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DLN: 93493132042154

Department of the Treasury

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)

2012

OMB No 1545-0047

Open to Public

A For the	2012 cale	endar year, or tax year beginn	ing 07-01-2012 , 2012, and ending 06	5-30-2013				
B Check if a	applicable	C Name of organization PUNAHOU SCHOOL			D Emplo	yer identi	fication number	
Address ch	_	Doing Business As			99-00	073523		
Name cha	-							
Initial retu —		Number and street (or P O box if 1601 PUNAHOU STREET	mail is not delivered to street address) Room	/suite	E Telepho	one numbe	r	
Terminate —		Suite			(808)	944-57	11	
Amended —		City or town, state or country, and HONOLULU, HI 96822	d ZIP + 4					
Application	on pending				G Gross r	receipts \$ 1	44,430,644	
		F Name and address of p	rıncıpal officer		s this a group ffiliates?	return fo	r □ Yes 🔽 No	
		1601 PUNAHOU STREET			illiates.		1 16514 110	
		HONOLULU,HI 96822					d?	
Tax-exen	mpt status	▼ 501(c)(3)	(insert no) 4947(a)(1) or 527	☐ I [†]	"No," attach	nalist (s	ee instructions)	
J Website	e: ► www	v PUNAHOU EDU		H(c) G	Group exempt	tion numb	er ►	
			. Cou b	1.,,) F2 M C		
Part I		Corporation Trust Associa	tion Other -	L Year	of formation 18	353 M St	ate of legal domicile HI	
		-	sion or most significant activities				_	
kelliance	GRADES	K-12	CURRICULAR ACTIVITIES MORE TI					
	Check th	is box 🔰 if the organization	discontinued its operations or dispose	d of more tha	an 25% of its	net asse	ets	
6 3 4 4 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Number	of voting members of the gove	rnıng body (Part VI, line 1a)			3	19	
4			s of the governing body (Part VI, line 1			4	1.	
5 5		mber of individuals employed i		5	2,10			
		•	f necessary)			6 7a	5,000 -211,78:	
			e from Form 990-T, line 34			7b	-211,78	
					Prior Year	1 7 1	Current Year	
8	Contril	outions and grants (Part VIII,	line 1h)		9,332,	398	10,227,006	
를 9	Progra	m service revenue (Part VIII,	line 2g)		78,517,	552	82,412,916	
9 10 11 11 11 11 11 11 11 11 11 11 11 11			mn (A), lines 3, 4, and 7d)		2,999,		13,362,141	
_ 11), lines 5, 6d, 8c, 9c, 10c, and 11e)		2,145,	971	2,495,102	
12			1 (must equal Part VIII, column (A),	ille	92,995,	158	108,497,165	
13			rt IX, column (A), lines 1-3)		4,362,	441	5,106,577	
14			t IX, column (A), line 4)			0	0	
g 15	Salarıe 5–10)		yee benefits (Part IX, column (A), line	S	64,443,	244	67,594,306	
\$\frac{16a}{2} 16a	Profes	sional fundraising fees (Part I	X, column (A), line 11e)			0	18,055	
ੜੇ∣ ⊾	Total fur	ndraising expenses (Part IX, column i	(D), line 25) • 2,681,241	_				
_ 17	Other	expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		24,506,895 24,247,6			
18			nust equal Part IX, column (A), line 25		93,312,580 96,966,6			
<u>19</u>	Reveni	<u>ie less expenses. Subtract lin</u>	e 18 from line 12		-317,		11,530,564	
හිදු මුදු				begin	ning of Curre Year		End of Year	
Secondary 20 21 22	Total a	issets (Part X, line 16)			363,001,	588	368,768,617	
절 21					48,161,		42,598,871	
Z교 22 Part II		sets or fund balances Subtrac ature Block	ct line 21 from line 20		314,840,	456	326,169,746	
Jnder pena	alties of pedge and bas any kr	perjury, I declare that I have e pelief, it is true, correct, and co nowledge ture of officer	examined this return, including accompomplete Declaration of preparer (other					
	I F Type	or print name and title						
			Drawa wada ay	I Date 1		DTTN		
		rint/Type preparer's name	Preparer's signature	Date	Check If self-employed	PTIN		
Paid Prepare	P F		Preparer's signature	Date		1		

Honolulu, HI 968124150

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

✓ Yes ☐ No

	990 (2012)					Page 4
Par		t of Program Servi		lishments Jestion in this Part III		√
1		e organization's mission				
PUN CON EAC THE APP PUN CHII ACA THE	AHOU IS COMMITT SISTENT WITH THE H INDIVIDUAL, DE M FOR COLLEGE AN RECIATION FOR TH AHOU SCHOOL IS T LOREN FROM EVERY DEMIC SUPPORT S SCHOOL IS DIVIDE	ED TO PROVIDE AN E CHRISTIAN PRINCIP VELOP INTELLECTUAI ID FOR CHALLENGES F IE ARTS, APPRECIATE THE LARGEST INDEPE RACIAL, RELIGIOUS	NVIRONMENT LES ON WHICE , ACADEMICE FACING THEM CULTURAL D NDENT SCHO , SOCIAL AND TELY 600, SER DIVISIONS T	CH PUNAHOU WAS FOU AND PHYSICAL POTEN NOW AND IN THE FUT DIVERSTIY AND DEVEL OL IN AMERICA IT IS DECONOMIC GROUP IN RVING ABOUT 3,750 ST	AN DEVELOP MORAL AND SP NDED, AFFIRMING THE WOR ITIAL TO THE FULLEST DEGI URE, DEVELOP AND ENHAN OP SOCIAL RESPONSIBILTY A PRIVATELY OPERATED SO I HAWAII PUNAHOU HAS FA UDENTS FROM KINDERGAR KINDERGARTEN TO GRADE 8	TH AND DIGNITY OF REE, PREPARING CE CREATIVITY AND FOUNDED IN 1841, CHOOL SERVING ACULTY AND FEN TO GRADE 12
2				ervices during the year w	hich were not listed on	
		or 990-EZ? nese new services on So	· · · ·			┌ Yes ┌ No
3	Did the organization services?	n cease conducting, or r	nake significar	nt changes in how it cond	ucts, any program 	┌ Yes ┌ No
4	Describe the organi expenses Section !	zation's program servic	e accomplishm) organizations	s are required to report th	e largest program services, as ne amount of grants and allocat	
4a	PERCENT OF PUNAHOL GRADE 8, AND THE AC OVERSEEING APPROXI OF THESE GROUPS OF CASE MIDDLE SCHOOL DESIGNED SPECIFICAL DEVELOPMENTAL PERIGATHERING SPACES D	U GRADUATES GO ON TO ATT CADEMY, GRADES 9-12 THE I MATELY 2,000 STUDENTS TH CHILDREN SUPPLEMENTAL WAS COMPLETED IN 2005 F LY TO MEET THE INTELLECTU OD THROUGH MORE INTIMAT ESIGNED TO ENCOURAGE CO JDE CREDITS IN ENGLISH, SO	END COLLEGE CUIUNIOR SCHOOL (IESE SMALLER, SE EDUCATION, SUCIOR GRADES 6-8 JAL AND SOCIAL NIE ORGANIZATION OLLABORATION AN	JRRENTLY, PUNAHOU IS DIVID K-8) IS COMPOSED OF THREE LF-CONTAINED SECTIONS FOR HAS OUTDOOR AND CAMP EXPINITE EXPANDED AREA OF CAM IEEDS OF EARLY ADOLESCENTS AL STRUCTURES, FACILITIES IN INTEGRATED LEARNING IN	5,106,577) (Revenue \$ HOOL OFFERING EDUCATIONAL EXCE ED INTO THE JUNIOR SCHOOL, KINDI SECTIONS WITH A PRINCIPAL AND F R K-2, 3-5 AND 6-8 ARE DESIGNED TO PERIENCES, ARE ALSO OFFERED IN TI PUS WAS DESIGNED TO SUPPORT AN THE LEARNING ENVIRONMENT REC MORE OPEN TO THE ENVIRONMENT A THE ACADEMY, COLLEGE PREPARATO IGN LANGUAGE, PHYSICAL EDUCATION	ERGARTEN THROUGH IVE SUPERVISORS D MEET THE SPECIAL NEEDS HE JUNIOR SCHOOL THE EDUCATION PROGRAM OGNIZES THIS ND CLASSROOM AND RY GRADUATION
4b	(Code) (Expenses \$	4,792,536	ıncludıng grants of \$) (Revenue \$	3,517,706)
		ERS A VARIED AND ENRICHE		CADEMICS, SPORTS, MUSIC AI D DURING THE REGULAR SCH	ND DANCE THE PROGRAMS STIMULAT	
4c	(Code) (Expenses \$	3,713,096	ıncludıng grants of \$) (Revenue \$	3,105,323)
	CONFIDENCE AND LEA	DERSHIP WITH A FOCUS ON	EXPERIENTIAL, H	HOU EXPERIENCE, HELPING ST IANDS-ON, AND COLLABORATIN LL-ROUNDED ARTS PROGRAM	TUDENTS DEVELOP A SENSE OF RESPO VE LEARNING, THE CURRICULUM IS S	DNSIBILITY, COMMITMENT, UPPORTED BY A WIDE
	(Code ATHLETICS) (Expenses \$	2,922,372	including grants of \$) (Revenue \$	83,720)
	(Code MUSIC DEPARTMENT 8) (Expenses \$ & THEATER PROGRAMS	577,348	ıncludıng grants of \$) (Revenue \$	20,128)
	(Code STUDENT ACTIVITIES) (Expenses \$	175,238	ıncludıng grants of \$) (Revenue \$	47,573)

Other program services (Describe in Schedule O)

Total program service expenses ►

3,674,958 including grants of \$

84,603,299

4d

(Expenses \$

151,421)

) (Revenue \$

Part IV Checklist of Required Schedule
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Yes	
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
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	Yes	
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, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Νo
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 🤨	13	Yes	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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 Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

G.	Statements Regarding Other IRS Fillings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 126			140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1 c	Yes	
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
•	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
)	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
)	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
1	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
2	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	- 55		
•		5c		
	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		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7 c		No
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
J	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
1	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		No
	Sponsoring organizations maintaining donor advised funds.	-		INC
	Did the organization make any taxable distributions under section 4966?	9a		No
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
	Section 501(c)(7) organizations. Enter			140
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
)	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
3	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			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	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			
:	Enter the amount of reserves on hand			
ì	Did the organization receive any payments for indoor tanning services during the tax year?	14a	İ	No
	If "Yes " has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule 0	14h		

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
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	Yes	
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8				
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	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		No
Se		eveni	ıe Cod	e.)
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	<i>ie Cod</i> Yes	e.) No
		evenu 10a		
10a	Did the organization have local chapters, branches, or affiliates?			No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes	No No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed►HI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available. Check all that apply
 - ☐ Own website ☐ Another's website ☐ Upon request ☐ 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 financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►JILL KAWANO 1601 PUNAHOU STREET HONOLULU, HI (808) 944-5711

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

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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A)	(B)								(F)	
Name and Title	Average hours per week (list	more pers	than on is	one bot	box h ar	c, unle office	ess er	Reportable compensation from the	Reportable compensation from related	Estimated amount of other
	any hours for related	and a director/trus						organization	organizations	compensation from the
	organizations	Individual trustee or director	ĕ	Officei	Key employee	emt Higi	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization
	below dotted line)	# S	Statura Uni	<u>윤</u>	9	hesi Joy	ner l			and related
	docted line)	호현	100		턍	88	,			organizations
		E	Institutional Truste		90	B				
		87	TBI.			ens:				
			ě			Highest compensated employee				
(1) ETHAN DB ABBOTT	1 0									
TRUSTEE	0.0	X						0	0	0
(2) W DAVID P CAREY III	1 0									
TRUSTEE	0.0	X						0	0	0
(3) STEPHEN M CASE	10	,								
TRUSTEE	0.0	X						0	0	0
(4) HAN H SONNY CHING	1 0	V						0	0	0
TRUSTEE	0.0	X						0	0	0
(5) MARGARET M COLE	1 0	х		Х				0	0	0
ASSISTANT SECRETARY	0 0	_ ^		^				0	O	0
(6) DEBORAH K BERGER	1 0	x						0	0	0
TRUSTEE	0.0								Ŭ	
(7) WENDY B CRABB	1 0	l x						0	0	0
TRUSTEE	0 0									_
(8) JUDITH M DAWSON	1 0	×						0	0	0
TRUSTEE	0.0									
(9) MARK H FUKUNAGA	1 0	x		х				0	0	0
SECOND VICE CHAIR - FINANCE	0.0									
(10) RONALD D HIGGINS II	1 0	x						0	0	0
TRUSTEE (11) CLAIRE O JOHNSON	0.0									
	1 0	x		х				0	0	0
CHAIR OF THE BOARD (12) CONSTANCE H LAU	00									
, ,		х						0	0	0
TRUSTEE (13) WARREN KK LUKE	10									
		х						0	0	0
TRUSTEE (14) DUNCAN MACNAUGHTON	10	-								
FIRST VICE CHAIR	0.0	х		х				0	0	0
(15) RANDOLPH G MOORE	1 0	 								
TRUSTEE	0 0	Х						0	0	0
(16) PIERRE M OMIDYAR	1 0									
TRUSTEE	0.0	X						0	0	0
(17) MICHAEL A PIETSCH	1 0	<u> </u>								
TRUSTEE	0 0	X						0	0	0
	·				_					Form 990 (2012)

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

TRUSTIE	(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h ar or/tr	che lice Highest compensated	ess er e)	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
TRUSTEE	(40) 15550 F.W. WATHINGS			Œ.			<u> </u>				
Column C	(18) JEFFREY N WATANABE	1 0	х						0	0	O
SECRETARY											
A00	(19) KATHLEEN SULLIVAN WO	1 0	x		×				0	0	a
PRESIDENT		_									
PRESIDENT	(20) JAMES K SCOTT	40 0			l x				368.983	0	116.943
Vice President & Treasurer		0 0							,		,
VICE PRESIDENT & TREASURER 0 0	(21) JOHN D FIELD JR	40 0			l x				244.043	0	27.221
ASST TREASURER & CONTROLLER (23) KEVIN E CONWAY (24) 0	VICE PRESIDENT & TREASURER	0 0							21.,013		27,222
ASST TREASURER & CONTROLLER (23) KEVIN E CONWAY PRINCIPAL - ACADEMY (24) MICHAEL T WALKER 40 0 X 228,154 0 71,946 PRINCIPAL - JUNIOR SCHOOL (25) KATHRYN A NELSON VP - INSTITUTIONAL ADVANCEMENT (26) BARBARA Y MORGAN SR DIR LEGACY PLANNING SVCS (27) JOHN R OVERTON II DIRECTOR - PHYSICAL PLANT (28) JEANEY J GARCIA ATHLETICS DIRECTOR (29) PAULINE L BAILEY DIRECTOR - HUMAN RESOURCES 0 0 X 104,086 X 144,615 0 23,358 ACADEMY ASSISTANT PRINCIPAL 0 0 ACADEMY ASSISTANT PRINCIPAL 1 Total from continuation sheets to Part VII, Section A Total number of individuals (including but not limited to those listed above) who received more than	(22) JILL M KAWANO	40 0			_v				134 951	_	13 514
RINCIPAL - ACADEMY	ASST TREASURER & CONTROLLER	0 0							154,551		13,314
PRINCIPAL - ACADEMY 0 0	(23) KEVIN E CONWAY	40 0				l ,			258 740	_	22 125
PRINCIPAL - JUNIOR SCHOOL (25) KATHRYN A NELSON (26) BARBARA Y MORGAN SR DIR LEGACY PLANNING SVCS (27) JOHN R OVERTON II DIRECTOR - PHYSICAL PLANT (28) JEANEY J GARCIA ATHLETICS DIRECTOR (29) PAULINE L BAILEY DIRECTOR - HUMAN RESOURCES (30) PAULA G HODGES ACADEMY ASSISTANT PRINCIPAL D Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than	PRINCIPAL - ACADEMY	0 0				Ĺ			230,740		23,123
RRINCIPAL - JUNIOR SCHOOL 0 0	(24) MICHAEL T WALKER	40 0				l ,			228 154	_	71 046
VP - INSTITUTIONAL ADVANCEMENT	PRINCIPAL - JUNIOR SCHOOL	0 0				_^			220,134	0	71,940
VP - INSTITUTIONAL ADVANCEMENT	(25) KATHRYN A NELSON	40 0				Ų			104 096		17 202
X	VP - INSTITUTIONAL ADVANCEMENT	0 0				^			194,086	0	17,393
SR DIR LEGACY PLANNING SVCS	(26) BARBARA Y MORGAN	40 0							140 541		24.600
DIRECTOR - PHYSICAL PLANT	SR DIR LEGACY PLANNING SVCS	0 0					^		149,541	٥	24,690
DIRECTOR - PHYSICAL PLANT (28) JEANEY J GARCIA ATHLETICS DIRECTOR (29) PAULINE L BAILEY DIRECTOR - HUMAN RESOURCES (30) PAULA G HODGES ACADEMY ASSISTANT PRINCIPAL DISCUSSION ON Sub-Total	(27) JOHN R OVERTON II	40 0					,,		445 476		22.742
ATHLETICS DIRECTOR (29) PAULINE L BAILEY DIRECTOR - HUMAN RESOURCES (30) PAULA G HODGES ACADEMY ASSISTANT PRINCIPAL C Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than	DIRECTOR - PHYSICAL PLANT	0 0					*		145,176	0	23,/12
ATHLETICS DIRECTOR (29) PAULINE L BAILEY DIRECTOR - HUMAN RESOURCES (30) PAULA G HODGES ACADEMY ASSISTANT PRINCIPAL C Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than	(28) JEANEY J GARCIA	40 0					,,		444.645		22.250
DIRECTOR - HUMAN RESOURCES (30) PAULA G HODGES ACADEMY ASSISTANT PRINCIPAL C Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	ATHLETICS DIRECTOR	0 0					×		144,615	0	23,358
DIRECTOR - HUMAN RESOURCES (30) PAULA G HODGES ACADEMY ASSISTANT PRINCIPAL Description of the continuation sheets to Part VII, Section A	(29) PAULINE L BAILEY	40 0									
ACADEMY ASSISTANT PRINCIPAL 1b Sub-Total	DIRECTOR - HUMAN RESOURCES	0 0					×		144,282	0	11,54/
ACADEMY ASSISTANT PRINCIPAL 0 0 0 1b Sub-Total	(30) PAULA G HODGES	40 0								_	
c Total from continuation sheets to Part VII, Section A	ACADEMY ASSISTANT PRINCIPAL	0 0					×		145,278	0	23,417
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	1b Sub-Total						F	•			
d Total (add lines 1b and 1c)							►				
2 Total number of individuals (including but not limited to those listed above) who received more than		· ·					►		2,157,849	0	376,866
\$100,000 of reportable compensation from the organization▶49	2 Total number of individuals (including	but not limited to	those	liste		oove) who	rec	eived more than		

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule I for such individual	,		
	on the 14-17 res, complete senerates for such marviadar.	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual			
	maividual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CAMBRIDGE ASSOCIATES , PO BOX 10317 UNIONDALE NY 115550317	CONSULTING SERVICES	360,063
KPMG LLP , 1003 BISHOP STREET SUITE 2100 HONOLULU HI 96813	AUDIT & TAX SERVICES	148,010

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►2

Part V		Statement o	o f Revenue ule O contains a respor	ise to any dijestion i	in this Part VIII			
				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
ž ž	1a	Federated cam	paigns 1a					
ant	b	Membership du	es 1b					
Ğ M	С	Fundraising eve	ents 1c	186,532				
iffis, ar A	d	Related organiz	zations 1d					
n High	e	Government grants						
ons Sir		_	ons, gifts, grants, and 1f	10,040,474				
Contributions, Giffs, Grants and Other Similar Amounts	'	sımılar amounts no	ot included above					
o ii	g	Noncash contribute 1a-1f \$	ons included in lines	192,994				
Con	h	Total. Add lines	s 1a-1f	🛌	10,227,006			
				Business Code				
enu (2a	TUITION & FEES		900099	79,156,171	79,156,171		
æ Æ	b	INSTRUCTIONAL S	ERVICES	900099	3,256,745	3,256,745		
Se l	С							
₹	d							
S (е							
Program Serwce Revenue	f	All other progra	am service revenue					
ጅ	g	Total. Add lines	s 2a-2f		82,412,916			
	3	Investment inc	ome (including dividen	ds, interest,			=	S =
	_	and other simils	ar amounts)		3,080,232		-211,781	3,292,013
	4		stment of tax-exempt bond	proceeds	0			
	5	Royaldes	(ı) Real	(II) Personal				
	6a	Gross rents	(1) Real 286,326	i Ci 30iiai				
	b	Less rental	427,706					
	С	expenses Rental income	-141,380	0				
	d	or (loss)	me or (loss)		-141,380			-141,380
			(i) Securities	(II) O ther				,500
	7a	Gross amount from sales of assets other than inventory	9,834,857	33,690,524				
	Ь	Less cost or other basis and sales expenses	7,953,915	25,289,557				
	С	Gain or (loss)	1,880,942	8,400,967				
	d	Net gain or (los	ss)		10,281,909			10,281,909
Other Revenue	8a	Ψ	luding ,532 s reported on line 1c)	2 222 22				
her	b	Less directer	penses b	2,230,095 2,039,208				
ð	c		(loss) from fundraising		190,887			190,887
	9a		rom gaming activities	·				
	b	Less direct ex	penses b					
	с		(loss) from gaming activ	vities	o			0
	10a	Gross sales of returns and allo						
	_		а	177,962				
	b		oods sold b	223,093	AE 131			AE 131
	С	Net income or ((loss) from sales of inve	Business Code	-45,131			-45,131
	11a	CAFETERIA	3 Nevellue	900099	2,490,726			2,490,726
	ь	CALLIENIA			. ,			
	С							
	d	All other reven	ue					
	e		s 11a-11d	🕨	2 /21 =			
	12		See Instructions	.	2,490,726			
				🟲	108,497,165	82,412,916	-211,781	16,069,024

	IX Statement of Functional Expenses				Page 10
	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns. All	other organizat	ions must comp	lete column (A)	
	Check if Schedule O contains a response to any question in this Pa	rt IX			<u> </u>
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	5,106,577	5,106,577		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,612,804	555,188	842,819	214,797
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	307,697	307,697		
7	Other salaries and wages	46,411,284	41,920,863	3,256,324	1,234,097
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	3,638,552	3,250,427	289,796	98,329
9	Other employee benefits	12,077,390	10,383,914	1,284,288	409,188
10	Payroll taxes	3,546,579	3,115,195	327,250	104,134
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	125,940		125,940	
С	Accounting	144,398		144,398	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	18,055			18,055
f	Investment management fees	480,559		479,150	1,409
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	631,709	103,416	518,092	10,201
12	Advertising and promotion	331,184	717	330,467	,
13	Office expenses	917,928	418,570	226,776	272,582
14	Information technology	1,249,565	542,339	686,965	20,261
15	Royalties	4,198	4,198		
16	Occupancy	4,220,591	4,083,839	125,440	11,312
17	Travel	1,285,567	1,173,059	47,376	65,132
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	162,616	106,652	38,632	17,332
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	8,159,928	7,895,537	242,521	21,870
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	INSTRUCTIONAL	2,972,878	2,972,878		
b	CAFETERIA EXPENSE	1,453,454	1,453,454		
c	OPERATION OF PHYSICAL PLANT	438,084	423,890	13,020	1,174
d	ADMINISTRATION	884,074		702,754	181,320
e	All other expenses	784,990	784,889	53	48
25	Total functional expenses. Add lines 1 through 24e	96,966,601	84,603,299	9,682,061	2,681,241
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Pai	rt X	Balance Sheet Check if Schedule O contains a response to any question in this	s Part X			
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1,851,723	1	2,063,708
	2	Savings and temporary cash investments		28,219,325	2	38,605,279
	3	Pledges and grants receivable, net		5,820,017	3	4,122,870
	4	Accounts receivable, net		111,653	4	2,156,309
	5	Loans and other receivables from current and former officers, di employees, and highest compensated employees Complete Pa Schedule L	rt II of			
<u>sc</u>	6	Loans and other receivables from other disqualified persons (as 4958(f)(1)), persons described in section 4958(c)(3)(B), and c and sponsoring organizations of section 501(c)(9) voluntary en organizations (see instructions) Complete Part II of Schedule L		_	0	
कू				0	-	0
Assets	7	Notes and loans receivable, net		288,295	7	277,382
_	8	Inventories for sale or use		179,570	8	196,912
	9	Prepaid expenses and deferred charges		2,596,514	9	2,496,362
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 233,429,011			
	ь	Less accumulated depreciation 1	LOb 109,769,320	126,552,882	10 c	123,659,691
	11	Investments—publicly traded securities	71,236,400	11	73,046,017	
	12	Investments—other securities See Part IV, line 11	105,200,450	12	100,417,696	
	13	Investments—program-related See Part IV, line 11		0	13	0
	14	Intangible assets		0	14	0
	15	Other assets See Part IV, line 11		20,944,759	15	21,726,391
	16	Total assets. Add lines 1 through 15 (must equal line 34) .		363,001,588	16	368,768,617
	17	Accounts payable and accrued expenses		23,190,987	17	22,584,015
	18	Grants payable		0	18	0
	19	Deferred revenue		6,675,202	19	6,773,379
	20	Tax-exempt bond liabilities		0	20	0
Ø	21	Escrow or custodial account liability Complete Part IV of Sche	dule D	0	21	0
Liabilitie	22	Loans and other payables to current and former officers, directo key employees, highest compensated employees, and disqualifi				
qе		persons Complete Part II of Schedule L		0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	S	11,200,000	23	6,500,000
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0
	25	Other liabilities (including federal income tax, payables to relat and other liabilities not included on lines 17-24) Complete Par	t X of Schedule	7.004.045		0.744.47-
		D		7,094,943	25	6,741,477
	26	Total liabilities. Add lines 17 through 25		48,161,132	26	42,598,871
S 0 2		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ lines 27 through 29, and lines 33 and 34.	and complete			
lan	27	Unrestricted net assets		213,976,786	27	219,327,959
<u>е</u>	28	Temporarily restricted net assets		40,028,998	28	42,063,665
Fund Balance	29	Permanently restricted net assets		60,834,672	29	64,778,122
or Fu		Organizations that do not follow SFAS 117 (ASC 958), check he complete lines 30 through 34.	ere ► 「 and			
	30	Capital stock or trust principal, or current funds			30	
še	31	Paid-in or capital surplus, or land, building or equipment fund			31	
Assets	32	Retained earnings, endowment, accumulated income, or other fu			32	
Š	33	Total net assets or fund balances		314,840,456	33	326,169,746
Z	34	Total liabilities and net assets/fund balances		363,001,588	34	368,768,617
		•		1		

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				৮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		108,4	197,165
2	Total expenses (must equal Part IX, column (A), line 25)	2		96,9	966,601
3	Revenue less expenses Subtract line 2 from line 1	3			30,564
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			340,456
5	Net unrealized gains (losses) on investments	5			93,705
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		2,7	92,431
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		326,1	.69,746
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. \sqsubset
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep basis, consolidated basis, or both	arate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigl audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	require	3b		

Software ID: Software Version:

EIN: 99-0073523

Name: PUNAHOU SCHOOL

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours per week (list any	Positio more unless an dire	than	not one on i r an trust	box s bot d a tee)	th	T	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			organizations	
ETHAN DB ABBOTT TRUSTEE	10	×						0	0	0	
W DAVID P CAREY III TRUSTEE	1 0 0 0	х						0	0	0	
STEPHEN M CASE TRUSTEE	1 0 0 0	х						0	0	0	
HAN H SONNY CHING TRUSTEE	10	Х						0	0	0	
MARGARET M COLE ASSISTANT SECRETARY	10	х		х				0	0	0	
DEBORAH K BERGER TRUSTEE	1 0	х						0	0	0	
WENDY B CRABB TRUSTEE	10	x						0	0	0	
JUDITH M DAWSON TRUSTEE	10	×						0	0	0	
MARK H FUKUNAGA SECOND VICE CHAIR - FINANCE	1 0	х		х				0	0	0	
RONALD D HIGGINS II TRUSTEE	1 0	х						0	0	0	
CLAIRE O JOHNSON CHAIR OF THE BOARD	1 0	х		х				0	0	0	
CONSTANCE H LAU TRUSTEE	1 0	х						0	0	0	
WARREN KK LUKE TRUSTEE	10	×						0	0	0	
DUNCAN MACNAUGHTON FIRST VICE CHAIR	10	х		х				0	0	0	
RANDOLPH G MOORE TRUSTEE	10	x						0	0	0	
PIERRE M OMIDYAR TRUSTEE	10	х						0	0	0	
MICHAEL A PIETSCH TRUSTEE	10	х						0	0	0	
JEFFREY N WATANABE TRUSTEE	10	х						0	0	0	
KATHLEEN SULLIVAN WO SECRETARY	1 0 0 0	х		х				0	0	0	
JAMES K SCOTT PRESIDENT	40 0 0 0			х				368,983	0	116,943	
JOHN D FIELD JR VICE PRESIDENT & TREASURER	40 0 0 0			х				244,043	0	27,221	
JILL M KAWANO ASST TREASURER & CONTROLLER	40 0 0 0			х				134,951	0	13,514	
KEVIN E CONWAY PRINCIPAL - ACADEMY	40 0 0 0				х			258,740	0	23,125	
MICHAEL T WALKER PRINCIPAL - JUNIOR SCHOOL	40 0 0 0				х			228,154	0	71,946	
KATHRYN A NELSON VP - INSTITUTIONAL ADVANCEMENT	40 0 0 0				x			194,086	0	17,393	

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

compensated Employees, and Indepen		i	1				ı				
(A)	(B)	_ ,	(C					(D)	(E)	(F)	
Name and Title	Average hours	Position (do not check more than one box,		Reportable	Reportable	Estimated amount of other					
	per		unless person is both		compensation from the	compensation from related	compensation				
	week		•		organization (W-	organizations (W-	from the				
	(list				2/1099-MISC)	2/1099-MISC)	organization and				
	any				_,.	,	related				
	hours	[충률	Former Highest employs Key emp Officer Instituti				organızatıons				
	for	불	Institutional	[윤	<u> </u> e	[충형]	[문]				
	related	유를	∂		둳		ੈ				
	organizations below	Individual trustee or director	len		emplo) ee	~ <u>9</u>					
	dotted	<u> </u>	₹		8	ặ					
	line)	α; α;	Trustee			<u>~</u>					
	,		a l			st compensated see					
					ㄴ	ا ا	igsqcup				
BARBARA Y MORGAN	40 0					,		140 541	0	24.600	
SR DIR LEGACY PLANNING SVCS	0 0					Х		149,541	0	24,690	
JOHN R OVERTON II	40 0				Γ	Γ., Ι		145.476		22.742	
DIRECTOR - PHYSICAL PLANT	0 0					×		145,176	0	23,712	
JEANEY J GARCIA	40 0										
ATHLETICS DIRECTOR	0 0					×		144,615	0	23,358	
PAULINE L BAILEY	40 0										
DIRECTOR - HUMAN RESOURCES	0 0					×		144,282	0	11,547	
PAULA G HODGES	40 0										
ACADEMY ASSISTANT PRINCIPAL	0 0					x		145,278	0	23,417	

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As Filed Data -

DLN: 93493132042154

Employer identification number

OMB No 1545-0047

SCHEDULE A

Name of the organization

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

PUNAHOU SCHOOL

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.

2012

Open to Public Inspection

									99-0073	523	
Pai	t I	Reas	on for Pu	blic Charity Sta	tus (All org	ganızatıons	must com	plete this	part.) See ı	nstructio	ns.
The o	rganı	zatıon ıs	not a priva	te foundation becaus	seitis (Forl	lınes 1 throu	ıgh 11, check	conly one	box)		
1	Г	A chur	ch, convent	ion of churches, or a	ssociation of	f churches d	escribed in s e	ection 170	(b)(1)(A)(i).		
2	굣	A scho	ol described	d in section 170(b)(1	L)(A)(ii). (At	tach Sched	ule E)				
3	Γ	A hosp	oital or a coo	perative hospital se	rvice organiz	zatıon descr	ibed in sectio	n 170(b)(1	L)(A)(iii).		
4	Γ			h organization opera	ted ın conjun	iction with a	hospital des	cribed in s e	ection 170(b)	(1)(A)(iii)	. Enter the
_	_			ity, and state	+ - 6 11		.			L. I L	
5	ı	_	•	erated for the benefi	_	e or universi	ty owned or o	perated by	a governmen	tai unit de	scribed in
_	_			(A)(iv). (Complete P	•			: 170(h)	(4)(4)()		
6	<u> </u>			local government o							
7	ı	_		at normally receives on 170(b)(1)(A)(vi).		•	support from	a governn	ientai unit or i	rom the g	eneral public
8	Γ			described in section			mplete Part II	[)			
9	Γ	An org	anization th	at normally receives	(1) more th	ian 331/3% d	of its support	from contr	ıbutıons, mem	ibership fe	es, and gross
		receipt	s from activ	rities related to its e	xempt functi	ons—subjec	t to certain e	xceptions,	and (2) no mo	ore than 3	31/3% of
		ıts sup	port from gr	oss investment inco	me and unre	lated busine	ess taxable ın	come (less	s section 511	tax) from	businesses
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee section !	509(a)(2). (C	omplete P	art III)		
10	Γ	An org	anızatıon or	ganized and operated	d exclusively	to test for	public safety	See sect i	on 509(a)(4).		
11	Γ			ganized and operated							
				ly supported organiz						ee sectio i	1 509(a)(3). Check
				ibes the type of supp b Type II c						on-functio	nally integrated
e	Г			ox, I certify that the			-				
_	•		_	on managers and ot	_						-
			n 509(a)(2)								
f			organization this box	received a written d	etermination	from the IR	S that it is a	Type I, Ty	pe II, or Type	III suppo	orting organization,
g				2006, has the organ	ızatıon accer	oted any gift	or contributi	on from an	v of the		ı
9			ng persons?	, -	izacion accep	stea any gne	. or continuati	o o u	, 01 1110		
		(i) A p	erson who d	irectly or indirectly o	controls, eith	er alone or	together with	persons d	escribed in (ii		Yes No
		and (111) below, the	governing body of th	ne supported	organizatio	n?			1	1g(i)
		(ii) A f	amily memb	er of a person descr	ıbed ın (ı) ab	ove?				1	1g(ii)
		` '		lled entity of a perso		., .,				1:	Lg(iii)
h		Provide	e the followi	ng information about	the support	ed organızat	ion(s)				
	\ Nam	f	L (::> EIN	(III) Tuna af	(in) To (<u> </u>	(1) Did 1101		() 1-	*b =	() A manumb of
-) Nan uppoi		(ii) EIN	(iii) Type of organization	(iv) Is to organizati		(v) Did you the organi	•	(vi) Is organizat		(vii) A mount of monetary
		ation		(described on	col (i) lis		ın col (i) d		col (i) org		support
				lines 1- 9 above	your gove	_	suppor	t?	ın the U	S?	
				or IRC section	docume	nt?					
				(see instructions))		T					\dashv
				,	Yes	No	Yes	No	Yes	No	
T				1	i .		•				i

Sch	edule A (Form 990 or 990-EZ) 2012							Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation faile	ed to q	
	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	ow, please com	iplete Pa	rt III.)	
	endar year (or fiscal year beginning					1		
	in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2	312	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not include any "unusual							
	grants ")							
2	Tax revenues levied for the							
	organization's benefit and either							
	paid to or expended on its behalf							
3	The value of services or facilities							
•	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a							
	governmental unit or publicly							
	supported organization) included on							
	line 1 that exceeds 2% of the							
	amount shown on line 11, column							
6	(f) Public support. Subtract line 5 from							
	line 4							
S	ection B. Total Support							
Cal	endar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 20)12	(f) Total
_	in) ► A mounts from line 4		. ,		. ,	, ,		. ,
7 8	Gross income from interest,							
0	dividends, payments received on							
	securities loans, rents, royalties							
	and income from similar							
9	sources Net income from unrelated							
9	business activities, whether or not							
	the business is regularly carried							
	on							
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part IV)							
11	Total support (Add lines 7 through							
4.0	10)		<u> </u>					
12	Gross receipts from related activitie					12		
13	First five years. If the Form 990 is this box and stop here							ization, check
	ection C. Computation of Pub				<u> </u>	<u> </u>		
14	Public support percentage for 2012			11, column (f))		14		
15	Public support percentage for 2011			, , , , , , ,		15		
	33 1/3% support test—2012. If the o	· ·	•	on line 13 and l	ine 14 is 33 1/20%		chack ti	nie hov
104	and stop here. The organization qua				me 1 1 13 33 1/3/0	or more,	JIICCK CI	► □
b	33 1/3% support test—2011. If the				and line 15 is 33	3 1/3% or n	nore, ch	eck this
	box and stop here. The organization						. 4 4	▶□
1/a	10%-facts-and-circumstances test- is 10% or more, and if the organizat							•
	in Part IV how the organization mee							
	organization				4	r	,rF3	▶ □
b	10%-facts-and-circumstances test-							
	15 is 10% or more, and if the organ Explain in Part IV how the organizat							lv
	supported organization	ion meets the T	acts-ana-cncum:	stances test III	ic organization qu	uiiiiE5 45 i	a public	·y ▶□
18	Private foundation. If the organizat	on did not check	c a box on line 13	, 16a, 16b, 17a,	or 17b, check thi	s box and	see	·
	instructions							▶ ┌

Schedule A (Form 990 or 990-EZ) 2012 Page 3 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 (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
<i>7</i> a	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						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					
	ction C. Computation of Public			1.2		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2012

DLN: 93493132042154

OMB No 1545-0047

Department of the Treasury

SCHEDULE D (Form 990)

> ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Supplemental Financial Statements

Open to Public

itema	il Revenue Service	m 990. ► See separate instructions.		Inspectio	9H
	me of the organization NAHOU SCHOOL		Emplo	oyer identification number	
101	Willow School		99-0	073523	
Pa	rt I Organizations Maintaining Donor Adv		nds o	r Accounts. Complete	ıf the
	organization answered "Yes" to Form 990 T	, Part IV, line 6. (a) Donor advised funds		(b) Funds and other accoun	
1	Total number at end of year	(a) Dollor advised fullds	+	T unus and other account	
2	Aggregate contributions to (during year)	31,596	+		
3	Aggregate grants from (during year)	356,278	_		
4	Aggregate value at end of year	6,248,276	+		
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or	ors in writing that the assets held in dono	•	ed	┌ No
6	Did the organization inform all grantees, donors, and doused only for charitable purposes and not for the benef conferring impermissible private benefit?	_			┌ No
Pa	rt III Conservation Easements. Complete if	the organization answered "Yes" to	Form	990, Part IV, line 7.	
2	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	or education) Preservation of an I	ertified		
	casement on the last day of the tax year			Held at the End of the Y	 'ear
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified histo	oric structure included in (a)	2c	-	
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	uired after 8/17/06, and not on a	2d		
3	Number of conservation easements modified, transferr	ed, released, extinguished, or terminated	d by the	e organization during	
	the tax year ▶				
4	Number of states where property subject to conservat	ion easement is located ►			
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?		— ling of \	violations, and Tyes	┌ No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents du	ırıng the year	
7	A mount of expenses incurred in monitoring, inspecting	a. and enforcing conservation easements	durına	the vear	
,	▶ \$,,		,	
8	Does each conservation easement reported on line 2(a and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sect	:ion 17(┌ No
9	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financial :			
^o ar	Complete if the organization answered "Y	s of Art, Historical Treasures, o	r Oth	er Similar Assets.	
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education, o	r resea	irch in furtherance of public	:
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education, o			:
	(i) Revenues included in Form 990, Part VIII, line 1			▶ \$	
	(ii) Assets included in Form 990, Part X				
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS		r financ		

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

	t IIII Organizations Maintaining Co	niections of Art	<u>, nis</u>	LUII	cai iica	suies, oi c	tne	i Sillillai A	sset:	5 (co.	<u>ntinued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, ch	eck	any of the	following that	are a	significant us	e of it	s	
а	Public exhibition		d	Γ	Loan or e	exchange prog	rams				
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's c Part XIII	ollections and expla	ın hov	v the	/ further th	ne organızatıor	ı's ex	cempt purpose	ın		
5	During the year, did the organization solicit							nılar	_		_
В-	assets to be sold to raise funds rather than								<u> </u>	es	│ No
Pal	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an ai						u r	es to Form	990,		
1a	Is the organization an agent, trustee, custo- included on Form 990, Part X?						ets i	not	┌ Y	es	┌ No
b	If "Yes," explain the arrangement in Part XI	II and complete the	follow	/ıng t	able	-					
								А	moun	t	
С	Beginning balance						1c				
d	Additions during the year					ļ.	1d				
e	Distributions during the year					ļ.	1e				
f	Ending balance					L	1 f				
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?						┌ Y	es	∏ No
ь	If "Yes," explain the arrangement in Part XI	I Check here if the	expla	natio	n has bee	n provided in f	art)	XIII			
Pa	rt V Endowment Funds. Complete										
4.	Designation of contributions	(a)Current year 187,609,571	(b)F	rior y	ear b (c 286,691	Two years back 171,887,008		Three years back 163,956,574		_	ars back 3,820,790
la L	Beginning of year balance	3,805,659			054,138	4,559,539	+	2,894,026			3,162,679
b	Contributions	3,003,039		٥,١	,34,130	4,559,55	1	2,034,020	1		3,102,079
С	Net livestillent earlings, gains, and losses	10,962,824			649,994	19,027,143	_	11,959,071		-1	6,333,168
d	Grants or scholarships	2,026,784		1,9	967,870	1,892,535	5	1,762,040			1,708,752
е	Other expenditures for facilities and programs	5,013,231			945,137	4,912,865	_	4,644,080			4,515,290
f	Administrative expenses	456,150			68,245	381,599		516,543			469,685
g	End of year balance	194,881,889		187,6	509,571	188,286,691		171,887,008		16	3,956,574
2	Provide the estimated percentage of the cui	•	ce (lın	e 1g,	column (a	a)) held as					
а	Board designated or quasi-endowment 🟲	49 324 %									
b	Permanent endowment ► 33 240 %										
С	Temporarily restricted endowment 🕨 17	436 %									
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
	The percentages in lines 2a, 2b, and 2c site										
3a	Are there endowment funds not in the posse		atıon t	hat a	are held an	nd administere	d for	the	Г	V = =	N ₂
За	Are there endowment funds not in the posse organization by	ssion of the organiz		hat a	are held an	nd administere	d for		-	Yes	No No
3a	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiz		•		nd administere	d for	3	(i)	Yes	No No
	Are there endowment funds not in the posse organization by	ssion of the organiz					d for	3a	-	Yes	No
	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organiz	 d on S	ched	 ule R? .		d for • •	3a	(i) (ii)	Yes	No
b 4	Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization of the content of th	ssion of the organize ons listed as required the organization's en	 d on S dowm	ched ent fo	ule R? . unds Inne 10.				(ii) (ii) Bb		No No
b 4	Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization describe in Part XIII the intended uses of the second organization describe in Part XIII the intended uses of the second organization describe in Part XIII the intended uses of the second organization describe in Part XIII the intended uses of the second organization describes and the second organization describes are second organization.	ssion of the organize ons listed as required the organization's en	 d on S dowm	chedent for t X	· · · · ule R? ·			3a	(ii) (ii) Bb		No
b 4 Pai	Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization of the content of th	ssion of the organize ons listed as required the organization's en	 d on S dowm	chedent for t X	ule R? . unds Inne 10. Cost or othe	(b) Cost or o basis (other			(ii) (ii) Bb		No No
b 4 Pa	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organize ons listed as required the organization's en	 d on S dowm	chedent for t X	ule R? . unds Inne 10. Cost or othe	(b) Cost or o basis (other	ther		(i) (ii) (ii) Bb	d) Boo	No No ok value
b 4 Pal	Are there endowment funds not in the posse organization by (i) unrelated organizations	ssion of the organize ons listed as required the organization's en	 d on S dowm	chedent for t X	ule R? . unds Inne 10. Cost or othe	(b)Cost or o basis (other	ther er)	(c) Accumulate	(i) (ii)	d) Boo	No No ok value
b 4 Par 1a b c	Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIII the intended uses of the Tand, Buildings, and Equipment Description of property Land Buildings	ssion of the organize ons listed as required the organization's en	 d on S dowm	chedent for t X	ule R? . unds Inne 10. Cost or othe	(b)Cost or o basis (other	ther er)	(c) Accumulate depreciation	d (d	d) Boo	No No ok value 500,498 3,775,560
b 4 Pal 1a b c d e	Are there endowment funds not in the posse organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the tyle Land, Buildings, and Equipment Description of property Land Buildings Leasehold improvements	ssion of the organizations listed as required the organization's entertails. See Form 99	d on S dowm 00, Pa	chedent function (a) basis	ule R? . unds Inne 10. Cost or othe investmen	(b)Cost or o basis (other 158,536 18,304 49,811 6,276	ther er) 0,498 5,401 1,317	(c) Accumulate depreciation	d (a	98	No No No No No No No No No No No No No N

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1:	2.	
(a) Description of security or category	(b)Book value	(c) Metho	od of valuation
(including name of security)		Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
(3)Other	100 417 606		_
(A) INVESTMENT IN LTD PARTNERSHIPS	100,417,696		F
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	100,417,696		
Part VIII Investments—Program Related. Sec			
			1.6.1.
(a) Description of investment type	(b) Book value		od of valuation
		Cost or end-o	f-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	•		
Part IX Other Assets. See Form 990, Part X, III	ne 15	_	
			(h) Book volue
(a) Descrip	otion		(b) Book value
(1) BENEFICIAL INTEREST IN			21,726,391
			1
T-1-1 (C-1/2007 (1-1/2007)	- \		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15			21,726,391
Part X Other Liabilities. See Form 990, Part >	(, line 25.		
(a) December of behilter	(b) Book value		
1 (a) Description of Hability	(5) Book value		
Federal income taxes	ol		
	730.073		
DEPOSITS HELD IN CUSTODY	739,072		
CAPITAL LEASE	820,441		
LIABILITY UNDER SPLIT-INTEREST			
	3,190,324		
OTHER LIABILITIES	1,991,640		
T-1-1 (0-1 (1)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	6,741,477		
2 Fin 49 (ASC 740) Footpote In Bort VIII provide the tox		nization's financial states	

			i age i
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	108,652,134
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	-1,832,795
3	Subtract line 2e from line 1	3	110,484,929
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 479,150		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4 c	-1,987,764
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	108,497,165
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	97,322,844
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	835,393
3	Subtract line 2e from line 1	3	96,487,451
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 479,150		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	479,150
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	96,966,601

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
RECONCILIATION OF REVENUE	SCHEDULE D, PART XI, LINE 2D	OTHER ADJUSTMENTS ARE AS FOLLOWS CHANGE IN VALUE OF SPLIT-INT AGR 878,651 LOSS ON SALE OF FIXED ASSETS 122,801 BOOKSTORE EXPENSES NET ON 990 223,093 FMV ADJUSTMENT - INVESTMENTS (63,635) TOTAL 1,160,910
RECONCILIATION OF REVENUE	SCHEDULE D, PART XI, LINE 4B	OTHER ADJUSTMENTS ARE AS FOLLOWS CARNIVAL EXPENSES NET ON 990 (2,039,208) RENTAL EXPENSES NET ON 990 (427,706) TOTAL (2,466,914)
RECONCILIATION OF EXPENSES	SCHEDULE D, PART XII, LINE 2D	OTHER ADJUSTMENTS ARE AS FOLLOWS CARNIVAL EXPENSES NET ON 990 2,039,208 RENTAL EXPENSES NET ON 990 427,706 LOSS ON SALE OF FIXED ASSETS 122,801 BOOKSTORE EXPENSES NET ON 990 223,093 ACCOUNTING ADJ FOR ADOPTION OF FASB 158 (\$ 1,977,415) TOTAL 835,393
FIN 48 FOOTNOTE	SCHEDULE D, PART X, LINE 2	THE SCHOOL RECOGNIZES INCOME TAX POSITIONS IN ACCORDANCE WITH ASC TOPIC 740-10 (INTEREPRETATION 48), INCOME TAXES - OVERALL, (ASC TOPIC 740), WHICH PRESCRIBES A "MORE-LIKELY THANNOT" RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE (THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED UPON ULTIMATE RESOLUTION WITH TAX AUTHORITIES) FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF AN INCOME TAX POSITION EXPECTED TO BE TAKEN IN A TAX RETURN
INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS	SCHEDULE D, PART V, LINE 4	THE PRIMARY PURPOSE OF THE ENDOWMENT FUNDS FOR PUNAHOU SCHOOL IS THE CREATION AND MAINTENANCE OF SCHOLARSHIPS IN ORDER TO HELP ALLEVIATE THE COST OF EDUCATING THEIR STUDENTS

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As Filed Data -

DLN: 93493132042154

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

PUNAHOU SCHOOL

Name of the organization

Schools

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

► Attach to Form 990 or Form 990-EZ.

Employer identification number

	99-0073523			
Pa	rt I		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II	3	Yes	
		- - -		
	Does the organization maintain the following? Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory			
c	basis? Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	4b	Yes	
_	with student admissions, programs, and scholarships?	4c	Yes	
C	I Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain If you need more space, use Part II	4d_	Yes	
	Does the organization discriminate by race in any way with respect to Students' rights or privileges?			No
	Admissions policies?	5b		No
c	Employment of faculty or administrative staff?	5c		No
c	Scholarships or other financial assistance?	5d		No
€	e Educational policies?	5e		Νo
f	Use of facilities?	5f		Νo
ç	Athletic programs?	5g		Νo
ŀ	other extracurricular activities? If you answered "Yes" to any of the above, please explain If you need more space, use Part II	<u>5h</u>		No
		-		
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended?	6a 6b		No
	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05	95		
	of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," explain on Part II	1 7	اعمدا	

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

ldentifier	Return Reference	Explanation
PUBLICATION OF RACIALLY NON-DISCRIMINATORY POLICY	FORM 990, SCHEDULE E, LINE 3	STATED IN PERIODIC NEWSPAPER ADVERTISEMENT

Schedule E (Form 990 or 990-EZ) 2012

DLN: 93493132042154

OMB No 1545-0047

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

SCHEDULE G

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

						Employer ider	itii ication number
SCHOOL						99-0073523	
Fundraising Acti	ivities. Complete	ıf the o	rganızatı	on answered "Yes" t	o Forn	າ 990, Part IV	, line 17.
te whether the organi	zation raised funds t	through a	ny of the f	ollowing activities Che	ck all t	hat apply	
all solicitations			e	Solicitation of non	-goverr	nment grants	
					ernmen	t grants	
one solicitations			g	Special fundraisin	g event	s	
-person solicitations							
							Г _{Yes} Г _{No}
			undraiser	s) pursuant to agreeme	ents und	ler which the fur	ndraiser is
e and address of ndividual ty (fundraiser)	(ii) Activity	fundrais custo cont	ser have ody or crol of	(iv) Gross receipts from activity	(or	retained by)	(vi) A mount paid to (or retained by) organization
		Yes	No				
			>				
states in which the o	organization is regist	tered or li	censed to	solicit funds or has be	en notif	ied it is exempt	from registration or
	te whether the organical solicitations ternet and email solicitations one solicitations person solicitations e organization have a employees listed in 1," list the ten highest ompensated at least e and address of individual try (fundraiser)	Fundraising Activities. Complete te whether the organization raised funds to all solicitations ternet and email solicitations one solicitations -person solicitations e organization have a written or oral agree employees listed in Form 990, Part VII) ," list the ten highest paid individuals or ompensated at least \$5,000 by the orga e and address of individual try (fundraiser) (ii) Activity states in which the organization is registed.	Fundraising Activities. Complete If the or the whether the organization raised funds through an all solicitations ternet and email solicitations one solicitations - person solicitations - organization have a written or oral agreement with employees listed in Form 990, Part VII) or entity (moreover and address of individuals or entities (for ompensated at least \$5,000 by the organization contribution) - and address of individual fundraise cust contribute (fundraiser) - Yes - States in which the organization is registered or lies.	Fundraising Activities. Complete if the organization to whether the organization raised funds through any of the find solicitations ternet and email solicitations the organization selected in Form 990, Part VII) or entity in connect of membranes of the properties of the propertie	Fundraising Activities. Complete if the organization answered "Yes" to the whether the organization raised funds through any of the following activities. Che in is olicitations terret and email solicitations one solicitations organization have a written or oral agreement with any individual (including officer employees listed in Form 990, Part VII) or entity in connection with professional figure of many individual (including officer employees listed in Form 990, Part VII) or entity in connection with professional figure of many individual (including officer employees listed in Form 990, Part VII) or entity in connection with professional figure of many individual (including officer employees listed in Form 990, Part VII) or entity in connection with professional figure of many individual (including officer employees listed in Form 990, Part VII) or entity in Connection with professional figure of many individual (including officer employees listed in Form 990, Part VII) or entity in Connection with professional figure of many individual (including officer employees listed in Form 990, Part VII) or entity in Connection with professional figure of many individual (including officer employees listed in Form 990, Part VII) or entity in Connection with professional figure of many individual (including officer employees listed in Form 990, Part VII) or entity in Connection with professional figure of many individual (including officer employees listed in Form 990, Part VII) or entity in Connection with professional figure of many individual (including officer employees listed in Form 990, Part VII) or entity in Connection with professional figure of many individual (including officer employees) in Form 990, Part VII) or entity in Connection with professional figure of many individual (including officer employees) in Form 990, Part VII) or entity in Connection with professional figure of professional figure of part via f	Fundraising Activities. Complete if the organization answered "Yes" to Forn the whether the organization raised funds through any of the following activities. Check all tail solicitations e Solicitations of Solicitation of non-government one solicitations g Solicitation of government one solicitations g Special fundraising event organization have a written or oral agreement with any individual (including officers, direct employees listed in Form 990, Part VII) or entity in connection with professional fundrais "ist the ten highest paid individuals or entities (fundraisers) pursuant to agreements uncompensated at least \$5,000 by the organization and address of dividual (ii) Activity (iii) Did fundraiser have custedy or control of contributions? Yes No States in which the organization is registered or licensed to solicit funds or has been notified.	Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV te whether the organization raised funds through any of the following activities. Check all that apply it is olicitations Solicitation of non-government grants ternet and email solicitations Solicitation of government grants one solicitations Special fundraising events

Pa	rt II	Fundraising Events. Commore than \$15,000 of fundra events with gross receipts g	aising event contribut			
			(a) Event #1 CARNIVAL (event type)	(b) Event #2	(c) Other events 0 (total number)	(d) Total events (add col (a) through col (c))
<u>Ф</u>			2,416,627		(total number)	2,416,627
Revenue	1 2	Gross receipts Less Contributions				
<u>Ф</u>	3	Gross income (line 1 minus line 2)	2,230,095			2,230,095
	4	Cash prizes				
	5	Noncash prizes	22,994	1		22,994
Expenses	6	Rent/facility costs				
<u>8</u>	7	Food and beverages .	231,641			231,641
	8	Entertainment	757,766	5		757,766
Direct	9	Other direct expenses .	1,026,807			1,026,807
	10	Direct expense summary Add lin	es 4 through 9 in column	n (d)	.	(2,039,208)
	11	Net income summary Combine II				190,887
Par	t III			"Yes" to Form 990, Pa	rt IV, line 19, or rep	
Revenue	1	\$15,000 on Form 990-EZ, lir	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	┌ Yes	┌ Yes	│ Yes │ No	
	7	Direct expense summary Add lines	s 2 through 5 ın column ((d)		
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	<u> </u>	
9 a b	Ist	er the state(s) in which the organiza the organization licensed to operate No," explain	gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming Yes," explain	licenses revoked, suspei	nded or terminated during		

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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Schedule I

(Form 990)

Grants and Other Assistance to Organizations,

OMB No 1545-0047

2012

DLN: 93493132042154

Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Open to Public Department of the Treasury Attach to Form 990 Inspection Internal Revenue Service Name of the organization Employer identification number PUNAHOU SCHOOL 99-0073523 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ☐ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of (a) Name and address of **(b)** EIN (d) A mount of cash (g) Description of (h) Purpose of grant (c) IRC Code (e) A mount of nonvaluation non-cash assistance or assistance organization section grant cash or government if applicable assistance (book, FMV, appraisal, other)

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

GRANT FUNDS

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 2
	Part III can be duplicated if additional space is needed.

(a) Type of grant or a	assistance	(b) Number of recipients		(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV , appraisal, other)	(f) Description of non-cash assistance
(1) SCHOLARSHIPS		624		5,106,577	0	N/A	N/A
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information							
Identifier	Return Reference		Explanation				
PROCEDURES FOR FORM 990, SCHEDULE I, PART GRANT FUNDS CONSIST ALMOST ENTIRELY OF SCHOLARSHIPS AND FINANCIAL AID, WHICH ARE OF STUDENTS IN THE FORM OF TUITION REDUCTIONS OR WAIVERS FUNDS ARE ALSO SET ASIDE FOR							

REIMBURSEMENT CONSIST ENTIRELY OF APPROVED EXPENDITURES

REIMBURSEMENT OF SCHOOL SUPPLIES FOR SOME STUDENTS THESE STUDENTS MUST SUBMIT RECEIPTS

DETAILING THEIR PURCHASES SO THAT PUNAHOU CAN VERIFY THAT AMOUNTS SUBMITTED FOR

DLN: 93493132042154

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization PUNAHOU SCHOOL

Employer identification number

99-0073523

Ра	Questions Regarding Compensation			
			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Who have any relevant mormation regarding these items Who have any relevant mormation regarding these items Who have any relevant mormation regarding these items			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Tax idemnification and gross-up payments With the social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers,			
	directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	✓ Compensation committee			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
_		40		No
a b	Receive a severance payment or change-of-control payment? Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a 4b		No
		4c		No
С	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	40		110
	The second of this state persons and provide the applicable amounts for each rechi in factor			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of			
а	The organization?	5a		Νo
b	Any related organization?	5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of	_		
a	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III			
		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MI:	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2012

Part III Supplemental Information

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

Also complete this i	part for any	⁄ addıtıonal	ınformatıon
----------------------	--------------	--------------	-------------

Also complete tims part for any additional information						
Identifier	Return Reference	Explanation				
DETAIL REGARDING COMPENSATION	SCHEDULE J, PART I, LINE 1A	FIRST-CLASS TRAVEL IS PROVIDED TO THE ACADEMY PRINCIPAL, AND IS NOT TREATED AS TAXABLE COMPENSATION A HOUSING ALLOWANCE IS PROVIDED TO KEVIN CONWAY AND JOHN FIELD AND IS INCLUDED IN THEIR REPORTABLE COMPENSATION THE PRESIDENT AND THE LOWER SCHOOL PRINCIPAL RESIDE ON CAMPUS AS A CONDITION OF EMPLOYMENT THIS BENEFIT WAS TREATED AS NONTAXABLE COMPENSATION THE PRESIDENT, TREASURER, AND VP OF INSTITUTIONAL ADVANCEMENT ARE MEMBERS OF SOCIAL CLUBS FOR THE PURPOSE OF RECREATION, NETWORKING, AND ENTERTAINMENT THE PORTION OF EXPENSES THAT CAN BE TRACED TO PERSONAL USE ARE TREATED AS TAXABLE COMPENSATION				
EXPENSE REIMBURSEMENT POLICY	SCHEDULE J, PART I, LINE 1B	THE SCHOOL FOLLOWS A WRITTEN EXPENSE REIMBURSEMENT POLICY REQUIRING ALL THREE OF THE FOLLOWING (1) THE EXPENSE MUST BE A SCHOOL-RELATED EXPENSE, (2) SUBSTANTIATION RECEIPTS ARE REQUIRED WITHIN A REASONABLE AMOUNT OF TIME, (3) EXCESS ADVANCES MUST BE RETURNED WITHIN A REASONABLE AMOUNT OF TIME				

Schedule J (Form 990) 2012

Software ID: Software Version:

EIN: 99-0073523

Name: PUNAHOU SCHOOL

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Form 990, Schedule 3, Part 11 - Officers, Directors, Trustees, key Employees, and Highest Compensated Employees								
(A) Name	(B) Breakdown	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form	
	(i) Base Compensation			compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ	
JAMES K SCOTT	(I) 358,183 (II) (3 0 0	10,800	25,000 0	91,943 0	485,926	0	
JOHN D FIELD JR	(I) 212,841 (II) (3 0 0	31,200	16,984 0	10,237 0	271,264 0	0	
KEVIN E CONWAY	(I) 227,540 (II) (0 0	31,200 0	18,274 0	4,851 0	281,865 0	0	
MICHAEL T WALKER	(I) 220,954 (II) (4 0 0 0	7,200 0	18,274 0	53,672 0	300,100 0	0	
KATHRYN A NELSON	(I) 191,686 (II) (5 0 0	2,400	4,000 0	13,393 0	211,479 0	0	
BARBARA Y MORGAN	(I) 149,54: (II) (1 0 0	0	15,351 0	9,339 0	174,231 0	0	
JOHN R OVERTON II	(I) 145,176 (II) (5 0 0	0	12,040 0	11,672 0	168,888	0	
JEANEY J GARCIA	(I) 116,11! (II) (5 0 0	28,500 0	9,785 0	13,573 0	167,973 0	0	
I	(I) 144,282 (II) (2 0 0	0	11,547 0	0	155,829 0	0	
	(I) 145,278 (II) (3 0 0	0	14,993 0	8,424 0	168,695 0	0	

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As Filed Data -

DLN: 93493132042154

Schedule L

Department of the Treasury

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

2012

Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

Name of the organization PUNAHOU SCHOOL							Em	Employer identification number					
Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) org									-0073				
												106	
						art IV, line 25						(d) Corre	octod2
1 (a) Name of disqualified person				(b) Relationship between disqualified person and organization				(c) Description of transaction				Yes	No.
				<u>'</u>							-	165	110
2 Enter the am	ount of ta	x ıncurre	d by organiza	ation mana	gers or disc	qualified perso	ns during the	yearı	ınders	section			
4958									•	F \$			
3 Enter the am	ount of ta	x, ıf any,	on line 2, abo	ove, reimb	ursed by th	e organızatıon			•	► \$			
Part II Loa		d/a= E	rom Inter	acted D	216076								
						-EZ, Part V, lı	ine 38a. or Fo	rm 99	0. Par	t TV . lın	e 26. o	rıfthe	
			n amount on l						-, . u.	,			
(a) Name of	1 ' '		(c) Purpose			(e)Original	(f)Balance) In	, , ,		(i)Written agreement?		
ınterested	with orga	ınızatıon	ofloan	or from		1 ' '	principal due	default? Approved					
person				organızat	10117	amount				by board or committee?			
				То	From			Yes	No	Yes	No	Yes	No
												-1	
												_	
												_	
												_	
												_	
Total				▶ \$									
			ce Benefit										
						rm 990, Part						_	
(a) Name of inte	erested		lationship bet ted person ar		c) A mount o	fassistance	(d) Type o	fassis	tance	(e)	Purpos	e of assi	ıstance
person			teu person ar organization	id the									
			<i>y</i>				<u> </u>						
							•						
							•						
							-						

Part IV Business Transactions In Complete if the organization			e 28a, 28b, or 28c.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
See Additional Data Table					
				1	1

Part V Supplemental Information

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

Identifier	Return Reference	Explanation
BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	SCHEDULE L, PART IV, COLUMN (D)	THE FOLLOWING PAYMENTS WERE MADE TO THE ORGANIZATIONS OR COMPANIES THAT THE TRUSTEES WORK FOR, ARE BOARD MEMBERS OF, OR REPRESENT AND NOT TO THE INDIVIDUALS DIRECTLY CONSTANCE H LAU MS LAU IS THE PRESIDENT & CHIEF EXECUTIVE OFFICER OF HAWAIIAN ELECTRIC INDUSTRIES, WHICH IS THE PARENT COMPANY OF HAWAIIAN ELECTRIC COMPANY, THE ONLY ELECTRICITY PROVIDER ON THE ISLAND OF OAHU THE TRANSACTION REPRESENTS AMOUNTS PAID AT STANDARD RATES AVAILABLE TO THE PUBLIC FOR ELECTRICITY SERVICES TO HAWAIIAN ELECTRIC COMPANY JEFFREY N WATANABE MR WATANABE IS THE CHAIRMAN OF HAWAIIAN ELECTRIC INDUSTRIES, WHICH IS THE PARENT COMPANY OF HAWAIIAN ELECTRIC COMPANY, THE ONLY ELECTRICITY PROVIDER ON THE ISLAND OF OAHU THE TRANSACTION REPRESENTS AMOUNTS PAID AT STANDARD RATES AVAILABLE TO THE PUBLIC FOR ELECTRICITY SERVICES TO HAWAIIAN ELECTRIC COMPANY, THE ONLY ELECTRICITY PROVIDER ON THE ISLAND OF OAHU THE TRANSACTION REPRESENTS AMOUNTS PAID AT STANDARD RATES AVAILABLE TO THE PUBLIC FOR ELECTRICITY SERVICES TO HAWAIIAN ELECTRIC COMPANY JAMES K SCOTT DR SCOTT IS A DIRECTOR OF HAWAIIAN ELECTRIC INDUSTRIES, WHICH IS THE PARENT COMPANY OF HAWAIIAN ELECTRIC COMPANY, THE ONLY ELECTRICITY PROVIDER ON THE ISLAND OF OAHU THE TRANSACTION REPRESENTS AMOUNTS PAID AT STANDARD RATES AVAILABLE TO THE PUBLIC FOR ELECTRICITY SERVICES TO HAWAIIAN ELECTRIC COMPANY THE PAYMENTS NOTED BELOW REPRESENT COMPENSATION PAID BY THE ORGANIZATION TO FAMILY MEMBERS OF INTERESTED PERSONS FOR SERVICES RENDERED TO THE ORGANIZATION PAYMENT AMOUNTS WERE DETERMINED BY INDIVIDUALS WITHOUT A CONFLICT OF INTEREST POLICY DISCLOSED ABOVE JOHN D FIELD MR FIELD'S SPOUSE, SUSAN FIELD, RECEIVED COMPENSATION FROM THE SCHOOL FOR SERVICES AS AN ACADEMY MATH TEACHER MICHAEL WALKER MR WALKER'S SPOUSE, WENDY MACIAS-WALKER, RECEIVED COMPENSATION FROM THE SCHOOL FOR SERVICES AS AN ACADEMY MATH TEACHER MICHAEL WALKER MR ALBER'S SPOUSE, WENDY MACIAS-WALKER, RECEIVED COMPENSATION FROM THE SCHOOL FOR SERVICES AS A HINDERGARTEN TEACHER THAN DE ABBOTT'S DAUGHTER, MEGAN JOSWICK, RECEIVED COMPENSA

Additional Data

Software ID: Software Version:

EIN: 99-0073523

Name: PUNAHOU SCHOOL

Form 990, Schedule L, Part IV - Business Transactions Involving Interested Persons

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
(1) CONSTANCE H LAU	TRUSTEE	2,351,476	SEE SCHEDULE L DISCLOSURE		No
(2) JEFFREY N WATANABE	TRUSTEE	2,351,476	SEE SCHEDULE L DISCLOSURE		No
(3) JAMES K SCOTT	OFFICER	2,351,476	SEE SCHEDULE L DISCLOSURE		No
(4) SUSAN FIELD	FAMILY MEMBER OF OFFICER	95,390	SEE SCHEDULE L DISCLOSURE		No
(5) WENDY M WALKER	FAMILY MEMBER OF KEY EMP	81,089	SEE SCHEDULE L DISCLOSURE		No
(6) MARI-JO SCHULL	FAMILY MEMBER OF TRUSTEE	91,687	SEE SCHEDULE L DISCLOSURE		No
(7) MEGAN JOSWICK	FAMILY MEMBER OF TRUSTEE	39,530	SEE SCHEDULE L DISCLOSURE		No

Noncash Contributions

DLN: 93493132042154

OMB No 1545-0047

2012

►Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990. Department of the Treasury Internal Revenue Service

Open to Public Inspection

Name of the organization PUNAHOU SCHOOL

SCHEDULE M

(Form 990)

Employer identification number

Pa	rt I Types of Property				99-00/3523			
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of deto noncash contribut		_	ts
1	Art—Works of art							
2	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications	Х		1,118	REPLACEMENT COS	T		
	Clothing and household goods	Х		12	REPLACEMENT COS	Т		
	Cars and other vehicles							
	Boats and planes							
	Intellectual property		4.7	60.004	AVERAGE MARKET			
	Securities—Publicly traded . Securities—Closely held stock .	X	17	69,981	AVERAGE MARKET			—
	Securities—Partnership, LLC,							
12	or trust interests							
	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—O ther							
18	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts							
	Scientific specimens Archeological artifacts							
27	Ping pong							
25	Other ► (table)	Х	1	593	REPLACEMENT COS	Т		
26	Crossman Other ► (<u>RIFLES</u>)	Х	1	1,050	REPLACEMENT COS	Т		
27	Kawai upright Other ► (<u>piano</u>)	Х	1	4,500	REPLACEMENT COS	Т		
	TOTO Plumbing							
28	Other ► (<u>fixtures</u>) 4 Combo	X	1		REPLACEMENT COS			
	O ther ► (guitar amps) Kenmore Gas	X	1	3,600	REPLACEMENT COS	<u>T</u>		
	Other►(<u>Grill</u>)	Х	1	415	REPLACEMENT COS	Т		
	24 gallons of Other ► (paint)	x	1	1.368	REPLACEMENT COS	Т		
	TOWER			2,500				
	GARDEN W/ Other►(<u>SEEDS</u>)	Х	1	855	REPLACEMENT COS	Т		
	21 POTTERY Other ► (<u>WHEELS</u>)	Х	1	44,292	REPLACEMENT COS	Т		
	8 67 KW PV Other ► (<u>SYSTEM</u>)	Х	1	43,350	REPLACEMENT COS	Т		
29	Number of Forms 8283 received for which the organization comple				29			2
30-	During the year, did the organiza			_	1-28 that it		es	No
Jua	must hold for at least three year							
	for exempt purposes for the enti					30a		No
h	If "Yes," describe the arrangement				F	Ju	\dashv	
31	Does the organization have a gif			review of any non-standard	contributions?	31	es	
32a	Does the organization hire or us	e third parti	es or related organizations	to solicit, process, or sell i	noncash			
h	contributions?				· · · <u>3</u>	32a \	'es	
	If the organization did not report	t an amount	in column (c) for a type of	property for which column (a) is checked,			

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

number of items re-	ceived, or a combination of both.	Also complete this part for any additional information.
Identifier	Return Reference	Explanation
NON-CASH DONATIONS DISCLOSURE	SCHEDULE M, COLUMN B	The organization is reporting the number of contributions received on Column B of Schedule M For contributions of securities, each separate gift is reported on Column B
THIRD PARTIES USED TO SELL NON-CASH DONATIONS	SCHEDULE M, PART I, LINE 32B	THE ORGANIZATION USES A THIRD PARTY BROKERAGE SERVICE TO SELL ALL DONATED STOCK
METHOD OF DETERMINING REVENUES	SCHEDULE M, PART I, COLUMN D	CONTRIBUTED PROPERTY IS RECORDED AS INCOME AT THE FAIR VALUE OF THE PROPERTY ON THE DATE OF DONATION THE FAIR VALUE OF PUBLICLY TRADED SECURITIES IS BASED ON AVERAGE MARKET PRICES

Schedule M (Form 990) (2012)

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012

Open to Public Inspection

Name of the organization PUNAHOU SCHOOL	Employer identifi	cation number
	99-0073523	

ldentifier	Return Reference	Explanation
PROGRAM	FORM 990, PART III, LINE 4D	Athletics - Punahou School has been a member of the ILH (Interscholastic League of Honolulu) since 1909 and fields over 115 competitive teams. Students interested in participating on an athletic team can try out for one of 23 different sports beginning in the 7th grade. Student Activities - For many students, Punahou becomes more than just a school, it serves as a community, a neighborhood, a place which provides a large part of their total environment. Thus, the student activities are varied and offer the students opportunities to get involved in special interest clubs, May Day/Holoku Pageant and curriculum-related travel by athletic teams, speech/debate and musical groups. Theatre Programs - Theatre has a long history at Punahou. Informal classroom activities growing out of a class studies initiate play-acting in early grades. More structured stage experiences are offered in the Grades 5 and 7 Keaka Punahou Clubs and Thurston Memorial Chapel performances. Theatre opportunities in the Drama Workshop classroom or on the Dillingham stage are offered each semester for seventh and eighth graders. Academy students have the opportunity to perform in a play each semester, or to direct or act in student-initiated productions in the Drama Workshop. Formal Theatre courses are offered in Technical Theatre, Acting and Musical Theatre in the Academy.

ldentifier	Return Reference	Explanation
REVIEW PROCESS FOR FORM 990	FORM 990, PART VI, SECTION B, LINE 11	The Board of Trustees has delegated the review of the Form 990 to the Audit Committee. The organization's Assistant Treasurer & Controller works closely with the outside accounting firm it engages to review the return, and the final draft of Form 990 is also reviewed by the Vice President of Finance and Administration prior to providing the draft to the Audit Committee. The Audit Committee also met with the accounting firm hired to prepare the Form 990. Subsequent to its review, the Audit Committee reports back to the Board regarding its oversight of the Form 990 and a complete copy of the Form 990. Form 990-T is provided to the entire voting Board before the return is filed.

Identifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY	FORM 990, PART VI, SECTION B, LINE 12C	This Conflict of Interest Policy was duly adopted by the Board of Trustees of Punahou Scho ol, a Hawaii nonprofit corporation (the School), on June 12, 2007. 1. Purpose: The Board of Trustees recognizes that the Trustees, Directors, and Officers are active participants in the communities in which they live. As such, these people may serve in many capacities with businesses, organizations, agencies and programs that may interested with the interests of the School While such roles may give rise to a dual interest which is beneficial to all parties, the Trustees, Directors, and Officers, must be sensitive to instances that may be perceived to present a conflict between the best interests of the School and their individual interests. Accordingly, the purpose of this Conflict of Interest Policy is to prof ect the interest of the School, and to assist the Trustees, Directors, and Officiers are contine metality and interest of a trustee, director, OR officer of the School. This policy is intended to supplement but not replace any applicable laws of the State of Hawaii governing conflicts of interest 2. Definitions. Arrangement shall mean any issue, matter, contract, agreement, transaction or other arrangement with the School or in which the School has an interest. Conflict of interest shall mean any action or proposed action by a Trustee, director, or Officer with respect to an Arrangement of involving (i) such Trustee, Director, or Officer (ii) the spouse of such person, or (iii) a Related Entity of such person. An Arrangement in which no action is taken or proposed to be taken by a Trustee, Director, or Officer (i.e., transactions which are not brought before the Board of Trustees, Director, or Officer; having a Conflict of Interest Related Entity shall mean any organization in which a Trustee, Director, or Officer, having a Conflict of interest Related Entity shall mean any organization in which a repatitive of the volting power or beneficial interests. Or (ii) is an officer, director, trustee, partner or otherwise

ldentifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY	FORM 990, PART VI, SECTION B, LINE 12C	connection therewith 5 Annual Statements EACH TRUSTEE, DIRECTOR, or OFFICER SHALL ANNU ALLY FILL OUT A CONFLICT OF INTEREST STATEMENT IN IT, THEY SIGN A STATEMENT WHICH AFFIRMS THAT SUCH PERSON (I) HAS RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, (II) HAS REA D AND UNDERSTANDS THE POLICY, (III) AGREES TO COMPLY WITH THE POLICY, AND (IV) DISCLOSES A NY ACTUAL OR POTENTIAL CONFLICT OF INTEREST (AS DEFINED IN THE CONFLICT POLICY)

ldentifier	Return Reference	Explanation
COMPENSATION DETERMINATION	FORM 990, PART VI, SECTION B, LINE 15A & 15B	The Board appoints a Compensation Committee, comprised solely of independent trustees, none of which have a conflict of interest with respect to the compensation arrangement, to be accountable for setting reasonable compensation for each officer or key employee. The President, consistent with the organization's philosophy and principles, and based on performance goals established for the President by the Board and Compensation Committee, develops annual performance goals and criteria to be used by the Compensation Committee in determining merit increases for other officers and key employees. The President acts solely as an advisor in this process, and does not determine, or have a vote with regards to officer or key employee salaries. Appropriate comparability data is obtained from independent experts, i.e., total economic benefits paid by similarly situated organizations (both taxable and tax-exempt) for similar job responsibilities. The most recent comparability study was performed in July 2012. The Committee's written record include the (1) terms of the arrangement with the President and/or officers and key employees (including the date the arrangement was approved), (2) a list of members present during the debate on the transaction (and how the members voted when it was approved), (3) a description of the comparable data relied on by the Committee, and (4) any actions taken with respect to consideration of the transaction by members of the committee who had a conflict of interest with respect to the transaction. Key deliberations of the Committee are also documented in minutes which are approved at the next Committee meeting

ldentifier	Return Reference	Explanation
INFORMATION AVAILABLE TO PUBLIC	SECTION C, LINE 19	While federal tax laws do not mandate that the organization's governing documents, conflict of interest policy and financial statements be made available for public inspection, the organization makes its financial statements available upon request

ldentifier	Return Reference	Explanation
	XI, LINE 9	OTHER CHANGES ARE AS FOLLOWS CHANGE IN VALUE OF SPLIT-INT AGR 878,651 FMV ADJUSTMENT - INVESTMENTS (63,635) ADOPTION OF PROVISIONS OF SFAS 158 1,977,415 TOTAL 2,792,431

ldentifier	Return Reference	Explanation
•	SECTION A, LINE 2	CONSTANCE LAU, A MEMBER OF THE BOARD OF TRUSTEES, JEFFREY WATANABE, A MEMBER OF THE BOARD OF TRUSTEES, AND JAMES SCOTT, PRESIDENT, HAVE A BUSINESS RELATIONSHIP IN A FOR-PROFIT ENTITY

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DLN: 93493132042154

OMB No 1545-0047

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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. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization PUNAHOU SCHOOL

(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets		(f) Direct controlling entity		
				-			
anizations (Complete mage the tax year.)	f the organization a	nswered "Yes	" to Form 990,	Part IV	, line 34 because i	t had o	ne
(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sec			(f) Direct controlling entity	Section (13) co	ontro tity?
CHAR TRUST	HI	501(C)(3)	11		PUNAHOU SCH		N ₄
CHAR TRUST	HI	501(C)(3)	PF		PUNAHOU SCH	Yes	
CHAR TRUST	HI	501(C)(3)	11		PUNAHOU SCH	Yes	
							_
						\perp	
							$oxed{oxed}$
	CHAR TRUST	The tax year.) (b) (c) Legal domicile (state or foreign country) CHAR TRUST HI CHAR TRUST HI CHAR TRUST HI	ring the tax year.) (b) (c) (d) Exempt Code sector foreign country) CHAR TRUST HI 501(C)(3) CHAR TRUST HI 501(C)(3)	ring the tax year.) (b) (c) Legal domicile (state or foreign country) CHAR TRUST HI 501(C)(3) CHAR TRUST HI 501(C)(3) CHAR TRUST HI 501(C)(3) 11 CHAR TRUST HI 501(C)(3) HI 501(C)(3)	ring the tax year.) Char Char	(c) (d) (e) (f) Primary activity Legal domicile (state or foreign country) CHAR TRUST HI 501(C)(3) PF Public charity status (if section 501(c)(3)) PUNAHOU SCH CHAR TRUST HI 501(C)(3) PF PUNAHOU SCH CHAR TRUST HI 501(C)(3) 11 PUNAHOU SCH	Char Trust HI Sol(C)(3) Primary activity Char Trust Punation (13) contains a containing and containing activity Char Trust Punation (13) containing activity Char Trus

(a) Name, address, and EIN o related organization	f	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percentae ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo zations treated a	ration s a cor	or Trust (poration or	Complete if t	he organı the tax ye	zatıon ar ar.)	swere	ed "Ye	s" to Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domıcıle (state or foreign country)		(d) Direct controlli entity	(e) Type of enti (C corp, S corp, or trust)	(f) Share of to income	total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
		,,			,						Yes		No

Pa	rt V	Transactions With Related Organizations (Complete if the organization	n answered "Yes" to Foi	m 990, Part IV, lın	e 34, 35b, or 36.)					
	Note.	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No			
1 D	uring th	ne tax year, did the orgranization engage in any of the following transactions with one or r	more related organizations	listed in Parts II-IV?						
а	Recei	pt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			12	•	No			
b Gift, grant, or capital contribution to related organization(s)										
С	Gıft, g	rant, or capital contribution from related organization(s)			10	Yes				
d	Loans	or loan guarantees to or for related organization(s)			10	1	No			
e	Loans	or loan guarantees by related organization(s)			16	2	No			
f	Divide	ends from related organization(s)			11	:	No			
g	Sale	of assets to related organization(s)			19]	No			
h	Purch	ase of assets from related organization(s)			11	1	No			
i	Excha	nge of assets with related organization(s)			11	i	No			
j	Lease	of facilities, equipment, or other assets to related organization(s)			1j	i	No			
k	k Lease of facilities, equipment, or other assets from related organization(s)									
I Performance of services or membership or fundraising solicitations for related organization(s)										
m Performance of services or membership or fundraising solicitations by related organization(s)										
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)										
o	Sharıı	ng of paid employees with related organization(s)			10	,	No			
р	Reimb	pursement paid to related organization(s) for expenses			11	,	No			
q	Reimb	pursement paid by related organization(s) for expenses			10	1	No			
r	Other	transfer of cash or property to related organization(s)			11	-	No			
s	Other	transfer of cash or property from related organization(s)			1:	;	No			
2	Ifthe	answer to any of the above is "Yes," see the instructions for information on who must co	mplete this line, including	covered relationships	and transaction thresholds					
		(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amoun	t involve	d			
(1) C	NW FAC	JLTY BENEFIT TRUST AT PUNAHOU	С	819,846	CASH RECEIVED					
(2) C	F TRUST		С	101,830	CASH RECEIVED					
(3) J	TW TE CO	OTR PUNAHOU	С	878,178	CASH RECEIVED					

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 re	garding exclu	sion for ce		nent	partnerships				`	,		-	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Additional Data Return to Form

Software ID:

Software Version:

EIN: 99-0073523

Name: PUNAHOU SCHOOL

Schedule R (Form 990) 2012

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Part VII Supplemental Information

Identifier Return Reference Explanation	Complete this part to provide additional information for responses to questions on Schedule R (see instructions)								
			Explanation						