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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2008

OMB No 1545-0052

| Ford | <u>alen</u> | dar year 2008, or tax year beginning | | , and ending | | |
|--------------------|--------------|--|---------------------------------------|---------------------------------------|--|---|
| G 0 | heck | all that apply: Initial return | Final return X A | Amended return | Address change | Name change |
| Use | the I | RS Name of foundation | | | A Employer identification | n number |
| | ibel. | JAMES & ABIGAIL CAMPB | ELL FAMILY | | | |
| | erwis | | | · · · · · · · · · · · · · · · · · · · | 99-0203078 | |
| | orint | Number and street (or P O box number if mail is not de | • | | B Telephone number | |
| See | type Sner | office TOOL RAMORIDA DIVID. O | AMES CAMPBEL | L BLDG200 | 808-674-31 | .67 |
| | uctio | ins City or town, state, and ZIP code | | | C if exemption application is i | |
| | | KAPOLEI, HI 96707 | | | D 1 Foreign organization | s, check here |
| H_C | - | type of organization: X Section 501(c)(3) ex | | | 2 Foreign organizations m check here and attach c | omputation Less, |
| | | | Other taxable private founda | | E If private foundation sta | |
| | | rket value of all assets at end of year J Accounti | • | Accrual | under section 507(b)(1 |)(A), check here |
| | | | ther (specify) | | F If the foundation is in a | |
| | | 14,259,107. (Part I, colu | | | under section 507(b)(1 | 1 |
| Pa | <u>rt i</u> | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 891,081. | | N/A | |
| | 2 | Check if the foundation is not required to attach Sch. B | | | | |
| | 3 | Interest on savings and temporary cash investments | 184,549. | <u> 184,549.</u> | | STATEMENT 2 |
| | 4 | Dividends and interest from securities | 268,573. | 268,573. | | STATEMENT 3 |
| | 5a | Gross rents | | | | |
| | b | Net rental income or (loss) | | | | |
| ø | 6a | Net gain or (loss) from sale of assets not on line 10 | <3,918,531. | > | | STATEMENT 1 |
| en | b | Gross sales price for all assets on line 6a 23,775,400. | | | | |
| Revenue | 7 | Capital gain net income (from Part IV, line 2) | | 0. | | |
| | 8 | Net short-term capital gain | · | | | |
| | 9 | Income modifications RECEIVED Gross sales less returns | | | | |
| | 10a | and allowances | | | | |
| | b | | - | | | |
| | | Gross profit of (loss) | 1 506 | 1 506 | | STATEMENT 4 |
| | 11 | Other income Total. Add lines 1 through 12 N. UT | 1,586. <2,572,742. | 1,586. > 454,708. | | STATEMENT 4 |
| | 12 | | 0. | <u>454,708.</u> 0. | | 0. |
| | 13 | Compensation of officers, directors, trustees, etc Other employee salaries and wages | 0. | <u> </u> | | 0. |
| | 14 | Pension plans, employee benefits | | | | |
| es | 15 | Legal fees | | | | |
| penses | | Accounting fees STMT 5 | 13,238. | 0. | | 0. |
| ž | | Other professional fees STMT 6 | 221,896. | 221,896. | | 0. |
| ш | 17 | Interest | 6. | 0. | | Ŏ. |
| and Administrative | 18 | Taxes | | | | |
| istr | 19 | Depreciation and depletion | · · · · · · · · · · · · · · · · · · · | | | |
| ä | 20 | Occupancy | | | | |
| Adı | 21 | Travel, conferences, and meetings | | | | |
| ğ | 22 | Printing and publications | | | | |
| g S | 23 | Other expenses STMT 7 | 86,214. | 0. | | 86,214. |
| Operating | 24 | Total operating and administrative | | | | |
| þer | | expenses. Add lines 13 through 23 | 321,354. | 221,896. | | 86,214. |
| 0 | 25 | Contributions, gifts, grants paid | 651,750. | | | 651,750. |
| | 26 | Total expenses and disbursements | | | 1 | |
| _ | | Add lines 24 and 25 | 973,104. | 221,896. | | 737,964. |
| | 27 | Subtract line 26 from line 12; | | | | |
| | a | Excess of revenue over expenses and disbursements | <3,545,846. | | | |
| | | Net investment income (if negative, enter -0-) | | 232,812. | | |
| | C | Adjusted net income (if negative, enter -0-) | | | N/A | 1 |

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (2008)







JAMES & ABIGAIL CAMPBELL FAMILY

| For | m 99 | 0-PF (2008) FOUNDATION | | 9 | <u>9-0203078</u> | Page 2 |
|-----------------------------|------|--|---------------------------------------|---------------------------------------|------------------|----------------------|
| P | art | Balance Sheets Attached schedules and amounts in the description | Beginning of year | | nd of year | |
| <u>.</u> | | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Mai | |
| | | Cash - non-interest-bearing | 5,205,208. | 5,693,84 | 7. 5,69 | <u>3,847.</u> |
| | | Savings and temporary cash investments | | | | |
| | 3 | Accounts receivable ► | | | | |
| | | Less: allowance for doubtful accounts ▶ | | · | | |
| | 4 | Pledges receivable ► | | | | |
| | | Less: allowance for doubtful accounts ▶ | | | | |
| | 5 | Grants receivable | | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | ľ | |
| | | disqualified persons | | | | |
| | 7 | Other notes and loans receivable | | | | |
| | | Less: allowance for doubtful accounts | | | | |
| ets | 8 | Inventories for sale or use | | | | |
| Assets | | Prepaid expenses and deferred charges | | | | |
| ٩ | 10a | Investments - U.S. and state government obligations | | | | |
| | b | Investments - corporate stock STMT 9 | 11,362,020. | 4,591,53 | | <u>1,538.</u> |
| | C | Investments - corporate bonds STMT 10 | 0. | 2,479,90 | 3. 2,47 | <u>79,903.</u> |
| | 11 | Investments - land, buildings, and equipment, basis | | | | |
| | | Less accumulated depreciation | | | | |
| | 12 | Investments - mortgage loans | | | | |
| | 13 | Investments - other STMT 11 | 2,228,714. | 1,486,60 | 4. 1,48 | <u>86,604.</u> |
| | 14 | Land, buildings, and equipment: basis ► | | | | |
| | | Less accumulated depreciation | | | | |
| | 15 | Other assets (describe ► STATEMENT 12) | 2,215. | 7,21 | 5. | 7,215. |
| | | | | | _ | |
| | | Total assets (to be completed by all filers) | 18,798,157. | 14,259,10 | 7. 14.25 | <u> 9,107.</u> |
| | 17 | Accounts payable and accrued expenses | | ··········· | | |
| | 18 | Grants payable | | | | |
| ies | 19 | Deferred revenue | | | | |
| Ħ | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | |
| Liabilities | 21 | Mortgages and other notes payable | | | | |
| _ | 22 | Other liabilities (describe >) | | | | |
| | | - | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | | 0. | |
| | | Foundations that follow SFAS 117, check here | | | | |
| Š | | and complete lines 24 through 26 and lines 30 and 31 | | | | |
| ĕ | 24 | Unrestricted | | | | |
| ala | 25 | Temporarily restricted | | | | |
| Net Assets or Fund Balances | 26 | Permanently restricted | | | | |
| Ę | | Foundations that do not follow SFAS 117, check here | | | | |
| <u></u> | | and complete lines 27 through 31 | _ | | <u> </u> | |
| ets | 27 | Capital stock, trust principal, or current funds | 0. | | <u>0.</u> 0. | |
| SS | 28 | Paid-in or capital surplus, or land, bidg., and equipment fund | | · · · · · · · · · · · · · · · · · · · | | |
| et / | 29 | Retained earnings, accumulated income, endowment, or other funds | 18,798,157. | 14,259,10 | | |
| Z | 30 | Total net assets or fund balances | 18,798,157. | 14,259,10 | / • | |
| | 31 | Total liabilities and net assets/fund balances | 18,798,157. | 14,259,10 | 7. | |
| P | art | | <u>-</u> | | | |
| _ | | | | | | |
| | | net assets or fund balances at beginning of year - Part II, column (a), line (| 30 | | 10.76 | 00 157 |
| | | t agree with end-of-year figure reported on prior year's return) amount from Part I, line 27a | | } | | 98,157. |
| | | | | } | | 15,846. |
| - | | increases not included in line 2 (itemize) ines 1, 2, and 3 | · · · · · · · · · · · · · · · · · · · | | 3 15 25 | $\frac{0.}{52,311.}$ |
| | | rases not included in line 2 (itemize) | SEE STA | TEMENT 8 | | |
| | | net assets or fund balances at end of year (line 4 minus line 5) - Part II. co | | TEMENT O | | 3,204. |

823511 01-02-09

1.

FOUNDATION

| Part IV Capital Gains and | Losses for Tax on In | vestment | Income | | | | | , ,,,,, | |
|--|--|-------------------|--------------------------------------|----------|----------------------------|--------------|-------------|-------------------------------|------------------------------------|
| | ne kınd(s) of property sold (e.g. use; or common stock, 200 shs | | | P | How ac - Purc - Don: | | | acquired lay, yr.) | (d) Date sold (mo., day, yr.) |
| 1a , | | | | | | | | | |
| b SEE ATTACHED ST | TATEMENT | | | ļ | | | | | |
| <u>C</u> | | | | <u> </u> | | | | | |
| d | - | | | | | - | | | |
| <u>e</u> | (f) Depresention allowed | (a) Cas | ut or other been | ١ | | | /b) C | on or (loss | \ |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other basis xpense of sale | | | | | ain or (loss s (f) minus | |
| a | | | | | | | | | |
| b | | | | | | | | | |
| С | | | | | | | | | |
| d | İ | | | | | | | | |
| e 23,775,400. | | | <u>7,693,93</u> | 1. | | | | | <u>:3,918,531.</u> |
| Complete only for assets showing gai | · · · · · · · · · · · · · · · · · · · | | | _ | | | | Col. (h) gain not less tha | |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | cess of col. (ı) col. (ı), ıf any | | | COI | | (from col. (| |
| a | | | | | | | | | |
| <u>b</u> | | | | | | | | | |
| <u>C</u> | | | | | | | | | • |
| d e | | | | | - | | | | 3,918,531. |
| | C If goin also anter | un Dort I. lino | | 7 | | | | | .5,510,551. |
| 2 Capital gain net income or (net capital | oss) { If gain, also enter oss) | - in Part I, line | 7 |) | 2 | | | < | 3,918,531. |
| 3 Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colur | | ıd (6): | | J | | | | | |
| If (loss), enter -0- in Part I, line 8 | r Section 4940(e) for | Doduood | Tay on Not | | 3 | ont Inc | <u> </u> | N/A | <u> </u> |
| | | | | | | nent inc | onie | | |
| (For optional use by domestic private foun | dations subject to the section 4 | 4940(a) tax on | net investment in | COME | e.) | | | | |
| If section 4940(d)(2) applies, leave this pa | rt blank. | | | | | | | | |
| Was the foundation liable for the section 4 | | | • | rıod? | | | | | Yes X No |
| If "Yes," the foundation does not qualify un 1 Enter the appropriate amount in each of | * * * | | | es | | | | | |
| (a) | (b) | detions before | making any chan | (c) | | | | | (d) |
| Base periód years Calendar year (or tax year beginning in) | A durated avalishing a dua | tributions | Net value of no | | | use assets | ŀ | Distri (col. (b) div | bùtión ratio vided by col. (c)) |
| 2007 | | 4,028. | | 14 | ,56 | 0,618 | | <u> </u> | .048352 |
| 2006 | · · | 7,307. | | | | 1,447 | | | .048883 |
| 2005 | 94 | 4,498. | | | | 0,995 | | | .066744 |
| 2004 | | 4,288. | | | | <u>7,103</u> | _ | | .062227 |
| 2003 | 68 | <u>4,245.</u> | | 11 | <u>,58</u> | <u>0,871</u> | • | T | .059084 |
| O Tetal of has 1 column (d) | | | | | | | | | 205200 |
| 2 Total of line 1, column (d)3 Average distribution ratio for the 5-yea | r base period - duude the total i | on line 2 by E | or by the number | of vo | ara | | 2 | | .285290 |
| the foundation has been in existence if | · | on line 2 by 5, | or by the number | UI ye | iai S | | 3 | | .057058 |
| the logituation has been in existence in | icos tilan o yours | | | | | | | | •037030 |
| 4 Enter the net value of noncharitable-us | e assets for 2008 from Part X, | line 5 | | | | | 4 | 1 | 6,258,353. |
| 5 Multiply line 4 by line 3 | | | | | | | 5 | | 927,669. |
| 5 Multiply line 4 by line 5 | | | | | | | -3 | | <u> </u> |
| 6 Enter 1% of net investment income (19 | 6 of Part I, line 27b) | | | | | | 6 | | 2,328. |
| 7 Add lines 5 and 6 | | | | | | | 7 | | 929,997. |
| | | | | | | | , | | |
| 8 Enter qualifying distributions from Part | | 46 004 | data that ====t | | 0/ + | | 8 | | 737,964. |
| If line 8 is equal to or greater than line See the Part VI instructions. | r, check the box in Paπ VI, line | io, and comp | nete that part usin | ıga 1 | % tax | rate. | | | |

JAMES & ABIGAIL CAMPBELL FAMILY

| | n 990-PF (2008) FOUNDATION | <u>99-</u> | <u>-0203</u> | 078 | | Page 4 |
|----|---|------------|----------------|----------|------------|--|
| Pa | art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4 | 948 | <u>- see i</u> | nstru | ctio | ns) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | | | | | |
| | Date of ruling letter: (attach copy of ruling letter if necessary-see instructions) | | | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1% | 1 | | | 4,6 | 56. |
| | of Part I; line 27b | | | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | | | 0. |
| 3 | Add lines 1 and 2 | 3 | | | 4,6 | 56. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5_ | | | 4,6 | 56. |
| 6 | Credits/Payments: | İ | | | | |
| a | 2008 estimated tax payments and 2007 overpayment credited to 2008 6a 15,957. | | | | | |
| b | Exempt foreign organizations - tax withheld at source 6b | ĺ | | | | |
| | Tax paid with application for extension of time to file (Form 8868) 6c 6,000. | l | | | | |
| d | Backup withholding erroneously withheld 6d | l | | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | | 2 | <u>1,9</u> | <u>57.</u> |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | ļ <u>.</u> | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | | |
| 10 | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | <u> </u> | <u>7,3</u> | 01. |
| | Enter the amount of line 10 to be: Credited to 2009 estimated tax | _11 | <u> </u> | | | 0. |
| | rt VII-A Statements Regarding Activities | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene | ın | | | Yes | |
| | any political campaign? | | | 1a | | X |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | | | 1b | | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published | d or | | | | |
| | distributed by the foundation in connection with the activities | | | | | l |
| | Did the foundation file Form 1120-POL for this year? | | | 1c | | X |
| a | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | | | | |
| _ | (1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0. | | | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | | |
| 0 | managers. > \$ 0. | | | | | 7.7 |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. | | | 2 | | X |
| 2 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or | | | | | |
| J | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | и | | , | | х |
| 42 | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 3 4a | | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | IV. | I/A | 4a 4b | | |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 11 | ,, 4 | 5 | | х |
| Ī | If "Yes," attach the statement required by General Instruction T | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | i l | | |
| | By language in the governing instrument, or | | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state | law | | | | |
| | remain in the governing instrument? | | | 6 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | | | 7 | X | |
| | If "Yes," complete Part II, col. (c), and Part XV. | | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | | |
| | HI | | | | | 1 |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | | | 1 |
| | of each state as required by General Instruction G? If "No," attach explanation | | | 8b | Х | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale | ndar | | | | |
| | year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | 9 | | Х |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | | 10 | | X |

Form **990-PF** (2008)

AMIENDED RETURN

JAMES & ABIGAIL CAMPBELL FAMILY Form 990-PF (2008) FOUNDATION 99-0203078 Page 5 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) X 11 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► HTTP://WWW.CAMPBELLFAMILYFOUNDATION.ORG/ 14 The books are in care of ► KEOLA LLOYD Telephone no. > 808-674-6674Located at ▶ 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 ZIP+4 ▶96707 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 N/A Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No 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): Yes X No (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) Yes X No a disqualified person? Yes X No (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? X Yes No (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)? Yes X No (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 Yes X No 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 page 20 of the instructions)? X 1b 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 2008? Х 1c 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 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2008? Yes X No If "Yes," list the years 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.) N/A 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No b If "Yes," did it have excess business holdings in 2008 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 2008.) N/A 3Ь 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? X 4a b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

AMENDED RETURN

had not been removed from jeopardy before the first day of the tax year beginning in 2008?

Form 990-PF (2008)

| ', JAMES & ABIGAIL CAMPBELL | FAMILY | | | |
|--|---|-----------------------------|--|-------------------------------|
| orm 990-PF (2008) FOUNDATION | | | <u>99-02030</u> | 78 Page 6 |
| Part VII-B Statements Regarding Activities for Which | Form 4720 May Be F | Required (continu | ued) | |
| 5a During the year did the foundation pay or incur any amount to: | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | n 4945(e))? | └── Ye | s X No | |
| (2) Influence the outcome of any specific public election (see section 4955); of | or to carry on, directly or indire | | | |
| any voter registration drive? | | | s 🔀 No | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | └── Ye | s X No | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | n described in section | | | |
| 509(a)(1), (2), or (3), or section 4940(d)(2)? | | Ye | s X No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or f | for | | |
| the prevention of cruelty to children or animals? | | ☐ Ye | s 🗶 No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un | der the exceptions described i | in Regulations | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | ictions)? | | N/A | 5b |
| Organizations relying on a current notice regarding disaster assistance check it | nere | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f | | ined | | 1 1 |
| expenditure responsibility for the grant? | | √I/A | s D No | |
| If "Yes," attach the statement required by Regulations section 53 494 | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | | | | |
| a personal benefit contract? | p=, p | Ye | s X No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a | personal benefit contract? | | I | 6b X |
| If you answered "Yes" to 6b. also file Form 8870 | | | <u> </u> | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax | shelter transaction? | □ Va | s X No | |
| b If yes, did the foundation receive any proceeds or have any net income attribut | | | | 7b |
| Information About Officers Directors Truct | | nagers. Highly | | |
| Part VIII Paid Employees, and Contractors | 000, 1 0411441011 1110 | | | |
| 1 List all officers, directors, trustees, foundation managers and their | compensation. | | • | |
| | (b) Title, and average hours per week devoted | (c) Compensation | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | and deferred compensation | account, other allowances |
| | to position | enter-0-y | compensation | unowanioo |
| | | | | |
| SEE STATEMENT 13 | | 0. | 0. | 0. |
| SEE STATEMENT 13 | | · · | 0. | <u> </u> |
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| O O O O O O O O O O O O O O O O O O O | luded on line 4) 16 name | UNIONE II | | <u> </u> |
| 2 Compensation of five highest-paid employees (other than those in | | enter "NONE." | (d) Contributions to | (a) Eyponen |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (c) Compensation | employee benefit plans and deferred | (e) Expense account, other |
| | devoted to position | | compensation | allowances |
| NONE | | | | |
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Total number of other employees paid over \$50,000

Form **990-PF** (2008)

JAMES & ABIGAIL CAMPBELL FAMILY

| Form 990-PF (2008) FOUNDATION | 99-020 | 3078 Page 7 |
|--|---|------------------|
| Part VIII Information About Officers, Directors, Trustees, Formation Paid Employees, and Contractors (continued) | oundation Managers, Highly | |
| 3 Five highest-paid independent contractors for professional services. If non | e, enter "NONE." | |
| (à) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| CAMBRIDGE ASSOCIATES LLC | | |
| 100 SUMMER STREET, BOSTON, MA 02110-2112 | CONSULTING | 79,957. |
| | | |
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| | | |
| Total number of others receiving over \$50,000 for professional services | 1 | ▶ 1 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevenumber of organizations and other beneficiaries served, conferences convened, research page. | ant statistical information such as the pers produced, etc. | Expenses |
| 1 N/A | | - |
| | | |
| | | |
| 2 | | |
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| | | |
| 3 | | |
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| | | |
| 4 | | |
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| Part IX-B Summary of Program-Related Investments | • | |
| Describe the two largest program-related investments made by the foundation during the tax | year on lines 1 and 2. | Amount |
| 1 N/A | | |
| | | |
| | | |
| 2 | | |
| - Alexandra - Alex | | |
| All other program-related investments. See instructions | | |
| All other program-related investments. See instructions. | | |

Form **990-PF** (2008)

Total. Add lines 1 through 3

| 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities b Average of monthly cans bibalances b Average of monthly cans bibalances c Fair market value of all other assets to c Fair market value of all other assets to to to read (add lines 1a, b, and c) Reduction claimed for bibockage or other factors reported on lines 1a and 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 3 16,505,942. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 2 4247, 589. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 16,258,353. Minimum investment return. Enter 5% of line 5 Part XII oreign organizations check here and do not complete this part.) 1 Minimum investment return from Part X, line 6 2 1 A 566. b Income tax for 2008. (This does not include the tax from Part V.). c Add lines 2 and 2b 3 B Obstitubutable amount before adjustments. Subtract line 2 from line 1 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 5 B 0 Beduction from distributable amount (see instructions) 7 Distributable amount streated as qualifying distributions 4 Qualifying Distributions (see instructions) 7 Distributable amount septiments. Subtract line 2 from line 1 4 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, girls, etc total from Part IX, etc. Program-related investments - total from Part IX, etc. Program-related investments - total from Part IX, etc. 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, girls, etc total from Part IX, etc. Program-related investments - total from Part IX. etc. 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 3 Amo | P | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ındatıons | . see instructions) |
|--|---------|--|---|---|
| A verage monthly far market value of securities 1a 16,350, 262. b. Average of monthly cash balances 1b 155, 680. c. Far market value of all other assets 1c d. Total (add lines 1a, b, and c) 1d 16,505, 942. e. Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 2 5. d. Subtract line 2 from line 1d 3 16,505, 942. d. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 247,589. d. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 247,589. d. Watule of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 812,918. e. Reduction in the subtract line 2 from line 1 6 812,918. e. Reduction in the subtract line 2 from line 3 (section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 1 812,918. e. Reduction for line 1 812,918. e. Reduction for 2008. (This does not include the tax from Part V, line 5 2a 4,656. e. Lancome tax for 2008. (This does not include the tax from Part V, line 5 2a 4,656. e. Lancome tax for 2008. (This does not include the tax from Part V, line 5 2a 4,656. e. Lancome tax for 2008. (This does not include the tax from Part V, line 5 2a 4,656. e. Lancome tax for 2008. (This does not include the tax from Part V, line 5 2a 4,656. e. Lancome tax for 2008. (This does not include the tax from Part V, line 6 6 0. e. Add lines 2 and 2b 2c 4,656. e. Lancome tax for 2008. (This does not include the tax from Part V, line 6 6 0. e. Add lines 2 and 2b 2c 4,656. e. Lancome tax for 2008. (This does not include the tax from Part V, line 6 6 0. e. Cart XII Qualifying Distributions (see instructions) e. Expenses, contributions, gifts, etctotal from Part I, column (d), line 26 1a | <u></u> | | | |
| b Average of monthly cash balances c Fair market value of all other assets d Total (add lines 1a, b, and c) c Reduction claimed for blockage or other factors reported on lines 1a and 10 (attach detailed explanation) 10 (attach detailed explanation) 10 (attach detailed explanation) 11 (attach detailed explanation) 12 Acquisition indebtedness applicable to line 1 assets 13 Subtract line 2 from line 1d 14 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 15 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 15 Log 2, 3, 3, 3, 4, 2, 4, 2, 4, 5, 3, 5, 6, 8, 12, 9, 18 Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain froigh or grant program or grantations check here and do not complete this part.) 11 Minimum investment return from Part X, line 6 2a Tax on investment income for 2008 from Part VI, line 5 2b 1 | · | | 1a | 16.350.262. |
| e Far market value of all other assets d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 3 16,505,942. 3 16,505,942. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 247,589. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 16,258,353. 6 Minimum investment return. Enter 5% of line 5 7 Interpretation of the foreign organizations check here | | • | | |
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| e Reduction claimed for blockage or other factors reported on lines 1a and 1 (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 La 247,589, 6 Net value of noncharitable activities. Enter 1 1/2% of line 3. Enter here and on Part V, line 4 5 16,258,353. 8 Minimum investment return. Enter 5% of line 5 6 812,918. 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.) 1 Minimum investment return from Part X, line 6 2a Tax on investment income for 2008 from Part VI, line 5 b Income tax for 2008. (This does not include the tax from Part VI.) 2 Add lines 2a and 2b 3 Subtributable amount before adjustments. Subtract line 2c from line 1 3 808,262. 4 Recoveries of amounts treated as qualifying distributions 4 9 0. 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 9. Oistributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 808, 262. Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc total from Part IV. B 5 Program-related investments - total from Part IV. B 6 Program-related investments - total from Part IV. B 7 Program-related investments - total from Part IV. B 8 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 9 4 737, 964. 9 Cash distribution test (attach the required schedule) 9 4 Qualifying distributions. Subtract line 5 from line 4 9 6 Cash distribution test (attach the required schedule) 9 6 Cash distribution test (attach the required schedule) 9 7 7 7 7 7 9 6 4. 9 7 7 7 7 9 6 4. 9 7 7 7 7 9 6 4. 9 7 7 7 7 9 6 4. 9 7 7 7 7 9 6 4. 9 7 7 7 7 9 6 4 | - | | | 16 505 942 |
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| Note | 5 | | | |
| Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here in and do not complete this part.) Minimum investment return from Part X, line 6 | 6 | · | - | 212 Q1Q |
| foreign organizations check here and do not complete this part.) 1 Minimum investment return from Part X, line 6 2a Tax on investment return from Part X, line 6 2b | | Distributable Amount | , , , , , , , , , , , , , , , , , , , | 012,910. |
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| Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) b Cash distribution test (attach the required schedule) 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 | | | | |
| Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 3 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) b Cash distribution test (attach the required schedule) 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 | | · · · · · · · · · · · · · · · · · · · | | |
| Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) b Cash distribution test (attach the required schedule) 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 6 737, 964. | | | 7 | 808,262. |
| a Expenses, contributions, gifts, etc total from Part I, column (d), line 26 b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) b Cash distribution test (attach the required schedule) 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 1a 737, 964. 1b 0. 2 3a 4 737, 964. | Р | art XII Qualifying Distributions (see instructions) | | |
| b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) b Cash distribution test (attach the required schedule) 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 1b 0. 737,964. | 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | , |
| Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 | a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 737,964. |
| Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) b Cash distribution test (attach the required schedule) 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 5 O O O O O O O O O O O O O O O O O O | b | Program-related investments - total from Part IX-B | 1b | 0. |
| a Suitability test (prior IRS approval required) b Cash distribution test (attach the required schedule) 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 3a 737,964. | 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| b Cash distribution test (attach the required schedule) 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 3b 737,964. | 3 | Amounts set aside for specific charitable projects that satisfy the: | | |
| 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 6 Adjusted qualifying distributions. Subtract line 5 from line 4 6 737, 964. | a | Suitability test (prior IRS approval required) | 3a | |
| Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 5 737,964. | b | Cash distribution test (attach the required schedule) | 3b | |
| Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 5 737,964. | 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 737,964. |
| 6 Adjusted qualifying distributions. Subtract line 5 from line 4 | 5 | | | |
| 6 Adjusted qualifying distributions. Subtract line 5 from line 4 | | income. Enter 1% of Part I, line 27b | 5 | 0. |
| | 6 | | | 737,964. |
| | | | qualifies fo | |

Form **990-PF** (2008)

Page 9

Part XIII Undistributed Income (see instructions)

| • | (a) Corpus | (b) Years prior to 2007 | (c) 2007 | (d) 2008 |
|---|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2008 from Part XI, | | , | | |
| line 7 | | | | 808,262. |
| 2 Undistributed income, if any, as of the end of 2007 | | | _ | |
| a Enter amount for 2007 only | | | 0. | |
| b Total for prior years: | | | | |
| | | 0. | | |
| 3 Excess distributions carryover, if any, to 2008: | | | | |
| a From 2003 120, 406. | | | | |
| b From 2004 180,838. c From 2005 250,113. | | | | |
| c From 2005 250,113. d From 2006 269,811. | | | | |
| e From 2007 79,059. | | | | |
| f Total of lines 3a through e | 900,227. | | | |
| 4 Qualifying distributions for 2008 from | 700,227. | | | |
| Part XII, line 4: ▶\$ 737, 964. | | | | |
| a Applied to 2007, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | · | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2008 distributable amount | | | | 737,964. |
| e Remaining amount distributed out of corpus | 0. | | | |
| Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a)) | 70,298. | | | 70,298. |
| 6 Enter the net total of each column as indicated below: | | | | |
| Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 829,929. | | | |
| b Prior years' undistributed income. Subtract | 023,323. | | | |
| line 4b from line 2b | | 0. | | |
| c 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 | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | <u> </u> | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2007. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2008. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2009 | | | | 0. |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2003 | | | | |
| not applied on line 5 or line 7 | 50,108. | | | |
| 9 Excess distributions carryover to 2009. | 550 004 | | | |
| Subtract lines 7 and 8 from line 6a | 779,821. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2004 180,838. | | İ | | |
| b Excess from 2005 250, 113. | | | | |
| c Excess from 2006 269,811. | | | | |
| d Excess from 2007 e Excess from 2008 | | | | |
| 6 FY0299 HOHI 5000 | | | | |

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

FOUNDATION

99-0203078 Page 11

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year SEE STATEMENT 16 Total ▶ 3a 651,750. **b** Approved for future payment GOODWILL INDUSTRIES, 2610 OTHER BUILDING KILIHAU STREET, HONOLULU, PUBLIC GOODWILL WORKS HI 96819 NONE CAMPAIGN 50,000. CHARITY THE SALVATION ARMY, 2950 OTHER CAPITAL MANOA ROAD, HONOLULU, HI PUBLIC CAMPAIGN 96822 CHARITY KAPOLEI KROC COMMUNITY NONE CENTER 100,000. MALAMA LEARNING CENTER, OTHER CAPITAL P.O. BOX 75467, KAPOLEI, PUBLIC CAMPAIGN HI 96707 NONE 150,000. CHARITY 300,000. **▶** 3b Total 823611 01-02-09

Unrelated business income

Enter gross amounts unless otherwise indicated.

Excluded by section 512, 513, or 514

(e)

Part XVI-A **Analysis of Income-Producing Activities**

| Program service revenue: | Business code | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
|--|-----------------|------------------------|-------------------------------|----------------------|---------------------------------------|
| b | | | | | |
| d | | | + | | |
| е | | | | | |
| f | _ | | | | |
| g Fees and contracts from government agencies Membership dues and assessments | | | + + | | <u> </u> |
| Interest on savings and temporary cash | | | + + | | |
| investments | | | 14 | 184 549. | |
| Dividends and interest from securities | | | 14 | 184,549. 268,573. | |
| Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | _ |
| Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| Other investment income | | | 14 | 1,586. | |
| Gain or (loss) from sales of assets other | | | | | |
| than inventory | | . | 18 | <3,918,531. | > |
| Net income or (loss) from special events | | | + | | |
| Gross profit or (loss) from sales of inventory Other revenue: | | | + + | | |
| • | | | | | |
| b | | | | | |
| С | l L | | | | |
| d | 3 | | i | | |
| e | | | | | · · · · · · · · · · · · · · · · · · · |
| A 1 | | 0 | | <3,463,823. | > |
| Subtotal. Add columns (b), (d), and (e) | | | | 13 | <3,463,82 |
| Total. Add line 12, columns (b), (d), and (e) | 3) | | | | <3,403,02 |
| Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations eart XVI-B Relationship of Activitie ine No. Explain below how each activity for which | es to the Accom | olumn (e) of Part XVI- | | : Purposes | |
| Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations eart XVI-B Relationship of Activitie | es to the Accom | olumn (e) of Part XVI- | | : Purposes | |
| Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | es to the Accom | olumn (e) of Part XVI- | | : Purposes | |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | es to the Accom | olumn (e) of Part XVI- | | : Purposes | |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | es to the Accom | olumn (e) of Part XVI- | | : Purposes | |
| Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activitie ne No. Explain below how each activity for which | es to the Accom | olumn (e) of Part XVI- | | : Purposes | |
| Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations eart XVI-B Relationship of Activitie ine No. Explain below how each activity for which | es to the Accom | olumn (e) of Part XVI- | | : Purposes | |

| _ | | | NOITAC | | | 99-020 | 3078 | Pa | ige 13 |
|-----------|--------------------------------|--|-----------------|---|------------------------------------|--|----------------|---------|---------------|
| F | Part X | | | Transfers To | and Transactions a | nd Relationships With Nonch | aritable | • | |
| | | Exempt Organ | nizations | | | | | | |
| 1 | Did t | he organization directly or indi | rectly engage | e in any of the following | ng with any other organization | n described in section 501(c) of | | Yes | No |
| | the C | ode (other than section 501(c | :)(3) organiza | tions) or in section 5 | 27, relating to political organi | zations? | | | |
| | a Trans | sfers from the reporting found | lation to a no | ncharitable exempt or | ganization of: | | 1 | | İ |
| | (1) | Cash | | | | | 1a(1) | | X |
| | (2) | Other assets | | | | | 1a(2) | | Х |
| | b Other | transactions: | | | | | | | |
| | (1) | Sales of assets to a noncharita | able exempt o | rganization | | | 15(1) | | X |
| | | ourchases of assets from a no | | | | | 1b(2) | | Х |
| | | Rental of facilities, equipment, | | · - | | | 1b(3) | | X |
| | (4) | Reimbursement arrangements | 3 | | | | 1b(4) | | X |
| | | oans or loan guarantees | | | | | 1b(5) | | X |
| | | Performance of services or me | embership or | fundraising solicitation | ons | | 1b(6) | | X |
| | | ng of facilities, equipment, ma | | - | | | 1c | | X |
| | | | | | | rays show the fair market value of the goods | | ote | |
| | | | | | | e in any transaction or sharing arrangement, | | , iii | |
| | | nn (d) the value of the goods, | | | | o in any transaction of sharing arrangement, | 3110W 111 | | |
| (a |) Line no | (b) Amount involved | | | e exempt organization | (d) Description of transfers, transactions, an | d shawaa ar | | |
| <u>,-</u> | | (0) / | (0) | N/A | o oxompt organization | (u) Description of translets, transactions, and | a snaring an | angeme | |
| _ | | | | N/A | · | | | | |
| | • | ~ | | | | | | | |
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| _ | | | | | ******* | | | | |
| _ | | | | <u> </u> | ·-· | | | | |
| | | | | | | | | | |
| 2 | | foundation directly or indirec | | | | ations described | | | _ |
| | ın sed | ction 501(c) of the Code (othe | r than sectior | n 501(c)(3)) or in sect | tion 527? | | Yes | X | No |
| _ | <u>b If Ye</u> | s," complete the following sch | | | | | | | |
| _ | | (a) Name of org | janization | | (b) Type of organization | (c) Description of relation | ship | | |
| _ | | N/A | | | | | | | |
| _ | | | | ··· | | | | | |
| _ | | | | | | | | | |
| | | | | | | | | | |
| | | · · · | | | | | | | |
| | Under p | enalties of perjury, I declare that I he polete. Declaration of preparer (one | nave examined t | his return, including acco | empanying schedules and stateme | ents, and to the best of my knowledge and belief, it i | s true, corre | ct, | |
| | 4,000 | | 1.7 | or nadolaly) is based on | an unconnation of phich presares (| | | | |
| d) | ×× | 8. Vary 1 | <u>M</u> | | 11/12/10 | ASST SEREAM | | | |
| 횰 | Sı | gnature of officer or trustee | <u> </u> | | Date 4 | Title | | | |
| Sign Here | w. | Preparer's | VL | ſ | n of 7 Da | celf- | rer's identify | Ing num | ber |
| Sig | 후 | signature STANE | <u> </u> | T LON | (Y I | I/04/10 employed ► X | | | |
| | Paid Preparer's Use Only | Firm's name (or yours KOBA | | | | SUDA CPAS EIN ► | | | |
| | L ar S | rf self-employed), 745 | FORT S | 57 STE 191 | .5 | | | | |
| | | address, and ZIP code HONO | LULU, | HI 96813 | | Phone no. 808- | 521- | 396 | 2 |
| _ | | | | () | | | orm 990 | | |

AMENDED RETURN

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

2008

Employer identification number

JAMES & ABIGAIL CAMPBELL FAMILY 99-0203078 FOUNDATION Organization type (check one). Filers of: Section: 7 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 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 organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. **Special Rules** 🔟 For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

AMENDED RETURN

certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Caution. Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to

Name of organization

JAMES & ABIGAIL CAMPBELL FAMILY

FOUNDATION

Employer identification number

| <u>FOUNDA</u> | TION | 99-0203078 |
|---------------|---------------------------------|------------|
| | • | |
| Part I | Contributors (see instructions) | |

| Part I | Contributors (see instructions) | | |
|-------------|--|-----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 1 | GEORGINA J. ALLRED TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ <u>123,702.</u> | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 2 | SUZANNE M. AVINA REVOCABLE LIVING TRUST DTD 3-2-2000 C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 3 | JAMES KIMO CAMPBELL REVOCABLE TRUST DTD 1-8-2007 C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ <u>98,546.</u> | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 4 | WENDY B. CRABB REVOCABLE LIVING TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ 40,987. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 5 | FLANDERS-STAUB 2007 IRREVOCABLE TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$38,901. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 6 | CYNTHIA C. FOSTER REVOCABLE LIVING TRUST AGREEMENT C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$37,360. | Person X Payroll |
| 823452 12-1 | 8-08 | Schedule B (Form | 990, 990-EZ, or 990-PF) (2008) |

Name of organization

JAMES & ABIGAIL CAMPBELL FAMILY

FOUNDATION

Employer identification number

99-0203078

| Parti | , Contributors (see instructions) | | |
|------------|---|-----------------------------|--|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 7 | JAMES W. GROWNEY TRUST DTD 12-14-90 C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$30,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 8 | QUENTIN K. KAWANANAKOA TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$7,863. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 9 | REGINA KAWANANAKOA C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ 9,548. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| _ 10 | KING 2008 IRREVOCABLE TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ <u>14,829.</u> | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 11 | MURIEL C. TANNER LIGHTER TRUST DTD 9-26-95 C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ <u>41,727.</u> | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 12 | KAPIOLANI K. MARIGNOLI TRUST AGREEMENT DTD 9-28-89 C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ 101,095. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |

JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION

Employer identification number

99-0203078

| Parti | Contributors (see instructions) | | |
|-------------|--|--------------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 13 | RUBY L MONTGOMERY C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ <u>19,054.</u> | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 14 | ALICE KUAIHELANI ROBINSON C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$10,000. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 15 | JAMES C. SHINGLE REVOCBALE LIVING TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ 79,079. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 16 | CYNTHIA K. SORENSON REVOCBALE LIVING TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ <u>22,465.</u> | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| <u>17</u> | LOUISE S STEVENSON C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$ <u>49,424.</u> | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 18 | JONATHAN R. SUTHERLAND AND MARY C. SUTHERLAND REV. LIV. TRUST DTD. 8-6-07 C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 | \$ 21,342. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| 823452 12-1 | 8-08 B. S. S. S. S. S. S. S. S. S. S. S. S. S. | Schedule B (Form | 990, 990-EZ, or 990-PF) (2008) |

| Schedule | ٥ | Œorm. | 000 | 990-E7 | or | aan-PF | (2008 | ١ |
|----------|---|-------|------|---------|----|---------|-------|---|
| ocueanie | В | (FOrm | aau, | 99U-EZ, | Uľ | BBO-PF) | (2000 |) |

Name of organization

JAMES & ABIGAIL CAMPBELL FAMILY

99-0203078

Employer identification number

FOUNDATION____

| Part I | Contributors (see instructions) | | |
|------------|---|-----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 19 | RONALD L HOOLULU OLSON C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$\$0,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 20 | BEATRICE C MCKINNEY C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$5,000. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 21 | DORNA M DEL ZOTTO C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707 | \$5,000. | Person X Payroll |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II of there is a noncash contribution.) |

| FOUNDATION | | 99-020 | <u>3078 </u> | PAGE : | <u>L_OF 1</u> |
|--|--|---------------------------------------|---|----------------------|---------------------------|
| Part IV Capital Gains and Lo | sses for Tax on Investment Income | | | | |
| (a) List and | describe the kind(s) of property so | d, e.g., real estate, | (b) How acquire | (c) Date acquired | (d) Date sold |
| 2-story br | rick warehouse; or common stock, 2 | 00 shs. MLC Co. | D - Donation | ` (mo., day, yr.) | (mo., day, yr.) |
| 1a SMITH BARNEY 5 | 12-08828-15 | | P | VARIOUS | VARIOUS |
| b SMITH BARNEY 5 | | | P | VARIOUS | VARIOUS |
| c SMITH BARNEY 5 | | | P | VARIOUS | VARIOUS |
| d SMITH BARNEY 5 | | | P | VARIOUS | |
| e SMITH BARNEY 5 | | | P | VARIOUS | VARIOUS |
| SMITH BARNEY 5 | | | P | VARIOUS | VARIOUS |
| g SMITH BARNEY 5 | | | P | VARIOUS | |
| h SMITH BARNEY 5 | | | P | | |
| CITTOUR DIRECTOR | | | | VARIOUS | |
| SMITH BARNEY 5 | | | P | VARIOUS | |
| k FMA HIGH YIELD | | · · · · · · · · · · · · · · · · · · · | P | VARIOUS | |
| | CAPP APP | | P | VARIOUS | VARIOUS |
| <u> </u> | | | | | |
| <u>m</u> | | | | - | |
| n | ··· | | | | |
| 0 | | | | <u>. J</u> | |
| (e) Gross sales price | (f) Depreciation allowed | (g) Cost or other basis | | h) Gain or (loss) | |
| | (or allowable) | plus expense of sale | (e) | plus (f) minus (g) | |
| 8,245,163. | | 9,494,330. | | <1, | <u>,249,167.</u> |
| 433,248. | | 473,386. | | | <40,138. |
| 675,408. | | 676,286. | | | <878. |
| 275,000. | | 275,000. | | | 0. |
| 5,555,675. | | 6,650,289. | | <1 | 094,614. |
| 1,006,703. | | 1,152,969. | | | 146,266. |
| 2,883,352. | | 3,489,138. | | • | <605,786. |
| 917,691. | | 910,117. | | | 7,574. |
| 613,387. | | 809,523. | | | 196,136. |
| 1,264,431. | | 1,923,076. | | | <658,645. |
| 1,905,342. | | 1,839,817. | · · · · · · · · · · · · · · · · · · · | | 65,525. |
| | | | | | |
| n | | | - | <u> </u> | |
| 1 | | | | | |
|) | | | | | |
| Complete only for assets showing | g gain in column (h) and owned by | the foundation on 12/31/69 | (I) Lo | osses (from col. (h) |) |
| | (j) Adjusted basis | (k) Excess of col. (i) | Gains (excess | of col. (h) gain ove | r col. (k), |
| (i) F.M.V. as of 12/31/69 | as of 12/31/69 | `over col. (j), if any | but | not less than "-0-") | |
| | | | | <1 | 249,167. |
| | | | | | <40,138. |
| | | " " | · | | <878. |
| | | | | | 0. |
| | | | | | 094,614. |
| | | | | | $\frac{094,014}{146,266}$ |
| | | | | | |
| | | | | | .605,786 7,574 |
| | | | · - | | |
| | | | | | (196,136. |
| | | | | | <u> 658,645.</u> |
| | | | - | | 65,525. |
| | | | | | - |
| | | | | | _ |
| | | | | | |
| | | | | | |
| Capital gain not income as fact as | pital loss) { If gain, also enter if (loss), enter if (loss), enter if (loss). | in Part I, line 7 | | • | 010 504 |
| Capital gain net income or (net ca | If (loss), enter "-0 | -" in Part I, line 7 J | 2 | <3, | 918,531. |
| | s) as defined in sections 1222(5) an | d (6): | | | |
| If gain, also enter in Part I, line 8, | | † | | 27.15 | |
| If (loss), enter "-0-" in Part I, line 8 | | | 3 | N/A | |
| | | | | | |

| FORM 990-PF | GAIN OR | (LOSS) | FROM SAL | E OF | ASSETS | STA | ATEMENT 1 |
|-----------------------------|----------------|------------------------|----------------------|------|--------------------|------------------|------------------|
| (A) DESCRIPTION OF PROPE | RTY | | | 1 | MANNER ACQUIRED | DATE ACQUIRED | DATE SOLD |
| SMITH BARNEY 512-088 | 28-15 | | | PU | JRCHASED | VARIOUS | VARIOUS |
| (B) GROSS SALES PRICE | | C) JE AT OF ACQ. | (D) EXPENS SAL | E OF | (E) DEPRE | | (F) |
| 8,245,16 | 3. 9,4 | 94,330 | • | 0 | • | 0. | <1,249,167. |
| (A) DESCRIPTION OF PROPE | RTY | | | 2 | MANNER ACQUIRED | DATE ACQUIRED | DATE SOLD |
| SMITH BARNEY 512-088 | 28-15 | | | PU | JRCHASED | VARIOUS | VARIOUS |
| (B) GROSS SALES PRICE | | C) JE AT DF ACQ. | (D) EXPENS SAL | E OF | (E) DEPRE | | (F) N OR LOSS |
| 433,24 | 8. 4 | 73,386 | • | 0 | • | 0. | <40,138. |
| (A) DESCRIPTION OF PROPE | RTY | | | 1 | MANNER ACQUIRED | DATE ACQUIRED | DATE SOLD |
| SMITH BARNEY 512-403 | 67- 1 5 | | | P | JRCHASED | VARIOUS | VARIOUS |
| (B) GROSS SALES PRICE | | C) JE AT OF ACQ. | (D) EXPENS SAL | E OF | (E) DEPRE | | (F) N OR LOSS |
| 675,40 | 8. 6 | 76,286 | • | 0 | • | 0. | <878. |

| DESCRI | (A) PTION OF PROPERTY | | | | MANNER CQUIRED | DATE ACQUIRED | DATE SOLD |
|---------|-----------------------------|---------------------------------|------------------------|-----|-------------------|------------------|------------------|
| SMITH | BARNEY 512-40367- | 15 | | PUI | RCHASED | VARIOUS | VARIOUS |
| | (B) GROSS | (C) VALUE AT | (D) EXPENSE | OF | (E) | | (F) |
| | SALES PRICE | TIME OF ACQ. | SALE | | DEPRE | C. GAII | N OR LOSS |
| | 275,000. | 275,000. | · | 0. | | 0. | 0. |
| DESCRI | (A) PTION OF PROPERTY | | | | MANNER CQUIRED | DATE ACQUIRED | DATE SOLD |
| SMITH : | BARNEY 512-40368- | 14 | | PUI | RCHASED | VARIOUS | VARIOUS |
| | (B) GROSS SALES PRICE | (C) VALUE AT TIME OF ACQ. | (D) EXPENSE SALE | OF | (E) DEPRE | C. GATI | (F) N OR LOSS |
| | 5,555,675. | 6,650,289. | | 0. | | | <1,094,614.> |
| DESCRI | (A) PTION OF PROPERTY | | | | ANNER CQUIRED | DATE ACQUIRED | DATE SOLD |
| SMITH | BARNEY 512-40368- | 14 | | PUF | RCHASED | VARIOUS | VARIOUS |
| | (B) GROSS | (C) VALUE AT | (D) EXPENSE | OF | (E) | | (F) |
| | SALES PRICE | TIME OF ACQ. | SALE | | DEPRE | C. GAII | N OR LOSS |
| | 1,006,703. | 1,152,969. | | 0. | | 0. | <146,266.> |
| DESCRI | (A) PTION OF PROPERTY | | | | MANNER CQUIRED | DATE ACQUIRED | DATE SOLD |
| SMITH | BARNEY 512-71785- | 14 | | PUF | RCHASED | VARIOUS | VARIOUS |
| | (B) GROSS SALES PRICE | (C) VALUE AT TIME OF ACQ. | (D) EXPENSE SALE | OF | (E) DEPRE | C GATI | (F) |
| | | | | | | | |
| | 2,883,352. | 3,489,138. | | 0. | | 0. | <605,786.> |

| (A) DESCRIPTION OF PROPERTY | | | | ANNER QUIRED | DA' ACQU | | DATE : | SOLD |
|--|---------------------------------|------------------------|-----|------------------|-------------|-------------|----------------------------|-----------|
| SMITH BARNEY 512-71785- | 14 | | PUR | CHASED | VARI | OUS | VARIO | ous |
| (B) GROSS | (C) VALUE AT | (D) EXPENSE | OF | (E) | | | (F) | |
| SALES PRICE | TIME OF ACQ. | SALE | | DEPRE | | GAIN | OR LO | SS ——— |
| 917,691. | 910,117. | | 0. | | 0. | | 7, | 574. |
| (A) DESCRIPTION OF PROPERTY | | | | ANNER QUIRED | DA' ACQU | | DATE : | SOLD |
| SMITH BARNEY 512-71786- | 13 | | PUR | CHASED | VARIO | วบร | VARIO | ous |
| (B) GROSS | (C) VALUE AT | (D) | OF | (E) | | | (F) | |
| SALES PRICE | TIME OF ACQ. | EXPENSE SALE | Or | DEPRE | C. | GAIN | OR LO | SS |
| 613,387. | 809,523. | | 0. | | 0. | | <196, | 136. |
| DESCRIPTION OF PROPERTY SMITH BARNEY 512-71786- (B) GROSS SALES PRICE | _ | (D) EXPENSE SALE | PUR | CHASED (E) DEPRE | VARI | ous | DATE S VARIO (F) OR LOS | ous |
| 1,264,431. | 1,923,076. | | 0. | | 0. | | <658, | 545. |
| (A) DESCRIPTION OF PROPERTY | | | | ANNER QUIRED | DA' ACQU | | DATE : | SOLD |
| FMA HIGH YIELD CAPP APP | | | PUR | CHASED | VARIO | ous | VARIO | วบร |
| (B) GROSS SALES PRICE | (C) VALUE AT TIME OF ACQ. | (D) EXPENSE SALE | OF | (E) DEPRE | | GAIN | (F) | SS |
| 1,905,342. | 1,839,817. | | 0. | | 0. | | 65, | 525. |
| CAPITAL GAINS DIVIDENDS | FROM PART IV | | | | | | | 0. |
| | ART I, LINE 6A | | | | - | | | |

| FORM 990-PF INTEREST ON SAVINGS | AND TEMPORARY CA | ASH INVESTMENTS | STATEMENT | 2 |
|--|--------------------|-----------------|---------------|------------|
| SOURCE | | | AMOUNT | |
| FMA HIGH YIELD CAP | | | 21,8 | |
| HIPPOCRATES PARTNERS, L.P. | | | | 7. |
| OTHER SOURCES SMITH BARNEY 512-040368-14 | | | 1,9 | 45. |
| SMITH BARNEY 512-08828-15 | | | 2,9 | |
| SMITH BARNEY 512-40367-15 | | | 106,8 | |
| SMITH BARNEY 512-40369-13 | | | | 3. |
| SMITH BARNEY 512-40390-16 SMITH BARNEY 512-71785-14 | | | 42,9 | |
| SMITH BARNEY 512-71785-14 SMITH BARNEY 512-71786-13 | | | 6,8 1,0 | |
| 511111 51111111 511 71700 15 | | | | |
| TOTAL TO FORM 990-PF, PART I, LI | NE 3, COLUMN A | | 184,5 | 49. |
| | | | | |
| FORM 990-PF DIVIDENDS A | ND INTEREST FROM | SECURITIES | STATEMENT | 3 |
| | | CAPITAL GAINS | COLUMN (A |) |
| SOURCE | GROSS AMOUNT | DIVIDENDS | AMOUNT | |
| ABERDEEN EMERGING MARKET FUND | 5,919. | 0. | 5,9 | 19. |
| DODGE & COX FUNDS | 3,005. | 0. | 3,0 | 05. |
| HARBOR INTERNATIONAL FUND | 30,722. | 0. | 30,7 | |
| HIPPOCRATES PARTNERS, L.P. OTHER SOURCES - ADJUSTMENT | 790. <214.> | 0. > | | 90. 14. |
| PIMCO COMMODITY REAL RETURN | 6,075. | 0. | 6,0 | |
| PIMCO TOTAL RETURN FUND | 11,323. | 0. | 11,3 | |
| SMITH BARNEY 512-08828-15 | 45,783. | 0. | 45,7 | |
| SMITH BARNEY 512-40367-15 | 22,711. | 0. | 22,7 | |
| SMITH BARNEY 512-40368-14 | 50,483. | 0. | 50,4 | |
| SMITH BARNEY 512-71785-14 SMITH BARNEY 512-71786-13 | 25,432. | 0. | 25,4 | |
| VANGUARD ENERGY FUNDS 0551 | 40,877. 19,669. | 0. | 40,8° 19,6 | |
| VANGUARD GROWTH INDEX FUND 1347 | 4,110. | 0. | 4,1 | |
| WANGELOOD THE MEDIA MEDIA CONT. FOR | 1,000 | 0 | 1 0 | |

VANGUARD INT TERM TREASURY 535

TOTAL TO FM 990-PF, PART I, LN 4

1,888.

268,573.

1,888.

268,573.

0.

0.

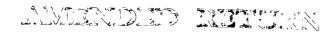
| FORM 990-PF | OTHER | INCOME | | STATEMENT | 4 |
|-------------------------------|------------------------------|-----------------------------------|-----------------------------------|------------------------------|-----|
| DESCRIPTION | | (A) REVENUE PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTEI NET INCOI | |
| OTHER INCOME | _ | 1,586. | 1,586. | | |
| TOTAL TO FORM 990-PF, PART I, | LINE 11 = | 1,586. | 1,586. | | |
| FORM 990-PF | ACCOUNT | ING FEES | | STATEMENT | 5 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | | (C) ADJUSTED NET INCOME | | |
| AUDIT & TAX FEES | 13,238 | . 0 | • | | 0. |
| TO FORM 990-PF, PG 1, LN 16B | 13,238 | . 0 | • | | 0. |
| FORM 990-PF C | THER PROFE | SSIONAL FEES | | STATEMENT | 6 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | | |
| INVESTMENT ADVISORY FEES | 221,896 | . 221,896 | • | | 0. |
| TO FORM 990-PF, PG 1, LN 16C | 221,896 | 221,896 | • | | 0. |
| FORM 990-PF | OTHER | EXPENSES | | STATEMENT | 7 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITA PURPOS | |
| MANAGEMENT AND GENERAL | 86,214 | • 0 | • | 86,2 | 14. |
| TO FORM 990-PF, PG 1, LN 23 | 86,214 | . 0 | • | 86,2 | 14. |

AMENDED RETURN

| FORM 990-PF OTHER DECREASES IN NE | T ASSETS OR 1 | FUND BALANCES | STATEMENT 8 | |
|---|---------------------|---------------------------------------|------------------------|--|
| DESCRIPTION | | | AMOUNT | |
| UNREALIZED LOSSES ON INVESTMENTS UNREALIZED LOSSES ON MARKETABLE SECU | RIITES | | 983,195. 10,009. | |
| TOTAL TO FORM 990-PF, PART III, LINE | ; 5 | | 993,204. | |
| FORM 990-PF CORP | ORATE STOCK | · · · · · · · · · · · · · · · · · · · | STATEMENT 9 | |
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE | |
| CORPORATE EQUITY SECURITIES | 4,591,538. | 4,591,538. | | |
| TOTAL TO FORM 990-PF, PART II, LINE | 4,591,538. | 4,591,538 | | |
| FORM 990-PF CORP | ORATE BONDS | | STATEMENT 10 | |
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE | |
| FIXED INCOME BONDS | | 2,479,903. | 2,479,903. | |
| TOTAL TO FORM 990-PF, PART II, LINE | 10C | 2,479,903. | 2,479,903. | |
| FORM 990-PF OTHER | INVESTMENTS | | STATEMENT 11 | |
| DESCRIPTION | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE | |
| MUTUAL FUNDS INVESTMENTS IN LIMITED PARTNERSHIPS FMA YIELD CAPITAL APPRECIATION | FMV FMV FMV | 1,105,206. 381,398. | 1,105,206. 381,398. | |
| LIMITED AUCTION RATE NOTES | FMV | 0. | 0. | |
| TOTAL TO FORM 990-PF, PART II, LINE | 13 | 1,486,604. | 1,486,604. | |

26

| | <u> </u> | | | |
|--|-------------------------------------|---------------|---------------------------------|------------------|
| FORM 990-PF | OTHER ASSETS | | STATI | EMENT 12 |
| DESCRIPTION | BEGINNING OF YR BOOK VALUE | | | MARKET ALUE |
| CONTRIBUTIONS OTHER | 0. 2,215. | 5,00 2,21 | | 5,000. 2,215. |
| TO FORM 990-PF, PART II, LINE 15 | 2,215. | 7,21 | .5. | 7,215. |
| FORM 990-PF PART VIII - LIST TRUSTEES AND | T OF OFFICERS, D FOUNDATION MANA | | STATI | EMENT 13 |
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | |
| JAMES C. SHINGLE C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707 | PRESIDENT/DIRE | ECTOR 0. | 0. | 0. |
| KAPI'OLANI K. MARIGNOLI C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707 | VICE PRESIDENT | C/DIRECTOR 0. | 0. | 0. |
| JAMES WALTER GROWNEY C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707 | SECRETARY/DIRE | ECTOR 0. | 0. | 0. |
| WENDY BECKLEY CRABB C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707 | TREASURER/DIRE | ECTOR 0. | 0. | 0. |
| DORNA M.K. DEL ZOTTO C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707 | DIRECTOR | 0. | 0. | 0. |
| STEPHEN H. MACMILLAN C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707 | DIRECTOR | 0. | 0. | 0. |



| JAMES & ABIGAIL CAMPBELL FAMILY | FOUNDATI | | 99-0203 | 078 |
|---|-------------------------------|----------|-----------|-----|
| JONATHAN STAUB C/O 1001 KAMOKILA BLVD. JAMES | DIRECTOR | | | |
| CAMPBELL BLDG. STE. 200 KAPOLEI, HI '96707 | 1.00 | 0. | 0. | 0. |
| LANDON CHUN | ASSISTANT T | REASURER | | |
| C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707 | 1.00 | 0. | 0. | 0. |
| KEOLA LLYOD | ASSISTANT S | ECRETARY | | |
| C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707 | 1.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, | PART VIII | 0. | 0. | 0. |
| | XV - LINE 1A DUNDATION MAN | | STATEMENT | 14 |

NAME OF MANAGER

JAMES C. SHINGLE
KAPI'OLANI K. MARIGNOLI
JAMES WALTER GROWNEY
WENDY BECKLEY CRABB

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 15

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

KEOLA LLOYD

1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707

TELEPHONE NUMBER

808-674-3167

FORM AND CONTENT OF APPLICATIONS

GUIDLINES ARE POSTED ONLINE AT WWW.CAMPBELLFAMILYFOUNDATION.ORG. SEE ATTACHMENT.

ANY SUBMISSION DEADLINES

GRANT APPLICATION MUST BE POSTMARKED BY: FEB. 1 FOR THE APR/MAY MTG.; AUG. 1 FOR THE OCT/NOV MTG.

RESTRICTIONS AND LIMITATIONS ON AWARDS

GUIDLINES ARE POSTED ONLINE AT WWW.CAMPBELLFOUNDATION.ORG. SEE ATTACHMENT.

| | AND CONTRIBUTIONS DURING THE YEAR | STATI | EMENT 16 |
|--|--|----------------------------|----------|
| RECIPIENT NAME AND ADDRESS | RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT | RECIPIENT STATUS | AMOUNT |
| CHILD AND FAMILY SERVICES, 300 DELAWARE AVE, BUFFALO, NY 14202 | NONE EMERGENCY SHELTER | OTHER PUBLIC CHARITY | 25,000. |
| MALAMA LEARNING CENTER, P.O. BOX 75467, KAPOLEI, HI 96707 | NONE CAPITAL CAMPAIGN | OTHER PUBLIC CHARITY | 50,000. |
| JAMES CAMPBELL HIGH SCHOOL, 91-180 NORTH ROAD, EWA BEACH, HI 96706 | NONE | OTHER PUBLIC CHARITY | 20,000. |
| KAPOLEI HIGH SCHOOL, 91-5007 KAPOLEI PKWY, KAPOLEI, HI 96707 | NONE | OTHER PUBLIC CHARITY | 20,000. |
| KAHUKU HIGH SCHOOL, 56-490 KAMEHAMEHA HWY, KAHUKU, HI 96731 | NONE | OTHER PUBLIC CHARITY | 20,000. |
| NANAKULI HIGH SCHOOL, 89-980 NANAKULI AVE, WAIANAE, HI 96792 | NONE | OTHER PUBLIC CHARITY | 10,000. |
| WAIANAE HIGH SCHOOL, 85-251 FARRINGTON HWY, WAIANAE, HI 96792 | NONE | OTHER PUBLIC CHARITY | 10,000. |
| BALLET HAWAII, 650 IWILEI RD BOX 221, STE. 295 , HONOLULU, HI 96817 | NONE ANGEL FUND PROGRAM SUPPORT | OTHER PUBLIC CHARITY | 5,000. |

| BOYS AND GIRLS CLUB OF HAWAII, 1704 WAIOLA ST, HONOLULU, HI 96826 | NONE | OTHER PUBLIC CHARITY | 25,000. |
|--|---|----------------------------|---------|
| | WEED AND SEED PROGRAM | | · |
| KAALA FARMS, INC., P.O. BOX 630, WAIANAE, HI 96792 | NONE | OTHER PUBLIC CHARITY | 20,000. |
| | YOUTH ORIENTED, CULTURALLY BASED PROGRAMS | CHARTTI | 20,000. |
| KAMP HAWAII, PO BOX 13041 , AIEA, HI 96701 | NONE | OTHER PUBLIC | F 000 |
| | PRIDGE AND VICTORY OUTREACH PROGRAM | CHARITY | 5,000. |
| ST. JUDE CATHOLIC CHURCH, 92-455 MAKIKILO DRIVE, KAPOLEI, HI 96707 | | OTHER PUBLIC CHARITY | 10,000. |
| | OUTREACH PROGRAM | | 10,000. |
| VALLEY OF THE RAINBOWS, P.O. BOX 1009, WAIANAE, HI 96792 | NONE | OTHER PUBLIC CHARITY | 10,000. |
| | YOUTH LEADERSHIP CONFERENCE | | 10,000. |
| WAIANAE COAST CULTURE AND ARTS, 89-188 FARRINGTON HWY, WAIANAE, HI 96792 | NONE | OTHER PUBLIC CHARITY | 10 000 |
| 111 90792 | PROGRAM SUPPORT | CHARITI | 10,000. |
| WAIANAE COMMUNITY RE-DEVELOPMENT, P.O. BOX 441, WAIANAE, HI 96792 | NONE | OTHER PUBLIC CHARITY | 2F 000 |
| | KE ALA HO'OULU AI EDUCATIONAL PROGRAMS | CHARITI | 25,000. |
| JAMES CAMPBELL HIGH SCHOOL, 91-180 NORTH ROAD, EWA BEACH, HI 96706 | NONE | OTHER PUBLIC CHARITY | 20,000. |
| | MEDIA PAVILLIAN AND GARDEN STUDENT CENTERES | | |

Consolina Landen Vande in the world in

| PROJECT FOCUS HAWAII, INC, P.O. BOX 283074, HONOLULU, HI 96828 | NONE KA HALE HO ALA HOU NO NA WAHINE | OTHER PUBLIC CHARITY | 5,000. |
|---|--|----------------------------|---------|
| KAHIKOLU OHANA HALE O WAIANAE, 85-296 ALA HEMA ST , WAIANAE, HI 96792 | NONE OPERATIONAL START UP PROGRAM | OTHER PUBLIC CHARITY | 50,000. |
| FRIENDS OF HONOULIULI, P.O. BOX 75593, KAPOLEI, HI 96707 | NONE SIX PERSON OUTRIGGER CANOE | OTHER PUBLIC CHARITY | 5,000. |
| TRUST FOR PUBLIC LAND, 212 MERCHANT ST, STE 320, HONOLULU, HI 96813 | NONE HAWAIIAN ISLANDS PROGRAM | OTHER PUBLIC CHARITY | 25,000. |
| THE SALVATION ARMY, 2950 MANOA ROAD, HONOLULU, HI 96822 | NONE CAPITAL CAMPAIGN KAPOLEI KROC COMMUNITY CENTER | OTHER PUBLIC CHARITY | 50,000. |
| BOYS AND GIRLS CLUB OF HAWAII, 1704 WAIOLA ST, HONOLULU, HI 96826 | NONE NFL YET YOUTH EDUCATIONAL TOWN CENTER | OTHER PUBLIC CHARITY | 32,500. |
| EASTER SEAL SOCIETY, 850 IWILEI RD, HONOLULU, HI 96817 | NONE CAPITAL CAMPAIGN | OTHER PUBLIC CHARITY | 50,000. |
| GOODWILL INDUSTRIES, 2610 KILIHAU STREET, HONOLULU, HI 96819 | NONE BUILDING GOODWILL WORKS CAMPAIGN | OTHER PUBLIC CHARITY | 50,000. |

| HAWAII FOSTER PARENT ASSOCIATION, 111 HEKILI ST #A-261, KAILUA, HI 96734 . | NONE E PULAMA NA KEIKI NEWSLETTER | OTHER PUBLIC CHARITY | 10,000. |
|--|--|----------------------------|---------|
| HO'OKAKO'O CORPORATION, P.O. BOX 11685 , HONOLULU, HI 96828 | NONE LEADERSHIP TRAINING, KAMAILE ACADEMY | OTHER PUBLIC CHARITY | 20,000. |
| INTERNATIONAL DYSLEXIA ASSOCIATION 40 YORK RD., 4TH FLOOR, BALTIMORE, MD 21204 | NONE HIDA WORKSHOP | OTHER PUBLIC CHARITY | 10,000. |
| SEAGULL SCHOOLS, 531 FARRINGTON HWY, KAPOLEI, HI 96707 | NONE FINANCIAL ASSISTANCE PROGRAM | OTHER PUBLIC CHARITY | 15,000. |
| WAIANAE HIGH SCHOOL, 85-251 FARRINGTON HWY, WAIANAE, HI 96792 | NONE CHALLENGE DAY PROGRAM | OTHER PUBLIC CHARITY | 20,000. |
| NANAKULI INTERMEDIATE SCHOOL, 89-980 NANKULI AVE, WAIANAE, HI 96792 | NONE PROJECT HALEMALULANI | OTHER PUBLIC CHARITY | 9,250. |
| CATHOLIC CHARITIES HAWAII, 200 N VINEYARD BLVD, 2ND FL, HONOLULU, HI 96817 | NONE MAILILAND HOMELESS PRESCRIPTION DRUG SUBSIDY | OTHER PUBLIC CHARITY | 5,000. |
| HAWAII MEALS ON WHEELS, P.O. BOX 61194, HONOLULU, HI 96839 | NONE DELIVERY OF MEALS EWA COMMUNITY | OTHER PUBLIC CHARITY | 5,000. |

HONOLULU COMMUNITY ACTION PROGRAM, 33 SOUTH KING ST, STE 300, HONOLULU, HI 9

.

NONE

OTHER PUBLIC CHARITY

5,000.

SUPPORT FOOD BASKET PROGRAM, WAIANAE HEAD

START

TOTAL TO FORM 990-PF, PART XV, LINE 3A

651,750.

34

JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION 2008 AMENDED FORM 990-PF EXPLANATION OF CHANGES

99-0203078

THE 2008 FORM 990-PF HAS BEEN AMENDED FOR THE FOLLOWING CHANGES. THE CHANGES WERE MADE DUE TO THE FACT THAT CERTAIN INFORMATION ON THE ORIGINALLY FILED FORM 990-PF WERE INCORRECTLY CLASSIFIED. IN ADDITION, THE 2007 FORM 990-PF HAS ALSO BEEN AMENDED WHICH AFFECTED THE EXCESS DISTRIBUTION CARRYOVER.

| EXCESS DISTRIBUTION CARRIOVER. | | _ | |
|---|-------------------|----------------|------------|
| | | AS | |
| | AS | ORGINALLY | |
| | AMENDED | FILED | DIFFERENCE |
| Form 990-PF Page 1 Part I: | | | |
| Line 16b Accounting fees, column (a) | 13,238 | 0 | 13,238 |
| Line 17 Interest, column (a) | 6 | 0 | 6 |
| Line 23 Other expenses, column (a) | 86,214 | 99,458 | (13,244) |
| Line 23 Other expenses, column (d) | 86,214 | 0 | 86,214 |
| Line 26 Total expenses, column (d) | 737,964 | 651,750 | 86,214 |
| Form 990-PF Page 2 Part II: | | | |
| Line 10b Investments - corporate stock, column (b) | 4,591,538 | 4,972,936 | (381,398) |
| Line 10b Investments - corporate stock, column (c) | 4,591,538 | 4,972,936 | (381,398) |
| Line 13 Investments - other, column (b) | 1,486,604 | 1,105,206 | 381,398 |
| Line 13 Investments - other, column (b) | 1,486,604 | 1,105,206 | 381,398 |
| Form 990-PF Page 3 Part V: | | | |
| Line 8 Qualifying distributions from Part XII, line 4 | 737,964 | 651,750 | 86,214 |
| Form 990-PF Page 7 Part III | | | |
| Line 3 - added information for independent contractors that warmended return. | ere paid more tha | nn \$50,000 on | |
| Form 990-PF Page 8 Part XII | | | |
| Line 1 Amounts paid to accomplish charitable purpose | 737,964 | 651,750 | 86,214 |
| Line 4 Qualifying distributions | 737,964 | 651,750 | 86,214 |
| Line 6 Adjusted qualifying distributions | 737,964 | 651,750 | 86,214 |

JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION 2008 AMENDED FORM 990-PF EXPLANATION OF CHANGES (PAGE 2)

99-0203078

| | AS | | |
|--|---------|-------------|------------|
| | AS | ORGINALLY | |
| | AMENDED | FILED | DIFFERENCE |
| | | | |
| Form 990-PF Page 9 Part XIII | | | |
| Line 3f Excess carryover, to 2008 | 900,227 | 647,253 | 252,974 |
| Line 4 Qualifying distributions | 737,964 | 651,750 | 86,214 |
| Line 4d Applied to 2008 distributable amount column (d) | 737,964 | 651,750 | 86,214 |
| Line 5 Excess distribution carryover columns (a) and (d) | 70,298 | 156,512 | (86,214) |
| Line 6a Corpus | 829,929 | 490,741 | 339,188 |
| Line 8 Excess distributions carryover from 2003 not | | | |
| applied on line 5 or 7 | 50,108 | 0 | 50,108 |
| Line 9 Excess distributions carryover to 2009 | 779,821 | 490,741 | 289,080 |

Form 990-PF Page 10 Part XV

Line 1 Information regarding foundation managers who have contributed more than 2% of the total contributions received by the foundation have been added on the amended return.

Information for lines 2a, 2b, 2c and 2d have been added on the amended return.

Form 990-PF Schedule B

Information on the schedule of contributors have been added on the amended return.

ALL OF THE CHANGES MADE ON THE AMENDED 990-PF HAD NO IMPACT ON THE EXCISE TAX OR THE OVERPAYMENT APPLIED TO 2009 AS REPORTED ON THE ORIGINALLY FILED FORM 990-PF.