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Form 990-PF

Department of the Treasury

Return of Private Foundation

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

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

2009

OMB No 1545-0052

		nue Service NOTE. The foundation may t	e able to use a copy of this		uny requirements.	
For c	alen	lar year 2009, or tax year beginning		, and ending		
G C	heck	all that apply Initial return	Initial return of a fo	rmer public charity	Final retur	n
		Amended return	Address chang	<u> </u>	Name change	
Han	the I	Name of foundation			A Employer identificatio	n number
	ine i sbel.	BANK OF HAWAII CHARIT	ABLE FOUNDAT	ION		
-	suei. Brwis	O /O DANIE OF HALLATT D	EPT 715		99-021046	7
	orint	Number and street (or P O box number if mail is not de		Room/sulte	B Telephone number	
	type	P. O. BOX 3170			808-694-4	540
See	Spec				C if exemption application is	
Instr	uctio	henolulu, HI 96802-3	170		D 1. Foreign organization	. —
	L l				Foreign organizations makes there and attach or a strack to the strack of the str	neeting the 85% test,
H C	_	type of organization X Section 501(c)(3) ex		A!	check here and attach o	computation
			Other taxable private founda		E If private foundation st	
		rket value of all assets at end of year J Accounti	•	Accrual	under section 507(b)(1	** **
			her (specify)		F If the foundation is in a	
		7,405,817. (Part I, colu	mn (d) must be on cash b	oasis.)	under section 507(b)(1	1 1 1
Pa	<u>rt 1</u>	Analysis of Revenue and Expenses (the total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(II) Disbursements for charitable purposes
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received	1,081,059.		N/A	
	2	Check Lifthe foundation is not required to attach Sch. B.				
	3	Interest on savings and temporary cash investments	412.	412.		STATEMENT 1
	4	Dividends and interest from securities	274,301.	274,301.		STATEMENT 2
	5a	Gross rents				
	_	Net rental income or (loss)				
	_			***************************************	<u> </u>	***************************************
e	Va	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all				
Revenue	٠,	assets on line 6a		0.		
ě	_	Capital gain net income (from Part IV, line 2)				
	8	Net short-term capital gain-CEIVED	\$			
	9	Income modifications	13			
	10a	and allowances	<u> </u>			····
		2000 000.0.0000000000000000000000000000	7			
	C	Gross profit or (loss)	-1		ļ	
	11	Other income	1 255 220	074 710		_
	12	Total. Add lines 1 through 12 11, UI	1,355,772.	274,713.		F4 002
	13	Compensation of officers, directors, trustees, etc.	66,011.	12,008.		54,003.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits .				
Ses	16a	Legal fees				<u> </u>
ĕ	b	Accounting fees STMT 3	1,850.	555.		1,295.
Operating and Administrative Expens	C	Other professional fees				
9	17	Interest				
컐	18	Taxes STMT 4	5,199.	0.		0.
ist	19	Depreciation and depletion				
į	20	Occupancy				
Adı	21	Travel, conferences, and meetings				
ğ	22	Printing and publications			<u> </u>	
e E	23	Other expenses STMT 5	15,822.	0.	 	15,822.
ţi		Total operating and administrative	25/522.			1
era	24	•	88,882.	12,563.		71,120.
Õ	0.5	expenses. Add lines 13 through 23	1,222,250.	12,303.	<u>' </u>	1,222,250.
_	25	Contributions, gifts, grants paid	1,222,230.			1,222,2300
	26	Total expenses and disbursements.	1 211 122	12 562		1,293,370.
	 _	Add lines 24 and 25	1,311,132.	12,563.	<u> </u>	1,233,370.
	27	Subtract line 26 from line 12:	44 640			1
	1	Excess of revenue over expenses and disbursements	44,640.	262 152		
	1	Net investment income (if negative, enter -0-)		262,150.		_
		Adjusted net income (if negative, enter -0-)		<u> </u>	N/A	

923501 02-02-10 LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions. Form **990-PF** (2009)

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1011113	OF TAWALL, DEFI			321040/ raye 2
Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	116.	13,541.	13,541.
2	Savings and temporary cash investments	195,094.	226,309.	226,309.
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			
"	disqualified persons			
,	Other notes and loans receivable			
'		į	1	
	Less allowance for doubtful accounts ▶			
Assets o o	Inventories for sale or use		——	
25	Prepaid expenses and deterred charges			
וטרן	Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 6	1,253,476.	1,253,476.	7,165,967.
1	Investments - corporate bonds			
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment basis ▶			***************************************
- 1	Less. accumulated depreciation			
15	Other assets (describe			
'	omer accord (accorded)			
10	Total assets (to be completed by all filers)	1,448,686.	1,493,326.	7,405,817.
		1/440/000.	1/4/3/320.	1,403,017.
	Accounts payable and accrued expenses			
18	F			
Liabilities 15 10 10 10 10 10 10 10 10 10 10 10 10 10	Deferred revenue			
≣ 20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.</u> 21				
- 22	Other liabilities (describe)			
1	}			
23	Total liabilities (add lines 17 through 22)	0.	0.	
j	Foundations that follow SFAS 117, check here	j		
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	Unrestricted			
<u>5</u> 25	Temporarily restricted			, ,
8 26	_ ` ` ` `			
בַ	Foundations that do not follow SFAS 117, check here			
<u> </u>	and complete lines 27 through 31.			
Net Assets or Fund Balance: 05 82 22 92 52 92 52 92 92 92 92 93 93 93 93 93 93 93 93 93 93 93 93 93	-	1,448,686.	1,493,326.	
S 28	• • • • • • • • • • • • • • • • • • • •	0.	0.	
SS 29		0.	0.	
# 20		1,448,686.	1,493,326.	
ž 30	Total net assets or fund balances	1,440,000.	1,493,320.	
		1 440 606	1 402 226	
131	Total liabilities and net assets/fund balances	1,448,686.	1,493,326.	
Parl	Analysis of Changes in Net Assets or Fund Ba	lances		
	al net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
	st agree with end-of-year figure reported on prior year's return)		1	1,448,686.
	er amount from Part I, line 27a	•	2	44,640.
3 Oth	er increases not included in line 2 (itemize)		3	0.
4 Add	lines 1, 2, and 3		4	1,493,326.
5 Dec	reases not included in line 2 (itemize)		5	0.
6_Tota	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, coli	ımn (b), line 30 .	6	1,493,326.
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		OF HAWAII,						9	9-021	0467	Page 3
		sses for Tax on In		Income	1/63.4	1000.00	aulead				
		nd(s) of property sold (e.g. or common stock, 200 shs			(B)	- Purc - Dona	quired hase ation	(c) Date (mo , c	acquired day, yr)		te sold lay, yr)
1a					L						
b NO	NE				<u> </u>		<u> </u>				
<u>c</u>					 					 	
d					├					ļ	
	1				<u> </u>						
(e) Gross sales price	(1)	epreciation allowed (or allowable)		t or other basis opense of sale					Gain or (loss is (f) minus		
8											
<u>b</u>	ļ										
<u>C</u>											
<u>d</u>	 										
Complete only for accets chave	00 0010 10 1	column (h) and owned by t	he foundation	on 12/31/60				D Counc /	Cal (b) cals	minus	
Complete only for assets shown				cess of col (i)			CO	i) Gairis (i l (k), but	Col (h) gain not less tha	n -0-) or	
(I) F M.V as of 12/31/69	\	j) Adjusted basis as of 12/31/69		col (j), if any				Losses	(from col	(h)) ·	··-
8	 										
<u>b</u>	 										
d	 										
6											
. <u> </u>	<u> </u>	∫ If gain, also enter	un Doubl Juno "		7						
2 Capital gain net income or (net c	apital loss)		in Part I, line	7		2					
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8	•	• •	d (6).		3						
If (loss), enter -0- in Part I, line 8					لب	3_	<u> </u>				
Part V Qualification L	Inder S	ection 4940(e) for	Reduced	lax on Net	Inv	estn	nent in	come			
(For optional use by domestic privat	e foundation	ons subject to the section 4	1940(a) tax on	net investment ir	ncome)					
If section 4940(d)(2) applies, leave t	this part bla	ank.									
Was the foundation liable for the sec	ntion 4040	tav an the distributable som	aunt of any un	ar in the base no	20d2					☐ Vac	X No
				•	nou?	•	•	•	• ••	163	[ZZ] 140
If "Yes," the foundation does not qua 1 Enter the appropriate amount in					es.						
(a)	1	(b)	-		(c)					(d)	
Base periód years Calendar year (or tax year beginn	ino in)	Adjusted qualifying dis	tributions	Net value of no			-use assets	s	Distri (col. (b) di	butión ratio vided by co	l. (c))
2008		1,61	4,109.		7	, 88	7,650	5.			04637
2007			2,480.				7,21			.1	95598
2006			4,415.		8	, 55	3,680	5.		.0	70661
2005		1,24	2,955.				9,65			. 1	54411
2004		2,73	8,320.		7	,57	7,589	9.		. 3	61371
2 Total of line 1, column (d)								. 2	ļ	9	86678
3 Average distribution ratio for the								- 1		_	
the foundation has been in exist	ence if less	than 5 years						3	 	. 1	97336
										<i>c</i> 105	240
4 Enter the net value of noncharita	ble-use as:	sets for 2009 from Part X,	line 5 .			•		4		6,105	,349.
5 Multiply line 4 by line 3								5		1.204	,805.
o Montply time 4 by fille 3						•		· - <u>*</u> -	 		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
6 Enter 1% of net investment inco	ma /1% of	Part L line 27h)						6		2	,622.
or not invostitions lilev	(170 01	· · · · · · · · · · · · · · · · · · ·			• •	••	- ••	_ "	 		
7 Add lines 5 and 6								7	<u> </u>	1,207	<u>,4</u> 27.
8 Enter qualifying distributions fro	m Part XII	line 4						8		1,293	,370.
If line 8 is equal to or greater tha								•			
See the Part VI instructions.	<i>7</i> , Ul		. o, and oump	-o.o anat part usii	.y u i	/v tax					
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Pa	art 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)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.BOH.COM/ABOUT/COMMUNITY/471 1426.ASP			
14	The books are in care of ▶ BANK OF HAWAII Telephone no ▶808-69		540	
	Located at ► 130 MERCHANT STREET, HONOLULU, HI ZIP+4 ► 96	<u>813</u>		
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	N	/A	
Pε	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
18	During the year did the foundation (either directly or indirectly)	1		
	(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)	1		
	a disqualified person?	-		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1 ,		ŀ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	ļ		
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)) :		
t	ı 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)?	1b		X
	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 2009?	10		X
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	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	:	1	
	before 2009?			ŀ
	If "Yes," list the years			
t	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	1		
	statement - see instructions.) N/A	2b	ļ	ļ
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<u> </u>			
38	a 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			
t	b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after	1		
	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			1
	of holdings acquired by grit or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	Ì		Ì
	Form 4720, to determine if the foundation had excess business holdings in 2009.)	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	42		X
t	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			4.
_	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b	<u> </u>	X
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Total number of other employees paid over \$50,000

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All other program-related investments. See instructions

Total. Add lines 1 through 3

P	art X Minimum investment Return (All domestic foundations must	complete this part	. Foreign foun	dations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, et	c , purposes		٠.	
а	Average monthly fair market value of securities	., .	İ	18	5,910,857. 287,467.
b	Average of monthly cash balances			1b	287,467.
C	Fair market value of all other assets			16	
d	Total (add lines 1a, b, and c)			1d	6,198,324.
8					
	1c (attach detailed explanation)		0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	6,198,324.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	instructions)		4	92,975.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Pa			5	6,105,349.
6	Minimum investment return. Enter 5% of line 5		<u>.</u> [6	305,267.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	foundations an	d certain	
1	Minimum investment return from Part X, line 6			1	305,267.
28	Tax on investment income for 2009 from Part VI, line 5	1	2,622.		
b	Income tax for 2009 (This does not include the tax from Part VI)		·		
C	Add lines 2a and 2b			2c	2,622.
3	Distributable amount before adjustments Subtract line 2c from line 1		Ī	3	2,622. 302,645.
4	Recoveries of amounts treated as qualifying distributions		Ī	4	0.
5	Add lines 3 and 4		İ	5	302,645.
6	Deduction from distributable amount (see instructions)		. [6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII	, line 1	Ī	7	302,645.
P	art XII Qualifying Distributions (see Instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	es			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	1,293,370.
þ					0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,	etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the				
а	Suitability test (prior IRS approval required)		•	3a	
b	Cash distribution test (attach the required schedule)	•		3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and F	art XIII, line 4		4	1,293,370.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	ent			
	income Enter 1% of Part I, line 27b			5	2,622. 1,290,748.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	1,290,748.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when	calculating whether	the foundation (qualifies for	the section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7		·		302,645.
2 Undistributed income, if any, as of the end of 2009			······································	
a Enter amount for 2008 only			0.	,
b Total for prior years	•••••••••••••••••••••••••••••••••••••••		***************************************	
		0.		
3 Excess distributions carryover, if any, to 2009		" .	· · · · · · · · · · · · · · · · · · ·	
a From 2004 2,325,229.				,
b From 2005 830,592.			,	
£ From 2006 180,950.				
d From 2007 1,227,888.				
e From 2008 1,224,965.				
f Total of lines 3a through e	5,789,624.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 1,293,370.				
a Applied to 2008, 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 2009 distributable amount	,			302,645.
e Remaining amount distributed out of corpus	990,725.	######################################	*************	
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,780,349.			
b Prior years' undistributed income. Subtract				
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				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2009 Subtract				······································
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				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 2004				
not applied on line 5 or line 7	2,325,229.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	4,455,120.	·	,	
10 Analysis of line 9				
a Excess from 2005 830,592.				,
b Excess from 2006 180,950.				
c Excess from 2007 1,227,888.				
d Excess from 2008 1,224,965.			,	<i>'</i>
e Excess from 2009 990,725.				

· BANK OF HAWAII CHARITABLE FOUNDATION

Part XIV Private Operating F	N OF HAWAII		I-A guestion Q\		10467 Page 10
· · · · · · · · · · · · · · · · · · ·			-A, question e)	N/A	
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective for	•	•	in caction	4942(j)(3) or 49	942(j)(5)
b Check box to indicate whether the found2 a Enter the lesser of the adjusted net	Tax year	ig louillation described	Prior 3 years	4342()/(3) 01 4.	1
income from Part I or the minimum	(a) 2009	(b) 2008	(t) 2007	(d) 2006	(e) Total
investment return from Part X for	(5) 2000	(5)	(,,	(-)	
each year listed					1
b 85% of line 2a			 		1
© Qualifying distributions from Part XII,			<u> </u>		
line 4 for each year listed					
d Amounts included in line 2c not		······································			
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon. a "Assets" alternative test - enter		ļ		j	
(1) Value of all assets		1			
(2) Value of assets qualifying under section 4942(j)(3)(B)(l)					
b "Endowment" alternative test - enter	ļ	 	 	 	
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:			 		
(1) Total support other than gross		1			
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from		<u> </u>	1		
an exempt organization				<u> </u>	
(4) Gross investment income					<u> </u>
Part XV Supplementary Info			if the foundation	ı had \$5,000 or m	ore in assets
at any time during t	the year-see the	instructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			tributions received by the	foundation before the clo	ose of any tax
year (but only if they have contributed r	nore than \$5,000) (See s	section 507(a)(2))			
NONE					
b List any managers of the foundation when other entity) of which the foundation had			(or an equally large porti	on of the ownership of a p	partnership or
NONE	a a lovo or greater mitere				
	0 0	O-tttt			
2 Information Regarding Contribut			-	and annual constitution of the	usata far funda. If
Check here the foundation of the foundation of the foundation makes gifts, grants, etc.					
a The name, address, and telephone num				ompioto komo zu, o, o, un	
a the hame, address, and telephone hun	inet of the beison to who	in applications should be	e auulesseu.		
SEE STATEMENT 8					
b The form in which applications should I	pe submitted and informa	ation and materials they s	should include.		
c Any submission deadlines:			····	· · · · · · · · · · · · · · · · · · ·	
d Any restrictions or limitations on award	s, such as by geographic	aı areas, charitable fields	, kinds of institutions, or	other factors.	

Form 990-PF (2009) C/O BANK OF HAWAII, DEPT 715

99-0210467 Page 11

Recipient If recipient is an individual show any relationship to any doundation manager or substantial contributor SEE STATEMENT GRANT-1 Recipient If recipient is an individual show any relationship to any foundation manager or substantial contributor Foundation status of recipient Purpose of grant or contribution	Amount
a Paid during the year	
a Paid during the year	222,250.
SEE STATEMENT GRANT-1	222,250.
	222,250.
NONE NONE	
	0.

Form 990-PF (2009) C/O BANK OF				99-0)210467 Page 1
Part XVI-A Analysis of Income-P					
Enter gross amounts unless otherwise indicated		ousiness income		y section 512, 513, or 514	(8)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue	code	Amount	code	Amount	function income
8					
b	J J				
C					
d					
•					
,					
g Fees and contracts from government agencies					
			-+		
2 Membership dues and assessments					
3 Interest on savings and temporary cash			14	412	
investments				412.	
4 Dividends and interest from securities			14	274,301.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			1		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
D Gross profit or (loss) from sales of inventory	 -				
•					
1 Other revenue.					
<u> </u>					
b					
C			-		
d					
e					
2 Subtotal Add columns (b), (d), and (e)		().	274,713.	
13 Total. Add line 12, columns (b), (d), and (e)				13	274,713
See worksheet in line 13 instructions to verify calculat	ions.)				
Part XVI-B Relationship of Activi	ities to the Accon	nplishment of	Exempt P	urposes	
Line No. Explain below how each activity for wh	ich income is reported in o	column (e) of Part XV	/I-A contributed	importantly to the accom	plishment of
▼ the foundation's exempt purposes (oth	er than by providing fund	s for such purposes)			
					
					
					
					· · · · · · · · · · · · · · · · · · ·
					

C/O BANK OF HAWAII, DEPT 715

P	art XV	Information Re Exempt Organ		To and Transactions an	d Relationships With Nonc	haritable	•	
1	Did th			following with any other organization	described in section 501(c) of		Yes	No
•				ction 527, relating to political organiza				
		ters from the reporting found						
a	(1) C	, ,		mpt organization of		18(1)		х
	• •	asii ther assets			•	18(2)		X
h		transactions				19,57		
		ales of assets to a noncharita	hie evernt organization			16(1)		Х
		urchases of assets from a no	• •	ation		1b(2)		X
		ental of facilities, equipment,	• •	ation		1b(3)		X
	• •	eimbursement arrangements				1b(4)		X
		•			•	15(5)		X
	• •	oans or loan guarantees	mhamhia as fuadralauan ac	Nieltetiene		15(6)	_	X
_		erformance of services or me				10(0)		X
6		ng of facilities, equipment, ma						
0					ys show the fair market value of the goo		et\$,	
					in any transaction or sharing arrangeme	nt, snow in		
٠,١		in (d) the value of the goods,			(4) 0			
a,	Line no	(b) Amount involved		naritable exempt organization	(0) Description of transfers, transactions,	and sharing an	angern	#1US
			1	1/ A				
					<u></u>			
28		•	•	to, one or more tax-exempt organiza	tions described		ГУ	□No
		tion 501(c) of the Code (othe s," complete the following sch	, ,, ,,	1 III SECTION 327 F		Yes		-) IAO
	11 10	(a) Name of or		(b) Type of organization	(c) Description of relat	ionship		
-		N/A	gumzadon	(a) Type of organization	(a) Docompain or roll	- Ionomp		
		21/ 22						
								
							··· -	
			······································					
	Linder	penalties of parties I declare that I	have examined this return inclu	ding accompanying schedules and statemen	nts, and to the best of my knowledge and beller	it is true com		
				oing accompanying scriedules and statemer based on all information of which preparer ha		, it is use, cone	~ ι,	
į		Kar J.	(/	داسط 1017	- TREASURER			
.	<u></u>	anature of officer						
Sign Here	▼ SI	gnature of officer or trustee		Date	Title Check if P	ronometo leterati	vina a	mber
돑	. s	Preparer's	had Ar	OCIT (1 4 2010 Self-	reparer's identif		HOG!
š	Paid Preparer's Use Only	signature	hurdy Ot		2010 employed	• 00003	713	
	Pag Seg S		OF CHAWAII		EIN ►			
	๕๖		3170					
		address, and ZIP code HONC	LULU, HI 968	302-3170	Phone no.			

Form **990-PF** (2009)

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

Department of the Tressury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Employer identification number

BANK OF HAWAII CHARITABLE FOUNDATION

С	O BANK OF HAWAII, DEPT 715	99-0210467
Organization type (check		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
, -	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F	Rule. See instructions.
General Rule		
_	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in aplete Parts I and II.	money or property) from any one
Special Rules		
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re 0(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of th n (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.	
aggregate contri	11(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one con ibutions of more than \$1,000 for use exclusively for religious, charitable, scientific, literar of cruelty to children or animals. Complete Parts I, II, and III.	
contributions for If this box is che purpose. Do not	P1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of the exclusively for religious, charitable, etc., purposes, but these contributions did not excled, enter here the total contributions that were received during the year for an exclusive templete any of the parts unless the General Rule applies to this organization because able, etc., contributions of \$5,000 or more during the year.	aggregate to more than \$1,000. ively religious, charitable, etc.,
but it must answer "No"	n that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on lin filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	
LHA For Privacy Act an for Form 990, 990-	,	e B (Form 990, 990-EZ, or 990-PF) (2009

Name of organization
BANK OF HAWAII CHARITABLE FOUNDATION
C/O BANK OF HAWAII, DEPT 715

Employer identification number

99-0210467

Part I	Contributors (see instructions)				
(a) No.	(b) Name, address, and ZiP + 4	(c) Aggregate contributions	(d) Type of contribution		
1	ALLAN R. LANDON P.O. BOX 3170 HONOLULU, HI 96802-3170	\$5,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
2	BANK OF HAWAII P.O. BOX 3170 HONOLULU, HI 96802-3170	\$ 900,000.	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)		
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
3	HMSA P.O. BOX 3799 HONOLULU, HI 96812-3799	ss,000.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution		
4	BEAR CREEK INC. 220 SOUTH KING STREET JACKSON, WY 83001	ss	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 Payroli Noncash (Complete Part II if there is a noncash contribution.)		

FORM 990-PF INTEREST ON SAVI	INGS AN	ND TEMI	PORARY CA	ASH IN	VESTMENTS	STATEME	NT	1
SOURCE						AMOU	NT	
BANK OF HAWAII ACCOUNT NO. 13	3511440)3					41	2.
TOTAL TO FORM 990-PF, PART I,	LINE	3, COI	LUMN A				412	2.
FORM 990-PF DIVIDEND	OS AND	INTERI	EST FROM	SECUR	ITIES	STATEME	NT	
SOURCE	_	GROSS	AMOUNT		TAL GAINS	COLUMN		
BANK OF HAWAII ACCOUNT NO. 135114403		:	274,301.		0.	27	4,30	1.
TOTAL TO FM 990-PF, PART I, I	LN 4		274,301.		0.	27	4,30	1.
FORM 990-PF	ACC	COUNTI	NG FEES			STATEME	NT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTEI NET INCOM	CHAR	D) RITAB RPOSE	
TAX PREP FEES		1,850.		555.			1,29	5.
TO FORM 990-PF, PG 1, LN 16B	-	1,850.		555.			1,29	5 .
FORM 990-PF		TAX	ES	-		STATEME	ENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-		CHAP	D) RITAB RPOSE	
2008 FEDERAL EXTENSION PAYMENT 2009 3RD QTR ESTIMATED FED	:	3,000.		0.				0.
EXCISE TAXES		889.		0.				0.
2009 4TH QTR ESTIMATED FED EXCISE TAXES	:	1,310.		0.				0.
TO FORM 990-PF, PG 1, LN 18	Į	5,199.		0.		_ 		0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
DCCA ANNUAL REPORT FILING FEES GRANT AWARD CEREMONY	5.		0.	5.
EXPENSES	5,119.		0.	5,119.
2009 AUW FUNDRAISING EXPENSES	10,654.		0.	10,654.
AMERICAN SAMONA FUNDRAISING EXPENSES	44.		0.	44.
TO FORM 990-PF, PG 1, LN 23	15,822.		0.	15,822.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6
DESCRIPTION			BOOK VALUE	FAIR MARKET VALUE
BANK OF HAWAII CORP			1,253,476.	7,165,967.
TOTAL TO FORM 990-PF, PART II	I, LINE 10B		1,253,476.	7,165,967.

FORM 990-PF PART TRI		r of officers, D FOUNDATION MANA		STATI	EMENT 7
NAME AND ADDRESS		TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EVDENCE
DONNA A. TANOUE P.O BOX 3170, HONOLULU,		PRES/DIR 1.00	0.	0.	0.
ALLAN R. LANDON P.O BOX 3170, HONOLULU,		VP/DIR 0.00	0.	0.	0.
STAFFORD J. KIGUCHI P.O BOX 3170, HONOLULU,	HI 96802	VP 0.00	0.	0.	0.
MARK A. BURAK P.O BOX 3170, HONOLULU,		DIRECTOR 0.00	0.	0.	0.
CYNTHIA G. WYRICK P.O BOX 3170, HONOLULU,	ні 96802	SECRETARY 0.00	0.	0.	0.
TERRY T. SASAMURA P.O BOX 3170, HONOLULU,	ні 96802	ASSISTANT SECR		0.	0.
MARY G.F. BITTERMAN P.O BOX 3170, HONOLULU,		DIRECTOR 0.00	0.	0.	0.
MICHAEL J. CHUN P.O BOX 3170, HONOLULU,	ні 96802	DIRECTOR 0.00	0.	0.	0.
CLINTON R. CHURCHILL P.O BOX 3170, HONOLULU,	ні 96802	DIRECTOR 0.00	0.	0.	0.
DAVID A. HEENAN P.O BOX 3170, HONOLULU,	ні 96802	DIRECTOR 0.00	0.	0.	0.
ROBERT A. HURET P.O BOX 3170, HONOLULU,	HI 96802	DIRECTOR 0.00	0.	0.	0.

BANK OF HAWAII CHARITABLE FOUND	PATION C/O		99-0	210467
MARTIN A. STEIN	DIRECTOR			
P.O BOX 3170, HONOLULU, HI 96802	0.00	0.	0.	0.
	DIRECTOR			
P.O BOX 3170, HONOLULU, HI 96802	0.00	0.	0.	0.
BARBARA J. TANABE	DIRECTOR			
P.O BOX 3170, HONOLULU, HI 96802	0.00	0.	0.	0.
ROBERT W. WO, JR.	DIRECTOR		_	
P.O BOX 3170, HONOLULU, HI 96802	0.00	0.	0.	0.
BANK OF HAWAII	AGENT			
130 MERCHANT ST. HONOLULU, HI 96813	2.00	66,011.	0.	0.
PETER S. HO	DIRECTOR			
P.O BOX 3170, HONOLULU, HI 96802	0.00	0.	0.	0.
KENT LUCIEN	TREASURER/DIR			
P.O BOX 3170, HONOLULU, HI 96802	0.00	0.	0.	0.
S. HAUNANI APOLIONA	DIRECTOR		_	_
P.O BOX 3170, HONOLULU, HI 96802	0.00	0.	0.	0.
ALTON T. KUIOKA	DIRECTOR		•	•
P.O BOX 3170, HONOLULU, HI 96802	0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	5, PART VIII	66,011.	0.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION STATEMENT PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

SEE STATEMENT GUIDE-1

TELEPHONE NUMBER NAME OF GRANT PROGRAM

SEE STATEMENT GUIDE-1

FORM AND CONTENT OF APPLICATIONS

SEE STATEMENT GUIDE-1

ANY SUBMISSION DEADLINES

SEE STATEMENT GUIDE-1

SEE STATEMENT GUIDE-1

RESTRICTIONS AND LIMITATIONS ON AWARDS

SEE STATEMENT GUIDE-1

BANK OF HAWAII CHARITABLE FOUNDATION EIN #99-0210467 LIST OF SUBSTANTIAL CONTRIBUTORS FORM 990-PF, PART VII-A, LINE 10 12/31/2009

The following persons became substantial contributors to the foundation during the year.

Name of Contributor	Address
Bank of Hawaii	P.O. Box 3170, Honolulu, HI 96802
Allan R. Landon	P.O. Box 3170, Honolulu, HI 96802
HMSA	P.O. Box 3799, Honolulu, HI 96812
Bear Creek Inc.	P.O. Box 3170, Honolulu, HI 96802

Bank of Hawaii Charitable Foundation

Charitable Contributions

Purpose:

The goal of Bank of Hawaii Charitable Foundation is to provide contributions to non-profit organizations which are working to improve the quality of life and well-being of people in the communities and markets we serve, through collaborative partnerships and sustainable initiatives. Our funding addresses basic needs for human services that support those in fragile circumstances who are victims of a changing economic climate.

The Bank of Hawaii Charitable Foundation prefers to give more meaningful grants rather than spreading the income in smaller amounts to more organizations. Focus and priority are given to: Food, Clothing, Shelter, Financial Literacy, Education (i.e. tuition aid, school expansion, school programs, etc.), Workforce Development and Arts & Culture (programs impacting large numbers of individuals under the age of 18).

The Bank of Hawaii Charitable Foundation is seeking partners who evidence strong fiscal management through conservative, managed growth and who have evidenced a healthy record of successful grant/contract management. Programs and/or projects that involve partners and collaboration with other nonprofit organizations are especially appealing. The Foundation is committed to full and objective review of funding requests received. Bank of Hawaii Charitable Foundation will accept requests from well-established organizations with multiple and dedicated sources of revenue.

Types of Contributions:

Operational, program and/or project funds (Large Capital projects costing \$500,000 or more are not generally funded and are reviewed on a "case-by-case" basis.)

Deadline Dates:

Proposals must be postmarked by the 15th of January, April, July, and October

Requests are limited to one per year per organization.

Eligibility

Grant proposals are accepted from well-established qualified tax-exempt charitable organizations with multiple and dedicated sources of revenue in the State of Hawaii and from those Pacific Islands which we serve. (Exceptions are made on revenue requirements for those charities serving residents in rural areas having limited access.) Bank of Hawaii Charitable Foundation gives priority to the following purposes:

- Affordable Housing
- Community/Human Services
 - o Food
 - o Clothing
 - o Shelter
 - o Financial literacy
 - o Education
 - o Workforce development
 - o Community childcare services
 - o Health
 - Social services
- Revitalization/Stabilization: Primarily supporting low to moderate income areas and activities that help to attract and retain businesses and residents
- Economic development to finance small businesses and small farms

NOTE: Bank of Hawaii Charitable Foundation <u>will invite</u> those charities and organizations who are loyal partners with whom we have collaborated with in the past but who do not serve our current focus and priorities, by extending a Request For Proposal (RFP) to them. RFP's will be made available throughout the year to these partners.

Procedures

Please allow approximately 60 days for processing from the date a COMPLETED proposal is received. Requests for charitable contributions must contain the following information:

- Completed Funding Request Cover Sheet (see reverse of brochure).
- A one-page executive summary which includes two items: 1) a brief summary of the proposal (3-5 sentences), and 2) a brief overview of the organization (3-5 sentences).
- A proposal (not to exceed 3 pages) summarizing a <u>brief</u> history and mission of the organization, the contribution request, anticipated outcome or goal, and timeline.
- Dated detailed revenue and expense budget for the organization's current fiscal year.
- Dated Financial Statements (Balance Sheet and Income Statement).
- A budget for the program/project, including proposed funding resources.
- Copy of the IRS 501(c) (3) letter.
- Current List of Board of Directors and their affiliations.
- If applicable, the Bank of Hawaii branch or department where the organization holds its accounts.
- Names of Bank of Hawaii employees serving as Directors on the organization's Board.
- One copy of the proposal.

<u>PLEASE NOTE</u>: All of the above must be submitted before a proposal is considered COMPLETE and is accepted as received.

Submit one copy of the proposal to: Bank of Hawaii Charitable Foundation Foundation Administration #758 P. O. Box 3170 Honolulu, Hawaii 96802-3170.

Contact Information

Elaine Moniz, Trust Specialist Telephone: (808) 694-4944 Email: elaine.moniz@boh.com

Flora Williams, Assistant Vice President

Telephone: (808) 694-4393 Email: flora.williams@boh.com

Neighbor Islands and Guam: 1-800-272-7262

Fax: (808) 694-4006

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Aha Punana Leo 96 Puuhonu Place Hilo, Hi 96720	Aha Nuukia Residential Professional Development Training to increase professional competencies in school curriculum development, peer communications, etc.	\$2,500.00
Aloha Harvest 3599 Waialae Avenue, Room 23 Honolulu, HI 96816	General operating support for capacity building	\$1,000.00
Aloha United Way 200 North Vineyard Blvd, Suite 700 Honolulu, HI 96817-3938	Distribution for 2008 campaign	\$125,000.00
Aloha United Way 200 North Vineyard Blvd, Suite 700 Honolulu, HI 96817-3938	Distribution for 2008 campaign	\$62,500.00
Aloha United Way 200 North Vineyard Blvd, Suite 700 Honolulu, HI 96817-3938	Distribution for 2008 campaign	\$62,500.00
American Cancer Society, Hawaii Pacific 2370 Nuuanu Avenue Honolulu, HI 96817	Guam Relay for Life	\$4,000.00
American Red Cross, Hawaii Chapter 4155 Diamond Head Road Honolulu, HI 96816	Contributions for the 2009 Charity Walk	\$35,000.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
American Samoa Community College c/o American Samoa College Foundation P.O. Box 2609 Pago Pago, AS 96799 American Samoa	Back to Work Program	\$5,000.00
Big Island Mediation Inc dba West Hawaii Mediation Center P.O. Box 7020 Kamuela, HI 96743	2009 Monty Richards Hawaii Island Community Award	\$5,000.00
Bishop Museum 1525 Bernice Street Honolulu, HI 96817	Hawaiian Hall Restoration Project	\$25,000.00
Boys & Girls Club of Hawaii 1523 Kalakaua Avenue, Suite 202 Honolulu, HI 96826	Pa'ani Mei Youth Music Program at windward clubhouse	\$5,000.00
Catholic Charities Hawaii 1822 Keeaumoku Street Honolulu, HI 96822	Acquisition and Renovation of Property	\$25,000.00
Chaminade University of Honolulu 3140 Waialae Avenue Honolulu, HI 96816-1578	Renovations and Expansion of Science Building	\$15,000.00
Child & Family Service 91-1841 Fort Weaver Road Ewa Beach, HI 96706-1909	Programs and operating support	\$10,000.00
Child & Family Service 91-1841 Fort Weaver Road Ewa Beach, HI 96706-1909	10th Anniversary Campaign to Rebuild Domestic Abuse Shelter Facility	\$25,000.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Commonwealth Cancer Association N-16 in Navy Hill P.O. Box 501601 Salpan, MP 96950	Marianas March Against Cancer	\$1,000.00
Community Links Hawaii 1003 Bishop Street, Suite 2605 Honolulu, HI 96813	Network building, help desk and project development services	\$5,000.00
Economic Development Alliance of Hawaii 737 Bishop Street, Suite 2040 Honolulu, HI 96813	Agricultural branding and education	\$2,500.00
Entrepreneurs Foundation of Hawaii 1000 Bishop Street, Suite 902 Honolulu, HI 96813	Operational Support	\$1,000.00
Family Programs Hawaii 680 Ala Moana Blvd, Suite 200 Honolulu, HI 96813-5406	Volunteer Management Program	\$5,000.00
Family Promise of Hawaii 69 N. Kainalu Drive Kailua, HI 96734	Contributions for the 2009 Charity Walk	\$35,000.00
Family Support Services of West Hawaii 75-127 Lunapule Road, Suite 11 Kailua-Kona, HI 96740	Rainbow Connection: Volunteers in Support of Big Island Families	\$5,000.00
Feed My Sheep, Inc. P.O. Box 847 Puunene, HI 96784	Program support	\$11,400.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Friendly Isle United Way c/o Molokai Community Service Council P. O. Box 2047 Kaunakakai, HI 96748	First, Second & Third Quarter Pledge Pymts for 2007 Pledge	\$3,750.00
Friendly Isle United Way c/o Molokai Community Service Council P. O. Box 2047 Kaunakakai, HI 96748	Distribution for 2008 campaign	\$7,500.00
Friendly Isle United Way c/o Molokai Community Service Council P. O. Box 2047 Kaunakakai, HI 96748	Distribution for 2008 campaign	\$3,750.00
Friendly Isle United Way c/o Molokai Community Service Council P. O. Box 2047 Kaunakakai, HI 96748	Distribution for 2008 campaign	\$3,750.00
Friends of the Children's Justice Center of East Hawaii P. O. Box 6908 Hilo, HI 96720	2009 Monty Richards Hawaii Island Community Award	\$5,000.00
Gregory House Programs 770 Kapiolani Blvd., Suite 503 Honolulu, HI 96813	Shelter Plus Care Housing Program	\$2,000.00
Guam Educational Radio Foundation, KPRG-89.3FM UOG Station, University of Guam Mangilao, Guam 96923 None	Initial progamming start up	\$2,500.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Hale Mahaolu 200 Hina Avenue Kahului, HI 96732	Develop affordable housing and support facilities for the elderly in Kihei, Maui	\$25,000.00
Haleakala Waldorf School 4160 Lower Kula Road Kula, HI 96790	2009 Mike Lyons Memorial Award	\$10,000.00
Hanahauoli School 1922 Makiki Street Honolulu, HI 96822	Malama la Hanahauoli Capital Project: Phase III	\$15,000.00
Hawaii Alliance of Nonprofit Organizations P. O. Box 240382 Honolulu, HI 96824-0382	Statewide workshops on Budgeting Techniques for Nonprofits: A Hands-On-Training	\$5,000.00
Hawaii Branch of the International Dyslexia Association 705 South King Street, Suite 206 Honolulu,, HI 96813	The Odyssey Project, including teacher training, professional development, and tutoring	\$5,000.00
Hawaii Community Foundation FBO Kawakami Family Fund 1164 Bishop Street, Suite 800 Honolulu, HI 96813	Kawakami Family Fund in memory of Keiji Kawakami	\$1,000.00
Hawaii Council for the Humanities 3599 Waialae Avenue, Suite 23 Honolulu, HI 96816	Program support for Hawaii History Day	\$2,500.00
Hawaii Foodbank, Inc. 2611-A Kilihau Street Honolulu, HI 96819	To assist with families in need during the holiday season.	\$10,000.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Hawaii High School Athletic Association 1202 Prospect Street, #A201 Honolulu, HI 96822-2625	Athletic programs for 2009-2010 school year for Title 1 High Schools	\$25,000.00
Hawaii HomeOwnership Center 560 N. Nimitz Highway, Ste. 213 Honolulu, HI 96817	Financial budgeting and literacy seminars to provide education and counseling services to achieve and sustain homeownership.	\$10,000.00
Hawaii Hotel Industry Foundation 2270 Kalakaua Ave. Suite 1506 Honolulu, HI 96815	Kauai Visitor Industry Charity Walk	\$1,575.00
Hawaii Island United Way P.O. Box 745 Hilo, HI 96721-0745	Distribution for 2008 campaign	\$26,500.00
Hawaii Island United Way P.O. Box 745 Hilo, HI 96721-0745	Distribution for 2008 campaign	\$13,250.00
Hawaii Island United Way P.O. Box 745 Hilo, HI 96721-0745	Distribution for 2008 campaign	\$13,250.00
Hawaii Nature Center 2131 Makiki Heights Drive Honolulu, HI 96822	Capital Campaign for Kauai	\$25,000.00
Hawaii Pacific University 1166 Fort Street Honolulu, HI 96813	In memory of Bill Aull	\$1,000.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Hawaii Public Radio 738 Kaheka Street Honolulu, Hi 96814-3726	Purchase and install back up generator for main broadcast facilities	\$2,500.00
Hawaii State Junior Golf Association Inc P. O. Box 3181 Honolulu, HI 96801	Operational support to enable HSJGA offer golf opportunities to all junior golfers at minimal costs	\$5,000.00
Hawaii Theatre Center 1132 Bethel Street, Suite 1404 Honolulu, HI 96813	Educational programs	\$20,000.00
Hawaiian Community Assets Inc 900 Fort Street Mall, #930 Honolulu, HI 96813	2009 Native Hawaiian NonProfit Award for financial literary training and homeownership counseling	\$5,000.00
Honolulu Theatre for Youth 1149 Bethel Street, Suite 700 Honolulu, HI 96813	Educational Theatre Program for 2009-2010	\$2,500.00
Ho'okako'o Corporation 1035 Univerity Avenue, Suite 201A Honolulu, HI 96826	Conversion of charter schools to incorporate the system of Expanded Learning Time (ELT)	\$5,000.00
Hui o Koolaupoko 629-A Kailua Road, #3 Kailua, HI 96734	Community-Based Ahupua'a Management in Ko'olaupoko	\$1,000.00
Iolani School 563 Kamoku Street Honolulu, HI 96826	Stone Scholarship to cover tuition for high school students for 2009-2010 school year.	\$15,000.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Junior Achievement of Hawaii 1136 Union Mall, Suite 310 Honolulu, HI 96813	Financial Literacy Programs for Oahu and the Big Island in 2009- 2010	\$5,000.00
Kauai Food Bank 3285 Waapa Street, Suite A Lihue, HI 96766	To assist families in need during the holiday season.	\$5,000.00
Kauai United Way P.O. Box 1087 Lihue, HI 96766	Distribution for 2008 campaign	\$12,500.00
Kauai United Way P.O. Box 1087 Lihue, HI 96766	Distribution for 2008 campaign	\$6,250.00
Kauai United Way P.O. Box 1087 Lihue, HI 96766	Distribution for 2008 campaign	\$6,250.00
Kaumakapili Church 766 N. King Street Honolulu, HI 96817	Food Pantry.	\$1,000.00
Le Jardin Academy 917 Kalanianaole Highway Kailua, HI 96734	Construction of 18 Classrooms and Gymnasium - (Phase IIA for Gym, high school, & Road Infrastructure)	\$25,000.00
Leadership Kauai P. O. Box 1567 Lihue, HI 96766	Adult and Youth Leadership Programs	\$2,500.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Ma Ka Hana Ka Ike Building Program P. O. Box 968 Hana, HI 96713	Hana School Building Program	\$2,500.00
Maui Arts & Cultural Center One Cameron Way Kahului, HI 96732	In memory of John C. Baldwin	\$1,000.00
Maui Economic Opportunity, Inc. 99 Mahalani Street Wailuku, HI 96793	Capital Campaign for Transportation Facility Project - 2007-2011	\$25,000.00
Maui Family Support Services, Inc. 1844 Wili Pa Loop Wailuku, HI 96793	OARS (Outreach and Resource Specialists) and CDS (Child Development Specialist) services	\$5,000.00
Maui Food Bank 760 Kolu Street Wailuku, HI 96793	To assist with families in need during the holiday season.	\$5,000.00
Maui United Way 270 Hookahi Street, Suite 301 Wailuku, HI 96768	Distribution for 2008 campaign	\$23,500.00
Maui United Way 270 Hookahi Street, Suite 301 Wailuku, HI 96768	Distribution for 2008 campaign	\$11,750.00
Maui United Way 270 Hookahi Street, Suite 301 Wailuku, HI 96768	Distribution for 2008 campaign	\$11,750.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Mental Health Kokua 1221 Kapiolani Blvd., Suite 345 Honolulu, HI 96814	Group home repairs and renovations in Hilo and Kona	\$5,000.00
Montessori School of Maui (DBA) 2933 Baldwin Avenue Makawao, HI 96768	Tuition assistance program 2009- 2010	\$1,000.00
Consumer Credit Counseling Service of Hawail, Inc. 1164 Bishop Street, Suite1614 Honolulu, HI 96813	Financial budgeting and literacy seminars	\$10,000.00
Pacific Historic Parks 1 Arizona Memorial Place Honolulu, HI 96818	Pearl Harbor Memorial Fund	\$20,000.00
PATCH - People Attentive to Children 650 Iwilei Road, Suite 205 Honolulu, HI 96817	Statewide training program for early childhood education and care	\$1,000.00
Queen's Medical Center 1301 Punchbowl Street Honolulu, HI 96813	Race to Heal Program in memory of Barbara Cannon	\$1,500.00
Hope House Diocese of Samoa - Pago Pago P. O. Box 596 Pago Pago, AS 96799	Operating funds	\$2,500.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Roman Catholic Church in the State of Hawaii c/o St. Stephen's Diocesan Center 6301 Pali Highway Kaneohe, HI 96744	for support of the 'With Grateful Hearts' Capital Campaign	\$20,000.00
Salvation Army, Guam Corps P. O. Box 23038 Barrigada, Guam 96921	Operational support for the Family Services One-Stop Homeless Assistance Center	\$10,000.00
The Salvation Army Hawaiian & Pacific Islands Division 2950 Manoa Road Honolulu, HI 96822	Kroc Center Capital Campaign - Kroc Grant stipulation for community matching funds	\$25,000.00
The Salvation Army Hawaiian & Pacific Islands Division 2950 Manoa Road Honolulu, HI 96822	Program support through contributions from the 2009 Charity Walk	\$35,000.00
The Salvation Army Hawaiian & Pacific Islands Division 2950 Manoa Road Honolulu, HI 96822	Operating funds for the Saipan Outpost	\$10,000.00
The Salvation Army Hawaiian & Pacific Islands Division 2950 Manoa Road Honolulu, HI 96822	To provide program assistance to those in need during the holiday season.	\$25,000.00
Various Recipients American Samoa	For disaster relief related to 09/29/2009 Tsunami in American Samoa 11 of 13 STATEMEN	\$46,500.00 IT GRANT-1

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
Sanctuary Incorporated 406 Mai Mai Road Chalan Pago, Guam 96910	Purchase/install solar water heating system and install emergency power generator for shelters	\$2,000.00
SCORE of Hawaii Inc. 70 Kaahumanu Avenue, Unit B-9 Kahului, HI 96732	Workshops and counseling focused on employment training provided by Service Corps of Retired Executives Association.	\$1,000.00
Special Education Center of Hawaii (SECOH) 708 Palekaua Street Honolulu, HI 96816-4755	Technical support - community connections for people with disabilities	\$5,000.00
Susannah Wesley Community Center 1117 Kaili Street Honolulu, HI 96819-3432	Prevention, education and employment programs for 2009-2010	\$5,000.00
Teach For America Hawaii 500 Ala Moana Blvd., Suite 3-400 Honolulu, HI 96813	Operating support for Teach for America in Hawaii for 2008-2009 school year	\$25,000.00
Center for Living Independently in the CNMI PMB 914, Box 10001 Saipan, MP 96950	Support client services	\$2,500.00
Contemporary Museum 2411 Makiki Heights Drive Honolulu, HI 96822	The Contemporary Campaign for museum expansion	\$25,000.00

Bank of Hawaii Charitable Foundation 2009 Grants		99-0210467
Payee Organization	Request Project Title	Amount
The Food Basket, Inc. 140-B Holomua Street Hilo, HI 96720	Program support through fundraising and foundation matching funds to benefit Hawaii Island hunger relief and education	\$10,025.00
The Food Basket, Inc. 140-B Holomua Street Hilo, Hi 96720	FBO Hawaii Island's Food Bank to assist families in need during the holiday season.	\$5,000.00
University of Hawaii Foundation 2444 Dole Street Bachman Hall 105 Honolulu, HI 96822	Kids Savings project	\$5,000.00
University of Hawaii Foundation 2444 Dole Street Bachman Hall 105 Honolulu, HI 96822	Capital campaign for the 'Imiloa Astronomy Center at UH Hilo	\$25,000.00
Waikiki Health Center 277 Ohua Avenue Honolulu, HI 96815	Primary Care services to medically uninsured and underserved patients	\$2,500.00
West Maui Improvement Foundation P. O. Box 10338 Lahaina, HI 96761	Operational support for secretarial needs for West Maui Hospital and Medical Center	\$1,000.00
	TOTAL	\$1,222,250.00

BANK OF HAWAII P.O. BOX 3170 HONOLULU, HI 96802

RETURN OF PRIVATE FOUNDATION FORM 990-PF

[FYE	en	NAME.	GR TO 2010 EST TAX	REAUTO
12/31/2009	99-0210467	BANK OF HAWAII CHARITABLE FDN	2,718	0
5/31/2010	99-0321763	ALVIN G SLATER CHARITABLE TRUST	80	0
12/31/2009	99-6002547	S W WILCOX TRUST	1,740	0

Form 8868

(Rev. April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

• 47 -	renue Service	File a separate application for each return.	
■ II you	are filing for an Auto	omatic 3-Month Extension, complete only Part I and check this box	▶ 🗓
● If you	are filing for an Add	itional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form).
Do not c	complete Part II un	less you have already been granted an automatic 3-month extension on a previously fi	led Form 8868.
Part 1	Automatic	3-Month Extension of Time. Only submit original (no copies needed).	
A corpor Part I on	•	Form 990-T and requesting an automatic 6-month extension - check this box and com	nplete
	corporations (includ come tax returns.	ding 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar	extension of time
noted be (not auto you mus	elow (6 months for a ematic) 3-month ext at submit the fully co	enerally, you can electronically file Form 8868 if you want a 3-month automatic extension corporation required to file Form 990-T). However, you cannot file Form 8868 electronicension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files on the elec	ically if (1) you want the additional nsolidated Form 990-T. Instead,
Type or	Name of Exemp	t Organization	Employer identification number
print		HAWAII CHARITABLE FOUNDATION	
	C/O BANK	OF HAWAII, DEPT 715	99-0210467
File by the due date fo filing your	Number, street,	and room or suite no. If a P.O. box, see instructions.	
return See instructions		st office, state, and ZIP code. For a foreign address, see instructions. HI 96802-3170	
Check to	voe of return to be	filed (file a separate application for each return):	
	rm 990	Form 990-T (corporation)	
	rm 990-BL	Form 990-T (sec. 401(a) or 408(a) trust)	
	rm 990-EZ	Form 990-T (trust other than above)	
L ⊼ Fo	rm 990-PF	Form 1041-A Form 88	370
		BANK OF HAWAII of > 130 MERCHANT STREET - HONOLULU, HI 9681	.3
•	hone No. ► <u>808</u>		
	_	not have an office or place of business in the United States, check this box	
		im, enter the organization's four digit Group Exemption Number (GEN) If the	
DOX -	. If it is for par	t of the group, check this box 🕨 🔲 and attach a list with the names and EINs of all	members the extension will cover.
_	equest an automati AUGUST 15 for the organization	· · · · · · · · · · · · · · · · · · ·	til
is '	AUGUST 15	, 2010 , to file the exempt organization return for the organization named a 's return for:	til
is '	AUGUST 15 for the organization	, to file the exempt organization return for the organization named a 2 on 9 or	til
is •	AUGUST 15 for the organization X calendar year tax year begin	, to file the exempt organization return for the organization named a 2 on 9 or	til
2 If t	AUGUST 15 for the organization X calendar year tax year beging this tax year is for least	to file the exempt organization return for the organization named a serious for: 2009 or anning, and ending ess than 12 months, check reason: Initial return Final return or Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	til above. The extension Change in accounting period
2 If 1 3a If 1	AUGUST 15 for the organization X calendar year tax year beging this tax year is for leading the supplication is for parefundable credits	to file the exempt organization return for the organization named a serious for: 2009 or anning, and ending ess than 12 months, check reason: Initial return Final return or Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any as See instructions.	til above. The extension Change in accounting period
2 If 1 3a If 1 b If 1	AUGUST 15 for the organization X calendar year tax year beging this tax year is for leading the supplication is for the supplication is for this application is for this application is for this application is for the supplication is supplication.	to file the exempt organization return for the organization named a set return for: 2009 or and ending ass than 12 months, check reason: Initial return Final return by Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any ass. See instructions.	til above. The extension Change in accounting period 3a \$ 5,340.
2 If 1 3a If 1 nc b If 1	AUGUST 15 for the organization X calendar year tax year beging this tax year is for leading the second the se	to file the exempt organization return for the organization named a set return for: 2009 or nining	til above. The extension Change in accounting period 3a \$ 5,340.
2 If 1 3a If 1 b If 1 c Ba	AUGUST 15 for the organization X calendar year tax year beging this tax year is for leading this application is for correfundable credits this application is for x payments made. alance Due. Subtra	's return for: 2009 or nning, and ending 'ss than 12 months, check reason: Initial return Final return or Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any s. See instructions. or Form 990-PF or 990-T, enter any refundable credits and estimated include any prior year overpayment allowed as a credit. ct line 3b from line 3a. Include your payment with this form, or, if required,	til above. The extension Change in accounting period 3a \$ 5,340. 3b \$ 5,240.
2 If 1 3a If 1 no b If 1 c Ba	AUGUST 15 for the organization X calendar year tax year beging this tax year is for leading this application is for correfundable credits this application is for x payments made. alance Due. Subtra	to file the exempt organization return for the organization named a set return for: 2009 or nining	til above. The extension Change in accounting period 3a \$ 5,340. 3b \$ 5,240.

Form 8868 (Rev. 4-2009)			Page 2
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this	s box ,		▶ 🗓
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously f	iled Form 8	868.	
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
Additional (Not Automatic) 3-Month Extension of Time. Only file the original (n	10200		
Name of Exempt Organization Type or PANK OF HAMAIT CHARTER FOUNDAMTON	Empl	oyer identificat	tion number
print C/O BANK OF HAWAII CHARITABLE FOUNDATION C/O BANK OF HAWAII, DEPT 715	ه ا	9-021046	7
File by the	******	IS use only	' ——
due data for P. O. BOX 3170	1011	is ase only	
filing the return See City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
instructions HONOLULU, HI 96802-3170			
Check type of return to be filed (File a separate application for each return):			
Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A	☐ Fo	rm 5227	Form 8870
Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	☐ Fo	rm 6069	
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a pre-	riously file	d Form 8868.	
BANK OF HAWAII			
• The books are in the care of ▶ 130 MERCHANT STREET - HONOLULU, HI 96	813		
Telephone No. ► 808-694-4540 FAX No. ►			
If the organization does not have an office or place of business in the United States, check this box	· .		▶ □
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	f this is for	the whole grou	p, check this
box ▶ . If it is for part of the group, check this box ▶ . and attach a list with the names and EINs o	f all memb	ers the extensio	n is for.
4 I request an additional 3-month extension of time until NOVEMBER 15, 2010.			
5 For calendar year 2009 , or other tax year beginning, and ending	· —		·
6 If this tax year is for less than 12 months, check reason: Initial return Final return		Change in acco	unting period
7 State in detail why you need the extension	TOM N	ECECCADA	
ADDITIONAL TIME IS NEEDED TO GATHER ALL THE INFORMAT	ION N.	ECESSARY	<u> 10 </u>
PREPARE A COMPLETE AND ACCURATE RETURN.			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	8a	\$	5,340.
nonrefundable credits. See instructions. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	Oa	<u>.</u>	3/3406
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid			
previously with Form 8868.	8ь	\$	5,340.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit			
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruction	ns. 8c	\$	0.
Signature and Verification			
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief,			
it is true, correct, and the hand that ham authorized to prepare this form		▶ 8/0/1	
Signature By Ohung the Title	<u>Date</u>	▶ 011111	

Form 8868 (Rev 4-2009)