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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

Hawaii Association of Independent Schools

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

Room/suite

1585 Kapiolani Boulevard No 1212

City or town, state or country, and ZIP + 4

Honolulu, HI 96814

D Employer identification number

23-7067376

E Telephone number

(808) 973-1540

G Gross receipts \$ 869,508

F Name and address of principal officer

Robert M Witt

1585 Kapiolani Boulevard No 1212

Honolulu, HI 96814

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c) (3)

☐ (insert no)

☐ 4947(a)(1) or

☐ 527

J Website:

WWW HAIS ORG

K Form of organization

☒ Corporation

☐ Trust

☐ Association

☐ Other

L Year of formation 1970

M State of legal domicile HI

Part I	Summary																							
Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO PROMOTE CLOSE COOPERATION BETWEEN INDEPENDENT SCHOOLS IN HAWAII THROUGH SEMINARS, CONFERENCES AND PUBLICATIONS, TO MAINTAIN,ENCOURAGE, AND SUPPORT HIGH STANDARDS TO SECURE BROADER PUBLICINTEREST IN THE SCHOOLS, AND TO STRENGTHEN COOPERATION ANDUNDERSTANDING BETWEEN INDEPENDENT AND PUBLIC SCHOOLS																							
Revenue	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets																							
	3 Number of voting members of the governing body (Part VI, line 1a) 17																							
	4 Number of independent voting members of the governing body (Part VI, line 1b) 16																							
	5 Total number of employees (Part V, line 2a) 12																							
	6 Total number of volunteers (estimate if necessary) 0																							
	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 0																							
	7b Net unrelated business taxable income from Form 990-T, line 34 0																							
Expenses	<table><tr><th></th><th>Prior Year</th><th>Current Year</th></tr><tr><td>8 Contributions and grants (Part VIII, line 1h)</td><td>864,735</td><td>795,918</td></tr><tr><td>9 Program service revenue (Part VIII, line 2g)</td><td>482,224</td><td>73,118</td></tr><tr><td>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td><td>7,770</td><td>472</td></tr><tr><td>11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td><td></td><td>0</td></tr><tr><td>12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td><td>1,354,729</td><td>869,508</td></tr></table>		Prior Year	Current Year	8 Contributions and grants (Part VIII, line 1h)	864,735	795,918	9 Program service revenue (Part VIII, line 2g)	482,224	73,118	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,770	472	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,354,729	869,508					
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Part II

Signature Block

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Signature of officer

Robert M Witt Executive Director

Date

2010-11-18

Paid Preparer's Use Only

Preparer's signature

Mark A Hayes

Date

Check if self-employed

Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

CW Associates CPAS

700 Bishop Street Suite 1040

Honolulu, HI 96813

EIN

Phone no

(808) 531-1040

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

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

Cat No 11282Y

Form 990 (2009)

Part III

Statement of Program Service Accomplishments

1

Briefly describe the organization's mission

TO PROMOTE CLOSE COOPERATION BETWEEN INDEPENDENT SCHOOLS IN HAWAII THROUGH SEMINARS, CONFERENCES AND PUBLICATIONS, TO MAINTAIN, ENCOURAGE, AND SUPPORT HIGH STANDARDS TO SECURE BROADER PUBLIC INTEREST IN THE SCHOOLS, AND TO STRENGTHEN COOPERATION AND UNDERSTANDING BETWEEN INDEPENDENT AND PUBLIC SCHOOLS

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 439,148 including grants of \$ 0) (Revenue \$ 73,118)

MEMBERSHIP SERVICES AND CONFERENCES TO PROMOTE CLOSE COOPERATION BETWEEN INDEPENDENT SCHOOLS OF HAWAII, MAINTAIN, ENCOURAGE, AND SUPPORT HIGH STANDARDS AND SECURE PUBLIC INTEREST IN INDEPENDENT SCHOOLS THE ASSOCIATION SERVES 98 MEMBER SCHOOLS CONSISTING OF 4,025 TEACHERS, AND 38,524 STUDENTS

4b

(Code) (Expenses \$ 330,562 including grants of \$ 60,500) (Revenue \$)

HAWAII EDUCATIONAL NETWORKING CONSORTIUM, AND SCHOOL OF THE FUTURE

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses \$ 769,710

Part IV

Checklist of Required Schedules

		Yes	No	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10		No
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No	
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
14b	• Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a13		
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a12	2b	Yes
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		No
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
	b If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year			7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f	
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?			9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12			10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b	
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body . . .	1a	17	
b	Enter the number of voting members that are independent . . .	1b	16	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . .	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . .	5		No
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . .	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		No
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶HI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☒ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ HI ASSOC OF INDEP SCHOOLS 1585 KAPIOLANI BLVD 1212 Honolulu, HI 96814 (808) 973-1540

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

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

Form **990** (2009)

1b	Total	230,879	0	25,932
----	-----------------	---------	---	--------

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization

1

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization		
	0		

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b	473,677				
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	322,241				
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f			795,918			
Program Service Revenue			Business Code					
	2a	CONFERENCES	611,710	41,078	41,078			
	b	MASTER DEGREE IN EDUCA	611,710	32,040	32,040			
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f			73,118			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		472			472	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties						
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss)						
	7a	(i) Securities		(ii) Other				
	b	Less cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)						
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18		a				
		b Less direct expenses		b				
c	Net income or (loss) from fundraising events . .							
9a	Gross income from gaming activities See Part IV, line 19		a					
	b Less direct expenses		b					
c	Net income or (loss) from gaming activities . .							
10a	Gross sales of inventory, less returns and allowances		a					
	b Less cost of goods sold		b					
c	Net income or (loss) from sales of inventory . .							
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d							
12	Total revenue. See Instructions			869,508	73,118	0	472	

Part IX

Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	39,000	39,000		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	21,500	21,500		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	256,811	183,004	72,087	1,720
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	13,971	9,970	3,907	94
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	3,265	2,327	916	22
9	Other employee benefits	7,248	5,158	2,041	49
10	Payroll taxes	17,672	12,594	4,960	118
11	Fees for services (non-employees)				
a	Management				
b	Legal	25,618	25,215	394	9
c	Accounting	7,929	5,651	2,225	53
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	208,618	207,535	1,057	26
12	Advertising and promotion	44,390	44,289	99	2
13	Office expenses	46,175	36,120	9,821	234
14	Information technology				
15	Royalties				
16	Occupancy	53,061	37,813	14,893	355
17	Travel	70,057	70,057		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	54,991	54,660	323	8
20	Interest	1,007	717	283	7
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	8,580	6,115	2,408	57
23	Insurance	5,903	4,206	1,657	40
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	OTHER EXPENSES	4,911	3,779	1,106	26
b					
c					
d					
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	890,707	769,710	118,177	2,820
26	Joint costs. Check here ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			573,021	1	518,078
	2	Savings and temporary cash investments			7,149	2	37,655
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			22,027	4	61,813
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			884	9	1,208
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	85,106			
	b	Less accumulated depreciation	10b	58,341	39,749	10c	26,765
	11	Investments—publicly traded securities				11	
	12	Investments—other securities. See Part IV, line 11				12	
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			143,339	15	51,219
	16	Total assets. Add lines 1 through 15 (must equal line 34)			786,169	16	696,738
Liabilities	17	Accounts payable and accrued expenses			195,131	17	86,473
	18	Grants payable				18	
	19	Deferred revenue			178,710	19	219,535
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities. Complete Part X of Schedule D			11,466	25	9,579
	26	Total liabilities. Add lines 17 through 25			385,307	26	315,587
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			231,250	27	237,827
	28	Temporarily restricted net assets			169,612	28	143,324
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			400,862	33	381,151
	34	Total liabilities and net assets/fund balances			786,169	34	696,738

Part XI **Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . .	Yes	
b Were the organization's financial statements audited by an independent accountant? 		No
c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O . . .	Yes	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . .		

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization Hawaii Association of Independent Schools	Employer identification number 23-7067376
---	--

Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state
- 5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☒

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☒ Type I

b

☐ Type II

c

☐ Type III - Functionally integrated

d

☐ Type III - Other
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		No
11g(ii)		No
11g(iii)		No

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
See Additional Data Table									
Total									0

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						

12

Gross receipts from related activities, etc (See instructions)

12

13

First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14	Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	
15	Public Support Percentage for 2008 Schedule A, Part II, line 14	15	

16a

33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

b

33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

17a

10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here**. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b

10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here**. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

18

Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge						
6Total. Add lines 1 through 5						
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6						
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b						
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13Total support (Add lines 9, 10c, 11 and 12.)						
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.**
▶ **Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No 1545-0047

2009

Open to Public
Inspection

If the organization answered “Yes,” to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered “Yes,” to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered “Yes,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization Hawaii Association of Independent Schools	Employer identification number 23-7067376
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Part I-A

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1
- Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2
- Political expenditures
- ▶
- \$
- 3
- Volunteer hours

Part I-B

Complete if the organization is exempt under section 501(c)(3).

- 1
- Enter the amount of any excise tax incurred by the organization under section 4955
- ▶
- \$
- 2
- Enter the amount of any excise tax incurred by organization managers under section 4955
- ▶
- \$
- 3
- If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- ☐ Yes
- ☐ No
- 4a
- Was a correction made?
- ☐ Yes
- ☐ No
- b
- If "Yes," describe in Part IV

Part I-C

Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- 1
- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- ▶
- \$
- 2
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- ▶
- \$
- 3
- Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- ▶
- \$
- 4
- Did the filing organization file **Form 1120-POL** for this year?
- ☐ Yes
- ☐ No
- 5
- State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A

Check

☐

if the filing organization belongs to an affiliated group

B

Check

☐

if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing Organization's Totals	(b) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)															
b Total lobbying expenditures to influence a legislative body (direct lobbying)		24,222													
c Total lobbying expenditures (add lines 1a and 1b)		24,222													
d Other exempt purpose expenditures		866,485													
e Total exempt purpose expenditures (add lines 1c and 1d)		890,707													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		158,606													
<table><tr><td>If the amount on line 1e, column (a) or (b) is:</td><td>The lobbying nontaxable amount is:</td></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g Grassroots nontaxable amount (enter 25% of line 1f)		39,652													
h Subtract line 1g from line 1a If zero or less, enter -0-		0													
i Subtract line 1f from line 1c If zero or less, enter -0-		0													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount	135,741	116,659	203,680	158,606	614,686
b Lobbying ceiling amount (150% of line 2a, column(e))					922,029
c Total lobbying expenditures	30,002	16,034	8,543	24,222	78,801
d Grassroots non-taxable amount	33,935	29,165	50,920	39,652	153,672
e Grassroots ceiling amount (150% of line 2d, column (e))					230,508
f Grassroots lobbying expenditures					

Part II-B

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
	a Volunteers?			
	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
	c Media advertisements?			
	d Mailings to members, legislators, or the public?			
	e Publications, or published or broadcast statements?			
	f Grants to other organizations for lobbying purposes?			
	g Direct contact with legislators, their staffs, government officials, or a legislative body?			
	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
	i Other activities? If "Yes," describe in Part IV			
	j Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV

Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation

SCHEDULE D

(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**
► **Attach to Form 990. ► See separate instructions.**

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization
Hawaii Association of Independent Schools

Employer identification number
23-7067376

Part I

Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	☐ Yes ☐ No	

Part II

Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	Total number of conservation easements
2b	Total acreage restricted by conservation easements
2c	Number of conservation easements on a certified historic structure included in (a)
2d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ► _____

4

Number of states where property subject to conservation easement is located ► _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ► _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

► \$ _____

(ii) Assets included in Form 990, Part X

► \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

► \$ _____

b

Assets included in Form 990, Part X

► \$ _____

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☐ Other

c

☐ Preservation for future generations

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ %

b

Permanent endowment ▶ %

c

Term endowment ▶ %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

3a(i)

Yes

No

(ii)

related organizations

3a(ii)

Yes

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

Yes

No

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		19,601	13,855	5,746
c Leasehold improvements				
d Equipment		26,813	26,338	475
e Other		38,692	18,148	20,544
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				26,765

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
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Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
Hawaii Association of Independent Schools

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2009

Open to Public
Inspection

Employer identification number
23-7067376

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☒

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
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Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2009

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Hawaii Association of Independent Schools

Employer identification number

23-7067376

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	☐ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☒ Compensation survey or study ☐ Form 990 of other organizations ☐ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

[illegible]

Part III **Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE O
 (Form 990)

Department of the Treasury
 Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
 Hawaii Association of Independent Schools

Employer identification number

 23-7067376

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		Prior to filing, the Form 990 is reviewed by the HAIS Executive Committee in detail and reported to the HAIS Board of Directors
Form 990, Part VI, Section B, line 12c		Each director, officer, and other employees of the organization signs a statement, which affirms such person (1) Has received and read the Statement of Conflict of Interest policy, (2) Does not have any actual, apparent or potential conflicts of interest, (3) Agrees to abide by the policy, and (4) Understands it is his or her responsibility to inform the organization in writing of any change in circumstances relating to the policy
Form 990, Part VI, Section C, line 19		The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request
Form 990, Part I, Line 22	Net Assets Reconciliation	Beginning Net Assets 400,862 Decrease in Net Assets <21,199> Unrealized Gains 1,488 ----- Ending Net Assets 381,151

Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2009

Open to Public Inspection

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**
▶ **Attach to Form 990.** ▶ **See separate instructions.**

Employer identification number

23-7067376

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(f)
Direct controlling
entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(f)
Direct controlling
entity

See Additional Data Table

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
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Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

Yes

Yes

No

No

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved
(1)	Hawaiian Educational Council	M	23,551
(2)	hawaiian Educational Council	N	289,857
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2009

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
Hawaiian Educational Council 1585 Kapiolani Blvd Suite 1212 Honolulu, HI96814 99-0142666	To establish and conduct educational programs	HI	501(c)(3)	Line 9	N/A
ACADEMY OF THE PACIFIC 913 Alewa Drive Honolulu, HI96817 99-0107223	School	HI	501(c)(3)	Line 2	N/A
ADVENTIST MALAMA ELEMENTARY SCHOOL 86-072 Farrington Hwy Waianae, HI96792 99-0350761	School	HI	501(c)(3)	Line 2	N/A
AKA'ULA SCHOOL PO Box 2098 Kaunakakai, HI96748 56-2393609	School	HI	501(c)(3)	Line 2	N/A
AMERICAN RENAISSANCE ACADEMY PO Box 75357 Kapolei, HI96707 26-0186914	School	HI	501(c)(3)	Line 2	N/A
ASSETS SCHOOL One Ohana Nui Way Honolulu, HI96818 99-6001152	School	HI	501(c)(3)	Line 2	N/A
CALVERY CHAPEL CHRISTIAN SCHOOL 98-1016 Komo Mai Drive Aiea, HI96701 99-0227852	School	HI	501(c)(3)	Line 2	N/A
CARDEN ACADEMY 55A Makaena Pl Pukalani, HI96768 99-0340877	School	HI	501(c)(3)	Line 2	N/A
CENTRAL UNION PRESCHOOL & KINDERGARTEN 1660 South Beretania Street Honolulu, HI96826 99-0076013	School	HI	501(c)(3)	Line 2	N/A
CHAMINADE UNIVERSITY 3140 Waiialae Ave Honolulu, HI96816 99-0272261	School	HI	501(c)(3)	Line 2	N/A
THE CHILDREN'S HOUSE 1840 Komo Mai Drive Pearl City, HI96782 99-0340922	School	HI	501(c)(3)	Line 2	N/A
CHRISTIAN ACADEMY 3400 Moanalua Road Honolulu, HI96819 99-0079322	School	HI	501(c)(3)	Line 2	N/A
CHRISTIAN LIBERTY SCHOOL 16-675 Milo Street Keaau, HI96749 99-0290191	School	HI	501(c)(3)	Line 2	N/A
CLEARVIEW CHRISTIAN GIRL'S SCHOOL PO Box 835 Kula, HI96790 99-0327165	School	HI	501(c)(3)	Line 2	N/A
DAMIEN MEMORIAL SCHOOL 1401 Houghtailing Street Honolulu, HI96817 99-0108341	School	HI	501(c)(3)	Line 2	N/A
DORIS TODD MEMORIAL CHRISTIAN SCHOOL 519 Baldwin Avenue Paia, HI96779 99-0241019	School	HI	501(c)(3)	Line 2	N/A
E MAKA'ALA SCHOOL 440 W Lanikaula Street Hilo, HI96720 99-0154706	School	HI	501(c)(3)	Line 2	N/A
ELITE ELEMENT ACADEMY 210 Iolani Avenue Suite 4 Honolulu, HI96813 73-1639617	School	HI	501(c)(3)	PF	N/A
EMMANUEL LUTHERAN SCHOOL 520 West One Street Kahului, HI96732 99-0151567	School	HI	501(c)(3)	Line 2	N/A
FRIENDSHIP CHRISTIAN SCHOOLS 91-1130 Renton Road Ewa, HI96706 99-0304612	School	HI	501(c)(3)	Line 2	N/A
HAILI CHRISTIAN SCHOOL 190 Ululani Street Hilo, HI96720 99-0183441	School	HI	501(c)(3)	Line 2	N/A
HALEAKALA WALDORF SCHOOL 4160 Lower Kula Road Kula Maui, HI96790 99-0151085	School	HI	501(c)(3)	Line 2	N/A
HANAHAU'OLI SCHOOL 1922 Makiki Street Honolulu, HI96822 99-0074143	School	HI	501(c)(3)	Line 2	N/A
HANALANI SCHOOLS 94-294 Anania Drive Mililani, HI96789 23-7334963	School	HI	501(c)(3)	Line 2	N/A
HAWAII BAPTIST ACADEMY 21 Bates Street Honolulu, HI96817 99-0301266	School	HI	501(c)(3)	Line 2	N/A
HAWAI'I MONTESSORI SCHOOL AT KAMUELA 64-1058 Mamalahoa Hwy Kamuela, HI96743 99-0199335	School	HI	501(c)(3)	Line 2	N/A
HAWAI'I MONTESSORI SCHOOL AT KONA 74-978 Manawalea Street KailuaKona, HI96740 99-0199335	School	HI	501(c)(3)	Line 2	N/A
HAWAII PACIFIC UNIVERSITY 1164 Bishop St Honolulu, HI96813 99-0113930	School	HI	501(c)(3)	Line 2	N/A
HAWAII PREPARATORY ACADEMY 65-1692 Kohala Mountain Road Kamuela, HI96743 99-0078306	School	HI	501(c)(3)	Line 2	N/A
HAWAIIAN MISSION ACADEMY K-8 1415 Makiki Street Honolulu, HI96814 99-0211996	School	HI	501(c)(3)	Line 2	N/A

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
HAWAIIAN MISSION ACADEMY 9-12 1438 Pensacola Street Honolulu, HI96822 99-0040572	School	HI	501(c)(3)	Line 2	N/A
HAWAIIAN MISSION ACADEMY WINDWARD 160 Mookua Street Kailua, HI96734 99-0217322	School	HI	501(c)(3)	Line 2	N/A
HO'ALA SCHOOL 1067 A California Avenue Wahiawa, HI96786 99-0241020	School	HI	501(c)(3)	Line 2	N/A
HOLY NATIVITY SCHOOL 5286 Kalaniana'ole Highway Honolulu, HI96821 91-1877098	School	HI	501(c)(3)	Line 2	N/A
HONGWANJI MISSION SCHOOL 1728 Pali Highway Honolulu, HI96813 99-0200874	School	HI	501(c)(3)	Line 2	N/A
HONOLULU WALDORF SCHOOL 350 Ulua Street Honolulu, HI96821 99-0106494	School	HI	501(c)(3)	Line 2	N/A
HO'OMANA HOU SCHOOL PO Box 2047 Kaunakakai, HI96748 23-7426312	School	HI	501(c)(3)	Line 2	N/A
HORIZONS ACADEMY OF MAUI INC PO Box 1308 Haiku, HI96708 94-3264165	School	HI	501(c)(3)	Line 2	N/A
HUALALAI ACADEMY 74-4966 Kealakaa Street KailuaKona, HI96740 99-0312113	School	HI	501(c)(3)	Line 2	N/A
'IOLANI SCHOOL 563 Kamoku Street Honolulu, HI96826 99-0073502	School	HI	501(c)(3)	Line 2	N/A
ISLAND PACIFIC ACADEMY 909 Haumea Street Kapolei, HI96707 68-0534162	School	HI	501(c)(3)	Line 2	N/A
ISLAND SCHOOL 3-1875 Kaumualii Highway Lihue, HI96766 99-0171474	School	HI	501(c)(3)	Line 2	N/A
KA'AHUMANU HOU CHRISTIAN SCHOOLS 777 Mokulele Highway Kahului, HI96732 91-2159911	School	HI	501(c)(3)	Line 2	N/A
KAHILI ADVENTIST SCHOOL PO Box 480 Lawai, HI96765 99-0206350	School	HI	501(c)(3)	Line 2	N/A
KAILUA CHRISTIAN ACADEMY 1110 A Kailua Road Kailua, HI96734 91-2031387	School	HI	501(c)(3)	Line 2	N/A
KAIMUKI CHRISTIAN SCHOOL 1117 Koko Head Avenue Honolulu, HI96816 99-0119608	School	HI	501(c)(3)	Line 2	N/A
KAMEHAMEHA SCHOOLS - KAPALAMA CAMPUS 1887 Makuakane Street Honolulu, HI96817 99-0073480	School	HI	501(c)(3)	Line 2	N/A
KAMEHAMEHA SCHOOLS HAWAI'I 16-716 Volcano Road Keaaui, HI96749 99-0073480	School	HI	501(c)(3)	Line 2	N/A
KAMEHAMEHA SCHOOLS MAUI 270 Aapueo Parkway Pukalani, HI96768 99-0073480	School	HI	501(c)(3)	Line 2	N/A
KAUAI CHRISTIAN ACADEMY PO Box 1121 Kilauea, HI96754 99-0317249	School	HI	501(c)(3)	Line 2	N/A
KAUAI PACIFIC SCHOOL 4480 Hookui Road Kilauea, HI96754 99-0313576	School	HI	501(c)(3)	Line 2	N/A
KAWAIAHA'O CHURCH SCHOOL 872 Mission Lane Honolulu, HI96813 99-0075241	School	HI	501(c)(3)	Line 2	N/A
KOHALA MISSION SCHOOL PO Box 99 Hawi, HI96719 99-0292539	School	HI	501(c)(3)	Line 2	N/A
KONA ADVENTIST CHRISTIAN SCHOOL PO Box 739 Captain Cook, HI96704 99-0292541	School	HI	501(c)(3)	Line 2	N/A
KONA CHRISTIAN ACADEMY PO Box 1179 KailuaKona, HI96745 99-0295677	School	HI	501(c)(3)	Line 2	N/A
KOOLAU BAPTIST ACADEMY 45-633 Keneke Street PO Box 1642 Kaneohe, HI96744 99-0170569	School	HI	501(c)(3)	Line 2	N/A
LA PIETRA - HAWAII SCHOOL FOR GIRLS 2933 Poni Moi Road Honolulu, HI96815 99-0110027	School	HI	501(c)(3)	Line 2	N/A
LANAKILA BAPTIST SCHOOLS 94-1250 Waipahu Street Waipahu, HI96797 99-0117787	School	HI	501(c)(3)	Line 2	N/A
LE JARDIN ACADEMY 917 Kalaniana'ole Hwy Kailua, HI96734 99-0146978	School	HI	501(c)(3)	Line 2	N/A
LUTHERAN HIGH SCHOOL OF HAWAII 1404 University Avenue Honolulu, HI96822 99-0258180	School	HI	501(c)(3)	Line 2	N/A

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
MAILI BIBLE SCHOOL 87-138 Gilipake Street Waianae, HI96792 99-0159785	School	HI	501(c)(3)	Line 2	N/A
MAKUA LANI CHRISTIAN SCHOOL 74-4947 Mamalahoa Highway Holualoa, HI96725 99-0295441	School	HI	501(c)(3)	Line 2	N/A
MALAMALAMA WALDORF SCHOOL HC 3 Box 13068 Keeau, HI96749 99-0192556	School	HI	501(c)(3)	Line 2	N/A
MARYKNOLL SCHOOL 1526 Alexander Street Honolulu, HI96822 99-0110569	School	HI	501(c)(3)	Line 2	N/A
MAUI ADVENTIST SCHOOL 261 S Puunene Avenue Kahului, HI96732 99-0292545	School	HI	501(c)(3)	Line 2	N/A
MAUI PREPARATORY ACADEMY PMB 186 5905 Napilihau Street 109B Lahaina, HI96761 99-0354508	School	HI	501(c)(3)	Line 2	N/A
MAUNA LOA SCHOOL 172 Kapiolani Street Hilo, HI96720 99-0222903	School	HI	501(c)(3)	Line 2	N/A
MID-PACIFIC INSTITUTE 2445 Kaala Street Honolulu, HI96822 99-0073514	School	HI	501(c)(3)	Line 2	N/A
MONTESSORI COMMUNITY SCHOOL 1239 Nehoa Street Honolulu, HI96822 99-0150503	School	HI	501(c)(3)	Line 2	N/A
MONTESSORI HALE O KEIKI PO Box 2348 Kihei, HI96753 99-0279379	School	HI	501(c)(3)	Line 2	N/A
MONTESSORI SCHOOL OF MAUI 2933 Baldwin Avenue Makawao, HI96768 99-0223419	School	HI	501(c)(3)	Line 2	N/A
NAVY HALE KEIKI SCHOOL 153 Bougainville Drive Honolulu, HI96818 99-0299640	School	HI	501(c)(3)	Line 2	N/A
OLELO CHRISTIAN ACADEMY PO Box 3965 Lihue, HI967666863 30-0054855	School	HI	501(c)(3)	Line 2	N/A
OUR REDEEMER LUTHERAN SCHOOL 2428 Wilder Avenue Honolulu, HI96822 99-0079329	School	HI	501(c)(3)	Line 2	N/A
OUR SAVIOR LUTHERAN SCHOOL 98-1098 Moanalua Road Aiea, HI96701 99-0142627	School	HI	501(c)(3)	Line 2	N/A
PACIFIC BUDDHIST ACADEMY 1710 Pali Highway Honolulu, HI96813 04-3660909	School	HI	501(c)(3)	Line 2	N/A
PARKER SCHOOL 65-1224 Lindsey Road Kamuela, HI96743 99-0329799	School	HI	501(c)(3)	Line 2	N/A
PLAYMATE KINDERGARTEN DAY CARE CENTER & GRADE SCHOOL LTD 1704 Keeaumoku Street Honolulu, HI96822 99-0214622	School	HI	501(c)(3)	Line 2	N/A
PUNAHOU SCHOOL 1601 Punahou Street Honolulu, HI96822 99-0073523	School	HI	501(c)(3)	Line 2	N/A
REDEMPTION ACADEMY 355 N Kainalu Drive Kailua, HI96734 99-0222152	School	HI	501(c)(3)	Line 2	N/A
SACRED HEARTS ACADEMY 3253 Waialae Avenue Honolulu, HI96816 99-0093012	School	HI	501(c)(3)	Line 2	N/A
SAINT ANTHONY JRSR HIGH SCHOOL 1618 Lower Main Street Wailuku, HI96793 99-0148294	School	HI	501(c)(3)	Line 2	N/A
SAINT FRANCIS SCHOOL 2707 Pamoia Road Honolulu, HI96822 99-0073556	School	HI	501(c)(3)	Line 2	N/A
SAINT LOUIS SCHOOL 3142 Waialae Avenue Honolulu, HI96816 99-0272260	School	HI	501(c)(3)	Line 2	N/A
SEABURY HALL 480 Olinda Road Makawao, HI96768 99-0110784	School	HI	501(c)(3)	Line 2	N/A
SOTO ACADEMY 1708 Nuuanu Avenue Honolulu, HI96817 99-0075255	School	HI	501(c)(3)	Line 2	N/A
ST ANDREW'S PRIORY SCHOOL 224 Queen Emma Square Honolulu, HI96813 99-0073525	School	HI	501(c)(3)	Line 2	N/A
ST CLEMENT'S SCHOOL 1515 Wilder Avenue Honolulu, HI96822 99-0119532	School	HI	501(c)(3)	Line 2	N/A
ST JOSEPH SCHOOL 1000 Ululani Street Hilo, HI96720 99-6000779	School	HI	501(c)(3)	Line 2	N/A
Saint Mark Lutheran School 45-725 Kamehameha Hwy Kaneohe, HI96744 99-0090474	School	HI	501(c)(3)	Line 2	N/A

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
ST PHILOMENA EARLY LEARNING CENTER 3300 Ala Laulani Street Honolulu, HI96818 99-0182149	School	HI	501(c)(3)	Line 2	N/A
STAR OF THE SEA EARLY LEARNING CENTER 4470 Aliioka Street 100 Honolulu, HI96821 99-0078514	School	HI	501(c)(3)	Line 2	N/A
SUNSET BEACH CHRISTIAN SCHOOL 59-578 Kamehameha Hwy Haleiwa, HI96712 99-6007776	School	HI	501(c)(3)	Line 2	N/A
TRINITY LUTHERAN SCHOOL 1611 California Avenue Wahiawa, HI96786 99-0087102	School	HI	501(c)(3)	Line 2	N/A
TRINITY CHRISTIAN SCHOOL 875 Auloa Road Kailua, HI96734 99-0207568	School	HI	501(c)(3)	Line 2	N/A
VARIETY SCHOOL OF HAWAII 710 Palekaua Street Honolulu, HI96816 99-0105604	School	HI	501(c)(3)	Line 2	N/A
WAIMEA COUNTRY SCHOOL PO Box 399 Kamulea, HI96743 99-0327838	School	HI	501(c)(3)	Line 2	N/A
WAOLANI JUDD NAZARENE SCHOOL 408 North Judd Street Honolulu, HI96817 99-0109400	School	HI	501(c)(3)	Line 2	N/A
WINDWARD NAZARENE ACADEMY 45-232 Puaae Road PO Box 1633 Kaneohe, HI96744 99-0119558	School	HI	501(c)(3)	Line 2	N/A

Form

4562

Depreciation and Amortization
(Including Information on Listed Property)

OMB No 1545-0172

2009

Attachment
Sequence No 67

Name(s) shown on return Hawaii Association of Independent Schools	Business or activity to which this form relates Form 990 Page 10	Identifying number 23-7067376
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Part I

Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	250,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	800,000
4	Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions	5	

6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6			
7	Listed property Enter the amount from line 29	7	
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2008 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 .	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part IISpecial Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	12,984

Part IIIMACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2009	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

Part IVSummary (see instructions)

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions	22	12,984
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)
Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed?

☐ Yes ☐ No

24b If "Yes," is the evidence written?

☐ Yes ☐ No

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles

30 Total business/investment miles driven during the year (do not include commuting miles)	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal(noncommuting) miles driven												
33 Total miles driven during the year Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who **are not** more than 5% owners or related persons (see instructions)

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) A mortization period or percentage	(f) A mortization for this year
42 A mortization of costs that begins during your 2009 tax year (see instructions)					
43 A mortization of costs that began before your 2009 tax year				43	
44 Total. Add amounts in column (f) See the instructions for where to report				44	

Additional Data

Software ID:

Software Version:

EIN: 23-7067376

Name: Hawaii Association of Independent Schools

Form 990, Schedule A, Part I, Line 11h - Provide the following information about the organizations the organization supports.

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section)	(iv) Is the organization in (i) listed in your governing document?		(v) Did you notify the organization in (i) of your support?		(vi) Is the organization in (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
ACADEMY OF THE PACIFIC	990107223	02		No					0
ADVENTIST MALAMA ELEMENTARY SCHOOL	990350761	02		No					0
AKA'ULA SCHOOL	562393609	02		No					0
AMERICAN RENAISSANCE ACADEMY	260186914	02		No					0
ASSETS SCHOOL	996001152	02		No					0
CALVERY CHAPEL CHRISTIAN SCHOOL	990227852	02		No					0
CARDEN ACADEMY	990340877	02		No					0
CENTRAL UNION PRESCHOOL & KINDERGARTEN	990076013	02		No					0
CHAMINADE UNIVERSITY	990272261	02		No					0
THE CHILDREN'S HOUSE	990340922	02		No					0
CHRISTIAN ACADEMY	990079322	02		No					0
CHRISTIAN LIBERTY SCHOOL	990290191	02		No					0
CLEARVIEW CHRISTIAN GIRL'S SCHOOL	990327165	02		No					0
DAMIEN MEMORIAL SCHOOL	990108341	02	Yes						0
DORIS TODD MEMORIAL CHRISTIAN SCHOOL	990241019	02		No					0
E MAKA'ALA SCHOOL	990154706	02		No					0
ELITE ELEMENT ACADEMY	731639617	02		No					0
EMMANUEL LUTHERAN SCHOOL	990151567	02		No					0
FRIENDSHIP CHRISTIAN SCHOOLS	990304612	02		No					0
HAILI CHRISTIAN SCHOOL	990183441	02		No					0
HALEAKALA WALDORF SCHOOL	990151085	02		No					0
HANAHAU'OLI SCHOOL	990074143	02	Yes						0
HANALANI SCHOOLS	237334963	02		No					0
HAWAII BAPTIST ACADEMY	990301266	02	Yes						0
HAWAII MONTESSORI SCHOOL AT KAMUELA	990199335	02		No					0
HAWAII MONTESSORI SCHOOL AT KONA	990199335	02		No					0
HAWAII PACIFIC UNIVERSITY	990113930	02		No					0
HAWAII PREPARATORY ACADEMY	990078306	02	Yes						0
HAWAIIAN MISSION ACADEMY K-8	990211996	02		No					0
HAWAIIAN MISSION ACADEMY 9-12	990040572	02		No					0
HAWAIIAN MISSION ACADEMY WINDWARD	990217322	02		No					0
HO'ALA SCHOOL	990241020	02		No					0
HOLY NATIVITY SCHOOL	911877098	02		No					0
HONGWANJI MISSION SCHOOL	990200874	02		No					0
HONOLULU WALDORF SCHOOL	990106494	02		No					0
HO'OMANA HOU SCHOOL	237426312	02		No					0
HORIZONS ACADEMY OF MAUI INC	943264165	02		No					0
HUALALAI ACADEMY	990312113	02		No					0
'IOLANI SCHOOL	990073502	02	Yes						0
ISLAND PACIFIC ACADEMY	680534162	02		No					0
ISLAND SCHOOL	990171474	02		No					0
KA'AHUMANU HOU CHRISTIAN SCHOOLS	912159911	02		No					0
KAHILI ADVENTIST SCHOOL	990206350	02		No					0
KAILUA CHRISTIAN ACADEMY	912031387	02		No					0
KAIMUKI CHRISTIAN SCHOOL	990119608	02		No					0
KAMEHAMEHA SCHOOLS MAUI	990073480	02		No					0
KAMEHAMEHA SCHOOLS HAWAII	990073480	02		No					0
KAMEHAMEHA SCHOOLS - KAPALAMA CAMPUS	990073480	02	Yes						0
KAUAI CHRISTIAN ACADEMY	990317249	02		No					0
KAUAI PACIFIC SCHOOL	990313576	02		No					0
KAWAIAHA'O CHURCH SCHOOL	990075241	02		No					0
KOHALA MISSION SCHOOL	990292539	02		No					0
KONA ADVENTIST CHRISTIAN SCHOOL	990292541	02		No					0
KONA CHRISTIAN ACADEMY	990295677	02		No					0
KOOLAU BAPTIST ACADEMY	990170569	02		No					0
LA PIETRA - HAWAII SCHOOL FOR GIRLS	990110027	02	Yes						0
LANAKILA BAPTIST SCHOOLS	990117787	02		No					0
LE JARDIN ACADEMY	990146978	02		No					0
LUTHERAN HIGH SCHOOL OF HAWAII	990258180	02		No					0
MAILI BIBLE SCHOOL	990159785	02		No					0
MAKUA LANI CHRISTIAN SCHOOL	990295441	02		No					0
MALAMALAMA WALDORF SCHOOL	990192556	02		No					0
MARYKNOLL SCHOOL	990110569	02	Yes						0
MAUI ADVENTIST SCHOOL	990292545	02		No					0
MAUI PREPARATORY ACADEMY	990354508	02		No					0
MAUNA LOA SCHOOL	990222903	02		No					0
MID- PACIFIC INSTITUTE	990073514	02	Yes						0
MONTESSORI COMMUNITY SCHOOL	990150503	02		No					0
MONTESSORI HALE O KEIKI	990279379	02		No					0
MONTESSORI SCHOOL OF MAUI	990223419	02		No					0
NAVY HALE KEIKI SCHOOL	990299640	02		No					0
OLELO CHRISTIAN ACADEMY	300054855	02		No					0
OUR REDEEMER LUTHERAN SCHOOL	990079329	02		No					0
OUR SAVIOR LUTHERAN SCHOOL	990142627	02		No					0
PACIFIC BUDDHIST ACADEMY	043660909	02		No					0
PARKER SCHOOL	990329799	02		No					0
PLAYMATE KINDERGARTEN DAY CARE CENTER & GRADE SCHOOL LTD	990214622	02		No					0
PUNAHOU SCHOOL	990073523	02	Yes						0
REDEMPTION ACADEMY	990222152	02		No					0
SACRED HEARTS ACADEMY	990093012	02	Yes						0
SAINT ANTHONY JRSR HIGH SCHOOL	990148294	02		No					0
SAINT FRANCIS SCHOOL	990073556	02	Yes						0
SAINT LOUIS SCHOOL	990272260	02	Yes						0
SEABURY HALL	990110784	02	Yes						0
SOTO ACADEMY	990075255	02		No					0
ST ANDREW'S PRIORY SCHOOL	990073525	02	Yes						0
ST CLEMENT'S SCHOOL	990119532	02		No					0
ST JOSEPH SCHOOL	996000779	02		No					0
SAINT MARK LUTHERAN SCHOOL	990090474	02		No					0
ST PHILOMENA EARLY LEARNING CENTER	990182149	02		No					0
STAR OF THE SEA EARLY LEARNING CENTER	990078514	02	Yes						0
SUNSET BEACH CHRISTIAN SCHOOL	996007776	02		No					0
TRINITY LUTHERAN SCHOOL	990087102	02		No					0
TRINITY CHRISTIAN SCHOOL	990207568	02		No					0
VARIETY SCHOOL OF HAWAII	990105604	02		No					0
WAIMEA COUNTRY SCHOOL	990327838	02		No					0
WAOLANI JUDD NAZARENE SCHOOL	990109400	02		No					0
WINDWARD NAZARENE ACADEMY	990119558	02		No					0

Additional Data

Software ID:

Software Version:

EIN: 23-7067376

Name: Hawaii Association of Independent Schools

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOE CRICE PRESIDENT	1 00	X		X				0	0	0
SANDRA THEUNICK VICE PRESIDENT	1 00	X		X				0	0	0
ROBERTA BISHOP SECRETARY/TREASURER	40 00	X		X				83,026	0	8,403
D RODNEY CHAMBERLAIN DIRECTOR	1 00	X						0	0	0
MICHAEL J CHUN DIRECTOR	1 00	X						0	0	0
VAL T IWASHITA DIRECTOR	1 00	X						0	0	0
Walter Kirimitsu Director	1 00	X						0	0	0
ROBERT G PETERS DIRECTOR	1 00	X						0	0	0
JOSEPH J SCHMIDT DIRECTOR	1 00	X						0	0	0
JAMES K SCOTT DIRECTOR	1 00	X						0	0	0
NANCY SHAW DIRECTOR	1 00	X						0	0	0
CARL M STURGES DIRECTOR	1 00	X						0	0	0
MARK Y SUGIMOTO DIRECTOR	1 00	X						0	0	0
PATSY H TOM DIRECTOR	1 00	X						0	0	0
Betty White DIRECTOR	1 00	X						0	0	0
DANIEL E WHITE DIRECTOR	1 00	X						0	0	0
CYNTHIA WINANS-BURNS DIRECTOR	1 00	X						0	0	0
WILL HANCOCK EMERITUS	1 00	X						0	0	0
CARMEN HIMENES EMERITUS	1 00	X						0	0	0
NANCY WHITE EMERITUS	1 00	X						0	0	0
ROBERT M WITT EXECUTIVE DIRECTOR	40 00			X				147,853	0	17,529