## **Rotary Club of Lahaina Sunset Summary**

Mission:

To support Lahaina community and businesses.

Category:

**Community Support Services** 

Contact:

Katy Shroder, President

Address:

P.O. Box 12861, Lahaina, HI 96761

**Grant History:** 

N/A

2025 Request:

\$75-150,000 for Ka La'l Ola playground construction

Notes:

- Ka La'l Ola is a HomeAid Hawaii temporary housing site for Maui wildfire survivors, consisting of 450 modular homes on 57 acres.
- Rotary club installing 6 playgrounds throughout campus for residents.
- Each playground costs ~\$100,000.
- The total project is \$801,000. The Rotary is trying to raise \$572,000 of this cost.





Rotary Club of Lahaina Sunset
PO Box 12861
Lahaina, HI 96761
January 30, 2025

Dorcy Hawaiian Foundation 81 East Seventh Street, Suite 125 St. Paul, MN 55101

Aloha Dorcy Foundation Board Members,

On August 8, 2023, our town of Lahaina was obliterated by a wildfire, which killed 102 people and displaced more than 5,200 others. Many were aided by FEMA in finding temporary housing, only to have to recurrently move every 6-12 weeks. Others, who "fell through the cracks", took up residence in tents on the beach and in parks. Hubs for food and other supplies were set up at distribution sites. Fast forward to present day. There are still many houseless people who are waiting to be placed in housing. One such project is Ka La'i Ola ("The place of peaceful recovery"), a temporary housing development currently under construction that will house up to 1500 wildfire survivors for up to 5 years. Ka La'i Ola, a project of HomeAid Hawai'l, Inc, is designed as a neighborhood of 450 modular homes in pods on 57 acres. HomeAid Hawai'l is a 501(c)(3) corporation (Tax ID No. 47-4980676). Our Rotary club has sponsored workdays at the project site, including purchasing/assembling furniture and smoke detectors, as well as sponsoring holiday events for children and their families.

As a psychologist working with children, I know that children process trauma through play. Rotary asked about play options for the children living at Ka La'i Ola. We were told that there were plans for a small play area to be shared by a group of pods. The playground areas throughout the village are designed to be 20x30. In total, the plans call for 3 small playgrounds in Phase 1 (serving 270 units) and another 3 more in Phase 2. Phase 2 will also see a community center and resiliency center area, which will have a larger community playground.

The Rotary Club of Lahaina Sunset Foundation wants to see these play spaces available to children of all ages. Each area, depending on the play equipment selected, will cost between \$75-\$100k. A budget is attached, which outlines the amount of money that is necessary for the total project, and the amount of money that we will be asking from the Rotary D5000 Foundation. The play areas are not for the public. They are only for the residents of Ka La'i Ola.

We are asking the Dorcy Foundation to fund one or two of these playgrounds at Ka La'i Ola (\$75-\$150k). The Rotary Club of Lahaina Sunset Foundation is a 501(c)(3) corporation with Tax ID No. 84-2237754. I am attaching supporting documentation. We have a history of making a difference in the Lahaina community and especially in our response to the wildfires. With your help, many Lahaina children will have access to a neighborhood playground.

Mahalo Nui Loa,

Katy Shroder, President
Rotary Club of Lahaina Sunset
Lahaina, HI 96761



### Re: Grant documents

From Joanne Laird <mamalrd01@gmail.com>

Date Fri 2/7/2025 2:08 PM

To Katy Shroder <krshroder@gmail.com>; tammy@dorcyfdn.org <tammy@dorcyfdn.org>

Cc Liz May Liz

0 6 attachments (205 KB)

Ka Lai Ola Playgrounds Budget.pdf; ATT00001.htm; ATT00002.htm; ATT00003.htm; Lahaina Sunset logo SMALL.jpg; Outlook-n2qazgic.png;

Katy and Tammy - here is the total budget for 7 Playgrounds at Ka Lai Ola that has been provided to us by Ka Lai Ola and HomeAid Hawaii.. The Maui Advisory committee is putting forth to the Maui Fires Advisory Committee and the Rotary D5000 Foundation a proposal to pay for ONE playground - \$114,000.00. That proposal is moving forward for consideration for funding next week. We do not know what other sources HomeAid Hawaii has received for funding of the playgrounds. I sit as a member of the Maui Fires Advisory Committee and can answer any questions that you might have about our funding request. If you need information from HomeAid Hawaii, please let me know and I can provide you with the contact information.

# OED FY23

# ITEMIZED PROJECT BUDGET AND NARRATIVE

# Organization Name: Home Aid Hawaii

ITEMIZED BUDGET: Please list all sources of income and expense for this project.

INCOME DESCRIPTION	Unit Price QTY	Y TOTAL	ROTARY	OTHER CASH	IN KIND	TOTAL	NARRATIVE - Describe what was spent
DEOOD Equipment of the second			\$571,800.00			\$571,800.00	Rotary Grant
Grant from Kotary D3000 roundation		3 1 1		\$89,000.00		\$89,000.00	\$89,000.00 Monetary Donations From Others
Cash donations					\$140,000.00	\$140,000.00	\$140,000.00 Inkind Donations
Inking donations						\$0.00	
			\$571,800.00	\$89,000.00	\$140,000.00	\$800,800.00	
EXPENSE DESCRIPTION		TOTAL	ROTARY	OTHER CASH	IN KIND	TOTAL	NARRATIVE
Site Work							
Excavation removal of spoils	\$12,000.00 7	\$84,000.00	\$0.00	\$60,000.00	\$24,000.00	\$84,000.00	
ADA acress sidewalk curb	\$6,000.00	\$42,000.00	\$0.00	\$14,000.00	\$28,000.00	\$42,000.00	
Import crished rock for base	\$5,000.00 7	\$35,000.00	\$0.00	\$15,000.00	\$20,000.00	\$35,000.00	
SUB TOTAL		\$161,000.00	\$0.00	\$89,000.00	\$72,000.00	\$161,000.00	
Play Areas		TOTAL	ROTARY	OTHER CASH	IN KIND	TOTAL	
tacmaii sa vela	\$33,000,000 7	\$231,000.00	231,000.00	00.00	\$0.00	\$231,000.00	
Piay equipment	\$1,400.00 14	T		\$0.00		\$19,600.00	
Talk Deficiles		F		\$0.00	\$0.00	\$4,200.00	
Cafata Careptanes	\$6,000,000 7	\$42,000.00			\$0.00	\$42,000.00	
Salety sulface - Turi	nd Command	\$91,000.00	50,000.00	00.00	\$41,000.00	\$91,000.00	
rreign. Inctallation labor	\$36,000.00 7	\$252,000.00	2	00.00	\$27,000.00	\$252,000.00	
SUB TOTAL		\$639,800.00	571,800.00	00:00	68,000.00	\$639,800.00	
			1		140 000 000	\$800 800.00	
TOTAL EXPENSE		\$800,800.00	\$5/1,800.00	00.000.00			

NOTE: On this Budget, the amount in the Rotary Column must be equal to or less than the total amount in the (Other Cash + Inkind) columns

Form

**Return of Organization Exempt From Income Tax** 

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

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

2023 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service

For the 2023 calendar year, or tax year beginnin 07/01/23, and ending 06/30/24D Employer identification number Rotary Club of Lahaina Sunset C Name of organization Check if applicable: Foundation Address change 84-2237754 Doing business as Room/suite Name change Number and street (or P.O. box if mail is not delivered to street address) 330-719-2158 PO Box 12861 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/ 326,922 terminated G Gross receipts\$ HI 96761 Amended return Name and address of principal officer: Yes X No H(a) Is this a group return for subordinates Mariko Higashi Application pending H(b) Are all subordinates included? PO Box 12861 If "No." attach a list. See instructions HI 96761 Lahaina 4947(a)(1) or 501(c) ( ) (insert no.) **X** 501(c)(3) www.rotarycluboflahainasunset.org H(c) Group exemption number Year of formation: 2019 | M State of legal domicile: HI Form of organization: X Corporation Trust Association Summary Part I 1 Briefly describe the organization's mission or most significant activities: See Schedule 0 Activities & Governance ..... if the organization discontinued its operations or disposed of more than 25% of its net assets. 2 Check this box 3 Number of voting members of the governing body (Part VI, line 1a) 6 4 4 Number of independent voting members of the governing body (Part VI, line 1b) 0 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 30 6 6 Total number of volunteers (estimate if necessary) 7a 7a Total unrelated business revenue from Part VIII, column (C), line 12 0 7b b Net unrelated business taxable income from Form 990-T, Party, line 11 **Current Year** 326,922 8 Contributions and grants (Part VIII, line 1h) 0 Revenue 9 Program service revenue (Part VIII, line 2g) 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 326,922 38,314 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 210,563 13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 56,684 15,476 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 267,247 15,476 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 59,675 22,838 19 Revenue less expenses. Subtract line 18 from line 12 **End of Year Beginning of Current Year** 28,313 87,988 20 Total assets (Part X, line 16) 0 0 21 Total liabilities (Part X, line 26) 87,988 22 Net assets or fund balances. Subtract line 21 from line 20 ...... Signature Block Part II 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. 01/07/25 Signature of officer Sign President <u>Mariko Higashi</u> Here Type or print name and title Date Preparer's signature Print/Type preparer's name 01/07/25 self-employed P00768528 Gretchen Kremeyer Paid Gretchen Kremeyer 99-0303190 Carbonaro CPAs & Management Group Firm's EIN Preparer Firm's name 1885 Main St Ste 408 Use Only 808-242-5002 96793 Wailuku, HI Firm's address X Yes No May the IRS discuss this return with the preparer shown above? See instructions

rt VI	III Statement of Revenue Check if Schedule O cor					this Part VIII		
	Check if Schedule O col	Italiis	a respon	Se of floor	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a b c d e f	Federated campaigns	1a					785-766 2004-766 2004-766	
h	Membership dues	1b						
C	Fundraising events	1c						
d	d Related organizations							
- G	Government grants (contributions)	1d 1e						
f	All other contributions, gifts, grants,		20	26 022				
	and similar amounts not included above	1f	3,	26,922				
9	Noncash contributions included in lines 1a-1f	1g	\$					
h	Total. Add lines 1a–1f				326,922		The state of the s	
-"	Total. / (ad imos /a //			usiness Code		10777 STEEL		
2a								
2a b c d								
5								
9								
u								
	All other program service revenue							
	Total. Add lines 2a–2f						The second secon	
3	Investment income (including divide	ends. ii	nterest, and					
"	other similar amounts)							
4	Income from investment of tax-exe	mpt bo	nd proceeds	s				
5	Royalties							
3	(i) Real			ersonal		ANT ANT AND		
6-	Gross rents 6a		1 (.,,					et en en
1	2 Comments of the Comments of							-0.79 Magazini
b		T	1116	•	ISCIO	08111		100 PM
C		A			IUUII			
7a	Gross amount from (i) Securit	ies	(ii) (	Other				
	sales of assets		1					
١.	other than inventory 7a		_					Landana da
b	Less: cost or other							
	basis and sales exps. 7b							
C	Gain or (loss) 7c					53 (2002) 95 (8 17 tage)		
0	d Net gain or (loss)  a Gross income from fundraising events		1					
02								es established
	(not including \$ of contributions reported on line							100 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
	1c). See Part IV, line 18	88	,					Negoty Miller State Company Co
١.							1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	
"	<ul><li>b Less: direct expenses</li><li>c Net income or (loss) from fundrais</li></ul>							
		mg eve	1					
9	a Gross income from gaming	9			20	STREET, STREET	10.00	
١.	activities. See Part IV, line 19							
	b Less: direct expenses 9b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances 10a				CONTRACTOR OF THE PARTY OF THE			
10								
١	returns and allowances	10						
	<ul><li>b Less: cost of goods sold</li><li>c Net income or (loss) from sales of</li></ul>					200 20 20 20 20 20 20 20 20 20 20 20 20		
	c Net income or (loss) from sales of	HIVEII	ю у	Business Code				
	1-				A CONTRACTOR OF THE PROPERTY O			
17	1a							
Vei	b					1		
Revenue 11	d All other revenue							
	d All other revenue							
	e Total. Add lines 11a-11d				326,92	2	0	0

Form 990 (2023) Rotary Club of Lahaina Sunset

Part IX Statement of Functional Expenses

Soction	on 501(c)(3) and 501(c)(4) organizations mus	t complete all columns. Al	l other organizations mus	t complete column (A).	
Section	Check if Schedule O contains a res	ponse or note to any line	in this Part IX		
Do no	ot include amounts reported on lines 6b, 7 b, and 10b of Part VIII.		(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
_	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	110,743	110,743		
2	Grants and other assistance to domestic				
2	individuals. See Part IV, line 22	99,820	99,820		
•	Grants and other assistance to foreign				
3	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
4 5	Compensation of current officers, directors,				
3	trustees, and key employees				
6	Compensation not included above to disqualified				
O	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
0	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10 11	Payroll taxes Fees for services (nonemployees):				
	• • • • • • • • • • • • • • • • • • • •				
a b					
	Accounting				
4					
е	Lobbying Professional fundraising services. See Part IV, line	7	0000	11100	
f	Investment management fees		56.05	and the second	
	and the state of t		100100		
٤	(A) amount, list line 11g expenses on Schedule O.)				
12					
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	1			
17	Travel				
18	.,,	ses			
	for any federal, state, or local public official				
19					
20					
21		5,088	5,088	8	
22					
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e.	lf	-		
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule C	.)	44 64		
	a Supplies	14,34			
	b Meals & Food	13,10			
	c Holidays	9,87			
	d Programs	5,03			
	e All other expenses	9,24		8 1,240 7 2,550	
2	Total functional expenses. Add lines 1 through 24e	267,24	7 264,69	2,550	0
2	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation. Check here if				
	following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2023)

		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	28,313	1	87,988
2	Savings and temporary cash investments	.,	2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Loans and other receivables from any current or former officer, director	r.		
	trustee, key employee, creator or founder, substantial contributor, or 3			
	controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as define			
-	under section 4958(f)(1)), and persons described in section 4958(c)(3		6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use	1	8	A CAMPANIA CONTRACTOR OF THE C
9	Prepaid expenses and deferred charges		9	
	a Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
b	b Less: accumulated depreciation 10b	AND THE STATE OF T	10c	
11			11	
12			12	
13			13	
14		1	14	
15			15	
16			16	87,988
17			17	
18			18	
19			19	
20	Tax-exempt bond liabilities		20	
21		SCIOSITE	21	
22	trustee, key employee, creator or founder, substantial contributor, or 3	5%		
	controlled entity or family member of any of these persons		22	
23			23	
24			24	
25				
	parties, and other liabilities not included on lines 17-24). Complete Pa	•		
	of Schedule D	1	25	
26		0	26	0
	Organizations that follow FASB ASC 958, check here			
	and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	28,313	27	87 <i>,</i> 988
28			28	
	Organizations that do not follow FASB ASC 958, check her			
	and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30			30	
31			31	
27 28 29 30 31 32		28,313		87,988
33		28,313	33	87,988