Form **990**

Second Extension Granted to November 15, 2004

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Department of the Treasury
Internal Revenue Service

OMB No 1545-0047

2003

Open to Public Inspection

A For the 2003 calendar year, or tax year beginning , and ending

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return ☐ Amended return ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: **Lahaina Restoration Foundation**

Number and street (or P O box if mail is not delivered to street address): **120 Dickenson Street** Room/suite

City or town, state or country, and ZIP + 4: **Lahaina HI 96761**

D Employer ID number: **99-6004506**

E Telephone number: **808-661-3262**

F Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) ▶

● **Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).**

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes," enter number of affiliates ▶

H(c) Are all affiliates included? ☐ Yes ☐ No (If "No," att a list See instr)

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☐ No

I Group Exemption Number ▶

G **Website:** ▶ lahainarestoration.org

J **Organization type** (check only one) ▶ ☒ 501(c) (3) ◂ (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ▶ ☐ if the organization's gross receipts are normally not more than $25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, it should file a return without financial data **Some states require a complete return.**

M Check ▶ ☐ if the organization is **not** required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 806,916

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See page 18 of the instructions.)

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Line	Description		(A) Securities	Ref	Amount / (B) Other	Line	Amount
Revenue							
1	Contributions, gifts, grants, and similar amounts received						
a	Direct public support			1a	28,845		
b	Indirect public support			1b			
c	Government contributions (grants)			1c	55,992		
d	**Total** (add lines 1a through 1c) (cash $ 84,837 noncash $)					1d	84,837
2	Program service revenue including government fees and contracts (from Part VII, line 93)					2	44,525
3	Membership dues and assessments					3	
4	Interest on savings and temporary cash investments					4	18,898
5	Dividends and interest from securities					5	
6a	Gross rents			6a	656,230		
b	Less rental expenses			6b			
c	Net rental income or (loss) (subtract line 6b from line 6a)					6c	656,230
7	Other investment income (describe ▶)					7	
8a	Gross amount from sales of assets other than inventory			8a	1		
b	Less cost or other basis and sales expenses			8b	556,143		
c	Gain or (loss) (attach schedule)			8c	-556,142		
d	Net gain or (loss) (combine line 8c, columns (A) and (B))	See Stmt 2				8d	-556,142
9	Special events and activities (attach schedule) If any amount is from **gaming**, check here ▶ ☐						
a	Gross revenue (not including $ of contributions reported on line 1a)			9a			
b	Less direct expenses other than fundraising expenses			9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)					9c	
10a	Gross sales of inventory, less returns and allowances			10a	964		
b	Less cost of goods sold			10b	1,996		
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	Stmt 3				10c	-1,032
11	Other revenue (from Part VII, line 103)					11	1,461
12	**Total revenue** (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)					12	248,777
Expenses							
13	Program services (from line 44, column (B))					13	510,074
14	Management and general (from line 44, column (C))					14	348,649
15	Fundraising (from line 44, column (D))					15	
16	Payments to affiliates (attach schedule)					16	
17	**Total expenses** (add lines 16 and 44, column (A))					17	858,723
Net Assets							
18	Excess or (deficit) for the year (subtract line 17 from line 12)					18	-609,946
19	Net assets or fund balances at beginning of year (from line 73, column (A))					19	3,425,566
20	Other changes in net assets or fund balances (attach explanation)	See Stmt 4				20	140,740
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)					21	2,956,360

For Paperwork Reduction Act Notice, see the separate instructions. See Stmt 1

Form **990** (2003)

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Part II Statement of Functional Expenses All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See page 22 of the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule) (cash $ ____ non-cash $ ____)	22				
23 Specific assistance to individuals	23				
24 Benefits paid to or for members	24				
25 Compensation of officers, directors, etc	25	66,000		66,000	
26 Other salaries and wages	26	163,763	117,087	46,676	
27 Pension plan contributions	27	18,013		18,013	
28 Other employee benefits	28	38,556	22,858	15,698	
29 Payroll taxes	29	64,219	55,899	8,320	
30 Professional fundraising fees	30				
31 Accounting fees	31	7,198		7,198	
32 Legal fees	32	24,259		24,259	
33 Supplies	33				
34 Telephone	34				
35 Postage and shipping	35				
36 Occupancy	36				
37 Equipment rental and maintenance	37				
38 Printing and publications	38	10,355	10,355		
39 Travel	39				
40 Conferences, conventions, and meetings	40	4,212		4,212	
41 Interest	41				
42 Depreciation, depletion, etc (attach schedule)	42	10,150		10,150	
43 Other expenses not covered above (itemize) a	43a				
b See Statement 5	43b	451,998	303,875	148,123	
c	43c				
d	43d				
e	43e				
44 **Total functional expenses** (add lines 22 - 43) **Organizations completing columns (B)-(D), carry these totals to lines 13-15**	44	858,723	510,074	348,649	0

Joint Costs. Check ▶ ☐ if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in **(B)** Program services? ▶ ☐ Yes ☒ No

If "Yes," enter **(i)** the aggregate amount of these joint costs $________ , **(ii)** the amount allocated to Program services $________ ,

(iii) the amount allocated to Management and general $________ , and **(iv)** the amount allocated to Fundraising $________

Part III Statement of Program Service Accomplishments (See page 25 of the instructions.)

What is the organization's primary exempt purpose? ▶ See Statement 6 All organizations must describe their exempt purpose achievements in a clear and concise manner State the number of clients served, publications issued, etc Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others)	**Program Service Expenses** (Required for 501(c)(3) & (4) orgs , & 4947(a)(1) trusts, but optional for others)
a See Statement 7 (Grants and allocations $)	510,074
b (Grants and allocations $)	
c (Grants and allocations $)	
d (Grants and allocations $)	
e Other program services (attach schedule) (Grants and allocations $)	
f **Total of Program Service Expenses** (should equal line 44, column (B), Program services) ▶	510,074

Part IV Balance Sheets (See page 25 of the instructions.)

	Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only			(A) Beginning of year		(B) End of year
Assets	45 Cash-non-interest-bearing			2,328	45	17,653
	46 Savings and temporary cash investments			329,145	46	401,538
	47a Accounts receivable	47a	3,799			
	b Less allowance for doubtful accounts	47b		11,236	47c	3,799
	48a Pledges receivable	48a				
	b Less allowance for doubtful accounts	48b			48c	
	49 Grants receivable				49	
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)				50	
	51a Other notes and loans receivable (attach schedule)	51a				
	b Less allowance for doubtful accounts	51b			51c	
	52 Inventories for sale or use			7,069	52	5,083
	53 Prepaid expenses and deferred charges			59,780	53	64,087
	54 Investments-securities ▶ ☐ Cost ☐ FMV				54	
	55a Investments-land, buildings, and equipment basis	55a	2,306,586			
	b Less. accumulated depreciation (attach schedule) See Stmt 8	55b	524,738	1,781,628	55c	1,781,848
	56 Investments-other (attach schedule)				56	
	57a Land, buildings, and equipment basis	57a	867,438			
	b Less accumulated depreciation (attach schedule) See Stmt 9	57b	161,062	1,314,417	57c	706,376
	58 Other assets (describe ▶ See Stmt 10)			6,159	58	6,159
	59 **Total assets** (add lines 45 through 58) (must equal line 74)			3,511,762	59	2,986,543
Liabilities	60 Accounts payable and accrued expenses			5,508	60	24,024
	61 Grants payable				61	
	62 Deferred revenue				62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)				63	
	64a Tax-exempt bond liabilities (attach schedule)				64a	
	b Mortgages and other notes payable (attach schedule)				64b	
	65 Other liabilities (describe ▶ See Stmt 11)			80,688	65	6,159
	66 **Total liabilities** (add lines 60 through 65)			86,196	66	30,183
Net Assets or Fund Balances	**Organizations that follow SFAS 117, check here** ▶ ☒ and complete lines 67 through 69 and lines 73 and 74					
	67 Unrestricted			1,744,878	67	1,356,360
	68 Temporarily restricted				68	
	69 Permanently restricted			1,680,688	69	1,600,000
	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 70 through 74					
	70 Capital stock, trust principal, or current funds				70	
	71 Paid-in or capital surplus, or land, building, and equipment fund				71	
	72 Retained earnings, endowment, accumulated income, or other funds				72	
	73 **Total net assets or fund balances** (add lines 67 through 69 **or** lines 70 through 72, column (A) **must** equal line 19, column (B) **must** equal line 21)			3,425,566	73	2,956,360
	74 **Total liabilities and net assets / fund balances** (add lines 66 and 73)			3,511,762	74	2,986,543

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization How the public perceives an organization in such cases may be determined by the information presented on its return Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See page 27 of the instructions.)

a	Total revenue, gains, and other support per audited financial statements ▶	a	248,777
b	Amounts included on line a but not on line 12, Form 990		
(1)	Net unrealized gains on investments $		
(2)	Donated services and use of facilities $		
(3)	Recoveries of prior year grants $		
(4)	Other (specify): $		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	248,777
d	Amounts included on line 12, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify). $		
	Add amounts on lines (1) and (2) ▶	d	
e	Total revenue per line 12, Form 990 (line c plus line d) ▶	e	248,777

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a	Total expenses and losses per audited financial statements ▶	a	858,723
b	Amounts included on line a but not on line 17, Form 990		
(1)	Donated services and use of facilities $		
(2)	Prior year adjustments reported on line 20, Form 990 $		
(3)	Losses reported on line 20, Form 990 $		
(4)	Other (specify). $		
	Add amounts on lines (1) through (4) ▶	b	
c	Line a minus line b ▶	c	858,723
d	Amounts included on line 17, Form 990 but not on line a:		
(1)	Investment expenses not included on line 6b, Form 990 $		
(2)	Other (specify) $		
	Add amounts on lines (1) and (2) ▶	d	
e	Total expenses per line 17, Form 990 (line c plus line d) ▶	e	858,723

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see page 27 of the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contrib to employee benefit plans & deferred compensation	(E) Expense account and other allowances
See Statement 12				

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than $100,000 from your organization and all related organizations, of which more than $10,000 was provided by the related organizations? If "Yes," attach schedule-see page 28 of the instructions ▶ ☐ Yes ☒ No

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Part VI Other Information (See page 28 of the instructions.)

			Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77		X
78a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc , to any other exempt or nonexempt organization?	80a		X
b	If "Yes," enter the name of the organization ▶ and check whether it is ☐ exempt or ☐ nonexempt			
81a	Enter direct and indirect political expenditures See line 81 instructions — 81a			
b	Did the organization file **Form 1120-POL** for this year? N/A	81b		
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a		X
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) — 82b			
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b		
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	84b		
85	501(c)(4), (5), or (6) organizations **a** Were substantially all dues nondeductible by members? N/A	85a		
b	Did the organization make only in-house lobbying expenditures of $2,000 or less? N/A	85b		
	If "Yes" was answered to either 85a or 85b, **do not** complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year			
c	Dues, assessments, and similar amounts from members — 85c			
d	Section 162(e) lobbying and political expenditures — 85d			
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices — 85e			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) — 85f			
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? N/A	85g		
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) orgs. Enter **a** Initiation fees and capital contributions included on line 12 — 86a			
b	Gross receipts, included on line 12, for public use of club facilities — 86b			
87	501(c)(12) orgs Enter **a** Gross income from members or shareholders — 87a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) — 87b			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Part IX	88		X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 ▶ 0 , section 4912 ▶ 0 , section 4955 ▶ 0			
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b		X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0			
d	Enter Amount of tax on line 89c, above, reimbursed by the organization ▶ 0			

90a List the states with which a copy of this return is filed ▶ None

b Number of employees employed in the pay period that includes March 12, 2003 (See instructions) 90b 12

91 The books are in care of ▶ Lahaina Restoration Found Telephone no ▶ 808-661-3262
Located at ▶ 120 Dickenson Street, Lahaina, HI ZIP + 4 ▶ 96761

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of **Form 1041**- Check here ▶ ☐
and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92

Part VII Analysis of Income-Producing Activities (See page 33 of the instructions.)

Note: Enter gross amounts unless otherwise indicated	Unrelated business income (A) Business code	(B) Amount	Excluded by sec 512, 513, or 514 (C) Exclusion code	(D) Amount	(E) Related or exempt function income
93 Program service revenue:					
a Baldwin Home			41	34,984	
b Courthouse Admissions			41	9,541	
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	18,898	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate.					
a debt-financed property					
b not debt-financed property			16	656,230	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			1	-556,142	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory			3	-1,032	
103 Other revenue: a					
b Miscellaneous Income			3	1,461	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))		0		163,940	0

105 **Total** (add line 104, columns (B), (D), and (E)) ▶ 163,940

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See page 34 of the instructions.)

Line No. ●	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
	See Statement 13

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See page 34 of the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See page 34 of the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to **(b)**, file Form 8870 **and** Form 4720 (see instructions)

Please Sign

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

▶ [signature] 11/22/05
Date

[redacted], Executive Director

Date | Check if self- | Preparer's SSN or PTIN (See Gen Instr W)

[redacted]

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2003

Name of the organization	Employer identification number
Lahaina Restoration Foundation	99-6004506

Part I **Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**
(See page 1 of the instructions. List each one. If there are 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 ben plans & deferred compensation	(e) Expense account and other allowances
Freeland, George 49 Lea Lea Place	Executive Di 40+	66,000	0	0
Morgan, Terry 187 Prison Street	Operations M 40+	61,386	0	0
Total number of other employees paid over $50,000 ▶	2			

Part II **Compensation of the Five Highest Paid Independent Contractors for Professional Services**
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than $ 50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over $50,000 for professional services ▶		

Part III Statements About Activities (See page 2 of the instructions.)

			Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ $ ______ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		X
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expiration if more than $1,000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
3a	Do you make grants for scholarships, fellowships, student loans, etc ? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)	3a		X
3b	Do you have a section 403(b) annuity plan for your employees?	3b		X
4	Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?	4		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is: (Please check only **ONE** applicable box)

5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)

6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)

8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) **Enter the hospital's name, city, and state** ▶

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)

11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A)

11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)

12 ☒ An organization that normally receives. **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc , functions-subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in. **(1)** lines 5 through 12 above, or **(2)** section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations. (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	**(b)** Line number from above

14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) **Use cash method of accounting.**

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in) ▶	(a) 2002	(b) 2001	(c) 2000	(d) 1999	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)	76,936	43,701	27,524	19,501	167,662
16 Membership fees received		2,929			2,929
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc , purpose	568,950	471,839	513,623	508,190	2,062,602
18 Gross income from interest, dividends, amounts received from payment on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	13,603	6,271	46,521	31,628	98,023
19 Net income from unrelated business activities not included in line 18					0
20 Tax revenues levied for the organization's benefits and either paid to it or expended on its behalf					0
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					0
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	2,481	34,102	2,334	360	39,277
23 Total of lines 15 through 22	661,970	558,842	590,002	559,679	2,370,493
24 Line 23 minus line 17	93,020	87,003	76,379	51,489	307,891
25 Enter 1% of line 23	6,620	5,588	5,900	5,597	

26 **Organizations described on lines 10 or 11:** a Enter 2% of amount in column (e), line 24 ▶ 26a 0

b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1999 through 2002 exceeded the amount shown in line 26a **Do not file this list with your return.** Enter the total of all these excess amounts ▶ 26b

c Total support for section 509(a)(1) test Enter line 24, column (e) ▶ 26c

d Add Amounts from column (e) for lines: 18 ______ 19 ______ 22 ______ 26b ______ ▶ 26d

e Public support (line 26c minus line 26d total) ▶ 26e

f **Public support percentage (line 26e (numerator) divided by line 26c (denominator))** ▶ 26f %

27 **Organizations described on line 12:** a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person " **Do not file this list with your return.** Enter the sum of such amounts for each year

(2002) 10,000 (2001) 10,000 (2000) (1999)

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the **larger** of **(1)** the amount on line 25 for the year or **(2)** $5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) **Do not file this list with your return.** After computing the difference between the amount received and the larger amount described in **(1)** or **(2)**, enter the sum of these differences (the excess amounts) for each year

(2002) 498,932 (2001) (2000) (1999)

c Add Amounts from column (e) for lines 15 167,662 16 2,929 17 2,062,602 20 ______ 21 ______ ▶ 27c 2,233,193

d Add Line 27a total 20,000 and line 27b total 498,932 ▶ 27d 518,932

e Public support (line 27c total minus line 27d total) ▶ 27e 1,714,261

f Total support for section 509(a)(2) test Enter amount on line 23, column (e) ▶ 27f 2,370,493

g **Public support percentage (line 27e (numerator) divided by line 27f (denominator))** ▶ 27g 72.3166 %

h **Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))** ▶ 27h 4.1351 %

28 **Unusual Grants:** For an organization described in line 10, 11, or 12 that received any unusual grants during 1999 through 2002, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant **Do not file this list with your return.** Do not include these grants in line 15

Part V Private School Questionnaire (See page 7 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

N/A

		Line	Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
32	Does the organization maintain the following:			
a	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges?	33a		
b	Admissions policies?	33b		
c	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4 05 of Rev Proc 75-50, 1975-2 C B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768) **N/A**

Check ▶ a ☐ if the organization belongs to an affiliated group Check ▶ b ☐ if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37		
38 Total lobbying expenditures (add lines 36 and 37)	38		
39 Other exempt purpose expenditures	39		
40 Total exempt purpose expenditures (add lines 38 and 39)	40		
41 Lobbying nontaxable amount. Enter the amount from the following table-	41		
42 Grassroots nontaxable amount (enter 25% of line 41)	42		
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43		
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44		

If the amount on line 40 is-	**The lobbying nontaxable amount is-**
Not over $500,000	20% of the amount on line 40
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45 through 50 on page 11 of the instructions.)

	Lobbying Expenditures During 4-Year Averaging Period				
Calendar year (or fiscal year beginning in) ▶	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions.) **N/A**

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines **c** through **h.**)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines **c** through **h.**)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

		Yes	No
a Transfers from the reporting organization to a noncharitable exempt organization of			
(i) Cash	51a(i)		X
(ii) Other assets	a(ii)		X
b Other transactions:			
(i) Sales or exchanges of assets with a noncharitable exempt organization	b(i)		X
(ii) Purchases of assets from a noncharitable exempt organization	b(ii)		X
(iii) Rental of facilities, equipment, or other assets	b(iii)		X
(iv) Reimbursement arrangements	b(iv)		X
(v) Loans or loan guarantees	b(v)		X
(vi) Performance of services or membership or fundraising solicitations	b(vi)		X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	c		X

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ▶ ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Federal Statements

Statement 2 - Form 990, Part I, Line 8c - Sale of Assets Other Than Inventory - Other

Desc	How Rec'd	Whom Sold	Date Acquired	Date Sold	Sale Price	Cost & Expense	Deprec	Gain/ -Loss
Sale of Carthaginian	Purchase		6/15/73	7/22/03	$ 1	$ 556,143	$	$ -556,142
Total					$ 1	$ 556,143	$ 0	$ -556,142

Statement 3 - Form 990, Line 10c - Sales of Inventory

Description	Gross Sales	COGS	Gross Profit
Merchandise Sales	$ 964	$ 1,996	$ -1,032
Total	$ 964	$ 1,996	$ -1,032

Statement 4 - Form 990, Line 20 - Other Changes in Net Assets or Fund Balances

Description	Amount
Prior Period Adjustment	$ 140,740
Total	$ 140,740

Statement 5 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund-Raising
	$	$	$	$
Expenses				
Utilities	17,521	17,521		
Insurance	7,928	5,370	2,558	
Exhibit	1,123	1,123		
Maintenance	96,366	96,366		
Brig Moorage	5,772	5,772		
Parking Lot GET Expense	15,702	15,702		
Parking Lot Pavement Repairs	5,520	5,520		
Prison Function Exp	380	380		
Master Reading Program	1,353	1,353		
Hosp & Cottage	1,589	1,589		
Banyan Tree	9,429	9,429		
Grounds Expense	139,321	139,321		
Campbell Park Maintenance	4,429	4,429		
Honorarium	26,820		26,820	
Taxes & Licenses	2,240		2,240	
Dues & Subscriptions	1,560		1,560	
Promotion	8,468		8,468	
Cultural Exchange Program	15,000		15,000	
Interpretive Plan	12,687		12,687	
Scholarships	11,000		11,000	
Museum Mgr Costs	21,492		21,492	
Collections	714		714	
Vehicle	9,310		9,310	
Office	18,318		18,318	
Communication	6,818		6,818	
Miscellaneous	1,177		1,177	
Bad Debt	9,961		9,961	
Total	$ 451,998	$ 303,875	$ 148,123	$ 0

Statement 6 - Form 990, Part III - Organization's Primary Exempt Purpose

To restore, maintain, and interpret the physical, historical, and cultural buildings, structures and other features of historical and archaelogical interest in Lahaina. In addition, restored historical sites are used as educational vehicles for the general public.

Statement 7 - Form 990, Part III, Line a - Statement of Program Service Accomplishments

To cooperate with all community-oriented interests in an effort to restore, maintain and preserve the physical and cultural legacies and history of the first capital of the Kingdom of Hawaii. This effort is for the cultural and economic benefit of those of Hawaiian ancestry and then for all other residents and visitors.

Statement 8 - Form 990, Part IV, Line 55 - Investments in Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
	$ 2,306,366	$ 524,738	$ 2,306,586	$ 524,738
Total	$ 2,306,366	$ 524,738	$ 2,306,586	$ 524,738

Statement 9 - Form 990, Part IV, Line 57 - Land, Buildings, and Equipment

Description	Beginning of Year	Accum Deprec	End of Year	Accum Deprec
	$ 1,461,139	$ 146,722	$ 867,438	$ 161,062
Total	$ 1,461,139	$ 146,722	$ 867,438	$ 161,062

Statement 10 - Form 990, Part IV, Line 58 - Other Assets

Description	Beginning of Year	End of Year
Trust Funds	$ 6,159	$ 6,159
Total	$ 6,159	$ 6,159

Statement 11 - Form 990, Part IV, Line 65 - Other Liabilities

Description	Beginning of Year	End of Year
Trusts and Reserves	$ 80,688	$ 6,159
Total	$ 80,688	$ 6,159

Federal Statements

Statement 12 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees

Name	Title	Average Hrs	Comp	Benefits	Expenses	Address	City, State, Zip
Allaire, David G.	Director	1	0	0	0	2530 Kekaa Drive	Lahaina HI 96761
Baptist, Kevin	Director	1	0	0	0	PO Box 877	Lahaina HI 96767
Endsley, Richard	Director	1	0	0	0	193 Malanai Street	Lahaina HI 96761
Kadotani, Sam	Vice Preside	1	0	0	0	PO Box 157	Lahaina HI 96761
Lyons II, Michael	Treasurer	1	0	0	0	PO Box 335	Makawao HI 96768
Luckey, James C.	Director	1	0	0	0	765 Ascot Drive	Eugene OR 97401
Mancini, Paul	Director	1	0	0	0	33 Lono Avenue #470	Kahului HI 96732
Nakano, Michael	Director	1	0	0	0	120 Dickenson Street	Lahaina HI 96761
Roche, Thomas J.	Director	1	0	0	0	120 Dickenson Street	Lahaina HI 96761
Shelton, Louisa	Director	1	0	0	0	315 Mauli Street	Lahaina HI 96761
Von Tempsky, Kim	Director	1	0	0	0	727 Wainee Street #102	Lahaina HI 96761
Wakida, Penny	Director	1	0	0	0	285 Puapihi Street	Lahaina HI 96761
Bergson, Chuck	Director	1	0	0	0	311 Ano Street	Kahului HI 96732
Brown Jr., Zadoc	Director	1	0	0	0	33 Lono Avenue #330	Kahului HI 96732
Huddleston, Jack	Director	1	0	0	0	120 Dickenson Street	Lahaina HI 96761
Kawaguchi, Robert	Director	1	0	0	0	1657 Ainakea Street	Lahaina HI 96761
LaClergue, Ron	Director	1	0	0	0	845 Front Street	Lahaina HI 96761
Martin, Peter	Director	1	0	0	0	590 A Old Stable Road	Paia HI 96779
McPhee, Irene	Director	1	0	0	0	PO Box 127	Lahaina HI 96761

Federal Statements

Statement 12 - Form 990, Part V - List of Officers, Directors, Trustees, and Key Employees (continued)

Name			Title	Average Hrs	
Comp	Benefits	Expenses	Address		City, State, Zip
Raymond, Kiope			Director	1	
0	0	0	120 Dickenson Street		Lahaina HI 96761
Ross, Alex			Director	1	
0	0	0	344 Kahana Ridge Drive		Lahaina HI 96761
Soares, Donna S.K.			Director	1	
0	0	0	32 Kua Place		Lahaina HI 96761
Vorfeld, Robert T.			Director	1	
0	0	0	546 Mele Mele Street		Wailuku HI 96793
Baldwin, Peter			Director	1	
0	0	0	55 South Wakea Street		Kahului HI 96732
Dankworth, Jim			Director	1	
0	0	0	824 Front Street		Lahaina HI 96761
Jung, David			Director	1	
0	0	0	120 Dickenson Street		Lahaina HI 96761
Kutsunai, Andrew			Director	1	
0	0	0	1581 Aa Street		Lahaina HI 96761
Lindsey, Mary-Helen			Vice Preside	1	
0	0	0	393 Front Street		Lahaina HI 96761
Malcolm, Donald G.			Director	1	
0	0	0	1927 Washington Avenue		Santa Monica CA 90403
Moore, Michael			Secretary	1	
0	0	0	1287 Front Street		Lahaina HI 96761
Royce, William T.			President	1	
0	0	0	PO Box 246		Lahaina HI 96761
Sharp, Barbara			Director	1	
0	0	0	153-2 Pualei Drive		Lahaina HI 96761
Sutherland, Connie			Director	1	
0	0	0	PO Box 446		Lahaina HI 96767
Vorfeld, Walter			Director	1	
0	0	0	120 Dickenson Street		Lahaina HI 96761

Statement 13 - Form 990, Part VIII - Relationship of Activities

Line No.	Description
93a 93b	Provides care of 19th century artifacts. Guided tours and educational programs are offered by interpretive personnel. These are supplemented with printed material for vistors at various historical sites in Lahaina. A walking tour map is also provided without charge.
97b	Adaptive and compatible uses of historic properties support interpretive and education programs offered by the LRF. Income from certain sites provides support for other non-revenue producing facilities.
102	Sale of Hawaiian history books and Lahaina-related material provides support for educational and interpretive programs. Only books that relate directly to the goals and objectives of LRF are offered for sale.
103a	Lectures, publications, and educational/informational video tapes provide teaching and instructional aids for the advancement of the scientific, educational, and charitable goals of LRF.