

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



### **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

OMB No 1545-0052

		ent of the Treasury leverue Service	Note The foun	dation ma		ted as a Privato to use a copy of t			ting red	juirements	Open to Public Inspection
F	or ca	lendar year 2012	or tax year begi	nning			, 2012	, and end	ing		, 20
_	Name	of foundation						<u>-</u>		A Employer ide	ntification number
	THE	SADANOSUKE	HATA CHARITA	ABLE E	OUNDA	TION				99-0341	146
	Numb	er and street (or P O	box number if mail is n	ot delivere	d to street	address)	· · · · · · · · · · · · · · · · · · ·	Room/suit	te	B Telephone nu	imber (see instructions)
	C/0	MICHAEL T.	MOORE, TRUST	EE					1	(	808) 521-2341
	118	8 BISHOP STR	EET, SUITE 1	.701						,	,
_		r town, state, and ZIP of						1			
									- 1	C If exemption ap	plication is
	нои	OLULU, HI 96	813							pending check	here
G		ck all that apply	Initial retu	rn		Initial return	of a former p	nublic char	rity	_	. □
Ŭ	0110	on all that apply	Final retur		-	Amended re	•	Jubiic Cha	''''		nizations, check here . P
			Address c			Name chang					eck here and attach
_	Che	ock type of organi	zation X Secti		(0)(3) 0					computation	▶ □
ï	$\overline{}$		nonexempt charitable			her taxable p		tion			fation status was terminated
+		market value of	<del></del>			nethod X C		crual			07(b)(1)(A), check here .
•				_	_		_	Jiuai			on is in a 60-month termination
		ear (from Part II, d ▶ \$	2,412.		ther (sp					under section 5	07(b)(1)(B), check here .
						(d) must be or	T Cash basis )				(d) Disbursements
L	ert	total of amounts in	venue and Expens	∍ਦਙ (Ine d(d)	1-7.	evenue and	(b) Net inve	estment	(c	) Adjusted net	for charitable
		may not necessar	rly equal the amount		exp	enses per books	incon	ne	•	ıncome	purposes
_		column (a) (see in	<del></del>	-			<del>                                     </del>				(cash basis only)
	1	l lifth	ts etc., received (attach sc e foundation is <b>not</b> req	hedule) .	<u> </u>	13,500.	·				
	2	Check ▶ attac	ch Sch B		-						
	3		nd temporary cash inve		ļ						
	4	Dividends and inte	erest from securities		<u> </u>					<del></del>	
	5 a										
	b	Net rental income or	(loss)		<u> </u>						
ne			m sale of assets not on	line 10		····					
en	b	Gross sales price for assets on line 6a	all								
Revenue	7	Capital gain net in	come (from Part IV,	line 2) .	ļ						
Œ	8	Net short-term cap	oital gain								
	9	Income modification	ons · · · · · ·								
	10 a	Gross sales less return and allowances · ·	1S								
	b	Less Cost of goods se	old .								
	С	Gross profit or (los	s) (attach schedule)								
	11	Other income (atta	ach schedule)								
_	12		through 11			13,500.					
}	13	Compensation of offi	cers, directors, trustees	, etc		500.				-	500
`	14		alaries and wages .								
nse	15		ployee benefits								
Administrative Expenses	16 a		schedule)								
, ŭ	ь	Accounting fees (a	attach schedule)ATC	Н 1		890.					890
<u>`</u> <u>`</u> ≥	c		fees (attach schedu						_		
rati	17		• • • • • • • • • •				CEIVED				1
ist	18		le) (see instructions)				PEIVED	,			
ni.	19		ch schedule) and de			12 000		الوا			
þ	20		• • • • • • • • • • •				22 2013	0			
	21		s, and meetings				13013		-		
and	22		cations			Oar	DEN UT	<b>38</b>			<del></del>
Operating	23		ttach schedule)			Consu	KELA" AL				
rati	24		nd administrative ex						·		<del></del>
be			gh 23			1,390.					1,390
0					<del></del>	10,000.	<del> </del>				10,000
	25		s, grants paid		<del></del>	11,390.		- 0			0 11,390
_	26		oursements Add lines 2	4 and 25	-	11,390.	<del> </del>	'		<del></del>	11,390
	27	Subtract line 26 fr			]	2 110					
			expenses and disbursem		<u> </u>	2,110.	<del></del>				
	l		come (if negative, er				<del>                                     </del>	0			
_	C	Adjusted net inco	me (if negative, ente	r -0-) <b></b>	L		<u> </u>				

JSA For Paperwork Reduction Act Notice, see instructions. 50F14F 1018

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-	art II	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	end of year	
	aitii	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Gash - non-interest-bearing	302.	2,412.	2,412	
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable	-	_		
		Less allowance for doubtful accounts ▶				
	5	Grants receivable	1		· <del>···</del>	
	6	Receivables due from officers, directors, trustees, and other				
	•	disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
	'	Less allowance for doubtful accounts				
S	8		,			
ssets		Inventories for sale or use				
As	9		1			
-		Investments - U S and state government obligations (attach schedule).			<del></del>	
		Investments - corporate stock (attach schedule)				
	11 6	Investments - corporate bonds (attach schedule)				
		and equipment basis				
		(attach schedule)			<del></del>	
	l	Investments - mortgage loans		· · · · · · · · · · · · · · · · · · ·		
	13 14	Investments - other (attach schedule)				
	' ~	equipment basis Less accumulated depreciation				
		(attach schedule)				
		Other assets (describe				
	16	Total assets (to be completed by all filers - see the				
		instructions Also, see page 1, item l)		2,412.	2,412	
	17	Accounts payable and accrued expenses				
	18	Grants payable				
es	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe  )				
_	23	Total liabilities (add lines 17 through 22)	0	0		
		Foundations that follow SFAS 117, check here ▶				
Ś		and complete lines 24 through 26 and lines 30 and 31.				
2 Le	24	Unrestricted				
or Fund Balances	25	Temporarily restricted				
80	26	Permanently restricted				
Ĕ		Foundations that do not follow SFAS 117.				
7		check here and complete lines 27 through 31. ▶ X				
S	27	Capital stock, trust principal, or current funds				
Net Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
As	29	Retained earnings, accumulated income, endowment, or other funds				
e t	30	Total net assets or fund balances (see instructions)	302.	2,412.		
Z	31	Total liabilities and net assets/fund balances (see	'			
		instructions)	302.	2,412.		
6	art II	Analysis of Changes in Net Assets or Fund				
		net assets or fund balances at beginning of year - Part		nust agree with		
		of-year figure reported on prior year's return)			302	
2	Ente	r amount from Part I, line 27a		2	2,110	
3	Othe	r increases not included in line 2 (itemize) ▶		3	2,110	
		hana 4 2 2			2,412	
5	Decr	eases not included in line 2 (itemize)			2,112	
6	Total	net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b)	Jine 30 6	2,412.	
_		The state of the s	0, . art ii, coldiiii (b),		2,412.	

Р	art IV Capital Gains	and Losses for Tax on Inv	estment Income			
	• •	d describe the kind(s) of property sold (	• • •	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a						
_b						
C	<del></del>					
d	<del></del>					
e		<del></del>	1	ļ		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
а				<del> </del>		
b						
_ <u>c</u>				<u> </u>	<del></del>	
d				<u> </u>		<del>-</del>
е	0		1 h			
	Complete only for assets	showing gain in column (h) and owne			Gains (Col (h) g (k), but not less	
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), if any	COI	Losses (from co	
а					<del></del>	
b						
С						
d	<del></del>					
e		. 16		<del> </del> -	· · <del>-</del>	<del> </del>
2	Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
		or (loss) as defined in sections 12				
	<del>-</del>	t I, line 8, column (c) (see inst				
	Part I, line 8		<u></u> ,	3		
۲	art V Qualification	onder Section 4940(e) for Re	duced Tax on Net Investment I	ncome		
Wa		•	outable amount of any year in the b	ase period	j?	Yes X No
_	<del></del>		, see the instructions before making	n anv entri	AS	
·	(a)	(b)	(c)	driy Crian	(d)	
С	Base period years alendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	atio col (c))
	2011	12,072.	898.			3.443207
	2010	10,500.	2,358.			4.452926
	2009	11,128.	3,400.			3.272941
	2008	10,000.	4,477.			2.233639
	2007	10,000.	4,750.			2.105263
2	Total of line 1, column (d)			2	2	5.507976
3	Average distribution ratio	for the 5-year base period - divide	e the total on line 2 by 5, or by the			
	number of years the foun-	dation has been in existence if less	s than 5 years	3		5.101595
4	Enter the net value of nor	ncharitable-use assets for 2012 fro	om Part X, line 5	4		2,289.
5	Multiply line 4 by line 3			5		11,678.
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		
-						
7	Add lines 5 and 6			7	<del>.</del>	11,678.
8	Enter qualifying distribution	ons from Part XII, line 4		8		11,390.
	If line 8 is equal to or gre Part VI instructions	eater than line 7, check the box i	in Part VI, line 1b, and complete t	hat part i	using a 1% tax	rate See the

8 b

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10

Enter the states to which the foundation reports or with which it is registered (see instructions)

Form 990-PF (2012)

N/A

Χ

3 b

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

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

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?

\-,\-,\-,\-,\-,\-,\-,\-,\-,\-,\-,\-,\-,\	devoted to position	(o) compensation	plans and deferred compensation	other allowances
NONE				
Total number of other employees hald over \$50,000	· · · · · · · · · · · · · · · · · · ·			

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1 NONE

2 All other program-related investments See instructions
3 NONE

Total. Add lines 1 through 3.

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_	 _	

Pa	<b>Minimum Investment Return</b> (All domestic foundations must complete this part. For see instructions.)	oreign foundation	ons,
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	
b	Average of monthly cash balances	1b	2,324.
С	: Fair market value of all other assets (see instructions)	1c	
d		1d	2,324.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	<sub>2</sub>	
3		3	2,324.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see	• • • • • • • • • • • • • • • • • • • •	
		4	35.
5	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	2,289.
6	Minimum investment return. Enter 5% of line 5		114.
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ □ and do not complete the		
1	Minimum investment return from Part X, line 6		114.
	Tax on investment income for 2012 from Part VI, line 5	· ' <del>  - '                               </del>	114.
∠a b	· · · · · · · · · · · · · · · · · · ·		
		<del>  </del>	
3	Add lines 2a and 2b  Distributable amount before adjustments Subtract line 2c from line 1	2c	114.
			114.
4 5	Recoveries of amounts treated as qualifying distributions		111
6		5	114.
7	Deduction from distributable amount (see instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII.	6	<del></del>
′			114
	line 1 · · · · · · · · · · · · · · · · · ·	7	114.
Ра	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	(-),	. 1a	11,390.
b	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc	[ 1b	
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		
а		3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	11,390.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		<u>-</u>
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	11,390.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when qualifies for the section 4940(e) reduction of tax in those years	calculating whe	

Form **990-PF** (2012)

Form 990-PF (2012) .

Part XIII Undistributed Income (see instructions) (c) Corpus 2011 2012 Years prior to 2011 Distributable amount for 2012 from Part XI, 114. Undistributed income, if any, as of the end of 2012 a Enter amount for 2011 only . . . Total for pnor years 20 10 .20 09 .20 08 Excess distributions carryover, if any, to 2012 9,762. From 2007 . . . . . . 9,776. **b** From 2008 . . . . . . 10,958. **c** From 2009 . . . . . . 10,382. **d** From 2010 . . . . . . e From 2011 . . . . . . 12,027. 52,905. Total of lines 3a through e Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ 11,390. a Applied to 2011, but not more than line 2a . . . Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election required - see instructions) . . . . . . . . . . . d Applied to 2012 distributable amount .... 114. 11,276. Remaining amount distributed out of corpus . . . Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 64,181. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b 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 . . . . . . . . . . . . . d Subtract line 6c from line 6b Taxable 4a from line 2a Taxable amount - see instructions . . . . . . . . . . . . . . . . . . f Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) . . . 9,762 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a . . . . . . . 54,419 Analysis of line 9 9,776. a Excess from 2008 . . . 10,958. b Excess from 2009 . . . c Excess from 2010 . . . 10,382. 12,027. d Excess from 2011 . . . e Excess from 2012 . . . 11,276.

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C Any submission deadlines

N/A

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

N/A

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	990-PF (2012)  rt XV Supplementary Information (	continued)			Page 11
2	rt XV Supplementary Information ( Grants and Contributions Paid Duri	ng the Vear or Appl	oved for F	Euturo Paymont	1.57
	Recipient	If recipient is an individual			
		If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				
7\ '	гСН 3				
А	ich 5				Ī
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	Total	<del></del>	<u> </u>	▶ 3a	10,000.
b	Approved for future payment				
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	Total			L	<del> </del>
_	Total	<del> </del>		▶ 3b	5 000 PE (2010

Part XVI	-A Analysis of Income-Produ	cing Activ	/ities			
	er gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514 (e)					
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
_				<del> </del>		(See instructions)
					<del></del>	<del></del>
		_		<del>                                     </del>		<del></del>
. —				<del> </del>		
f						
g Fees	and contracts from government agencies					<u> </u>
_	ship dues and assessments					
	on savings and temporary cash investments					
4 Dividend	ds and interest from securities					
5 Net rent	al income or (loss) from real estate					
	-financed property					
<b>b</b> Not o	debt-financed property			ļ <u>.</u>		
	il income or (loss) from personal property .					
7 Other in	vestment income					·
-	loss) from sales of assets other than inventory		<u> </u>	ļ		
	ome or (loss) from special events			ļ		
	rofit or (loss) from sales of inventory			ļ		<del></del>
	venue a			+		
				<del> </del>		
-				<del> </del>		
		<del> </del>				
e	1 Add (-) (-)					
	I Add columns (b), (d), and (e)			<u></u>	42	
	dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calci		• • • • • • • • • • • • •	• • • • • •		
Part XVI			complishment of Ex	empt Purr	noses	<del></del>
Line No.	Explain below how each activit	-		-	· ·	
▼	accomplishment of the foundation	on's exemp	t purposes (other than I	by providing	tunds for such purpose	s) (See instructions )
						· · · · · · · · · · · · · · · · · · ·
					· · · · · · · · · · · · · · · · · · ·	
						<u></u>
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			N/A			
			<u>-</u>			
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Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Orgai	nizations								
ır	secti	organization direction 501(c) of the Coations?								Yes	No
a T	ransfe	ers from the reporting	g foundation to	a noncharitable e	xempt organ	nization of	f				
		sh							1a(1)		Х
(2) Other assets									1a(2)		X
		ransactions									1
(	1) Sal	es of assets to a no	ncharitable exe	mpt organization .					1b(1)		Х
(:	2) Pur	chases of assets fro	om a noncharit	able exempt organi	zation				1b(2)		X
(:	3) Rer	ntal of facilities, equi	pment, or other	assets					1b(3)		Х
(4	4) Rei	mbursement arrang	ements				<i>.</i>		1b(4)		Х
( !	5) Loa	ins or loan guarantee	es						1b(5)		X
		formance of service							1b(6)		X
c S	harıng	g of facilities, equipn	nent, mailing lis	sts, other assets, o	r paid employ	ees			1c	L	X
d If	the a	answer to any of th	e above is "Ye	es," complete the	following so	hedule	Column (b) s	hould always show	the	fair m	ıarke
		of the goods, other									
	-	n any transaction or	· ·								
(a) Line	no	(b) Amount involved	(c) Name of	noncharitable exempt or	ganization	(d) Des	cription of transf	ers, transactions, and shar	ıng arra	ngemer	nts
		N/A				N/A					
		<del></del>			<u>.</u>						
			<del></del>								
								····			
				*** ***********************************							
					- 4.44						
d		foundation directly ( led in section 501(c) " complete the follo	of the Code (c						Y6	es X	] No
		(a) Name of organization		(b) Type of	organization	1-		c) Description of relations	hin		
							<u> </u>	,			
				···				- · · · · ·			
		······································									
		<del> </del>									
		· <del></del>									
 Sign	Under	penalties of penury I declaration of	re that I have exam preparer (other than t	ned this return, including axpayer) is based on all info	accompanying sometion of which p	hedules and preparer has a	statements, and to any knowledge				_
Here	Sign	ature of officer or trustee	10/00	3/12 Date	/13_	Title	ustee	May the IRS with the pre (see instructions	parer s	shown	retum below X No
	J	Print/Type preparer's	name	Preparer's signa	ture		Date	Observation 1 de la constantia	TIN		
Paid		KELLEY SIMON		Kolle		<b>3</b> -	03/08/201			0142	6
Prepa	arer		NST C VOIN	G U.S. LLP	80	$\sim$	1 33/33/201				Ö
Use C	nlv	Firm's name ER			<u>С</u> ФБ Е	.00		Firm's EIN ► 34-65	0255	, 0	
	,				., DIE. D		122	050 50	15 4 4	15.0	
		SA.	N DIEGO,	CA		92	122	Phone no 858-53	D-44	126	

Form 990-PF (2012)

Schedule B . (Form 990, 990-EZ,

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

## **Schedule of Contributors**

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

OMB No 1545-0047

Employer identification number

THE SADANOSUKE HATA	CHARITABLE FOUNDATION		99-0341146
Organization type (check one	)		7 99-0341140
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust not treate	d as a private fou	ndation
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as	s a private foundat	cion
	501(c)(3) taxable private foundation		
General Rule  X For an organization	), (8), or (10) organization can check boxes for both the Ge filing Form 990, 990-EZ, or 990-PF that received, during one contributor. Complete Parts I and II		
Special Rules	one contributor complete raits rand ii		
For a section 501(c under sections 509(	(3) organization filing Form 990 or 990-EZ that met the 3 (a)(1) and 170(b)(1)(A)(vi) and received from any one continuous or (2) 2% of the amount on (i) Form 990, Part VIII, lid II	tributor, during the	e year, a contribution of
during the year, tota	)(7), (8), or (10) organization filing Form 990 or 990-EZ thal contributions of more than \$1,000 for use <i>exclusively</i> for oses, or the prevention of cruelty to children or animals. Co	religious, charita	ble, scientific, literary,
during the year, con not total to more that year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ the attributions for use exclusively for religious, charitable, etc., an \$1,000. If this box is checked, enter here the total control religious, charitable, etc., purpose. Do not complete any inization because it received nonexclusively religious, charitary.	purposes, but the ributions that were y of the parts unles table, etc, contrib	ese contributions did be received during the sis the <b>General Rule</b> butions of \$5,000 or
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rulest answer "No" on Part IV, line 2 of its Form 990, or check PF, to certify that it does not meet the filing requirements of	the box on line H	of its Form 990-EZ or on
For Paperwork Reduction Act Notice	e, see the Instructions for Form 990, 990-EZ, or 990-PF	Schedule	B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization THE SADANOSUKE HATA CHARITABLE FOUNDATION

Employer identification number 99-0341146

Part I	Contributors (	(see instructions).	. Use duplicate copies of	Part I if additional s	pace is needed

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
1_	EMI HATA  2630 OAHU AVENUE  HONOLULU, HI 96822	\$13,500.	Person  Payroll  Noncash  (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
<b>N</b> o.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
<del>-</del>		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization THE SADANOSUKE HATA CHARITABLE FOUNDATION

Employer identification number

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Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is nee	eded
(a) No. from Part 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
		\$	
(a) No. from Part 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
		\$	
(a) No. from Part 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
		\$	
	<del></del>	<del> </del>	<del></del>

Employer identification number

99-0341146

Part III	Exclusively religious,	charitable, etc.	individual co	ntributions to	section 501	(c)(7), (8),	or (10) organiz	ations
	that total more than	\$1,000 for the y	ear. Complete	columns (a) the	hrough (e) a	nd the foll	owing line entr	y.

For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions.) > \$

ι	Jse duplicate copies of Part III if addition	onal space is needed		
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	jift	(d) Description of how gift is held
		(e) Transfer o	or girt	
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship of transferor to transferee
(a) No from	(b) Purpose of gift	(c) Use of g	yift	(d) Description of how gift is held
Part I				
		(e) Transfer o	of gift	
	Transferee's name, address, ar	nd 7IP + 4	Palation	ship of transferor to transferee
	Transferee 5 frame, address, at	10 211 14	Relation	ising of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	gift	(d) Description of how gift is held
		(e) Transfer o	of aift	
			<b></b>	
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of g	gift	(d) Description of how gift is held
Faiti				
		(e) Transfer o	of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship of transferor to transferee
	<del>-</del>			

ATTACHMENT 1

ATTACHMENT 1

FEES
ACCOUNTING
- 1
$\dashv$
, PART
990PF,
FORM

		REVENUE			
		AND EXPENSES	$egin{array}{c}  ext{NVESTMENT} \end{array}$	ADJUSTED NET	CHARITABLE
DESCRIPTION		PER BOOKS	INCOME	INCOME	PURPOSES
ERNST & YOUNG US, LLP		.068			.068
	TOTALS	890.			890.

EXPENSE ACCT

CONTRIBUTIONS

ATTACHMENT 2

ALLOWANCES AND OTHER

BENEFIT PLANS TO EMPLOYEE

TITLE AND AVERAGE HOURS PER

0

0

.10

1188 BISHOP STREET, SUITE 1701 HONOLULU, HI 96813

MICHAEL T. MOORE

NAME AND ADDRESS

TRUSTEE

500. 500. COMPENSATION WEEK DEVOTED TO POSITION GRAND TOTALS

FOUNDATION
CHARITABLE
HATA
SADANOSUKE
THE

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

170(B)(1)(A)(VI)

PURPOSE OF GRANT OR CONTRIBUTION

TOTAL CONTRIBUTIONS PAID

10,000

ATTACHMENT 3

AMOUNT

10,000

OPERATING FUNDS

номогиги, ні 96826

2454 SOUTH BERETANIA STREET

JAPANESE CULTURAL CENTER OF HAWAII

RECIPIENT NAME AND ADDRESS

99-0341146