

House District \_\_\_

Senate District \_\_\_

THE TWENTY-SEVENTH LEGISLATURE  
APPLICATION FOR GRANTS & SUBSIDIES  
CHAPTER 42F, HAWAII REVISED STATUTES

Log No:

For Legislature's Use Only

Type of Grant or Subsidy Request:

GRANT REQUEST-OPERATING

GRANT REQUEST-CAPITAL

SUBSIDY REQUEST

"Grant" means an award of state funds by the legislature, by an appropriation to a specified recipient, to support the activities of the recipient and permit the community to benefit from those activities.

"Subsidy" means an award of state funds by the legislature, by an appropriation to a recipient specified in the appropriation, to reduce the costs incurred by the organization or individual in providing a service available to some or all members of the public.

"Recipient" means any organization or person receiving a grant or subsidy.

STATE DEPARTMENT OR AGENCY RELATED TO THIS REQUEST (LEAVE BLANK IF UNKNOWN):

STATE PROGRAM I.D.NO. (LEAVE BLANK IF UNKNOWN):

1. APPLICANT INFORMATION:

Legal Name of Requesting Organization:  
Mookini Luakini Foundation, Inc.  
5256 Makalena Street  
Honolulu, Hawaii 96821

2. CONTACT PERSON FOR MATTERS INVOLVING THIS APPLICATION:

Name Leimomi Mookini Lum  
Title President  
Phone # (808) 377-5000  
Fax# \_\_\_\_\_  
e-mail momilum@gmail.com

3. TYPE OF BUSINESS ENTITY:

- NON PROFIT CORPORATION 501 (C) (3)
- FOR PROFIT CORPORATION
- LIMITED LIABILITY COMPANY
- SOLE PROPRIETORSHIP/INDIVIDUAL

6. DESCRIPTIVE TITLE OF APPLICANT'S REQUEST: **Funding to continue the Children's Day Program started over 30 years ago for the 4<sup>th</sup> grade children from all the schools on Hawaii Island and the state to come and learn from experiencing hands on the rich history of the Mookini Heiau and the surrounding lands in the birth place of the first Hawaiian King, in an outdoor classroom setting, being able to use their senses to feel, smell and hear what it may have been like to be there in history.**

4. FEDERAL TAX ID#

5. STATE TAX ID#

7. AMOUNT OF STATE FUNDS REQUESTED:

FISCAL YEAR 2014: \$ 50,000.00

8. STATUS OF SERVICE DESCRIBED IN THIS REQUEST:

- NEW SERVICE (PRESENTLY DOES NOT EXIST)
- EXISTING SERVICE (PRESENTLY IN OPERATION)

SPECIFY THE AMOUNT BY SOURCES OF FUNDS AVAILABLE AT THE TIME OF THIS REQUEST:

STATE \$ \_\_\_\_\_  
FEDERAL \$ \_\_\_\_\_  
COUNTY \$ \_\_\_\_\_  
PRIVATE/OTHER \$ \_\_\_\_\_

TYPE NAME & TITLE OF AUTHORIZED REPRESENTATIVE:



LEIMOMI M. Lum PRES.

DATE SIGNED JAN 30, 2013

## Application for Grants and Subsidies

*If any item is not applicable to the request, the applicant should enter "not applicable".*

### I. Background and Summary

This section shall clearly and concisely summarize and highlight the contents of the request in such a way as to provide the State Legislature with a broad understanding of the request. Include the following:

1. A brief description of the applicant's background; *Over 30 years having this program for the 4<sup>th</sup> graders of Hawaii Island*
2. The goals and objectives related to the request; *To continue the program started over 30 years ago, helping to further the richness of the culture and heritage that is Hawaii.*
3. The public purpose and need to be served; *To supplement and to assist the classroom teaching with an outdoor understanding of the history of Hawaii and the ancient lifestyle and wisdom of the ancient elders.*
4. Describe the target population to be served; *All fourth graders of Hawaii Island and through the state.*
5. Describe the geographic coverage.

### II. Service Summary and Outcomes

The Service Summary shall include a detailed discussion of the applicant's approach to the request. The applicant shall clearly and concisely specify the results, outcomes, and measures of effectiveness from this request. The applicant shall:

1. Describe the scope of work, tasks and responsibilities;
2. Provide a projected annual timeline for accomplishing the results or outcomes of the service; *The process of planning requires approximately 8 months of preparation and planning to move 900-1000 or more students from around the island*
3. Describe its quality assurance and evaluation plans for the request. Specify how the applicant plans to monitor, evaluate, and improve their results; *After action reports and evaluations from the teachers.*
4. List the measure(s) of effectiveness that will be reported to the State agency through which grant funds are appropriated (the expending agency). The measure(s) will provide a standard and objective way for the State to assess the program's achievement or accomplishment. Please note that if the level of appropriation differs from the amount included in this application that the measure(s) of effectiveness will need to be updated and transmitted to the

**III. Financial**

**Budget**

1. The applicant shall submit a budget utilizing the enclosed budget forms as applicable, to detail the cost of the request.
2. The applicant shall provide its anticipated quarterly funding requests for the fiscal year 2014.

Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total Grant
\$50,000.00				\$50,000.00

3. The applicant shall provide a listing of all other sources of funding that they are seeking for fiscal year 2014. *N/A*
4. The applicant shall provide a listing of all state and federal tax credits it has been granted within the prior three years. Additionally, the applicant shall provide a listing of all state and federal tax credits they have applied for or anticipate applying for pertaining to any capital project, if applicable. *N/A*

**IV. Experience and Capability**

**A. Necessary Skills and Experience**

The applicant shall demonstrate that it has the necessary skills, abilities, knowledge of, and experience relating to the request. State your experience and appropriateness for providing the service proposed in this application. The applicant shall also provide a listing of verifiable experience of related projects or contracts for the most recent three years that are pertinent to the request. *Held this event for over 30 years with thousands of children participation.*

**B. Facilities**

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the request. If facilities are not presently available, describe plans to secure facilities. The applicant shall also describe how the facilities meet ADA requirements, as applicable.

**V. Personnel: Project Organization and Staffing**

**A. Proposed Staffing, Staff Qualifications, Supervision and Training**

The applicant shall describe the proposed staffing pattern and proposed service capacity appropriate for the viability of the request. The applicant shall provide the qualifications and experience of personnel for the request and shall describe its ability to supervise, train and provide administrative direction relative to the request. *N/A*

**B. Organization Chart**

The applicant shall illustrate the position of each staff and line of responsibility/supervision. If the request is part of a large, multi-purpose organization, include an organizational chart that illustrates the placement of this request. *N/A*

**VI. Other**

**A. Litigation**

The applicant shall disclose any pending litigation to which they are a party, including the disclosure of any outstanding judgement. If applicable, please explain. *N/A*

**B. Licensure or Accreditation**

The applicant shall specify any special qualifications, including but not limited to licensure or accreditation that applicant possesses relevant to this request.

expending agency.

Applicant MOOKINI FOUNDATION

## BUDGET REQUEST BY SOURCE OF FUNDS

(Period: July 1, 2013 to June 30, 2014)

Applicant: MOOKINI FOUNDATION

BUCIGET CATEGOR I ES	Total State Funds Requested (a)	(b)	(c)	(d)
<b>A. PERSONNEL COST</b>				
1. Salaries				
2. Payroll Taxes & Assessments				
3. Fringe Benefits				
TOTAL PERSONNEL COST				
<b>B. OTHER CURRENT EXPENSES</b>				
1. Airfare, Inter-Island		\$12,000.00		
2. Insurance		\$1,000.00		
3. Lease/Rental of Equipment (Buses)		\$10,000.00		
4. Lease/Rental of Space				
5. Staff Training Docents		\$10,000.00		
6. Supplies ( Punch, cups, Meals)		\$5,000.00		
7. Telecommunication				
8. Utilities				
9. Lodging for the docents		\$7,000.00		
10 Training supplies and brochures		\$5,000.00		
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
TOTAL OTHER CURRENT EXPENSES				
<b>C. EQUIPMENT PURCHASES</b>				
<b>D. MOTOR VEHICLE PURCHASES</b>				
<b>E. CAPITAL</b>				
<b>TOTAL (A+B+C+D+E)</b>		<b>\$50,000.00</b>		
<b>SOURCES OF FUNDING</b>		Budget Prepared By:		
@ Total State Funds Requested		<u>OLIVER LUM (808) 557-7585</u>		
(b)		[REDACTED]		
(c)		[REDACTED]		
(d)		[REDACTED]		
<b>TOTAL BUDGET</b>	<b>\$50,000.00</b>	Signature of Authorized Official: <u>LEMONI M LUM</u> Date: _____ Name and Title (Please type or print): <u>PRESIDENT</u>		



## BUDGET JUSTIFICATION - EQUIPMENT AND MOTOR VEHICLES

Applicant: Mookini Foundation

Period: July 1, 2013 to June 30, 2014

DESCRIPTION EQUIPMENT	NO. OF ITEMS	COST PER ITEM	TOTAL COST	TOTAL BUDGETED
			\$	
			\$	
			\$	
			\$	
			\$	
TOTAL:			.....	
JUSTIFICATION/COMMENTS:				

DESCRIPTION OF MOTOR VEHICLE	NO. OF VEHICLES	COST PER VEHICLE	TOTAL COST	TOTAL BUDGETED
			\$	
			\$	
			\$	
			\$	
			\$	
TOTAL:				
JUSTIFICATION/COMMENTS:				

**BUDGET JUSTIFICATION  
CAPITAL PROJECT DETAILS**

Applicant: MOOKINI FOUNDATION

Period: July1,2013to June30,2014

FUNDING AMOUNT REQUESTED						
TOTAL PROJECT COST	ALL SOURCES OF FUNDS RECEIVED IN PRIOR YEARS		STATE FUNDS REQUESTED	OTHER SOURCES OF FUNDS REQUESTED	FUNDING REQUIRED IN SUCCEEDING YEARS	
	FY: 2011-2012	FY: 2012-2013	FY:2013-2014	FY:2013-2014	FY:2014-2015	FY:2015-2016
PLANS						
LAND ACQUISITION						
DESIGN						
CONSTRUCTION						
EQUIPMENT						
TOTAL:						
JUSTIFICATION/COMMENTS:						

**DECLARATION STATEMENT OF  
APPLICANTS FOR GRANTS AND SUBSIDIES PURSUANT TO  
CHAPTER 42F, HAWAI'I REVISED STATUTES**

The undersigned authorized representative of the applicant certifies the following:

- 1) The applicant meets and will comply with all of the following standards for the award of grants and subsidies pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is licensed or accredited, in accordance with federal, state, or county statutes, rules, or ordinances, to conduct the activities or provide the services for which a grant or subsidy is awarded;
  - b) Complies with all applicable federal and state laws prohibiting discrimination against any person on the basis of race, color, national origin, religion, creed, sex, age, sexual orientation, or disability;
  - c) Agrees not to use state funds for entertainment or lobbying activities; and
  - d) Allows the state agency to which funds for the grant or subsidy were appropriated for expenditure, legislative committees and their staff, and the auditor full access to their records, reports, files, and other related documents and information for purposes of monitoring, measuring the effectiveness, and ensuring the proper expenditure of the grant or subsidy.
  
- 2) The applicant meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is incorporated under the laws of the State; and
  - b) Has bylaws or policies that describe the manner in which the activities or services for which a grant or subsidy is awarded shall be conducted or provided.
  
- 3) If the applicant is a non-profit organization, it meets the following requirements pursuant to Section 42F-103, Hawai'i Revised Statutes:
  - a) Is determined and designated to be a non-profit organization by the Internal Revenue Service; and
  - b) Has a governing board whose members have no material conflict of interest and serve without compensation.

Pursuant to Section 42F-103, Hawai'i Revised Statutes, for grants or subsidies used for the acquisition of land, when the organization discontinues the activities or services on the land acquired for which the grant or subsidy was awarded and disposes of the land in fee simple or by lease, the organization shall negotiate with the expending agency for a lump sum or installment repayment to the State of the amount of the grant or subsidy used for the acquisition of the land.

Further, the undersigned authorized representative certifies that this statement is true and correct to the best of the applicant's knowledge.

Mo'okini Luakini Foundation, Inc

(Typed Name of Individual or Organization)



(Signature)

JAN 30, 13

(Date)

Leimomi Mookini Lum

(Typed Name)

President

(Title)