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Form **990-PF**

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

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

OMB No 1545-0052 Open to public Inspection

Depa	artmen	t of the Treasury		Treated as a Privat			
			·· · · · · · · · · · · · · · · · · · ·	ay be able to use a copy of this		orting requirements.	Open to public Inspection
_	 -	idar year 2012 or tax yea	<u>ir deginning</u>		, and ending	TA F1	
Na	me oi	foundation				A Employer identification	number
1.	ľλM	ONI C NIKO (መአዊተመአእተ ውረ	אנדאור א ייד אור או דאורי		51-0212114	
		ORU & AIKO On street (or P O box number			Room/suite	B Telephone number	
_		SOUTH HOTEL		eer addressy	308	808-522-88	2.2
		own, state, and ZIP code	PIKEEI		300		
			96813			C If exemption application is pe	ending, check here
		all that apply:	Initial return	Initial return of a fe	ormer public charity	D 1. Foreign organizations	chack hare
u	JIIÇUN	an that apply.	Final return	Amended return	Times public charty	1. Toreign organizations	, CHECK HEIG
			Address change	Name change		Foreign organizations mea check here and attach cor	eting the 85% test,
H (heck	type of organization:		exempt private foundation			
$\ddot{\Box}$	_	ction 4947(a)(1) nonexen	· '	Other taxable private foundation	ation	E If private foundation stat under section 507(b)(1)(
L F		rket value of all assets at	1	nting method: X Cash	Accrual	1	
		Part II, col (c), line 16)	1 7.000	Other (specify)	(F If the foundation is in a 6 under section 507(b)(1)(
	\$		7 . 809 . (Part I, co	olumn (d) must be on cash i	basis.)		D), official field
		Analysis of Revenue a	nd Expenses	(a) Davanus and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in coli necessarily equal the amounts	umns (b) (c) and (d) may not	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, gran		300,000.	· · · · · · · · · · · · · · · · · · ·		,,
Q	2		on is not required to attach Sch. B				
	3	Interest on savings and temp	oorary	·			
2	4	Dividends and interest fr	om securities	153,029.	153,029.		Statement 1
%	5a	Gross rents					
J	Ь	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of	assets not on line 10	274,254.			·
	b	Gross sales price for all assets on line 6a	3,065,180.				
≥	7	Capital gain net income (from	Part IV, line 2)		274,254.		
Revenue	8	Net short-term capital ga	un				
	9	Income modifications					
2013	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	C	Gross profit or (loss)					
	11	Other income					
	12	Total. Add lines 1 through	gh 11	727,283.	427,283.	0.	· · · · · · · · · · · · · · · · · · ·
	13	Compensation of officers, dir	rectors, trustees, etc	0.	0.	0.	0.
	14	Other employee salaries	and wages				
v	15	Pension plans, employee					
Expenses	16a	Legal fees	Stmt 2	33,466.	0.		33,466.
ē	b	Accounting fees	Stmt 3	5,221.	0.	0.	5,221.
ŭ	C	Other professional fees					
ţ	17	Interest	OF DECEMBER 1	5 000			
štra	18	Taxes RE	CEIAEIP 4	6,000.	0.	0.	0.
Ë	19	Depreciation and depletic			 -		
Ę	20	Occupancy NO to	2.0 2012 18	[72			
Ą	21			572.	0.	0.	572.
a	22	Printing and publications) ENISTING 5				0.046
ting	23	Other expenses OG	# E 1 13 T F F F F	9,946.	0.	0.	9,946.
erat	24	Total operating and adm		EE 20E	0		40 205
Operating and Administrative	25	expenses. Add lines 13		55,205. 142,098.	0.	0.	49,205. 142,098.
	25	Contributions, gifts, gran		144,030.	· · · · · · · · · · · · · · · · · · ·		144,098.
	26	Total expenses and dist	Duisements	197,303.	0.	0.	191,303.
	27	Add lines 24 and 25 Subtract line 26 from line	o 12·	131,303.	<u> </u>	U	131,303.
	i			529,980.			
		Net investment income		529,300.	427,283.		
		Adjusted net income @r			<u> </u>	0.	
						<u> </u>	

223501 12-05-12 LHA For Paperwork Reduction Act Notice, see instructions

Fo	rm 99	00-PF (2012) MAMORU & AIKO TAKITANI		INC.		0212114	Page 2
	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		End of	-	
<u>_</u>	<u> </u>	column should be for end-of-year amounts only	(a) Book Value		778,643. 2,224,650.	(c) Fair Market	Value
		Cash - non-interest-bearing	1,175,946		778,643.	778	<u>,643.</u>
	2	Savings and temporary cash investments	501,196	•	2,224,650.	2,224	<u>,650.</u>
	3	Accounts receivable >]	-			
		Less: allowance for doubtful accounts					
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts		ı			
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable				-	
		Less: allowance for doubtful accounts	1				
s	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	102	Investments - U.S. and state government obligations					····
	1	Investments - corporate stock Stmt 6	3,998,718	<u> </u>	3,134,516.	3,134	516
	1	·	3,330,110	+	3,134,310.	3,134	, 510.
	l .	Investments - corporate bonds Investments - land, buildings, and equipment basis		+			
	' '		1				
	40	Less accumulated depreciation		_			
		Investments - mortgage loans		-			
		Investments - other	_ ···- · · · · ·	+			
	14	Land, buildings, and equipment: basis	-				
		Less accumulated depreciation	 	_		<u> </u>	
	15	Other assets (describe)		+			
	١.,		F 675 060		6 137 000	C 127	000
_		Total assets (to be completed by all filers)	5,675,860	•	6,137,809.	6,137	<u>, 809.</u>
	ı	Accounts payable and accrued expenses					
	I	Grants payable		-			
Liabilities	۱	Deferred revenue					
E	I	Loans from officers, directors, trustees, and other disqualified persons		-			
<u>Lia</u>		Mortgages and other notes payable		+			
_	22	Other liabilities (describe)					
		Tabel Nahilikian (add lines 47 through 20)	0				
_	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	0	•	0.		
		and complete lines 24 through 26 and lines 30 and 31.					
es	24	Unrestricted					
Š	24	Temporarily restricted					
Safa	25			+			
<u> </u>	26	Permanently restricted Foundations that do not follow SFAS 117, check here		+			
Ē							
<u>P</u>		and complete lines 27 through 31.	_				
ets	27	Capital stock, trust principal, or current funds	0		0.		
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
at A	29	Retained earnings, accumulated income, endowment, or other funds	5,675,860		6,137,809.		
ž	30	Total net assets or fund balances	5,675,860	•	6,137,809.		
		Tatal link illains and not assets/found belower	5,675,860		6 127 000		
_		Total liabilities and net assets/fund balances		•1	6,137,809.		
P	<u>art</u>	Analysis of Changes in Net Assets or Fund E	Balances				
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		-		
		t agree with end-of-year figure reported on prior year's return)			1	5,675	860.
		amount from Part I, line 27a	•		2		980.
		r increases not included in line 2 (itemize)	• •		3	323	0.
		ines 1, 2, and 3			4	6,205	
		eases not included in line 2 (itemize) UNREALIZED LOS	S ON SECURIT	IES	5		031.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, c			6	6,137	
						Form 990-P	

_			AIKO TAKITA			Ϊ,	INC.	•	5	1-021	2114	. Page 3
_	` (a) List and descr 2-story brick wa	ribe the ki irehouse;	nd(s) of property sold (e.g. or common stock, 200 shs	, real estate, . MLC Co.)		, b	How acc - Purch - Donat	ase	(c) Date (mo., d	acquired ay, yr.)	(d) Dat (mo., da	e sold ay, yr.)
1	a					L.						
	See Attached	Stat	ement							-		
	<u>c</u>					-			·			
	d <u> </u>		 									
	(e) Gross sales price	(f) [Depreciation allowed (or allowable)		st or other basis expense of sale	1				aın or (loss s (f) mınus (
	a				-						-	
	b											
_	C .	<u>-</u>									-	
_	d 3,065,180.				2,790,92	_					271	,254.
	Complete only for assets showin	o gain in (column (h) and owned by t			0.		- /1) Gains (C	ol. (h) gaın		, 454.
_	(i) F.M.V. as of 12/31/69		j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (j), if any				. (k), but r	not less that (from col. (n -0-) or	
_	a											
_	<u> </u>											
	C .											
_	d										274	,254.
	Capital gain net income or (net ca	pıtal loss)	If gain, also enter	ın Part I, line ın Part I. line	7 7	}	2					,254.
3	Net short-term capital gain or (los	s) as defi										
•	If gain, also enter in Part I, line 8,	•	• •	- (-)-)	ŀ					
П	If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder S	ection 4940(e) for	Peduced	Tay on Net	lov	3 cstm	ent Inc	ome	N/A		
_	or optional use by domestic private							ent me	,ome			
				340(a) tax on	net investment in	COIII	J.)					
lf	section 4940(d)(2) applies, leave th	ns part bla	ınk.									
W	as the foundation liable for the sect	tion 4942	tax on the distributable am	ount of any ye	ear in the base per	od?					Yes	X No
<u>If</u>	"Yes," the foundation does not qual											
1	Enter the appropriate amount in e	each colur		structions bel	fore making any ei						(d)	
	(a) Base period years Calendar year (or tax year beginnir	na in)	(b) Adjusted qualifying dist	ributions	Net value of no	(c) ncha	rıtable-u	ise assets		Distrib	ution ratio ided by col.	(c))
_	2011	<u>''9 '''/</u>		9,965.				2,152		(001: (0) 011		45103
_	2010			9,649.				2,740				35345
	2009			0,793.				L <u>,362</u>				37970
_	2008			2,470.	 	2	<u>, 482</u>	2,097	<u>' • </u>			<u> 55457</u>
_	2007		12.	3,700.		_ 2	,010	,663	 • 		.06	<u> 51522</u>
	Total of line 1, column (d) Average distribution ratio for the 5	E waar baa	o period - divide the total o	n line O hy E	or hu the number	of un			2		.24	<u> 45397</u>
J	the foundation has been in exister			11 IIII 6 2 DY 3,		UI ye			3	·	.04	<u> 49079</u>
4	Enter the net value of noncharitab	le-use ass	ets for 2012 from Part X, I	ne 5					4		5,754	,757.
5	Multiply line 4 by line 3								5		282	<u>,438.</u>
6	Enter 1% of net investment incom	ne (1% of	Part I, line 27b)						6		4	<u>, 273 .</u>
7	Add lines 5 and 6			•					7		286	,711.
8	Enter qualifying distributions from			1h and	Note that no-t	a a 4	0/ * *		8		191	,303.
_	If line 8 is equal to or greater than See the Part VI instructions.	inie /, CR	EUR THE DOX III PART VI, IINE	ro, and comp	nete that part usin	y a 1	70 LdX f2					

Form 990-PF (2012) MAMORU & AIKO TAKITANI FOUNDATI Part VI Excise Tax Based on Investment Income (Section 4940)	ON, INC. a), 4940(b), 4	940(e), or 4		021211 see inst		Page 4 ons)
1a Exempt operating foundations described in section 4940(d)(2), check here Date of ruling or determination letter: (attach copy of letter if neces) Domestic foundations that meet the section 4940(e) requirements in Part V, check here ■	sary-see instructi		1		8,	546.
of Part I, line 27b						
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of	f Part I, line 12, co	l. (b). 丿				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Othe	rs enter -0-)		2			<u> </u>
3 Add lines 1 and 2			3		8,	<u>546.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other	ers enter -0-)		4		_	<u>0.</u>
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	•		5		8,	546.
6 Credits/Payments:	. 1	12 005				
a 2012 estimated tax payments and 2011 overpayment credited to 2012	6a	<u>13,827.</u>				
b Exempt foreign organizations - tax withheld at source	6b					
	6c					
d Backup withholding erroneously withheld	6d		7		12	827.
 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. 	ad		8		<u> </u>	021.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	eu		9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10		5	281.
11 Enter the amount of line 10 to be: Credited to 2013 estimated tax	5 281.	Refunded	11		<i>J</i> , .	0.
Part VII-A Statements Regarding Activities	3,201	Tronuncu P				
1a During the tax year, did the foundation attempt to influence any national, state, or local legislati	ion or did it partici	pate or intervene	ın		Ye	s No
any political campaign?	•			1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes	s (see instructions	for definition)?		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and of	copies of any ma	terials publishe	ed or			
distributed by the foundation in connection with the activities						
c Did the foundation file Form 1120-POL for this year?				_1c		<u> </u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						1
(1) On the foundation. ▶ \$ (2) On foundation managers. ▶		0.				İ
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditur	re tax imposed on	foundation				
managers. ► \$O.						
2 Has the foundation engaged in any activities that have not previously been reported to the IRS'	?			2		<u> </u>
If "Yes," attach a detailed description of the activities.						
3 Has the foundation made any changes, not previously reported to the IRS, in its governing inst	trument, articles of	incorporation, c	r			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3	+	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			NT.	/A 4b	+	+^
b If "Yes," has it filed a tax return on Form 990-T for this year?Was there a liquidation, termination, dissolution, or substantial contraction during the year?			14	/ A 40 5	+	X
If "Yes," attach the statement required by General Instruction T					 	+*
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	er.					i
By language in the governing instrument, or						
By state legislation that effectively amends the governing instrument so that no mandatory d	lirections that conf	lict with the state	law			
remain in the governing instrument?				6	x	
7 Did the foundation have at least \$5,000 in assets at any time during the year?				7	Х	
If "Yes," complete Part II, col. (c), and Part XV.						
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶					
HI						
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atto	rney General (or d	esignate)				
of each state as required by General Instruction G? If "No," attach explanation				8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section	on 4942(j)(3) or 4	942(j)(5) for cale	ndar			
year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," con				9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule I	listing their names and	addresses				<u> </u>

	1990-PF (2012) MAMORU & AIKO TAKITANI FOUNDATION, INC. 51-0212	114		<u> Page 5</u>
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.TAKITANI.ORG			
14	The books are in care of ▶ DARRELL LIM AND COMPANY, INC. Telephone no. ▶808-52	2-8	833	
	Located at ▶81 SOUTH HOTEL STREET, SUITE 308, HONOLULU, HI ZIP+4 ▶96			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign		·	
	country			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			i
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after	i		
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2012?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2012?			
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		<u> </u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	[
	Form 4720, to determine if the foundation had excess business holdings in 2012.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		X

orm 990-PF (2012) MAMORU & ALKO TAKITANI F		<u> </u>	51-02121	<u>.14</u>	Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be I	Required (contin	ued)		_
5a During the year did the foundation pay or incur any amount to:					
(1) Carryon propaganda, or otherwise attempt to influence legislation (section			es X No	ŀ	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir				
any voter registration drive?	_		es X No	İ	İ
(3) Provide a grant to an individual for travel, study, or other similar purposes		L Yo	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				
the prevention of cruelty to children or animals?			es 🗶 No		-
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for					
expenditure responsibility for the grant?		I/A L Y	es L No	İ	
If "Yes," attach the statement required by Regulations section 53 4945					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y€	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	<u> </u>
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	
Part VIII Information About Officers, Directors, Truston Paid Employees, and Contractors		inagers, Higniy	y 		
List all officers, directors, trustees, foundation managers and their		T 0	(4) 0		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Ex	xpense nt, other
(a) Name and address	to position	(If not paid, enter -0-)	compensation	allow	ances
			_		_
See Statement 7		0.	0.	ļ	0.
·					
· · · · · · · · · · · · · · · · · · ·					
				 	-
Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "			
Compensation of the highest-paid employees (outer than those me	(b) Title, and average	enter NONE.	(d) Contributions to employee benefit plans	(e) E)	cpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred	accour	nt, other vances
NONE	devoted to position		compensation	allow	ances
NOND					
		 		 	
				-	
		 	=	 	
	<u> </u>				
Cotal number of other employees paid over \$50,000	<u></u> .	L		L	0

Form 990-PF (2012) MAMORU & AIRO TAKITANI FOUNDATION, IN		U212114 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Ma Paid Employees, and Contractors (continued)	nagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ition such as the	Expenses
1 N/A		
I N/A		
· · · · · · · · · · · · · · · · · · ·		
2		
		•
3		
4		
	<u> </u>	
Don't IV Diagram and a second a		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and		Amount
	۷.	Allibuilt
1 N/A		
2		_ .
All other program-related investments. See instructions.	-	
3		
Total, Add lines 1 through 3	•	0.

P	art X Minimum Investment Return (All domestic foundations mu	st complete this part. For	eign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable,	etc., purposes:			
а	Average monthly fair market value of securities			1a	4,541,781
b	Average of monthly cash balances			1b	4,541,781, 1,300,612,
C	Fair market value of all other assets			1c	
d	Total (add lines 1a, b, and c)			1d	5,842,393
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	e	0.		
2	Acquisition indebtedness applicable to line 1 assets		,	2	0.
3	Subtract line 2 from line 1d			3	5,842,393.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, si	ee instructions)		4	87,636.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on P	art V, line 4		5	5,754,757.
6	Minimum investment return. Enter 5% of line 5			6	287,738.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here and do not complete this part.)	(j)(5) private operating foun	dations an	d certain	
1	Minimum investment return from Part X, line 6			1	287,738.
2a	Tax on investment income for 2012 from Part VI, line 5	a 8,	546.		
b	Income tax for 2012. (This does not include the tax from Part VI.)	b			
C	Add lines 2a and 2b			2c	8,546.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	279,192.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	279,192.
6	Deduction from distributable amount (see instructions)			6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XI	II, line 1		7	279,192.
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpos	ses:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			_1a	191,303.
b	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,	, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				
a	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4	$\textbf{Qualifying distributions}. \ \textbf{Add lines 1a through 3b. Enter here and on Part V, line 8, and}$			4	191,303.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investr	nent			
	income. Enter 1% of Part I, line 27b		ļ	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		l	6	191,303.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years whe	n calculation whether the fo	indation c	malifies for t	the section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				279,192.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2012:		0.		
a From 2007 20,141.				
b From 2008 40 , 042 .				
c From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e	60,183.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$ 191,303.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		.
c Treated as distributions out of corpus				
(Election required - see instructions)	0.		·	
d Applied to 2012 distributable amount				191,303.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	60,183.			60,183.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				27,706.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.	_			
Subtract lines 7 and 8 from line 6a	0.			
O Analysis of line 9:				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010	ļ			
d Excess from 2011	ł			
e Excess from 2012				5 000 DE (00.40)

	& AIKO TAKI				12114 Page 10
Part XIV Private Operating F	***		II-A, question 9)	<u>N/A</u>	-
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		=	. ▶ └	40.40(2)(0)	240(1)(5)
b Check box to indicate whether the found		ng toundation described T		4942(j)(3) or 4	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2012	(b) 2011	Prior 3 years (c) 2010	(d) 2009	(e) Total
income from Part I or the minimum	(a) 2012	(6) 2011	(6) 2010	(u) 2009	(e) iolai
investment return from Part X for					
each year listed			 		
b 85% of line 2a		<u>.</u>	 	<u>-</u>	- .
c Qualifying distributions from Part XII,					
line 4 for each year listed			 		
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities. 					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					-
alternative test relied upon:					
a "Assets" alternative test - enter:(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed			· ·		
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)			<u> </u>		
(3) Largest amount of support from					
an exempt organization					
Part XV Supplementary Info	rmation (Comple	l to this part only	if the foundation	had \$5,000 or me	ore in assets
at any time during t			ii die louildation	παα ψυ,σοφ στ τιν	Jie III assets
1 Information Regarding Foundation					
a List any managers of the foundation wh	•	than 2% of the total con	tributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed n			,		,
None					
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large portion	on of the ownership of a p	artnership or
None					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., P	rograms		
Check here 🕨 🔲 if the foundation o	nly makes contributions f	to preselected charitable	organizations and does n	ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	riduals or organizations	under other conditions, co	implete items 2a, b, c, and	1 d.
a The name, address, and telephone num MAMORU AND AIKO TAKI					
P.O. BOX 10687, HONO					· — — — — — — — — — — — — — — — — — — —
b The form in which applications should b	e submitted and informat	tion and materials they s	hould include:		
c Any submission deadlines: SEE STATEMENT 8					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields	, kınds of institutions, or c	other factors:	
SEE STATEMENT 8					

Form 990-PF (2012) Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to **Amount** any foundation manager status of Name and address (home or business) or substantial contributor recipient a Paid during the year NONE SCHOLARSHIP N/A RHENA SINGH 94-010 LEOLUA STREET #318 1,000. WAIPAHU, HI 96797 SCHOLARSHIP TRISHA ISHIKAWA NONE N/A 1617 YOUNG STREET #A104 HONOLULU, HI 96826 1,000. SHAY CHUN NONE N/A SCHOLARSHIP 634 KUKUIULA LOOP HONOLULU, HI 96825 1,000. LYSETTE TAGAWA NONE N/A SCHOLARSHIP 1142 C 17TH AVENUE 1,000. HONOLULU, HI 96816 MAGGIE MEI LING KWOCK NONE N/A SCHOLARSHIP 814 KINAU STREET #303 5 000 HONOLULU HI 96813 See continuation sheet(s) ➤ 3a Total 142,098. b Approved for future payment None

▶ 3b

Total

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to any foundation manager or substantial contributor status of contribution Amount · Name and address (home or business) recipient DIANE YANG NONE N/A SCHOLARSHIP 768 LAWELAWE STREET HONOLULU HI 96821 1,000. YUI CHI LO NONE N/A SCHOLARSHIP 98-850B IHO PLACE AIEA, HI 96701 1,000. BOYS AND GIRLS CLUB OF HAWAII NONE N/A SCHOLARSHIP DONATION 1523 KALAKAUA AVENUE, SUITE 202 HONOLULU, HI 96826 8,000. MAEGAN TUPINIO NONE N/A SCHOLARSHIP 163 KALIKO DRIVE WAHIAWA HI 96786 1,000. JESSICA KAWANA NONE N/A SCHOLARSHIP 94-1011 AHIU PLACE MILILANI, HI 96789 1,000. TRAVIS P. LEFRANDT NONE N/A SCHOLARSHIP 98-881 KAAMILO STREET AIEA, HI 96701 3,000. DANNY NGUYEN NONE N/A SCHOLARSHIP 4363 OLALOA STREET HONOLULU, HI 96818 1,000. CHAREE WONG NONE N/A SCHOLARSHIP 87-1610 KUUALOHA ROAD WAIANAE HI 96792 1,000. NONE SHARMAINE SIBAYAN N/A SCHOLARSHIP 91-1175 HANALOA STREET EWA BEACH, HI 96706 3,000. PENINA LIMA NONE N/A SCHOLARSHIP 91-1009 KANIO STREET KAPOLEI, HI 96707 1,000. Total from continuation sheets 133,098,

Part XV Supplementary Information				· · · · · · · · · · · · · · · · · · ·
3 Grants and Contributions Paid During the		1		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		<u> </u>
RONALD RAMONES	NONE	N/A	SCHOLARSHIP	
87-2042 FARRINGTON HIGHWAY #PC22B				1 000
WAIANAE, HI 96792			-	1,000
CHRISTI ECONOMY	NONE	N/A	SCHOLARSHIP	
1055 AHUNA ROAD	HONE	,,,	Denois Manual 11	
HILO, HI 96720				3,500
KARA LYNNE OGAWA	NONE	N/A	SCHOLARSHIP	
1110 PUU PONI STREET				1 000
PEARL CITY, HI 96782				1,000
JOCY-ANNA CHEVALIER	NONE	N/A	SCHOLARSHIP	
87-143 MILIKAMI STREET	NONE	N/A	SCHOLARSHIP	
WAIANAE, HI 96792				1,000
HANNAH CLAIRE BELTRAN	NONE	N/A	SCHOLARSHIP	
94-375 MOKUOLA STREET				
WAIPAHU, HI 96797				1,000
SHONELLE SWARENS 691 KIHAPAI STREET	NONE	N/A	SCHOLARSHIP	
KAILUA, HI 96734				1,000
CHEYENNE FONOIMOANA-LESSARY	NONE	N/A	SCHOLARSHIP	
P.O. BOX 226 HAU'ULA, HI 96717				1,000
NAO ODA, NI 90/II				1,000
CALMAIN MOOVED	NONE	7./3	GCUOL ANGUER	
CAITLIN HOOKER 1390 AKAMAI STREET	NONE	N/A	SCHOLARSHIP	
KAILUA, HI 96734				1,000
KELSEY MICHELLE WEMPLE	NONE	N/A	SCHOLARSHIP	
925 KEOLU DRIVE				
KAILUA, HI 96734				3,000
BRITNEY TALBOT P.O. BOX 374	NONE	N/A	SCHOLARSHIP	
HONOMU, HI 96728				1,000
Total from continuation sheets				<u> </u>

3 Grants and Contributions Paid During th				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
USTIN ARAKI-KWEE	NONE	N/A	SCHOLARSHIP	
P.O. BOX 376				1.0
ANOIDO, HI 30770		-		1,00
ANNIE MAE FLORES	NONE	N/A	SCHOLARSHIP	
P.O. BOX 792				
A'ALEHU, HI 96772		<u> </u>		1,00
DEANN NISHIMURA-THORNTON	NONE	N/A	SCHOLARSHIP	
P.O. BOX 226	MONE	N/A	SCHODARSHIP	
EA'AU, HI 96749		<u> </u>		1,00
CASEY UTEMEI	NONE	N/A	SCHOLARSHIP	
P.O. BOX 1185 KAPAAU, HI 96755				1,00
un and in 190733				
KAYLA UEMURA	NONE	N/A	SCHOLARSHIP	
32-6109 KIRITINA PLACE				
CAPTAIN COOK, HI 96704				1,00
MAKANAALOHA LARIOSA AGCAOILI	NONE	N/A	SCHOLARSHIP	
15-182 PUNI PAKA LOOP SOUTH	NONE	N/A	SCHOLARSHIP	
РАНОА, НІ 96778				10,00
CATHERINE TORIGOE	NONE	N/A	SCHOLARSHIP	
521 KOIAWE STREET HILO, HI 96720				1,00
IIIA THORNE	NONE	N/A	SCHOLARSHIP	
P.O. BOX 8 HANA, HI 96713				1,00
MANUS, HE 20113				1,00
KRISTINE FELIX	NONE	N/A	SCHOLARSHIP	
39 NOHOANA PLACE				
NAILUKU, HI 96793				1,00
PETER ALBERT ST. MICHAEL	NONE	N/A	SCHOLARSHIP	
23 OLINDA ROAD		[
MAKAWAO, HI 96768				1,00

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution · Name and address (home or business) recipient KIARA GALICINAO NONE N/A SCHOLARSHIP P.O. BOX 11831 LAHAINA, HI 96761 1,000, CATHERINE STUCK NONE SCHOLARSHIP N/A P.O. BOX 631163 LANAI CITY, HI 96763 1,000. NONE N/A SCHOLARSHIP CHARISSE MANLEY P.O. BOX 53 1,000. HO'OLEHUA, HI 96729 NICOLE A. ISODA NONE N/A SCHOLARSHIP 5823 KOALI STREET KAPAA, HI 96746 3,000. NONE N/A SCHOLARSHIP TRAVIS NAVARRO 4030 PAI STREET 1,000, KALAHEO, HI 96741 ANNALISSA HARTSELL NONE N/A SCHOLARSHIP P.O. BOX 513 1,000. LAWAI, HI 96765 NICOLE CHONG NONE N/A SCHOLARSHIP 95-1103 WIKAO STREET 1,000. MILILANI, HI 96789 CHRISTOPHER AKATSUKA NONE N/A SCHOLARSHIP 45-606 KEOLE STREET 1,000. KANEOHE, HI 96744 TORI CAMPBELL NONE N/A SCHOLARSHIP 66-1667 WAIAKA STREET KAMUELA, HI 96743 1,000. MARI TANAKA NONE SCHOLARSHIP A\n 47-672 HUI KELU STREET KANEOHE HI 96744 2,500. Total from continuation sheets

Part XV | Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager · Name and address (home or business) recipient or substantial contributor ZHAOTONG XU NONE N/A SCHOLARSHIP 2847 WAIALAE AVENUE #202 3.000. HONOLULU, HI 96826 RUSSEL MANALO NONE N/A SCHOLARSHIP 91-1016 HOOKAAHEA STREET EWA BEACH, HI 96706 1,000. NONE KAWEHT LOPEZ N/A SCHOLARSHIP 61 MIKIOI STREET HILO, HI 96720 1,000. TAYLOR-MARI SHODAHL NONE N/A SCHOLARSHIP 7539 OLILI PLACE HONOLULU HI 96825 1,000. ASHLEY WENDT NONE N/A SCHOLARSHIP 20 NORTH HIENA PLACE MAKAWAO HI 96768 1,000. BOBBIJO KATAGIRI NONE N/A SCHOLARSHIP 1417 AKIAHALA STREET KAILUA, HI 96734 1,000. SHENNA REI CHOY NONE N/A SCHOLARSHIP 2104 DOLE STREET HONOLULU, HI 96822 3,000. NONE SARA KAHANAMOKU-SNELLING N/A SCHOLARSHIP 59-608 KAMEHAMEHA HIGHWAY HALE'IWA, HI 96712 1,000. NONE ASHLEY COOPER N/A SCHOLARSHIP P.O. BOX 1062 PUUNENE, HI 96784 1,000. JASMINE RYON NONE N/A SCHOLARSHIP 222 S. VINEYARD STREET #602 HONOLULU HI 96813 1,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or **Amount** status of contribution · Name and address (home or business) recipient SERENA MOTELEWSKI NONE N/A SCHOLARSHIP 332 A'ALI'I WAY LAHAINA, HI 96761 1,000. RYAN MICHAEL NILLO NONE N/A SCHOLARSHIP 91-1030 LAULAUNA STREET #8A EWA BEACH, HI 96706 1,000. NONE KRISTIN RABAGO N/A SCHOLARSHIP 1745 AKAHI STREET HONOLULU HI 96819 1,000. BRITNY CHING NONE N/A SCHOLARSHIP 1110 AALAPAPA DRIVE KAILUA, HI 96734 1,000. SHEA RODRIGUEZ NONE N/A SCHOLARSHIP 2721 KAUHALE STREET KIHEI HI 96753 1,000. CLAIRE MARIE MUNGUIA NONE N/A SCHOLARSHIP 67-432 KIOE STREET WAIALUA HI 96791 3,000. ERIC AGLUBA NONE N/A SCHOLARSHIP 94-536 NIULII STREET WAIPAHU, HI 96797 1,000. JULIAN YUEN NONE N/A SCHOLARSHIP 1229 MAKALAPUA PLACE HONOLULU, HI 96817 10,000. NONE TRAYSON MEDEIROS N/A SCHOLARSHIP 56-427 PAHELEHALA LOOP **KAHUKU, HI 96731** -1,000. EUGENE SENDA NONE N/A SCHOLARSHIP 201 OHUA AVENUE APT. 1907-1 HONOLULU HI 96815 4,098. **Total from continuation sheets**

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor status of contribution · Name and address (home or business) recipient ROLAND COELHO, JR. NONE N/A SCHOLARSHIP 41-978 WAIKUPANAHA STREET #F-1 WAIMANALO, HI 96795 1,000. JENNIFER IN NONE N/A SCHOLARSHIP 1101 LILIHA STREET #213 HONOLULU, HI 96817 1,000. N/A NONE SCHOLARSHIP KAIA KONG 3711 MAHINA AVENUE HONOLULU, HI 96816 1,000. TIEN LY NONE SCHOLARSHIP N/A 1416-A LANAILA AVENUE 1,000. HONOLULU HI 96817 NATASHA PEAPEALALO NONE N/A SCHOLARSHIP 3303 PINAO STREET HONOLULU, HI 96822 1,000, KIONA ESTEABAN NONE N/A SCHOLARSHIP 2656 TERRACE DRIVE 500. HONOLULU, HI 96822 ALENA TOTTEN NONE N/A SCHOLARSHIP 47-381 KEOHAPA PLACE KANEOHE HI 96744 500. DANIEL OKUBO NONE N/A SCHOLARSHIP 1048 LAULIMA WAY 3,000. HILO, HI 96720 UNIVERSITY OF HAWAII NONE N/A SCHOLARSHIP DONATION FOUNDATION-SHIDLER COLLEGE OF BUSINESS 2444 DOLE STREET, BACHMAN HALL 105 HONOLULU, HI 96822 5,000. NONE UNIVERSITY OF HAWAII N/A SCHOLARSHIP DONATION FOUNDATION-TROPICAL AGRICULTURE & HUMAN RESOURCES 2444 DOLE STREET, BACHMAN HALL 105 HONOLULU HI 96822 5,000. Total from continuation sheets

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
PACIFIC BUDDHIST ACADEMY	NONE	N/A	SCHOLARSHIP DONATION	
1710 PALI HIGHWAY				
HONOLULU, HI 96813				5,000
YMCA	NONE	N/A	SCHOLARSHIP DONATION	
1441 PALI HIGHWAY		[]		
HONOLULU, HI 96813		 	-	5,000
	:			
				-
				· ·
.		-		
Total from continuation sheets ,		<u> </u>		

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ided by section 512, 513, or 514	(e)
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
-			†		=
			t		 -
					·
			 -		<u> </u>
			 		<u></u>
e					
			 	_	
g Fees and contracts from government agencies	-		 		
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash					
investments			4.4	152 000	
4 Dividends and interest from securities			14	153,029.	
5 Net rental income or (loss) from real estate:				-	
a Debt-financed property					
b Not debt-financed property			ļ <u>.</u>		····
6 Net rental income or (loss) from personal					
property					
7 Other investment income			<u> </u>		
8 Gain or (loss) from sales of assets other					
than inventory		•	18	274,254.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
_			1		
_					
d		0.		427,283.	0.
d e 12 Subtotal. Add columns (b), (d), and (e)		0.			0. 427,283.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.		427,283.	0. 427,283.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)	a the Asse		(omn	13	0. 427,283.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	o the Acce		emp	13	0. 427,283.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)		omplishment of Ex		13 t Purposes	427,283.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to	ne is reported	omplishment of Ex		13 t Purposes	
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income the foundation's exempt purposes (other than be	ne is reported	omplishment of Ex		13 t Purposes	427,283.
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which income	ne is reported	omplishment of Ex		13 t Purposes	427,283.
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P00715249

(808)522-8833

Firm's EIN > 99 - 0319489

Phone no.

Paid

Preparer

Use Only

DARRELL LIM

Firm's name ► DARRELL LIM AND

Firm's address ► 81 SOUTH HOTEL STREET #308 HONOLULU, HI 96813

11/12/13

Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2012

Name of the organization

Employer identification number

	MAMORU & AIKO TAKITANI FOUNDATION, INC. 51-023	2114					
Organization typ	ype (check one):						
Filers of:	Section:						
Form 990 or 990-	0-EZ 501(c)() (enter number) organization						
4947(a)(1) nonexempt charitable trust not treated as a private foundation							
527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
General Rule X For an o	oction 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instruct organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or proper butor. Complete Parts I and II.						
Special Rules							
509(a)(1)	section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under (1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$3 amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II						
total cor	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
contribu If this bo purpose	section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the putions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than box is checked, enter here the total contributions that were received during the year for an exclusively religious, chare Do not complete any of the parts unless the General Rule applies to this organization because it received none us, charitable, etc., contributions of \$5,000 or more during the year	n \$1,000 antable, etc.,					
but it must answ	ganization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 99 wer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Foes not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

MAMORU & AIKO TAKITANI FOUNDATION, INC.

51-0212114

<u>MAMOR</u>	U & AIKO TAKITANI FOUNDATION, INC.	51	0212114
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	AIKO TAKITANI P.O. BOX 10812 HONOLULU, HI 96816	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II of there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number

<u>AMORU</u>	& AIKO TAKITANI FOUNDATION, INC.	5	1-0212114
art II	Noncash Property (see instructions). Use duplicate copies of Pa	art lj if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - -			
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
-		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
 		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ - _ -			
<u> </u>		\$	

Name of org	anization		Employer identification number			
MAMORU	J & AIKO TAKITANI FOUNDA	TION, INC.		51-0212114		
Part III	Exclusively religious, charitable, etc., individually year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc., Use duplicate copies of Part III if additional	lual contributions to section 501(following line entry. For organizati contributions of \$1,000 or less fo	c)(7), (8), or (10) organizatior ons completing Part III, enter or the year. (Enter this information once)	s that total more than \$1,000 for the		
(a) No. from	(b) Purpose of gift (c) Use of gift		(d) Descr	iption of how gift is held		
_ Part I		(0, 000 01 3				
-		(e) Transfer of gi	ft			
-	Transferee's name, address, and	ZIP + 4	Relationship of tran	sferor to transferee		
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held		
-		(e) Transfer of gi	ft			
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held		
		·				
	(e) Transfer of gift					
-	Transferee's name, address, and	ZIP + 4	Relationship of tran	sferor to transferee		
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Descr	iption of how gift is held		
Part I						
	(e) Transfer of gift					
	Transferee's name, address, and	<u>ZIP + 4</u>	Relationship of transferor to transferee			

N/A

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (mo., day, yr.) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) 1a SPDR DOW JONES INDL AVG ETF 08/10/11|11/14/12 P 04/02/1211/07/12 b REALTY INCOME CORP. P c SPDR DOW JONES INDL AVG ETF P 08/24/1111/14/12 03/29/1211/14/12 d VERIZON COMMUNICATIONS P e ALTRIA GROUP INC. P 03/30/12|10/23/12 03/30/1210/09/12 f INTEL CORP P g Capital Gains Dividends h 1 m п 0 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 1,104,232 996,862. 107,370. 199,101. 197,839. b <u>-1,262.</u> 1,166,251. 997,718. 168,533. 222,952. 200,523. 22,429. d 207,145. 198,741. 8,404. е 152,357. 197,981. -45,624. 14,404. 14,404. g h m n Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 107,370. -1,262. b 168,533. C 22,429. d 8,404. e -45,624. f 14,404. g h k 1 m n 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 274,254. 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c).

If (loss), enter "-0-" in Part I, line 8

	Amount 167,433.		tal Gains vidends	Column (2 Amount	7)
	167,433.				
	, LLC 167,433.		14,404.	153,0)29.
	ln 4 167,433.		14,404.	153,029.	
Legal	Fees			Statement	2
			_		
33,466.		0.	(0. 33,4	166.
33,466.		0.	(33,4	66.
ccounti	ng Fees			Statement	3
5,221.	-	0.	(0. 5,2	221.
5,221.		0.	(5,2	221.
Tax	es	-		Statement	4
			(c) Adjusted Net Income		
6,000.		0.	(0.	0.
6,000.		0.	(0.	0.
	(a) penses Books 33,466. 33,466. Accounting (a) penses Books 5,221. 5,221. Tax (a) penses 6,000.	Taxes (a) (b) Penses Net Inventor (a) (b) Penses Net Inventor (b) Taxes (a) (b) Net Inventor (b) Net Inventor (c) Net Inventor (d) Net Inventor (d) Net Inventor (e) Net Inventor (f) Net Inventor (g)	(a) (b) Penses Net Invest- Books ment Income 33,466. 0. 33,466. 0. Accounting Fees (a) (b) Penses Net Invest- ment Income 5,221. 0. 5,221. 0. Taxes (a) (b) Penses Ment Income 6,000. 0.	(a) (b) (c) Penses Net Invest- Response Ment Income Net Income 33,466. (a) (b) (c) Accounting Fees (a) (b) (c) Penses Net Invest- Response Ment Income Net Income 5,221. Taxes (a) (b) (c) Adjusted Net Income 5,221. Taxes (a) (b) (c) Adjusted Net Income 6,000. (b) (c) Adjusted Net Income 6,000.	(a) (b) (c) (d) penses Net Invest- Books ment Income Net Income Purpos 33,466. 0. 0. 0. 33,4 Accounting Fees Statement (a) (b) (c) (d) penses Net Invest- Books ment Income Net Income Purpos 5,221. 0. 0. 5,2 Taxes Statement (a) (b) (c) (d) Charita Fig. 221. 0. 0. 5,2 Taxes Statement (a) (b) (c) (d) Charita

Form 990-PF	Other E	xpenses		Statement 5		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income			
INSURANCE FEES AND LICENSES OUTSIDE SERVICES MISCELLANEOUS TELEPHONE WEBSITE HOSTING POSTAGE OFFICE SUPPLIES COMMITTEE MEETINGS To Form 990-PF, Pg 1, ln 23	3,252. 28. 4,364. 10. 650. 710. 112. 471. 349.	0. 0. 0. 0. 0.		3,252. 28. 4,364. 10. 650. 710. 112. 471. 349.		
Form 990-PF	Corporat	e Stock		Statement 6		
Description		Вос	ok Value	Fair Market Value		
CORPORATE STOCK		3	3,134,516.	3,134,516.		
Total to Form 990-PF, Part II, line 10b			3,134,516. 3,134			

	List of Officers, Di and Foundation Manag		State	ement 7
Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	
HIDEO KONDO 3777 W 27TH LANE YUMA, AZ 85364	PRESIDENT 2.00	0.	0.	0.
JANICE LUKE LOO 534 AHINA STREET HONOLULU, HI 96816	VICE-PRESIDENT 6.00	0.	0.	0.
DR. MILDRED HIGASHI 44-162 NANAMOANA STREET KANEOHE, HI 96744	SECRETARY 4.00	0.	0.	0.
STUART HO 1511 KALANIWAI PLACE HONOLULU, HI 96821	TREASURER 3.00	0.	0.	0.
MICHAEL W. PERRY 650 IWILEI ROAD, SUITE 400 HONOLULU, HI 96817	CHAIR 8.00	0.	0.	0.
KAREN UNO P.O. BOX 10812 HONOLULU, HI 96816	DIRECTOR 4.00	0.	0.	0.
BRETT G. SCHLEMMER 611 11TH AVENUE HONOLULU, HI 96816	DIRECTOR 2.00	0.	0.	0.
Totals included on 990-PF, Page	e 6, Part VIII	0.	0.	0.

Form 990-PF

Supplementary Information

Statement 8

The Foundation provides every public high school and major accredited private high school in Hawaii the opportunity to participate in its scholarship program. One graduating senior from each of those schools will receive a \$1,000 scholarship. Besides receiving the scholarship, ten finalists from that group will be further eligible for larger scholarships ranging from \$2,000 to \$10,000. The finalists are selected based on academics, need, and community service.

Scholarship applications are submitted directly to the school administrators. For further information, applicants may contact: The Mamoru and Aiko Takitani Foundation; P.O. Box 10687; Honolulu, Hawaii 96816-0687; Telephone: (808) 228-0209. The program is administered in accordance with requirements under IRC Sec. 4945(g).

Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Internal	Revenue Service					
	u are filing for an Automatic 3-Month Extension,					▶ ☑
-	u are filing for an Additional (Not Automatic) 3-Mo t complete Part II unless you have already been g					m 8868.
Electra corp 8868 1 Return	onic filing (e-file). You can electronically file Form poration required to file Form 990-T), or an addition to request an extension of time to file any of the for Transfers Associated With Certain Personal ctions). For more details on the electronic filing of the	8868 if yo al (not auto forms listed Benefit (ou need a 3-month a omatic) 3-month ext d in Part I or Part II Contracts, which m	utomatic extension o ension of time. You o with the exception o ust be sent to the I	of time to file (file an electronical form 8870, IRS in paper	6 months for ally file Form , Information format (see
Part	Automatic 3-Month Extension of Time	. Only sul	bmit original (no co	opies needed).		
A cor Part I	poration required to file Form 990-T and reques	sting an a	utomatic 6-month	extension—check th		▶ 🗆
	er corporations (including 1120-C filers), partnersh	ips, REMIC	Cs, and trusts must	use Form 7004 to req	quest an exter	ision of time
to file i	income tax returns.					
		-4		Enter filer's identifyir Employer identification		
Type o	Name of exempt organization or other filer, see in Mamovu and Aiko Takit	strucțions.	undehon		212114	
print	Number, street, and room or suite no. If a P.O. bo	OF SAB INSTR	uctions	Social security number	<u> </u>	
File by ti	" Q Coulda Hala Cal	100 t	#308	Coolar scounty named	. (0014)	
filing you	City, town or post office, state, and ZIP code. For	a foreign a	ddress, see instruction	S.		
return S instruction	- 1 M/1 N/1/1 N/1 1 W/1/1/1	(13_			•	
Enter t	he Return code for the return that this application is	s for (file a	separate application	n for each return) .		. 0 4
Appli	cation	Return	Application			Return
Is Fo	r	Code	Is For			Code
Form	990 or Form 990-EZ	01	Form 990-T (corpo	ration)		07
Form	990-BL	02	Form 1041-A			08
Form	4720 (individual)	03	Form 4720			09
	990-PF ·	04	Form 5227			10
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form	990-T (trust other than above)	06	Form 8870			12
Telep	books are in the care of \blacktriangleright Mamoru and ohone No. \blacktriangleright 808 - 228 - 0209 organization does not have an office or place of but	F.	AX No. ▶			, . ▶□
If this	s is for a Group Return, enter the organization's fou	r digit Gro	up Exemption Numb	er (GEN)	If th	
	whole group, check this box \blacktriangleright \square . If i if the names and EINs of all members the extension		t of the group, check	this box	► □ and at	itach
1	I request an automatic 3-month (6 months for a countil AUGUST 15, 20, 13, to file the exent for the organization's return for: College	rporation r				ension is
2	▶ ☐ tax year beginning					·
	If this application is for Form 990-BL, 990-PF, 990 nonrefundable credits. See instructions.				3a \$ 13	000
b	If this application is for Form 990-PF, 990-T, 4 estimated tax payments made. Include any prior ye				3b s 1ろ	000
c	Balance due. Subtract line 3b from line 3a. Include EFTPS (Electronic Federal Tax Payment System).	your payı	ment with this form,		3c \$	0
Caution	n. If you are going to make an electronic fund withdrawal			3-EO and Form 8879-E		nstructions.

Form 88	368 (Rev_1-2013)					Page 2
• If yo	u are filing for an Additional (Not Automatic) 3-Mo	onth Exter	sion, complete only	Part II and check the	his box	▶ 🗆
	Only'complete Part II if you have already been gran				y filed Form 8	868.
	u are filing for an Automatic 3-Month Extension, o	-			,	
Part	II Additional (Not Automatic) 3-Month E	xtension	of Time. Only file t			
				Enter filer's identifying		
Type print					or 	
File by t		O. box, see instructions. Social security number (SSN)				
filing yo return \$ instructi	See Stry, town or post office, state, and En obder to	and ZIP code. For a foreign address, see instructions.				
Enter	the Return code for the return that this application i	s for (file a	separate application	for each return) .		
Appli Is Fo	cation r	Return Code	Application Is For			Return Code
Form	990 or Form 990-EZ	01	و الما الما الما الما الما الما الما الم	المرابع المرابع المرابع المرابع	लेम बोदर हैं है	1.74
Form	990-BL	02	Form 1041-A			08
Form	4720 (individual)	03	Form 4720			09
	990-PF	04	Form 5227			10
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form	990-T (trust other than above)	06	Form 8870	·	 	12
STOP!	Do not complete Part II if you were not already gra	inted an au		tension on a previous	sly filed Form	8868.
• The	oooks are in the care of ▶					
Tele	ohone No. ▶	FAX	No. ▶			
	organization does not have an office or place of bi	usiness in 1	ine United States, ch			
	s is for a Group Return, enter the organization's fou					
	whole group, check this box ▶ □ . If i		t of the group, check	this box	▶ ∐ and a	ttach a
list wit	h the names and EINs of all members the extension	is for.				
4	I request an additional 3-month extension of time to	until		, 20	··•	
5	For calendar year , or other tax year beginning	ng	, 20	_, and ending		_, 20
6	If the tax year entered in line 5 is for less than 12 m	nonths, ch	eck reason: 🗌 Initi	al return	ıl return	
	Change in accounting period					
7	State in detail why you need the extension					
					·	
8a	If this application is for Form 990-BL, 990-PF, 990	-T. 4720.	or 6069, enter the ter	ntative tax, less any	<u> </u>	
-	nonrefundable credits. See instructions.	.,,		,	8a \$	
b	If this application is for Form 990-PF, 990-T, 4	720, or 6	069, enter any refui	ndable credits and	7 4	
-	estimated tax payments made. Include any prior				(S.)	
	amount paid previously with Form 8868.				8b \$	
С	Balance due. Subtract line 8b from line 8a. Include yo (Electronic Federal Tax Payment System). See instruct		with this form, if requ	ired, by using EFTPS	8c \$	

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I	have examined this form, including	accompanying schedules ar	nd statements, and	to the best of my
knowledge and belief, it is true, correct, and	complete, and that I am authorized to	prepare this form.		

Signature ▶

Title ▶

Date ►

8868

(Rev January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

internal neve							
	re filing for an Automatic 3-Month Extension, re filing for an Additional (Not Automatic) 3-N					. ▶ □	
	omplete Part II unless you have already been					886 8 .	
a corpora 8868 to re Return fo	ic filing (e-file). You can electronically file Forn titon required to file Form 990-T), or an addition equest an extension of time to file any of the or Transfers Associated With Certain Personans). For more details on the electronic filing of the	nal (not au forms liste al Benefit	tomatic) 3-month ext ed in Part I or Part II Contracts, which m	tension of time. You of with the exception of ust be sent to the I	can electronical of Form 8870, IRS in paper f	lly file Form Information format (see	
Part I	Automatic 3-Month Extension of Time	e. Only su	ıbmit original (no c	opies needed).			
	ation required to file Form 990-T and reque						
	corporations (including 1120-C filers), partnersl	nips, REMI	Cs, and trusts must	use Form 7004 to req	uest an extens	ion of time	
to file inco	ome tax returns.						
	Name of exempt organization or other filer, see I	netructions		Enter filer's identifying number, see instructions Employer identification number (EIN) or			
Type or print	Thank of exempt organization or union mar, see		2. Employor Identification number (
File by the due date for	Number, street, and room or suite no. If a P.O. b	ox, see inst	instructions. Social secunty number (SSN)				
filing your return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
	Return code for the return that this application	e for (file a	sonarata application	for each return)			
		·					
Applicati	on	Return	Application is For	Application		Return Code	
	Form 990 or Form 990-EZ		Form 990-T (corporation)			07	
Form 990		01	Form 1041-A			08	
Form 4720 (Individual)		03	Form 4720			09	
Form 990	Form 990-PF		Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990	-T (trust other than above)	06	Form 8870			12	
Telephon If the orga If this is for the who a list with the	ts are in the care of the No. ▶ anization does not have an office or place of but or a Group Return, enter the organization's four the group, check this box ▶ □ . If it he names and EINs of all members the extension the name of the company of the comp	usiness in to digit Grout t is for part on is for. rporation re	AX No. he United States, che per Exemption Number of the group, check equired to file Form 9	eck this box	. If this	ch 	
	he organization's return for:] calendar year 20 or						
	▶ ☐ tax year beginning						
	refundable credits. See instructions.				3a \$		
	b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$					3b \$		
	c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.						
Caution. If yo	ou are going to make an electronic fund withdrawal w	ith this Form	n 8868, see Form 8453	-EO and Form 8879-EO	for payment instr	uctions.	

1	p,	_	_	2

		filing for an Additional (Not Automatic) 3- complete Part II if you have already been g						
		filing for an Automatic 3-Month Extension				isiy iiled Forn	1 0000.	
Par		Additional (Not Automatic) 3-Month				opies neede	d).	
				<u></u>	Enter filer's identify			
Type						nployer identification number (EIN) or		
print	Type or MAMORU AND AIKO TAKITANI FOUNDATIO				51-0212114			
•		Number, street, and room or suite no. If a P.O. box, see instructions. Social security number			Social security number (SSN)			
File by due da								
filing ye	City, town or post office, state, and ZIP code, For a foreign address, see instructions.							
return		HONOLULU, HAWAII 96813						
Enter	the Re	eturn code for the return that this application	n is for (file a	separate application	n for each return)		. 0 4	
Appi	lication	1	Return	Application			Return	
Is Fo	or		Code	is For			Code	
Form	1 990 c	r Form 990-EZ	01	· 医多种原理性 医原性性病 化二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基			GERMAN	
	1 990-E		02	Form 1041-A			08	
Form	4720	(individual)	03	Form 4720		09		
Form	1990-F	PF	04	Form 5227			10	
Form	1 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069			11	
		(trust other than above)	06	Form 8870			12	
STOP	l Do no	t complete Part II if you were not already g	ranted an au	tomatic 3-month ex	tension on a previou	usiv filed For	m 8868.	
		<u> </u>	•					
	books phone	are in the care of ► MAMORU AND AIKO TA No. ► 808-228-0209	KITANI FOUN FAX I					
or the	whole	a Group Return, enter the organization's for group, check this box ▶ □ . I ames and EINs of all members the extension	f it is for part	up Exemption Number of the group, check	er (GEN) this box	. If . ▶ ☐ and	this is attach a	
4	Lreau	est an additional 3-month extension of time	e until	NOVEMBER 15	20 1	13 .		
5	For ca	request an additional 3-month extension of time until NOVEMBER 15, 20 13. For calendar year 2012, or other tax year beginning, 20, and ending, 20 fthe tax year entered in line 5 is for less than 12 months, check reason: I initial return Final return					20	
6	If the	tax year entered in line 5 is for less than 12	months, che	ck reason: [] Initia	al return	al return		
		ange in accounting period						
	· · · · · · · · · · · · · · · · · · ·							
	TO CL	OSE THE BOOKS AND FILE A COMPLETE AN	D ACCURAT	E TAX RETURN.				
		application is for Form 990-BL, 990-PF, 99	0-T, 4720, o	r 6069, enter the ten	tative tax, less any	8a \$		
		fundable credits. See instructions.					0.00	
b	If this	application is for Form 990-PF, 990-T,	4720, or 60	69, enter any refun	idable credits and	1		
		ted tax payments made. Include any price	or year over	payment allowed as	a credit and any			
		t paid previously with Form 8868.				8b \$	0.00	
		e due. Subtract line 8b from line 8a. Include yonic Federal Tax Payment System). See instruc		with this form, if requir	red, by using EFTPS			
	(LIECII C					8c \$	0 00	
		Signature and Verifica		•	•			
		of perjury, I declare that I have examined the belief, it is true, correct, and complete, and that			chedules and stateme	ents, and to th	e best of my	
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