

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



Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545 0047

Open to Public Inspection

A	For th	e 2012 calendar year, or tax year beginning	and	lending				
В	Check if applicab	C Name of organization			D Employer identifica	ation number		
	Addre	S KAWAIAHAO CHURCH TRUST						
	Name				99-60	44333		
	Initial return	Number and street (or P 0 box if mail is not del	vered to street address)	Room/suite	E Telephone number			
	Termi	P.O. BOX 3170, DEPT. 7	15	İ	(808) 694-4525			
	Amen	City town, or post office state, and ZIP code	9		G Gross receipts \$	2,139,614.		
	Applii	HONODOLO, HI JOOUZ JI	70		H(a) is this a group ret	urn		
	pendi	F Name and address of principal officer BAN	K OF HAWAII		for affiliates?	Yes X No		
		130 MERCHANT STREET, HO	NOLULU, HI 968	13	H(b) Are all affiliates inclu	ıded? Yes No		
	Tax-ex	empt status X 501(c)(3) 501(c) ()	(insert no.)	or 527	If "No," attach a li	st (see instructions)		
	Websi	te: ► N/A			H(c) Group exemption	number 🕨		
			sociation Other >	L Year	of formation: 1983 M	State of legal domicile HI		
Р	art I	Summary		····-				
/ ₺ JHV - Governance	1	Briefly describe the organization's mission or most	significant activities SEE	SCHEDU	LE O			
	2	Check this box if the organization discor	ntinued its operations or dispo	sed of more	than 25% of its net ass	ets		
⊸ S	3	Number of voting members of the governing body	(Part VI, line 1a)		3	1		
, ~	1 4	Number of independent voting members of the government	verning body (Part VI, line 1b)		4	1		
		Total number of individuals employed in calendar y	ear 2012 (Part V, line 2a)		5	0		
3	6	Total number of volunteers (estimate if necessary)			6	0		
EFU(7 a	Total unrelated business revenue from Part VIII, co	lumn (C), line 12		7a	0.		
_	ь	Net unrelated business taxable income from Form	990 T, line 34		7b	0.		
7				<u> </u>	Prior Year	Current Year		
2013 Tue	8	Contributions and grants (Part VIII, line 1h)			0.	<u>0.</u>		
± v ∠U Revenue	9	Program service revenue (Part VIII line 2g)		0.	0.			
βe' κ	10	Investment income (Part VIII, column (A) lines 3, 4,			135,221.	243,509.		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c	·		0.	0.		
; —		Total revenue add lines 8 through 11 (must equal			135,221.	243,509.		
		Grants and similar amounts paid (Part IX, column (160,831.	<u> </u>		
	14	Benefits paid to or for members (Part IX, column (A		<u> </u>	0.	0.		
ses	15	Salaries, other compensation, employee benefits (F		<u> </u>	56,291.	55,371.		
ens	16a	Professional fundraising fees (Part IX, column (A), li	•		0.	0.		
Expenses	b	Total fundraising expenses (Part IX, column (D), line		0.	2 762	2 0 6 0		
	17	Other expenses (Part IX, column (A), lines 11a 11d,		ļ	2,762.	3,060.		
	18	Total expenses Add lines 13 17 (must equal Part II Revenue less expenses Subtract line 18 from line	x, column (A), line 25)	- -	219,884.	58,431.		
= 6	19	Revenue less expenses Subtract line 18 from line	PRECEIVED	+	-84,663.	185,078.		
t Assets or	<u> </u>	1 1	()		ginning of Current Year 3,807,184.	End of Year 3,992,262.		
ASSC	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26)	AUG 1 9 2013	-	0.			
Set.	– I	Net assets or fund balances Subtract line 21 from	lia	 	3,807,184.	<u> </u>		
	art II	Signature Block	OCDEN	 	J,007,104.	3,332,202.		
		Ities of perjury, I declare that I have examined this return,	metadara accompanyan schedule	s and statent	ents, and to the hest of my	knowledge and helief it is		
		t and complete Declaration of preparer (other than office		y .	· · · · · · · · · · · · · · · · · · ·	moviedge and boiler, it is		
	1	Win owner	T TO SUCCEST SIT THE STREET OF STREET	mon propuror	AUG 0 7	2013		
Sig	n	Signature of officer			Date	2010		
He	-	BANK OF HAWAII, TRUSTE	E					
		Type or print name and title						
		Print/Type preparer's name	Preparer's signature	ŢC	Date Check	PTIN		
Pa	d				sett employed			
Pre	parer	Firm's name			Firm's EIN			
Use	Only	Firm's address						
					Phone no			
Ма	y the If	RS discuss this return with the preparer shown abo	ve? (see instructions)			Yes No		
232	001 12 1	0 12 LHA For Paperwork Reduction Act Notic	e, see the separate instructi	ons.		Form 990 (2012)		
					(1)	1100		
					1/-	01- 170		
					•	9 •		

Forn	1 990 (2 0 12) KAWAIAHAO CHU		99-6044333 Page 2
Pa	rt III Statement of Program Service Acc	omplishments	
	Check if Schedule O contains a response to a	ny question in this Part III	
1	Briefly describe the organization's mission		
		ES FUNDS TO OR FOR THE BENEF!	IT OF KAWAIAHAO
		ARY CORPORATION, FOR THE PURI	
		G, RENOVATING, REPAIRING AND	
	MAIN CHURCH BUILDING KNOWN		
2	Did the organization undertake any significant progra		
-	the prior Form 990 or 990-EZ?	.	Yes X No
	If "Yes," describe these new services on Schedule C)	
3		ificant changes in how it conducts, any program services	Yes X No
•	If "Yes," describe these changes on Schedule O	modification is conducted, any program constraint	
4	_	olishments for each of its three largest program services, a	as measured by expenses
•	· · ·	uired to report the amount of grants and allocations to ot	
	revenue, if any, for each program service reported	and to report the amount of grants and anocations to or	ners the total expenses, and
4a		0 • including grants of \$) (Revi	
40	KAWAIAHAO CHURCH-BUILDING		eriue 3
	RAWATAHAO CHURCH-BUILDING	MAINTENANCE AND RENOVATION	
4b	(Code) (Expenses \$	including grants of \$	enue \$
	/ (Lapenses 5		
			
4c	(Code) (Expenses \$	including grants of \$) (Reve	enue \$
			· · · · · · · · · · · · · · · · · · ·
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grant:	s of \$ (Revenue \$)
 4е	Total program service expenses ▶	20,920.	
- T C			

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	
	If "Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u>X</u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	3		Х
	public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities or have a section 501(h) election in effect			
4		4		_X
_	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4) 501(c)(5), or 501(c)(6) organization that receives membership dues assessments, or		!i	11 .
5	similar amounts as defined in Revenue Procedure 98 19? If 'Yes," complete Schedule C, Part III	5		Х
c	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		i	
6	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes " complete Schedule D. Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			 -
•	the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0	Schedule D. Part III	8_		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for		-	
3	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?		 	
	If "Yes," complete Schedule D, Part IV	9	!	Х
10	Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes' complete Schedule D.		į	
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X. line 12 that is 5% or more of its total		i	
	assets reported in Part X, line 162 if "Yes" complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	! 	!	İ
	assets reported in Part X, line 16? If "Yes," complete Schedule D. Part VIII	11c	<u>i</u> .	_X_
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in		!	!
	Part X line 16? If "Yes, ' complete Schedule D. Part IX	11d	 - 	X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X	11e	ļ	X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		İ]
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D. Part X	11f	 	<u>X</u> _
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes' complete		į	
	Schedule D, Parts XI and XII	12a	ļ	_X_
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			1
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes " complete Schedule E	13	 	<u>X</u>
14a	Did the organization maintain an office employees, or agents outside of the United States?	14a		<u>X</u> _
b	Did the organization have aggregate revenues or expenses of more than \$10 000 from grantmaking, fundraising, business		ı	•
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		1	i
	or more? If "Yes " complete Schedule F, Parts I and IV	14b	 	_X_
15	Did the organization report on Part IX column (A), line 3, more than \$5,000 of grants or assistance to any organization		1	' ••
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		, X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	1		
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	ļ	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX		!	
	column (A) lines 6 and 11e? If 'Yes' complete Schedule G Part I	17_	<u> </u>	_X_
18	Did the organization report more than \$15 000 total of fundraising event gross income and contributions on Part VIII lines		•	' 17
	1c and 8a? If "Yes " complete Schedule G, Part II	18	l	<u>X</u> .
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII. line 9a? If "Yes."			ļ
00	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	 -	_X_
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	L	<u> </u>

99-6044333 Page 4 Form 990 (2012) KAWAIAHAO CHURCH TRUST Part IV Checklist of Required Schedules (continued) Yes No_ Did the organization report more han \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II Х 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX 22 X. 22 column (A), line 29 If "Yes," complete Schedule I, Parts I and III Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees key employees, and highest compensated employees? If "Yes " complete Х 23 Schedule J. 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х 24a Schedule K. If "No", go to line 25 b Did the organization invest any proceeds of tax exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24¢ any tax exempt bonds? 24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes, " complete X 25b Schedule L. Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified Х person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member Х 27 of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L. Part IV instructions for applicable filing thresholds, conditions, and exceptions) X a A current or former officer director trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV Х 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer Х director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? 31 Х 31 If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 \mathbf{X}_{-} 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 Х sections 301 7701 2 and 301 7701 39 If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 X 34 Part V. line 1 Х 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non charitable related organization? 36 Х If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Form 990 (2012)

37

X

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Note. All Form 990 filers are required to complete Schedule O

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI lines 11b and 19?

Part V Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V

				_===
			Yes	No
1a				
b	Enter the number of Forms W 2G included in line 1a. Enter 0 if not applicable.			ŀ
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		Ì	
	(gambling) winnings to prize winners?	1c		<u></u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1	1	
	filed for the calendar year ending with or within the year covered by this return	1		İ
þ	If at least one is reported on line 2a did the organization file all required federal employment tax returns?	2b	ļ	<u> </u>
	Note If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			١
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	ļ	X
b	If "Yes," has it filed a Form 990 T for this year? If "No," provide an explanation in Schedule O	3b		L
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	İ		١
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	 	Х
b	If "Yes," enter the name of the foreign country			1
	See instructions for filing requirements for Form TD F 90 22 1, Report of Foreign Bank and Financial Accounts	1		٠
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	ļ	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	ļ	Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886 T?	5c		L
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
	were not tax deductible?	6b		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).	ļ		,,
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	ļ	X
b	If "Yes." did the organization notify the donor of the value of the goods or services provided?	7b	ļ	<u> </u>
C	Did the organization self exchange, or otherwise dispose of tangible personal property for which it was required	_		_V
	to file Form 8282?	7c	├	X
ď	If 'Yes' indicate the number of Forms 8282 filed during the year 7d	_		v
e	Oid the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
t	Did the organization, during the year pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	-	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098 C? Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	7h	-	
8	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
9	Sponsoring organizations maintaining donor advised funds.	8		
a	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations Enter	30		
	Initiation fees and capital contributions included on Part VIII line 12			
	Gross receipts, included on Form 990 Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes " enter the amount of tax exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	i		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			990	2012

232005 12-10-12 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

	to line 68, 60, 67 700 below, describe the oriodinatarious, processes, or orialing of the control of the contro			
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 1			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0			
b	Enter the number of voting members included in line 1a, above who are independent 1b 1			
2	Did any officer director trustee or key employee have a family relationship or a business relationship with any other			
	officer director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or			
7 4		70		Х
	more members of the governing body?	7a		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			v
	persons other than the governing body?	7b		<u> X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		3.5	
а	The governing body?	8a	X	ļ
b	Each committee with authority to act on behalf of the governing body? N/A	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes " did the organization have written policies and procedures governing the activities of such chapters affiliates			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Χ	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	i		
а	The organization's CEO, Executive Director, or top management official N/A - See Schedule O	15a		
	Other officers or key employees of the organization N/A - See Schedule O	15b		
_	If "Yes" to line 15a or 15b describe the process in Schedule O (see instructions)	.00		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	150		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
Good	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990 T (Section 501(c)(3)s only) a	ıvaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so how) the organization made its governing documents conflict of interest policy and	d finar	icial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	ion 🕨	·	
	BANK OF HAWAII - (808) 694-4525			
	130 MERCHANT ST, HONOLULU, HI 96813			
232006		Corp	990	20.121

		•
orm	990	(2012)

KAWAIAHAO CHURCH TRUST

99-6044333 r

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation
 Enter 0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization n	or any related	orga	nıza	tion	cor	npe	nsat	ed any current officer, c	lirector, or trustee	····
(A) Name and Title	(B) Average hours per week	off	not c unle cer an	Pos heck ss pe	more rson	than is bot or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	institutional trustee	Officer	Key employee	Hignest compensated employee	Former	the organization (W 2/1099 MISC)	organizations (W 2/1099 MISC)	compensation from the organization and related organizations
(1) BANK OF HAWAII	1.00								_	
TRUSTEE			X					55,371.	0.	0 .
									,	
		ļ ——								
232007 12-10-12		<u> </u>								Form 990 (2012

232007 12-10-12

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hı	ghe	st C	ompensated Employe	es (continued)			
(A) Name and title	(B) Average hours per	(do	not c	((Pos heck	C) ition more	i than	one	(D) Reportable compensation	(E) Reportable compensation	1	(F) stimate	
	week (list any hours for	director	x unless person is both an icer and a director/trustee)			r/trus	tee)		from related organizations (W 2/1099-MISC)	amount of other compensation from the		
	related organizations below	Individual trustee or	Institutional trustee	Çē.	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		an	janizat id relat anizati	ted
	line)	르	Sul	Officer	Key	울통	Ē			-		
		ļ										· · · · · · -
					_							
1b Sub-total			<u></u>					55,371.	0	-	·	0.
c Total from continuation sheets to Part Vi d Total (add lines 1b and 1c)	I, Section A					>		0. 55,371.	0	•		0.
 Total number of individuals (including but necessary) compensation from the organization 	ot limited to th	ose	liste	ed at	bove	e) wh	no re	eceived more than \$100	0,000 of reportable			0
3 Did the organization list any former officer,		iste	e, ke	y er	nplo	yee.	or l	highest compensated e	mployee on		Yes	No
Inne 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su	m of reportable		-					·	the organization	3		X
and related organizations greater than \$150 5 Did any person listed on line 1a receive or a	accrue comper	nsat	ion f	rom	any	unr			idual for services	4	-	X
rendered to the organization? // "Yes," com Section B. Independent Contractors								hat recoved more than	\$100,000 of company	5	f	X
Complete this table for your five highest co the organization Report compensation for (A)								the organization's tax				
(A) Name and business	address	NO	ONE	€				(B) Description of s	services	Compe	C) ensatio	n
							-					
												
						·	\dashv					
												
2 Total number of independent contractors (iii		ot lir	nite	d to	_		sted	above) who received m	nore than			
\$100 000 of compensation from the organiz	ation >			-	(990 //	0010

232008 12 10 12

Pa	rt VII	Check if Schedule O con		to any question i	n this Part VIII			[-]
		Check is Schedule O Con	tains a response	to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a		<u> </u>			
our our	b	Membership dues	1b					
S, G	С	: Fundraising events	1c					
ar a	d	Related organizations	1d					
S, E	е	Government grants (contribu	tions) 1e					į
to r	f	All other contributions, gifts, grad	nts, and					•
호		similar amounts not included abo	ove 1f					
d at	g	Noncash contributions included in line	s 1a 1f \$					
<u>0</u> %	h	Total. Add lines 1a-1f						<u> </u>
				Business Code				
e	2 a	·						ļ
er.	þ	·						ļ
n Si	С	:						<u> </u>
e a	d	·		ļ				ļ
Program Service Revenue	е							
۱ ۵		All other program service reve	enue				·	
	9	Total. Add lines 2a 2f						
	3	Investment income (including	g dividends, intere	est, and				
		other similar amounts)		. 🏲	119,572,			119,572
	4	Income from investment of ta	ax exempt bond p	oroceeds -				
	5	Royalties	() D-01	(v) D======1				
		0	(ı) Real	(ii) Personal				
	6 a		ļ					
ĺ	b	5	ļ					
]	c	Net rental income or (loss)	L			1		
		Gross amount from sales of	(i) Securities	(ii) Other				
	, ,	assets other than inventory	2,020,042.	1.7.01.10.				
	b	Less cost or other basis	2.020.042.					
	_	and sales expenses	1,896,105.	ĺ				
	С	Gain or (loss)	123,937,					
	d		L	>	123,937.			123,937
e	8 a	Gross income from fundraising	ng events (not					
		including \$	of					
Other Reven		contributions reported on line	e 1c) See					}
<u>ا</u>		Part IV, line 18	а			1		
Ě	b	Less direct expenses	b					ļ
Ŭ	c	Net income or (loss) from fund	draising events					<u> </u>
	9 a	Gross income from gaming a	ctivities See					
İ		Part IV, line 19	а					
}	b	Less direct expenses	b					}
ĺ	С	Net income or (loss) from gan	ning activities					<u></u>
	10 a	Gross sales of inventory, less	returns					1
}		and allowances	a]]
		Less cost of goods sold	b					
ŀ	С	Net income or (loss) from sale						
ŀ		Miscellaneous Revenu		Business Code				•
1	11 a							
1	b							ļ
	C					ļ		ļ
ļ	đ	All other revenue	1					
j		Total Add lines 11a 11d		P				
232009	12	Total revenue See instructions		<u> </u>	243 509	0.	0.	243 509
12-10-	12							Form 990 (2012)

Form 990 (2012) KAWAIAHAO CHURCH TRUST Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respon			mplete column (A)	
	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII	Total expenses	(B) Program service expenses	Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in	1			
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				· · · · · · · · · · · · · · · · · · ·
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	}			
	trustees, and key employees	55,371.	19,380.	35,991.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				·
10	Payroll taxes				
11	Fees for services (non employees)				
а	Management				
b	Legal				
С	Accounting	2,200.	1,540.	660.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy			····	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	·····			
23	Insurance				
24	Other expenses I temize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule ().				
а	FOREIGN TAX WITHHELD	860.		860.	
b					
С					
ď					
-	All other expenses				
25	Total functional expenses Add lines 1 through 24e	58,431.	20,920.	37,511.	0.
26	Joint costs Complete this line only if the organization				``
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation		1	j	
	Check here if following SOP 98 2 (ASC 956 720)			-	
					

Part X Balance Sheet Check if Schedule O contains a response to any question in this Part X (B) (A) Beginning of year End of year 10,368. 902 1 Cash - non interest bearing 127,319 2 122,883. 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L 7 Notes and loans receivable net 8 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 10a basis Complete Part VI of Schedule D 10c 10b b Less accumulated depreciation 3,678,963 3,859,011. 11 Investments publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 13 13 Investments - program related See Part IV, line 11 Intangible assets 14 14 Other assets See Part IV, line 11 15 15 3,992,262. 3,807,184 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Liabilities Loans and other payables to current and former officers, directors, trustees, 22 key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 24) Complete Part X of 25 Schedule D 0. 0 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 27 27 Unrestricted net assets 28 Temporarily restricted net assets 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 3,992,262. 3,807,184. 30 30 Capital stock or trust principal, or current funds 31 Paid in or capital surplus, or land, building, or equipment fund Ο. 31 0. 32 32 Retained earnings, endowment, accumulated income, or other funds 3,807,184. 33 3,992,262. 33 Total net assets or fund balances 3,807,184 3,992,262. Total liabilities and net assets/fund balances

Form 990 (2012)

<u>Forn</u>	1990 (2012) KAWAIAHAO CHURCH TRUST	<u>99-60</u>	44333	Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>09.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>31.</u>
3	Revenue less expenses Subtract line 2 from line 1	3			<u>78.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,807	<u>7,1</u>	<u>84.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	3,992	2,2	62.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	e O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a		!	
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				1
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audit			-
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ured audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		36		1

Form **990** (2012)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number

KAWAIAHAO CHURCH TRUST	9	9-60 44 3	333				
Part I Reason for Public Charity Status (All organizations must complete this part) See instructions							
the organization is not a private foundation because it is (For lines 1 through 11, check only one box)							
1 A church convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)							
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).							
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)	(iii). Enter	the hospital's	name,				
city, and state							
5 An organization operated for the benefit of a college or university owned or operated by a governmental u	nıt describ	ed in					
section 170(b)(1)(A)(ıv). (Complete Part II)							
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).							
7 An organization that normally receives a substantial part of its support from a governmental unit or from the	ne general	public descri	bed in				
section 170(b)(1)(A)(vi). (Complete Part II)							
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)							
9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, members	hip fees, a	nd gross rece	eipts from				
activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of	ts support	from gross ii	nvestment				
income and unrelated business taxable income (less section 511 tax) from businesses acquired by the org	ganization	after June 30), 1975				
See section 509(a)(2). (Complete Part III)							
10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).							
11 $oxed{X}$ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to ca	rry out the	purposes of	one or				
more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509	3(a)(3). Ch	eck the box t	hat				
describes the type of supporting organization and complete lines 11e through 11h							
a Type I b Type II c Type III · Functionally integrated d X Type III · Non-functionally integrated							
e X By checking this box. I certify that the organization is not controlled directly or indirectly by one or more d							
foundation managers and other than one or more publicly supported organizations described in section 5	09(a)(1) or	section 509(a)(2)				
f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III			·				
supporting organization, check this box			<u></u>				
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following pe	ersons?	٦					
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and	i (III) below	·	Yes No				
the governing body of the supported organization?		11g(i)	X				
(ii) A family member of a person described in (i) above?		11g(u)	X				
(iii) A 35% controlled entity of a person described in (i) or (ii) above?		11g(m)	X				
h Provide the following information about the supported organization(s)							
	le the						
(ii) type of organization for self-fill letter in self-fill letter	Is the ition in col	(vii) Amount	-				
organization (described off lifes 1-9 in cor (i) listed in your organization in cor (i) organ	inized in the support						
(see instructions)) Yes No Yes No Yes	No						
(AWAIAHAO	140						
			0				
CHURCH 99-00752411 X X X			0.				
	-						
otal 1			0.				

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

Schedule A (Form 990 or 990-EZ) 2012

232021 12 04 12

	01111 000 01 000 CE E E 01E	
Part II	Support Schedule for Organizations Described in Sections	170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

<u> </u>	-Air- A. Dudalia Command						··
	ction A. Public Support	r- · · · · · · · · · · · · · · · · · · ·		, -		т	1
Cale	endar year (or fiscal year beginning in)	(a) 2008	(ь) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and						1
	membership fees received (Do not						
	include any "unusual grants ")					<u> </u>	
2	Tax revenues levied for the organ			•			
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge				<u></u>		
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a				į		
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						1
	amount shown on line 11,						
	column (f)						ł
6	Public support. Subtract line 5 from line 4						
	ction B. Total Support		•		•	·	
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	N 1				137	
8	Gross income from interest.						
	dividends payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
Ū	activities, whether or not the				ļ	}	
	business is regularly carried on				ł	1	
10	Other income Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc (see instructi	ons)	·	L	12	k
	First five years. If the Form 990 is for	•	•	rd fourth or fifth to	av voar an a noctio		
13	organization, check this box and stop		s mst, second, trii	o, louitii, oi ilitii ta	ax year as a section	11 301(0)(3)	
Sec	ction C. Computation of Publi	ic Support Pe	rcentage				
	Public support percentage for 2012 (li			column (fl)		14	%
	Public support percentage from 2011			30.0 (1),		15	
	33 1/3% support test - 2012. If the o			n line 13 and line	14 is 33 1/3% or r		
	stop here. The organization qualifies				14 13 33 17370 31 1	nore, encer mis bi	► □
ь	33 1/3% support test - 2011. If the o		•		line 15 is 33 1/30	or more check th	are box
~	and stop here. The organization quali				iiile 13 i3 33 1/3/	or more, check to	IIS DOX
17a		-			12 160 or 16b	and line 14 is 100/	-
a	10% -facts-and-circumstances test						
	and if the organization meets the "facts and circumstances"					it iv now the organ	iization _ 1
L	meets the "facts and-circumstances"					479	السا 🗖
U	10% -facts-and-circumstances test						
	more, and if the organization meets the						
10	organization meets the "facts and-circ						>
10	Private foundation. If the organization	i ula not check a	box on line 13, 16	a, 16b, 1/a, or 17b			
					Scho	dule A /Form 990	or 000-E71 2012

Schedule A (Form 990 or 990 EZ) 2012 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and						
membership fees received (Do not			}			ļ
include any "unusual grants ")						
2 Gross receipts from admissions,						
merchandise sold or services per						İ
formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to		•				
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1 2, and						
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that exceed the greater of \$5 000 or 1% of the						
amount on line 13 for the year				ļ		
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)			<u> </u>	<u> </u>	<u> </u>	<u> </u>
Section B. Total Support		I				T
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6			 	<u> </u>	-	ļ
10a Gross income from interest, dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources				 		
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975				<u> </u>	<u> </u>	
c Add lines 10a and 10b				<u> </u>		
11 Net income from unrelated business activities not included in line 10b.						
whether or not the business is	į					
regularly carried on				ļ		
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV)			 	 	 	
13 Total support (Add lines 9 10c 11 and 12)			1			
14 First five years. If the Form 990 is for	the organization's	s first, second, this	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organi	zation,
check this box and stop here Section C. Computation of Publi	ic Support Pe	rcontago				
15 Public support percentage for 2012 (li			(0)	· · · · · · · · · · · · · · · · · · ·	T.5	
16 Public support percentage from 2011		•	column (i))		15	
Section D. Computation of Inves					16	%
17 Investment income percentage for 20					17	<u>-</u>
18 Investment income percentage from 2		· · · · · · · · · · · · · · · · · · ·	ne ro, colarin (i)		18	
19a 33 1/3% support tests - 2012. If the			on line 14, and line	e 15 is more than		
more than 33 1/3%, check this box ar	=					., 13 HOL
b 33 1/3% support tests - 2011. If the	· ·	= -				and
line 18 is not more than 33 1/3%, che	_					
20 Private foundation If the organization					=	

232023 12-04-12

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

TRUSTEE.

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization

KAWAIAHAO CHURCH TRUST

Employer identification number 99-6044333

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE ORGANIZATION DISTRIBUTES FUNDS TO OR FOR THE BENEFIT OF KAWAIAHAO
CHURCH, A HAWAII ELEEMOSYNARY CORPORATION, FOR THE PURPOSES OF
MAINTAINING, RECONSTRUCTING, RENOVATING, REPAIRING AND PRESERVING THE
MAIN CHURCH BUILDING KNOWN AS KAWAIAHAO CHURCH. FUNDS MAY ALSO BE
DISTRIBUTED TO KAWAIAHAO CHURCH FOR GENERAL OPERATIONS, SALARIES,
PROMOTION OF RELIGIOUS BELIEFS AND OTHER THINGS REASONABLY RELATED TO
PRESERVING THE KAWAIAHAO CHURCH BUILDING AS A RELIGIOUS AND HISTORICAL
SITE.
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS PREPARED BY THE TAX
DEPARTMENT OF BANK OF HAWAII AS CORPORATE TRUSTEE. BEFORE IT IS FILED, THE
TAX RETURN IS REVIEWED BY AN ADMINISTRATIVE OFFICER OF THE CORPORATE

FORM 990, PART VI, SECTION B, LINE 12C: BANK OF HAWAII, THE CORPORATE

TRUSTEE, HAS A CONFLICT OF INTEREST POLICY THAT APPLIES TO ALL EMPLOYEES,

INCLUDING THE TAX OFFICERS, TAX CONSULTANTS AND ADMINISTRATIVE OFFICERS.

BANK OF HAWAII REQUIRES ALL EMPLOYEES TO PARTICIPATE IN REGULARLY SCHEDULED

TRAINING RELATED TO COMPLIANCE WITH CONFLICT OF INTEREST AND OTHER RELATED

POLICIES.

FORM 990, PART VI, SECTION B, LINE 15: FORM 990, PART VI, SECTION B, LINE

15: THE TRUST DOCUMENT DESIGNATES THAT THE TRUSTEE IS TO RECEIVE

REASONABLE COMPENSATION IN ACCORDANCE WITH THE TRUSTEE'S PUBLISHED FEE

SCHEDULE. IN ESTABLISHING THE TRUSTEE'S FEE SCHEDULE, CONSIDERATION WAS

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

KAWAIAHAO CHURCH TRUST	99-6044333					
GIVEN TO THE DUTIES, LIABILITIES, AND EXPERTISE OF THE CO	RPORATE TRUSTEE,					
AS WELL AS TO COMPARABLE FEES FOR SIMILAR SERVICES PROVID	ED BY SIMILAR					
ORGANIZATIONS. THE PROCESS OF ESTABLISHING AN APPROPRIAT	E FEE AS					
"REASONABLE" WAS ALSO PRESENTED TO THE HAWAII ATTORNEY GE	NERAL, WHOSE					
OFFICE IS RESPONSIBLE FOR THE OVERSIGHT OF HAWAII'S CHARI	TABLE TRUSTS.					
FORM 990, PART VI, SECTION C, LINE 19: THE TRUST DOCUMENT	AND ACCOUNT					
STATEMENTS ARE PROVIDED TO THE BENEFICIARY ORGANIZATION I	DENTIFIED IN THE					
TRUST DOCUMENT (KAWAIAHAO CHURCH). BANK OF HAWAII, CORPO	RATE TRUSTEE, HAS					
A CONFLICT OF INTEREST POLICY, WHICH IS AVAILABLE TO THE	BENEFICIARY					
ORGANIZATION UPON REQUEST. AUDITED FINANCIAL STATEMENTS ARE NOT PREPARED						
FOR THE TRUST.						
FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECT	ORS, ETC:					
BANK OF HAWAII - 130 MERCHANT ST, HONOLULU, HI 96813						
						
	<u> </u>					

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

2012 Open to Public Inspection OMB No 1545-0047

Employer identification number 99-6044333 Direct controlling entity Identrincation of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV. line 34 because it had one or more related tax-exempt organizations during the tax year.) End of-year assets <u>e</u> Total income Ē ► See separate instructions identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) Legal domicile (state or foreign country) ▶ Attach to Form 990. Primary activity KAWAIAHAO CHURCH TRUST Name address, and EIN (if applicable) of disregarded entity Name of the organization Part II Part

(g) Section 512(b)(13) ŝ × controlled entity Yes Direct controlling X Y status (if section Public charity 501(c)(3)) Exempt Code 170(B)(1)(A) section Legal domicile (state or foreign country) HAWAII Primary activity CHURCH Name, address, and EIN of related organization KAWAIAHAO CHURCH - 99-0075241 957 PUNCHBOWL STREET 96813 HI HONOLULU

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

18

Schedule R (Form 990) 2012

99-6044333 Page 2

Schedule R (Form 990) 2012 KAWAIAHAO CHURCH TRUST

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

(a)	(p)	(5)	(p)		(e)	€	(ē)		3	Ξ	3	3
Name, address. and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predomina (related, excluded fro sections	t income related, tax under 12-514)	Share of total income	end as		oortion sations?	Code V-UBI amount in box 20 of Schedule K 1 (Form 1065)	General or managing partner?	Perc
					1		-				_	
		<u>-</u>										
part iv identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ganizations Taxable a	as a Corport	oration or Trust (Co	omplete if th	e organizatior	n answered "Y	es" to Form 9	90, Part IV.	line 34 bi	ecause it had c	one or mo	re related
(e)			(£)	(0)	Ð		(e)	€	_	(b)	ε	Ξ
III bac saabbe emely		2		0100000	0.00			Chare of total		Ţ	arcentare	
of related organization	<u></u>		Frinary activity	(state or foreign foreign			(C corp S corp.	income		_	ownership	contro
				conunt)	1				+			Yes No
												
							+		-			
				-								
						-						
				-			·					_
				,		_						
- }				-		-	4		$\frac{1}{1}$			
222162 2 10 12				7						Schedul	le R (Forr	Schedule R (Form 990) 2012

Page 3

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			C/XI 11 - 24 - C/X	Yes	Š
a Receipt of (i) interest (ii) annuities (iii) rovatties or (iv) rent from a controlled entity	מומויין סויס חיומי פוי	eiateu olgaliizatiolis iisteu		<u> </u>	×
b Gift, grant or capital contribution to related organization(s)				Đ	×
c Gift, grant, or capital contribution from related organization(s)				10	×
d Loans or loan guarantees to or for related organization(s)				14	×
e Loans or loan guarantees by related organization(s)				1e	×
					;
f Dividends from related organization(s)				=	×
g Sale of assets to related organization(s)				19	×
h Purchase of assets from related organization(s)				÷	×
 Exchange of assets with related organization(s) 				-	×
 Lease of facilities, equipment, or other assets to related organization(s) 				;=	×
k Lease of facilities. equipment, or other assets from related organization(s)				¥	×
l Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			=	×
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			13	×
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	tion(s)			t t	×
 Sharing of paid employees with related organization(s) 				2	×
p Reimbursement paid to related organization(s) for expenses				-	×
				19	×
					>
r Other transfer of cash or property to related organization(s)				- +	٩×
	who must complete t	he line including covered	relationships and fransaction thresholds	2	
	(q)	(၁)	(P)		
Name of other organization	Transaction type (a·s)	Amount involved	Method of determining amount involved	t involved	
(1)					
(2)					
(3)					
(4)					
					ĺ
(5)					
(6)					
232163 17 10 17	20		Schedu	Schedule R (Form 990) 2012	2012

99-6044333

Page 🕏

Schedule R (Form 990) 2012 KAWAIAHAO CHURCH TRUST

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

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

(¥)	Percentage ownership					Schedule R (Form 990) 2012
3	General or managing partner?					 For
(3)	Code V-UBI smount in box 20 of Schedule K-1 (Form 1065)			-		Schedule F
Ξ	Disp oper tonate allocations?					
F	A language				 	
(6)	Share of end-of year assets					
(j)	Share of total					
(e)	Are all 501(c)(3) 0.005 (4) Yes No					
(p)	Predominant income (related, unrelated, excluded from tax under section 512-514) ▼					
(c)	Legal domicile (state or foreign country)					
(b) (c) (d)	Primary activity					
(a)	Name, address, and EIN of entity					

Schedule R	(Form 990) 2012	KAWAIAHAO CHURCH TRUST	99-6044333 Page 5
Part VII	(Form 990) 2012 Supplemental Infor	mation	
	Complete the part to pro	vide additional information for responses to questions on Schedule R (see instru	ctions)
	Complete this part to bro	viae additional information for responses to questions on someonie in (see institu	onoria)
			
		· · · · · · · · · · · · · · · · · · ·	
	•		-
		 	
-			· · · · · · · · · · · · · · · · · · ·
	 		
		, <u>, , , , , , , , , , , , , , , , , , </u>	
			
			
	···		

* *KAWAIAHAO CHURCH TRUST FORM 990, PART X, LINE 11 FOR YEAR ENDED 12/31/2012

Description	Units	Book Value
AT&T INC	1,130 000	32,714
ABERDEEN INTERNATIONAL EQUITY FUND INST	32,212 909	385,777
ABERDEEN CORE FIXED INCOME FUND CL I	41,496 789	450,592
ABERDEEN ASIA-PACIFIC EX-JAPAN EQUITY FUND INSTITUTIONAL CLASS	12,855 536	132,583
AGILENT TECHNOLOGIES INC	100 000	3,878
ALLSTATE CORP	110 000	3,392
ALTRIA GROUP INC	1,010 000	25,976
AMERICAN ELECTRIC POWER CO	210 000	8,368
AMERICAN EXPRESS CO	270 000	12,086
AMERISOURCEBERGEN CORP	160 000	4,819
APACHE CORP	60 000	5,883
APPLE INC	40 000	9,619
ASTRAZENECA PLC PLC SP ADR	770 000	36,865
BCE INC	760 000	30,189
BANK OF NEW YORK MELLON CORP	170 000	4,342
BAXTER INTL INC	110 000	5,271
BEAM INC	60 000	2,033
BERKSHIRE HATHAWAY INC CL B	210 000	16,863
BORGWARNER INC	50 000	3,687
BRISTOL MYERS SQUIBB CO	890 000	24,704
CBS CORPORATION CL B	110 000	4,116
CENTURYLINK INC	830 000	30,857
CHEVRON CORP	160 000	12,470
COACH INC	160 000	9,053
COCA COLA CO	230 000	7,219
COGNIZANT TECH SOLUTIONS CORP	160 000	9,672
COLUMBIA ACORN INTERNATIONAL FUND CL Z	2,854 962	102,615
CONOCOPHILLIPS	650 000	31,905
CUMMINS ENGINE INC	130 000	11,898
DEERE & CO	60 000	4,998
DOMINION RESOURCES INC /VA	170 000	8,099
DOVER CORP	100 000	4,876
DUKE ENERGY CORP	490 000	28,149
EMC CORP	520 000	10,756
EBAY INC	120 000	2,533
EXPEDITORS INTL WASH INC	250 000	10,378
EXPRESS SCRIPTS HOLDING CO	330 000	15,228
FREEPORT MCMORAN COPPER & GOLD CLASS B	190.000	6,388
GENERAL ELECTRIC CO	500.000	8,370
GILEAD SCIENCES INC	130 000	4,482
GLAXOSMITHKLINE PLC ADR	790 000	33,811
GOLDMAN SACHS GROUP INC	30 000	4,213
GOOGLE INC CL A	20 000	10,325
HCP INC	260 000	10,960
HALLIBURTON CO	120 000	4,486
HEALTH CARE REIT INC	240 000	11,951
HEINZ H J CO	590 000	30,984
HESS CORP	100 000	5,653
HONEYWELL INTERNATIONAL INC	90 000	3,479

* *KAWAIAHAO CHURCH TRUST FORM 990, PART X, LINE 11 FOR YEAR ENDED 12/31/2012

Description	Units	Book Value
INTEL CORP	190 000	3,608
JP MORGAN CHASE & CO	160.000	5,758
JANUS TRITON FUND CL I	8,878.051	133,101
JOHN HANCOCK III DISC M/C-IS	12,535 318	162,959
JOHNSON & JOHNSON	330.000	21,070
KIMBERLY CLARK CORP	220 000	14,317
KOHL'S CORP	70 000	3,475
KRAFT FOODS GROUP INC	560 000	24,836
LABORATORY CORP AMERICA HOLDINGS	40 000	3,014
LILLY ELI & CO	530 000	19,526
NATIXIS LOOMIS SAYLES LTD GOV AND AGCY FD CL Y	4,899 238	58,482
LORILLARD INC	80 000	8,460
MAINSTAY HIGH YIELD CORP BOND FUND CL I	4,802 858	27,823
MCDONALDS CORP	230 000	18,926
MERCK & CO INC	710 000	27,678
MICROSOFT CORP	150 000	3,624
MONSTER BEVERAGE CORP	120 000	6,556
THE MOSAIC COMPANY	60 000	3,526
NATIONAL GRID PLC SP ADR	670 000	33,176
NATIONAL OILWELL VARCO INC	90 000	6,526
NEXTERA ENERGY INC	80 000	4,297
OCCIDENTAL PETROLEUM CORP	50 000	4,108
ORACLE	130 000	3,596
PPL CORPORATION	630 000	17,378
PEPSICO INC	130 000	8,137
PERRIGO CO	60 000	3,420
PHILIP MORRIS INTERNATIONAL	210.000	13,023
T ROWE PRICE INSTITUTIONAL EMERGING MARKETS EQUITY FUND	5,084.589	157,175
PRICELINE COM INC	10 000	6,310
PROCTER & GAMBLE CO	200 000	11,926
PUBLIC SERVICE ENT GROUP INC	150 000	4,915
QUALCOMM INC	240 000	10,748
QUEST DIAGNOSTICS INC	40 000	1,914
RS GLOBAL NATURAL RESOURCES FUND CL Y	6,040 530	225,625
REYNOLDS AMERICAN INC	730 000	27,699
T ROWE PRICE INSTITUTIONAL FLOATING RATE FUND CL I	4 294 419	41,599
ROYAL DUTCH SHELL PLC ADR B	520 000	34,594
SPDR GOLD TRUST	670 000	111,636
SANDISK CORP	90 000	4,603
SCHLUMBERGER LTD	120 000	8,855
CHARLES SCHWAB CORP	810 000	9,656
SOUTHERN CO	750 000	30,146
STERICYCLE INC	80 000	5,099
TEMPLETON GLOBAL BOND FUND CL AD	4,838.300	64,376
THIRD AVENUE REAL ESTATE VALUE FUND CL IS	4,107 821	92,344
TIME WARNER CABLE INC	50 000	2,939
TOTAL SA SP ADR	710 000	36,050
US BANCORP	130 000	2,740
UNILEVER PLC SPONSORED ADR	250 000	7,925

KAWAIAHAO CHURCH TRUST FORM 990, PART X, LINE 11 FOR YEAR ENDED 12/31/2012

99-6044333

Description	Units	Book Value
UNITED TECHNOLOGIES CORP	60.000	4,339
VANGUARD TOTAL BOND MARKET ETF	6,070 000	511,743
VANGUARD LONG-TERM TREASURY FUND CL ADM	4,367 342	58,297
VARIAN MEDICAL SYSTEMS INC	150 000	8,478
VERIZON COMMUNICATIONS	810 000	28,785
VERISK ANALYTICS INC CL A	170 000	5,806
VISA INC CL A SHARES	60.000	4,214
VODAFONE GROUP PLC SP ADR	1,290 000	34,333
WAL-MART STORES INC	110 000	5,932
WATSON PHARMACEUTICAL	60 000	2,457
WELLS FARGO COMPANY	280 000	7,680
WINDSTREAM CORP	660 000	8,112
Total Portfolio		3,859,011

STATEMENT - INV pg 3 of 3

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

Form 8868 (Rev 1 2013)

If you a	re filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box			► LXJ
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part il (on page 2 of t	this form)		
Do not co	omplete Part II unless you have already been granted a	an automa	itic 3 month extension on a previous	ly filed Fo	rm 8868	
Electroni	c filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tim	ne to file (6	6 months for a	corporation
required t	o file Form 990-T), or an additional (not automatic) 3 mo	nth extens	sion of time. You can electronically fi	le Form 8	868 to request	an extension
of time to	file any of the forms listed in Part I or Part II with the exi	ception of	Form 8870, Information Return for 1	ransfers /	Associated Wil	th Certain
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details of	n the elec	ctronic filing of	this form,
visit www	irs gov/efile and click on e-file for Charities & Nonprofits	:				
Part I	Automatic 3-Month Extension of Time	Only s	submit original (no copies nei	eded)		
A corpora	tion required to file Form 990-T and requesting an autor	natic 6 mc	onth extension - check this box and o	complete		
Part I only	,					
All other o	corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time	
to file inco	ome tax returns					
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	r identification	number (EIN) or
print						, ,
	KAWAIAHAO CHURCH TRUST				99-604	4333
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions	Social security number (SSN)		
tiling your	P.O. BOX 3170, DEPT. 715				•	, ,
return See instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions			
	HONOLULU, HI 96802-3170	.				
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
Applicati	on .	Return	Application			Return
is For		Code Is For		Code		
					07	
Form 990					08	
		03	Form 1041 A			09
Form 990					10	
	T (sec 401(a) or 408(a) trust)	05	Form 5227			
		06	Form 6069		11	
Form 990	T (trust other than above) BANK OF HAWAII	100	Form 8870			
● Thaha	oks are in the care of > 130 MERCHANT ST	n _ 137	ONOTITE UT 06012			
	one No ► (808) 694-4540	<u> </u>				
	organization does not have an office or place of business	an tha Lle	FAX No			
				f there is for		
. г	s for a Group Return, enter the organization's four digit	1				
box 🕨 [ch a list with the names and EINs of		ers the extens	ion is for
1 I red	quest an automatic 3 month (6 months for a corporation		•		Th	
		t organiza	tion return for the organization name	a above	The extension	
	or the organization's return for \overline{X} calendar year 2012 or					
			al anadono			
- L	tax year beginning	, an	a enaing			
2 If th	e tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on Initial return I	Final retur	n	
3a If th	is application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			
non	nonrefundable credits. See instructions.				0.	
b If th	is application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
esti	mated tax payments made Include any prior year overp	ayment al	lowed as a credit	3b	\$	0.
c Bala	ance due. Subtract line 3b from line 3a Include your pa	yment with	h this form, if required,			:
by u	ising EFTPS (Electronic Federal Tax Payment System)	See instru	gtions	3c	s	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453 EO and Form 8879 EO for payment instructions

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.