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, s	990-T		cempt Organization	Bus	siness Income	Tax Retur	n [	OMB No 1545-0687
Form	390-1	\	and proxy ta	A UII	aci section ous	,( <i>C))</i>		0047
6		For cale	ndar year 2017 or other tax year begi	_			0 1 /	201/
	tment of the Treasury at Revenue Service	<b>▶</b> Do	► Go to www irs gov/Form99 not enter SSN numbers on this form				.,(3)	Open to Public Inspection for 501(c)(3) Organizations Only
Δ T	Check box if	P 00			me changed and see instruction			oyer identification number
^ _	address changed		, toline of organization ( onesite			J	(Emplo	byees trust see instructions)
B Ex	empt under section	1	WAIKIKI HEALTH					
	501( C () 3 )	Print	99-0	159253				
	408(e) 220(e)	or Type				Ì		ated business activity codes
	408A 530(a)	Type	277 OHUA AVENUE				(See in	structions)
	529(a)		City or town, state or province, coun	ry, and	ZIP or foreign postal code			
	ok value of all assets		HONOLULU, HI 96815					
att	end of year		oup exemption number (See instruc				<del></del>	
	6,314,560.	G Che	eck organization type 🕨 X 50	1(c) cc		(c) trust	401(a)	trust Other trust
			orimary unrelated business activity		ATTACH	•		
	-		corporation a subsidiary in an aff			y controlled group?		▶ Yes X No
	<u> </u>		identifying number of the parent c	orporati	on 🕨	one number ▶ 80	0.527	9406
			TODD OKAMOTO			1		
			or Business Income	Τ	(A) Income	(B) Expen	ses	(C) Net
1a b	Gross receipts or :		c Balance I	<b>▶</b> 1c				
2		-	Iule A, line 7)			:		
3	•		2 from line 1c			· ·		
4 a			attach Schedule D)		-			
b			Part II, line 17) (attach Form 4797)					
С	Capital loss dedu	ction for t	trusts	4c				
5			ps and S corporations (attach statement					
6	Rent income (Sch	nedule C)		6				
7	Unrelated debt-fi	nanced in	ncome (Schedule E)	7				
8	Interest, annuities, roya	Ities and re	nts from controlled organizations (Schedule F	8				
9			01(c)(7), (9) or (17) organization (Schedule C					
10	,	•	ncome (Schedule I)					
11	•	,	dule J)					
12 13	•		ctions, attach schedule)		ro-			
			ough 12		<u> </u>		Except f	for contributions.
, u			t be directly connected with				_	3
14			directors, and trustees (Schedule h					
15	Salaries and ware	25			lω		15	
16	Repairs and main	tenance				· CGDEN	4 16	
17	Bad debts				<del></del>	ODEIN,	<del> </del>	
18	Interest (attach se	chedule)					18	
<u>19</u>								
<b>)</b> 20			See instructions for limitation rules		1 1		20	
21			4562)			·		
22			I on Schedule A and elsewhere on					
23			compensation plans				,	
24 25			compensation plans				i i	
26			Schedule I).					
27			Schedule J)					
28			schedule)					
29		-	es 14 through 28					
30			ole income before net operatin					
31	Net operating los	s deducti	ion (limited to the amount on line	30)			31	
32	Unrelated busine	ss taxabl	e income before specific deduction	on Sub	tract line 31 from line 30		32	
33	•	•	rally \$1,000, but see line 33 instru		•			<del> </del>
34			ible income Subtract line 33				l l	Zen '
For	enter the smaller	of zero or	r line 32			<u> </u>		
i UI	ADDITION OF RECORD	OUL MELL				,		Form MMIJE (2017)

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PAGE 40

'Par	t III	Tax Computation		<u> </u>		
35	Organ	zations Taxable as Corporations. See instructions for tax computation. Controlled group				
	~membe	s (sections 1561 and 1563) check here  See instructions and				
а	Enter y	our share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)				
	(1) \$	(2) \$ (3) \$				
b	Enter o	ganization's share of (1) Additional 5% tax (not more than \$11,750)\$				
		tional 3% tax (not more than \$100,000)				
С		tax on the amount on line 34	35c			
36	Trusts	Taxable at Trust Rates See instructions for tax computation Income tax on				_
	the am	unt on line 34 from Tax rate schedule or Schedule D (Form 1041)	36			
37		x See instructions	1 1			
38	Alterna	ve minimum tax	38			
39	Tax on	Non-Compliant Facility Income See instructions	39			
40	Total A	dd lines 37, 38 and 39 to line 35c or 36, whichever applies	40			
Par	rt IV	Tax and Payments				
41 a	Foreign	tax credit (corporations attach Form 1118, trusts attach Form 1116) 41a				
		redits (see instructions)	] }			
С	Genera	business credit Attach Form 3800 (see instructions)	]			
d	Credit f	or prior year minimum tax (attach Form 8801 or 8827)	1 1			
		edits Add lines 41a through 41d	41e			
42	Subtrac	line 41e from line 40	42			
43		es Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule) .	43			
44		x Add lines 42 and 43	44			0.
45 a		ts. A 2016 overpayment credited to 2017				
	•	timated tax payments	1			
c		osited with Form 8868	1			
d	•	organizations Tax paid or withheld at source (see instructions) 45d	1			
e	-	withholding (see instructions)	1			
f		or small employer health insurance premiums (Attach Form 8941)	1			
g		edits and payments Form 2439	1			
J		orm 4136 Other Total ▶ 45g				
46	Total p	yments Add lines 45a through 45g	46			
47		ed tax penalty (see instructions) Check if Form 2220 is attached	47			
48	Tax due	If line 46 is less than the total of lines 44 and 47, enter amount owed	48			
49		ment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid				
50	Enter th	amount of line 49 you want	50			
Par	t V	Statements Regarding Certain Activities and Other Information (see Instruction	s)			
51	At any	time during the 2017 calendar year, did the organization have an interest in or a signature or	other a	authority	Yes	No
		financial account (bank, securities, or other) in a foreign country? If YES, the organization may		- 1		
	FinCEN	Form 114, Report of Foreign Bank and Financial Accounts If YES, enter the name of the	foreign	country		
	here 🕨					Χ
52	During	he tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a fore	ign trust?			Х
	If YES,	ee instructions for other forms the organization may have to file	_			
53	Enter th	e amount of tax-exempt interest received or accrued during the tax year 🕨 \$			İ	
	U	der penalties of perjury. I declare that I have examined this return including accompanying schedules and statements and to the telectric period of the correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	est of my	knowledge a	nd belie	ef, it is
Sigi	n   ⊾ "		av the IE	RS discuss	this re	aturn
Her	e 🕨 ı	/ / / / /// PT	•	reparer sho		elow
	s	gnature of officer Date Title (se	e instruction	s)? X Yes	: [	No
		Print/Type preparer's name Preparer's signature Date Chec	k l ıf	PTIN		
Paid		KRYSTAL K CREACH	employed	P0124		8
	oarer Only		EIN ►4	4-01602	60	
	Offiny	Firm's address ▶ 910 E ST LOUIS #200/PO BOX 1190, SPRINGFIELD, MO 65806-2523 Phon	eno 4	17 865-	870	1
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Schodulo A Coot of C	anda Cald I									Page 3
Schedule A - Cost of G		nter metno	a of invent				6			
1 Inventory at beginning of	1					ar	6			
2 Purchases		<del></del>			•	ld Subtract line				
3 Cost of labor						iter here and in	,			
4a Additional section 263A c	1 1						7		V I	
(attach schedule)						section 263A (w		ľ	Yes	No
b Other costs (attach schedu		<u> </u>			•	or acquired for				
5 Total Add lines 1 through Schedule C - Rent Income	e (From Real I	Property a	and Parso	nal Propert	y Loseod V	Vith Real Proper				
(see instructions)	e (i ioiii iteai i	Toperty a	iliu Felso	nai i iopeit	y Leaseu v	vitii iteai i iopei	cy)			
			<del> </del>		·			<del> </del>		
1 Description of property										
(1)										
(2)										
(3)										
(4)						<del></del>		-		
	2 Rent rece	ived or accru	ued			_				
(a) From personal property (if the				personal proper		3(a) Deductions di				ome
for personal property is more than 50%				or personal prope s based on profit		in columns 2(a	a) and 2(b)	(attach sche	edule)	
		ļ		•						
(1)		-								
(2)	<del></del>									
(3)										
Total		Total								
Total (c) Total income Add totals of c	volumns 2(a) and 3	-				(b) Total deductio				
here and on page 1, Part I, line 6	• •					Enter here and on Part I, line 6, colun				
Schedule E - Unrelated D			ee instruct	ions)		1	(= / -			
		(1		income from or	3	Deductions directly con			e to	
1 Description of de	bt-financed property			to debt-financed	(a) Straig	debt-finance ht line depreciation	debt-financed property		ctions	
			ŧ	property		ich schedule)	(b) Other deductions (attach schedule)			
(1)										
(2)										
(3)										
(4)										
4 Amount of average	5 Average adj		6	Column			8 All	ocable ded	uctions	
acquisition debt on or allocable to debt-financed	of or alloc debt-financed		4	divided		ncome reportable n 2 x column 6)	(column	6 x total of	f colum	
property (attach schedule)	(attach sch		by	column 5	(colum	ii 2 x coldiiii o)	;	3(a) and 3(b	)))	
(1)				9,	6			-		
(2)				9	6					
(3)				9	6					
(4)				9	6					
		-				re and on page 1,	Enter h	ere and or	n page	: 1,
					Part I, lir	ne 7, column (A)	Part I,	line 7, colu	ımn (E	3)
Totals					·					
Total dividends-received deduct						•				

Page 4

Schedule F - Interest, Annu	ilties, Royalties	T					atic	ons (see	instruction	ons)	
		Exen	npt Co	ntrolled Org	ganizatio I	ons	<del>-</del>				<del></del>
1 Name of controlled organization	2 Employer identification numb	iei į		ated income nstructions)	l	of specified included in		of column 4 that is I in the controlling Iion's gross income		6 Deductions directly connected with income in column 5	
(1)											
(2)											
(3)											
(4)											
Nonexempt Controlled Organiz	rations			·							
7 Taxable Income	8 Net unrelated in (loss) (see instruc			Total of specific ayments made		inc			Deductions directly nected with income in column 10		
(1)								·			
(2)											
(3)											<del></del>
(4)											
Totals Schedule G - Investment In		 ction 501(	 c)(7),	(9), or (17		En Pa	ter he	olumns 5 a ere and on line 8, colur (see inst	page 1, nn (A)	En	dd columns 6 and 11 ter here and on page 1, art I, line 8, column (B)
1 Description of income	2 Amount of	fincome		3 Deduction directly cor (attach sch	nected	A Set asides 5		5 Total deductions and set-asides (col. 3 plus col. 4)			
(1)											
(2)											
(3)											
(4)				······································							
Totals	Enter here and Part I, line 9, c	olumn (A)	ner Th	an Adverti	sing Ir	come	e (se	ee instru	ctions)		Enter here and on page 1. Part I, line 9, column (B)
1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expen direction connected production unrelated business in	y I with on of ed	4. Net inconfrom unrelation business 2 minus coll ff a gain, coll 5 three	ed tradé (column umn 3) ompute	from	5 Gross income		6 Expenses attributable to column 5		7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)	,								· · · · · · · · · · · · · · · · · · ·		
(3)											
(4)		***									
Totals	Enter here and on page 1, Part I, line 10, col (A)	Enter here a page 1, P line 10, co	art I,						<u> </u>		Enter here and on page 1, Part II, line 26
Schedule J - Advertising In	come (see instr	uctions)		1				· <del>-</del> ·			
Part I Income From Per			onsol	idated Bas	sis						
1 Name of periodical	2 Gross advertising income	3 Dire advertising	ct	4 Advertigan or (los 2 minus co a gain, co cols 5 thro	tising is) (col ol 3) If mpute	5	Circu	ulation me	6 Read	-	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
								<del></del>			
(2)				1							7
(3)				1							
(4)				1							
Totals (carry to Part II, line (5))	× 1										
		<del></del>								_	- 000 T

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Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis )

1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I ▶						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5) ▶	_				<del>-</del>	

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
1)		%	
2)		%	
3)		%	
4)		%	
otal Enter here and on page 1, Part II, line 14			

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