

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

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

▶ **Do not enter social security numbers on this form as it may be made public.**  
 ▶ **Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.**

OMB No. 1545-0052  
**2019**  
**Open to Public Inspection**

**For calendar year 2019, or tax year beginning 01-01-2019, and ending 12-31-2019**

Name of foundation LUNALILO HOME		<b>A Employer identification number</b> 99-0075244	
Number and street (or P.O. box number if mail is not delivered to street address) 501 KEKAULUOHI STREET	Room/suite	<b>B Telephone number (see instructions)</b> (808) 395-1000	
City or town, state or province, country, and ZIP or foreign postal code HONOLULU, HI 96825		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here..... <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>	
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ..... <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>14,721,277</u>		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... <input type="checkbox"/>	
<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>			

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	262,003			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities	176,555	176,555	176,555	
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10				
	<b>b</b> Gross sales price for all assets on line 6a				
	<b>7</b> Capital gain net income (from Part IV, line 2)		0		
	<b>8</b> Net short-term capital gain			0	
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less: Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)	2,882,519	0	2,882,519		
<b>12 Total.</b> Add lines 1 through 11	3,321,077	176,555	3,059,074		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc.	255,623	0	126,580	129,043
	<b>14</b> Other employee salaries and wages	1,403,161	0	257,551	1,145,610
	<b>15</b> Pension plans, employee benefits	268,279	0	61,569	206,710
	<b>16a</b> Legal fees (attach schedule)	39,865	0	39,025	0
	<b>b</b> Accounting fees (attach schedule)	27,724	0	27,724	0
	<b>c</b> Other professional fees (attach schedule)	1,086,023	39,200	174,495	828,632
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)				
	<b>19</b> Depreciation (attach schedule) and depletion	235,237	0	235,237	
	<b>20</b> Occupancy	169,502	0	32,875	135,287
	<b>21</b> Travel, conferences, and meetings	4,230	0	4,230	0
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	514,165	0	259,057	240,556
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	4,003,809	39,200	1,218,343	2,685,838
	<b>25</b> Contributions, gifts, grants paid	0			0
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	4,003,809	39,200	1,218,343	2,685,838	
<b>27</b> Subtract line 26 from line 12:					
<b>a Excess of revenue over expenses and disbursements</b>	-682,732				
<b>b Net investment income</b> (if negative, enter -0-)		137,355			
<b>c Adjusted net income</b> (if negative, enter -0-)			1,840,731		

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	169,139	117,613	117,613
	<b>2</b> Savings and temporary cash investments . . . . .	272,621	17,562	17,562
	<b>3</b> Accounts receivable ▶ <u>213,593</u>			
	Less: allowance for doubtful accounts ▶ <u>93,103</u>	68,803	120,490	120,490
	<b>4</b> Pledges receivable ▶ _____			
	Less: allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____			
	Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .	41,918	55,607	55,607
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .	6,333,815	7,327,553	7,327,553
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .	1,985,703	2,422,944	2,422,944
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____			
Less: accumulated depreciation (attach schedule) ▶ _____				
<b>12</b> Investments—mortgage loans . . . . .				
<b>13</b> Investments—other (attach schedule) . . . . .	565,059	551,138	551,138	
<b>14</b> Land, buildings, and equipment: basis ▶ <u>6,891,137</u>				
Less: accumulated depreciation (attach schedule) ▶ <u>2,782,767</u>	4,213,698	4,108,370	4,108,370	
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	13,650,756	14,721,277	14,721,277	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	228,552	230,301	
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .	3,896	10,470	
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .	687,000	793,326	
	<b>22</b> Other liabilities (describe ▶ _____)	82,224	79,786	
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	1,001,672	1,113,883	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .	12,632,927	13,597,394	
	<b>25</b> Net assets with donor restrictions . . . . .	16,157	10,000	
	<b>Foundations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .			
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds			
<b>29 Total net assets or fund balances</b> (see instructions) . . . . .	12,649,084	13,607,394		
<b>30 Total liabilities and net assets/fund balances</b> (see instructions) .	13,650,756	14,721,277		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	12,649,084
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	-682,732
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	1,641,042
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	13,607,394
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b>	13,607,394

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col.(h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	{	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		<b>2</b>
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8	{			<b>3</b>

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018			
2017			
2016			
2015			
2014			

<b>2</b> Total of line 1, column (d)	<b>2</b>	
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	
<b>4</b> Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	<b>4</b>	
<b>5</b> Multiply line 4 by line 3	<b>5</b>	
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	
<b>7</b> Add lines 5 and 6	<b>7</b>	
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculations. Includes questions about exempt foundations, tax under section 511, and tax due. Total tax due is 0.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes questions about political campaigns, political expenditures, and state reporting. Includes a Yes/No column.

Part VII-A Statements Regarding Activities (continued)

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.
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
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.LUNALILO.ORG
14 The books are in care of THE FOUNDATION Telephone no. (808) 395-1000

Located at 501 KEKAULUOHI STREET HONOLULU HI ZIP+4 96825

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 15

16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year did the foundation (either directly or indirectly):
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(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. Organizations relying on a current notice regarding disaster assistance check here.
c 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 2019?
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)):
a At the end of tax year 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? If "Yes," list the years 20, 20, 20, 20
b Are there any years listed in 2a for which the foundation is not 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.)
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 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 2019 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 2019.)
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
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 2019?

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

<b>5a</b> During the year did the foundation pay or incur any amount to:				<b>Yes</b>	<b>No</b>
<b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
<b>(2)</b> Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
<b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
<b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions. . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
<b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions . . . . .			<b>5b</b>		
Organizations relying on a current notice regarding disaster assistance check here. . . . .		<input type="checkbox"/>			
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d).</i>					
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . .			<b>6b</b>		<b>No</b>
<i>If "Yes" to 6b, file Form 8870.</i>					
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
<b>b</b> If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .			<b>7b</b>		
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year? . . . . .	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation. See instructions**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MICHAEL WARREN C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	NURSING DIRECTOR 40.00	84,259	7,092	0
SAN HSIU-PING C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	REGISTERED NURSE 40.00	69,283	12,368	0
NOVENA SANCHEZ C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	LICENSED NURSE PRACT 40.00	75,253	0	0
IAN HELBRON C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	FINANCE DIRECTOR 40.00	62,787	7,092	0
JEANNINE JOHNSON C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	TRUST SERVICES MANAG 40.00	43,502	15,620	0
<b>Total</b> number of other employees paid over \$50,000. . . . .			▶	0

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
<b>(a)</b> Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	<b>(c)</b> Compensation
NA KAHU MALAMA NURSES INC 1357 KAPIOLANI BLVD SUITE 850 HONOLULU, HI 96814	NURSING	316,062
HAUOLI HOME CARE LLC 1188 BISHOP STREET SUITE 2010 HONOLULU, HI 96813	NURSING	265,961
RESTAURANT EQUIPMENT HAWAII PO BOX 179309 HONOLULU, HI 96817	KITCHEN RENOVATIONS	106,326
<b>Total</b> number of others receiving over \$50,000 for professional services. . . . . ▶		<b>0</b>

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b> LUNALILO HOME PROVIDES ROOM AND BOARD, DIETARY SERVICE, LAUNDRY & LINEN, RECREATIONAL THERAPY, TRANSPORTATION & LIMITED MEDICAL AND NURSING CARE. APPROXIMATELY 100 INDIVIDUALS HAVE BENEFITED.	2,685,838
<b>2</b> _____	
<b>3</b> _____	
<b>4</b> _____	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
<b>1</b> _____	
<b>2</b> _____	
All other program-related investments. See instructions.	
<b>3</b> _____	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	<b>0</b>

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	9,720,578
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	201,299
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	484,860
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	10,406,737
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	10,406,737
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	156,101
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	10,250,636
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	512,532

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5. . . . .	<b>2a</b>	
<b>b</b>	Income tax for 2019. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	2,685,838
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	129,819
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	2,815,657
<b>5</b>	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. . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	2,815,657

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7				
<b>2</b> Undistributed income, if any, as of the end of 2019:				
<b>a</b> Enter amount for 2018 only. . . . .				
<b>b</b> Total for prior years: 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2019:				
<b>a</b> From 2014. . . . .				
<b>b</b> From 2015. . . . .				
<b>c</b> From 2016. . . . .				
<b>d</b> From 2017. . . . .				
<b>e</b> From 2018. . . . .				
<b>f</b> Total of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4: ▶ \$ _____				
<b>a</b> Applied to 2018, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2019 distributable amount. . . . .				
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2019. (If an amount appears in column (d), the same amount must be shown in column (a).)				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .				
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .				
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . .				
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .				
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9</b> Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a . . . . .				
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2015. . . . .				
<b>b</b> Excess from 2016. . . . .				
<b>c</b> Excess from 2017. . . . .				
<b>d</b> Excess from 2018. . . . .				
<b>e</b> Excess from 2019. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. . . . . 1988-03-14

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	512,532	529,016	525,807	506,771	2,074,126
<b>b</b> 85% of line 2a . . . . .	435,652	449,664	446,936	430,755	1,763,007
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .	2,815,657	3,231,592	2,547,267	2,134,856	10,729,372
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .	0	0	0	0	0
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .	2,815,657	3,231,592	2,547,267	2,134,856	10,729,372
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test—enter:					
<b>(1)</b> Value of all assets . . . . .					0
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					0
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .	341,688	352,677	350,538	337,847	1,382,750
<b>c</b> "Support" alternative test—enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					0
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					0
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					0
<b>(4)</b> Gross investment income . . . . .					0

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**1 Information Regarding Foundation Managers:**  
**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed:

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XV** **Supplementary Information** (continued)**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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
<b>Total . . . . .</b>			<b>▶ 3a</b>	0
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b>			<b>▶ 3b</b>	0





**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
HARVEY MCINERNY C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	TRUSTEE - CHAIR 30.00	56,000	0	0
KAMANI KUALAAU C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	TRUSTEE 20.00	46,000	0	0
NALEEN ANDRADE C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	TEMP TRUSTEE 20.00	0	0	0
MICHAEL CHUN C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	TEMP TRUSTEE 20.00	0	0	0
LAURA SMITH C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	TEMP TRUSTEE 20.00	0	0	0
DIANE PALOMA C/O 501 KEKAULUOHI STREET HONOLULU, HI 96825	CHIEF EXEC. OFFICER 40.00	132,753	20,871	0

**TY 2019 Accounting Fees Schedule****Name:** LUNALILO HOME**EIN:** 99-0075244

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING	27,724	0	27,724	0

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2019 Depreciation Schedule

**Name:** LUNALILO HOME

**EIN:** 99-0075244

### Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
COTTAGE RENOVATION	2003-01-01	40,011	23,279	SL	27.5000000000000	1,455	0	1,455	
COTTAGE BLINDS	2003-04-03	1,202	1,202	SL	7.0000000000000	0	0	0	
MASONRY SERVICES	1982-01-01	5,775	5,775	SL	10.0000000000000	0	0	0	
MAIN BUILDING IMPROVEMENTS	1982-03-01	14,050	14,050	SL	10.0000000000000	0	0	0	
PAINTING	1982-04-01	3,540	3,540	SL	3.0000000000000	0	0	0	
FIRE SPRINKLER SYSTEM	1990-10-01	87,452	87,452	SL	10.0000000000000	0	0	0	
BUILDING IMPROVEMENTS	2001-09-01	4,147,287	1,797,157	SL	40.0000000000000	103,682	0	103,682	
ADDITIONS/ALTERATIONS/ADA RAMP 5	2007-12-31	208,702	57,394	SL	40.0000000000000	5,218	0	5,218	
D&D INDUSTRIES	1990-07-01	2,464	2,464	SL	5.0000000000000	0	0	0	
LVT PLANK INSTALLATION (FLOOR)	2017-01-04	24,187	1,210	SL	40.0000000000000	604	0	604	
FLOORING MATERIAL	2017-06-08	21,647	857	SL	40.0000000000000	541	0	541	
NEW COMPUTER FOR HOME INTERN	2017-12-26	2,164	433	SL	5.0000000000000	433	0	433	
CARPET TILES	2017-05-09	3,620	603	SL	10.0000000000000	362	0	362	
HANDICAP VEHICLE	2017-03-28	70,000	24,500	SL	5.0000000000000	14,000	0	14,000	
FABRIC FOR BACK PATIO	2017-04-28	41,916	9,980	SL	7.0000000000000	5,988	0	5,988	
RESIDENT ROOM - SAMPLE BED	2017-01-12	2,368	676	SL	7.0000000000000	338	0	338	
TEMPORARY WARD BED SET (4)	2017-03-22	1,961	490	SL	7.0000000000000	280	0	280	
CART	1992-11-01	1,594	1,594	SL	5.0000000000000	0	0	0	
NEW COMPUTER FOR ACCT ASSIST	2017-12-26	1,751	350	SL	5.0000000000000	350	0	350	
OHANA ROOM TELEVISION	2017-12-28	2,283	457	SL	5.0000000000000	457	0	457	



**Depreciation Schedule**

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
4" BACKFLOW PREVENTER	1995-05-01	1,600	1,600	SL	5.000000000000	0	0	0	
GENERATOR-OLYMPIAN CD050	1995-05-09	21,198	21,198	SL	5.000000000000	0	0	0	
GENERATOR-INSTALLATION	1995-05-01	12,817	12,817	SL	5.000000000000	0	0	0	
STORAGE CONTAINER	1997-03-20	7,344	7,344	SL	5.000000000000	0	0	0	
ADC CURTAINS	2017-09-01	4,802	1,280	SL	5.000000000000	961	0	961	
FURNITURE	2017-06-20	27,913	5,982	SL	7.000000000000	3,988	0	3,988	
AMSCO KITCHEN EQUIPMENT	2001-09-01	80,169	80,169	SL	5.000000000000	0	0	0	
RESIDENT ROOMS - BEDS, WARDROBES, CHESTS	2017-06-13	93,977	21,256	SL	7.000000000000	13,426	0	13,426	
BEDROOM COVERINGS FABRIC	2017-06-08	44,222	10,002	SL	7.000000000000	6,318	0	6,318	
JOERNS CARE HOSPITAL BED (10)	2017-05-22	15,170	3,431	SL	7.000000000000	2,167	0	2,167	
FISHER - VARIOUS EQPT/FURNITURE	2004-01-01	5,046	5,046	SL	7.000000000000	0	0	0	
FISHER HAWAII - CONFERENCE	2004-12-08	433	433	SL	7.000000000000	0	0	0	
FISHER - PRINTER STAND/TV CABINET	2004-12-20	431	431	SL	7.000000000000	0	0	0	
FISHER - LATERAL FILE CABINET	2004-12-27	404	404	SL	7.000000000000	0	0	0	
(3) LUNALILO PORTRAITS	2004-12-29	280	280	SL	7.000000000000	0	0	0	
PICTURES PLUS - (3) CUSTOM FRAMES	2005-01-21	778	778	SL	7.000000000000	0	0	0	
WICKERWORKS - SUN ROOM FURNITURE	2005-02-24	2,108	2,108	SL	7.000000000000	0	0	0	
LUNALILO HOME	1927-01-01	148,065	148,065	SL	55.000000000000	0	0	0	
STORAGE RACK	2005-03-31	1,502	1,502	SL	7.000000000000	0	0	0	
NEW COFFEE MAKER	2017-06-27	2,782	834	SL	5.000000000000	556	0	556	

**Depreciation Schedule**

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
AIR CONDITIONING UNIT	2017-09-15	2,434	649	SL	5.000000000000	487	0	487	
WALKIN REFRIGERATOR AND FREEZER	2005-05-27	30,000	30,000	SL	7.000000000000	0	0	0	
RCA - 52" WIDESCREEN REAR PROJECTION TV	2006-10-02	884	884	SL	7.000000000000	0	0	0	
ROBERT'S REFRIG - REPLACE FRIDGE	2006-10-12	3,297	3,297	SL	7.000000000000	0	0	0	
CONVECTION OVEN - GAS, SINGER	2007-11-28	2,717	2,717	SL	7.000000000000	0	0	0	
TRI-G22010 FREEZER/2DR/DELIV	2008-08-21	3,980	3,980	SL	7.000000000000	0	0	0	
REFRIGERATOR FOR SNACK BAR	2008-11-20	416	416	SL	5.000000000000	0	0	0	
WATER FOUNTAIN	2009-03-12	610	610	SL	7.000000000000	0	0	0	
DELL OPTIPLEX 3010 SFF (4)	2012-08-29	5,612	5,612	SL	5.000000000000	0	0	0	
SOUND EQUIPMENT - EASY MUSIC	2012-09-18	966	966	SL	5.000000000000	0	0	0	
SIMPLEX ALARM PANEL	2012-12-27	2,984	2,984	SL	5.000000000000	0	0	0	
ICE MACHINE - ROBERT'S REFRIG	2013-07-01	4,924	4,924	SL	5.000000000000	0	0	0	
2 35 GALLON GREASE INTERCEPTOR	2014-03-10	8,406	5,754	SL	7.000000000000	1,201	0	1,201	
LAWN MOWER - HOME DEPOT	2014-01-25	3,113	2,206	SL	7.000000000000	445	0	445	
WATER HEATER REPLACEMENT	2014-02-20	13,623	6,584	SL	10.000000000000	1,362	0	1,362	
FANS - THE FAN SHOP	2014-03-21	1,861	1,296	SL	7.000000000000	266	0	266	
SERVER - SPANNING SOLUTION	2014-04-01	4,478	4,255	SL	5.000000000000	223	0	223	
AIR CONDITIONER - ADULT CAR	2014-10-07	3,962	2,406	SL	7.000000000000	567	0	567	
AIR CONDITIONER - ADULT CAR	2014-10-07	2,411	1,463	SL	7.000000000000	345	0	345	
08 TOYOTA SIENNA VAN (PINE)	2009-01-07	23,103	23,103	SL	5.000000000000	0	0	0	

**Depreciation Schedule**

<b>Description of Property</b>	<b>Date Acquired</b>	<b>Cost or Other Basis</b>	<b>Prior Years' Depreciation</b>	<b>Computation Method</b>	<b>Rate / Life (# of years)</b>	<b>Current Year's Depreciation Expense</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Cost of Goods Sold Not Included</b>
TOMB RENOVATION AT KAWAIA	2012-01-09	609,986	109,485	SL	39.0000000000000	15,641	0	15,641	
STEAMER	2015-07-17	2,094	2,094	SL	3.0000000000000	0	0	0	
AIR CONDITIONER - 2 CARRIER 50TC-A07	2015-10-19	23,940	15,162	SL	5.0000000000000	4,788	0	4,788	
VIDEO SURVEILLANCE SYSTEM - 29 CAMERAS	2015-11-16	20,136	20,136	SL	3.0000000000000	0	0	0	
LAPTOP COMPUTER	2015-12-15	1,116	1,116	SL	3.0000000000000	0	0	0	
3 EXHAUST FAN MORTORS (REPLACEMENT)	2016-01-21	10,746	6,268	SL	5.0000000000000	2,150	0	2,150	
VIDEO SURVEILLANCE SYSTEM (3 CAMERAS)	2016-01-01	1,948	1,948	SL	3.0000000000000	0	0	0	
24 LANAI CHAIRS	2016-03-10	2,010	1,139	SL	5.0000000000000	402	0	402	
NURSE CALL SYSTEM UPDATE (1ST & 2ND FLOOR)	2016-11-21	3,897	2,706	SL	3.0000000000000	1,191	0	1,191	
LANAI WOVEN TABLES	2016-04-05	999	550	SL	5.0000000000000	199	0	199	
2 DELL COMPUTERS - OPTIPLEX	2016-02-09	3,942	3,833	SL	3.0000000000000	109	0	109	
DINING ROOM CHAIRS & TABLES	2016-04-01	46,395	18,227	SL	7.0000000000000	6,628	0	6,628	
FUNTURE FOR LANAI, ACTIVITY ROOM, LOUNGE	2016-12-07	107,509	31,996	SL	7.0000000000000	15,359	0	15,359	
WINDOW COVERINGS	2016-12-01	5,459	1,625	SL	7.0000000000000	780	0	780	
FURNITURE & CUSHIONS	2016-05-01	7,911	3,013	SL	7.0000000000000	1,130	0	1,130	
DINING CABINETS	2017-06-01	4,691	1,061	SL	7.0000000000000	670	0	670	
BEDROOM MIRRORS	2017-06-26	4,545	974	SL	7.0000000000000	649	0	649	
NEW COMPUTER	2017-07-10	3,396	1,019	SL	5.0000000000000	679	0	679	
DESIGN MINUTES FOR LIGHTING	2017-06-01	815	184	SL	7.0000000000000	116	0	116	
BUFFET TABLE	2017-07-10	5,839	1,251	SL	7.0000000000000	834	0	834	

**Depreciation Schedule**

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BUFFET TABLE	2017-07-10	6,318	1,358	SL	7.000000000000	903	0	903	
PLUMBING FIXTURE	2018-05-31	3,610	421	SL	5.000000000000	722	0	722	
WOODEN FLOOR PLANKS	2018-01-11	2,785	557	SL	5.000000000000	557	0	557	
APPLIANCE	2018-07-23	8,201	683	SL	5.000000000000	1,640	0	1,640	
CABINET	2018-07-23	2,254	134	SL	7.000000000000	322	0	322	
COUNTER TOPS	2018-08-31	3,409	162	SL	7.000000000000	487	0	487	
IMPROVEMENTS	2018-10-08	3,327	166	SL	5.000000000000	665	0	665	
2 COMPUTERS	2018-04-24	4,461	595	SL	5.000000000000	892	0	892	
SOLID STATE STARTER	2018-04-24	5,255	701	SL	5.000000000000	1,051	0	1,051	
5 ETHERNET CABLES 1 TEL	2018-05-08	1,838	245	SL	5.000000000000	368	0	368	
ALOHA POWER EQUIPMENT	2018-05-29	1,525	178	SL	5.000000000000	305	0	305	
ALL IN ONE COMPUTER	2018-10-05	2,184	109	SL	5.000000000000	437	0	437	
MITSUBISHI CONDESING UNIT	2018-10-11	1,888	94	SL	5.000000000000	378	0	378	
5 DRAWER FILING CABINET	2018-02-01	500	65	SL	7.000000000000	71	0	71	
4 COMPOSITE BENCHES	2018-05-23	3,655	426	SL	5.000000000000	731	0	731	
GARBAGE DIS[PSA; DRAIN STRAINER	2018-07-28	1,523	127	SL	5.000000000000	305	0	305	
MAINTENANCE AREA	2018-05-12	694	93	SL	5.000000000000	139	0	139	
PARKING LIGHT FIXTURES	2018-04-17	7,200	960	SL	5.000000000000	1,440	0	1,440	
434 KEKUPUA PROPERTY	2018-08-21	702,354		NC	0 %	0	0	0	
BLOWER WHEEL	2018-11-14	2,008	67	SL	5.000000000000	402	0	402	

### Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
EXHAUST FAN MOTOR	2019-07-12	3,423		SL	5.000000000000	285	0	285	
DELL XPS-13 LAPTOP & SLEEVE	2019-02-04	1,402		SL	3.000000000000	428	0	428	
MICROSOFT SURFACE TABLETS 2	2019-02-20	1,032		SL	3.000000000000	315	0	315	
DELL OPTIPLEX 5260 ALL-IN-ONE COMPUTER	2019-03-04	1,573		SL	3.000000000000	437	0	437	
(3) ADC RECLINERS	2019-05-01	4,019		SL	5.000000000000	536	0	536	
LED FACILITY LIGHTING FIXTURES	2019-09-27	7,847		SL	5.000000000000	392	0	392	
KITCHEN EQUIPMENT	2019-11-01	110,523		SL	5.000000000000	3,684	0	3,684	

**TY 2019 Investments Corporate Bonds Schedule****Name:** LUNALILO HOME**EIN:** 99-0075244**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
COMMONFUND - BOND	2,422,944	2,422,944

**TY 2019 Investments Corporate Stock Schedule****Name:** LUNALILO HOME**EIN:** 99-0075244

## Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
COMMONFUND - EQUITIES	7,327,553	7,327,553

**TY 2019 Investments - Other Schedule****Name:** LUNALILO HOME**EIN:** 99-0075244**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
COMMONFUND - OTHER	FMV	551,138	551,138



**TY 2019 Land, Etc.  
Schedule**

**Name:** LUNALILO HOME

**EIN:** 99-0075244

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
COTTAGE RENOVATION	40,011	24,734	15,277	
MASONRY SERVICES	5,775	5,775	0	
MAIN BUILDING IMPROVEMENTS	14,050	14,050	0	
PAINTING	3,540	3,540	0	
FIRE SPRINKLER SYSTEM	87,452	87,452	0	
BUILDING IMPROVEMENTS	4,147,287	1,900,839	2,246,448	
ADDITIONS/ALTERATIONS/ADA RAMP 5	208,702	62,612	146,090	
D&D INDUSTRIES	2,464	2,464	0	
LVT PLANK INSTALLATION (FLOOR)	24,187	1,814	22,373	
FLOORING MATERIAL	21,647	1,398	20,249	
NEW COMPUTER FOR HOME INTERN	2,164	866	1,298	
CARPET TILES	3,620	965	2,655	
HANDICAP VEHICLE	70,000	38,500	31,500	
FABRIC FOR BACK PATIO	41,916	15,968	25,948	
RESDIENT ROOM - SAMPLE BED	2,368	1,014	1,354	
TEMPORARY WARD BED SET (4)	1,961	770	1,191	
CART	1,594	1,594	0	
NEW COMPUTER FOR ACCT ASSIST	1,751	700	1,051	
OHANA ROOM TELEVISION	2,283	914	1,369	
4" BACKFLOW PREVENTER	1,600	1,600	0	
GENERATOR-OLYMPIAN CD050	21,198	21,198	0	
GENERATOR-INSTALLATION	12,817	12,817	0	
ADC CURTAINS	4,802	2,241	2,561	
FURNITURE	27,913	9,970	17,943	
RESIDENT ROOMS - BEDS, WARDROBES, CHESTS	93,977	34,682	59,295	
BEDROOM COVERINGS FABRIC	44,222	16,320	27,902	
JOERNS CARE HOSPITAL BED (10)	15,170	5,598	9,572	
FISHER - LATERAL FILE CABINET	404	404	0	
(3) LUNALILO PORTRAITS	280	280	0	
PICTURES PLUS - (3) CUSTOM FRAMES	778	778	0	

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
LUNALILO HOME	148,065	148,065	0	
STORAGE RACK	1,502	1,502	0	
NEW COFFEE MAKER	2,782	1,390	1,392	
AIR CONDITIONING UNIT	2,434	1,136	1,298	
REFRIGERATOR FOR SNACK BAR	416	416	0	
SOUND EQUIPMENT - EASY MUSIC	966	966	0	
SIMPLEX ALARM PANEL	2,984	2,984	0	
ICE MACHINE - ROBERT'S REFRIG	4,924	4,924	0	
2 35 GALLON GREASE INTERCEPTOR	8,406	6,955	1,451	
LAWN MOWER - HOME DEPOT	3,113	2,651	462	
WATER HEATER REPLACEMENT	13,623	7,946	5,677	
FANS - THE FAN SHOP	1,861	1,562	299	
SERVER - SPANNING SOLUTION	4,478	4,478	0	
AIR CONDITIONER - ADULT CAR	3,962	2,973	989	
AIR CONDITIONER - ADULT CAR	2,411	1,808	603	
08 TOYOTA SIENNA VAN (PINE)	23,103	23,103	0	
TOMB RENOVATION AT KAWAIA	609,986	125,126	484,860	
AIR CONDITIONER - 2 CARRIER 50TC-A07	23,940	19,950	3,990	
VIDEO SURVEILLANCE SYSTEM - 29 CAMERAS	20,136	20,136	0	
LAPTOP COMPUTER	1,116	1,116	0	
3 EXHAUST FAN MORTORS (REPLACEMENT)	10,746	8,418	2,328	
VIDEO SURVEILLANCE SYSTEM (3 CAMERAS)	1,948	1,948	0	
24 LANAI CHAIRS	2,010	1,541	469	
NURSE CALL SYSTEM UPDATE (1ST & 2ND FLOOR)	3,897	3,897	0	
LANAI WOVEN TABLES	999	749	250	
2 DELL COMPUTERS - OPTIPLEX	3,942	3,942	0	
DINING ROOM CHAIRS & TABLES	46,395	24,855	21,540	
FUNITURE FOR LANAI, ACTIVITY ROOM, LOUNGE	107,509	47,355	60,154	
WINDOW COVERINGS	5,459	2,405	3,054	
FURNITURE & CUSHIONS	7,911	4,143	3,768	

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
DINING CABINETS	4,691	1,731	2,960	
BEDROOM MIRRORS	4,545	1,623	2,922	
NEW COMPUTER	3,396	1,698	1,698	
DESIGN MINUTES FOR LIGHTING	815	300	515	
BUFFET TABLE	5,839	2,085	3,754	
BUFFET TABLE	6,318	2,261	4,057	
PLUMBING FIXTURE	3,610	1,143	2,467	
WOODEN FLOOR PLANKS	2,785	1,114	1,671	
APPLIANCE	8,201	2,323	5,878	
CABINET	2,254	456	1,798	
COUNTER TOPS	3,409	649	2,760	
IMPROVEMENTS	3,327	831	2,496	
2 COMPUTERS	4,461	1,487	2,974	
SOLID STATE STARTER	5,255	1,752	3,503	
5 ETHERNET CABLES 1 TEL	1,838	613	1,225	
ALOHA POWER EQUIPMENT	1,525	483	1,042	
ALL IN ONE COMPUTER	2,184	546	1,638	
MITSUBISHI CONDESING UNIT	1,888	472	1,416	
5 DRAWER FILING CABINET	500	136	364	
4 COMPOSITE BENCHES	3,655	1,157	2,498	
GARBAGE DIS[PSA; DRAIN STRAINER	1,523	432	1,091	
MAINTENANCE AREA	694	232	462	
PARKING LIGHT FIXTURES	7,200	2,400	4,800	
434 KEKUPUA PROPERTY	702,354	0	702,354	
BLOWER WHEEL	2,008	469	1,539	
EXHAUST FAN MOTOR	3,423	285	3,138	
DELL XPS-13 LAPTOP & SLEEVE	1,402	428	974	
MICROSOFT SURFACE TABLETS 2	1,032	315	717	
DELL OPTIPLEX 5260 ALL-IN-ONE COMPUTER	1,573	437	1,136	
(3) ADC RECLINERS	4,019	536	3,483	

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
LED FACILITY LIGHTING FIXTURES	7,847	392	7,455	
KITCHEN EQUIPMENT	110,523	3,684	106,839	

**TY 2019 Legal Fees Schedule****Name:** LUNALILO HOME**EIN:** 99-0075244

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
LEGAL	39,865	0	39,025	0

**TY 2019 Other Expenses Schedule****Name:** LUNALILO HOME**EIN:** 99-0075244**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FACILITY MANAGEMENT	67,653	0	19,393	52,683
SUPPLIES	202,654	0	4,893	185,285
MARKETING & PROMOTION	21,075	0	21,075	0
MISCELLANEOUS	13,797	0	11,209	2,588
GOLF EXPENSE	12,315	0	12,315	0
ANNUAL EXPENSE	21,663	0	21,663	0
IMU	1,376	0	1,376	0
MAHEALANI DINNER	4,298	0	4,298	0
BAD DEBT EXPENSE	93,103	0	93,103	0
INSURANCE	76,179	0	69,680	0

## Other Expenses Schedule

<b>Description</b>	<b>Revenue and Expenses per Books</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
GENERAL FUNDRAISING EXPENSE	52	0	52	0

**TY 2019 Other Income Schedule****Name:** LUNALILO HOME**EIN:** 99-0075244**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
RESIDENT SERVICE FEES	2,693,066		2,693,066
FOOD SERVICE FEES	91,853		91,853
RESPITE CARE FEES	25,400		25,400
MISCELLANEOUS PROGRAM FEES	19,845		19,845
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS	52,355		52,355



**TY 2019 Other Increases Schedule****Name:** LUNALILO HOME**EIN:** 99-0075244

<b>Description</b>	<b>Amount</b>
UNREALIZED GAIN ON INVESTMENT	1,641,042

**TY 2019 Other Liabilities Schedule****Name:** LUNALILO HOME**EIN:** 99-0075244

<b>Description</b>	<b>Beginning of Year - Book Value</b>	<b>End of Year - Book Value</b>
RESIDENT - TRUST ACCOUNT	1,033	3,679
DUE TO ANNIE H. PARKE TRUST	81,191	76,107

**TY 2019 Other Professional Fees Schedule****Name:** LUNALILO HOME**EIN:** 99-0075244

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT	39,200	39,200	0	0
CONTRACT SERVICES	638,082	0	1,313	593,073
TRUST	102,000	0	102,000	0
PAYROLL PROCESSING FEES	306,741	0	71,182	235,559

**Schedule B**  
(Form 990, 990-EZ,  
or 990-PF)  
Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047  
**2019**

Name of the organization  
LUNALILO HOME

**Employer identification number**  
99-0075244

**Organization type** (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year . . . . . ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
LUNALILO HOME

Employer identification number  
99-0075244

**Part I**  
**Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DOLORES FURTADO MARTIN FOUNDATION 1088 BISHOP STREET SUITE 1227 HONOLULU, HI 96813	\$ 10,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
2	CITY & COUNTY HONOLULU 530 SOUTH KING STREET ROOM 208 HONOLULU, HI 96813	\$ 70,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
3	PAPA OLA LOKAHI 894 QUEEN STREET HONOLULU, HI 96813	\$ 74,705	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
4	I OLA LAHUI 1441 KAPIOLANI BLVD SUITE 1802 HONOLULU, HI 96814	\$ 12,684	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
5	HMSA FOUNDATION 615 PIIKOI STREET SUITE 815 HONOLULU, HI 96814	\$ 16,157	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
.		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization LUNALILO HOME	Employer identification number 99-0075244
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<b>Part II Noncash Property</b>			
(a) No. from Part I	(b) Description of noncash property given <small>(see instructions). Use duplicate copies of Part II if additional space is needed.</small>	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____

Name of organization  
LUNALILO HOME

Employer identification number  
99-0075244

**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____ _____	_____ _____	_____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
_____ _____		_____ _____	