private	foundation	~11	E If priv	ate foundation status was term	ninated under
	Section	1 4947(a)(1) nonexempt charitable trust Other taxab	le private foundation	, <u>04</u>	section	n 507(b)(1)(A), check here	▶ ∐
l F	aır maı	ket value of all assets at J Accounting method	X Cash A	ccrual	F If the	foundation is in a 60-month te	mination
	-	ear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check h	ere 🕨 📗
	ne 16)	4	be on cash basis )			<del></del>	(1) D ab
LP	art I_	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		vestment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions) )	books	inco	ome	ıncome	purposes (cash basis only)
)	1	Contributions, gifts, grants, etc , received (attach schedule)					
1	2 3	Check <b>X</b> if the foundation is <b>not</b> required to attach Sch. B	,				
~	3	Interest on savings and temporary cash investments					
	4 7	Dividends and interest from securities	10,40	)4	10,404		Ī
	5a -	Gross rents				-	
ne	b ;	Net rental income or (loss)					
JS Revenue	6a	Net gain or (loss) from sale of assets not on line 10	1,8	/5			<u> </u>
တ္တန္တ	b	Gross sales price for all assets on line 6a 7,845			1,875		
> "	8 .	Capital gain net income (from Part IV, line 2)  Net short-term capital gain			1,675	0	<u> </u>
SCANNED vea	9	Income modifications					j
面	1	Gross sales less returns and allowances	1				i
		Less Cost of goods sold	2		,		j
JAN	c	Gross profit or (loss) (attach schedule)	8			_	
	11	Other income (attach schedule) NOV 1 3 2019	12,2				Ĭ
	12		12,2		12,279	0	
68	13	Compensation of officers directors drustees etcuT		0			<del></del>
sesued 2020	14	Other employee salaries and wages					<u> </u>
g b b	15	Pension plans, employee benefits					
Ж	16a b	Legal fees (attach schedule)  Accounting fees (attach schedule)  STMT 1	1,53	36			1,536
Operating and Administrative E	6	Other professional fees (attach schedule)  STMT 2	2,73		2,776		1,330
rati	17	Interest		1	_,		
ist	18	Taxes (attach schedule) (see instructions) STMT 3	29	0	140		
ij	19	Depreciation (attach schedule) and depletion					5
<del>l</del> b	20	Occupancy					
Ø	21	Travel, conferences, and meetings					
ā	22	Printing and publications					
ng	23	Other expenses (att sch) STMT 4	11	.6			116
ati⊪	24	Total operating and administrative expenses.	4 79		2 010		1 (50
oer	25	Add lines 13 through 23	4,71 15,00		2,916	0	1,652
ō	25 26	Contributions, gifts, grants paid  Total expenses and disbursements. Add lines 24 and 25	19,71		2,916	0	15,000 16,652
	27	Subtract line 26 from line 12	19,11		2,310		10,032
	2′   a	Excess of revenue over expenses and disbursements	-7,43	9			
	b	Net investment income (if negative, enter -0-)	.,,	<u> </u>	9,363		i
	С	Adjusted net income (if negative, enter -0-)				0	

	01111 990	(2010) WILLIAM: DOCKILLOWIN & CONTOLLIN			
Ē	Part I	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
_		should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1`	Cash – non-interest-bearing	508	242	242
	2	Savings and temporary cash investments	8,777	7,714	7,714
	3	Accounts receivable ▶			<del></del>
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
		instructions)			
	7	Other notes and loans receivable (att schedule)		<del></del>	
		Less allowance for doubtful accounts ▶ 0			
Ş	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments – U S and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule) SEE STMT 5	256,850	250,879	278,855
	c	Investments – corporate bonds (attach schedule) SEE STMT &	86,550	86,550	87,196
	11	Investments – land, buildings, and equipment basis			
		Less accumulated depreciation (attach sch ) ▶			
	12	Investments – mortgage loans		_	
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach sch )			
	15	Other assets (describe ▶ )			
	16	Total assets (to be completed by all filers – see the			
_		instructions. Also, see page 1, item l)	352,685	345,385	374,007
į	17	Accounts payable and accrued expenses			
<b>(</b> 0	18	Grants payable			
Ę	19	Deferred revenue SEE STATEMENT 7	1,339	1,478	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ▶ )			
_	23	Total liabilities (add lines 17 through 22)	1,339	1,478	
		Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26, and lines 30 and 31.			
Ĕ	24	Unrestricted			
Sal	25	Temporarily restricted			
P	26	Permanently restricted			
Net Assets or Fund Balanc		Foundations that do not follow SFAS 117, check here			
ř		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds			
sel	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds	351,346	343,907	
let	30	Total net assets or fund balances (see instructions)	351,346	343,907	
~	31	Total liabilities and net assets/fund balances (see			
لے		instructions)	352,685	345,385	
L	Part I			<del></del>	
1		net assets or fund balances at beginning of year – Part II, column (a), line 30 (mu	ust agree with		
		f-year figure reported on prior year's return)		1	351,346
		amount from Part I, line 27a		_2	-7,439
		ıncreases not included in line 2 (itemize) ▶		3	
		nes 1, 2, and 3		4	343,907
		ases not included in line 2 (itemize) ▶		5	
_6	Total	net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (	(b), lin <u>e 30</u>	6	343,907

(g) Cost or other basis plus expense of sale 5,798		<del></del>
(g) Cost or other basis plus expense of sale 5,798		
plus expense of sale 5,798		(h) Gain or (loss)
plus expense of sale 5,798		(h) Gain or (loss)
plus expense of sale 5,798		(h) Gain or (loss)
plus expense of sale 5,798		(h) Gain or (loss)
		e) plus (f) minus (g))
170		1,166
		21
		688
		<u> </u>
n 12/31/69		ains (Col. (h) gain minus
(k) Excess of col (i)		, but not less than -0-) or osses (from col. (h))
over coi (j), if any		
		1,166
		21
		688
	<del></del>	
<del>, ,</del> ,	$\overline{}$	
		1,875
′		
٦ !		
		1,187
n Not Investment Incor	-	
ar in the base period?		Yes X No
ore making any entries		
		(d)
Net value of noncharitable-use assets		Distribution ratio (col (b) divided by col (c))
361,6		0.042872
		0.035542
		0.058304
		0.047228
360,5	69	0.056932
	2	0.240878
), or by		
	3	0.048176
	4	366,169
	5	17,641
	5	
	5	
		94
		94
	6	17,641 94 17,735
lete that part using a 1% tax rat	7	94
	over col (j), if any  7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	(k) Excess of col (i) col (k) Lo (ii) over col (j), if any  7 7 7 2 3 Dn Net Investment Income net investment income of investment income in in the base period?  Ore making any entries  (c) Net value of noncharitable-use assets  (361, 682 351, 952 350, 746 368, 641 360, 569

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	rt VI : Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	<del></del>				
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	ļ			ļ	
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	_				i
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check				<u> 187</u>	:
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of	-				i
	Part I, line 12, col (b)				_	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0	_
3	Add lines 1 and 2	<u> </u>			187	-
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0	-
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	<u> </u>			<u> 187</u>	:
6	Credits/Payments					
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 6					
b	Exempt foreign organizations – tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld	-				
7	Total credits and payments Add lines 6a through 6d	<b>_</b>			6	-
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.					-
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				181	-
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<u> </u>				-
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ Refunded ▶ 11					-
<u>Pa</u>	rt VII-A   Statements Regarding Activities					-
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		<u> </u>	Yes	No	-
	participate or intervene in any political campaign?		1a		X	
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the					
	instructions for the definition		1b		<u> </u>	i
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities				<u>ب</u>	j
C	Did the foundation file Form 1120-POL for this year?		1c		X	i
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					į
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$					ĺ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					ĺ
_	on foundation managers > \$				<del>_</del>	i
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	-	<u> </u>	i
_	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		<u> </u>	—	$\overline{\mathbf{x}}$	ł
4.5	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/A	4a			
þ	If "Yes," has it filed a tax return on Form 990-T for this year?	M/W	4b		x	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5			i
e	If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(a) (relating to sections 4941 through 4945) satisfied either					l
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					ı
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>					l
	on by state registation that enectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	$\overline{\mathbf{x}}$		1
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	,	7	$\frac{\mathbf{x}}{\mathbf{x}}$		
, 8a	Enter the states to which the foundation reports or with which it is registered. See instructions.		$\vdash \vdash \vdash$		<del></del>	i
va	NONE				ł	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					l
-	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	$\overline{\mathbf{x}}$		J
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			<del></del> -		i
•	4942(j)(5) for calendar year 2018 or the taxable year beginning in 2018? See instructions for Part XIV If "Yes,"			_		<b>'</b>
	complete Part XIV		9		X	T
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their				_ <del></del>	•
. •	names and addresses		10		X	
	The transport of the state of t		orm 99	0-PF		1

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Ì Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A		•	
14	The books are in care of ▶ FIRST HAWAIIAN BANK, FIN MGMT GROUP Telephone no ▶ 808-!	525-	895	3
	P.O. BOX 3708			
	Located at ▶ HONOLULU HI ZIP+4 ▶ 9681	1		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of	· · ·	·	
	the foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Т	Yes	No
1a	During the year, did the foundation (either directly)		103	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?	1		İ '
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No	1		[
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
_	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	<u> </u>		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
•	were not corrected before the first day of the tax year beginning in 2018?  N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?			
	If "Yes," list the years ▶ 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		•	
	all years listed, answer "No" and attach statement – see instructions)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>▶</b> 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 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, Form 4720, to determine if the			
	foundation had excess business holdings in 2018 )  N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
-	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		X

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Part VIII Information About Officers, Directors, Trustees, F	oundation Managers, Highly Paid Empl	oyees,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. See	instructions. 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		
Part IX-A Summary of Direct Charitable Activities		-
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infor organizations and other beneficiaries served, conferences convened, research papers produced, etc.	mation such as the number of	Expenses
1 N/A		
2		
3		
•		
Part IX-B Summary of Program-Related Investments (see	nstructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 ar		Amount
1 N/A		
2		
	:	
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<b>_</b>	

a Suitability test (prior IRS approval required)
b Cash distribution test (attach the required schedule)
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4
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 See instructions
6 Adjusted qualifying distributions. Subtract line 5 from line 4
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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3

Amounts set aside for specific charitable projects that satisfy the

qualifies for the section 4940(e) reduction of tax in those years

<u>  P</u>	art XIII Undistributed Income	(see instructions)				
			(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part 3	KI,	Corpus	Years prior to 2017	2017	2018
	line 7					18,121
2	Undistributed income, if any, as of the en	d of 2018				
а	Enter amount for 2017 only				5,694	
b	Total for prior years 20 , 20	, 20				
3	Excess distributions carryover, if any, to	2018				
а	From 2013			j		
b	From 2014		-			
С	From 2015					
d	From 2016		`			
е	From 2017		<u></u>			
f	Total of lines 3a through e					
4	Qualifying distributions for 2018 from Par	t XII,				
	line 4 ▶ \$16,652					
а	Applied to 2017, but not more than line 2	a			5,694	
b	Applied to undistributed income of prior y	ears				
	(Election required – see instructions)	-	D			
С	Treated as distributions out of corpus (El	ection				
	required – see instructions)	_				
d	Applied to 2018 distributable amount	_	0			10,958
е	• • • • • • • • • • • • • • • • • • • •	_				
5	Excess distributions carryover applied to					<del></del>
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a))					
6	Enter the net total of each column as					
	indicated below:		<del></del>			
	Corpus Add lines 3f, 4c, and 4e Subtrac					
D	Prior years' undistributed income Subtra-	ct				
_	line 4b from line 2b					
С	Enter the amount of prior years' undistrib					
	income for which a notice of deficiency has a serior 404	1				
	been issued, or on which the section 494	<sup>2(a)</sup>				
4	tax has been previously assessed Subtract line 6c from line 6b Taxable	-	<del></del>			
u	amount – see instructions		$\delta_{\!\! D}$			
	Undistributed income for 2017 Subtract I	- L				
-	4a from line 2a Taxable amount – see					
	instructions					
f	Undistributed income for 2018 Subtract I	ines –				
·	4d and 5 from line 1. This amount must b		· .			
	distributed in 2019		8			7,163
7	Amounts treated as distributions out of co	orous				
	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (Election may	1				
	required—see instructions)					
8	Excess distributions carryover from 2013	not				
	applied on line 5 or line 7 (see instruction	s)				
9	Excess distributions carryover to 2019	· –				
	Subtract lines 7 and 8 from line 6a					
10	Analysis of line 9	<b> </b>				
а			_			
b	Excess from 2015		•		,	
С	Excess from 2016					
d	Excess from 2017					4
e	Excess from 2018		ì			!

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Pa	art XIV Private Operating For	undations (see in	structions and Pa	rt VII-A, question	9)	
1a	If the foundation has received a ruling or					
	foundation, and the ruling is effective for			• • • • • • • • • • • • • • • • • • •		
ь	Check box to indicate whether the found		<del>-</del>	ibed in section	4942(j)(3) or	,4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	/	´
	income from Part I or the minimum	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(e) Total
	investment return from Part X for	(-,	(-,	(1)		
_	each year listed 85% of line 2a			-	+/	
b				-		
С	Qualifying distributions from Part XII,				A	
	line 4 for each year listed			<del>                                     </del>	<u> </u>	
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities			<del>                                     </del>	<u> </u>	
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			/		
а	"Assets" alternative test – enter		i /	1		
	(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					
С	"Support" alternative test – enter					
	(1) Total support other than gross		/			
	investment income (interest,		1			
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from			-		
	an exempt organization					
	(4) Gross investment income	¥				
Pa	rt XV_ Supplementary Inform	nation (Complete	this part only if	the foundation	had \$5.000 or i	more in assets at
	any time during the ye		•		, ,	
1	Information Regarding Foundation Ma					
а	List any managers of the foundation who	=	e than 2% of the total	contributions receive	d by the foundation	1
	before the close of any tax year (but only				•	
	N/A	•	,	, , ,	. , ,	
b	List any managers of the foundation who	own 10% or more of	the stock of a corporat	tion (or an equally lar	ge portion of the	
	ownership of a partnership or other entity			· · · · · · · · · · · · · · · · · · ·		
	N/A	•	J			
2	Information Regarding Contribution, C	Brant, Gift, Loan, Sch	nolarship, etc., Progr	ams:	-	
			to preselected charita		I does not accept	
	unsolicited requests for funds If the foun		•	-		S,
	complete items 2a, b, c, and d See instr		, ,	5		
	The name, address, and telephone numb	_	f the person to whom	applications should b	e addressed	
-	WAIMEA EDUCATIONAL &					
			. <del>-</del>			
b	The form in which applications should be	submitted and inform	ation and materials th	ey should include		
•	WRITTEN, INCLUDING E			-		
С	Any submission deadlines					
	NONE					
d	Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable f	ields, kinds of institut	ions, or other	·
	factors					
	SEE STATEMENT 9					
DAA						Form <b>990-PF</b> (2018)

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year NAOMI KAAUAMO NONE N/A C/O WAIMEA EDUCATIONAL WAIMEA HI 96796 SCHOLARSHIP UNIVERSITY OF HI 1,000 CADE TANAKA C/O WAIMEA EDUCATIONAL NONE N/A WAIMEA HI 96796 SCHOLARSHIP CENTRAL WASHINGTON UNIV 1,000 KALENA NUMAZAWA-PACANAS C/O WAIMEA EDUCATIONAL NONE N/A WAIMEA HI 96796 SCHOLARSHIP KAUAI COMM COLLEGE 1,000 HARLY NONAKA C/O WAIMEA EDUCATIONAL NONE N/A WAIMEA HI 96796 SCHOLARSHIP KAUAI COMM COLLEGE 1,000 LEIKO YAMAUCHI C/O WAIMEA EDUCATIONAL NONE N/A WAIMEA HI 96796 SCHOLARSHIP EVERGREEN STATE COLLEGE 1,000 BRIANNE SUNADA C/O WAIMEA EDUCATIONAL NONE WAIMEA HI 96796 SCHOLARSHIP KAUAI COMM COLLEGE 1,000 SHYLII LACADEN C/O WAIMEA EDUCATIONAL NONE WAIMEA HI 96796 SCHOLARSHIP KAUAI COMMUNITY COLLEGE 1,000 WAIMEA BAPTIST CHURCH P O BOX 537 NONE WAIMEA HI 96796 GENERAL PURPOSE 1,000 WAIMEA HIGASHI HONGWANJI P O BOX 149 NONE CHURCH WAIMEA HI 96796 GENERAL PURPOSE 1,000 WAIMEA SENIOR CENTER P O BOX 992 NONE ELDER CARE <u>1,0</u>00 WAIMEA HI 96796 GENERAL PURPOSE 15,000 Total ▶ 3a **b** Approved for future payment N/A Total ▶ 3b

	Analysis of Income Bradusing A		99 (	<u> </u>	.50	Page 12
Part XVI-A				T 5 1 4-	dbt 540 540 544	
•	nounts unless otherwise indicated	(a) Business code	(b) Amount	(c) Exclusion code	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See instructions)
	ervice revenue	<u> </u>		1		
		- <del> </del>				<del></del>
			<del></del>			
f		-		†		
g Fees a	and contracts from government agencies	-	<del></del>			••
	ip dues and assessments					<u> </u>
	savings and temporary cash investments			1		
	and interest from securities			14	10,404	
5 Net rental	income or (loss) from real estate					
a Debt-fi	nanced property					
b Not de	bt-financed property					
6 Net rental i	income or (loss) from personal property					
	stment income					
8 Gain or (los	ss) from sales of assets other than inventory			18	1,875	
	e or (loss) from special events					
	it or (loss) from sales of inventory					
11 Other reve	nue a	_		ļ		
		_	· · · · · · · · · · · · · · · · · · ·			
		-		-		
e		_			10.070	
	dd columns (b), (d), and (e)		0	וין וי	12,279	0 12,279
	line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations )				13	12,279
Part XVI-E		Accomplishme	ent of Exempt P	Urnose	<u> </u>	
Line No.	Explain below how each activity for which incom					
<b>▼</b>	accomplishment of the foundation's exempt put					ons )
N/A			-, , , , , , , , , , , , , , , , , , ,		(	
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	<u> </u>		<del></del>	-		
				-		
				-		

_ Part-XVII	Information Reg Organizations	arding Tr	ansfers To an	id Transacti	ons and Relationship	s With Noncharit	able Ex	empt	t
1 Did the o		directly enga	ge in any of the fo	llowing with any	other organization describe		T	Yes	No
	n 501(c) (other than sect				=	-			
a Transfers	s from the reporting found	dation to a ne	oncharitable exem	pt organization	of				ļ
(1) Cash	1						1a(1)		X
(2) Othe	r assets						1a(2)		X
<b>b</b> Other tra									
	s of assets to a nonchard		=				1b(1)		X
	hases of assets from a n		· · ·	ion			1b(2)		X
	al of facilities, equipment		sets				1b(3)	$\vdash$	X
	bursement arrangement	S					1b(4)	$\vdash$	X
	s or loan guarantees		- £ d	.4 . 4			1b(5)	$\vdash$	X
	ormance of services or mo of facilities, equipment, m						1b(6)	<del>                                     </del>	X
					umn (b) should always show	the fair market	_ 1c	L1	
					If the foundation received les				
					of the goods, other assets, o				
(a) Line no	(b) Amount involved		e of noncharitable exem			sfers, transactions, and sharin	g arrangeme	ents	
N/A									
						-			
				<del></del>					
					<del> </del>				
		1		<del></del>	-				
			<u> </u>						
		<del>                                     </del>							
			•						
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		İ				<u> </u>			
-									
		<u></u>							
					<u></u>				
described	ndation directly or indirectly or indirect in section 501(c) (other complete the following so	than section			x-exempt organizations		Y	es 🛚 X	No
D II Tes, C	(a) Name of organization	inedule	(b) Type of c	organization	(c)	Description of relationship			
N/A	<u> </u>								
Sign Here	penalties of perjury, I declare in , and complete Declaration of	at I have examing preparer (other t	ned this return, includin; Ihan taxpayer) is based	g accompanying sor	hedules and statements, and to the f which preparer has any knowledge	May the IRS of with the preparation of the IRS of with the preparation of the IRS of the	discuss this re arer shown be	eturn	No
	gnature of officer or trustee	$\overline{}$		Date		IRECTOR			
	Type preparer's name	<del>/</del>		Preparer's signato		Date	•	Check	
Paid GEO	RGE F ROBERTS			6/1	MAT / MI	/ 11/	04/19	self-emp	лоуеа
Preparer Firm		E F RO	BERTS CPA	XIC	1111		00629	928	
Jse Only				987	y		5-242		
	HONOI	LULU, H	II 96813-	-3490			)8- <u>5</u> 4		
							Form 99	0-PF	(2018)

Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid During	the Year or Approved for	Future Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year WAIMEA SHINGON MISSION P O BOX 488 WAIMEA HI 96796	NONE	CHURCH GENERAL	L PURPOSE	1,000
WAIMEA HONPA HONGWAJI P O BOX 206 WAIMEA HI 96796	NONE	CHURCH GENERAI	L PURPOSE	1,000
WAIMEA UNITED CHURCH OF CHI P O BOX 457 WAIMEA HI 96796	NONE	CHURCH FUND/GENERAL	L PURPOSE	2,000
BRANDIE AGUINALDO C/O WAIMEA EDUCATIONAL WAIMEA HI 96796	NONE	SCI	HOLARSHIP	1,000
<del>-</del>				
Total			▶ 3a	
<ul><li>b Approved for future payment</li><li>N/A</li></ul>				
Total			▶ 3b	

Total   Net   Adjusted   Charitable	99-6005136	Fed	leral Sta	Federal Statements			
Description   FeE   S		Statement 1 - Form 990	o-PF, Part I	I, Line 16b	- Accoun	ting Fees	•
Statement 2 - Form 990-PF, Part   Line 16c - Other Professional Fees   5	Description	Total		Net Investme	ent	Adjusted Net	Charitable Purpose
Statement 2 - Form 990-PF, Part I, Line 16c - Other Professional Fees   Net Adjusted Purpose	PREPARA: TOTAL			\$ \$	0		
Net	State	ement 2 - Form 990-PF	; Part I, Lii	ne 16c - Ot	her Profe	ssional Fees	
Statement 3 - Form 990-PF, Part I, Line 18 - Taxes   Statement 3 - Form 990-PF, Part I, Line 18 - Taxes	Description	Total		Net Investme	ent	Adjusted Net	Charitable Purpose
Statement 3 - Form 990-PF, Part I, Line 18 - Taxes   Net	MANAGEMENT	2,	<u>776</u> 776		,776		
Description         Total         Investment Labeled but to the purpose of the purpos			rm 990-PF	Part I, Lin	e 18 - Ta	<u>sex</u>	
Taxes	Description	Total		Net Investme	ent	Adjusted Net	Charitable Purpose
Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses   Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses     Description	TAXI TAX	<i>∽</i>		\$	140	v,	
Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses    Description	TOTAL	w.		<b>S</b>	140		0 %
Description         Total         Investment         Adjusted         Charitable           MEETING         \$         \$         \$         \$         \$         116         \$         \$         116         \$         \$         116         \$         \$         116         \$         \$         116         \$         \$         11         \$         \$         11         \$         \$         11         \$         \$         \$         11         \$		- Form	30-PF, Part	I, Line 23	- Other E	xpenses	
MEETING \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Description	Total		Net Investme	ent	Adjusted Net	Charitable Purpose
MEETING  \$ \frac{116}{\$} \frac{5}{\$} \frac{10}{\$} \frac{5}{\$} \frac{1}{\$} \fra						w	
	BOARD MEETING						
	TOTAL	w.		<b>S</b>	0		\$ 116
							4-1

## Federal Statements

99-6005136

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Statement 5 - Form 990-PF. Part II. L
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Fair Market Value	\$ 278,855	\$ 278,855
Basis of Valuation	COST	
End of Year	250,879	250,879
	ၯ	ς»
Beginning of Year	256,850	256,850
<b>"</b>	က	w.
Description	SCHEDULE ATTACHED	TOTAL

# Statement 6 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments

Fair Market Value	\$ 87,196	\$ 87,196
Basis of Valuation	COST	
End of Year	86,550	86,550
	ᡐ	w.
Beginning of Year	86,550	86,550
<b>a</b> [	တ	ς»
Description	SCHEDULE ATTACHED	TOTAL

99-6005136

## Federal Statements

### Statement 7 - Form 990-PF, Part II, Line 19 - Deferred Revenue

Description	B	End of Year		
DEFERRED REVENUE	\$	1,339	\$	1,478
TOTAL	\$	1,339	\$	1,478

	,	Expenses	0	0	0	0	0	0	(
	s, Etc.	Benefits	0	0	0	0	0	0	
	Part VIII, Line 1 - List of Officers, Directors, Trustees,	Compensation Be		0	0	0	0	0	
tements	List of Officers, [	Average Hours Compe		1.00	1.00	1.00	1.00	1.00	
Federal Statements	_	A	,     **	DIRECTOR	DIRECTOR	DIRECTOR	DIRECTOR	DIRECTOR	
	Statement 8 - Form 990-PF		, ω	Ω	Ω	Ω	Ω	Δ	
99-6005136	<u>Statement</u>	Name and Address	YUKIE OKINO 9502 KEOLEWA ST WAIMEA HI 96796	BRIAN YAMASE 544 LEIPAPA PL ELEELE HI 96705	JAMES OKADA 9670 MAULE ROAD WAIMEA HI 96796	CALVIN SHIRAI P O BOX 596 WAIMEA HI 96796	ROBERT T TANITA P O BOX 206 WAIMEA HI 96796	CLYDE NAKAYA P O BOX 118 MAKAWELI HI 96769	

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22-		u	u	.,			u

### **Federal Statements**

### Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

Description

WRITTEN, INCLUDING PURPOSE AND AMOUNT

### Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

NONE

### Statement 9 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

Description

FOR THE BENEFIT OF WAIMEA, HAWAII - EDUCATIONAL AND CULTURAL PURPOSES