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Department of the Treasury

### **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

For	alen	dar year 2009, or tax year beginning		, and ending		<u></u>
		all that apply Initial return	Initial return of a fo	ormer public charity	Final return	
u (	HOUK	Amended return	Address change	· · · —	Name change	
		Name of foundation	Address chang	<u> </u>	A Employer identification	numhar
	the I	Magazuki ( Haruo Moki	oka Foundatio	on	A chiphoyer identification	iidiiidei
	abel.	6 /0 B		011	99-0322018	
	erwi: print			Room/suite	B Telephone number	·-··
	r type	· •	•	1.05.70.02.70	808-564-82	61
	Spec	TIOL DIDITOR DOLOGO, D	ALCC 2450	L		····
Inst	ructio	Ins. Honolulu, HI 96813			C If exemption application is po D 1. Foreign organizations	
	· · · ·	type of organization X Section 501(c)(3) ex	rompt private foundation	<del></del>	2. Foreign organizations me check here and attach co	eting the 85% test,
				ation.	check here and attach co	mputation
			Other taxable private foundaing method X Cash		E If private foundation stat	
		rket value of all assets at end of year J Account	•	Accrual	under section 507(b)(1)	
	om i ·\$	Part II, col. (c), line 16) $15$ , $413$ . (Part I, colu	ther (specify)	hada l	F If the foundation is in a 6	
خ	<u> </u>				under section 507(b)(1)	4.11
Pa	irt l	(The total of amounts in columns (b), (c), and (d) may not necessanly equal the amounts in column (a) )	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	(0) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received				
	2	Check X if the foundation is not required to attach Sch. B			ļ , , , , ,	
	3	Interest on savings and temporary cash investments				
o.	4	Dividends and interest from securities				
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10				
Z L	b	Gross sales price for all assets on line 6a	-14'-11'-111-1117-11-11-11-11-11-11-11-11-11-11-			
Revenue	7	Capital gain net income (from Part IV, line 2)		0.		
<u> </u>	8	Net short-term capital gain	· · · · · · · · · · · · · · · · · · ·	1' 1'' ! ! ! ! ! ! ! !	0.	
	9	Income modifications				
	10a	Gross sales less returns and allowances	mkn			<u> </u>
	b	Less Cost of goods sold				
	C	Gross profit or (loss)				r ramming breakist aredandlar
	11	Other income				
	12	Total. Add lines 1 through 11	0.	0.	<del></del>	
	13	Compensation of officers, directors, trustees, etc	0.	0.	0.	0.
	14	Other employee salaries and wages				
s	15	Pension plans, employee benefits				
ses		Legal fees				
þe		Accounting fees Stmt 1	906.	0.	0.	0.
Ã	1	Other professional fees			<del> </del>	
tive	17	Interest		REC	EIVED	
Operating and Administrative Exper	18	Taxes Stmt 2	3.		TIALD 0.	0.
nis	19	Depreciation and depletion		<del></del>	0 6 2010	
Ę	20	Occupancy		L JUN (	0 6 2010	
Ψ¥	21	Travel, conferences, and meetings			· · · · · · · · · · · · · · · · · · ·	
anc	22	Printing and publications		OGDI		
g	23	Other expenses		LOUDI	+10,00	
rati	24	Total operating and administrative		}		
be		expenses. Add lines 13 through 23	909.	0.	0.	0.
J	25	Contributions, gifts, grants paid				
	26	Total expenses and disbursements.				
		Add lines 24 and 25	909.	0.	. 0.	0.
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	<909.			} 
	b	Net investment income (if negative, enter -0-)		0.		
	<u> </u>	Adjusted net income (if negative, enter -0-)			0.	
9235	01 2-10	LHA For Privacy Act and Paperwork Reduction	Act Notice, see the instruc	tions.		Form <b>990-PF</b> (2009)

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year				
column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
1 Cash - non-interest-bearing	16,322.	15,413.	15,413.			
2 Savings and temporary cash investments						
3 Accounts receivable ►						
Less allowance for doubtful accounts						
4 Pledges receivable ►						
Less allowance for doubtful accounts						
5 Grants receivable		<u>-</u> .				
6 Receivables due from officers, directors, trustees, and other						
disqualified persons						
7 Other notes and loans receivable			······································			
Less allowance for doubtful accounts						
5 l						
9 Prepaid expenses and deferred charges						
10a Investments - U.S. and state government obligations			· · · · · · · · · · · · · · · · · · ·			
b Investments - corporate stock	· · · · · · · · · · · · · · · · · · ·					
c Investments - corporate bonds						
11 Investments - land, buildings, and equipment basis						
Less. accumulated depreciation			<del> </del>			
12 Investments - mortgage loans						
13 Investments - other						
14 Land, buildings, and equipment basis						
Less accumulated depreciation						
15 Other assets (describe ► Artwork )	25,000.	25,000.	0.			
16 Total assets (to be completed by all filers)	41,322.	40,413.	15,413.			
17 Accounts payable and accrued expenses	•					
18 Grants payable						
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable						
21 Mortgages and other notes payable						
22 Other liabilities (describe Statement 3)	5,000.	5,000.				
22 Other habilities (describe	3,000.	3,000.				
22 Total lightitism (add ligger 17 through 20)	5,000.	5,000.				
23 Total liabilities (add lines 17 through 22)	3,000.	3,000.				
Foundations that follow SFAS 117, check here						
and complete lines 24 through 26 and lines 30 and 31.						
8   24 Unrestricted						
25 Temporarily restricted						
26 Permanently restricted						
Foundations that do not follow SFAS 117, check here						
and complete lines 27 through 31.						
27 Capital stock, trust principal, or current funds	0.	0.				
28 Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.				
25 Temporarily restricted 26 Permanently restricted 27 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	36,322.	35,413.				
30 Total net assets or fund balances	36,322.	35,413.				
31 Total liabilities and net assets/fund balances	41,322.	40,413.				
Part III Analysis of Changes in Net Assets or Fund B	alanoos					
Part III Analysis of Changes in Net Assets or Fund Ba						
Total net assets or fund balances at beginning of year - Part II, column (a), line	30					
(must agree with end-of-year figure reported on prior year's return)		. 1	36,322.			
Enter amount from Part I, line 27a		2	<909.			
Other increases not included in line 2 (itemize)		3	0.			
Add lines 1, 2, and 3		4	35,413.			
Decreases not included in line 2 (itemize)		5	0.			
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	35,413.			
			Form <b>990-PF</b> (2009)			

Form 990-PF (2009)
Part IV Capital

Masayuki & Harue Tokioka Founda C/O Franklin Tokioka, Secretary	У	99-032	201
Gains and Losses for Tax on Investment Income	)		
and describe the kind(s) of property sold (e.g., real estate.	(b) How acquired	(c) Date acquired	- (

2-story brick warehouse; or common stock, 200 shs MLC Co )							Date acquired no , day, yr )	(d) Date sold (mo , day, yr )	
1a				<u> </u>	_		-		
<del></del>	NE				-	<u> </u>	<del> </del>		
<u>c</u>				_	-	····	╂		<del> </del>
d e					1		-		
(e) Gross sales price	(f) D	epreciation allowed (or allowable)		t or other basis xpense of sale			(6	(h) Gain or (loss e) plus (f) minus	
a									
	ļ								
<u> </u>		· · · · · · · · · · · · · · · · · · ·							
<u>d</u>	ļ	<del></del>							
Complete only for assets show	00 0310 10 0	solumn (h) and owned by	the foundation	on 12/31/60			//\ C=	ina (Cal. (h) anii	
(i) F M V as of 12/31/69	T	i) Adjusted basis as of 12/31/69	(k) Ex	cess of col (i) col (j), if any			col (k)	ins (Col. (h) gair , but not less that osses (from col	an -0-) <b>or</b>
a					•				
b									
C									
đ									
0			<u> </u>			ļ			<u></u>
2 Capital gain net income or (net c	apıtal loss)	If gain, also ente If (loss), enter -0	r in Part 1, line )- in Part I, line	7 7	}	2		=	
3 Net short-term capital gain or (Id If gain, also enter in Part I, line 8	, column (c		nd (6)		}	2			
If (loss), enter -0- in Part I, line 8 Part V Qualification I	Jnder S	ection 4940(e) for	r Reduced	Tax on Net	t Inv	estment l	ncor	ne	
Was the foundation liable for the se if "Yes," the foundation does not qui 1 Enter the appropriate amount in	alify under	section 4940(e). Do not co	omplete this pa	ırt					Yes X No
(a)  Base period years Calendar year (or tax year beginn	ing in)	(b) Adjusted qualifying dis	stributions	Net value of n	(c oncha	) arıtable-use ass	ets	Dıstr (col (b) d	(d) ibution ratio ivided by col (c))
2008			0.			16,92			.00000
2007			0.			9,88			.00000
2006			7,500.				55.		45.45454
2005			3.				22.		.13636
2004	i		473.			<del></del>	27.	<del></del>	17.51851
<ul><li>Total of line 1, column (d)</li><li>Average distribution ratio for the</li></ul>	. Swaar bas	ea pariod - divide the total	on line 2 by 5	or by the numbe	rofv	earc	}	2	63.10942
the foundation has been in exist	•	•	on line 2 by 3,		ı oı y	6413		3	12.62188
4 Enter the net value of noncharita	ble-use as	sets for 2009 from Part X,	, line 5				-	4	16,002
5 Multiply line 4 by line 3								5	201,975
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)						6	0
7 Add lines 5 and 6								7	201,975
8 Enter qualifying distributions fro	•						Į	8	0
If line 8 is equal to or greater that See the Part VI instructions	in line 7, ch	eck the box in Part VI, line	e 1b, and comp	olete that part usi	ng a 1	1% tax rate			

Masayuki & Harue Tokioka Foundation
C/O Franklin Tokioka, Secretary

F11 .	C/O FIGHRIIN TOKIONA, Secretary			0322			Page 4
	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e)	or 4	948	- see i	nstru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and enter "N/A" on line 1						
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)						
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here   and enter 1%						
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	ļ			0.
3	Add lines 1 and 2		_ 3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	<u></u>			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		_5				0.
6	Credits/Payments						
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a						
b	Exempt foreign organizations - tax withheld at source						
C	Tax paid with application for extension of time to file (Form 8868)						
đ	Backup withholding erroneously withheld 6d						
7	Total credits and payments Add lines 6a through 6d		7	]			0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10		*		
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunde	d 🖊	11	<u> </u>			
Pa	rt VII-A Statements Regarding Activities			4		-	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national, state, or local legislation or did it participate or influence any national did it participate or influence any national did it participate or influence any national did it participate or influence and did it participate or influence	ervene	in			Yes	No
	any political campaign?				1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definit	ion)?			1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pu		d or		***************************************		·
	distributed by the foundation in connection with the activities.						
C	Did the foundation file Form 1120-POL for this year?				1c	ĺ	X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						
	(1) On the foundation ▶ \$ 0 . (2) On foundation managers ▶ \$	0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation						
	managers ▶ \$ 0.						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2	İ	X
	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorpor	ation, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			:	3	ĺ	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			ĺ	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?		N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		Х
	If "Yes," attach the statement required by General Instruction T.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the	ne state	law				
	remain in the governing instrument?				6		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	X	<del></del>
	If "Yes," complete Part II, col. (c), and Part XV						<del> </del>
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)						
	HI						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)						
-	of each state as required by General Instruction G? If "No," attach explanation				8b	Х	1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) is	or caler	ndar		20		
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	J. Quidi	·uul		9	Х	1
_10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses				10		Х
							<del></del>

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2009.)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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 May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

	Masayuki & Harue Tokioka Foundation				
Forr		9-0322	018	_	Page 5
Pi	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		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
	August 17, 2008?		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14	The books are in care of ▶ Shigemura & Sakamaki, CPAs, Inc. Telephone no	<del></del>	596	<u> -29</u>	22
	Located at ▶ 1150 South King Street, Suite 1102 Honolulu, HI	ZIP+4 ▶ <u>96</u>	<u>814</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here				$\cdot \square$
	and enter the amount of tax-exempt interest received or accrued during the year	15	N	<u>/A</u>	
P	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
1:	During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	s X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)				
	a disqualified person?	s X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	s X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	s X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available				
	for the benefit or use of a disqualified person)?	s X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		ĺ		
	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 )	s X No			
	b If any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here				
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	before the first day of the tax year beginning in 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 At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginnin	9			
	before 2009?	s X No			
	If "Yes," list the years ▶,,,				
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
	statement - see instructions )	N/A	2b		

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X

X

3b

4a

Yes X No

N/A

during the year?

Masayuki & Harue Tokioka Form 990-PF (2009) C/O Franklin Tokioka, See			 99-03220	18 Page <b>6</b>
Part VII-B Statements Regarding Activities for Which F				
5a During the year did the foundation pay or incur any amount to		· · · · · · · · · · · · · · · · · · ·		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), or	* **			
any voter registration drive?	to our y only on ootly or many		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	)		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?	r described in section	□ vo	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or adulational nurnaces, or f		3 21 140	
the prevention of cruelty to children or animals?	or educational purposes, or i		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	or the executions described i	• —	3 110	
	·	ii negulations	N/A	5b
section 53 4945 or in a current notice regarding disaster assistance (see instru	•			JU
Organizations relying on a current notice regarding disaster assistance check hi				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		- /		
expenditure responsibility for the grant?		I/AYe	s L No	
If "Yes," attach the statement required by Regulations section 53.4945	= *			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		[32]	
a personal benefit contract?	Ye	s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es X No	
b If yes, did the foundation receive any proceeds or have any net income attributa				7b
Part VIII Information About Officers, Directors, Trustor Paid Employees, and Contractors		nagers, Highly	<b>/</b>	
1 List all officers, directors, trustees, foundation managers and their		(a) Companyation	(d) Contributions to	(-) Funance
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
			1	
Con Chatemant 1		0.	_	0.
See Statement 4		0.	0.	0.
<del></del>				
2 Compensation of five highest-paid employees (other than those inc	r	enter "NONE."	I (al) a	T
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
A STATE OF THE STA				
		<del>                                     </del>		
		1		
	1			]
				1
	1	1	1	I

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Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		(17.55.0.75.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infor	mation such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		
1 N/A		
2		
3		
4		
•		
Part IX-B Summary of Program-Related Investments		· · · · · · · · · · · · · · · · · · ·
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 ai	nd 2	Amount
27/2	10 2	Allivuit
1 N/A		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	<b>•</b>	0.
		- 000 DE (000)

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Pá	Art X Minimum Investment Return (All domestic foundations must	complete this part. Foreign four	ndations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, et	C . Durdoses.		
	Average monthly fair market value of securities	, , , , , , , , , , , , , , , , , , , ,	1a	0.
	Average of monthly cash balances		1b	16,246.
	Fair market value of all other assets	•	10	
d	Total (add lines 1a, b, and c)		1d	16,246.
	Reduction claimed for blockage or other factors reported on lines 1a and	•		
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		[ 2 ]	0.
3	Subtract line 2 from line 1d		3	16,246.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	instructions)	4	244.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Pal	t V, line 4	5	16,002.
6	Minimum investment return. Enter 5% of line 5		6	800.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j foreign organizations check here   X and do not complete this part )	)(5) private operating foundations ar	nd certain	
1	Minimum investment return from Part X, line 6		1	
2a	Tax on investment income for 2009 from Part VI, line 5			
b	Income tax for 2009 (This does not include the tax from Part VI)		1	
C	Add lines 2a and 2b		1 2c	
3	Distributable amount before adjustments Subtract line 2c from line 1		3	<del></del>
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	
6	Deduction from distributable amount (see instructions)		6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII	line 1	7	
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	es .		•
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		1a	0.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,	etc , purposes	2	<del> </del>
3	Amounts set aside for specific charitable projects that satisfy the			
a	Suitability test (prior IRS approval required)		3a	<u></u>
þ	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 P	art XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investm	ent		_
	income Enter 1% of Part I, line 27b .		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when 4940(e) reduction of tax in those years.	calculating whether the foundation	qualifies for the	section

Form **990-PF** (2009)

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				0.
2 Undistributed income, if any, as of the end of 2009				***************************************
a Enter amount for 2008 only			0.	
b Total for prior years				<del>                                     </del>
3 Excess distributions carryover, if any, to 2009	······································	0.		<del> </del>
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008	0.			
f Total of lines 3a through e	V •			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ N/A				
			0	
a Applied to 2008, but not more than line 2a			0.	Hasia widhilialia a baddali a
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)	· · · · · · · · · · · · · · · · · · ·	U •		<del></del>
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	V •		Interted MINION Control of the Control	
d Applied to 2009 distributable amount	0.			0.
e Remaining amount distributed out of corpus	0.	***************************************	······································	······································
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:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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	0.			***************************************
9 Excess distributions carryover to 2010.				•
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

Page 10

Part XIV   Private Operating Fo	oundations (see Ins	tructions and Part VII-	A, question 9)		
1 a If the foundation has received a ruling or	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2009, enter the date of th	ne ruling	<b>▶</b>		
b Check box to indicate whether the found	ation is a private operating	g foundation described in	section . X	4942(j)(3) or	2(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		···
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					
each year listed	0.	0.	0.	0.	0.
b 85% of line 2a	0.	0.	0.	0.	0.
c Qualifying distributions from Part XII.		· · · · · · · · · · · · · · · · · · ·			
line 4 for each year listed	0.	0.	0.	7,500.	7,500.
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c	0.	0.	0.	7,500.	7,500.
3 Complete 3a, b, or c for the			· · · · · · · · · · · · · · · · · · ·	7,3001	175001
alternative test relied upon					
a "Assets" alternative test - enter (1) Value of all assets				51,750.	51,750.
(1) Value of an assets (2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)				51,750.	51,750.
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					0.
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					0.
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					0.
(3) Largest amount of support from		· · · · · · · · · · · · · · · · · · ·			
an exempt organization					0.
(4) Gross investment income		• • • • • • • • • • • • • • • • • • • •	<del></del>		0.
Part XV Supplementary Info	rmation (Complet	te this part only i	f the foundation	had \$5,000 or mo	
at any time during t				11.00	· · · · · · · · · · · · · · · · · · ·
1 Information Regarding Foundatio			· · · · · · · · · · · · · · · · · · ·		
a List any managers of the foundation wh	_	han 2% of the total contr	shutione received by the	foundation hafore the close	of any tax
year (but only if they have contributed n			ibutions received by the	iodilognon perole the close	or any tax
See Statement 5		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )			
<del></del>	o own 10% or more of the	stock of a corporation /	or an equally large portio	n of the ownership of a par	toerchin or
<ul> <li>b List any managers of the foundation wh other entity) of which the foundation has</li> </ul>			or all equally raige portio	ii oi tile owilership of a par	mership or
None		•			
	on Cront Cift Loop	Cabalambia ata Da			
2 Information Regarding Contribution					-A- 4414
Check here  if the foundation o the foundation makes gifts, grants, etc.					
				implete items za, b, c, and t	<u> </u>
a The name, address, and telephone num				0.6021	
Lionel Tokioka; 918	Matiki Stre	et; nonoru	lu, Hawaii	90021	
	<del></del>	<del> </del>			
b The form in which applications should b					
Letter of inquiry sh	outa be sub	mitted to t	ne executiv	e director.	
c Any submission deadlines				_:_	
No deadlines - appli					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields,	kinds of institutions, or o	ther factors	
None					
		<u></u>			

99-0322018 Page 11

3 Grants and Contributions Paid During th Recipient	If recipient is an individual.			
Name and address (home or business)	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	of Substantial Contributor	топрин		
a rac coming the year				
Mana a				
None				
		l		
Total		<del></del>	<b>▶</b> 3a	С
b Approved for future payment		<del></del>	- 04	_ <b>_</b>
None				
5.5.25				
Total		<del></del> -	<b>▶</b> 3b	0 rm <b>990-PF</b> (200

Unrelated business income

Enter gross amounts unless otherwise indicated

(e)

Excluded by section 512, 513, or 514

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

Program service revenue		(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	·	<del></del>	<del></del>	+		
. —	<del></del>	1 1		+		<del></del>
d	<del> </del>	· · · · -			· · · · · · - · - · - · - · - · - · - ·	
e		<del></del>		-	<del></del> .	
1			·-··			
-	nd contracts from government agencies	<b></b>	<del></del>	-	<del></del> .	
	hip dues and assessments	<del>                                     </del>			<del>-</del>	
	n savings and temporary cash	1 1				
investmen		<del> </del>		-	<del>-</del> .:	
	and interest from securities	ļ <del></del>	<del></del>			
	income or (loss) from real estate	ļ	••••••			
	inanced property					
	ebt-financed property	<del></del>				
	income or (loss) from personal	1 1				
property		-				
	estment income			+		
	oss) from sales of assets other			1		
than inver	· · ·		<del></del>	+		
	ne or (loss) from special events	ļ <u> </u>				
	ofit or (loss) from sales of inventory	ļ	····	+		
1 Other reve	enue					
				+		
b		<u> </u>		+		
c		-		+		
d				-		
e			0	<del>-  </del>		
	Add columns (b), (d), and (e)		0	•	0.	
	d line 12, columns (b), (d), and (e) eet in line 13 instructions to verify calculations )				13 _	0.
Part XVI	Explain below how each activity for which inco the foundation's exempt purposes (other than	ome is reported in	column (e) of Part XVI-			mplishment of
·	1/A	o, promong rame				
						•
		•				
		-				
				_		
	· · · · · · · · · · · · · · · · · · ·					

## Masayuki & Harue Tokioka Foundation On C/O Franklin Tokioka, Secretary 99-0322018 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Part XVII

Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of							Yes	No
	the Co	ode (other than section 501(c)	(3) organizations) or in section 52	7, relating to political organ	nizations?			
а	Trans	fers from the reporting founda	ition to a noncharitable exempt org	ganization of				
	(1) 0	ash				1a(1)		<u>X</u>
	(2) C	ther assets				1a(2)		X
b	Other	transactions						
	(1) S	ales of assets to a noncharitat	ble exempt organization			1b(1)		<u>X</u>
	(2) P	urchases of assets from a nor	ncharitable exempt organization			16(2)		X
	(3) R	lental of facilities, equipment, (	or other assets			1b(3)		X
	(4) R	leimbursement arrangements				1b(4)		X
	(5) L	oans or loan guarantees				1b(5)		X
	(6) P	erformance of services or me	mbership or fundraising solicitatio	ns		1b(6)		X
C	Sharii	ng of facilities, equipment, mai	iling lists, other assets, or paid em	ployees		10		X
d	If the	answer to any of the above is	"Yes," complete the following sche	dule Column (b) should al	ways show the fair market value of the good	s, other ass	ets,	
	or ser	vices given by the reporting fo	oundation. If the foundation receive	ed less than fair market valu	ue in any transaction or sharing arrangemen	t, show in		
			other assets, or services received					
a)	Line no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions, a	nd shanng ar	rangeme	ents
_			N/A					
_								
_								
_				· · · · · · · · · · · · · · · · · · ·		<del></del> -		
					<del>-  </del>			
		<del> </del>			<del> </del>			
			· · · · · · · · · · · · · · · · · · ·					
_		· · · · · · · · · · · · · · · ·			<del></del>			
_								
		·						
2 a	Is the	foundation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organ	izations described			
			r than section 501(c)(3)) or in sect	=		Yes	X	. No
b		s," complete the following sch						
		(a) Name of org		(b) Type of organization	(c) Description of relation	nship		
		N/A						
_		<del></del>						
_								
			1 0		<del></del>			
7	Under p	enalties of penury, I declare that h	ave examined this eturn, including acco	mpanying schedules and states	nents, and to the best of my knowledge and belief, i	t is true cour	et	
			r than texpayer or iduciary) is based on			113 000, 12011	.0.,	
ı		\/ <b>\</b> /\\\\\\	A nto a t/A	1661/11	VI Non			
וו	<u>r</u>		- WALLOTTAN	P 8/5 0/11	2 y VIII yras.			
5	<u> </u>	gnature of officer or trustee	- 4.	Date	Title			
Ęl	ø -	Preparer's	Salamaki, CPA			parer's identif	ying nui	nber
5	Paid Preparer's Use Only	signature			6/02/10 self- employed ►			
	Paid spare se On		emura & Sakamak					
	ž Š		South King Str	eet, Suite 1				
		address, and ZIP code Hono	lulu, HI 96814		Phone no (80	8)596		
						Form <b>990</b>	-PF	(2009)

Form 990-PF	Accounti	ng Fees		Statement 1			
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes			
Accounting	906.	0.	0	. 0.			
To Form 990-PF, Pg 1, ln 16b	906.	0.	0	0.			
Form 990-PF	Тах	es	Statement				
Description	(a) Expenses Per Books		(c) Adjusted Net Income	(d) Charitable Purposes			
Other taxes-Corp. exhibit	3.	0.	0	. 0.			
To Form 990-PF, Pg 1, ln 18	3.	0.	0	0.			
Form 990-PF	bilities		Statement 3				
Description		во	Y Amount	EOY Amount			
FMT Limited Partnership	<del></del>	5,000. 5,0					
Total to Form 990-PF, Part II		5,000.	5,000.				

Name and Address		ompen- ation	Employee Ben Plan Contrib	
Lionel Y. Tokioka 918 Waiiki St. Honolulu, HI 96821	President & Direct 0.00	0.	0.	0
Franklin M. Tokioka 925 Waiholo St. Honolulu, HI 96821	V-President & Dire	ector 0.	0.	0
Colbert Matsumoto 1766 Hanahanai St. Honolulu, HI 96821	Secretary & Direct	0.	0.	0
Steven Sakamaki 1150 S King St., #1102 Honolulu, HI 96814	Treasurer & Direct	0.	0.	0
Franklin M. Tokioka II 5312 Kahalakua St. Honolulu, HI 96821	Director 0.00	0.	0.	0
Tyler Tokioka 1064 Lunalilo Home Rd Honolulu, HI 96825	Director 0.00	0.	0.	0
Totals included on 990-PF, Page 6	, Part VIII	0.	0.	0

Name of Manager

Lionel Y. Tokioka Franklin M. Tokioka

(Rev April 2009)

# Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545-1709

a If you are fi	ling for an Automatic 3-Month Extension, complete only Part I and check this box	· IVI		
If you are fi	ling for an Automatic 3-Month Extension, complete only Part I and check this boxiling for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page te Part II unless you have already been granted an automatic 3-month extension on a pre-			
	matic 3-Month Extension of Time. Only submit original (no copies needed).	viously like i offit deed		
A corporation i	required to file Form 990-T and requesting an automatic 6-month extension - check this b	ooy and complete		
	· · · · · · · · · · · · · · · · · · ·			
	orations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 76 ome tax returns.	004 to request an extension of		
one of the reference electronically returns, or a contract of the contract of	ng (e-file). Generally, you can electronically file Form 8868 if you want a 3-month aut turns noted below (6 months for a corporation required to file Form 990-T). However f (1) you want the additional (not automatic) 3-month extension or (2) you file Forms omposite or consolidated From 990-T. Instead, you must submit the fully completed and electronic filing of this form, visit www.irs.gov/efile and click on e-file for Complete to the submit the fully completed and electronic filing of this form, visit www.irs.gov/efile and click on e-file for Complete to the submit the fully completed and electronic filing of this form, visit www.irs.gov/efile and click on e-file for Completed and electronic filing of this form, visit www.irs.gov/efile and click on e-file for Completed and electronic filing of this form, visit www.irs.gov/efile and click on e-file for Completed and electronic filing of this form, visit www.irs.gov/efile and click on e-file for Completed and electronic filing of this form, visit www.irs.gov/efile and click on e-file for Completed and electronic filing of this form, visit www.irs.gov/efile and click on e-file for Completed and electronic filing of this form, visit www.irs.gov/efile and click on e-file for Completed and electronic filing of this form, visit www.irs.gov/efile and click on e-file for Completed and electronic filing of this form.	er, you cannot file Form 8868 990-BL, 6069, or 8870, group d signed page 2 (Part II) of Form		
Type or	Name of Exempt Organization	Employer identification number		
print	Masayuki & Harue Tokioka Foundation	99-0322018		
File by the	Number, street, and room or suite no. If a P.O. box, see instructions			
due date for	1022 Bethel Street, 4th Flr			
filing your return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions			
instructions	Honolulu, HI 96813			
Check type o	f return to be filed (file a separate application for each return)			
X Form 990	Form 990-T (corporation)	rm 4720		
Form 990	-BL Form 990-T (sec 401(a) or 408(a) trust) Fo	rm 5227		
Form 990	-EZ Form 990-T (trust other than above) Form	Form 6069		
Form 990	-PF Form 1041-A Fo	rm 8870		
Telephone	are in the care of ► SHIGEMURA & SAKAMAKI, CPAS, INC.  No ► (808) 596-2922	. —		
	nization does not have an office or place of business in the United States, check this box	-		
	r a Group Return, enter the organization's four digit Group Exemption Number (GEN)	If this is		
	group, check this box If it is for part of the group, check this box a  Ns of all members the extension will cover	nd attach a list with the		
until <u>At</u>	st an automatic 3-month (6 months for a corporation required to file For $\frac{\rm JGUST-31}{\rm corporation}$ , to file the exempt organization return for the organization return for.			
<b>▶</b> X	calendar year 2009 or			
▶	tax year beginning ,, and ending	·		
2 If this tax	year is for less than 12 months, check reason. Initial return Final return	Change in accounting period		
3a If this at	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any		
nonrefun	dable credits See instructions.	3a \$		
	oplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax	l l .		
	clude any prior year overpayment allowed as a credit.	3b \$		
	Due. Subtract line 3b from line 3a Include your payment with this form, or, if required			
with FT	D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System			
instructio		3c   \$		
Caution. If you	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-E	O and Form 8879-EO		
for payment in	structions			
or Privacy A	ct and Paperwork Reduction Act Notice, see Instructions.	Form <b>8868</b> (Rev 4-2009)		

C 00	ed o-	. 4.2000)						
Form 88			/No4 A	L Futurales assemble	4 l . D . 4.11 .			Page 2
Moto		complete Bort II if you b	(Not Automatic) 3-Mont	n Extension, comple	te only Part II a	na check this box		▶
			nave already been grante			n a previously filed	Form 8868	
200	ou are	Additional (Not Auto	3-Month Extension, con	npiete only Part I (or	Only file the	minimal /		<del></del>
CIL		Name of Exempt Organize	omatic) 3-Month Ext	ension of Time.	5 20			)
ype	or	, ,			٠, ١	Employer identifi	cation number	
print			e Tokioka Founda			99-0322018		
File by t					For IRS use only			
due dat	te for	for 1022 Becher Street, 4th Fir						
filing the return S			state, and ZIP code For a fo	reign address, see instru	1		100	- 54
instruct		Honolulu, HI 9	06813		<u> </u>	ينترا بمسفرا ويبسير	ნე # 	1 3 2
Check	k type	e of return to be filed (F	i <u>le a</u> separate application	for each return).				
	Forn	n 990	Form 990-PF			Form 1041-A	Form	6069
	Form	n 990-BL	Form 990-T (sec 4	401(a) or 408(a) trust	)	Form 4720	Form	8870
	Form	n 990-EZ	Form 990-T (trust of	other than above)		Form 5227		
STOP	! Do	not complete Part II if	you were not already g		3-month exter	sion on a previo	usly filed Form	m 8868.
		ks are in the care of				<u></u>	<del></del>	
		ne No ▶		FAX No ▶	<del></del>		<del></del> -	
	•		an office or place of bus			hox	<del></del>	
			r the orga <u>niza</u> tion's four o					
for the	a who	ole aroup, check this boy	▶ If it is for	nort of the group, ch	ock this hav	Tand atta	una ia	
			members the extension is		sck tills box	. Pand atta	cii a	
		<del></del>	<del></del>					
	•		th extension of time until				<del></del>	
		· · · · · · · · · · · · · · · · · · ·	other tax year beginning		and en			<del></del> .
			12 months, check reasor	n Initial return	Final retu	irn Chang	e in accounting	g period
7	State	in detail why you need t	he extension		<del></del>			
		<del></del>	<del></del>					
						· · · · · · · · · · · · · · · · · · ·		
٩а	If this	s application is for Form	1 990-BL, 990-PF, 990-T	, 4720, or 6069, er	nter the tentative	e tax, less any		
1	nonre	efundable credits. See ins	structions.				8a \$	
b	If this	application is for Form	990-PF, 990-T, 4720, or	6069, enter any re	fundable credits	and estimated	5 3	
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid								
	previ	ously with Form 8868					8b \$	
c	Balar	alance 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 instructions. 8c \$							
				nature and Verif			1551.	
Under	penalti	es of perjury. I declare that I	have examined this form, inc			nts, and to the best	of my knowledge	and belief.
	•		authorized to prepare this form				9-	
		$\sim$ $0^{\wedge}$	۸					
Const		March Sal	ê mali CPA	Title ▶	CPA	Data	► MAY 5,	2010
Signatu	iie 🚩			inte 📂	<u> </u>	Date	- IVIII -,	<del> </del>