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# $_{\mathsf{Form}}\,990$

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

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

Open to Public Inspection

<u>A</u>	For the	e 2008 calendar year, or tax year beginning UUL 1, 2008 and el	naing U	UN 30, 2009	
В	Check if applicable	Please use IRS		D Employer identifi	cation number
[	Addre	es label of transatt academy of cotenice			
	Name	type		99-6	006863
	Initial return Termi	n- Specific OF IIUM 1776 IINTVEDSTOV AVE	loom/suite	E Telephone numbe	er 956–7930
F	ation Amen return	ded tions		G Gross receipts \$	126,010.
	Applic			H(a) Is this a group r	
	pendi	F Name and address of principal officer:DR . GARETH WYNN-WIL	LIAMS	for affiliates?	Yes X No
		IFA C-208, HONOLULU, HI 96822		H(b) Are all affiliates inc	cluded? Yes No
1	Tax-ex	empt status X 501(c) ( 3 ) ◀ (Insert no.) 4947(a)(1) or 527		1	list (see instructions)
		te: ► WWW.HAWAII.EDU/ACADSCI	<del> </del>	H(c) Group exemption	
		organization Corporation Trust X Association Other	L Year	of formation 1925	VI State of legal domicile H I
Р	art 1	Summary	me co	TENCE C ENC	TNEEDING TO
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: PROMO HIGH SCHOOL STUDENTS	TE SC	TENCE & ENG	TINEERING TO
i.	2	Check this box   If the organization discontinued its operations or dispose	ed of more	than 25% of its asset	
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	9
∞ ∞	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	9
ies	5	Total number of employees (Part V, line 2a)		5	C
Ę.	6	Total number of volunteers (estimate if necessary)		6	0.
Ac	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)		7 <u>a</u> 7b	0.
	D	Net unrelated business taxable income from Form 990-T, line 34		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		166,071.	
J. Ce	9	Program service revenue (Part VIII, line 2g)		13,432.	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u> </u>	472.	112.
ď	11				
	12	Other revenue (Part VIII, Column A) lines 5-6d, 8c, 9c, 10c, and 11e) Total revenue · add lines 8 through 11 (must equa) Part VIII, column (A), line 12)		179,975.	126,010.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to draw manipers [Part IX, column (A), line 4)	-		
LO.	1	Salaries, other compensation, employee benefits Part IX, column (A), lines 5-10)			
JSe	16a	Professional fund aising tees (Part IX, column (A), line 11e)		33,862.	3,950.
Expenses	Ь	Total fundraising expenses Part (X) column (D), line 25) 3,95	0.		
Ω̈́	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		153,559.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		187,421.	141,048.
	19	Revenue less expenses. Subtract line 18 from line 12		<7,446.	> <15,038.
Assets or	<u> </u>			Beginning of Year	End of Year
Sset	20	Total assets (Part X, line 16)	<u> </u>	80,456.	92,999.
Net A	21	Total liabilities (Part X, line 26)	-	00 456	2,151. 90,848.
		Net assets or fund balances Subtract line 21 from line 20		80,456.	90,040.
	art II	Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and	statements	and to the best of my knowled	ige and belief, it is true, correct.
á		and complete Declaration of preparer (other than ifficertis based on all information of which preparer has an	y knowledge	- 1	ĭ
	20	* + Hurant King		15/12/	2010
He		Signatule or officer		Date /	
	•	DR. IRVIN L. KING, PRINCIPAL INVESTIGA	TOR		
= = _		Type or print name and title			
	tal .	Preparer's Date	اهٰی ا	f_ (see in	rer's identifying number istructions)
∋ ′્ય		signature JON M. YASUDA 05/10	/ 10 em	ployed 🕨 🗶	
3 III	eparer's e Only	YOURS IS TO BOT A TABLE TO THE WORLD THE TABLE TO THE TAB	SUDA C	PAS EIN >	
% 100 100 100 100 100 100 100 100 100 10	Unity	self-employed), 745 FORT ST STE 1915			200 521 2062
		HONOLULU, HI 96813		Phone no ► 8	308-521-3962
N.A.		IDS discuss this return with the preparer shown above? (see instructions)			I Yes X No

_	, ,,,, <u>,</u> ,, , , , , , , , , , , , , ,	00003	Р	age J
Pai	rt IV Checklist of Required Schedules		1	
•	504/1/01 40.77/1/41 41 41 41 41 41 41 41 41 41 41 41 41 4		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	ĺ
_	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	^	<del></del>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		Х
4	public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II			X
4				<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and	5		ĺ
6	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice	-3-		<del> </del>
U	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		-	<u> </u>
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
	·	- <del>'-</del> -		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		X
•	Schedule D, Part III	-		
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10		10		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V  Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?	'0		<u> </u>
11		11	х	
12	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable  Did the organization receive an audited financial statement for the year for which it is completing this return that was	''		<b></b>
12	prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Х
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a	<del> </del>	X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		-	<u>├</u>
U	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	146		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or el			
	located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Х
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule	∍ K.		
	If "No", go to question 25	24a	L	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c	<u> </u>	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	The same of the sa			1
	prior year? If "Yes," complete Schedule L, Part I	25b	<u> </u>	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualific	ed		1
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial

contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

•			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?		1	
	If "Yes," complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c	<u> </u>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	<u> </u>	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	İ		
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1		
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes, " complete Schedule R, Part VI	37		X

	The state of the s					-
•					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of					
	U.S Information Returns. Enter -0- if not applicable	1a		0		
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	<u> </u>	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eporta	ble gaming			
	(gambling) winnings to prize winners?	1	I	1c	ļ	X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	_2a	<u></u>	0	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns			2b	<u> </u>	<del> </del>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see				1	.,
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by t	his return?	3a	-	X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			Зь_	<del> </del>	-
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•		ļ	
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)?	4a	ļ	X
ь	If "Yes," enter the name of the foreign country:	<u> </u>		-		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign	Banka	and			
_	Financial Accounts.					v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		,	5a	├─	X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	negai	raing Pronibited	50		
e-	Tax Shelter Transaction?  Did the organization solicit any contributions that were not tax deductible?			5c 6a	<del>                                     </del>	Х
	If "Yes," did the organization include with every solicitation an express statement that such contribut	ione o	or aifte	Ua_	<del> </del>	
b	were not tax deductible?	.10113 0	or girts	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			00		
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than	\$752	7a	1	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	, indi	Ψ, σ.	7b		<del> </del> -
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as rec	iuired	1.5	<del></del>	
Ŭ	to file Form 8282?		,	7c		Х
d	If "Yes," Indicate the number of Forms 8282 filed during the year	7d	1			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	erson	al			
	benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	act?		_7f		Х
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	as re	equired?	7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec	tion 5	09(a)(3)			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring or	ganıza	ation, have			
	excess business holdings at any time during the year?			8	ļ	ļ
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			_9a	<u> </u>	ļ
ь	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	ļ	ļ
10	Section 501(c)(7) organizations. Enter. N/A	,	1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		_		
11	Section 501(c)(12) organizations. Enter: N/A	ı	ı			
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b	L	┥	1	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		7 	12a	<del> </del>	<del> </del>
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b	L		000	10005

Part VI Governance, Management, and Disclosure (Sections A, B, and C request Information about policies not required by the Internal Revenue Code)

<u>Sec</u>	tion A. Governing Body and Management		,	
			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O See instructions.			
1a		9		
ь	Enter the number of voting members that are independent	9		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		Х
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following			
а	The governing body?	8a	x	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9a	Does the organization have local chapters, branches, or affiliates?	9a		Х
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
_	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must	-		
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10		Х
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		Х
Sec	tion B. Policies	<del>!</del>	·	
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
_	to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
·	in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
9	The organization's CEO, Executive Director, or top management official?	15a	l	X
	Other officers or key employees of the organization?	15b		X
U	Describe the process in Schedule O (see instructions)	1.00		<del></del>
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
IVa	taxable entity during the year?	16a	Ì	х
	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	100		
ь	In joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
		16b	i	1
800	exempt status with respect to such arrangements?	100	!	L
	tion C. Disclosure  List the states with which a copy of this Form 990 is required to be filled ▶ NONE			
17	List the states that the state of the state	o for		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	e ior		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fina	ancial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation •	_	
	CAROLYN KOICHI - 808-956-7930			
	COE-UHM, 1776 UNIVERSITY AVE UA4-4, HONOLULU, HI 96822			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order. Individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons

X Check this box if the organization did not co		y of	ficer			or, tri	uste	1	(-)	
(A)	(B)			((				(D)	(E)	(F)
Name and Title	Average hours	۱,		Posi		app	d.A	Reportable compensation	Reportable compensation	Estimated amount of
	per	├ <del>`</del>	T	\ aii	liiai	T	יעיי ו	from	from related	other
	week	individual trustae or director						the	organizations	compensation
		ō	88			Safed		organization	(W-2/1099-MISC)	from the
		agg	<u>a</u>		83	Tpen		(W-2/1099-MISC)		organization
		dual	Institutional frustæe	L	of dr	25 25	h 15			and related organizations
		亨	age	Officer	Keye	Highest compensated employee	Ē			Organizations
DR. ERIC H. DECARLO		<u> </u>				$\vdash$				*****
PAST-PRESIDENT	0.50							0.	0.	0.
DR. ALISA ARP										
PRESIDENT	0.50		ł					0.	0.	0.
DR. GARETH WYNN-WILLIAMS										
PRESIDENT-ELECT	1.00							0.	0.	0.
DR. GARRETT ITO										
SECRETARY	0.50							0.	0.	0.
DR. BRUCE S. ANDERSON										
TREASURER	0.50			<u> </u>				0.	0.	0.
DR. IRVIN L. KING										
EX-OFFICIO	5.00		<u> </u>					0.	0.	0.
BERNARD J. KILONSKY					1					
EX-OFFICIO	0.50							0.	0.	0.
CHRIS MEASURES					1				_	_
COUNCILOR	0.50		<u>L</u>	L	_			0.	0.	0.
DR. LARRY MORDAN								1		_
COUNCILOR	0.50		<u> </u>	<u> </u>	_	<u> </u>	Ļ	0.	0.	0.
JOHN SCHOLFIELD										
COUNCILOR	0.50	L_	ļ	ļ			<u> </u>	0.	0.	0.
DR. NEAL ATEBARA										•
COUNCILOR	0.50	_	<u> </u>	ļ	ļ			0.	0.	0.
								,		
			-	<u> </u>	_		<u> </u>			
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	•						ŀ			
		Ш.	1	1	1	1	1	I		

	† VIII Section A. Officers, Directors, To (A)	(B)		byee		<u>(110 r</u> (2)	nigi	iest	(D)	(E)			(F)	
	Name and title	Average	٫		Pos			. 1	Reportable	Reportable			timate	
		hours per week	Individual trustee or director	Institutional trustee		Key employee	Highest compensated and compensated		compensation from the organization (W-2/1099-MISC)	compensation from related organization (W-2/1099-MI	d ns	com fr org	nount of other pensariom the anization decided anization anization anization decided	tion e on ed
	<del></del>													
			<u>                                     </u>											
			_					-						
							Ļ						_ <del></del>	
1 b 2	Total Total number of individuals (including the compensation from the organization	se in 1a) who re	celv	ed r	nore	tha	<b>P</b> n \$1	00,	0 • 000 in reportable		0.	<u> </u>		0.
3	Did the organization list any <b>former</b> office line 1a? If "Yes," complete Schedule J for			e, ke	y en	nplo	yee,	or h	nighest compensated er	mployee on		3	Yes	No X
4	For any individual listed on line 1a, is the sand related organizations greater than \$1	50,000? If "Yes,	," со	mpl	ete :	Sche	edul	e J i	for such individual			4		х
5 Sec	Did any person listed on line 1a receive or the organization? If "Yes," complete Schettion B. Independent Contractors	•			rom	any	, uni	relat	ed organization for serv			5		Х
1	Complete this table for your five highest of the organization NONE	ompensated in	depe	ende	ent c	onti	racto	ors t	hat received more than	\$100,000 of cor	npens	ation t	rom	
	(A) Name and busines	s address							(B) Description of s	services	С	Ompe	) nsatioi	n
					<u>.                                    </u>									
2	Total number of independent contractors		e in	1) w	ho r	ecel	ved	mor	re than \$100,000 in com	pensation		······································	<del></del>	•
	from the organization	0									Щ_	. <u></u>	000 #	

Pa	rt VII	【│ Statement of Rever	nue					
7.					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, girts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines Total. Add lines 1a-1f	tions)  1b  1c  1d  tions)  1e  its, and  ve  1f	3,437.	124,289.			
ervice	2 a b	ANNUAL DINNER M		Business Code 900099	1,609.	1,609.		
Program Service Revenue	c d e							
•		All other program service reversed. Add lines 2a-2f	enue	<b></b>	1,609.			
	3 4 5	Investment income (including other similar amounts) Income from investment of ta Royalties		<b>•</b>	112.	112.		
	b	Gross Rents Less rental expenses Rental income or (loss)	(i) Real	(II) Personal				
	b c	Net rental income or (loss) Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	(i) Securities	(II) Other				
Other Revenue	ь	Gross income from fundraisin including \$ contributions reported on line Part IV, line 18 Less direct expenses Net income or (loss) from fund	of 1c) See a b					
	b	Gross income from gaming ac Part IV, line 19 Less: direct expenses Net income or (loss) from gam	a b					
	10 a b	Gross sales of inventory, less and allowances Less cost of goods sold	returns a					
	11 a	Net income or (loss) from sale Miscellaneous Revenu	ie	Business Code				
	b c d e	All other revenue Total. Add lines 11a-11d		<b>•</b>				
	40	Total Payanua		🛌 🧎	126 010	1 721	0	0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp		not required to comple	ete columns (B), (C), and	<del>```</del>
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)	ĺ			
	and section 403(b) employer contributions)				<del> </del>
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
ь	Legal	2,697.		2,697.	<del></del>
С	Accounting	785.		785.	
d	Lobbying	2.050			2 050
е	Professional fundraising services See Part IV, line 17	3,950.			3,950.
f	Investment management fees			·	<del></del>
9	Other				
12	Advertising and promotion	14,976.	14,976.		
13	Office expenses	14,970.	14,970.		<del></del>
14	Information technology				
15	Royalties	1,614.	1,614.		
16	Occupancy	42,436.	42,436.		
17	Travel	42,430.	42,430.		
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials	70,341.	70,341.		
19 20	Conferences, conventions, and meetings Interest	70/3110	7073120		•
21	Payments to affiliates				
22	Depreciation, depletion, and amortization		, -		****
23	Insurance		·		1000.0
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	INSURANCE	2,011.		2,011.	
b	MISCELLANEOUS	1,055.	1,055.		
С	DUES AND FEES	738.	738.		
d	BANK FEES	445.	445.		
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	141,048.	131,605.	5,493.	3,950.
26	Joint Costs Check here ▶ ☐ if following				
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation				Farm 000 (2008)

X

3ь

Form **990** (2008)

	990 ( <b>1 X</b>	2008) HAWAII ACADEMY	ı Or	BUTENCE		99-60	00003	ra	ge i
,	<u> </u>				(A) Beginning of year		(B) End of		
	1	Cash · non-interest-bearing			43,189.	1	5	5,5	69
	2	Savings and temporary cash investments			37,267.	2		7,4	
	3	Pledges and grants receivable, net				3			
	4	Accounts receivable, net				4			
	5	Receivables from current and former officers, d	Irectors	. trustees, kev					
		employees, or other related parties Complete F				5			
	6	Receivables from other disqualified persons (as							·····
		4958(f)(1)) and persons described in section 49							
		Part II of Schedule L	(-)(-)	(2). 00		6			
s	7	Notes and loans receivable, net				7			
Assets	8	Inventories for sale or use				8			
As	9	Prepaid expenses and deferred charges				9			
	_	Land, buildings, and equipment cost basis	10a					<del></del>	*********
		Less accumulated depreciation Complete	100		1				
		Part VI of Schedule D	10b			10c			
	11	Investments · publicly traded securities	1.00	<del></del>		11			
	12	Investments - other securities See Part IV, line	11			12			
	13	Investments - program-related. See Part IV, line			<del></del>	13			
	14	Intangible assets				14			
	15	Other assets. See Part IV, line 11			·· ··	15			
	16	Total assets. Add lines 1 through 15 (must equ	ıal lına 3	(A)	80,456.	16	9	2,9	99
	17	Accounts payable and accrued expenses	adi iiiie c		00,1000	17		/ _	
	18	Grants payable  Grants payable				18			
	19	Deferred revenue				19			
	20	Tax-exempt bond liabilities				20			
	21	Escrow account liability. Complete Part IV of Sc	chedule	n	· · · · · · · · · · · · · · · · · · ·	21			
Liabilıties	22	Payables to current and former officers, directo							
ρij	22	highest compensated employees, and disqualif		. , .					
Lia		of Schedule L	ned pers	sons. Complete rait ii		22			
	23	Secured mortgages and notes payable to unrel	lated the	rd narties		23			
	24	Unsecured notes and loans payable	iated tin	ru parties		24			
	25	Other liabilities. Complete Part X of Schedule D	,		0.	25		2,1	51
	26	Total liabilities. Add lines 17 through 25	•		0.	26		$\frac{1}{2}, 1$	
	20	Organizations that follow SFAS 117, check h	ere 🕨	X and complete				<del>/</del>	
s		lines 27 through 29, and lines 33 and 34.							
)Ce	27	Unrestricted net assets			80,456.	27	7	3,7	31
<u>a</u>	28	Temporarily restricted net assets				28		7,1	
Net Assets or Fund Balances	29	Permanently restricted net assets				29			
Š		Organizations that do not follow SFAS 117, o	check h	ere 🕨 🔲 and				.,,	
ř		complete lines 30 through 34.							
ts	30	Capital stock or trust principal, or current funds	5			30			
sse	31	Paid-in or capital surplus, or land, building, or e		nt fund		31		_	
ţ	32	Retained earnings, endowment, accumulated in				32			
ž	33	Total net assets or fund balances			80,456.	33	9	0,8	148
	34	Total liabilities and net assets/fund balances			80,456.	34		2,9	
Pa	rt XI	Financial Statements and Reporting	g						
					<del></del> 1		F	Yes	No
1	Acco	ounting method used to prepare the Form 990:	X Ca	ish 🔲 Accrual	Other				
2a		e the organization's financial statements compile			accountant?		2a	<u> </u>	X
b		e the organization's financial statements audited					2b_	<u> </u>	X
c		es" to lines 2a or 2b, does the organization have				e audīt,		l	
		ew, or compilation of its financial statements and					2c_	ļ	
3a	As a	result of a federal award, was the organization re	equired	to undergo an audit or au	idits as set forth in the Sing	gle Audit			Ī

832011 12-18-08

Act and OMB Circular A-133?

b If "Yes," did the organization undergo the required audit or audits?

### SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2008

OMB No 1545-0047

2008 Open to Public Inspection

Schedule A (Form 990 or 990-EZ) 2008

Nar	ne or t	ne organizati		ACADEMY OF S	C T ENIC	יבי				mpioyer id a a	-6006		nber
Pa	ert I	Reason		ity Status (All organiz			e this nar	t ) (see ins	tructions)	23	-0000	003	
				because it is (Please ch				., (555 1115	11001101107	-			
1	Organ			s, or association of chur	-	_		(h)(1)(A)(i)	1				
2	一			' <b>0(b)(1)(A)(ii).</b> (Attach Sc				(-)(-)(-)	,•				
3	H			tal service organization	•		170(ь)(1)	<b>(A</b> )(iii). (At	tach Sche	dule H.)			
4	一	•	•	operated in conjunction						•	ne hospital	's nam	е.
•		city, and stat				, p			<b>1-11-11-11</b>	.,			-,
5		An organizati	on operated for the	benefit of a college or u	niversity o	wned or op	perated by	a governi	mental uni	t describe	d in		
			(b)(1)(A)(iv). (Comple	•									
6	닞			ent or governmental uni									
7	X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	ublic desc	ribed ir	1
		section 170(	<b>b)(1)(A)(vi)</b> . (Comple	te Part II.)									
8	=	•		ection 170(b)(1)(A)(vi).									
9		_	-	eives: (1) more than 33		• •				•	-	-	
			•	nctions - subject to certa									
				axable income (less sec	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	ınızatıon at	fter June 3	0, 197	5.
	<b>С</b> ————————————————————————————————————		<b>509(a)(2).</b> (Complete	•									
10	님	•		perated exclusively to te		-				•		,	
11		•	•	perated exclusively for the		·-				-			or
				ations described in secti				z) See <b>se</b> c	etion 509(	a)(3). Oned	ck the box	ınaı	
				organization and compl Type II		re inrougr e III - Func		tograted		<b>a</b> [	Type III · 0	<b>Hhor</b>	
_				ப் the organization is not			-	-	r more die		• •		1
•	: [			han one or more publicl									'
1	:		-	ten determination from						5(a)(1) O1 3	oction ood	-(α)(Σ).	
•		_	rganization, check th			ut 11 13 u 1 y	pc 1, 13pc	· 11, O1 1 y p.	J 111				_
ç			-	organization accepted ai	ny aift ar c	ontribution	from any	of the follo	owing per	sons?			
٤	,	-		irectly controls, either a								Yes	No
				upported organization?		,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		() (	,	11g(i)		
		•	• •	n described in (i) above?	)						11g(ii)		
			·	person described in (i)		e?					11g(iii)	1	
t	,		•	about the organizations			ports.						
			J	<b>J</b>	•	•	•						
<i>t</i> ı	Mame	of supported	(ii) EIN	(iii) Type of	(iv) Is the	organization	(v) Did yo	u notify the			(vii) An	nount of	
٧.		anization	(, =	organization (described on lines 1-9		sted in your		ion in col	organizati (i) organiz	ed in the		port	
				above or IRC section		document?		r support?	US	2			
				(see instructions))	Yes	No	Yes	No	Yes	No			
				<u> </u>						<del>  </del> -	<del>.</del>		
		<del></del> -											
										-			
Tot	al												

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not 131,949. 107,018. 119,420. 178,434. 124,289. 661,110. include any "unusual grants") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 131,949. 107,018. 119,420. 178,434. 124,289. 4 Total. Add lines 1 - 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 661,110. 6 Public Support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total (a) 2004 131,949. 107,018. 119,420. 178,434. 124,289. 661,110. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 2,013. 2,114. 472. 112. 5,634. 923. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 666,744. 11 Total support. Add lines 7 through 10 10,220. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 99.15 14 14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) 98.88 15 % 15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f 16a 33 1/3% support test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and  $\triangleright X$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Schedule A (Form 990 or 990-EZ) 2008

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Section A. Public Support			, · · · · · · · · · · · · · · · · · · ·			
Calendar year (or fiscal year beginning in)▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not include any "unusual grants")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to						
the organization without charge				<del> </del>		
6 Total. Add lines 1 · 5			-	<del> </del>		
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975	·					
c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11, and 12)		1	1	<u> </u>	501( )(0)	1
14 First five years. If the Form 990 is for t	ne organization	's tirst, second, thi	ra, tourth, or titth t	ax year as a secti	on 501(c)(3) organi	zation,
check this box and stop here	O					
Section C. Computation of Public					lar l	
15 Public support percentage for 2008 (lin			column (†))		15	
16 Public support percentage from 2007 S			<u> </u>		16	
Section D. Computation of Invest					14-	
17 Investment income percentage for 200	•				17	
18 Investment income percentage from 20					18	
19a 33 1/3% support tests - 2008. If the o						1 / Is not
more than 33 1/3%, check this box and						. ▶∟
<b>b 33 1/3% support tests - 2007.</b> If the o	-					. —
line 18 is not more than 33 1/3%, chec						<b>?</b>  -
20 Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check t		nstructions hedule A (Form 99	

## Schedule D (Form 990).

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

HAWAII ACADEMY OF SCIENCE

Employer identification number 99-6006863

Schedule D (Form 990) 2008

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accoi	unts. Con	nplete if th	ne
	organization answered "Yes" to Form 990, Part IV, line	e 6.				
		(a) Donor advised funds	(b) Fur	nds and oth	her accou	nts
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised fu	nds			
	are the organization's property, subject to the organization's	exclusive legal control?			Yes	☐ No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds may be used	ylno t			
	for charitable purposes and not for the benefit of the donor of	or donor advisor or other impermissible private	<u>benefit</u>	?	Yes	No No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part IV	/, line 7	•		
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).				
	Preservation of land for public use (e.g., recreation or p	pleasure) Preservation of an historical	ally imp	ortant land	l area	
	Protection of natural habitat	Preservation of certified his	storic st	tructure		
	Preservation of open space					
2	Complete lines 2a-2d if the organization held a qualified cons	servation contribution in the form of a conserva	tion eas	sement on	the last d	ay
	of the tax year.		·····			
				Held at t	he End of	the Year
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c	ļ		
d	d Number of conservation easements included in (c) acquired after 8/17/06					
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable					
	year ▶					
4	Number of states where property subject to conservation ea	<del>-</del>				
5	Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and					
	enforcement of the conservation easements it holds?					∟ No
6	Staff or volunteer hours devoted to monitoring, inspecting, a					
7	Amount of expenses incurred in monitoring, inspecting, and					
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4)	(B)(I)		٦.,	<b></b>
_	and section 170(h)(4)(B)(II)?					
9	In Part XIV, describe how the organization reports conservati					
	include, if applicable, the text of the footnote to the organizar	tion's financial statements that describes the o	rganiza	ition's acco	ounting to	•
Day	conservation easements.  † III Organizations Maintaining Collections o	f Art Historical Transuras or Other	Simi	lar Acco	te	<del></del>
Fai	Complete if the organization answered "Yes" to Form		Jiiiiii	iai Asse	ıs.	
	Complete if the organization answered Tes to Form	550, 1 art 14, mrs 0				
10	If the organization elected, as permitted under SFAS 116, no	t to roport in its rovenue statement and balance	a chaal	t works of s	art bietori	na!
, ,	treasures, or other similar assets held for public exhibition, e	•				
	the footnote to its financial statements that describes these	·	51 4100,	provide, in	Tart Miv,	ine text of
h	If the organization elected, as permitted under SFAS 116, to		eet wo	rks of art h	nistorical t	reasures
U	or other similar assets held for public exhibition, education, or	•				
	these items	in research in furtherance of positio service, pro	rido tirio	o lollowing	amounts	ciating to
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$		
	(ii) Assets included in Form 990, Part X		•	\$ \$		
2	If the organization received or held works of art, historical tre	asures or other similar assets for financial cain				
-	the following amounts required to be reported under SFAS 1	_	, p. 0 110			
а	Revenues included in Form 990, Part VIII, line 1	To rolding to those holls.	•	\$		
	Assets included in Form 990, Part X		•	\$		
J	Additional management of the ago, Falt A		-	*	<del></del>	

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Sche	dule D (Form 990) 2008 HAWAII	ACADEMY OF	SCI	ENCE			9	9-60	06863	Page 2
Par	t III . Organizations Maintaining C	ollections of A	Art, His	torical Tr	easures,	or Oth				
3.	Using the organization's accession and othe	r records, check ar	y of the	following tha	at are a signif	ficant use	e of its colle	ection ite	ms (check	all
	that apply)									
а	Public exhibition		d 🛄	Loan or exc	hange progr	ams				
ь	Scholarly research		е 🗀	Other	_					
c	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ain how ti	hey further t	he organizat	ion's exe	mpt purpos	se in Parl	XIV.	
5	During the year, did the organization solicit of	r receive donations	of art, h	istorical trea	asures, or oth	ner sımıla	r assets		_	
	to be sold to raise funds rather than to be ma								Yes	No_
Par	t IV Trust, Escrow and Custodial		s. Comp	lete if organ	ization answ	ered "Ye	s" to Form	990, Par	t IV, line 9,	or
	reported an amount on Form 990, Pa						·			<del></del> -
1a	Is the organization an agent, trustee, custod	an or other interme	ediary for	contribution	ns or other as	ssets not	Included		_	
	on Form 990, Part X?							L.	Yes	L No
b	If "Yes," explain the arrangement in Part XIV	and complete the t	following	table:						
									Amount	
c	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f	-	-	-
2a	Did the organization include an amount on Fe	orm 990, Part X, lin	e 21?					<u> </u>	Yes	L No
	If "Yes," explain the arrangement in Part XIV.									
Par	t V Endowment Funds. Complete				i					<del> </del>
		(a) Current year	(b) F	Prior year	(c) Two yea	rs back	(d) Three ye	ars back	(e) Four y	ears back
1a	Beginning of year balance				ļ					
b	Contributions		<del></del>							
С	Investment earnings or losses		<del> </del>							
d	Grants or scholarships		ļ	·····						
е	Other expenditures for facilities									
	and programs	<del>,</del>	ļ	······						
f	Administrative expenses		<u> </u>		ļ					
9	End of year balance				<u>l</u>	1				
2	Provide the estimated percentage of the year	r end balance held	as:							
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
С		%								
3a	Are there endowment funds not in the posse	ssion of the organi	zation th	at are held a	and administe	ered for t	he organiza	ation	Γ-	<del></del>
	by								1 1	es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizations	•							3ь	
4	Describe in Part XIV the intended uses of the									
Par			-					<del></del>		<del> </del>
	Description of investment	(a) Cost or basis (invest		1 ''	t or other (other)	(c) D	Depreciation	,	(d) Book	value 
1a	Land					ļ			<del></del>	
b	Buildings						<u> </u>	_		<u>.</u>
С	Leasehold improvements									
d	Equipment									
е	Other									
Total	Add lines 1a-1e. (Column (d) should equal Fo	orm 990, Part X, co	lumn (B),	line 10(c).)				<b></b>		0.

Schedule D (Form 990) 2008

(b) Book value	d of valuation -year market value
Financial derivatives and other financial products	
Closely-held equity interests	
Other	
Total (Col (b) should equal Form 990, Part X, col (B) line 12 ) ▶	
Part VIII Investments - Program Related. See Form 990, Part X, line 13	
	d of valuation: f-year market value
	<u></u>
	······································
Total (Col (b) should equal Form 990, Part X, col (B) line 13 ) ▶	·
Part IX Other Assets. See Form 990, Part X, line 15	(b) Dooleyship
(a) Description	(b) Book value
7 1 1 (O 1	<b>•</b>
Total. (Column (b) should equal Form 990, Part X, col (B) line 15 )  Part X Other Liabilities. See Form 990, Part X, line 25.	
(a) Description of liability (b) Amount	
CREDIT CARD PAYABLE 2,151.	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48. 832053 12-23-08

#### SCHEDULE O (Form 990).

Department of the Treasury Internal Revenue Service

#### **Supplemental Information to Form 990**

► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Name of the organization HAWAII ACADEMY\_OF SCIENCE

Employer identification number 99-6006863

FORM 990, PART VI, SECTION A, LINE 10: THE ORGANIZATION DOES NOT HAVE A
POLICY WHICH REQUIRES THE GOVERNING BODY TO REVIEW THE TAX RETURN BEFORE IT
IS FILED. HOWEVER, THE ORGANIZATION DOES REVIEW THE TAX RETURN ONCE IT HAS
BEEN ISSUED. IN THE FUTURE, THE ORGANIZATION WILL IMPLEMENT A POLICY WHICH
REQUIRES THE GOVERNING BODY TO REVIEW THE TAX RETURN BEFORE IT IS FILED.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
DOCUMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.