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AMENDED RETURN

Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2011 calendar year, or tax year beginning 07/01, 2011, and ending 06/30, 2012																														
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input checked="" type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization HAWAII PACIFIC UNIVERSITY</td> <td>D Employer identification number 99-0113930</td> </tr> <tr> <td colspan="3">Doing Business As</td> </tr> <tr> <td>Number and street (or P O box if mail is not delivered to street address)</td> <td>Room/suite</td> <td>E Telephone number</td> </tr> <tr> <td>1164 BISHOP STREET</td> <td>800</td> <td>(808) 544-0201</td> </tr> <tr> <td colspan="3">City or town, state or country, and ZIP + 4 HONOLULU, HI 96813</td> </tr> <tr> <td colspan="2">F Name and address of principal officer GEOFFREY BANNISTER 1164 BISHOP STREET, SUITE 800 HONOLULU, HI 96813</td> <td>G Gross receipts \$ 132,372,079.</td> </tr> <tr> <td colspan="2">H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> <td rowspan="2">H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions)</td> </tr> <tr> <td colspan="2">H(c) Group exemption number</td> </tr> <tr> <td>I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td colspan="2">J Website: HTTP://WWW.HPU.EDU</td> </tr> <tr> <td>K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other</td> <td>L Year of formation 1965</td> <td>M State of legal domicile HI</td> </tr> </table>	C Name of organization HAWAII PACIFIC UNIVERSITY		D Employer identification number 99-0113930	Doing Business As			Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number	1164 BISHOP STREET	800	(808) 544-0201	City or town, state or country, and ZIP + 4 HONOLULU, HI 96813			F Name and address of principal officer GEOFFREY BANNISTER 1164 BISHOP STREET, SUITE 800 HONOLULU, HI 96813		G Gross receipts \$ 132,372,079.	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list (see instructions)	H(c) Group exemption number		I Tax-exempt status <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	J Website: HTTP://WWW.HPU.EDU		K Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	L Year of formation 1965	M State of legal domicile HI
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Part I Summary				
Activities & Governance	1 Briefly describe the organization's mission or most significant activities HAWAII PACIFIC UNIVERSITY IS AN INTERNATIONAL LEARNING COMMUNITY SET IN THE RICH CULTURAL CONTEXT OF HAWAII. OUR INNOVATIVE PROGRAMS PREPARE OUR GRADUATES AS ACTIVE MEMBERS OF A GLOBAL SOCIETY.			
	2 Check this box <input type="checkbox"/> 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)	3	20.	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	15.	
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	1,996.	
	6 Total number of volunteers (estimate if necessary)	6	434.	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	656,459.	
	7b Net unrelated business taxable income from Form 990-T, line 34	7b	50,956.	
	Revenue	8 Contributions and grants (Part VIII, line 1h)		3,713,845.
		9 Program service revenue (Part VIII, line 2g)		96,852,235.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-217,960.		
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,469,865.		
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		101,626,435.		
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		16,371,635.	
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0	
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		62,918,602.	
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0	
	b Total fundraising expenses (Part IX, column (D), line 25) 2,012,383.			
	17 Other expenses (Part IX, column (A), lines 10a-11d, 11f-24e)		30,535,414.	
	18 Total expenses - add lines 13-17 (must equal Part IX, column (A), line 25)		109,825,651.	
Net Assets or Fund Balances	19 Revenue less expenses - Subtract line 18 from line 12		-8,199,216.	
	20 Total assets (Part X, line 16)		107,073,802.	
	21 Total liabilities (Part X, line 26)		25,467,770.	
	22 Net assets or fund balances - Subtract line 21 from line 20		81,606,032.	

Part II Signature Block				
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my 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.				
Sign Here	Signature of officer <i>Bruce Edwards</i>		Date 7/30/14	
	Type or print name and title Bruce Edwards CFO			
Paid Preparer Use Only	Print/Type preparer's name Kelley Simon	Preparer's signature <i>Kelley Simon</i>	Date 07/29/14	Check <input type="checkbox"/> if self-employed PTIN P00791436
	Firm's name ▶ ERNST & YOUNG U.S. LLP		Firm's EIN ▶ 34-6565596	
	Firm's address ▶ 4370 LA JOLLA VILLAGE DRIVE STE 500 SAN DIEGO, CA 92122		Phone no 858-535-7371	
May the IRS discuss this return with the preparer shown above? (see instructions) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				

For Paperwork Reduction Act Notice, see the separate instructions.

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9/19 22

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Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III ☒ X

1 Briefly describe the organization's mission:

SEE SCHEDULE O

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 organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 19,755,769 including grants of \$ 2,808,767) (Revenue \$ 25,502,194)

COLLEGE OF HUMANITIES & SOCIAL SCIENCES (SEE SCHEDULE O)

4b (Code _____) (Expenses \$ 14,719,199 including grants of \$ 1,352,413) (Revenue \$ 18,940,720)

COLLEGE OF NURSING & HEALTH SCIENCES (SEE SCHEDULE O)

4c (Code _____) (Expenses \$ 14,679,147 including grants of \$ 1,216,528) (Revenue \$ 18,889,180)

COLLEGE OF BUSINESS ADMINISTRATION (SEE SCHEDULE O)

4d Other program services (Describe in Schedule O)

(Expenses \$ 25,852,664 including grants of \$ 10,993,927) (Revenue \$ 33,520,141)

4e Total program service expenses ▶ 75,006,779.

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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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		X
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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
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		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	X	
b 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	11b	X	
c 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	11c		X
d 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	11d	X	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f 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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
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 United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
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 (see instructions)	17		X
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	X	
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		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Part IV Checklist of Required Schedules (continued)

		Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		X
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22	X	
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.	23	X	
24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		X
b 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? If "Yes," complete Schedule L, Part I.	25b		X
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? If "Yes," complete Schedule L, Part II.	26		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27	X	
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? If "Yes," complete Schedule L, Part IV.	28a		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28b	X	
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c	X	
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.	30		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	31		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	32		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33	X	
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.	34	X	
35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.	36		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.	37		X
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	X	

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Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V. ☐

		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	6,951		
1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	0		
1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	1,996		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		X	
3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		X	
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)?			X
b If "Yes," enter the name of the foreign country: ▶ See instructions for 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?			X
5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			X
5c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
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?			X
6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
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?		X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			X
d If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			
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?			
9 Sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?			
b Did the organization make a distribution to a donor, donor advisor, or related person?			
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?			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?			
Note. See the instructions for additional information the organization must report on Schedule O.			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c Enter the amount of reserves on hand.	13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?			X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.			

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

Check if Schedule O contains a response to any question in this Part VI. ☒ X

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	20		
b Enter the number of voting members included in line 1a, above, who are independent.	15		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X	
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
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		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed: _____
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made 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 made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **▶** GEOFFREY BANNISTER 1164 BISHOP STREET, STE. 800 HONOLULU, HI 96813 808-544-0201

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

Check if Schedule O contains a response to any question in this Part VII ☒ X

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(1) DR. MICHAEL J. CHUN TRUSTEE, CHAIR	5.00	X						0	0	0
(2) STEVEN K. BAKER TRUSTEE, VICE CHAIR	5.00	X						0	0	0
(3) JAMES A. AJELLO TRUSTEE, TREASURER	5.00	X						0	0	0
(4) MARTIN ANDERSON TRUSTEE	5.00	X						0	0	0
(5) CARLETON K. L. CHING TRUSTEE	5.00	X						0	0	0
(6) JOACHIM P. COX TRUSTEE	5.00	X						0	0	0
(7) LAYLA J. L. DEDRICK TRUSTEE	5.00	X						0	0	0
(8) CHRISTINA D. DOANE TRUSTEE	5.00	X						0	0	0
(9) RADM FRED P. GUSTAVSON, USN (RET) TRUSTEE	5.00	X						0	0	0
(10) CONRAD W. HEWITT TRUSTEE	5.00	X						0	0	0
(11) MICHAEL D. HONG TRUSTEE	5.00	X						0	0	0
(12) JOHN A. LOCKWOOD TRUSTEE	5.00	X						0	0	0
(13) VIOLET S. LOO TRUSTEE	5.00	X						0	0	0
(14) JAMES C. POLK TRUSTEE	5.00	X						0	0	0

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(15) JAMES S. ROMIG TRUSTEE	5.00	X						0	0	0
(16) MICHELE K. SAITO TRUSTEE	5.00	X						0	0	0
(17) LILY S. SUN TRUSTEE	5.00	X						0	0	0
(18) RAYMOND P. VARA TRUSTEE	5.00	X						0	0	0
(19) DR. ALLEN L. ZECHA TRUSTEE	5.00	X						0	0	0
(20) DR. GEOFFREY BANNISTER TRUSTEE, PRESIDENT	40.00	X		X				293,055.	0	39,949.
(21) KENNETH T. UEMURA VICE PRESIDENT & CFO	40.00			X				325,925.	0	36,338.
(22) WILLIAM H. KLINE VICE PRESIDENT & CFO - CURRENT	40.00			X				159,888.	0	31,286.
(23) DR. JOHN M. KEARNS VP, ACADEMIC AFFAIRS	40.00			X				249,242.	0	34,037.
(24) DR. ANDREW BRITTAIN INTERIM VP, ACADEMIC AFFAIRS	40.00			X				128,565.	0	56,467.
(25) EDWARD R. STEPIEN VP, ADMINISTRATION	40.00			X				257,755.	0	24,718.
1b Sub-total								0	0	0
c Total from continuation sheets to Part VII, Section A								3,937,304.	0	518,217.
d Total (add lines 1b and 1c)								3,937,304.	0	518,217.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **65**

- 3** Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3	X	
4	X	
5		X

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. Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 1		

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 **46**

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(26) MARY ELLEN MCGILLAN VP, ALUMNI UNIVERSITY RELATION	40.00			X				148,352.	0	20,648.
(27) TODD SIMMONS VP, MARKETING-COMMUNICATIONS	40.00			X				0	0	0
(28) SCOTT C. STENSRUD VP ENROLLMENT MANAGEMENT	40.00			X				177,756.	0	20,567.
(29) DARRYL G. CALKINS INTERIM VP, ENROLLMENT MGMT	40.00			X				10,833.	0	0
(30) JANET S. KLOENHAMER VP, GOVERNANCE & GENL COUNSEL	40.00			X				143,806.	0	12,627.
(31) CLAIRE K. COOPER VP, COMMUNITY ENGAGEMENT	40.00			X				189,478.	0	28,243.
(32) DR. LESLIE H. CORREA VP, INSTITUTIONAL RESEARCH	40.00			X				159,274.	0	29,725.
(33) KATHLEEN R. CLARK ASSOC VP & CONTROLLER	40.00			X				153,669.	0	17,876.
(34) CAROLYN L. LEVY ASSOC VP, SPONSORED RESEARCH	40.00			X				55,700.	0	561.
(35) ROBERT E. CYBORON ASSOC VP, OFF CAMPUS PROGRAMS	40.00			X				137,802.	0	16,137.
(36) MARGARET ULVELING ASSOC VP, INST ADVANCEMENT	40.00			X				135,819.	0	24,101.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** 65

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	X	
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? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

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 Report compensation for the calendar year ending with or within the organization's tax year

(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 **▶**

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(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			
(37) DR. NANCY L. HEDLUND ASSOC VP, PLANNING & ASSESSMENT	40.00			X				137,966.	0	27,044.
(38) DR. STEVEN C. COMBS DEAN	40.00					X		170,962.	0	21,918.
(39) DR. WARREN WEE ASSOC DEAN, BUSINESS ADMIN	40.00					X		164,280.	0	18,113.
(40) DARREN VORDERBRUEGGE DIRECTOR, ATHLETICS&CAMPUS REC	40.00					X		138,754.	0	23,412.
(41) W. GERALD GLOVER AFFILIATE PROFESSOR, MGMT	40.00					X		140,469.	0	16,764.
(42) LEROY O. LANEY PROFESSOR, FINANCE & ECONOMICS	40.00					X		137,905.	0	15,251.
(43) CHATT WRIGHT FORMER PRESIDENT	0						X	320,049.	0	2,435.
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **65**

- 3** Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual
- 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? If "Yes," complete Schedule J for such individual
- 5** Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3	X	
4	X	
5		X

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 Report compensation for the calendar year ending with or within the organization's tax year

(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

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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				
	c	Fundraising events	1c	735.			
	d	Related organizations	1d				
	e	Government grants (contributions) . .	1e	1,439,253			
	f	All other contributions, gifts, grants, and similar amounts not included above .	1f	1,082,307.			
	g	Noncash contributions included in lines 1a-1f \$		53,071.			
	h	Total. Add lines 1a-1f		2,522,295			
Program Service Revenue				Business Code			
	2a	TUITION & FEES	611710	96,518,997.	96,518,997		
	b	FEES & CONTRACTS FROM GOVERNMENT AGENCIES	611710	333,238	333,238		
	c						
	d						
	e						
	f	All other program service revenue					
	g	Total. Add lines 2a-2f		96,852,235			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts). . . ATTACHMENT 2		1,170,653			1,170,653
	4	Income from investment of tax-exempt bond proceeds		0			
	5	Royalties		0			
			(i) Real (ii) Personal				
	6a	Gross rents	3,750,287				
	b	Less rental expenses	3,693,974				
	c	Rental income or (loss)	56,313.				
	d	Net rental income or (loss)		56,313			56,313.
			(i) Securities (ii) Other				
	7a	Gross amount from sales of assets other than inventory	22,435,859				
	b	Less cost or other basis and sales expenses	23,824,472				
	c	Gain or (loss)	-1,388,613				
	d	Net gain or (loss)		-1,388,613.			-1,388,613.
	8a	Gross income from fundraising events (not including \$ 735. of contributions reported on line 1c) See Part IV, line 18	144,522.				
	b	Less direct expenses	40,687.				
	c	Net income or (loss) from fundraising events		103,835.			103,835
	9a	Gross income from gaming activities See Part IV, line 19					
	b	Less direct expenses					
	c	Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less returns and allowances	3,926,907.				
b	Less cost of goods sold	3,186,511.					
c	Net income or (loss) from sales of inventory		740,396	737,553	2,843.		
Miscellaneous Revenue				Business Code			
11a	PARKING FEES	900099	1,040,776		590,441.	450,335.	
b	STUDENT CLUB REVENUE	900099	9,412			9,412.	
c	ATHLETIC REVENUE	900099	103,197.		7,000	96,197	
d	All other revenue	900099	415,936		56,175	359,761	
e	Total. Add lines 11a-11d		1,569,321.				
12	Total revenue. See instructions		101,626,435	97,589,788.	656,459	857,893	

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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)

Check if Schedule O contains a response to any question in this Part IX

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 United States See Part IV, line 21 .	0			
2 Grants and other assistance to individuals in the United States See Part IV, line 22	16,371,635.	16,371,635.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	4,261,180.	1,101,357.	2,633,897.	525,926.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	75,640.	75,640.		
7 Other salaries and wages	46,829,968.	38,666,843.	7,437,440.	725,685.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,781,876.	3,074,633.	1,650,273.	56,970.
9 Other employee benefits	3,068,061.	1,642,442.	1,391,745.	33,874.
10 Payroll taxes	3,901,877.	2,935,011.	890,214.	76,652.
11 Fees for services (non-employees)	0			
a Management	823,857.	12,892.	810,965.	
b Legal	251,605.		251,605.	
c Accounting	0			
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	148,020.		148,019.	1.
f Investment management fees	5,328,381.	1,624,175.	3,510,029.	194,177.
g Other	2,282,345.	1,078,903.	1,098,748.	104,694.
12 Advertising and promotion	4,192,703.	2,707,866.	1,335,180.	149,657.
13 Office expenses	2,016,746.		2,016,746.	
14 Information technology	0			
15 Royalties	7,129,669.	458,029.	6,654,363.	17,277.
16 Occupancy	1,918,446.	1,688,673.	176,108.	53,665.
17 Travel	0			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	590,092.	367,875.	185,495.	36,722.
19 Conferences, conventions, and meetings	328,869.	1,283.	327,586.	
20 Interest	0			
21 Payments to affiliates	1,579,482.	1,269,465.	310,017.	
22 Depreciation, depletion, and amortization . . .	692,731.	38,462.	654,269.	
23 Insurance				
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a <u>STUDENT RECRUITMENT</u>	1,116,590.	1,053,185.	30,159.	33,246.
b <u>INSTRUCTIONAL MEDIA AUDIO VI</u>	456,084.	452,671.		3,413.
c <u>PROVISION DOUBTFUL ACCOUNTS</u>	859,790.		859,790.	
d <u>PARKING EXPENSE</u>	260,640.		260,640.	
e All other expenses	559,364.	385,739.	173,201.	424.
25 Total functional expenses Add lines 1 through 24e	109,825,651.	75,006,779.	32,806,489.	2,012,383.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)	0			

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Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	0	1	0
	2 Savings and temporary cash investments	8,906,095.	2	4,063,553.
	3 Pledges and grants receivable, net	343,183.	3	303,928.
	4 Accounts receivable, net	4,298,288.	4	3,798,716.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	0	6	0
	7 Notes and loans receivable, net	3,299,723.	7	3,094,505.
	8 Inventories for sale or use	866,641.	8	574,467.
	9 Prepaid expenses and deferred charges	788,412.	9	1,293,676.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	46,498,224.		
	b Less accumulated depreciation	22,286,855.		
	11 Investments - publicly traded securities	46,472,311.	11	33,655,809.
	12 Investments - other securities See Part IV, line 11	30,747,382.	12	24,854,613.
	13 Investments - program-related See Part IV, line 11	0	13	0
	14 Intangible assets	0	14	11,219,802.
	15 Other assets See Part IV, line 11	10,002.	15	3,364.
16 Total assets. Add lines 1 through 15 (must equal line 34)	106,879,587.	16	107,073,802.	
Liabilities	17 Accounts payable and accrued expenses	6,989,559.	17	15,992,659.
	18 Grants payable	1,886,862.	18	968,029.
	19 Deferred revenue	3,413,032.	19	3,351,557.
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable to unrelated third parties	0	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	4,707,034.	25	5,155,525.
	26 Total liabilities. Add lines 17 through 25	16,996,487.	26	25,467,770.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	78,456,227.	27	70,688,883.
	28 Temporarily restricted net assets	6,964,106.	28	6,383,749.
	29 Permanently restricted net assets	4,462,767.	29	4,533,400.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> 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	89,883,100.	33	81,606,032.
	34 Total liabilities and net assets/fund balances.	106,879,587.	34	107,073,802.

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Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	101,626,435.
2	Total expenses (must equal Part IX, column (A), line 25)	2	109,825,651.
3	Revenue less expenses Subtract line 2 from line 1	3	-8,199,216.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	89,883,100.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-77,852.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	81,606,032.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☒

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to line 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	X	
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 separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate 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?	X	
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	X	

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SCHEDULE A (Form 990 or 990-EZ)

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

2011

Open to Public
Inspection

Name of the organization

HAWAII PACIFIC UNIVERSITY

Employer identification number

99-0113930

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 described in 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 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? ☐

	Yes	No
11g(i)	<input type="checkbox"/>	<input type="checkbox"/>
11g(ii)	<input type="checkbox"/>	<input type="checkbox"/>
11g(iii)	<input type="checkbox"/>	<input type="checkbox"/>

h Provide the following information about the supported organization(s)

(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	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

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Schedule A (Form 990 or 990-EZ) 2011

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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
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 section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2011. 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	<input type="checkbox"/>	
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test - 2011. 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	<input type="checkbox"/>	
b 10%-facts-and-circumstances test - 2010. 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	<input type="checkbox"/>	
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	<input type="checkbox"/>	

Schedule A (Form 990 or 990-EZ) 2011

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Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (Add lines 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2011. 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. ► ☐

b 33 1/3% support tests - 2010. 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. ► ☐

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ► ☐

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Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions)

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

HAWAII PACIFIC UNIVERSITY

Employer identification number

99-0113930

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? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? <input type="checkbox"/> Yes <input type="checkbox"/> 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).

<input type="checkbox"/> Preservation of land for public use (e g , recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 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 Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax 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 section 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 (ASC 958), 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 (ASC 958), 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 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

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

- | | |
|---|---|
| <p>a <input type="checkbox"/> Public exhibition</p> <p>b <input type="checkbox"/> Scholarly research</p> <p>c <input type="checkbox"/> Preservation for future generations</p> | <p>d <input type="checkbox"/> Loan or exchange programs</p> <p>e <input type="checkbox"/> Other _____</p> |
|---|---|

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	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	76,494,236.	66,019,086.	60,623,110.	72,395,177.	
b Contributions	109,842.	82,613.	113,118.	341,032.	
c Net investment earnings, gains, and losses	-4,769,503.	10,434,232.	6,278,087.	-11,371,521.	
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	16,532,941.	41,695.	995,229.	741,578.	
g End of year balance	55,301,634.	76,494,236.	66,019,086.	60,623,110.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a** Board designated or quasi-endowment ▶ 83.6800 %
- b** Permanent endowment ▶ 8.1200 %
- c** Temporarily restricted endowment ▶ 8.2000 %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	X	
(ii) related organizations		X
3b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?		

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		272,000.		272,000.
b Buildings		23,311,283.	6,686,853.	16,624,430.
c Leasehold improvements		6,246,621.	4,171,298.	2,075,323.
d Equipment		14,710,665.	11,346,255.	3,364,410.
e Other		1,957,655.	82,449.	1,875,206.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				24,211,369.

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Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	13,270,880.	ATTACHMENT 1
(3) Other		
(A) 1607 CAPITAL INT'L EQUITY	7,707,134.	FMV
(B) BRANDYWINE GLOBAL INVESTMENT	1,981,097.	FMV
(C) ACADIAN EMERGING MARKETS	1,895,503.	FMV
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)	24,854,614.	

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.)		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) FEDERAL STUDENT LOAN OBLIGATION	3,946,629.
(3) CAPITAL LEASE OBLIGATION	1,208,896.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	5,155,525.

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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Part XI Reconciliation of Change in Net Assets from Form 990 to Audited 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 through 8	9	
10	Excess or (deficit) for the year per audited 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 must 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 must 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, line 2; 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.

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Part XIV Supplemental Information (continued)

USE OF ENDOWMENT FUNDS

PART V, QUESTION 4

HAWAI`I PACIFIC UNIVERSITY ENDOWMENT FUND INCLUDES QUASI, TEMPORARILY RESTRICTED, AND PERMANENTLY RESTRICTED ENDOWMENT FUNDS. THE FUNDAMENTAL PURPOSE OF THE UNIVERSITY'S ENDOWED FUNDS IS TO SUPPORT THE CORE ACADEMIC MISSION OF THE UNIVERSITY. SPENDING FROM THE ENDOWMENT IS USED PRIMARILY FOR ACADEMIC PURPOSES, GOING TOWARD ACADEMIC PROGRAMS, INSTRUCTION AND RESEARCH, STUDENT AID, AND MAINTENANCE OF THE BUILDINGS AND CLASSROOMS. HAWAI`I PACIFIC UNIVERISTY IS ALSO PLANNING AN EXPANSION OF THE HAWAI`I LOA CAMPUS WHICH WILL BE FUNDED PARTIALLY THROUGH THE ENDOWMENT FUND.

QUASI ENDOWMENT FUNDS ARE DEFINED AS FUNDS FOR WHICH THE UNIVERSITY, RATHER THAN THE DONOR, HAS DETERMINED THAT THE CORPUS IS TO BE RETAINED AND INVESTED. EXAMPLES ARE THE BOARD OF TRUSTEE'S DESIGNATED FUNDS FOR FACULTY TECHNOLOGY GRANTS AND THE TRUSTEE'S SCHOLARLY ENDEAVORS PROGRAMS TO SUPPORT FACULTY DEVELOPMENT AND RESEARCH.

TEMPORARILY RESTRICTED ENDOWMENTS CARRY RESTRICTIONS THAT EXPIRE UPON THE PASSAGE OF A PRESCRIBED PERIOD OR UPON THE OCCURRENCE OF A STATED EVENT, AS SPECIFIED BY THE DONOR. THE UNIVERSITY HAS A NATIONAL ENDOWMENT FOR THE HUMANITIES CHALLENGE GRANT THAT IS RESTRICTED FOR LIBRARY ACQUISITIONS AND AN ENDOWED CHAIR OF HUMANITIES.

HAWAI`I PACIFIC UNIVERSITY HAS PERMANENTLY RESTRICTED ENDOWMENTS WHICH ARE GIFTS AND BEQUESTS WHICH HAVE BEEN ACCEPTED WITH DONOR STIPULATIONS THAT THE PRINCIPAL BE MAINTAINED INTACT IN PERPETUITY WITH ONLY THE

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Part XIV Supplemental Information (continued)

INCOME TO BE UTILIZED IN ACCORDANCE WITH DONOR STIPULATIONS. DONORS MAY PROVIDE FUNDS WITH RESTRICTIONS BASED ON THEIR INTERESTS TO FUND SPECIFIC PROGRAMS, SCHOLARSHIPS, BUIDLINGS, TECHNOLOGY, RESEARCH, FACULTY OR STUDENT ACTIVITIES SUCH AS CHEER AND DANCE. THE UNIVERSITY HONORS DONOR INTENT IN ACCORDANCE WITH THE PROVISIONS OF THE UNIFORM PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT. THE MAJORITY OF PERMANENTLY RESTRICTED GIFTS ARE DESIGNATED FOR USE AS SCHOLARSHIPS.

ATTACHMENT 1

SCHEDULE D, PART VII - INVESTMENTS - CLOSELY HELD EQUITY INTERESTS

DESCRIPTION	BOOK VALUE	COST OR FMV
FORESTER DIVERSIFIED LTD	11,136,083.	FMV
HHR TITAN OFFSHORE LTD	2,134,797.	FMV
TOTALS	13,270,880.	

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JSA

1E1226 2 000

1555AA 1018

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SCHEDULE E (Form 990 or 990-EZ)

Schools

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2011

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 13, or
Form 990-EZ, Part VI, line 48.

▶ Attach to Form 990 or Form 990-EZ.

Name of the organization

HAWAII PACIFIC UNIVERSITY

Employer identification number

99-0113930

Part I

		YES	NO
1 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	X	
2 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	X	
3 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II.	3	X	
<u>SEE SUPPLEMENTAL PAGE</u>			
4 Does the organization maintain the following?			
a Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	X	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	4b	X	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	4c	X	
d Copies of all material used by the organization or on its behalf to solicit contributions?	4d	X	
If you answered "No" to any of the above, please explain. If you need more space, use Part II			
5 Does the organization discriminate by race in any way with respect to			
a Students' rights or privileges?	5a		X
b Admissions policies?	5b		X
c Employment of faculty or administrative staff?	5c		X
d Scholarships or other financial assistance?	5d		X
e Educational policies?	5e		X
f Use of facilities?	5f		X
g Athletic programs?	5g		X
h Other extracurricular activities?	5h		X
If you answered "Yes" to any of the above, please explain. If you need more space, use Part II			
6a Does the organization receive any financial aid or assistance from a governmental agency?	6a	X	
b Has the organization's right to such aid ever been revoked or suspended?	6b		X
If you answered "Yes" to either line 6a or line 6b, explain on Part II			
7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	7	X	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or Form 990-EZ.

Schedule E (Form 990 or 990-EZ) (2011)

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AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule E (Form 990 or 990-EZ) (2011)

Page 2

Part II **Supplemental Information.** Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions).

COMPLIANCE WITH REV PROC 75-50, 1975-2 C.B. 587

PART I, QUESTION 3

HAWAI'I PACIFIC UNIVERSITY MEETS THE REQUIREMENTS OF REV. PROC. 75-50

PUBLICITY REQUIREMENTS BY MEETING THE 4.03 (2) (B) EXCEPTION WHICH STATES

"IF A SCHOOL CUSTOMARILY DRAWS A SUBSTANTIAL PERCENTAGE OF ITS STUDENTS

NATIONWIDE OR WORLDWIDE OR FROM A LARGE GEOGRAPHIC SECTION OR SECTIONS OF

THE UNITED STATES AND FOLLOWS A RACIALLY NONDISCRIMINATORY POLICY AS TO

STUDENTS, THE PUBLICITY REQUIREMENT MAY BE SATISFIED BY COMPLYING WITH

SECTION 4.02, SUPRA. SUCH A SCHOOL MAY DEMONSTRATE THAT IT FOLLOWS A

RACIALLY NONDISCRIMINATORY POLICY WITHIN THE MEANING OF THE PRECEDING

SENTENCE EITHER BY SHOWING THAT IT CURRENTLY ENROLLS STUDENTS OF RACIAL

MINORITY GROUPS IN MEANINGFUL NUMBERS OR, WHEN MINORITY STUDENTS ARE NOT

ENROLLED IN MEANINGFUL NUMBERS, THAT ITS PROMOTIONAL ACTIVITIES AND

RECRUITING EFFORTS IN EACH GEOGRAPHIC AREA WERE REASONABLY DESIGNED TO

INFORM STUDENTS OF ALL RACIAL SEGMENTS IN THE GENERAL COMMUNITIES WITHIN

THE AREA OF THE AVAILABILITY OF THE SCHOOL. THE QUESTION WHETHER A SCHOOL

SATISFIES THE PRECEDING SENTENCE WILL BE DETERMINED ON THE BASIS OF THE

FACTS AND CIRCUMSTANCES OF EACH CASE." HAWAI'I PACIFIC UNIVERSITY

CUSTOMARILY DRAWS STUDENTS FROM HAWAI'I, NATIONWIDE AND GLOBALLY AND

FOLLOWS A RACIALLY NONDISCRIMINATORY POLICY AS TO STUDENTS. THE

UNIVERSITY CURRENTLY ENROLLS STUDENTS OF RACIAL MINORITY GROUPS IN

MEANINGFUL NUMBERS: THE RACIAL MAKEUP OF ENROLLED STUDENTS ACCORDING TO

IPEDS CATEGOROEES IS AS FOLLOWS: AMERICAN INDIAN OR ALASKA NATIVE 1%,

ASIAN/NATIVE HAWAIIAN /PACIFIC ISLANDER 25%, BLACK OR AFRICAN AMERICA 6%,

HISPANIC/LATINO 12%, WHITE 33%, NON-RESIDENT ALIEN 4%.

THE UNIVERSITY COMPLIED WITH ALL ASPECTS OF REV. PROC. 75-50, SECTIONS

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule E (Form 990 or 990-EZ) (2011)

Page 2

Part II **Supplemental Information.** Complete this part to provide the explanations required by Part I, lines 3, 4d, 5h, 6b, and 7, as applicable. Also complete this part to provide any other additional information (see instructions).

4.01 THROUGH 4.05.

SPACE PERMITTING, PRINT ADVERTISING AND BROCHURES INCLUDE THE FOLLOWING
STATEMENT: "HAWAI'I PACIFIC UNIVERSITY IS AN EQUAL
OPPORTUNITY/AFFIRMATIVE ACTION INSTITUTION THAT PROHIBITS DISCRIMINATION
AGAINST, AND HARASSMENT OF, ANY PERSON ON THE BASIS OF RACE, COLOR,
NATIONAL ORIGIN, RELIGION, SEXUAL ORIENTATION, AGE, ANCESTRY, MARITAL
STATUS, DISABILITY, ARREST AND COURT RECORD, OR VETERAN STATUS. SEX
DISCRIMINATION INCLUDES SEXUAL HARASSMENT AND SEXUAL ASSAULT. FOR MORE
INFORMATION ON HOW TO REPORT DISCRIMINATION OR HARASSMENT TO HPU, PLEASE
GO TO WWW.HPU.EDU/STUDENTLIFE AND CLICK ON THE LINK TO THE STUDENT
HANDBOOK."

WHERE SPACE DOES NOT PERMIT THE LONG VERSION, A SHORTER VERSION IS USED:
"HAWAI'I PACIFIC UNIVERSITY ADMITS STUDENTS OF ANY RACE, COLOR, NATIONAL
AND ETHNIC ORIGIN, RELIGION, GENDER, AGE, ANCESTRY, MARITAL STATUS,
SEXUAL ORIENTATION, VETERAN STATUS AND DISABILITY."

FINANCIAL AID OR ASSISTANCE FROM A GOVERNMENT AGENCY

PART I, QUESTION 6A

HAWAI'I PACIFIC UNIVERSITY PARTICIPATES IN UNITED STATES DEPARTMENT OF
EDUCATION FINANCIAL AID PROGRAMS AND OTHER GOVERNMENT GRANT PROGRAMS
FUNDING RESEARCH AND TEACHING.

AMENDED RETURN

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

2011

Open to Public
Inspection

Department of the Treasury

Internal Revenue Service

Name of the organization

HAWAII PACIFIC UNIVERSITY

Employer identification number

99-0113930

▶ Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		13,271,000.
(2) CENTRAL AMERICA/CARIBBEAN		10.	PROGRAM SERVICES	STUDY ABROAD	21,600.
(3) EAST ASIA AND THE PACIFIC		3	PROGRAM SERVICES	RECRUITMENT	257,450
(4) EAST ASIA AND THE PACIFIC		23	PROGRAM SERVICES	STUDY ABROAD	31,316
(5) EAST ASIA AND THE PACIFIC		1.	PROGRAM SERVICES	MATERIALS DEVELOPMENT	6,250.
(6) EAST ASIA AND THE PACIFIC		3.	PROGRAM SERVICES	FACULTY ONLINE COURSE	19,837.
(7) EUROPE		3.	PROGRAM SERVICES	RECRUITMENT	641,064.
(8) EUROPE		5.	PROGRAM SERVICES	FACULTY ONLINE COURSE	122,027.
(9) MIDDLE EAST AND NORTH AFRICA		1.	PROGRAM SERVICES	RECRUITMENT	23,732.
(10) MIDDLE EAST AND NORTH AFRICA		1.	PROGRAM SERVICES	FACULTY ONLINE COURSE	10,060.
(11) NORTH AMERICA		1	PROGRAM SERVICES	RECRUITMENT	14,944.
(12) SOUTH ASIA		1	PROGRAM SERVICES	RECRUITMENT	51,851
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total,		52.			14,471,131.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)		52			14,471,131

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

Schedule F (Form 990) 2011

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule F (Form 990) 2011

Page 2

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. ☐

Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. ☐

3 Enter total number of other organizations or entities ☐

Schedule F (Form 990) 2011

JSA

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AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule F (Form 990) 2011

Page 3

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2011

JSA

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AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule F (Form 990) 2011

Page **4**

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)* ☐ Yes ☒ No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)* ☒ Yes ☐ No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)* ☐ Yes ☒ No

Schedule F (Form 990) 2011

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule F (Form 990) 2011

Page **5**

Part V

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

EXPLANATION OF EXPENDITURES

PART 1, QUESTION 3(F)

"RECRUITMENT" INCLUDES TRAVEL EXPENSES FOR RECRUITERS, FEES FOR AGENTS,
FEES FOR PARTICIPATION IN COLLEGE RECRUITING FAIRS AND ADVERTISING.

"FACULTY ONLINE COURSE" EXPENSES INCLUDE PAYMENTS TO FACULTY LIVING
ABROAD WHO INSTRUCT ONLINE COURSES.

"STUDY ABROAD" EXPENSES INCLUDE TRAVEL AND EDUCATIONAL EXPENSES FOR STUDY
ABROAD TRIPS.

"MATERIALS DEVELOPMENT" EXPENSES INCLUDE PROFESSIONAL FEES FOR
DEVELOPMENT OF EDUCATIONAL TEACHING MATERIALS.

METHOD USED TO ACCOUNT FOR EXPENDITURES

PART I, QUESTION 3(F)

THE ACCRUAL METHOD IS USED TO ACCOUNT FOR EXPENDITURES WHICH ARE CARRIED
ON THE BOOKS AND RECORDS OF THE UNIVERSITY.

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AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule G (Form 990 or 990-EZ) 2011

Page **2**

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1 CHEER T-SHIRTS (event type)	(b) Event #2 BAND CONCESSIO (event type)	(c) Other Events 7. (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	27,457.	20,585.	77,758.	125,800.
	2 Less Charitable contributions			735.	735.
	3 Gross income (line 1 minus line 2).	27,457.	20,585.	77,023.	125,065.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	11,566.	5,000.	20,126.	36,692.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(36,692.)
	11 Net income summary. Combine line 3, column (d), and line 10				88,373.

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				()
	8 Net gaming income summary. Combine line 1, column d, and line 7				

9 Enter the state(s) in which the organization operates gaming activities: _____
a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No
b If "No," explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No
b If "Yes," explain: _____

Schedule G (Form 990 or 990-EZ) 2011

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule G (Form 990 or 990-EZ) 2011

Page **3**

- 11** Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13** Indicate the percentage of gaming activity operated in:
- | | | |
|--------------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14** Enter the name and address of the person who prepares the organization's gaming/special events books and records.

Name ▶ _____

Address ▶ _____

- 15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No
- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c** If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

Schedule G (Form 990 or 990-EZ) 2011

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public
Inspection

Name of the organization

HAWAII PACIFIC UNIVERSITY

Employer identification number

99-0113930

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. ☐

Part II can be duplicated if additional space is needed

1	(a) Name and address of organization or government	(b) EIN	(c) IRC 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
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2011)

AMENDED RETURN

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1	VARIOUS STUDENTS FINANCIAL AID AND SCHOLARSHIPS	2,177	16,371,635.			
2	VARIOUS FACULTY - FACULTY DEVELOPMENT GRANT	70	142,604.			
3	VARIOUS FACULTY - TRUSTEE SCHOLARLY ENDEAVOR	10.	13,924.			
4						
5						
6						
7						

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

PROCEDURES FOR MONITORING THE USE OF GRANTS

PART I, QUESTION 2

HAWAI'I PACIFIC UNIVERSITY'S OFFICES OF FINANCIAL AID AND SCHOLARSHIPS OVERSEE FEDERAL AND UNIVERSITY GRANT, SCHOLARSHIP, LOAN AND WORK-STUDY PROGRAMS. FEDERAL PROGRAMS ARE ADMINISTERED ACCORDING TO THE LAWS, RULES AND REGULATIONS ISSUED BY THE U.S. DEPARTMENT OF EDUCATION, THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, OR OTHER GRANTING AGENCY. UNIVERSITY SCHOLARSHIPS AND GRANTS ARE ADMINISTERED ACCORDING TO THE POLICIES AND PROCEDURES IMPLEMENTED BY THE FINANCIAL AID OFFICE TO SUPPORT THE UNIVERSITY'S ENROLLMENT PLAN. THE OFFICES AWARD AID BASED ON

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule I (Form 990) (2011)

Page 2

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

THE FEDERAL FREE APPLICATION FOR FEDERAL STUDENT AID (FAFSA) AND SUPPORTING DOCUMENTATION TO VERIFY A STUDENT'S ELIGIBILITY FOR NEED BASED PROGRAMS AND SCHOLARSHIPS WHERE NEED IS A CRITERIA. IN ADDITION, STUDENTS ARE REVIEWED BASED ON ACADEMIC AND TALENT QUALIFICATIONS FOR MERIT BASED SCHOLARSHIPS AND GRANTS IN AREAS SUCH AS DANCE, CHEER, ATHLETICS, MUSIC, DEBATE AND OTHER AREAS. PRESIDENT'S SCHOLARS SCHOLARSHIPS ARE AWARDED BASED ON MERIT, GRADE POINT AVERAGE AND RECOMMENDATIONS. FINANCIAL AID AND THE SCHOLARSHIPS OFFICES MONITOR THE CONTINUED ELIGIBILITY OF STUDENTS FOR AWARDS.

Schedule I (Form 990) (2011)

JSA

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AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule I (Form 990) (2011)

Page 2

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

TRUSTEE'S SCHOLARLY ENDEAVORS PROGRAM FUNDS FACULTY SCHOLARSHIP AND RESEARCH GRANTS. AS A CONDITION OF THE GRANT, FACULTY PRODUCE WRITTEN OR OTHER WORK TO REPORT TO THE TRUSTEE'S FACULTY SCHOLARLY ENDEAVORS COMMITTEE ON THE RESULTS OF THEIR FUNDED WORK.

FACULTY DEVELOPMENT GRANTS FUND FACULTY ATTENDANCE AT REGIONAL, NATIONAL OR INTERNATIONAL CONFERENCES AND REQUIRE THE SUBMISSION OF RECEIPTS FOR ALL EXPENSES. TECHNOLOGY ENHANCEMENT GRANTS ARE FUNDED AND REQUIRE THE SUBMISSION OF RECEIPTS FOR THE FUNDED EQUIPMENT.

AMENDED RETURN

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization

HAWAII PACIFIC UNIVERSITY

Employer identification number

99-0113930

Part I Questions Regarding Compensation

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.

- | | |
|---|--|
| <input type="checkbox"/> First-class or charter travel
<input type="checkbox"/> Travel for companions
<input type="checkbox"/> Tax indemnification and gross-up payments
<input type="checkbox"/> Discretionary spending account | <input checked="" type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Payments for business use of personal residence
<input checked="" type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |
|---|--|

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III

- | | |
|--|--|
| <input checked="" type="checkbox"/> Compensation committee
<input checked="" type="checkbox"/> Independent compensation consultant
<input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Compensation survey or study
<input checked="" type="checkbox"/> 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?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only section 501(c)(3) and 501(c)(4) organizations 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?
- b** Any related organization?
- 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?
- b** Any related organization?
- 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

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 Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		X
2	X	
4a	X	
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2011

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule J (Form 990) 2011

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	DR. GEOFFREY BANNISTER	(i) 286,230.	0	6,825.	26,950.	12,999.	333,004.	0
		(ii) 0	0	0	0	0	0	0
2	KENNETH T. UEMURA	(i) 322,092.	0	3,833.	21,802.	14,536.	362,263.	0
		(ii) 0	0	0	0	0	0	0
3	WILLIAM H. KLINE	(i) 138,203.	18,000.	3,685.	12,473.	18,813.	191,174.	0
		(ii) 0	0	0	0	0	0	0
4	DR. JOHN M. KEARNS	(i) 246,270.	0	2,972.	26,904.	7,133.	283,279.	0
		(ii) 0	0	0	0	0	0	0
5	DR. ANDREW BRITTAIN	(i) 128,565.	0	0	14,834.	41,633.	185,032.	0
		(ii) 0	0	0	0	0	0	0
6	EDWARD R. STEPIEN	(i) 252,209.	0	5,546.	23,146.	1,572.	282,473.	0
		(ii) 0	0	0	0	0	0	0
7	MARY ELLEN MCGILLAN	(i) 114,122.	30,000.	4,230.	11,066.	9,582.	169,000.	0
		(ii) 0	0	0	0	0	0	0
8	SCOTT C. STENSRUD	(i) 166,086.	0	11,670.	19,824.	743.	198,323.	0
		(ii) 0	0	0	0	0	0	0
9	JANET S. KLOENHAMER	(i) 140,223.	0	3,583.	1,128.	11,499.	156,433.	0
		(ii) 0	0	0	0	0	0	0
10	CLAIRE K. COOPER	(i) 183,894.	0	5,584.	20,785.	7,458.	217,721.	0
		(ii) 0	0	0	0	0	0	0
11	DR. LESLIE H. CORREA	(i) 157,714.	0	1,560.	18,138.	11,587.	188,999.	0
		(ii) 0	0	0	0	0	0	0
12	KATHLEEN R. CLARK	(i) 150,499.	0	3,170.	16,753.	1,123.	171,545.	0
		(ii) 0	0	0	0	0	0	0
13	ROBERT E. CYBORON	(i) 136,242.	0	1,560.	15,040.	1,097.	153,939.	0
		(ii) 0	0	0	0	0	0	0
14	MARGARET ULVELING	(i) 133,609.	0	2,210.	15,288.	8,813.	159,920.	0
		(ii) 0	0	0	0	0	0	0
15	DR. NANCY L. HEDLUND	(i) 137,966.	0	0	15,635.	11,409.	165,010.	0
		(ii) 0	0	0	0	0	0	0
16	DR. STEVEN C. COMBS	(i) 169,402.	0	1,560.	19,740.	2,178.	192,880.	0
		(ii) 0	0	0	0	0	0	0

Schedule J (Form 990) 2011

JSA

1E1291 1 000

1555AA 1018

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HAWAII PACIFIC UNIVERSITY

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Schedule J (Form 990) 2011

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Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	DR. WARREN WEE	(i) 163,620.	0	660.	17,816.	297.	182,393.	0
		(ii) 0	0	0	0	0	0	0
2	DARREN VORDERBRUEGGE	(i) 135,994.	0	2,760.	15,252.	8,160.	162,166.	0
		(ii) 0	0	0	0	0	0	0
3	W. GERALD GLOVER	(i) 140,469.	0	0	15,483.	1,281.	157,233.	0
		(ii) 0	0	0	0	0	0	0
4	LEROY O. LANEY	(i) 137,905.	0	0	15,105.	146.	153,156.	0
		(ii) 0	0	0	0	0	0	0
5	CHATT WRIGHT	(i) 319,700.	0	349.	0	2,435.	322,484.	0
		(ii) 0	0	0	0	0	0	0
6		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0
7		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0
8		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0
9		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0
10		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0
11		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0
12		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0
13		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0
14		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0
15		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0
16		(i) 0	0	0	0	0	0	0
		(ii) 0	0	0	0	0	0	0

Schedule J (Form 990) 2011

JSA

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AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule J (Form 990) 2011

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Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

JSA

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Schedule J (Form 990) 2011

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Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

BENEFITS

PART I, QUESTIONS 1A & 1B

PRESIDENT GEOFFREY BANNISTER RECEIVED A FULLY TAXABLE HOUSING ALLOWANCE

(\$33,152).

DURING THE TAX YEAR, THERE WAS NO WRITTEN POLICY REGARDING PAYMENT OF

SOCIAL CLUB MEMBERSHIP DUES.

SOCIAL CLUB MONTHLY DUES WERE PAID FOR THE FOLLOWING TWO (2) EXECUTIVES:

PRESIDENT GEOFFREY BANNISTER (PACIFIC CLUB \$7,153). 100% OF USE TREATED

AS BUSINESS USE.

VICE PRESIDENT, ALUMNI & UNIVERSITY RELATIONS MARY ELLEN MCGILLAN

(PACIFIC CLUB \$5,646). 100% OF USE TREATED AS BUSINESS USE.

JSA

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Schedule J (Form 990) 2011

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HAWAII PACIFIC UNIVERSITY

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Page 3

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

METHODS USED TO ESTABLISH PRESIDENT'S COMPENSATION

PART 1, QUESTION 3

ALL EXECUTIVE OFFICER COMPENSATION, INCLUDING THE PRESIDENT'S COMPENSATION, IS APPROVED ANNUALLY BY THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES BASED ON COMPARABLE COMPENSATION FROM SIMILAR INSTITUTIONS, AND REASONABLENESS OF EXECUTIVES COMPENSATION ASSESSED BY AN INDEPENDENT EXECUTIVE COMPENSATION CONSULTANT. APPROVAL IS DOCUMENTED IN THE MINUTES OF THE COMPENSATION COMMITTEE.

PERSONS RECEIVING SEVERANCE PAY

PART 1, QUESTION 4A

MARGARET ULVELING, ASSOCIATE VICE PRESIDENT, ALUMNI AND UNIVERSITY RELATIONS, RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT OF \$109,379.

JSA

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Schedule J (Form 990) 2011

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AMENDED RETURN

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

**Open To Public
Inspection**

Name of the organization

HAWAII PACIFIC UNIVERSITY

Employer identification number

99-0113930

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										

Total ▶ \$

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2011

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule L (Form 990 or 990-EZ) 2011

Page **2**

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) MICHELINE SOONG	FAMILY MEMBER OF OFFICER	73,039	COMPENSATION AS PROFESSOR		X
(2) BANK OF HAWAII	DIRS ARE TRUSTEES OF HPU	108,030	BANKING SERVICES (AGGREGATE)		X
(3) FARMERS INSURANCE HAWAII, INC	DIR IS TRUSTEE OF HPU	215,072	INSURANCE SERVICES (AGGREGATE)		X
(4) FIRST HAWAIIAN BANK	FAMILY MEMBER OF TRUSTEE	832,758	BANKING SERVICES (AGGREGATE)		X
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS

PART IV

(1) MICHELINE SOONG IS A FAMILY MEMBER OF OFFICER JOHN KEARNS, VICE PRESIDENT ACADEMIC AFFAIRS. MICHELINE SOONG RECEIVES COMPENSATION AS A PROFESSOR AT HAWAI`I PACIFIC UNIVERSITY.

(2) BANK OF HAWAII PROVIDES BANKING SERVICES TO HAWAI`I PACIFIC UNIVERSITY. TRUSTEE JAMES POLK IS AN OFFICER. TRUSTEE MICHAEL CHUN IS ON THE BOARD OF DIRECTORS.

(3) FARMERS INSURANCE HAWAII, INC. PROVIDES WORKERS COMPENSATION INSURANCE TO HAWAI`I PACIFIC UNIVERSITY. TRUSTEE MICHELE SAITO IS AN OFFICER.

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HAWAII PACIFIC UNIVERSITY

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Schedule L (Form 990 or 990-EZ) 2011

Page **2**

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

(4) FIRST HAWAIIAN BANK PROVIDES BANKING SERVICES TO HAWAI'I PACIFIC UNIVERSITY. A FAMILY MEMBER OF TRUSTEE CHRISTINA DOANE IS ON THE BOARD OF DIRECTORS.

AMENDED RETURN

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**

OMB No 1545-0047

2011

**Open To Public
Inspection**

Name of the organization

HAWAII PACIFIC UNIVERSITY

Employer identification number

99-0113930

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art.				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications	X		27,499.	FMV
5 Clothing and household goods.				
6 Cars and other vehicles				
7 Boats and planes.				
8 Intellectual property				
9 Securities - Publicly traded	X	1.	24,222.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles.				
19 Food inventory.				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (ATCH 1)		3.	1,350.	
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II		
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II		

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

Schedule M (Form 990) (2011)

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule M (Form 990) (2011)

Page **2**

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>(A) CHECK</u>	<u>(B) NUMBER OF CONTRIBUTIONS</u>	<u>(C) REVENUES REPORTED</u>	<u>(D) METHOD OF DETERMINING</u>
PIANO	X	1.	1,000.	FMV
STORY QUILT & BOOK	X	1.	300.	FMV
GIFT CERTIFICATE	X	1.	50.	COST/SELLING PRICE
TOTALS		<u>3.</u>	<u>1,350.</u>	

AMENDED RETURN

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Employer identification number

HAWAII PACIFIC UNIVERSITY

99-0113930

DESCRIPTION OF ORGANIZATION'S MISSION

FORM 990, PART III, QUESTION 1

HAWAI`I PACIFIC UNIVERSITY IS AN INTERNATIONAL LEARNING COMMUNITY SET IN THE RICH CULTURAL CONTEXT OF HAWAI`I. STUDENTS FROM AROUND THE WORLD JOIN US FOR AN AMERICAN EDUCATION BUILT ON A LIBERAL ARTS FOUNDATION. OUR INNOVATIVE UNDERGRADUATE AND GRADUATE PROGRAMS ANTICIPATE THE CHANGING NEEDS OF THE COMMUNITY AND PREPARE OUR GRADUATES TO LIVE, WORK, AND LEARN AS ACTIVE MEMBERS OF A GLOBAL SOCIETY. OUR ENTREPRENEURIAL SPIRIT AND INTERNATIONAL LEARNING ENVIRONMENT CHALLENGE STUDENTS TO THINK DIFFERENTLY ABOUT THE WORLD AND THEIR PLACE IN IT.

FOUNDED IN 1965, HAWAI`I PACIFIC UNIVERSITY IS THE LARGEST INDEPENDENT PRIVATE UNIVERSITY IN THE STATE OF HAWAI`I. THERE ARE OVER 8,000 UNDERGRADUATE AND GRADUATE STUDENTS FROM OVER 100 COUNTRIES AND ALL 50 STATES MAKING THE UNIVERSITY ONE OF THE MOST CULTURALLY DIVERSE UNIVERSITIES IN THE WORLD.

HAWAI`I PACIFIC UNIVERSITY IS ACCREDITED BY THE WESTERN ASSOCIATION OF SCHOOLS AND COLLEGES, THE COUNCIL ON SOCIAL WORK EDUCATION AND THE NATIONAL LEAGUE FOR NURSING ACCREDITING COMMISSION. STRATEGICALLY LOCATED IN THE CENTER OF THE PACIFIC RIM, THE REGION WITH THE FASTEST GROWING ECONOMIES IN THE WORLD, HAWAI`I PACIFIC UNIVERSITY DELIVERS AN OUTSTANDING LIBERAL ARTS EDUCATION THAT ANTICIPATES TODAY'S DYNAMIC

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Schedule O (Form 990 or 990-EZ) 2011

Page 2

Name of the organization

HAWAII PACIFIC UNIVERSITY

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WORKFORCE NEEDS AND PREPARES STUDENTS TO SUSTAIN HAWAI`I AND SUCCEED IN THE WORLD. THE MAIN CAMPUS IS LOCATED IN DOWNTOWN HONOLULU, THE BUSINESS AND FINANCIAL CENTER OF THE PACIFIC. EIGHT MILES AWAY, SITUATED ON OVER 130 ACRES IN KANEOHE, THE HAWAI`I LOA CAMPUS IS THE SITE OF THE SCHOOL OF NURSING, THE MARINE SCIENCE (MARINE BIOLOGY AND OCEANOGRAPHY), AND ENVIRONMENTAL STUDIES PROGRAMS AS WELL AS SEVERAL LIBERAL ARTS PROGRAMS. COURSES ARE ALSO OFFERED AT ALL OAHU MILITARY BASES FOR ACTIVE DUTY MILITARY, VETERANS, DEFENSE DEPARTMENT EMPLOYEES, AND THEIR DEPENDENTS. STUDENTS MAY TAKE CLASSES WHERE IT IS MOST CONVENIENT AND MAY SELECT FROM A WIDE RANGE OF ONLINE COURSES.

DESCRIPTION OF EXEMPT PURPOSE ACHIEVEMENTS

FORM 990, PART III, QUESTIONS 4A-4C

QUESTION 4A - COLLEGE OF HUMANITIES & SOCIAL SCIENCES

THE COLLEGE OF HUMANITIES AND SOCIAL SCIENCES ENCOMPASSES NINE DEPARTMENTS (ARTS AND HUMANITIES, COMMUNICATION, EDUCATION, ENGLISH, HISTORY, LANGUAGES AND APPLIED LINGUISTICS, PSYCHOLOGY, SOCIAL SCIENCES, AND SOCIAL WORK) ALONG WITH ARTS PROGRAMS IN MUSIC, THEATER, AND THE VISUAL ARTS.

ACCREDITED PROFESSIONS PROGRAMS IN EDUCATION AND SOCIAL WORK INCORPORATE EXTENSIVE FIELD EXPERIENCE TO PREPARE STUDENTS FOR CAREERS OF SERVICE. THE LANGUAGES AND APPLIED LINGUISTICS DEPARTMENT, WHICH INCLUDES THE BACHELOR AND MASTERS DEGREES IN TEACHING ENGLISH TO SPEAKERS OF OTHER LANGUAGES, OFFERED WORKSHOPS FOR EDUCATORS IN JAPAN AND VIETNAM AND HOSTED SEMINARS IN HAWAI`I FOR EDUCATORS AND STUDENTS FROM JAPAN AND

AMENDED RETURN

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Page 2

Name of the organization

Employer identification number

HAWAII PACIFIC UNIVERSITY

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KOREA. THE DEPARTMENT OF SOCIAL SCIENCES SPONSORS THE MODEL UN CLUB WHICH HAS WON AWARDS FOUR OF THE LAST FIVE YEARS AT THE NATIONAL UN CONFERENCE IN NEW YORK CITY.

THE COMMUNICATION DEPARTMENT OVERSEAS HAWAI'I PACIFIC UNIVERSITY'S AWARD WINNING NEWSPAPER KALAMALAMA. THE MUSIC PROGRAM (BAND, CHAMBER ORCHESTRA, INTERNATIONAL CHORALE AND VOCAL ENSEMBLE) CONTINUE TO RECEIVE RECOGNITION, AND THEATER PRODUCTIONS HAVE GARNERED FIVE PO'OKELA AWARDS FOR EXCELLENCE.

GRADUATES ARE WELL PREPARED TO BECOME LIFELONG LEARNERS AND HAVE THE CAPACITY FOR CRITICAL THOUGHT, CREATIVE EXPRESSION, CURIOSITY, ADAPTABILITY AND INDEPENDENCE.

QUESTION 4B - COLLEGE OF NURSING & HEALTH SCIENCE

THE COLLEGE OF NURSING AND HEALTH SCIENCES HAS IMPLEMENTED A VISION FOR HEALTH CARE IN THE 21ST CENTURY. THE COLLEGE OF NURSING AND HEALTH SCIENCES CURRICULUM INCLUDES CLASSROOM TRAINING, HANDS-ON CLINICAL SIMULATION, CLINICAL OPPORTUNITIES AND COMMUNITY INTERNSHIPS. STUDENTS HAVE CLINICAL OPPORTUNITIES AT MAJOR HOSPITALS AND MEDICAL FACILITIES ON OAHU, AND OPPORTUNITIES TO CONDUCT RESEARCH IN CAMPUS LABORATORIES.

HEALTH ISSUES FACING HAWAI'I AND BEYOND ARE COMPLEX AND REQUIRE UNDERSTANDING OF HEALTH POLICY ANALYSIS, EPIDEMIOLOGY, HEALTH PROMOTION

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AND WELLNESS, HEALTH EDUCATION AND RESEARCH. THE NEED FOR SKILLED NURSES IS ACCELERATING AS THE PROPORTION OF THE POPULATION AGE 60 AND OLDER EXPANDS. THE CONTINUED NATIONAL NURSING SHORTAGE, NEED FOR ADVANCED PRACTICE NURSES, AND DIMISHING SUPPLY OF NURSE EDUCATORS ARE JUST THREE AMONG THE MANY CHALLENGES FACING HEALTH CARE TODAY. HAWAI'I PACIFIC UNIVERSITY IS WELL POSITIONED TO MEET THOSE CHALLENGES.

THE CENTER FOR TRANSCULTURAL NURSING AT THE COLLEGE OF NURSING AND HEALTH SCIENCES FOCUSES ON THE RESEARCH, EDUCATION AND PRACTICE IN NURSING WHICH IS BASED UPON PEOPLE'S CULTURAL VALUES, BELIEFS, AND PRACTICES. THE MISSION OF THE TRANSCULTURAL NURSING CENTER IS TO PROMOTE THE DELIVERY OF CULTURALLY COMPETENT NURSING CARE TO DIVERSE POPULATIONS, ENHANCE THE HEALTH CARE OF A CHANGING, MORE CULTURALLY DYNAMIC POPULATION, WITH PARTICULAR FOCUS ON REDUCING HEALTH DISPARITIES.

THE BACHELOR OF SCIENCE IN HEALTH SCIENCE PROGRAM PROVIDES A SOLID BACKGROUND FOR STUDENTS INTERESTED IN PURSUING CAREERS IN PUBLIC HEALTH AND OTHER RELATED FIELDS THAT REQUIRE UNDERSTANDING OF HEALTH POLICY ANALYSIS, EPIDEMIOLOGY, HEALTH PROMOTION AND WELLNESS, HEALTH EDUCATION AND RESEARCH.

EXTENDING ITS GLOBAL FOOTPRINT, THE COLLEGE OF NURSING AND HEALTH SCIENCE RENEWED ITS INTERNATIONAL NURSING CLINICAL EXPERIENCE IN MAY 2011. STUDENTS AND FACULTY TRAVELED TO JAPAN FOR AN INTENSIVE TWO WEEK LONG PROGRAM. DURING THIS EXPERIENCE, STUDENTS EXPLORED AND COMPARED HEALTH

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SYSTEMS INCLUDING SUCH ISSUES AS ACCESS TO CARE, HOW CULTURE ALTERS CARE PRACTICES AND ECONOMIC ISSUES. STUDENTS WERE ALSO PROVIDED THE OPPORTUNITY TO MAKE SITE VISITS TO COMMUNITY HEALTH CLINICS, HOMELESS SHELTERS, AND HOSPICE AND PALLIATIVE CARE SETTINGS. FACULTY AND STUDENTS ALSO PROVIDED LECTURES ON HEALTH CARE IN THE UNITED STATES. THIS PROGRAM WAS SO SUCCESSFUL THAT FACULTY HAVE BEEN INVITED TO RETURN ANNUALLY SINCE 2010. STUDENTS AND FACULTY FROM JAPAN ALSO VISIT HPU FOR A WEEK EACH YEAR TO LEARN MORE ABOUT THE US HEALTH CARE AND NURSING EDUCATION PARTICULARLY THE USE OF SIMULATION IN A TRUE EXCHANGE FORMAT.

GRADUATES HAVE THE ABILITY TO ANALYZE, ASSESS AND THINK CRITICALLY YET EXPRESS COMPASSION TO DELIVER HEALTH CARE IN A MULTICULTURAL ENVIRONMENT DEDICATED TO THE CARE OF BODY, MIND AND SPIRIT.

QUESTION 4C - COLLEGE OF BUSINESS ADMINISTRATION

HAWAI'I PACIFIC UNIVERSITY'S COLLEGE OF BUSINESS ADMINISTRATION PREPARES STUDENTS TO BE PROFESSION READY GLOBAL LEADERS. IT OFFERS UNDERGRADUATE AND MASTER LEVEL GRADUATE DEGREES. THE COLLEGE OFFERS A PORTFOLIO OF PROGRAMS THAT ARE CONTEMPORARY AND RELEVANT THAT MAY BE TAKEN EITHER IN A SEATED OR ONLINE OPTION. TWO KEY THEMES OF THE COLLEGE ARE THE USE OF PROJECT BASED LEARNING IN CLASSES AND THE ENGAGEMENT WITH STUDENTS, FACULTY, AND THE HONOLULU BUSINESS COMMUNITY.

STUDENTS IN THE COLLEGE'S PROGRAMS ARE ACTIVE IN A NUMBER OF CLUBS. A

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PARTICULARLY ACTIVE ORGANIZATION IS SIFE (STUDENTS IN FREE ENTERPRISE), WHICH CONDUCTS PROJECTS THAT GIVE STUDENTS HANDS-ON EXPERIENCE WITH THE KEY BUSINESS FUNCTIONS SUCH AS MARKETING, HUMAN RESOURCE MANAGEMENT, INFORMATION SYSTEMS, AND FINANCING. THE CLUB PARTICIPATES ANNUALLY IN REGIONAL COMPETITIONS, USUALLY TAKING FIRST OR SECOND PLACE. THE COLLEGE ALSO COORDINATES THE PAPPAS ENTREPRENEURSHIP LECTURE SERIES WHICH BRINGS TOGETHER PROMINENT ENTREPRENEURS WITH HAWAI'I PACIFIC UNIVERSITY STUDENTS AND FACULTY.

GRADUATES OF THE COLLEGE UNDERSTAND THE GLOBAL COMPETITIVE ENVIRONMENT AND POSSESS THE NECESSARY PROFESSIONAL KNOWLEDGE AND SKILLS TO ACTIVELY COMPETE WORLDWIDE.

DESCRIPTION OF OTHER PROGRAM SERVICES

FORM 990, PART III, QUESTION 4D

CENTER FOR OFF-CAMPUS PROGRAMS

HAWAI'I PACIFIC UNIVERSITY IS COMMITTED TO PROVIDING OUR MILITARY COMMUNITY A QUALITY EDUCATION IN A FLEXIBLE, MILITARY FRIENDLY ENVIRONMENT. THE OFF-CAMPUS PROGRAMS COURSES (IN CLASSROOM AND ONLINE) ARE AVAILABLE TO ALL MILITARY SERVICE MEMBERS, THEIR FAMILIES, VETERANS AND U.S. GOVERNMENT CIVILIAN PERSONNEL. THE COURSES ARE DESIGNED IN FLEXIBLE FORMATS THAT EXPAND ACADEMIC AND SCHEDULING OPPORTUNITIES TO HELP MILITARY STUDENTS STAY ON THEIR EDUCATIONAL PLAN. THE OFF-CAMPUS PROGRAMS OFFER ASSOCIATE, BACHELOR AND MASTER DEGREES IN SEVERAL DEGREE

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PROGRAMS INCLUDING NATURAL AND SOCIAL SCIENCES, MATHEMATICS, COMPUTER
SCIENCE, BUSINESS AND LIBERAL ARTS.

THE UNIVERSITY PARTNERS WITH THE DEPARTMENT OF VETERANS AFFAIRS TO HELP
VETERANS PAY FOR THEIR EDUCATION THROUGH THE POST-9/11 GI BILL AND
"YELLOW RIBBON SUPPLEMENT PROGRAM". HAWAI`I PACIFIC UNIVERSITY IS ALSO
ASSOCIATED WITH THE NAVY COLLEGE PROGRAM DISTANCE LEARNING PARTNERSHIP
AND IS A MEMBER OF SERVICEMEMBERS OPPORTUNITY COLLEGES CONSORTIUM.

HAWAI`I PACIFIC UNIVERSITY HAS RECEIVED SEVERAL AWARDS FOR ITS OFF-CAMPUS
PROGRAMS. THE COUNCIL OF COLLEGE AND MILITARY EDUCATORS (CCME) BOARD
HONORED HAWAI`I PACIFIC UNIVERSITY WITH THE 2010 INSTITUTION AWARD
RECOGNIZING THE UNIVERSITY'S SIGNIFICANT CONTRIBUTIONS TO MILITARY
EDUCATION. HAWAI`I PACIFIC UNIVERSITY IS RANKED IN THE TOP 25 OF MILITARY
FRIENDLY SCHOOLS BASED ON THE QUALITY OF ITS ACADEMICS AND THE ON CAMPUS
AND ONLINE SUPPORT THE PROGRAM PROVIDES TO THE MILITARY, VETERANS AND
THEIR FAMILIES. THE UNIVERSITY WAS ALSO SELECTED BY MILITARY ADVANCED
EDUCATION (MAE) MAGAZINE IN ITS GUIDE TO TOP MILITARY FRIENDLY COLLEGES
AND UNIVERSITIES.

(EXPENSES \$9,751,662 INCLUDING GRANTS OF \$1,361,884) (REVENUE
\$12,574,296)

COLLEGE OF NATURAL & COMPUTATIONAL SCIENCES

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THE COLLEGE OF NATURAL AND COMPUTATIONAL SCIENCES OFFERS BACHELORS DEGREES IN BIOCHEMISTRY, BIOLOGY, CHEMISTRY, COMPUTER SCIENCE, ENVIRONMENTAL SCIENCE, ENVIRONMENTAL STUDIES, MARINE BIOLOGY, MATHEMATICS, AND OCEANOGRAPHY. SOME OF OUR MAJORS HAVE TWO OR MORE CONCENTRATIONS WHICH PROVIDES STUDENTS WITH FURTHER DEPTH AND CHOICE, OFFERING MORE OPPORTUNITY TO MATCH OUR ACADEMIC PROGRAMS WITH STUDENTS' SPECIFIC INTERESTS AND CAREER GOALS. AT THE SAME TIME, MOST OF OUR BACHELOR PROGRAMS HAVE ACCOMPANYING MINOR DEGREES THAT PROVIDE STUDENTS BREADTH BEYOND THEIR MAIN FIELD OF STUDY.

THE COLLEGE MAINTAINS ARTICULATIONS WITH ENGINEERING AND HEALTH PROFESSIONS SCHOOLS TO CREATE PATHWAYS FOR STUDENTS TO ADVANCE THEIR EDUCATION, AND ALL OUR PROGRAMS ARE SUCCESSFUL IN PLACING STUDENTS INTO GRADUATE SCHOOLS. AMONG OUR ARTICULATION PROGRAMS IS THE 3-2 ENGINEERING DUAL DEGREE PROGRAM WHERE STUDENTS EARN A BACHELOR OF SCIENCE IN APPLIED MATHEMATICS FROM HPU AND A BACHELOR OF SCIENCE IN ENGINEERING FROM EITHER UNIVERSITY OF SOUTHERN CALIFORNIA (USC) IN LOS ANGELES OR WASHINGTON UNIVERSITY IN ST. LOUIS.

OUR PRE-HEALTH PROFESSIONS PROGRAM SUPPORTS HPU STUDENTS IN THEIR PROGRESSION TOWARD MEDICAL, DENTAL, VETERINARY, PHARMACY, PHYSICAL THERAPY, OR CHIROPRACTIC SCHOOLS. ALTHOUGH ALIGNED WITH THE BIOLOGY PROGRAM'S CONCENTRATION IN HUMAN AND HEALTH SCIENCES, STUDENTS FROM ANY MAJOR CAN FULLY PARTICIPATE IN THE PROGRAM AND RECEIVE THE SAME MENTORING, ADVISING, AND OTHER SERVICES TO ENSURE THEY STAY ON TRACK TO

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MEET THEIR GOALS.

OUR COMPUTER SCIENCE PROGRAM IS WELL KNOWN FOR ENGAGING STUDENTS IN PROGRAMMING SKILLS, WINNING THE HAWAII SITE IN 2011 FOR THE ACM (ASSOCIATION FOR COMPUTING MACHINERY) INTERNATIONAL COLLEGIATE PROGRAMMING CONTEST.

A HALLMARK OF OUR UNDERGRADUATE PROGRAMS IS THE OPPORTUNITY FOR UNDERGRADUATE STUDENTS TO GAIN HANDS ON EXPERIENCE IN STATE-OF-THE-ART SCIENTIFIC INSTRUMENTATION AND RESEARCH OPPORTUNITIES. APPROXIMATELY 70 UNDERGRADUATE STUDENTS A YEAR TRAIN WITH HIGH TECH RESEARCH GRADE INSTRUMENTS WHICH ARE INTEGRATED INTO THEIR COURSE WORK. ANOTHER 60 STUDENTS PER YEAR DIRECTLY PARTICIPATE IN BIOMEDICAL, CHEMICAL, AND MARINE SCIENCE RESEARCH PROGRAMS. ANOTHER 7 ADVANCED UNDERGRADUATE STUDENTS SERVE AS MENTORS THAT GUIDE OTHER STUDENTS IN THE USE OF HIGH TECH RESEARCH INSTRUMENTS.

IN ADDITION TO EXCELLENT UNDERGRADUATE PROGRAMS, THE COLLEGE OFFERS AN OUTSTANDING GRADUATE PROGRAM, OUR MASTER OF SCIENCE IN MARINE SCIENCE (MSMS), WHICH IS DESIGNED TO PREPARE STUDENTS FOR AN ARRAY OF CAREERS, ARMED WITH A SOLID UNDERSTANDING OF MARINE SCIENCE AND RELATED DISCIPLINES, AS WELL AS THE SKILLS TO CONDUCT RESEARCH AND COMMUNICATE SCIENTIFIC RESULTS. THE MSMS PROGRAM IS RESEARCH INTENSIVE, PAIRING GRADUATE STUDENTS WITH PROFESSORS TO WORK SIDE BY SIDE TO SOLVE PERTINENT SCIENTIFIC PROBLEMS OF SIGNIFICANCE TO SOCIETY. THE MSMS PROGRAM WAS

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BUILT ON THE FOUNDATION OF OUR RIGOROUS UNDERGRADUATE MARINE SCIENCE PROGRAM, OUR STRONG EXTRAMURALLY FUNDED RESEARCH, AND OUR AFFILIATION WITH THE OCEANIC INSTITUTE. IT IS MODELED AFTER THE TRADITIONAL SCIENCE GRADUATE PROGRAM, WHICH MEANS STUDENTS ENGAGE IN CORE AND ELECTIVE COURSE WORK, WHILE WORKING ON AN INTENSIVE INDEPENDENT RESEARCH PROJECT LEADING TO A THESIS AND, OFTEN, SCIENTIFIC PUBLICATIONS THAT CONTRIBUTES TO THEIR FIELD OF STUDY.

TOGETHER, OUR PROGRAMS COMBINE CLASSROOM TEACHING, FIELDWORK, AND OPPORTUNITIES FOR RESEARCH FOR BOTH UNDERGRADUATE AND GRADUATE STUDENTS. RESEARCH FACILITIES INCLUDE STATE-OF-THE-ART LABORATORIES AT THE WINDWARD OAHU HAWAI'I LOA CAMPUS, THE OCEANIC INSTITUTE, AND RESEARCH/INSTRUCTIONAL VESSEL, THE KAHOLO.

OUR 48 FULL-TIME FACULTY -- AND STRONG ROSTER OF ADJUNCT FACULTY -- TAKE GREAT PRIDE IN THE EDUCATIONAL EXPERIENCE OFFERED IN THE COLLEGE OF NATURAL AND COMPUTATIONAL SCIENCES. WE RECOGNIZE THAT THE MORE PREPARED, TRAINED AND DEVELOPED OUR STUDENTS ARE, THE MORE THEY WILL STANDOUT AND EXCEL WHEREVER THEIR NEXT DESTINATION MAY BE, WHETHER JOINING THE WORKFORCE OR MATRICULATING INTO GRADUATE / PROFESSIONAL SCHOOL. QUITE SIMPLY, WE ARE GUIDED BY THE IDEA THAT OUR SUCCESS IS MEASURED BY THE SUCCESS OF OUR GRADUATES.

(EXPENSES \$8,280,801 INCLUDING GRANTS OF \$1,539,698) (REVENUE \$10,767,820)

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STUDENT ACTIVITIES AND ATHLETICS

HAWAI'I PACIFIC UNIVERSITY OFFERS INTERMURAL AND COMPETITIVE ATHLETICS, AND MUSIC PERFORMANCE, DANCE AND THEATER PROGRAMS AMONG OTHER NON-CREDIT ACTIVITIES. HAWAII PACIFIC UNIVERSITY HOUSES 13 NCAA (6 MEN AND 7 WOMEN) SPORTS AND TWO SPIRIT SQUADS (CHEER AND DANCE) THAT SHOW OUTSTANDING ATHLETIC ABILITIES.

IN THE PAST YEAR OUR MEN'S TENNIS ROSE FROM BEING RANKED 16TH TO 5TH AND OUR WOMEN'S TENNIS WAS RANKED 6TH IN THE NATION. IN ADDITION, WE HAVE NATIONALLY RANKED CHEER AND DANCE TEAMS. WITH A TRADITION OF WINNING, THE HPU LARGE CO-ED CHEER TEAM HAS WON NINE STRAIGHT NATIONAL CHEERLEADING ASSOCIATION (NCA) DIVISION II TITLES (2003-2011) AND THE HPU SMALL CO-ED CHEER TEAM HAS WON FIVE NATIONAL NCA DIVISION II TITLES (2005-2008, 2011). THE HPU DANCE TEAM HAS WON FIVE CONSECUTIVE NATIONAL DANCE ALLIANCE DIVISION II CHAMPIONSHIPS, EARNING TWO TITLES IN 2010, TOTALING SIX TITLES OVERALL (2004, 2006-2010). THE HAWAI'I PACIFIC ATHLETICS DEPARTMENT AS A WHOLE RANKED THIRD IN THE CONFERENCE IN THE LEARFIELD SPORTS DIRECTOR'S CUP.

ATHLETICS ALSO HAVE HAD THE PLEASURE OF ANNOUNCING THAT SEVERAL OF OUR HPU ATHLETES HAVE BECOME THE PACWEST PLAYER OF THE WEEK OR MADE THE ALL-PACWEST TEAM IN THEIR RESPECTIVE SPORT.

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NOT ONLY ARE OUR ATHLETES OUTSTANDING ON THEIR RESPECTIVE FIELD OF PLAY,
BUT THEY ARE ALSO OUTSTANDING IN THE COMMUNITY. KAM'S HELMET WENT STRONG
FOR ANOTHER YEAR PROVIDING THE COMMUNITY WITH FREE BIKE AND SKATEBOARDING
HELMETS TO FURTHER PREVENT HEAD RELATED INJURIES. SAAC (STUDENT-ATHLETE
ADVISORY COMMITTEE) AND THE FEMALE ATHLETES PUT ON A GIRLS DAY WHERE
GIRLS AND WOMEN IN THE COMMUNITY WERE ENCOURAGED TO COME DOWN AND GET
ACTIVE.

(EXPENSE \$7,820,201 INCLUDING GRANTS OF \$8,092,384) (REVENUE \$10,178,025)

DELEGATED AUTHORITY TO EXECUTIVE COMMITTEE

FORM 990, PART VI, SECTION A, LINE 4A

DURING INTERVALS BETWEEN MEETINGS OF THE BOARD, AND SUBJECT TO SUCH
LIMITATIONS AS MAY BE REQUIRED BY LAW OR SPECIFICALLY IMPOSED BY ACTIONS
OF THE BOARD, THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL OF
THE POWERS OF THE CORPORATION AND DELEGATE TO OTHER COMMITTEES SUCH OF
ITS POWERS AND DUTIES AS IT DEEMS APPROPRIATE.

THE OFFICERS OF THE BOARD, WHO ARE ALSO TRUSTEES, AND THE CHAIRS OF THE
STANDING COMMITTEES, CONSTITUTE THE EXECUTIVE COMMITTEE. THE CHAIR OF THE
BOARD SERVES AS THE CHAIR OF THE EXECUTIVE COMMITTEE. THE SECRETARY OF
THE BOARD SERVES AS THE SECRETARY OF THE EXECUTIVE COMMITTEE.

DURING THE TAX YEAR, THE EXECUTIVE COMMITTEE DID NOT EXERCISE ITS
AUTHORITY TO ACT ON BEHALF OF THE BOARD.

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RELATIONSHIPS BETWEEN OFFICERS, DIRECTORS, TRUSTEES OR KEY EMPLOYEES

FORM 990, PART VI, QUESTION 2

TRUSTEES JAMES AJELLO AND JAMES POLK HAVE A BUSINESS RELATIONSHIP.

SIGNIFICANT CHANGES TO GOVERNING DOCUMENTS

FORM 990, PART VI, QUESTION 4A

CHANGES TO BYLAWS:

BOARD OF TRUSTEES:

QUALIFICATIONS - ADDITIONAL QUALIFICATIONS INCLUDE MEMBERS SHOULD BE

DIVERSE IN TERMS OF GENDER AND RACIAL-ETHNIC BACKGROUND, SHOULD BE

INDEPENDENT OF AND CONTRIBUTE TO THE WELL-BEING OF THE UNIVERSITY.

MEMBERSHIP - IN ADDITION TO A MINIMUM NUMBER OF MEMBERS, THE BOARD WILL

HAVE APPROXIMATELY TWENTY SEVEN (27) MEMBERS SO AS TO PERMIT THE

COMMITTEES OF THE BOARD TO BE COMPRISED OF A SUFFICIENT NUMBER OF

QUALIFIED INDIVIDUALS.

REMOVAL - THE REQUIRED TWO-THIRDS VOTE BY ALL BOARD MEMBERS WAS CHANGED

TO A MAJORITY OF MEMBERS PRESENT.

TERM LIMITATIONS - TO ENCOURAGE TERMS OF SERVICE THAT PROMOTE CONTINUITY

AND INDEPENDENCE, THE NUMBER OF YEARS LIMITING TERMS OF SERVICE WAS

AMENDED TO REFLECT THAT ANY MEMBER WILLING TO CONTINUE MAY BE RE-ELECTED

FOR AN IMMEDIATE SUCCEEDING TERM.

AUTHORITY AND RESPONSIBILITY - THE BOARD HAS THE AUTHORITY TO HIRE,

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EVALUATE AND TERMINATE THE SERVICES OF THE PRESIDENT.

OFFICERS OF THE BOARD:

OFFICERS - THE SECRETARY AND TREASURER ARE NO LONGER REQUIRED TO BE MEMBERS OF THE BOARD, AS WELL AS, THE ADDITION OF THE ASSISTANT SECRETARY. THE CHAIR AND VICE CHAIR SHALL BE LIMITED TO FOUR (4) CONSECUTIVE TERMS OF OFFICE. THE CHAIR AND SECRETARY MAY NOT BE HELD BY THE SAME PERSON.

PROCESS USED BY MANAGEMENT &/OR GOVERNING BODY TO REVIEW 990 FORM 990, PART VI, QUESTION 11B FORM 990 AND SUPPORTING WORK-PAPERS ARE PREPARED AND REVIEWED INTERNALLY THEN SENT TO AN EXTERNAL TAX ACCOUNTING FIRM FOR REVIEW. AFTER ANY PROPOSED ADJUSTMENTS, THE FORMS ARE REVIEWED BY STAFF AND MANAGEMENT, INCLUDING AN OFFICER OF THE ORGANIZATION. THE FINAL FORM 990 IS THEN REVIEWED BY THE AUDIT COMMITTEE OF THE BOARD. THE AUDIT COMMITTEE APPROVES THE FORM 990 PRIOR TO FILING, WHICH APPROVAL WILL BE DOCUMENTED IN THE COMMITTEE MINUTES. THE FORM 990 WILL BE MADE AVAILABLE TO ALL TRUSTEES PRIOR TO FILING.

DESCRIPTION OF PROCESS TO MONITOR TRANSACTIONS FOR CONFLICT OF INTEREST FORM 990, PART VI, QUESTION 12C CONFLICT OF INTEREST POLICY IS SET FORTH IN THE BYLAWS AS FOLLOWS: EACH TRUSTEE IS REQUIRED TO COMPLETE A CONFLICT OF INTEREST QUESTIONNAIRE ANNUALLY DISCLOSING ACTUAL OR POTENTIAL CONFLICTS OF INTEREST FOR REVIEW BY THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES. TRUSTEES WITH ANY ACTUAL

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OR POTENTIAL CONFLICTS MAY NOT VOTE ON MATTERS WITH WHICH THEY MAY HAVE A
CONFLICT.

OFFICERS AND EMPLOYEES ARE REQUIRED TO DISCLOSE ANNUALLY AND WHENEVER
APPROPRIATE, ACTUAL AND POTENTIAL CONFLICTS OF INTEREST.

ALL CONFLICTS ARE RESOLVED IN ACCORDANCE WITH HAWAII PACIFIC UNIVERSITY'S
WRITTEN CONFLICT OF INTEREST POLICIES.

OFFICES & POSITIONS FOR WHICH PROCESS WAS USED, & YEAR PROCESS WAS BEGUN
FORM 990, PART VI, QUESTIONS 15A & 15B
QUESTION 15A

THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES EVALUATED THE
PRESIDENT'S COMPENSATION BASED ON A SURVEY OF COMPARABLE INSTITUTIONS
OBTAINED FROM AN INDEPENDENT EXECUTIVE COMPENSATION CONSULTING FIRM
SPECIALIZING IN HIGHER EDUCATION. THE COMPENSATION COMMITTEE REVIEWED THE
ANALYSIS IN RELATION TO ITS COMPENSATION PHILOSOPHY, BOARD EXPECTATIONS
AND ANY ADJUSTMENTS RECOMMENDED. APPROVAL WAS DOCUMENTED IN THE MINUTES
OF THE COMPENSATION COMMITTEE.

QUESTION 15B

THE COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES EVALUATED AND
APPROVED THE EXECUTIVE COMPENSATION OF THE PRESIDENT AND OTHER OFFICERS,
INCLUDING VICE PRESIDENTS AND ASSOCIATE VICE PRESIDENTS, BASED ON
COMPARABILITY DATA OBTAINED FROM AN INDEPENDENT EXECUTIVE COMPENSATION
CONSULTING FIRM SPECIALIZING IN HIGHER EDUCATION.

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THE PRESIDENT REVIEWED THE COMPENSATION OF OTHER OFFICERS BASED ON THE
COMPENSATION SURVEY DATA AND MADE RECOMMENDATIONS TO THE COMPENSATION
COMMITTEE FOR APPROVAL.

DECISIONS WERE DOCUMENTED IN THE MINUTES OF THE COMPENSATION COMMITTEE.

PARTICIPATION IN A JOINT VENTURE OR SIMILAR ARRANGEMENT
FORM 990, PART VI, QUESTION 16A
DURING THE TAX YEAR, HAWAI'I PACIFIC UNIVERSITY FORMED HAWAII DOWNTOWN
HOLDING, LLC (HDH), A WHOLLY-OWNED, FOR-PROFIT HOLDING COMPANY, WHOSE
SOLE PURPOSE WAS TO PURCHASE AN 80% INTEREST IN HAWAII LIFESTYLE RETAIL
PROPERTIES, LLC (HLRP).

HLRP IS A FOR-PROFIT ENTITY ESTABLISHED IN APRIL 2011 BY AN UNRELATED
THIRD PARTY TO ACQUIRE THE LEASEHOLD INTEREST IN ALOHA TOWER MARKETPLACE
(ATM). HLRP CURRENTLY ENGAGES SOLELY IN THE BUSINESS OF LEASING CERTAIN
COMMERCIAL SPACE IN ATM. ATM IS A COMMERCIAL REAL PROPERTY BUILT IN 1994,
WITH APPROXIMATELY 169,000 SQ FT OF GROSS LEASABLE AREA. HAWAI'I PACIFIC
UNIVERSITY PLANS TO DEVELOP THE PROPERTY INTO A MIXED USE
RESIDENTIAL/COMMERCIAL PROPERTY TO ACCOMMODATE STUDENT HOUSING,
INSTRUCTIONAL, ACADEMIC SUPPORT, AND ATHLETIC PROGRAM NEEDS.

AVAIL OF GOV DOCS, CONFLICT OF INTEREST POLICY, & FIN STMTS TO GEN PUBLIC
FORM 990, PART VI, QUESTION 19
HAWAI'I PACIFIC UNIVERSITY MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF

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INTEREST POLICY AVAILABLE UPON REQUEST. THE UNIVERSITY'S FINANCIAL
STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC.

NON-VOTING MEMBERS OF THE BOARD OF TRUSTEES

FORM 990, PART VII, SECTION A

THE FOLLOWING INDIVIDUALS SERVED AS NON-VOTING MEMBERS OF THE BOARD OF
TRUSTEES AND WERE NOT COMPENSATED FOR THEIR SERVICES:

NAME	TITLE	AVG HRS/WEEK
SAMUEL A. COOKE	TRUSTEE EMERITUS	5.0
JEAN F. CORNUELLE	TRUSTEE EMERITUS	5.0
WILMER C. MORRIS	TRUSTEE EMERITUS	5.0
HENRY F. RICE	TRUSTEE EMERITUS	5.0

RECONCILIATION OF NET ASSETS

FORM 990, PART XI, QUESTION 5

NET UNREALIZED LOSS	(4,329,019)
GAIN ON BARGAIN PURCHASE	4,908,235

TEMPORARY BOOK/TAX DIFFERENCES:

AMORTIZATION	(715,778)
DEPRECIATION	115,395
BAD DEBT EXPENSE	(56,688)

NET	(657,071)
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ROUNDING ADJUSTMENT

3

OTHER CHANGES IN NET ASSETS

(77,852)

=====

CONSOLIDATED AUDITED FINANCIAL STATEMENTS

FORM 990, PART XII, QUESTION 2

HAWAI`I PACIFIC UNIVERSITY HAS CONSOLIDATED AUDITED FINANCIAL STATEMENTS WITH OCEANIC INSTITUTE, HAWAII DOWNTOWN HOLDINGS, LLC AND THE CONTROLLING INTEREST OF HAWAII LIFESTYLE RETAIL PROPERTIES, LLC. THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES IS RESPONSIBLE FOR THE AUDIT AND THE REVIEW AND SELECTION OF THE INDEPENDENT AUDITOR.

FORM 990, BOX B

AMENDED RETURN

THIS RETURN IS AMENDED FOR FORM 990, PART VII, LINE 43 AND SCHEDULE J, PART II TO INCLUDE FORMER PRESIDENT CHATT WRIGHT. MR. WRIGHT RETIRED 6/30/11 AND RECEIVED COMPENSATION DURING CALENDAR YEAR 2011 AND THEREFORE HAS BEEN INCLUDED ON PART VII AND SCHEDULE J.

ATTACHMENT 1

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
NORDIC PCL CONSTRUCTION INC 1099 ALAKEA STREET, STE 1560 HONOLULU, HI 96813	CONSTRUCTION	1,999,225.
WKF, INC. P.O. BOX 31000 HONOLULU, HI 96849-5484	RENT & MGMT SVCS	1,486,116.

AMENDED RETURN

Schedule O (Form 990 or 990-EZ) 2011

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Name of the organization

HAWAII PACIFIC UNIVERSITY

Employer identification number

99-0113930

ATTACHMENT 1 (CONT'D)

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
FINANCE FACTORS CENTER P.O. BOX 1300 HONOLULU, HI 96807-1300	RENT & MGMT SVCS	1,171,480.
DEG, LLC 1132 BISHOP STREET, STE 2305 HONOLULU, HI 96813	RENT & MGMT SVCS	1,046,789.
NIU PIA LAND COMPANY, LTD. P.O. BOX 1300 HONOLULU, HI 96807-1300	RENT & MGMT SVCS	1,120,128.
TOTAL COMPENSATION		6,823,738.

ATTACHMENT 2

FORM 990, PART VIII - INVESTMENT INCOME

<u>DESCRIPTION</u>	(A) <u>TOTAL REVENUE</u>	(B) <u>RELATED OR EXEMPT REVENUE</u>	(C) <u>UNRELATED BUSINESS REV.</u>	(D) <u>EXCLUDED REVENUE</u>
INTEREST	110,817.			110,817.
DIVIDENDS	1,059,836.			1,059,836.
TOTALS	1,170,653.			1,170,653.

ATTACHMENT 3

FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

<u>DESCRIPTION</u>	<u>AMOUNT</u>
CHEER T-SHIRT SALES	735.
TOTAL	735.

AMENDED RETURN

Schedule O (Form 990 or 990-EZ) 2011

Page **2**

Name of the organization HAWAII PACIFIC UNIVERSITY	Employer identification number 99-0113930
<u>ATTACHMENT 4</u>	

FORM 990, PART VIII - FUNDRAISING EVENTS

<u>DESCRIPTION</u>	<u>GROSS INCOME</u>	<u>DIRECT EXPENSES</u>	<u>NET INCOME</u>
CHEER T-SHIRT SALES	27,457.	11,566.	15,891.
BAND CONCESSION SALES	20,585.	5,000.	15,585.
OTHER EVENTS	96,480.	24,121.	72,359.
TOTALS	<u><u>144,522.</u></u>	<u><u>40,687.</u></u>	<u><u>103,835.</u></u>

ATTACHMENT 5

FORM 990, PART VIII - GROSS SALES AND COST OF GOODS SOLD

GROSS SALES LESS RETURNS AND ALLOWANCES	3,926,907.
INVENTORY AT BEGINNING OF YEAR	
PURCHASES	3,186,511.
SALARIES AND WAGES	
OTHER COSTS	
SUBTOTAL	<u>3,186,511.</u>
MINUS ENDING INVENTORY	
COST OF GOODS SOLD	<u><u>3,186,511.</u></u>

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► 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.

OMB No. 1545-0047

2011

Open to Public
Inspection

Name of the organization

HAWAII PACIFIC UNIVERSITY

Employer identification number

99-0113930

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) HAWAII DOWNTOWN HOLDINGS, LLC 1164 BISHOP STREET, SUITE 1200 HONOLULU, HI 96813 99-0113930	HOLDING CO	HI	-533,495.	16,947,218.	HPU
(2) _____	_____	_____	_____	_____	_____
(3) _____	_____	_____	_____	_____	_____
(4) _____	_____	_____	_____	_____	_____
(5) _____	_____	_____	_____	_____	_____
(6) _____	_____	_____	_____	_____	_____

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

(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 section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?
						Yes No
(1) _____	_____	_____	_____	_____	_____	_____
(2) _____	_____	_____	_____	_____	_____	_____
(3) _____	_____	_____	_____	_____	_____	_____
(4) _____	_____	_____	_____	_____	_____	_____
(5) _____	_____	_____	_____	_____	_____	_____
(6) _____	_____	_____	_____	_____	_____	_____
(7) _____	_____	_____	_____	_____	_____	_____

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

Schedule R (Form 990) 2011

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AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule R (Form 990) 2011

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Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) HURP 32-0361534 1 ALOHA TOWER DRIVE, SUITE 300	REAL ESTATE LEASE	HI	HDH	EXCLUDED FROM TAX	-954,642.	17,181,533.		X	223,042.		X	80.0000
(2) _____												
(3) _____												
(4) _____												
(5) _____												
(6) _____												
(7) _____												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to 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
(1) _____							
(2) _____							
(3) _____							
(4) _____							
(5) _____							
(6) _____							
(7) _____							

Schedule R (Form 990) 2011

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HAWAII PACIFIC UNIVERSITY

99-0113930

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

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

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 or (iv) rent from a controlled entity
- b Gift, grant, or capital contribution to related organization(s)
- c Gift, grant, or capital contribution from related organization(s)
- d Loans or loan guarantees to or for related organization(s)
- e Loans or loan guarantees by related organization(s)
- f Sale of assets to related organization(s)
- g Purchase of assets from related organization(s)
- h Exchange of assets with related organization(s)
- i Lease of facilities, equipment, or other assets to related organization(s)
- j Lease of facilities, equipment, or other assets from related organization(s)
- k Performance of services or membership or fundraising solicitations for related organization(s)
- l Performance of services or membership or fundraising solicitations by related organization(s)
- m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- n Sharing of paid employees with related organization(s)
- o Reimbursement paid to related organization(s) for expenses
- p Reimbursement paid by related organization(s) for expenses
- q Other transfer of cash or property to related organization(s)
- r Other transfer of cash or property from related organization(s)

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	(d) Method of determining amount involved
(1) HAWAII LIFESTYLE RETAIL PROPERTIES LLC	B	14,310,000.	FMV
(2)			
(3)			
(4)			
(5)			
(6)			

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule R (Form 990) 2011

Page 4

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(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?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) _____													
(2) _____													
(3) _____													
(4) _____													
(5) _____													
(6) _____													
(7) _____													
(8) _____													
(9) _____													
(10) _____													
(11) _____													
(12) _____													
(13) _____													
(14) _____													
(15) _____													
(16) _____													

Schedule R (Form 990) 2011

AMENDED RETURN

HAWAII PACIFIC UNIVERSITY

99-0113930

Schedule R (Form 990) 2011

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Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

RELATED ORGANIZATIONS

PART I & PART III

"HPU" = HAWAII PACIFIC UNIVERSITY

"HDH" = HAWAII DOWNTOWN HOLDINGS, LLC

"HLRP" = HAWAII LIFESTYLE RETAIL PROPERTIES

"LRP" = LIFESTYLE RETAIL PROPERTIES