

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

Department of the Treesury

Return of Private Foundation

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

OMB No. 1645-0062 2010

			be able to use a copy of this			
For	caler	ndar year 2010, or tax year beginning JUL	1, 2010	, and ending	JUN 30, 2011	
G (Check	k all that apply: Initial return		rmer public charity	Final return	1
_		Amended return	Address chang	ge 🔲	Name change	
Nar	me of	f foundation			A Employer identification	n number
		70171 W DOGG TOURS				-
-		JOHN M. ROSS FOUNDATI			99-6007327	<u></u>
Nun	nber a	and street (or P.O. box number if mail is not delivered to street		Room/sulte	B Telephone number	4202
011		P. O. BOX 3170, DEPT.	/15			-4393
City	or t	iown, state, and ZIP code HONOLULU, HI 96802-3	170		C if exemption application is	
L	`haal				D 1. Foreign organization 2. Foreign organizations m check here and attach o	
"	_	k type of organization: X Section 501(c)(3) exection 4947(a)(1) nonexempt charitable trust	empt private foundation Other taxable private founda	Alam.		
 E2		arket value of all assets at end of year J Accounting		Accrual	E If private foundation structure under section 507(b)(1	atus was terminated
		·	her (specify)	L. Acciual	1	•• ••
	·\$	695, 155. (Part I, colu.		basis.)	F If the foundation is in a under section 507(b)(1	
			(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
<u> </u>		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		· · · · · · · · · · · · · · · · · · ·	N/A	* : ~ * * * * * * * * * * * * * * * * *
	2	Check X If the foundation is not required to attach Sch. B		· · · · · · · · · · · · · · · · · · ·		(0.000)
	3	Interest on savings and temporary cash investments	4.	4.		STATEMENT 1
	4	Dividends and interest from securities	15,738.	15,738.		STATEMENT 2
	5a	Gross rents				/ (
	b	Net rental income or (loss)	,	/ /		1/3 //3 //3
•	68	Net gain or (loss) from sale of assets not on line 10	51,114.		: 4	10 10 10 10 10 10 10 10 10 10 10 10 10 1
an C	t	Gross sales price for all sassets on line 8a 541,497.				13 (
Revenue	7	Capital gain net income (from Part IV, line 2)	^ \/	51,114.	<u> </u>	<u> </u>
	8	Net short-term capital gain	***************************************			
	9	Income modifications Gross sales less returns		2 · · · · · · · · · · · · · · · · · · ·		
	108	and allowances				
		Less' Cost of goods sold		·	<u> </u>	1 / / / / / / / / / / / / / / / / / / /
Quez.s	1	Gross profit or (loss)		1993		
2011	11 12	Other income	66,856.	66,856.		
-	13	Total. Add lines 1 through 11	9,888.	4,944.		4,944.
© ≔'	14	Other employee salaries and wages	7,000.	7/777	 	2/2220
-	15	Pension plans, employee benefits				
NON ses		a Legal fees	-			
	1	Accounting fees STMT 3	1,500.	450.	<u> </u>	1,050.
SCARINED Initiative Expens	[Other professional fees				
Z 9	17	Interest				
SCARR Administrative	18	Taxes STMT 4	286.	0.		0.
zi isi	19	Depreciation and depletion				7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Y E	20	Occupancy				
		Travel, conferences, and meetings				
12	22	Printing and publications				
6	23_ 24	Torner-expenses	2,700.	0.		2,700.
Ē	14	Total operating and administrative				
Operating and	11	expenses Add imes 13 th count 23	14,374.	5,394.		8,694.
Ĭ	429	Contributions, giffs, grants paid	26,250.			26,250.
1	26	fotal expenses and distursements.	40 505		1	
	 		40,624.	5,394.	· · · · · · · · · · · · · · · · · · ·	34,944.
	27		26,232.	,	10 13 18 10	
		Excess of revenue over expenses and disbursements	26,232.	(1 460		
		Net investment income (if negative, enter -0-)	• 3	61,462.	37/2	
	1 0	Adjusted net income (if negative, enter -0-)		1 27%	N/A	

-		Balance Sheete Attached schedules and amounts in the description	Beginning of year	End o	fyear
	ant i	Balance Sheets Address Street and amounts in the description column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	128.	456.	456.
		Savings and temporary cash investments	17,366.	12,809.	12,809.
		Accounts receivable	3. 32. 4	a.a	
		Less: allowance for doubtful accounts	1		
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other	· · · · · · · · · · · · · · · · · · ·		
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
\$	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	6	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation	<u> </u>		
	12	Investments - mortgage loans	<u></u>		
	13	Investments - other STMT 6	585,528.	617,479.	681,890.
	14	Land, buildings, and equipment: basis	<u></u>	i hamani a waxa a sa a sa a	
		Less: accumulated depreciation			
	15	Other assets (describe)	· · · · · · · · · · · · · · · · · · ·		
_		Total assets (to be completed by all filers)	603,022.	630,744.	695,155.
		Accounts payable and accrued expenses			
	18	Grants payable			
8	19	Deferred revenue			
Ĕ	20	Loans from officers, directors, trustees, and other disqualified persons	-		
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
	_	-			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
	١.	Foundations that follow SFAS 117, check here			
2		and complete lines 24 through 26 and lines 30 and 31.			
Net Assets or Fund Balance	24	Unrestricted			
를	25	Temporarily restricted			
<u>D</u>	26	Permanently restricted			
Ē					
<u>P</u>	_	and complete lines 27 through 31.	603,022.	630,744.	
な	27	Capital stock, trust principal, or current funds			
288	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥	29	Retained earnings, accumulated income, endowment, or other funds	603,022	1	
Ž	30	Total net assets or fund balances.	003,022.	030,744.	
	_		602 022	620 744	
_	31	Total liabilities and net assets/fund balances	603,022.	630,744.	1
P	art	Analysis of Changes in Net Assets or Fund I	Balan ces		
		· · · · · · · · · · · · · · · · · · ·	- 00		T
7		I net assets or fund balances at beginning of year - Part II, column (a), line			602 022
_		st agree with end-of-year figure reported on prior year's return)			603,022.
		r amount from Part I, line 27a	מגמע מעדע	<u>2</u>	26,232.
3					1,490. 630,744.
4		lines 1, 2, and 3			030,744.
0		reases not included in line 2 (itemize)	actions (b) line 00	6	630,744.
0	1 OT 2	I net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30	<u> </u>	030,744.

023511

Form **990-PF** (2010)

	nd Losses for Tax on I		Income					
(a) List and descrit 2-story brick ware	be the kind(s) of property sold (e.s shouse; or common stock, 200 sh	g., real estate, is. MLC Co.)		(b) i	low acquire - Purchase - Donation	d (t	c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
18 PUBLICLY TRADED					ARIOUS	VARIOUS		
b PUBLICLY TRADED	SECURITIES			Ī	P	P VARIOUS VARIOU		
c CAPITAL GAINS D	IVIDENDS							
<u>d</u>			-					
8		,		L,				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				(h) Gain or (loss (e) plus (f) minus	(g)
395,427.			375,30					20,123.
136,290.		<u> </u>	115,07	9.		···-		21,211.
9,780.		<u> </u>		_				9,780.
<u>d</u>		 	 				 	
Complete only for assets showing	cain in column (h) and owned by	the foundation	on 12/21/60				Notice (Ont. (b) and	
Complete only for assets showing	(i) Adjusted basis				_		Sains (Col. (h) gair k), but not less tha	
(i) F.M.V. as of 12/31/69	as of 12/31/69	(R) EX	cess of col. (i) col. (j), if any		•		Losses (from col.	(h))
<u> </u>		 						20,123.
b		 						21,211.
c		†		-	L			9,780.
d								
0		1				-	· · · · · · · · · · · · · · · · · · ·	
Capital gain net income or (net cap	ital loss) { If gain, also ento	er in Part I, line 0- in Part I, line	7	}	2	-		51,114.
Net short-term capital gain or (loss) as defined in sections 1222(5) a			. ,				
If gain, also enter in Part I, line 8, c				- -			N/A	1
If (loss), enter -0- in Part I, line 8 Part V Qualification Ur		r Reduced	Tay on Net	Inv	estmen	t Inco		<u> </u>
Vas the foundation liable for the section is a section of the sect	y under section 4940(e). Do not o	complete this pa	ırt.					Yes X No
Enter the appropriate amount in ea		tructions before	making any entri				<u> </u>	74)
Base period years Calendar year (or tax year beginnin			Net value of no	(e) oncha	ritable-use		Distr (col. (b) d	(d) ibution ratio ivided by col. (c))
2009		30,761.			638,		·	.048214
2008		41,109.			587,			.069993
2007		49,251. 48,063.			810, 824,			.058329
2006 2005		$\frac{40,003.}{44,492.}$			795,			.055947
2005		17,472.			195,	24/	' 	•033941
Total of line 1, column (d)		•••••					2	.293239
Average distribution ratio for the 5- the foundation has been in existen							3	.058648
Enter the net value of noncharitable	e-use assets for 2010 from Part X	(, line 5					4	687,246.
i Multiply line 4 by line 3								40,306
							5	
Enter 1% of net investment income	e (1% of Part I, line 27b)	•••••••	••••••	•••••	•••••		6	615
Add lines 5 and 6		••••••		•••••			7	40,921.
Enter qualifying distributions from							8	34,944.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, lin	10 1b, and com	plete that part usir	ng a 1	% tax rate.			
123521 12-07-10								Form 990-PF (2010)

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Form 990-PF (2010)

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

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

orm 990-PF (2010) JOHN M. ROSS FOUNDATION			99-600732	27 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	lequired (continu	ued)	
5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?		√	
(2) Influence the outcome of any specific public election (see section 4955); or	• •	· —	s X No ×	
any voter registration drive?			S X No	
(4) Provide a grant to an organization other than a charitable, etc., organization		19	• 🕰 🚻	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	a X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,				
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und			i i	
section 53.4945 or in a current notice regarding disaster assistance (see instru				Sb X
Organizations relying on a current notice regarding disaster assistance check he			┈┍╙╜╏	, 1 3.42
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption frexpenditure responsibility for the grant?	N		s 🗆 No 🥇	
If "Yes," attach the statement required by Regulations section 53.4945 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	• •			
a personal benefit contract?		☐ Ye	e X No	11:42
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p				вь Х
If "Yes" to 6b, file Form 8870.		••••••		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	ıs 🗶 No 💹	1 >420
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trusto Paid Employees, and Contractors		nagers, Highly	<i>-</i>	
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(a) Evpopes
(a) Name and address	(b) Title, and average hours per week devoted to position	(if not paid, enter -0-)	(cl) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
BANK OF HAWAII P.O. BOX 3170	TRUSTEE			į
HONOLULU, HI 968023170	1.00	9,888.	0.	0.
nonologo ni 300023170	1.00	3,000.		<u>~</u>
		}		
		ļ		
			-	
			1	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."		<u> </u>
			(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	and deferred compensation	(e) Expense account, other allowances
NONE				
		ļ	ļ	<u> </u>
			}	
		 		ļ
				į
		 		
	1			
Total number of other employees paid over \$50,000	ı	<u> </u>	<u> </u>	0

0.

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations	must complete this pa	art. Foreign foundation	ns, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitat	ole, etc., purposes:		
	Average monthly fair market value of securities		18	681,067. 16,645.
	Average of monthly cash balances			16,645.
C	Fair market value of all other assets		16	
	Total (add lines 1a, b, and c)			697,712.
	Reduction claimed for blockage or other factors reported on lines 1a and		7.80	
	1c (attach detailed explanation)	18	0.	
2	Acquisition indebtedness applicable to line 1 assets			0.
3	Subtract line 2 from line 1d			697,712.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amoun	t. see instructions)	4	10,466.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and o			687,246.
6	Minimum Investment return. Enter 5% of line 5			34,362.
	Page 4 25 4 5 5 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			in
	foreign organizations check here and do not complete this part		•	
1	Minimum investment return from Part X, line 6		1	34,362.
2a	Tax on investment income for 2010 from Part VI, line 5	28	1,229.	
b	Income tax for 2010. (This does not include the tax from Part Vi.)	2b	CO	
6	Add lines 2a and 2b		2¢	1,229.
3	Distributable amount before adjustments. Subtract line 2c from line 1			33,133.
4	Recoveries of amounts treated as qualifying distributions			1,490.
5	Add lines 3 and 4			34,623.
6	Deduction from distributable amount (see instructions)			0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa			34,623.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	irposes:	S. 2	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	34,944.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charit			
3	Amounts set aside for specific charitable projects that satisfy the:			
8	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)			
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8,			34,944.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net in			
	income. Enter 1% of Part I, line 27b			0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			34,944.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years			s for the section
	4940(e) reduction of tax in those years.		•	

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(e) 2009	(d) 2010
Distributable amount for 2010 from Part XI, line 7		***		34,623.
2 Undistributed Income, if any, as of the end of 2010:		, ,	wiii	
a Enter amount for 2009 only	· ;	```	0.	
b Total for prior years:	. (1	0.		
3 Excess distributions carryover, if any, to 2010:		, U •		
a From 2005 1,753.	, 1	`		
b From 2006 7,864.		,	No. 1	
c From 2007 9,843.			1000	7 S. Lee - 19 00
d From 2008		. *.	\$ 45. 156 ⁷	
8 From 2009			N 1877	W
f Total of lines 3a through e	31,450.			
4 Qualifying distributions for 2010 from		•		37 Inno 1 3 444
Part XII, line 4: ►\$ 34,944.			alaman em manas me e	
a Applied to 2009, but not more than line 2a	*	7,424	0.	
b Applied to undistributed income of prior	4 74 950 10 4 5 11			
years (Election required - see instructions)	*,877	0.		
c Treated as distributions out of corpus		•		10 / 10 88 9
(Election required - see instructions)	0.			24 622
d Applied to 2010 distributable amount	321.	······································		34,623.
e Remaining amount distributed out of corpus	0.	, , , , , , , , , , , , , , , , , , , 	~ ``~	0.
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount	0.		., ., ., ., ., ., ., ., ., ., ., ., ., .	N / 1 / N / N / N / N / N / N / N / N /
must be shown in column (a).) 6 Enter the net total of each column as indicated below:				
2 Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	31,771.	`	·	
b Prior years' undistributed income. Subtract	(7)			7,792
line 4b from line 2b	7.54	0.		
e Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		'A''Y'
d Subtract line 6c from line 6b. Taxable amount - see instructions	,48	0.	* ,	
e Undistributed income for 2009. Subtract line				20 20 30 40
4a from line 2a. Taxable amount - see instr	*	``# \	0.	
f Undistributed income for 2010. Subtract	· · · · · · · · · · · · · · · · · · ·	/ .v. (. /		
lines 4d and 5 from line 1. This amount must		·		
be distributed in 2011		. *		0.
7 Amounts treated as distributions out of			2 1 1 1 1 1 1	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			7.000
8 Excess distributions carryover from 2005		,		
not applied on line 5 or line 7	1,753.		/ '	-7/1/1
9 Excess distributions carryover to 2011.	20 010		,	
Subtract lines 7 and 8 from line 6a	30,018.			47/2
10 Analysis of line 9:				
a Excess from 2006 7,864. b Excess from 2007 9,843.	ŕ			
E Excess from 2008 3, 643.				
d Excess from 2009				
B Excess from 2010 321.	,	ĺ		
	<u> </u>	······	3 <u>6</u>	*

12-07-10

Form **990-PF** (2010)

	ROSS FOUND				6007327 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part V	/II-A, question 9)	N/A	
1 a If the foundation has received a ruling (·		
foundation, and the ruling is effective for	or 2010, enter the date of	the ruling	▶ L		<u>,_,</u>
b Check box to indicate whether the foun	d <u>ation is a private operati</u>	ng foundation described	in section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	_	Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed		1			
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					Ì
used directly for active conduct of	\	1			
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		 			
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:				··· ·	
(1) Total support other than gross					
investment income (interest,		ļ			
dividends, rents, payments on				1	
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public		†			
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)				ł	
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					_ = -
Part XV Supplementary Inf	ormation (Comple	ete this part onl	y if the foundatio	n had \$5,000 or	more in assets
at any time during	the year-see the	instructions.)			
1 Information Regarding Foundati	ion Manag ers:				
a List any managers of the foundation w			ntributions received by th	e foundation before the	close of any tax
year (but only if they have contributed	more than \$5,000). (See	section 507(a)(2).)			
NONE					
b List any managers of the foundation w			n (or an equally large por	tion of the ownership o	f a partnership or
other entity) of which the foundation h	as a 10% or greater inten	75L.			
NONE					
2 Information Regarding Contribu					
Check here if the foundation the foundation makes gifts, grants, etc.					
				Complete items 2a, b, c	, and u.
a The name, address, and telephone nur SEE STATEMENTS GUID			be addressed:		
OLE CIAILMENIS GUID	A GOIDE	-6			
h. The form in which applications should	he submitted and inform	ation and materials than	chould include:	· · · · · · · · · · · · · · · · · · ·	
b The form in which applications should SEE STATEMENTS GUID			SHOULD HICKEUT.		
E Any submission deadlines:	L L W GOIDE				
SEE STATEMENTS GUID	E-1 & GUIDE-	-2			
d Any restrictions or limitations on awar			ls, kinds of institutions o	r other factors:	· · · · · · · · · · · · · · · · · · ·
SEE STATEMENTS GUID		_	,		
023601 12-07-10					Form 990-PF (2010)

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual,	Foundation	Burnoss of areat as	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Paid during the year SEE STATEMENT GRANTS-1	or substantial contributor	recipient	Contribution	26,250
Total			▶ 3a	26,250
NONE				
			> 3b	0
023811 12-07-10				orm 990-PF (2010

r gross amounts unless otherwise indicated.	Unrelated t	ousiness income		y section 512, 513, or 514	(8)
Program service revenue:	(a) Business code	(b) Amount	(¢) Exciu- sion code	(d) Amount	Related or exemp
-	COGO		 		
			 		·
——————————————————————————————————————	 				
			++-		
	 	·		+	
	 		- - -		
Fees and contracts from government agencies	 	· · · · · · · · · · · · · · · · · · ·			
Nembership dues and assessments					
nterest on savings and temporary cash	·				
nvestments			14	4.	
Dividends and interest from securities			14	15,738.	
Net rental income or (loss) from real estate:				··· · · · · · · · · · · · · · · · · ·	
Debt-financed property				·····	
Not debt-financed property		•			
Net rental income or (loss) from personal					
property					
Other investment income				•	
Gain or (loss) from sales of assets other				,	
han inventory	<u> </u>		18	51,114.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
					
	ļ				
	· · · · · ·				
		·····	+		
2. Subbabi Add aslumna (b) (d)	73.7		0.000	66,856.	
Subtotal Add columns (b), (d), and (e)	<u> </u>			 	66,8
Fotal. Add line 12, columns (b), (d), and (e)	•••••	***************************************	•••••	18	00,0
worksheet in line 13 instructions to verify calculations.)					
rt XVI-B Relationship of Activities to	the Accor	nplishment of	Exempt P	urposes	-
8 No. Explain below how each activity for which incor	ne is reported in	column (e) of Part X	VI-A contribute	importantly to the accomp	olishment of
the foundation's exempt purposes (other than t					
				· ·	
		•			
	•				

Form **990-PF** (2010)

023**62**1 12-07-10

		Exempt Organ	izations								
1	Did the	organization directly or indi	rectly engage in any o	of the followin	g with any other organization	on described in sec	ction 501(c) of		Yes	No	
	the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
	a Transfers from the reporting foundation to a noncharitable exempt organization of:										
	(1) Cash										
	(2) Other assets										
	b Other transactions:										
		les of assets to a noncharita	hie evernat omanisati	ion				16(1)	(سنسنس	े 20 X	
	(2) Pu	rchases of assets from a no	ncharitable evernt o	manization	•••••••••••••	•••••	••••••	1b(2)		X	
	(3) Re	intal of facilities, equipment,	or other secate	.Aameraaan	***************************************	•••••	• • • • • • • • • • • • • • • • • • • •	1b(3)		X	
	(4) Rei	imhursement arrangements		••••••	***************************************	••••••	••••••	1b(4)		X	
tes s											
	(B) Pe	rformance of services or me	mharchin or fundrale	ina salicitatio	ne		••••••••••	1b(5)		X	
		g of facilities, equipment, ma							 -	X	
ď	If the ar	nswer to any of the above is	Ves " complete the f	ollowina eche	dula Column (h) chould sh	wave chaw the fair	market value of the or	node other ser	eate		
		ices given by the reporting f							œw,		
		(d) the value of the goods,			od 1055 tilbil idli (Halkot valt	io in any transacut	on or sharing arranger	ikilit, Silver ili			
(a) ⊔		(b) Amount involved			exempt organization	(d) Descripti	on of transfers, transaction	ne and sharing a		nte.	
· ·		(-/ <u>-</u>	(5)	N/A		(e) basips		ing and maning a	- Cargoria		
	\dashv		 				 				
				•							
					'	 					
	\neg	·····			***	-				—	
	$\neg \uparrow$										
			 								
		··· · · · · · · · · · · · · · · · · ·									
											
					 	-					
		······································			· · · · · · · · · · · · · · · · · · ·						
											
				·				-			
			 			-					
			<u></u>		7						
	o					- 		·			
29	le the f	oundation directly or indirec	the officiated with or a	ninted to one	or many toy overnot amoni	inations described					
La									X	٦	
h	H Vec	ion 501(c) of the Code (othe <u>* complete the</u> following sch	r ulan secuon 501(c)	(3)) of in Sect	uon 52/7	•••••	•••••	Yes	LA	IJ0	
<u> </u>	11 165,	(a) Name of or			(b) Type of organization	1	(c) Description of rel	ationehin			
		N/A	Janizauon		(b) Type of organization	-	(E) Description of rei	aliviisiiip			
		N/A	·			1	·				
						 					
						 					
				· - · ·		 					
	Tu	Inder penalties of perjury, I declar	e that I have exemined #	is return. Includ	ing accompanying schedules en	d statements and to	the hest of my knowledge	and belief it is to	16 ~~	ıct	
Si	a a	nd complete. Declaration of preparation of preparation of BANK OF	arer (other than taxpayer	or fiduciary) is b	ased on all information of which	preparer has any kno	wiedge.	and bonon, it is t	66, 66 11	~,	
He	ne L		henry St								
		Signature of officer or tro				2011	TWo				
		Print/Type preparer's na		Drongrade a	Date Date	Pote	Tittle Check if	PTIN			
		Filling Type Preparer 2 III	anne	Preparer's si	ignature	Date		FIIN			
Pa	id					1	self- employed				
	iq epare	Finds		L		<u> </u>	1				
	e Oni						Firm's EIN				
US		*					-				
		Firm's address]_,				
							! Phone no.		<u> </u>		
								Form 99 0)-PF	(2010)	

John M. Ross Foundation Grants List FYE June 30, 2011

Scholarship	Vocational
<u>Funding</u>	

1-	University of Hawaii Foundation	John M. Ross Foundation Scholarship for Big Island students attending any campus in University of Hawaii System during 2011/2012 School Year {fee of 3.5% to be taken from grant award}	\$13,000
	Discretionary Grants		
	<u>Organization</u>	<u>Project</u>	<u>Request</u>
	Arts and Culture		
2-	Aloha Performing Arts Company	Theatre Experience for Teens during FYE 6/30/2012 (D. Ross revealed board relationship)	\$4,000
3-	Kahilu Theatre Foundation	K(Arts) After-School Program (Sept Dec. 2011) - ONLY FOR PURCHASING HEALTHY SNACKS	\$1,250
	<u>Education</u>		
4-	State of Hawaii, DOE - Hilo High School	Lanakila Learning Center - Aquaculture Pond Expansion During SY 2011-2012	\$4,000
5-	Human Services Hamakua Youth Foundation	Operational & Program Support for Hamakua Youth Center during FYE 6/30/2012	\$4,000

TOTAL GRANTS & SCHOLARSHIPS APPROVED

\$26,250

JOHN M. ROSS FOUNDATION FORM 990-PF, PART II, LINE 13 FOR YEAR ENDED 06/30/2011

Description	Units	Book Value	Market Value
003021409 ABERDEEN CORE FIXED INCOME FUND CL I	4,986.36	53,58 4 .52	53,903.00
003021698 ABERDEEN ASIA-PACIFIC EX-JAPAN EQUITY FUND INSTITUTION	2,601.30	21,111.45	32,126.00
003021839 ABERDEEN INTL EQUITY INSTITUTIONAL FUND CL SHS	6,902.41	75,068.14	94,080.00
197199813 COLUMBIA ACORN INTERNATIONAL FUND CL Z	557.36	20,962.66	22,924.00
314172560 FEDERATED STRATEGIC VALUE DIVIDEND FUND CL INST	17,473.37	81,600.62	82,125.00
38142Y773 GOLDMAN SACHS LARGE CAP VALUE FD - INST	5,616.28	60,231.49	69,024.00
471023549 JANUS TRITON FUND CL T	1,948.57	28,215.29	35,211.00
543487326 NATIXIS LOOMIS SAYLES LTD GOV AND AGCY FD CL Y	652.22	7,813.61	7,781.00
56062X641 MAINSTAY LARGE CAP GROWTH FUND CL I	8,983.06	55,389.19	69,978.00
56062X708 MAINSTAY HIGH YIELD CORP BOND FUND CL I	11,534.08	68,594.00	68,282.00
74144Q203 T ROWE PRICE INSTITUTIONAL EMERGING MARKETS EQUITY	993.64	31,637.37	32,094.00
74972H648 RS GLOBAL NATURAL RESOURCES FUND CL Y	1,391.17	57,838.29	55,299.00
77958B402 T ROWE PRICE INSTITUTIONAL FLOATING RATE FUND CL I	1,500.88	15,474.08	15,429.00
814219432 RYDEX/SGI MID CAP VALUE FUND CL I	2,817.48	31,527.63	35,049.00
880208400 TEMPLETON GLOBAL BOND FUND CL AD	618.93	8,431.43	8,585.00
TOTAL PORTFOLIO		617,479.77	681,890.00

John M. Ross Foundation Bank of Hawaii. Trustee

Grant Application Information for General Capital

Grantmaking Policy

John M. Ross Foundation regularly accepts unsolicited grant requests from qualified tax-exempt 501 (c)(3) charitable organizations on the Big Island of Hawaii that have programs or projects focusing on teens from 11-18 years of age.

PRIORITY WILL BE GIVEN TO PROGRAMS/PROJECTS THAT SUPPORT TEENS WHO HAVE HIGHER NEEDS AND LIMITED ACCESS. The following are examples of what Ross Foundation considers to be "higher needs and limited access": financial need, little or no family support, limited access to transportation, resources, and/or activities.

The Governing Board wishes to continue its support of <u>teen</u> programs. Organizations from various sectors on the Big Island are invited to submit a grant request to John M. Ross Foundation for *possible* funding consideration ranging from \$1,000 - \$5,000. The funds cannot be used toward large capital projects.

General Capital - Occasionally funding is provided for direct expenses that require specific equipment relating to a teen program/project.

DEADLINE: Applications must be postmarked by February 1.

APPLICATION PROCEDURES - A thru D

Submit Four (4) completed sets of the proposal containing:

(A) Funding Request cover sheet - To be placed on top of each set (see page 4).

(B) Proposal Narrative - Provide who, what, when, where, why, and how in three pages or less.

Narrative Format information:

Pages: Maximum 3 pages

Margins: 1-inch margins on each side

Font: 12 point font

Spacing: Double space in between paragraphs Paragraph Height: Maximum of 1 ½ inches

Bullet points: Acceptable

Narrative Headings: Use these 7 (seven) headings in the order listed:

- Organization: Briefly describe your organization's mission and programs. (maximum of 3 sentences)
- Population to be Served: Provide an estimated UNDUPLICATED number and age range of the eligible individuals you propose to serve.
 - If the projections are an increase over the current volume, provide information on current volume (percentages can only be used if accompanied with figures, i.e. 20% over 500).
- 3) <u>Program/Project</u>: Describe using specific information in layman terms.
 - o (Acronyms must be explained in the narrative and budgets.)
- Goals & Objectives: Separately list each goal with corresponding objective, and specifically describe how the goal will be accomplished through the objective.
- 5) Outreach: For new, expansion, or existing program/project:
 - Describe how your organization will market the program/project to the community you propose to serve.
 - Provide an estimated UNDUPLICATED number of group/individuals who will be new participants
 - o Provide UNDUPLICATED numbers for existing participants/groups/individuals.
- 6) Evaluation: Provide information on how and/or what the following measures are that will be used to evaluate the program/project (note: pre/post-tests are not acceptable):
 - o Process Measures extent to how the program/project will be implemented
 - o Outcome Measures effectiveness in meeting goals and objectives
- 7) Cost: Total cost of the program/project, amount requested, and plans for future support.

Ross - Gnri Opti Rev. 8/2011 Page 1 of 3

(C) These 7 items must be attached to each of the 4 (four) sets of the proposal narrative

- <u>Staff</u>: Describe the qualifications of the staff or volunteers who will oversee and coordinate the program/project
- Board of Directors List of Board members with their professional or business affiliation.
- Percent who actively participate in activities and attend meetings <u>Endorsement Letters</u> - Two letters endorsing the activity

(The following items must have a Start & End date that includes: month, day and vear)

- Project/Program Budget
 - > List all revenue (funding sources) and expenses for the project or program.
 - Requests for small capital and/or to purchase equipment require additional information to validate the expenses in the project budget (i.e. estimates from vendors).
- Organization's Operating Budget Current Fiscal Year
 - If funding is for support during the following fiscal year, <u>also</u> provide a DRAFT of Operating Budget for such year.
- Income Statement Recently Completed Fiscal Year
- Current Balance Sheet (not older than three months)

(D) IRS, Charters, By-Laws, Articles of Incorporation

Provide One copy only:

- Internal Revenue Service letter advising that the organization is tax-exempt under Section 501(c) (3) of the Code, and its status under 509(a).
- Organization's charter and bylaws
- Articles of Incorporation if applicable

Proposals are to be sent to the following address:

Postal Service
John M. Ross Foundation
c/o Bank of Hawaii, Trustee
Charitable Foundation Services #758
P. O. Box 3170
Honolulu, Hawaii 96802-3170

Over night deliveries
John M. Ross Foundation
c/o Bank of Hawaii, Trustee
Charitable Foundation Services #758
130 Merchant Street
Honolulu, Hawaii 96813

Due to security measures in the building, hand-delivered proposals are strongly discouraged.

Applicants will be notified in writing of the action taken on their requests. The recipient of a grant will be required to submit a narrative report specific to the Foundation's Reporting Guidelines on what has been accomplished as a result of the grant, and a fiscal accounting of the grant expenditures.

This invitation to submit a grant proposal does not guarantee your organization will be selected to receive any funding. The Foundation may receive more requests for assistance than its funds permit supporting. However, normally, all applications are considered, and each is acted upon according to its current and projected relative merit, provided it is in keeping with the deed of trust.

Contact Information for John M. Ross Foundation:

Paula Boyce, AVP & Grants Administration Officer Phone: (808) 694-4945 Fax: (808) 694-4006 Email address: paula.boyce@boh.com Elaine Moniz, Administrative Assistant Phone: (808) 694-4944 Fax: (808) 694-4006 Email address: elaine.moniz@boh.com

Toll-free from Neighbor Islands: 1-800-272-7262

Ross – Graf Cpi Rev 3/2011 Page 2 of 2

John M. Ross Foundation (Bank of Hawali, Trustee)

Funding Request Cover Sheet (General Capital)

(TYPE all information, except for signatures, and submit with your request for funding.)

Date					
Organization Information (Must be a 501 (c) (3) tax-exempt organization) (If this is a collaborative project, please submit names of collaborating agencies on a separate sheet.)					
Name:					
Complete Address:					
Phone:	Fax:				
BOARD M	EMBER INFORMATION				
No. of Board Members: Pe	ercent (%) of Financial Participation:				
Total Contribution During Fiscal Year:(Circle One: Past or Current FY)	Median Gift: Average Gift:				
Conf	tact Information				
Name:	Title:				
Complete Address:					
Phone:	Email:				
Proj	ect Information				
Project Title:					
Amount requested: \$					
Two sign	natures are required				
Executive Director (Chief Compensated Staff)	Board Chair or President (Chief Volunteer)				
Print or Type Name and Title	Print or Type Name and Title				

John M. Ross Foundation Bank of Hawaii, Trustee

Grant Application Information for Program

Grantmaking Policy

John M. Ross Foundation regularly accepts unsolicited grant requests from qualified tax-exempt 501 (c)(3) charitable organizations on the Big Island of Hawaii that have programs or projects focusing on teens from 11-18 years of age.

PRIORITY WILL BE GIVEN TO PROGRAMS/PROJECTS THAT SUPPORT TEENS WHO HAVE HIGHER NEEDS AND LIMITED ACCESS. The following are examples of what Ross Foundation considers to be "higher needs and limited access": financial need, little or no family support, limited access to transportation, resources, and/or activities.

The Governing Board wishes to continue its support of <u>teen</u> programs. Organizations from various sectors on the Big Island are invited to submit a grant request to John M. Ross Foundation for *possible* funding consideration ranging from \$1,000 - \$5,000. The funds cannot be used toward large capital projects.

DEADLINE: Applications must be postmarked by February 1.

APPLICATION PROCEDURES - A thru D

Submit Four (4) completed sets of the proposal containing:

(A) Funding Request cover sheet - To be placed on top of each set (see page 4).

. (B) Proposal Narrative - Provide who, what, when, where, why, and how in three pages or less.

Narrative Format Information:

Pages: Maximum 3 pages

Margins: 1-inch margins on each side

Font: 12 point font

Spacing: Double space in between paragraphs Paragraph Height: Maximum of 1 ½ inches

Bullet points: Acceptable

Narrative Headings: Use these 7 (seven) headings in the order listed:

- Organization: Briefly describe your organization's mission and programs. (maximum of 3 sentences)
- Population to be Served: Provide an estimated UNDUPLICATED number and age range of the eligible individuals you propose to serve.
 - If the projections are an increase over the current volume, provide information on current volume (percentages can only be used if accompanied with figures, i.e. 20% over 500).
- 3) Program/Project: Describe using specific information in layman terms.
 - o (Acronyms must be explained in the narrative and budgets.)
- 4) Goals & Objectives: Separately list each goal with corresponding objective, and specifically describe how the goal will be accomplished through the objective.
- 5) Outreach: For new, expansion, or existing program/project:
 - Describe how your organization will market the program/project to the community you propose to serve.
 - Provide an estimated UNDUPLICATED number of group/individuals who will be new participants
 - o Provide UNDUPLICATED numbers for existing participants/groups/individuals.
- 6) <u>Evaluation</u>: Provide information on how and/or what the following measures are that will be used to evaluate the program/project (note: pre/post-tests are not acceptable):
 - o Process Measures extent to how the program/project will be implemented
 - o Outcome Measures effectiveness in meeting goals and objectives
- 7) Cost: Total cost of the program/project, amount requested, and plans for future support.

Rev 3/2011

(C) These 7 items must be attached to each of the 4 (four) sets of the proposal narrative

- Staff: Describe the qualifications of the staff or volunteers who will oversee and coordinate the program/project
- Board of Directors List of Board members with their professional or business affiliation.
 - Percent who actively participate in activities and attend meetings
- Endorsement Letters Two letters endorsing the activity

(The following Items must have a Start & End date that Includes: month, day and year)

- Project/Program Budget
 - > List all revenue (funding sources) and expenses for the project or program.
 - Requests for small capital and/or to purchase equipment require additional information to validate the expenses in the project budget (i.e. estimates from vendors).
- Organization's Operating Budget Current Fiscal Year
 - > If funding is for support during the following fiscal year, also provide a DRAFT of Operating Budget for such year.
- Income Statement Recently Completed Fiscal Year
- Current Balance Sheet (not older than three months)

(D) IRS, Charters, By-Laws, Articles of Incorporation

Provide One copy only:

- Internal Revenue Service letter advising that the organization is tax-exempt under Section 501(c) (3) of the Code, and its status under 509(a).
- · Organization's charter and bylaws
- Articles of Incorporation if applicable

Proposals are to be sent to the following address:

Postal Service
John M. Ross Foundation
c/o Bank of Hawaii, Trustee
Charitable Foundation Services #758
P. O. Box 3170
Honolulu, Hawaii 96802-3170

Over night deliveries
John M. Ross Foundation
c/o Bank of Hawaii, Trustee
Charitable Foundation Services #758
130 Merchant Street
Honolulu, Hawaii 96813

Due to security measures in the building, hand-delivered proposals are strongly discouraged.

Applicants will be notified in writing of the action taken on their requests. The recipient of a grant will be required to submit a narrative report specific to the Foundation's Reporting Guidelines on what has been accomplished as a result of the grant, and a fiscal accounting of the grant expenditures.

This invitation to submit a grant proposal does not guarantee your organization will be selected to receive any funding. The Foundation may receive more requests for assistance than its funds permit supporting. However, normally, all applications are considered, and each is acted upon according to its current and projected relative merit, provided it is in keeping with the deed of trust.

Contact Information for John M. Ross Foundation:

Paula Boyce, AVP & Grants Administration Officer Phone: (808) 694-4945 Fax: (808) 694-4006 Email address: paula.boyce@boh.com

Phone: (808) 694-4944 Fax: (808) 694-4006 Email address: <u>elaıne.moniz@boh.com</u>

Elaine Moniz, Administrative Assistant

Toll-free from Neighbor Islands: 1-800-272-7262

Rev 3/2011 Page 2 of 3

John M. Ross Foundation (Bank of Hawali, Trustee)

Funding Request Cover Sheet (Program)

(TYPE all information, except for signatures, and submit with your request for funding.)

Date				
Organization Information (Must be a 501 (c) (3) tax-exempt organization) (If this is a collaborative project, please submit names of collaborating agencies on a separate sheet.)				
Name:				
Complete Address:				
Phone:	Fax:			
BOARD N	MEMBER INFORMATION			
No. of Board Members: Pe	ercent (%) of Financial Participation:			
Total Contribution During Fiscal Year:(Circle One: Past or Current FY)	Median Gift: Average Gift:			
Con	tact Information			
Name:	Title:			
Complete Address:	· · · · · · · · · · · · · · · · · · ·			
Phone:	Email:			
Pro	ject Information			
Project Title:				
Amount requested: \$				
Two sig	natures are required			
Executive Director (Chief Compensated Staff)	Board Chair or President (Chief Volunteer)			
Print or Type Name and Title	Print or Type Name and Title			

Ross · Program Rev 8/2011 Page 3 of 3

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH 1	NVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
BOH #215023409			•	4.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	=	4.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM SECU	JRITIES	STATEMENT 2
SOURCE	GROSS		PITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
BOH #215023409		25,518.	9,780.	15,738.
TOTAL TO FM 990-PF, PART I, I	LN 4	25,518.	9,780.	15,738.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
TAX SERVICE FEE	1,500.	450	•	1,050.
TO FORM 990-PF, PG 1, LN 16B	1,500.	450		1,050.
=			= 	
FORM 990-PF	TAX	ŒS		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
FOR FYE 06/30/11 2ND QTR ESTIMATE FOR FYE 06/30/11 3RD QTR	86.	0	•	0.
ESTIMATE FOR FYE 06/30/11 4TH QTR	100.	0	•	0.
ESTIMATE	100.	0	•	0.
TO FORM 990-PF, PG 1, LN 18	286.	0	•	0.
= = = = = = = = = = = = = = = = = = = =				_ =

FORM 990-PF	OTHER E	EXPENSES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
GRANTS ADMINISTRATION FEES	2,700.	0.		2,700.	
TO FORM 990-PF, PG 1, LN 23	2,700.	0.		2,700.	
FORM 990-PF	OTHER INV	ESTMENTS	•	STATEMENT 6	
DESCRIPTION		LUATION ETHOD BO	OK VALUE	FAIR MARKET VALUE	
SEE STATEMENT INV-1		COST	617,479.	681,890.	
TOTAL TO FORM 990-PF, PART I	I, LINE 13		617,479.	681,890.	