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Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

2013 Open to Public Inspection

<u>A</u>	For th	e 2013 c	alendar year, or tax year beginning , and ending							
В	Check if a	applicable	C Name of organization			yer identification number				
	Address o	change	HAWAII COMMUNITY FOUNDATION		0					
	Name cha	anne	Doing Business As		99-	-0261283				
님		•	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone number					
	Initial retu	ım	827 FORT STREET MALL		ลกร	8-537-6333				
	Terminate	ed	City or town, state or province, country, and ZIP or foreign postal code							
$\overline{\Box}$	Amended	d cotuen	HONOLULU HI 96813-2817			. 100 641 447				
H	Amended	ı return	F Name and address of principal officer		<b>G</b> Gross reco	eipts \$ 198,641,447				
	Application	on pending		H(a) Is this a gr	oup return for si	ubordinates? Yes X No				
			KELVIN H. TAKETA			<b>5.</b> 5.				
			827 FORT STREET MALL	H(b) Are all sub						
		i	HONOLULU HI 96813	if "No,	" attach a list	(see instructions)				
	Tax-exer	mpt status	X 501(c)(3) 501(c) ( ) ◀ (insert no ) 4947(a)(1) or 527							
J	Website	<u>. ► W</u>	WW.HAWAIICOMMUNITYFOUNDATION.ORG	H(c) Group exe	mption numbe	r <b>&gt;</b>				
K	Form of c	organization	X Corporation Trust Association Other ► L Yea	ar of formation 1	916	M State of legal domicile HI				
F	art I	Su	ımmary							
	1 1	Briefly de	scribe the organization's mission or most significant activities:	-		<u> </u>				
ø		SEE	STATEMENT 1							
Ĕ										
Ë										
Activities & Governance	, ,	Check thi	is box ▶ ☐ if the organization discontinued its operations or disposed of more than 25%	of its not as	noto					
ŏ	(		of voting members of the governing body (Part VI, line 1a)	o or its net as	1 1	20				
• <b>5</b>	1				3	20				
ij	1		of independent voting members of the governing body (Part VI, line 1b)		4	19				
	1		nber of individuals employed in calendar year 2013 (Part V, line 2a)		5	72				
ě	1		nber of volunteers (estimate if necessary)		6	88				
	1		elated business revenue from Part VIII, column (C), line 12		7a	700,495				
	ы	Net unrela	ated business taxable income from Form 990-T, line 34		7b	0				
	١.,			ar a	Current Year					
9	1		ions and grants (Part VIII, line 1h)	1,041	35,761,831					
Revenue	1	_	service revenue (Part VIII, line 2g)	3,890	1,133,019					
ě	1		nt income (Part VIII, column (A), lines 3, 4, and 7d)	13,57		18,163,066				
_	11 (	Other rev	renue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		9,369	70,686				
	12	Total reve	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	39,26		55,128,602				
	13 (	Grants ar	nd similar amounts paid (Part IX, column (A), lines 1–3)	27,36	1,979	26,404,263				
	14 6	Benefits p	paid to or for members (Part IX, column (A), line 4)	0	0					
S	15 3	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	0,664	6,077,735					
penses	16a F	Professio	nal fundraising fees (Part IX, column (A), line 11e)			0				
	Ь-	Total fund	draising expenses (Part IX, column (D), line 25) ▶ 1,989,072			***************************************				
Щ			penses (Part IX, column (A), lines 11a-11d, 11f-24e)	4.41	8,535	3,466,803				
			enses. Add lines 13–17 (must equal Part IX, column (A), line 25)	37,16		35,948,801				
		-	less expenses. Subtract line 18 from line 12		2,664	19,179,801				
2 8	3			Beginning of Cu		End of Year				
Net Assets or Fund Balances	20	Total asse	ets (Part X line 16)	426,63		473,135,711				
Ass	21 7	Total liabi	ilities (Part X, line 26)	51,11		48,706,447				
E.E	22 1		f (1977)	375,51		424,429,264				
	art II	***	anature Block	<u> </u>	7 1					
			perjury, I declare that I have examined this return, including accompanying schedules and statement	ts and to the h	oct of my kn	outodes and halist it is				
			omplete Declaration of preparer (other than officer) is based on all information of which preparer has			owledge and belief, it is				
			W MALL MA . (X			12/1/2				
Sig	ın		gnature of officer		Date	1.2/14				
He	-			DD DTNI	·	OFFICER				
пе	i e	1 To		FL LINA	MCTAL	OFFICER				
		+	ype or print name and title	15.	<del> </del>					
Paid	d		preparer's name Preparer's signature	Date	Check	If PTIN				
		ISOO O	SHIMA, CPA ISOP DSHIMAL CPA	11/10	/14 self-em					
	parer	Firm's nan		F	irm's EIN	87-0716721				
ŲSE	Only	ł	841 BISHOP ST STE 208	Γ		<del></del>				
		Firm's add	tress HONOLULU, HI 96813-3920		hone no	808-521-6481				
May	the IR	S discuss	s this return with the preparer shown above? (see instructions)			X Yes No				
		vork Redu	ction Act Notice, see the separate instructions.			Form <b>990</b> (2013)				
DAA						• •				

Form 990 (2013	3) HAWAII COMMUNIT	Y FOUNDATION	99-0261283	Page 2
Part III	Statement of Program S	ervice Accomplishments		
	Check if Schedule O conta	ains a response or note to any	ine in this Part III	
-	scribe the organization's mission PATEMENT 1,			
2 Did the o	rganization undertake any signific	ant program services during the year	which were not listed on the	
If "Yes," o	n 990 or 990-EZ? describe these new services on S			Yes X No
services?	•	make significant changes in how it cor	ducts, any program	Yes X No
4 Describe expenses		e accomplishments for each of its three organizations are required to report the	ee largest program services, as measure te amount of grants and allocations to of	
HAS AS HAWAII ON THE	COMMUNITY FOUND SISTED 774 ORGAN GRANT MAKING O ATTACHED STATEM	IZATIONS AND OTHER! CCURS IN TWENTY DII ENT (SEE STATEMENT	26,404,263 ) (Revenu GRANTMAKING AND PROG 5 TO ACHIEVE A BETTE FFERENT PROGRAM AREA #2-NOTE: TIMING DIE JLT IN A DIFFERENCE	GRAM SERVICES ER COMMUNITY IN AS AS DESCRIBED FFERENCES &
ORGANI AND GR FOUNDA MAKING BEEN D THIS A AND OF	ZATIONS IN THEIR ANT MANAGEMENT STION HAS FACILITED TO BE CONSIVERS THE RELATED TO SEGREGA	COMMUNITY GRANT MERVICES. THROUGH THATED AN ADDITIONAL TIONS AND ORGANIZATIONS AND ORGANIZATION BUSINESS DERED CORE TO HAWATED COSTS OF PROVIDING	(Revenue) (Reven	OTHER GRANT EVALUATION COMMUNITY MUNITY GRANT THE REVENUE HAS ENUE RELATED TO TION'S MISSION TIS CURRENTLY
4c (Code	) (Expenses \$	including grants of \$	) (Revenue	e \$ )
4d Other pro	gram services. (Describe in Sche	dule O)		
(Expense:	•	ncluding grants of \$	) (Revenue \$	)
4e Total prod	ram service expenses ▶	30,898,582		

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	_1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	_3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	_X_	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8	X	
9	Did the organization report an amount in Part X, line 21, 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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
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	X	
b	•			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	, , , , , , , , , , , , , , , , , , , ,			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	1		
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			42
47	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			7.7
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		<u>_x</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			v
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			v
no -	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

	990 (2013) HAWAII COMMUNITY FOUNDATION 99-0261283		Р	age 4
	art IV Checklist of Required Schedules (continued)		T	Γ
24	Did the exceptration report more than \$5,000 of grants or other assistance to any demants except and		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	24	x	
22	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States	21	<u> </u>	├─-
22	· · · · · · · · · · · · · · · · · · ·		x	
23	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the		^	-
23	organization's current and former officers, directors, trustees, key employees, and highest compensated		1	
	employees? If "Yes," complete Schedule J	23	x	
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		-	-
2-70	\$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 25a	240		x
b		24a	+	
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24b	+	-
·	to defease any tax-exempt bonds?	240		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c	┼	
25a		24d	┼	
ZJa	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	254		-
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	250	<del>                                     </del>	-
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	20	$\vdash$	-
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		<del>                                     </del>	-
	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	x	İ
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	204	† <del></del>	
_	Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200	<del>                                     </del>	
_	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	x	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			<u> </u>
	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			<b></b>
	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
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	35ь	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		1	
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	1	х

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,

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

Form **990** (2013)

37

38

X

37

38

Part VI

99-0261283

Page 5

Pa	Check if Schedule O contains a response or note to any line in this Part V			
	Check is Schedule O contains a response of flote to any line in this Fart V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		.00	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	7 1		į
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	7		ĺ
	reportable gaming (gambling) winnings to prize winners?	1c		l
2a				
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 72			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	<u> </u>	
4a	At any time duning 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		X
þ	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			~
L	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6.		
7	Organizations that may receive deductible contributions under section 170(c).	6b		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
ŭ	and services provided to the payor?	7a	x	İ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			ĺ
	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter:			ĺ
a	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	<b> </b>		l
ь 11	Section 501(c)(12) organizations. Enter:	$\dashv$ $\mid$		ĺ
'' a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			l
-	against amounts due or received from them.)			l
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ł
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			· · · · · ·
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ĺ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			ĺ
	the organization is licensed to issue qualified health plans			ĺ
С	Enter the amount of reserves on hand			Ĺ
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below. and for a "No"

Page 6

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 20 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 19 Enter the number of voting members included in line 1a, above, who are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X any other officer, director, trustee, or key employee? 2 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, X 7b stockholders, or persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a X 8ь Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a Describe in Schedule O the process, if any, used by the organization to review this Form 990 X Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a X 15b 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 taxable entity during the year? X 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 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 > WALLACE CHIN 827 FORT STREET MALL 808-537-6333 HONOLULU HI 96813

	13) HAWAII COMMUNITY FOUNDATION	99-0261283	Page 7
Part VII	Compensation of Officers, Directors, Trustee	s, Key Employees, Highest Compensated E	mployees, and
	Independent Contractors		•
	Check if Schedule O contains a response or not	e to any line in this Part VII	
Section A.	Officers, Directors, Trustees, Key Employees, and High		

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

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

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

(A) Name and Title	(B) Average hours per week (list any	bo	x, unle	33 pe	ition more rson l irecto	than one s both a r/trustee	n	(D) Reportable compensation from the	(E) Reportable compensation from related orgenizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) PAUL KOSASA		T								
	0.40									
BOARD CHAIRMAN	0.00	X	_	X	_			0	0	0
(2) DEBORAH BERGER										
	0.40	1		Ì		1 1				
VICE CHAIR	0.00	X		X				0	0	0
(3) GARY CAUFIELD		1				1 1				
	0.40	.								
SECRETARY	0.00	X	<u> </u>	X	L.,			0	0	0
(4) CHARLIE KING										
	0.40			]				. 1		
TREASURER	0.00	X	L	X				0	0	0
(5) ROBERT R. BEAN	1					1				
	0.40		ļ		1	1		_	_	
DIRECTOR	0.00	X	_		<u> </u>	$\sqcup \bot$		0	0	0
(6) MARY G. F. BITTI		}			1	1 1				
	0.20	.		1			ľ	_		
DIRECTOR	0.00	X	<u> </u>	Ь_	_	$\sqcup$		0	0	0
(7) MICHAEL BRODERIC		İ				1 1				
	0.30	l								
DIRECTOR	0.00	X	L	L_	ļ	$\perp$		0	0	0
(8) ELIZABETH GROSSI		1		1		} }				
	0.30				İ					
DIRECTOR	0.00	X	<u> </u>	<u> </u>	_	$\sqcup$		0	0	0
(9) RICHARD W. GUSH		1			}	1				
	0.30		Ì	1	ĺ					
DIRECTOR	0.00	X	L	<b>!</b>	<u> </u>	1		0	0	0
(10) ROBERT S. HARRIS		i	İ	ļ		1 1				
	0.40	Ì		]	1				!	
DIRECTOR	0.00	X	<u> </u>	<u> </u>	<u> </u>	$\sqcup$		0	0	0
(11) DOROTHY HAYNES		1								
	0.30			ļ	1	1			_	
DIRECTOR	0.00	X	<u> </u>	L	L	LĿ		0	0	1 0

Part VII Section A. Officers	, Directors, Tru	stee	s, K	ву Е	mpl	oyee	s, a	nd Highest Compensated	Employees (continued)	
(A) Name and title	(B) Average hours per week (list any hours for	of	oc, unle ficer a	Pos check ess pe nd a d	rson ı	than o s both r/truste	an e)	(D) Reportable compensation from the organization	(E)  Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(	organization and related organizations
(12) PETER HO	0.30									
DIRECTOR	0.30	x	1	1				o	o	о
(13) TYLER LEE JENKII			Г							
DIRECTOR	0.30	x						О	o	0
(14)MICAH KANE										
DIRECTOR	0.20	x						0		
(15) CATHERINE LUKE	0.00	1		╁╌	┼	<del>                                     </del>	$\vdash$	<del> </del>	0	0
(10) 66621112111111111111111111111111111111	0.40									
DIRECTOR	0.00	X	_	<u> </u>	<u> </u>	<u> </u>	L	0	0	0
(16) COLBERT MATSUMO		1	1	1	}					
DIRECTOR	0.20	x	1					0		o
(17) JENNIFER GOTO SI		1	十		1	1	1			<del> </del>
	0.20		ļ	ļ	1				ļ	ļ.
DIRECTOR	0.00	X	├_	├-	┼	<del> </del>	-	106,000	<u> </u> 0	0
(18) BARRY TANIGUCHI	0.30	}	}		1	1				
DIRECTOR	0.00	x	l					0	d	0
(19) JAMES WEI										
DIRECTOR	0.30	x						o		o
1b Sub-total		•					<b>&gt;</b>	106,000		
c Total from continuation she	ets to Part VII,	Sect	ion /	A			<b>&gt;</b>	1,592,838		346,547
d Total (add lines 1b and 1c)  2 Total number of individuals (in	cluding but not l	imite	ed to	thos	se lis	ted a	abov	1,698,838		346,547
reportable compensation from										
3 Did the organization list any fo	rmer officer dir	ecto	r or	trus	tee	kev e	emn	lovee or highest compans	ated	Yes No
employee on line 1a? If "Yes,"	complete Sche	dule	J for	suc	h ini	dividu	ual			3 X
4 For any individual listed on line organization and related organ										
ındividual	• • • • • • • • • • • • • • • • • • • •									4 X
5 Did any person listed on line 1 for services rendered to the or									r individual	5 X
Section B. Independent Contracto		00,	0011	<u>ipic.</u>	<u> </u>	, ioac		7 tot Sucri person	<del></del>	
Complete this table for your five compensation from the organization.	e highest comp	ensa	ited	Inde	pend	dent	con	tractors that received more	than \$100,000 of	
	(A) business address	OIIID	<u> </u>	uon	101	110 0			(B) ption of services	(C) Compensation
BANK OF HAWAII-INVES		s			PO	BO	x :	2900	puon of services	Compensation
HONOLULU			68					TRUSTEE & INV		1,221,994
FIRST HAWAIIAN BANK-						) B		•		
HONOLULU UNIV. OF HAWAII-OFF.			68 800			20 1		TRUSTEE & INV LE ST, SAKAMAKI		772,358
HONOLULU			68			,		CNSLT-SUPP SV		331 006
CHILDREN'S ALLIANCE	OF HI, IN	C			110	00 2		AKEA ST, STE 400		321,096
HONOLULU		9	68					CNSLT-SUPP SV	C	204,605
LAFRANCE ASSOCIATES, SAN FRANCISCO			41			) C		P ST, STE C CNSLT-EVAL SV	re -	
2 Total number of independent of				_		ed to	_		<u> </u>	141,000
received more than \$100,000									8	
DAA										Form <b>990</b> (2013)

HAW0006 11/10/2014 5 04 PM Pg 14 Page **8** 

(A) Name and title	(B) Average hours per week (list any hours for	(d bo	o not e	Pos check ess pe nd a d	tion more	than o	ne an ee)	(D)  Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	c	(F) Estimated amount of other compensation from the		
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	` 7		organizat and relat organizati	tion ted	
(12) ERIC YEAMAN	0.20												
DIRECTOR	0.00	$ \mathbf{x} $						o	0				0
(13) KELVIN H. TAKETA	<u> </u>												
	60.00							242 762					
PRESIDENT/CEO (14) CHRISTINE VAN BE	0.00	╁	╁	X			<del>-</del>	343,763	0		14	4,3	379
(14) CHRISTINE VAN BE	60.00			[ ;									
VP-CHIEF OPERATING O	0.00			X				218,765	0		3	7,9	949
(15)MYLES SHIBATA													
	60.00							150 050	_		_	_	•
VP-MRKTG INITIATIVES (16) THOMAS KELLY, JE	0.00	+	_	X				159,852	0		2	7,4	132
(16) THOMAS RELLIT, DE	60.00									}			
VP-KNWLDG, EVAL, LRNG	0.00			X				149,972	o		2	1,8	324
(17) WALLACE G K CHIN													
	60.00		1					146 515	_		_		
VP-CHIEF FINANCIAL O (18) KATHERINE P. LLC	0.00	$\vdash$	-	X		├		146,517	0	<del> </del>	2	4,	/95
(16) TATHERINE F. LIC	60.00												
VP-OP, GENERAL CONSEL	0.00			X				83,783	0		1	5,4	164
(19) TAMMI OYADOMARI-													
VP-PROGRAMS	60.00 0.00			x				64,245	o		1	1,5	503
1b Sub-total	0.00	ــــــــــــــــــــــــــــــــــــــ	i	14	L	<u> </u>	▶	1,166,897				3,4	
c Total from continuation shee	ets to Part VII,	Sect	ion /	4			<b>•</b>						
d Total (add lines 1b and 1c)							<u> </u>						
Total number of individuals (in reportable compensation from	-		ed to	thos	e lıs	ted a	bov	e) who received more than	\$100,000 in			Yes	No
3 Did the organization list any fo								oyee, or highest compensa	ited	[		163	110
employee on line 1a? If "Yes,"  4 For any individual listed on line								n and other compensation	from the	}	3		
organization and related organ													
ındıvıdual  5 Dıd any person listed on line 1	a 5000000 as acc				-t			aralated ergenization or	andianda ol	-	4		
5 Did any person listed on line 1 for services rendered to the or									individual	İ	5	ĺ	
Section B. Independent Contracto	rs									,			
<ol> <li>Complete this table for your five compensation from the organization.</li> </ol>										aar			
	(A) business address	OIIIP.	<u> </u>	uoi.	01 0	10 00	I	Descrip	(B) tion of services		Com	(C) pensati	
TValle and	business address		_		_			резспр	IION OF SELVICES			ipensau	UII
							-						
							<del> </del>	<u> </u>	· -				
		_					L						
										Ī			_
2 Total number of independent of	ontroctors (m=1	udia-	. h t	no.		nd t-	the	se listed above) who	· ·				
2 Total number of independent of received more than \$100,000 c								se iisteu above) who			<u></u>		
DAA											Form	990	(2013)

(E)

Reportable

(D)

Reportable

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

(C)

Position

(B)

Average

(A)

Name and title

/10/2014 5 04 PM Pg 15 Page <b>8</b>	
(F) Estimated amount of other compensation from the organization and related organizations	
7,992	
6,679	
16 071	

	hours per week (list any	bo	x, unle	ess pe	erson i	than o s both r/trusto	an	compensation from the	compensation from related organizations	0	amount of other compensation			
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	orgai and	m the nization related nizations			
(12) CURTIS SAIKI	60.00													
VP-PHILANTHROPY	60.00			x				62,579	0		7	992		
(13)MARTHA ROSS	0.00						<u> </u>	02/3/3				, , , , _		
	60.00													
VP-PROGRAMS	0.00			X	<u> </u>			47,181	0		6,	679		
(14) LYDIA CLEMENTS	60 00													
DIRECTOR, NEIGHBOR I	60.00		1			x		110,275	0		16	971		
(15) FOREST FRIZZEL	0.00		1	<u> </u>		^	-	110,273			10,	9/1		
(13,1 31 11 11 11 11 11 11 11 11 11 11 11 11	60.00						ĺ							
CHF INFORMATION OFF	0.00			L		X		103,792	0		15	341		
(16) AMY LUERSEN					ĺ		ŀ							
D.T.D. DUITE 1.000000000000000000000000000000000000	60.00				1			100 114				100		
DIR., PHILANTHROPIC (17)	0.00				$\vdash$	X	<u> </u>	102,114	0		16,	,128		
(17)														
(18)												· · · · · · · · · · · · · · · · · · ·		
(19)				<u> </u>		<u> </u>								
1b Sub-total	1	1			<u> </u>		<u> </u>	425,941	· · · · · · · · · · · · · · · · · · ·		63	111		
c Total from continuation she	ets to Part VII,	Secti	ion /	A			<b>•</b>							
d Total (add lines 1b and 1c)							<u> </u>	<u> </u>						
2 Total number of individuals (in reportable compensation from			ed to	thos	e lis	ted a	ibov	e) who received more than	\$100,000 in					
	<u> </u>										Yes	No		
3 Did the organization list any fo								oyee, or highest compensa	ted	3				
employee on line 1a? If "Yes,"  For any individual listed on line organization and related organization.	e 1a, is the sum	of re	port	able	com	pens	satio	•						
<ul><li>individual</li><li>Did any person listed on line 1</li></ul>	la receive or acc	rue d	com	pens	atıor	ı fron	n an	ny unrelated organization or	ındividual	4	-	-		
for services rendered to the or	ganization? If "\									5				
Section B. Independent Contracto														
Complete this table for your five compensation from the organical compensation.										ear				
	(A) business address								(B) tion of services		(C) Compens	ation		
								<b>-------</b>			<u></u>			
							_							
										-				
							H	<del></del>	<del></del>					
										İ				
												_		
							_							
2 Total number of independent of	Contractors (incli	ıdina	. but	not	limite	ad to	tho	se listed above) who		<del></del>				
received more than \$100,000	of compensation	n fron	n the	e org	anız	ation	u10: ▶	se nated above) WIIU						
DAA										F	orm <b>99</b>	0 (2013)		

Form 990 (2013) HAWAII COMMUNITY FOUNDATION 99-0261283 Page 9 Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (C) Unrelated business (A) (D) Revenue exempt excluded from tax under sections 512-514 function revenue 1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c 2,697,241 d Related organizations 1d e Government grants (contributions) 1e 5,268,283 f All other contributions, gifts, grants, and similar amounts not included above 27,796,307 9,110,395 g Noncash contributions included in lines 1a-1f 35,761,831 h Total. Add lines 1a-1f Program Service Revenue Busn Code 541900 2a PROGRAM INCOME 700,495 700,495 541900 432,524 432,524 b PROGRAM INCOME f All other program service revenue 1,133,019 Total. Add lines 2a-2f Investment income (including dividends, interest, 7,180,840 7,180,840 and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (II) Personal (ı) Real 6a Gross rents **b** Less rental exps c Rental inc or (loss) d Net rental income or (loss) 7a Gross amount from (II) Other (i) Securities sales of assets 154,495,071 other than inventory **b** Less cost or other 143,512,845 basis & sales exps 10,982,226 c Gain or (loss)  $\blacktriangleright$ 10,982,226 10,982,226 d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses  $\triangleright$ c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses ▶ c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold h c Net income or (loss) from sales of inventory ▶ Miscellaneous Revenue Busn. Code 611600 70,686 11a OTHER INCOME 70,686 h All other revenue

▶

70,686 55,128,602

432,524

700,495

Total. Add lines 11a-11d

Total revenue. See instructions

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service (D) Fundraising Do not include amounts reported on lines 6b. (A) Total expenses (C) Management and 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and 24,592,233 24,592,233 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in 1,772,030 1,772,030 the U.S. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the 40,000 40,000 U.S See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 1,610,764 514,229 824,342 trustees, and key employees 272,193 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 3,385,103 1,471,833 948,858 964,412 Other salaries and wages Pension plan accruals and contributions (include 111,900 266,638 91,814 62,924 section 401(k) and 403(b) employer contributions) 429,542 182,839 99,369 147,334 Other employee benefits 126,468 385,688 183,035 76,185 10 Payroll taxes Fees for services (non-employees) Management 38,998 16,057 21,623 1,318 Legal b 60,877 60,877 Accounting C Lobbying Professional fundraising services See Part IV, line 17 293 276 Investment management fees 17 Other (If line 11g amount exceeds 10% of line 25, column 1,868,735 1,550,194 115,905 202,636 (A) amount, list line 11g expenses on Schedule O) 18,818 1,191 286 17,341 12 Advertising and promotion 78,016 23,686 37,923 16,40713 Office expenses 121,758 3,039 118,695 14 Information technology 24 15 Royalties 448,268 158,087 245,517 16 Occupancy 44,664 115,466 22,601 37,271 55,594 17 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials 308,988 196,668 56,683 55,637 19 Conferences, conventions, and meetings 20 21 Payments to affiliates 49,011 123,276 69,998 22 Depreciation, depletion, and amortization 4,267 28,243 12,426 14,908 909 23 Insurance 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 43,324 91,031 34,507 OTHER EXPENSES 13,200 а 63,109 PRINTING & PUBLICATIONS 18,003 10,566 34,540 b TELEPHONE & COMMUNICATI 53,524 4,515 43,012 5,997 c 16,779 DUES AND SUBSCRIPTIONS 47,403 17,151 13,473 All other expenses 35,948,801 30,898,582 3,061,147 1,989,072 25 Total functional expenses. Add lines 1 through 24e 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 following SOP 98-2 (ASC 958-720)

**Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 377,116 Cash-non-interest bearing 481,153 1 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or 1,674,067 other basis. Complete Part VI of Schedule D 10a 1,246,313 498,269 b Less: accumulated depreciation 10b 10c 427.754 Investments—publicly traded securities 398,664,462 11 452,062,192 11 12 Investments-other securities. See Part IV, line 11 26,844,928 19,899,071 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 251,442 265,541 Other assets. See Part IV, line 11 15 426,636,217 473,135,711 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 51,116,307 of Schedule D 48,706,447 26 Total liabilities. Add lines 17 through 25 51,116,307 48,706,447 26 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 365,963,401 27 Unrestricted net assets 412,327,233 28 3,814,570 6,360,092 Temporarily restricted net assets 5,741,939 29 5,741,939 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 375,519,910 Total net assets or fund balances 424,429,264 33 426,636,217 473,135,711 Total liabilities and net assets/fund balances

Form 990 (2013)

orm	990 (2013) HAWAII COMMUNITY FOUNDATION 99-0261283				Pa	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		5,1		
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,9		
3	Revenue less expenses. Subtract line 2 from line 1	3		9,1		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5,5		
5	Net unrealized gains (losses) on investments	5	2	9,7	29,	<u>553</u>
6	Donated services and use of facilities	6				
7	Investment expenses	7	L			
8	Pnor period adjustments	8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10	42	4,4	29,	<u> 264</u>
Рa	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response or note to any line in this Part XII					X
					Yes	No
1	Accounting method used to prepare the Form 990. Cash Cash Other MOD. CASH			ŀ		ĺ
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					l
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			1		
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight					
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?			3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					1
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	X	Щ_
				Fo	m <b>99</b> (	0 (2013)

**SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

HAWATT	COMMINITARY	FOUNDATION
TRAINST T	COMMONTAL	LOCKDUTTON

Employer identification number 99-0261283

P	art I	Reas	on for Public Charity	Status (All organizations	must co	mplete	this pa	art.) Se	e inst	ructior	ns.		
The	orga	nization is not	a private foundation becaus	e it is: (For lines 1 through 11, c	check only	one box	)						
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).												
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3		A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
4				in conjunction with a hospital of				)(1)(A)(i	ii). Ente	er the ho	ospital's name	٠,	
		city, and state											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
		section 170(b)(1)(A)(iv). (Complete Part II )											
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	П	An organization that normally receives a substantial part of its support from a governmental unit or from the general public											
		described in	section 170(b)(1)(A)(vi). (Co	omplete Part II )	-				•	-			
8	X			70(b)(1)(A)(vi). (Complete Part	tII)								
9	П	_		) more than 33 1/3% of its supp		contribute	ons, me	mbershi	p fees,	and gro	ss		
	_	receipts from	activities related to its exem	pt functions—subject to certain	exceptio	ns, and (2	2) no mo	re than	33 1/3%	6 of its			
		support from	gross investment income ar	nd unrelated business taxable in	come (le:	ss section	511 tax	c) from b	usines	ses			
		acquired by t	he organization after June 3	0, 1975 See <b>section 509(a)(2)</b> .	. (Comple	te Part III	.)						
10		An organizati	ion organized and operated o	exclusively to test for public safe	ety See s	ection 5	09(a)(4).						
11		An organizatı	on organized and operated o	exclusively for the benefit of, to	perform tl	ne functio	ns of, o	to carry	out the	е			
		purposes of o	one or more publicly support	ed organizations described in se	ection 509	9(a)(1) or	section	509(a)(2	) See	section	1		
		<b>509(a)(3)</b> . Ch	neck the box that describes the	he type of supporting organizati	on and co	mplete li	nes 11e	through	11h.				
	_	а Туре	l <b>b</b> Type II	c Type III–Functions	ally integr	ated	d	Тур	e III–No	n-funct	ionally integra	ted	
e		By checking	this box, I certify that the org	anization is not controlled direct	tly or indi	ectly by o	ne or m	ore disc	ualified	person	s		
		other than for	undation managers and othe	r than one or more publicly sup	ported or	ganızatıor	ns descr	ibed in s	ection	509(a)(1	1)		
		or section 50	9(a)(2)										
f		If the organiz	ation received a written dete	rmination from the IRS that it is	a Type I,	Type II,	or Type	III suppo	orting				
			check this box										
g		Since Augus	t 17, 2006, has the organizat	tion accepted any gift or contrib	ution from	any of th	ne						
		following per											
				entrols, either alone or together	with perso	ons descr	ıbed ın (	ıı) and				Yes	No
		. ,	w, the governing body of the	• • •							11g(i)		<u> </u>
			member of a person describ								11g(ii)	<del>                                     </del>	<u> </u>
_			controlled entity of a person of	** **							11g(iii)		
<u>h</u>				he supported organization(s)	I # 3 . #	<del></del>	4354		1	<del></del> T	·····		
(		e of supported ganization	(ii) EIN	(iii) Type of organization (described on lines 1–9	1	organization sted in your	, ,	rou notify	organizat	s the ion in col	(vii) Amount o supp		ary
		<b></b>		above or IRC section	1	document?		of your	(i) organı	zed in the			
				(see instructions))	Yes	No	Yes	nort?	Yes	No			
(A)					165	140	res	NO	165	140			
(^)													
(B)				· · · · · · · · · · · · · · · · · · ·	<del> </del>	<u> </u>		<del></del> -					
(0)													
(C)					<del>                                     </del>	<del> </del>		<u> </u>					
(0)						 				:			
(D)					<del> </del>								
(Β)					:			ĺ					
(E)													
•													
Tota	al				<u> </u>	:			<u> </u>				
												_	

Section A. Public Support

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

Caler	idar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	23,945,307	19,409,402	16,680,165	23,901,041	27,696,059	111,631,974		
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	23,945,307	19,409,402	16,680,165	23,901,041	27,696,059	111,631,974		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						12,997,927		
6	Public support. Subtract line 5 from line 4						98,634,047		
	tion B. Total Support								
Cale	dar year (or fiscal year beginning in) >	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7	Amounts from line 4	23,945,307	19,409,402	16,680,165	23,901,041	27,696,059	111,631,974		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,401,653	8,269,048	6,701,814	7,448,260	7,180,840	36,001,615		
9	Net income from unrelated business activities, whether or not the business is regularly carried on	11,862	28,351			20,751	60,964		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	78,884	95,496	72,087	489,369	70,686	806,522		
11	Total support. Add lines 7 through 10	70,000	30,330	7=7,001	105,505	.07900	148,501,075		
12	Gross receipts from related activities, etc	(see instructions)				12	2,924,678		
13	First five years. If the Form 990 is for the		second, third, fou	ırth, or fifth tax yea	r as a section 501	(c)(3)			
	organization, check this box and stop her	e		•					
Sec	tion C. Computation of Public Su	upport Percent	age	· · · · · · · · · · · · · · · · · · ·					
14	Public support percentage for 2013 (line 6		-	n (f))		14	66.42%		
15	Public support percentage from 2012 Sch					15	66.83%		
16a	33 1/3% support test—2013. If the organ				3 1/3% or more, cl	heck this	. ===		
	box and stop here. The organization qual						► X		
Ь	33 1/3% support test—2012. If the organ				5 is 33 1/3% or mo	ore,	▶ □		
470	check this box and stop here. The organization	•		•	40b l	44.5	▶ [_		
17a	10%-facts-and-circumstances test—201	•			•				
	10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization								
b	_	ts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line							
15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.									
	Explain in Part IV how the organization me					blicly			
	supported organization			-	•	•	▶ 🗍		
18	Private foundation. If the organization did	d not check a box o	n line 13, 16a, 16b	o, 17a, or 17b, che	ck this box and se	е			
	instructions						▶ □		
					Saha	dule A /Form 990	000 E7\ 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.)

Sec	tion A. Public Support	<u> </u>		<u> </u>	<u> </u>		
	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513	<u> </u>					
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
<del></del>	line 6 ) tion B. Total Support		L	1			
	idar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	(a) 2003 (b) 2010 (c) 2011	(0) 2011	(0) 2012	(e) 2013	(i) rotai	
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	organization's firs	t, second, third, fo	urth, or fifth tax ye	ar as a section 50	1(c)(3)	
	organization, check this box and stop her	e		<u> </u>			<b></b>
<u>Sec</u>	tion C. Computation of Public Su	ipport Percen	tage				· <del>-</del>
15	Public support percentage for 2013 (line 8		•	nn (f))		15	%
16	Public support percentage from 2012 Sch					16	%
	tion D. Computation of Investme						
17							<u>%</u>
18 19a	Investment income percentage from 2012			o 14 and hoo 15 in	more than 22 4/2	18	%_
ıya	33 1/3% support tests—2013. If the orga 17 is not more than 33 1/3%, check this be						▶ □
b	33 1/3% support tests—2012. If the orga				-		F
-	line 18 is not more than 33 1/3%, check th						▶ □
20_	Private foundation. If the organization did		-			•	▶

Schedule A (Form 990 or 990-EZ) 2013 HAWAII COMMUNITY FOUNDATION

99-0261283

Dogg 4

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

PART II, LINE 10 - OTHER INCOME DETAIL

WORKSHOP & SEMINAR FEES

806,522

### SCHEDULE C (Form 990 or 990-EZ)

### Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

**Open to Public** Inspection

Department of the Treasury Internal Revenue Service

See separate instructions. Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only.

#### If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nar	Name of organization  HAWAII COMMUNITY FOUNDATION				Employer identificat	
Pa	rt I-A Complete if the organization is exem	pt unde	er section 501(c	or is a section	n 527 organizatio	on.
1	Provide a description of the organization's direct and indire	ct political	campaign activities	ın Part IV.		
2	Political expenditures				▶ \$	
3	Volunteer hours					
Pa	t I-B Complete if the organization is exem	pt unde	er section 501(c	)(3).		
1	Enter the amount of any excise tax incurred by the organization				<b>▶</b> \$	· · · · · · · · · · · · · · · · · · ·
2						
3	If the organization incurred a section 4955 tax, did it file Fo	rm 4720 f	or this year?			Yes No
4a	Was a correction made?					Yes No
<u>b</u>	If "Yes," describe in Part IV					
<u> Pa</u>	rt I-C Complete if the organization is exem	pt unde	er section 501(c	), except section	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	on for sect	ion 527 exempt fund	tion		
	activities				▶ \$	
2	Enter the amount of the filing organization's funds contribu-	ted to othe	er organizations for s	ection		
	527 exempt function activities				▶ \$	
3	Total exempt function expenditures. Add lines 1 and 2. Ent	er here ar	d on Form 1120-PO	L,		
	line 17b				▶ \$	
4	Did the filing organization file Form 1120-POL for this year					Yes No
5	Enter the names, addresses and employer identification nu				-	
	organization made payments For each organization listed,		•	• •		
	the amount of political contributions received that were pro		•	·	•	
	as a separate segregated fund or a political action committee	ee (PAC)		Ī	nformation in Part IV.	<del></del>
	(a) Name		(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political contributions received and
					filing organization's funds If none, enter -0-	promptly and directly
					in the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of th	delivered to a separate
						political organization If none, enter -0-
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						

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

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013	AII COMMUNITY	FOUNDATION	1 9	9-0261283	Page :
Part II-A Complete if the org	janization is exempt	under section 5	01(c)(3) and filed	Form 5768 (elec	
section 501(h)).				<u> </u>	
	ization belongs to an a	• • •			o member's
	EIN, expenses, and sh				
B Check ▶ ☐ if the filing organ	zation checked box A	and "limited cont	rol" provisions app	oly.	
	Lobbying Expenditu			(a) Filing	(b) Affiliated
	es" means amounts pa		org	anization's totals	group totals
1a Total lobbying expenditures to influer	ice public opinion (grass ro	ots lobbying)		0	
b Total lobbying expenditures to influer	ice a legislative body (direc	t lobbying)		25,000	
c Total lobbying expenditures (add line	s 1a and 1b)			25,000	
d Other exempt purpose expenditures		5,923,801			
<ul> <li>Total exempt purpose expenditures (</li> </ul>	add lines 1c and 1d)		3	5,948,801	<del> </del>
f Lobbying nontaxable amount. Enter t	he amount from the followr	ng table in both			
columns.	<del></del>			1,000,000	
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable	amount is:			
Not over \$500,000	20% of the amount on line	1e			
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	excess over \$500,000			
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	excess over \$1,000,000			
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the e	xcess over \$1,500,000			
Over \$17,000,000	\$1,000,000				
g Grassroots nontaxable amount (enter	<sup>r</sup> 25% of line 1f)			250,000	·-·
h Subtract line 1g from line 1a If zero o	or less, enter -0-			0	<del></del>
i Subtract line 1f from line 1c If zero o	r less, enter -0-			0	
j If there is an amount other than zero	on either line 1h or line 1i, o	did the organization fil	e Form 4720		
reporting section 4911 tax for this year	ar?		· · · · · · · · · · · · · · · · · · ·		Yes No
	4-Year Averagin ons that made a section ons below. See the inst	• •	lo not have to com	•	•
	Lobbying Expenditur	res During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	<b>(d)</b> 2013	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,00
c Total lobbying expenditures	24,503		1,256	25,000	50,75
d Grassroots nontaxable amount	250,000	250,000	250,000	_250,000	1,000,000

Schedule C (Form 990 or 990-EZ) 2013

0

1,500,000

e Grassroots ceiling amount

(150% of line 2d, column (e)) f Grassroots lobbying expenditures

99-0261283

Page 3

	T 11-15	(election under section 501(h)).			11 37 00			
For e	ach "Ye:	s," response to lines 1a through 1i below, provide in Part IV a detailed	-	a)		(b)		
desc	ription of	the lobbying activity.	Yes	No	Δ.	moı	unt	
1	During th	e year, did the filing organization attempt to influence foreign, national, state or local						
		n, including any attempt to influence public opinion on a legislative matter or						
	referendu	m, through the use of.						
а	Voluntee	rs?						
b	Paid staf	or management (include compensation in expenses reported on lines 1c through 1i)?						
		vertisements?						
d	Mailings	to members, legislators, or the public?						
	-	ons, or published or broadcast statements?						
f	Grants to	other organizations for lobbying purposes?						
g	Direct co	ntact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, d	emonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i	Other act	ivities?						
j	Total Ad	d lines 1c through 1ı						
2a	Did the a	ctivities in line 1 cause the organization to be not described in section 501(c)(3)?						
b	if "Yes," o	enter the amount of any tax incurred under section 4912						
С	If "Yes," o	enter the amount of any tax incurred by organization managers under section 4912						
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?							*******	
Par	t III-A	Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5),	or s	ection			
		501(c)(6).						
							Yes	No
1	Were sub	stantially all (90% or more) dues received nondeductible by members?			<u> </u>	1		ļ
2	Did the o	rganization make only in-house lobbying expenditures of \$2,000 or less?			<u> </u>	2		ļ
3		rganization agree to carry over lobbying and political expenditures from the prior year?				3		L
Par	t III-B	Complete if the organization is exempt under section 501(c)(4), section 50						
		501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,	" OR (b	) Par	t III-A, li	ne :	3, is	
		answered "Yes."			· · · · · · · · · · · · · · · · · · ·			
1	•	sessments and similar amounts from members		1				
2		62(e) nondeductible lobbying and political expenditures (do not include amounts of						
		expenses for which the section 527(f) tax was paid).						
	Current y			2a			EL .	
	•	r from last year		2b				
_	Total			2c				
3		e amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3				
4		were sent and the amount on line 2c exceeds the amount on line 3, what portion of the						
		pes the organization agree to carryover to the reasonable estimate of nondeductible lobbying						
E	•	cal expenditure next year?		5	<del> </del>			
Par		mount of lobbying and political expenditures (see instructions)  Supplemental Information	<del></del>		1			
		corptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list). P	art II.A III	20.0	nd			

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list), Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C (Form 990 or 990-EZ) 2013

HAWAII COMMUNITY FOUNDATION

99-0261283

Page 4

Part IV Supplemental Information (continued)

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

	•				
H	AWAII COMMUNITY FOUNDATION	<u> </u>	99-02	26128	3
Pa	Organizations Maintaining Donor Advised Fur Complete if the organization answered "Yes" to F	nds or Other Similar Funds or A orm 990, Part IV, line 6.	ccount	s.	
		(a) Donor advised funds	(b	) Funds and c	ther accounts
1	Total number at end of year	202	•		4
2	Aggregate contributions to (during year)	14,959,245		*	40,171
3	Aggregate grants from (during year)	9,392,367			115,700
4	Aggregate value at end of year	115,062,865			4,763,477
5	Did the organization inform all donors and donor advisors in writing that	t the assets held in donor advised			
	funds are the organization's property, subject to the organization's exclu-	usive legal control?			X Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	writing that grant funds can be used			
	only for chantable purposes and not for the benefit of the donor or donor	or advisor, or for any other purpose			
	conferring impermissible private benefit?				X Yes No
Pa	Conservation Easements. Complete if the organization answered "Yes" to F	orm 990, Part IV, line 7.			
1	Purpose(s) of conservation easements held by the organization (check	***,, **			
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically imp	ortant lan	id area	
	Protection of natural habitat	Preservation of a certified historic			
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualified consei	rvation contribution in the form of a conse	rvation		
	easement on the last day of the tax year			Held at the	End of the Tax Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
C	Number of conservation easements on a certified historic structure incl	uded in (a)	2c		
d	Number of conservation easements included in (c) acquired after 8/17/	06, and not on a			
	historic structure listed in the National Register		2d		
3	Number of conservation easements modified, transferred, released, ex	tinguished, or terminated by the organizat	ion during	the	
	tax year ▶				
4	Number of states where property subject to conservation easement is l	ocated ▶			
5	Does the organization have a written policy regarding the periodic moni	toring, inspection, handling of			
	violations, and enforcement of the conservation easements it holds?				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	sing conservation easements during the year	ear		
	<b>&gt;</b>				
7	Amount of expenses incurred in monitoring, inspecting, and enforcing of	conservation easements during the year			
	<b>▶</b> \$				
8	Does each conservation easement reported on line 2(d) above satisfy t	he requirements of section 170(h)(4)(B)			
_	(i) and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIII, describe how the organization reports conservation easemed	•	•	L.	
	balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements	organization's financial statements that de	escribes ti	ne	
Pa	art III Organizations Maintaining Collections of Art,	Historical Treasures, or Other S	Similar A	Assets.	
	Complete if the organization answered "Yes" to F	orm 990, Part IV, line 8.			
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), no	ot to report in its revenue statement and b	alance sh	neet	
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	erance of		
	public service, provide, in Part XIII, the text of the footnote to its financial	al statements that describes these items.			
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to	report in its revenue statement and balar	nce sheet		
	works of art, historical treasures, or other similar assets held for public	exhibition, education, or research in furthe	erance of		
	public service, provide the following amounts relating to these items				
	(i) Revenues included in Form 990, Part VIII, line 1		•	\$	
	(ii) Assets included in Form 990, Part X		<b>&gt;</b>	\$	100,460
2	If the organization received or held works of art, historical treasures, or	other similar assets for financial gain, pro-	vide the		·
	following amounts required to be reported under SFAS 116 (ASC 958)	relating to these items			
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b>	\$	
b	Assets included in Form 990, Part X		•	\$	

_		COMMUNITY FC			99-026					<u>age 2</u>
<u>Pa</u>	rt III Organizations Maintaini	ng Collections of	Art, Historical Tr	easures, o	r Other S	Similar As	sets	(contini	ued)	
3	Using the organization's acquisition, access collection items (check all that apply).	sion, and other record	s, check any of the foll	owing that are	a significar	nt use of its				
а	Public exhibition	d 🗌	Loan or exchange prog	grams						
b	Scholarly research	e <b>X</b>	Other ENHANCE	OFFICE	E DECO	R				
C	Preservation for future generations									
4	Provide a description of the organization's	collections and explain	how they further the o	organization's	exempt pur	pose in Par	t			
	XIII.		•	_	• •	•				
5	During the year, did the organization solici	or receive donations of	of art, historical treasur	es, or other s	milar					
	assets to be sold to raise funds rather than							Ye	s X	No
Pa	rt IV Escrow and Custodial A		<del></del>	-						
	Complete if the organization 990, Part X, line 21.	on answered "Yes'	' to Form 990, Par	t IV, line 9,	or reporte	ed an ame	ount o	n Form		
12		dian or other intermed	.an. for contributions o	46						
Id	Is the organization an agent, trustee, custo	idian or other intermed	iary for contributions o	r otner assets	not			$\Box$ $\checkmark$	_	١
<b>.</b>	included on Form 990, Part X?	III	Na					Ye	s	No
D	If "Yes," explain the arrangement in Part X	ili and complete the to	llowing table:					A		
	5							Amoun		—
	Beginning balance					1c				—
	Additions during the year					1d	_			—
_	Distributions during the year					1e				
f	• • • • •					1f			· · · · · · ·	
	Did the organization include an amount on							Ye	s 📙	No
	If "Yes," explain the arrangement in Part X	III. Check here if the ex	kplanation has been pr	ovided in Part	XIII					<u> </u>
Pa	ert V Endowment Funds.	1 45 4	E D							
	Complete if the organization							ı		
		(a) Current year	(b) Prior year	(c) Two years		(d) Three years		(e) Fou		
	Beginning of year balance	323,425,328				276,010				
	Contributions	12,434,017	14,628,463	17,75	2,849	8,064	,185	12,2	286,	276
C	Net investment earnings, gains, and									
	losses	40,914,539				21,832				
d	Grants or scholarships	11,251,327	12,582,226	12,59	0,125	12,419	,058	14,0	563,	294
е	Other expenditures for facilities and									
	programs	285,166	-225,056	6	0,294	-217	,050		346,	046
f	Administrative expenses							ļ <u> </u>		
g	End of year balance	365,237,391		<u></u>	5,465	293,705	,092	276,0	010,	841
2	Provide the estimated percentage of the co		e (line 1g, column (a))	held as						
а	•	97.92 %								
b	Permanent endowment ► 1.57 %	<b>.</b>								
С	Temporarily restricted endowment ▶	0.51%								
	The percentages in lines 2a, 2b, and 2c sh									
3a	Are there endowment funds not in the pos	session of the organiza	ition that are held and	administered :	for the					
	organization by.								Yes	No
	(i) unrelated organizations							3a(i)		X
	(ii) related organizations							3a(ii)	X	
b	If "Yes" to 3a(II), are the related organization	ons listed as required o	n Schedule R?					3b	X	
4	Describe in Part XIII the intended uses of t	he organization's endo	wment funds							
Pa	et VI Land, Buildings, and Eq		=				_			
	Complete if the organization	on answered "Yes'	to Form 990, Par	<u>t IV, line 11</u>	a. See Fo	orm 990, I	Part X	<u>, line 10</u>	<u>).                                    </u>	
	Description of property	(a) Cost or other b	1 ''	Į.	(c) Accu			(d) Book	value	
		(investment)	(othe	·	depre	ciation	<u> </u>			
	Land			<b>37,900</b>						<u>900</u>
b	Buildings			41,200		22,18		1		015
C	Leasehold improvements			12,398		8,198	o			200
	Equipment			94,484		44,112			50,:	
	Other			38,085	4	71,818	3		66,2	
Total	. Add lines 1a through 1e. (Column (d) mus	t equal Form 990, Part	X, column (B), line 10	(c).)		<b>•</b>	·	42	27,	<b>754</b>

Schedule D (Form 990) 2013 HAWAII COMMUNITY FOUNDATION 99-0261283 Page 3 Investments—Other Securities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests (3) Other (A) (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Investments—Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (a) Description of investment (b) Book value (c) Method of valuation Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9)Total. (Column (b) must equal Form 990, Part X, col (B) line 13 ) ▶ Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value	
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		<u> </u>
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	<b>&gt;</b>	

#### Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1) Federal	income taxes	
(2) <b>TOBAC</b>	CO FUNDS HELD FOR STATE, (HI)	45,797,858
(3) <b>GIFT</b>	ANNUITY LIABILITIES	1,440,057
	HELD AS AGENCY ENDOWMT	1,303,961
(5) OTHER	LIABILITIES	164,571
(6)		
(7)		
(8)		
(9)		
Total. (Column	n (b) must equal Form 990, Part X, col (B) line 25 )	48,706,447

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Sche	dule D (Form 990) 2013 HAWAII COMMUNITY FOUNDATION	99-026128	3	Page <b>4</b>
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem	ents With Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, P	art IV, line 12a		
1	Total revenue, gains, and other support per audited financial statements		1	84,776,416
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			· · · · <del></del>
а	Net unrealized gains on investments	2a 29,729,553		
b	Donated services and use of facilities	2b		
C	Recovenes of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d -81,739		
е	Add lines 2a through 2d		2e	29,647,814
3	Subtract line 2e from line 1		3	55,128,602
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		
b	Other (Describe in Part XIII )	4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	55,128,602
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten	nents With Expenses per f	Retur	n
	Complete if the organization answered "Yes" to Form 990, P	art IV, line 12a.		
1	Total expenses and losses per audited financial statements		1	35,948,801
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
C	Other losses	2c		
d	Other (Describe in Part XIII )	2d		
е	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	35,948,801
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII )	4b		
C	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c (This must equal Form 900, Part Lline 19.)			25 040 001

Part XIII Supplemental Information

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

PART III, LINE 4 - COLLECTIONS AND RELATION TO EXEMPT PURPOSE

HAWAII COMMUNITY FOUNDATION UTILIZES THE DONATED WORKS OF ART (HAPPENS INFREQUENTLY) TO ENHANCE ITS OFFICE ENVIRONMENT AND AS A DEVELOPMENT TOOL TO ENGAGE PROSPECTIVE DONORS AND PROVIDE AN EXAMPLE HOW ONE DONOR WAS ABLE TO LEAVE A LEGACY WITH THE FOUNDATION TO CARRY ON HIS PHILANTHROPIC DESIRES FOR THE COMMUNITY.

PART V, LINE 4 - INTENDED USES FOR ENDOWMENT FUNDS

ENDOWMENT FUNDS ARE MANAGED FOR PERPETUITY AND TO PERFORM COMMUNITY GRANT MAKING AND/OR PROVIDE PROGRAM SERVICES IN ACCORDANCE WITH A DONOR'S INTENT AND CONSISTENT WITH THE ORGANIZATION'S MISSION.

PART X - FIN 48 FOOTNOTE

FOOTNOTE IN MOST RECENT AUDITED STATEMENT READS: "THE FOUNDATION HAS RECEIVED A DETERMINATION FROM THE INTERNAL REVENUE SERVICE THAT ITS STATED

Part XIII Supplemental Information (continued)

PURPOSE IS TAX-EXEMPT UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ACCORDINGLY, THE FOUNDATION IS EXEMPT FROM FEDERAL AND STATE INCOME AND EXCISE TAXES, EXCEPT ON UNRELATED BUSINESS INCOME.

MANAGEMENT BELIEVES THE FOUNDATION'S TAX YEARS PRIOR TO 2010 ARE NO LONGER SUBJECT TO EXAMINATION BY THE IRS. MANAGEMENT IS NOT AWARE OF ANY SIGNIFICANT UNCERTAIN TAX POSITIONS TAKEN ON PREVIOUSLY FILED TAX RETURNS"

PART XI, LINE 2D - REVENUE AMOUNTS INCLUDED IN FINANCIALS - OTHER FAIR VALUE ADJUSTMENT-POOLED INCOME FUND -81,739

### SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

## Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Inspection

2013 Open to Public

HAWAII COMMUNITY FOUNDATION

Employer identification number 99-0261283

P		eneral Information rm 990, Part IV, line		tside the United States. Co	mplete if the organization answ	ered "Yes" on
1	For grantma	kers. Does the organiz	ation maintain records	to substantiate the amount of its gr		
	grants or ass		or the grants or assista	noc, and the selection cheria asca	to award the	Yes No
2		kers. Describe in Part transition		ocedures for monitoring the use of i	ts grants and other	
3	Activities per	Region. (The following	Part I, line 3 table can	be duplicated if additional space is	needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) if activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
<u>(1)</u>		<u> </u>				
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
<u>(10)</u>			· · · · · · · · · · · · · · · · · · ·			
<u>(11)</u>						
(12)						
(13)						
(14)				·		
(15)						
(16)						
(17)						
	Sub-total				_	
	otal from continuation	1				
	f <b>otals</b> (add nes 3a and 3b)					

Page 2

99-0261283

Schedule F (Form 990) 2013 HAWAII COMMUNITY FOUNDATION

(i) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (h) Description of non-cash assistance (g) Amount of assistance Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed non-cash WIRE TRANSFER (f) Manner of disbursement 40,000 (e) Amount of cash grant MAINT OF ARCHIVES (d) Purpose of (c) Region EUROPE (b) IRS code section and EIN (if applicable) (a) Name of organization Part (£ (11) (12) (13) € 3 (14) (15) (16) 3 9 9 3 8 8 (6)

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

Enter total number of other organizations or entities

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013

99-0261283

Page 5

# Part V

Supplemental Information

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

HAW0006 11/10/2014 5 04 PM Pg 41

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

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

OMB No 1545-0047

▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public, Inspection 2013

Name of the organization	HAWAII COMMUNITY FO	FOUNDATION					<u>ш</u> о	Employer identification number 99–0261283	
Part   General	General Information on Grants and Assistance	Assistance							
1 Does the organization the selection criteria 2 Describe in Part IV the	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	ne amount of the grace?	ants or assi	stance, the grantees' on the United States.	eligibility for the grants	s or assistance, an	q	X Yes	8
<b>.</b>	Grants and Other Assistance to Governments and Part IV, line 21, for any recipient that received more th	vernments and eceived more t	<b>d Organi</b> ; han \$5,00	Organizations in the United States. Complete if the organizatic an \$5,000. Part II can be duplicated if additional space is needed	ited States. Com	plete if the orga	anization ansv eeded.	Organizations in the United States. Complete if the organization answered "Yes" to Form 990, an \$5,000. Part II can be duplicated if additional space is needed.	
1 (a) Name and or or	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
(1) SEE STATEMENT #3	#3	0000000-00		24.592.233					
(2)									
(3)									<u>'</u>
(4)									
(5)									
(9)									
(7)									
(8)									
(6)									
<ul><li>2 Enter total number of</li><li>3 Enter total number of</li></ul>	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	organizations listed 3 1 table	in the line	l table				▼ 499	

Schedule I (Form 990) (2013)

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

	uals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
99-0261283	I States. Complete if the organ
Y FOUNDATION	luals in the United
AWAII COMMUNITY	istance to Individ
HAWAII	d Other Ass
(Form 990) (2013)	Grants an
Schedule I	Part I

	Part III can be duplicated if additional space is needed	ional space is needed.		•		
-	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, Poscription of non-cash assistance FMV, appraisal, other)
1 EDUCE	1 EDUCATIONAL SCHOLARSHIPS	206	1,772,030		N/A	N/A
2						•
ო						
4						
ហ						
ဖ						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	vide the information re-	quired in Part I, line	2, Part III, column (b)	, and any other additional i	information.

PART I, LINE 2 - PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS

HAWAII COMMUNITY FOUNDATION UTILIZES A PROPRIETARY GRANT ADMINISTRATION

SYSTEM TO MANAGE THE ENTIRE GRANT MAKING PROCESS FROM EVALUATING GRANT

PROPOSALS, AWARDING GRANTS AND MONITORING GRANT EXPENDITURES. QUANTITATIVE

AND QUALITATIVE INFORMATION IS MAINTAINED ABOUT GRANTEES. MONITORING

ACTIVITIES FOR GRANTS AWARDED INCLUDE REQUESTING AND REVIEWING PERIODIC

PROGRAMMATIC AND FINANCIAL REPORTS, SITE VISITATIONS, REVIEWING REQUESTED

DOCUMENTATION AND IN CERTAIN CIRCUMSTANCES CONDUCTING EVALUATIONS OF MAJOR

INITIATIVES

# SCHEDULE J

(Form 990)

**Compensation Information** 

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

▶Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

HAWAII COMMUNITY FOUNDATION

Employer identification number 99-0261283

	art i Questions Regarding Compensation			
	·		Yes	No
18	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.	1		
	First-class or charter travel Housing allowance or residence for personal use	1		
	Travel for companions Payments for business use of personal residence	I		
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees	1		
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
t	b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			1
	explain	1ь		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all	- [		Ì
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			
	1a?	2		
3	Indicate which, if any, of the following the filing organization uses to establish the compensation of the	1		
-	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.	ı		
	X Compensation committee X Written employment contract	Į		
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
	Approval by the sound of 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			
=		4a	;	x
		4b	X	-
		4c		х
•	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III			-
	in test to any or lines 44-6, list the persons and provide the applicable amounts for each field in Franchi			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5–9.			
5				
,	compensation contingent on the revenues of	1		
_		_		x
		5a 5b		X
	If "Yes" to line 5a or 5b, describe in Part III.	<u> </u>		
	it res to line 5a of 5b, describe in Part III.			
6	For persons listed in Form 000. Part VII. Section A line to did the exception new or section and			
U	, and the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of the same of	[		v
_		6a		X
	<del>-</del>	6b		
K	h Any related organization?	1		
	If "Yes" to line 6a or 6b, describe in Part III.	†		
_	For persons lested in Form 000, Boot VIII, Contain A lima to ided the second state of the Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Contain Cont			
7	,	_		٠,,
_	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8	, , , , , , , , , , , , , , , , , , , ,			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		X
_				
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53,4958-6(c)?	q l		I

Page 2

HAWAII COMMUNITY FOUNDATION

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. 99-0261283 Schedule J (Form 990) 2013

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

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

(B) Breakdown	(B) Breakdown	of W-2 and/or 1099-MISC compensation (c) Retirement and (D) Nontaxable (E) Total of columns	ISC compensation	(C) Bettrement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(a)-(ı)(a)	reported as deferred in pror Form 990
ETA	(1) 343,76	63 0		95,500	48,879	488,142	0
PRESIDENT/CEO	3	0		0	0	0	0
LUK	() 218,76	65 0	0	22,560	15,389	256,714	0
2 VP-CHIEF OPERATING O	(11)			0	0	o	0
	(1) 159,85	52 0	0	16,389	11,043	187,284	0
3 VP-MRKTG INITIATIVES	(11)	0	į o	0	0	0	0
	() 149,97	72 0	0	15,146	6,678	171,796	0
L, LRNG	Ξ	0		0	0	0	0
	() 146,51	0 0	0	15,026	694'6	171,312	0
5 VP-CHIEF FINANCIAL O	<u> </u>	0	0		0	0	0
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9	(II)						
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7	(11)						
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13						i	
91	<del>©</del> 3						
						Sci	Schedule J (Form 990) 2013

Schedule J (Form 990) 2013 HAWAII COMMUNITY FOUNDATION

rt III Supplemental Information

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

PART I, LINE 4 - SEVERANCE, NONQUALIFIED, AND EQUITY-BASED PAYMENTS

SEVERANCE NONQUALIFIED EQUITY-BASED

KELVIN H. TAKETA

70,000

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Schedule J (Form 990) 2013

## HAW0006 11/10/2014 5 04 PM Pg 46

SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Transactions With Interested Persons**

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

Attach to Form 990 or Form 990-EZ

► See separate instructions.

▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www irs.gov/form990.

Open To Public inspection.

OMB No 1545-0047

Name of the organization

Employer identification number

	HAWAII COMMUNITY I	OUND	ATION					99-0	2612	83				
Part	Excess Benefit Transaction	ons (s	section 501											
	Complete if the organization answ	ered "						990-EZ, Part V,	line 40	Эb.				
1	(a) Name of disqualified person		(b) Relation	ıshıp between disqu	alified	pers	on and	(c) Description of tra	ensaction	n			Correct	ted?
	<del></del>		-	organization			<del></del>					Yes		No
(1)	<del></del>	<u> </u>	<del></del>	<del></del>									-	
(2) (3)			<del>                                     </del>								$\overline{}$		+	—
(4)						-	····	<del> </del>					+	
(5)													+	
(6)			<del></del>										+-	
	nter the amount of tax incurred by the orga	nizatio	n manager	s or disqualified	d per	sons	s during the vear	- · <u>-</u>						
	der section 4958						,		▶ \$	·				
3 En	iter the amount of tax, if any, on line 2, ab	ove, re	embursed b	y the organizat	ion				▶ \$	·				
								<del></del>						
Part														
	Complete if the organization answ					ine :	38a or Form 990	, Part IV, line 26;	or if th	те				
	organization reported an amount of (a) Name of interested person		m 990, Part  ) Relationship	X, line 5, 6, or (c) Purpose of	22 (d) L	an to	(e) Original	(f) Balance due	I/o) in	default2	(h) Ap	proved	1 (1) 14	Vritten
	(a) Name of interested person		ith organization	loan	or fro	m the		(r) balance due	(9) ""	JCIAUIL'	by bo	ard or		ement?
						rom			Yes	No	Yes	No No	Yes	No
	<del>-</del>	-		-	10	FIUITI			165	"	165	140	163	100
(1)														
									1	$\vdash$				†
(2)	<u> </u>									<u> </u>				
				-										
(3)					<u> </u>					<b> </b>	L		Ь	丄
(4)		+			├					₩	<u> </u>	⊢	<del> </del>	₩
(E)													ŀ	
<u>(5)</u>		+								┢	┢		├-	<del> </del>
(6)											1		ŀ	
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(8)					ļ					<u> </u>	L	L	$oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{oldsymbol{ol}}}}}}}}}}}}}}}}}$	_
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(9)	<u> </u>	_			-	$\vdash$		ļ	-	<b>├</b>	├	<b>_</b>	<del>                                     </del>	₩
(40)		ŀ											]	
(10) Total					L	LJ	▶ \$		<del> </del>	<b>L</b>		l		<u> </u>
Part I	Grants or Assistance Ben	efitir	na Interes	sted Persor	ıs.		<u> </u>	<del></del>	_L		<u> </u>	<del></del>	<u> </u>	
	Complete if the organization answ					27								
	(a) Name of interested person			ship between interes			nount of assistance	(d) Type of assistance	$\Box$	(e)	Purpose	e of ass	stance	
			person a	ind the organization										
(1)														
(2)			ļ											
(3)														
(4)			-											
<u>(5)</u>			-											
(6)			<del>                                     </del>				-	· · · · · ·			—-			
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(9)	<del></del>		-					-	+					
<del></del> -									-					

	Form 990 or 990-E2) 2013
Part IV	Business Transactions Involving Interested Persons.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the	(c) Amount of transaction	(d) Description of transaction	of	haring org nues?
	organization			Yes	No
(1) FIRST HAWAIIAN BANK	SEE BELOW	772,358	BANK PROVIDES SVCS	T	X
(2) CENTRAL PACIFIC BANK	SEE BELOW	104,389	BANK PROVIDES SVCS		X
(3) BANK OF HAWAII	SEE BELOW	1,221,994	BANK PROVIDES SVCS		X
(4) KAIMANA HILA	SEE BELOW	106,000	PROF & ADMIN SVCS		X
(5)				T	
(6)				-	
(7)				Ι	
(8)					
(9)		_			
(10)					

# Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

# SCHEDULE L, PART V - ADDITIONAL INFORMATION

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

- (A) NAME: FIRST HAWAIIAN BANK
- (B) RELATIONSHIP: HCF DIRECTORS, ROBERT S. HARRISON AND GARY CAULFIELD, ARE
  OFFICERS OF THE BANK WHICH DOES BUSINESS WITH HAWAII COMMUNITY FOUNDATION

  (D) DESCRIPTION OF TRANSACTIONS: BANK PROVIDES TRUSTEE SERVICES TO HAWAII
- COMMUNITY FOUNDATION.
- (A) NAME: CENTRAL PACIFIC BANK
- (B) RELATIONSHIP: HCF DIRECTORS, PAUL KOSASA AND COLBERT M. MATSUMOTO, ARE DIRECTORS OF THE BANK WHICH DOES BUSINESS WITH HAWAII COMMUNITY FOUNDATION

  (D) DESCRIPTION OF TRANSACTIONS: BANK PROVIDES TRUSTEE SERVICES TO HAWAII
- (A) NAME: BANK OF HAWAII

COMMUNITY FOUNDATION.

COMMUNITY FOUNDATION.

(B) RELATIONSHIP: HCF DIRECTORS, MARY G.F. BITTERMAN AND PETER S. HO, ARE DIRECTORS OF THE BANK WHICH DOES BUSINESS WITH HAWAII COMMUNITY FOUNDATION

(D) DESCRIPTION OF TRANSACTIONS: BANK PROVIDES TRUSTEE SERVICES TO HAWAII

# SCHEDULE M (Form 990)

**Noncash Contributions** 

OMB No 1545-0047 2013

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Employer identification number

Pa		)MMOIN 1	TI FOUNDATIO	JN		1 99-020	1203		
	Types of Froperty	(a)	/h)	(c)					
		(a) Check if	(b) Number of contributions or	Noncash contribution		(d) Method of deter	rminina		
		applicable	items contributed	amounts reported on		noncash contribute	•		
		арріісавіе	items contributed	Form 990, Part VIII, line 1g		TIONCASTI CONTIDUC			
1	Art — Works of art								
2	Art — Historical treasures								
3	Art — Fractional Interests				<del> </del>				
4	Books and publications								
5	Clothing and household								
	goods				<del></del>				
6	Cars and other vehicles								
7	Boats and planes		···· ·						
8	Intellectual property								
9	Securities — Publicly traded	X	17	9,110,395	QUOTED	MARKET	PRICE		
10	Securities — Closely held stock								
11	Secunties — Partnership, LLC,								
	or trust interests								
12	Securities Miscellaneous								
13	Qualified conservation								
	contribution — Historic								
	structures								
14	Qualified conservation								
	contribution — Other								
15	Real estate — Residential								
16	Real estate — Commercial								
17	Real estate — Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy					,			
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ▶(				-				
26	Other ▶(								
27	Other ▶(								
28	Other ▶(								
29	Number of Forms 8283 received by	the organi	zation during the tax vea	r for contributions for					
	which the organization completed F				29				
	william and angumacutan completion.			3	L- <del></del>			Yes	No
30a	During the year, did the organization	n receive b	v contribution any prope	rty reported in Part I. lines	1 - 28. that				
-	it must hold for at least three years		•	= :					
	used for exempt purposes for the e			,			30a		x
b	If "Yes," describe the arrangement		g period				1000		
31	Does the organization have a gift a		nolicy that requires the r	eview of any non-standard					
31		ceptance j	bolicy that requires the re	eview of any non-standard			31	x	
22-	Contributions?	und names	or rolated areas:=======	to colicit process as as!! -	oncach		31		
32a	Does the organization hire or use the	iiru parties	or related organizations	to solicit, process, or sell n	UIICASII		22-	x	
	contributions?						32a	1	
b	If "Yes," describe in Part II		antima (a) for a t == f	managan fan de de de de de de de de de	a) ia chacteri				
33	If the organization did not report an	amount in	column (c) for a type of	property for which column (	a) is checked,				
	describe in Part II							L	L

Schedule M (Form 990) (2013)

ORGANIZATION.

HAWAII COMMUNITY FOUNDATION

or a combination of both. Also complete this part for any additional information.

99-0261283

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PART I, LINE 32B - THIRD PARTY USED TO PROCESS NONCASH CONTRIBUTIONS
HAWAII COMMUNITY FOUNDATION USED ONE OR MORE OF ITS INVESTMENT MANAGERS TO
RECEIVE AND SELL PUBLICLY TRADED SECURITIES CONTRIBUTED TO THE

**Supplemental Information.** 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,

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

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

2013

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

# HAWAII COMMUNITY FOUNDATION

99-0261283

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 A COMPLETE DRAFT OF THE FORM 990 IS REVIEWED AND DISCUSSED BY SENIOR MANAGEMENT AND REVISIONS ARE MADE AS NEEDED. DEPENDING ON TIMING OF COMPLETION OF THE 990 ONE OF THE FOLLOWING OCCURS: (1) A REVISED DRAFT IS DISTRIBUTED TO ALL BOARD MEMBERS TO REVIEW. THE BOARD IS GIVEN APPROXIMATELY TWO WEEKS TO COMMENT AND HAVE QUESTIONS ANSWERED. UPON SATISFACTORY RESOLUTION OF ALL BOARD INQUIRIES, THE FORM 990 IS FINALIZED FOR SIGNATURE AND MAILING, OR (2) A REVISED DRAFT IS DISTRIBUTED TO THE BOARD AUDIT COMMITTEE FOR REVIEW, COMMENT, AND DISCUSS AT THE AUDIT UPON SATISFACTORY RESOLUTION OF COMMITTEE INQUIRIES, COMMITTEE MEETING. THE FORM 990 IS FINALIZED FOR SIGNATURE AND MAILING AND A COPY IS DISTRIBUTED TO ALL BOARD MEMBERS TO REVIEW.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

ANNUALLY ALL EMPLOYEES ARE REQUIRED TO COMPLETE AND SIGN A CONFLICT OF

INTEREST STATEMENT AND DISCLOSURE STATEMENT. THE PRESIDENT SUBMITS AN

ANNUAL REPORT TO THE BOARD'S EXECUTIVE COMMITTEE REGARDING ANY DISCLOSED

DUALITY OF INTERESTS BY EMPLOYEES, THE PRESIDENT'S ACTIONS REGARDING SUCH

INTEREST AND A LIST OF ALL DISCLOSED GIFTS ACCEPTED BY EMPLOYEES PURSUANT

TO THE POLICY.

BOARD MEMBERS ARE ALSO ANNUALLY REQUIRED TO COMPLETE AND SIGN A CONFLICT OF INTEREST STATEMENT. DURING ANY BOARD APPROVAL ACTIONS, A BOARD MEMBER MUST FULLY DISCLOSE THAT HE OR SHE HAS ANY OFFICIAL OR FAMILY RELATIONSHIP TO ANY PROSPECTIVE GRANT RECIPIENT. FOLLOWING SUCH DISCLOSURE, THE BOARD

Name of the organization

HAWAII COMMUNITY FOUNDATION

Employer identification number

99-0261283

MEMBERS MAY SHARE THEIR VIEWS ON THE PROPOSED GRANT BUT MUST ABSTAIN FROM VOTING ON THE PROPOSED GRANT DECISION.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL
THE BOARD'S EXECUTIVE COMMITTEE IS TASKED WITH THE REVIEW AND EVALUATION OF
THE CEO'S PERFORMANCE AS WELL AS DETERMINING THE COMPENSATION OF THE CEO.
THE CEO SUBMITS AN ANNUAL SELF ASSESSMENT TO THE EXECUTIVE COMMITTEE AND
THE BOARD CHAIR SOLICITS FEEDBACK FROM EMPLOYEES AND OTHERS REGARDING THE
CEO'S PERFORMANCE. THE CHAIR WORKS WITH THE HUMAN RESOURCE MANAGER TO
OBTAIN AND COMPILE DATA ON COMPARABLE SALARIES FROM LOCAL/NATIONAL SURVEYS
OF SIMILAR SIZED ORGANIZATIONS, INQUIRIES OF LOCAL NONPROFITS AND
LOCAL/NATIONAL SALARY TREND DATA. THE EXECUTIVE COMMITTEE REVIEWS AND
DISCUSSES THE COMPARABILITY DATA, REVIEWS WITH THE CEO HIS PERFORMANCE,
SETS THE PERFORMANCE OBJECTIVES AND COMPENSATION FOR THE ENSUING YEAR. THE
EXECUTIVE COMMITTEES RECOMMENDATIONS AND DATA ARE REVIEWED AND APPROVED BY
THE FULL BOARD AT ITS NEXT MEETING AND DOCUMENTATION IS RETAINED IN THE
CEO'S PERSONNEL FILE.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

THE CEO OR COO AND THE HR MANAGER ARE TASKED WITH THE REVIEW AND EVALUATION

OF OTHER OFFICERS AND KEY EMPLOYEES' PERFORMANCE AS WELL AS DETERMINING

THEIR COMPENSATION. SELF-ASSESSMENT, SURVEYS OF OTHER EMPLOYERS AND A

MARKET STUDY OF COMPARABLE SALARIES FOR COMPARABLE EMPLOYEES ARE ALL

UTILIZED TO ESTABLISH COMPENSATION. EACH EMPLOYEE'S EVALUATION AND

PERFORMANCE OBJECTIVES FOR THE NEXT YEAR ARE RETAINED IN HIS/HER PERSONNEL

FILE ALONG WITH THE DETERMINATION OF COMPENSATION.

Name of the organization

HAWAII COMMUNITY FOUNDATION

Employer identification number

99-0261283

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

THE ORGANIZATION PROVIDES A LINK ON ITS WEBSITE FOR PUBLIC ACCESS TO ITS

MOST RECENT AUDITED FINANCIAL STATEMENTS. THE ORGANIZATION'S GOVERNING

DOCUMENTS AND CONFLICTS OF INTEREST POLICY ARE MADE AVAILABLE UPON REQUEST.

FORM 990, PART XI, LINE 9 - RECONCILIATION OF CHANGES - OTHER

FAIR VALUE ADJUSTMENT-POOLED INCOME FUND \$ -81,739

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

POOLED INCOME (AUDIT ONLY) \$ 81,739

FORM 990, PART XII - ADDITIONAL INFORMATION

ACCOUNTING ON BASIS OF CASH RECEIPTS AND DISBURSEMENTS, EXCEPT INVESTMENTS

ARE CARRIED AT FAIR VALUE, MAJOR PROPERTIES ARE CAPITALIZED, NONCASH GIFTS

ARE RECORDED AT FAIR VALUE AT THE DATE RECEIVED

HAW0006 11/10/2014 5 04 PM Pg 54

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

Name of the organization

Part I

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Related Organizations and Unrelated Partnerships

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. ► See separate instructions. ▶ Attach to Form 990.

OMB No 1545-0047

2013

Open to Public Inspection

(f)
Direct controlling
entity Employer identification number 99-0261283 (e) End-of-year assets Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Total income (c)
Legal domicile (state
or foreign country) (b) Pnmary activity HAWAII COMMUNITY FOUNDATION (a) Name, address, and EIN (if applicable) of disregarded entity

(3)

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								-		
Par	Part II	<b>Identification of Related Tax-Exempt Organizations</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.	<b>organizations</b> Cations during the t	omplete if the or	ganization answ	ered "Yes" on For	rn 990, Part IV, I	ıne 34 because i	t had	
		(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state	(d) Exempt Code section	(e) Public chanty status	(f) Direct controlling	(g) Section 512(b)(13)	(b)(13)
ļ					or foreign country)		(if section 501(c)(3))	entity	Yes	Š
3	PARKE	(1) PARKER RANCH FOUNDATION TRUST		SUPPORTS						
	67-14.	67-1435 MAMALAHOA HWY	99-6064620	DESIGNATED						
į	KAMUELA	LA HI 96743		CHARITIES	HI	501C3	11A	N/A		×
(2)	CN WO	CN WODEHOUSE HAWAII CHILDREN'S TRUS		SHPPORTS						
-	P O B	P O BOX 3170, DEPT. 715	80-0094227	DESIGNATED						
	HONOLULU	ULU HI 96802		CHARITIES	HI	501C3	11D	N/A		×
(3)	ROBER!	ROBERT E. BLACK MEMORIAL TRUST		SUPPORTS						
•	P O B(	P O BOX 3170, DEPT. 715	99-6962458	DESIGNATED			-		-	
-	HONOLULU	ULU HI 96802		CHARITIES	HI	501C3	11D	N/A		×
4	PRISA	PRISANLEE TRUST		SUPPORTS						
	POB	P O BOX 3170, DEPT. 715	99-6004404	DESIGNATED						
7	HONOLULU	ULU HI 96802	_	CHARITIES	HI	50103	नुत	N/A		×
(2)	FRANK	(5) FRANK & KATHERINE WOODFORD MEMORIAL		SUPPORTS						
_	POBC	P O BOX 3170, DEPT. 715	99-6009741	DESIGNATED						
1	HONOLULU	JLU HI 96802		CHARITIES	HI	50103	PF	N/A		×
	ľ									

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

Schedule R (Form 990) 2013

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

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Related Organizations and Unrelated Partnerships

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

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990. ▶ See separate instructions. ► Attach to Form 990.

Open to Public Inspection 2013

(g)
Section 512(b)(13)
controlled entity?
Yes No × × Direct controlling **Employer Identification number** entity Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. 99-0261283 HI COM FDN (f) Direct controlling entity End-of-year assets M/M ◉ (e)
Public chanty status
(if section 501(c)(3)) 110 **11A** Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Total income (d) Exempt Code section 501C3 **50103** Legal domicile (state or foreign country) (c) Legal domicile (state or foreign country) Ħ HI Primary activity SUPPORTS DESIGNATED CHARITIES SUPPORTS DESIGNATED (b) Primary activity CHARITIES 45-4910317 36-6996611 HAWAII COMMUNITY FOUNDATION (a) Name, address, and EIN (if applicable) of disregarded entity (a)
Name, address, and EIN of related organization AL & TRINI KILGO CHARITABLE TRUST 96802 HI 96813 745 FORT STREET MALL STE 1450 HAWAII LEADERSHIP FORUM P.O. BOX 3170, DEPT.715 HONOLULU HONOLULU Name of the organization Part II Part |

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

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Schedule R (Form 990) 2013

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Identification of Related Organizations Taxable as a Corporation or Trust Complete line 34 because it had one or more related organizations treated as a corporation or trust.  (a)  (b)  (c)  (c)  (corporation or Trust Complete and the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the controlling of the contro			box 20 managing le K-1 partner? 365) Yes No	Percentage ownership
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(b) (c) (d)  Primary activity Legal domicile Direct controlling (state or foreign country)	e organization answered in the tax year.	1 "Yes" on Form 9	90, Part IV,	
	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?
				Yes

HAWAII COMMUNITY FOUNDATION

Schedule R (Form 990) 2013

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Yes

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During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) re <b>b</b> Gift, grant, or capital contribution to related organization

Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s) Loans or loan guarantees by related organization(s)

Dividends from related organization(s)

Sale of assets to related organization(s)

Purchase of assets from related organization(s)

Lease of facilities, equipment, or other assets to related organization(s) Exchange of assets with related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s)

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n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

Sharing of paid employees with related organization(s)

Reimbursement paid to related organization(s) for expenses ۵

Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

tion thresholds	(p)	Method of determining amount involved
elationships and transac	(၁)	Amount involved
ine, including covered re	(p)	Transaction
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this li	(a)	Name of related organization

į	Name of related organization	Fransaction type (a–s)	Amount involved	Method of determining amount involved
(1)	ROBERT E. BLACK MEMORIAL TRUST	C	1,337,000	
(2)	PRISANLEE TRUST	ວ	631,253	
(3)	CN WODEHOUSE HAWAII CHILDREN'S TRUS	ບ	253, 643	
(4)	PARKER RANCH	υ	400,000	
(5)	HAWAII LEADERSHIP FORUM	В	850,000	
(9)				

Schedule R (Form 990) 2013

Schedule R (Form 990) 2013 HAWAII COMMUNITY FOUNDATION 99-C

99-0261283

Page 4

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

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

(k)   Percentage	ownership			:									
(j) General or	managing partner?	s No				<u> </u>		<u> </u>					!
		Yes	<del>-</del>	-			_				-		
	amount in box 20 of Schedule K-1 (Form 1065)												
(h) Disproportionate	ations?	No											
Disprop	allo allo	Yes					<b>-</b>				<u>.</u>		
(9) Share of	end-of-year assets								:				
(f) Share of	total income												
(e) Are all partners	section 501(c)(3) organizations?	Ñ											
Are all p		Yes No											
(d) Predominant	income (related, unrelated, excluded from tax under	sections 512-514)											
(c)	domicile (state or foreign	country)											
(b) Pnmary activity													
(a) Name, address, and EIN of entity													
			<b>(E)</b>	(5)	ල	€	<u>(S)</u>	<u>©</u>	3	<b>®</b>	(6)	<u>6</u>	(11)

99-0261283

Page 5

Supplemental Information
Provide additional information for responses to questions on Schedule R (see instructions).

# HAWAII COMMUNITY FOUNDATION FORM 990

PART III, Line 1 – STATEMENT OF ORGANIZATION'S MISSION

# **EXPLANATION**

SINCE ITS FOUNDING 97 YEARS AGO, THE HAWAII COMMUNITY FOUNDATION HAS SERVED AS PROOF POSITIVE THAT PHILANTHROPY CAN BE A POWERFUL, POSITIVE FORCE: A BOOST TO PEOPLE IN A TIME OF NEED, A CATALYST FOR CHANGE, A SPARK FOR SOCIAL INNOVATION, AND IT CAN BUILD A LEVER FOR REFORM. WITH A PRESENCE STRETCHING ACROSS ALL ISLANDS AND A REACH COVERING A BROAD ARRAY OF INTERESTS, WE WORK WITH INDIVIDUALS, FAMILIES, FOUNDATIONS, BUSINESSES AND ORGANIZATIONS TO TRANSFORM LIVES AND IMPROVE OUR COMMUNITIES. MOREOVER, WE HAVE SEEN PHILANTHROPY BRING SIGNIFICANT MEANING TO THE GIVERS AND CREATE A LEGACY BEYOND THEIR LIFETIMES.

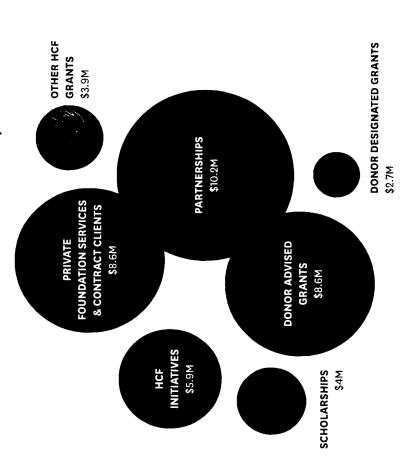
OUR GOAL AT THE FOUNDATION IS TO CONNECT THESE FORCES TO MAKE OUR COMMUNITY BETTER AND TO INCREASE THE LEVEL OF PARTICIPATION AND EFFECTIVENESS OF PHILANTHROPY IN HAWAI'I, WHILE PROVIDING THE FOLLOWING IMPACT:

- WE MAKE CHARITABLE INVESTMENTS MORE EFFECTIVE. WE HELP OUR CLIENTS SHAPE THEIR STRATEGIES TO ACHIEVE THEIR DREAMS AND CONNECT THEM WITH KEY COMMUNITY LEADERS IN THE STATE. WE KNOW WHERE OPPORTUNITIES AND NEEDS IN OUR COMMUNITIES EXIST AND HOW TO DESIGN GRANTS AND PROGRAMS TO ACHIEVE RESULTS
- WE PROVIDE COST EFFECTIVE SERVICES AND ADMINISTRATION FOR CHARITABLE GIVING. BECAUSE OF OUR EXPERIENCE, WE KNOW HOW TO ENSURE COMPLIANCE WITH THE INCREASINGLY COMPLEX OVERSIGHT BY FEDERAL AND STATE REGULATORS, EASING ADMINISTRATIVE BURDENS FOR OUR CLIENTS. BECAUSE OF OUR SIZE, WE CAN HANDLE FRONT AND BACK OFFICE ADMINISTRATIVE SERVICES AT A REASONABLE COST.
- WE CONVENE COMMUNITY MEMBERS AND LEADERS AROUND KEY ISSUES. WE BELIEVE THAT SOCIAL INVESTMENTS CAN BE HIGHLY LEVERAGED BY BRINGING TOGETHER NONPROFIT, COMMUNITY AND GOVERNMENT LEADERS AND FUNDERS TO PLAN, SHARE, LEARN AND COLLABORATE. THE FOUNDATION OFTEN PLAYS THIS CRITICALLY IMPORTANT ROLE, AS WE HAVE RECENTLY, TO GENERATE SOLUTIONS FOR SUBSTANCE ABUSE, AT-RISK TEENS AND CREATING EDUCATIONAL INNOVATION FOR 21ST CENTURY SCHOOLS
- WE CREATE AND MANAGE GRANTMAKING PROGRAMS TO ACHIEVE BROAD IMPACT. WE WORK WITH NONPROFIT PROVIDERS, FOUNDATION BOARDS, ADVISORY COMMITTEES AND COMMUNITY LEADERS TO FASHION GRANTMAKING PROGRAMS TO MEET SPECIFIC OBJECTIVES AS DETERMINED BY DONORS AND CLIENTS OR THE FOUNDATION'S BOARD OF GOVERNORS. HALLMARK PROGRAMS INCLUDE OUR INITIATIVE AROUND BUILDING THE CAPACITY AND LEADERSHIP OF THE NONPROFIT SECTOR, SERVING AS THE LARGEST PUBLIC PROVIDER OF POST-SECONDARY EDUCATION IN HAWAII AND OUR SUPPORT OF FAMILY FOUNDATIONS.
- WE ARE THE RECOGNIZED RESOURCE ON NONPROFITS AND PHILANTHROPY. THE FOUNDATION IS THE "GO TO" PLACE TO LEARN ABOUT THE WORK OF NONPROFIT AGENCIES, CHARITABLE GIVING AND THE CONTEXT AND TRENDS THAT AFFECT THEM. WE COMMISSION SURVEYS AND STUDIES TO TRACK INDUSTRY TRENDS, HOUSEHOLD GIVING, VOLUNTEERING AND EXECUTIVE TENURE. WE ORGANIZE WORKSHOPS AND CONFERENCES, AND PROVIDE COMMENTARY TO THE GENERAL PUBLIC THROUGH TRADITIONAL AND NEW MEDIA VENUES.

dn 2013, HCF distributed

# \$43,998,657

to the community from gifts made by our donors, clients and partners



N . INDS TOTAL TO E T Z

Last year, your collective generosity supported the community in these areas:

AREAS OF INTEREST	TOTALS
ARTS & CULTURE	\$3,757,470
Arts, Culture & Humanities	
COMMUNITY DEVELOPMENT	\$3,060,385
Cnil Rights & Cnil Liberties	
Philanthopy & Voluneersm	
Public Polacy	
Religion & Spiritual Development	
EDUCATION & YOUTH	\$7,568,680
Lark Childhood Education	
Recreation & Sports	
Youth Development	
ENVIRONMENT	\$4,328,977
Sustainability	
НЕАІТН	\$7,668,339
Mednal Research	
Mental Health	
Tobacco Cesetton	
HUMAN SERVICES	\$4,347,567
Новыщ	
Legal Services	
ОТНЕЯ	\$637 991
Advancing Nonprofits	
International	
SCHOLARSHIPS (HCF FUNDS ONLY)	\$2,108,018
GRAND TOTAL	\$33,477,427*

Includes expenses related to the implementation of various programs and centracts. Does not include \$10,521,230 in grants administered on behalf of private foundation and other clients.

The 2013 Distribution of Grants and Contracts, along with audited financial statements will 55 available after September 1, 2014, at Hawaii Community Foundation org

STATEMENT #2

\$27,441 19 \$5,000 00 \$10,000 00 \$12,000 00 \$57,000 00 \$152,018 70 \$53,893 09 \$8,101 76 \$5,000 00 \$58,915 15 \$18,517 17 \$12,336 40 \$5,000 00 \$5,000 00 \$76,500 00 \$15,000 00 \$10,000 00 \$10,000 00 \$100,000 00 \$15,000 00 \$30,000 00 \$33,000 00 \$8,038 22 \$13,049 93 \$11,000 00 \$8,101 76 \$5,000 00 \$10,000 00 \$20,000 00 Purpose of grant assistance Education - Grades K-12 Human Services Religion/Spiritual Development Human Services Philanthropy, Volunteernsm & Health Education - Higher Education Youth Development
Arts, Culture & Humanities
Food, Agnoulture, Nutrition Education - Early Childhood Education
Human Services
Community Development Community Development Arts, Culture & Humanities Arts, Culture & Humanities Health Youth Development Human Services Arts, Culture & Humanities Arts, Culture & Humanities Environment Health - Specific Disease-Civil Rights/Civil Liberties Education - Literacy Youth Development Youth Development Youth Development Mental Health Education Human Services Human Services Human Services Human Services Human Services Anımal - related Anımal - relatec Environment Grantmaking Education Education Health Health 96817 21279-0099 36817-2704 96819 96720 96817 96743 96826 96817 96744 96819 96816 96701 96814 96714 96817 96792 96813 20198 96816 97038 81615 92124 96778 96818 80524 95822 96793 96784 96813 96826 96826 96720 96745 96817 19087 96731 Zip State 임정토 ႘ ≸ ΞΚ **≣**88 로성토토 토토 ₽¥ Ī ⊒⊒≝≱ Ξ Ŧ 되도 티티티티티 ਾ Ξ Ξ 풀 되되도 Ξ ᇁ Ŧ 되로 ₹ Honolulu Hilo Kailua-Kona Fort Collins Sacremento Bloomsburg The Plains Snowmass Village Honolulu San Diego Honolulu Baltımore Kaneohe Honolulu Honolulu Area Honolulu Wai'anae Honolulu Puunene Honolulu Pahoa Honolulu Honolulu Kamuela Hilo Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Wayne Kahuku Hanalei Molalla Wailuku 435 Devon Park Drive, Building 300 913 Alewa Drve
PO Box 6411
3375 Koapaka Street #B290
4747 Kilauea Avenue, #207
99-193 Alea Heights Drve, Ste 30
1600 Kapiolani Blvd. Suite 530 224 Hail Street, Bldg B 418 Kuwil Street, Ste 106 P O Box 7020 200 Kanoelehua Ave , PMB 285 458 Keawe 1050 Ala Moana Blvd , Ste 2610 200 N Vineyard Blvd., Ste 700 200 N Vineyard Blvd, Suite 430 P O Box 79099 677 Ala Moana Blvd Suite 600 810 Richards Street, Suite 750 1525 Bernice St 1200 Railroad St 56-660 Kamehameha Hwy 201 Linden Street, Suite 202 4155 Diamond Head Road P O Box 1246 P O Box 5598 10102 Rolling Ridge Road 810 N Vineyard Blvd One Ohana Nui Way PO Box 249 2370 Nuuanu Ave CIP Capital L P 4249 Loudoun Ave P O Box 10052 3293 Santo Road P O Box 2091 2667 Anuu Place 1505 Young St P O Box 1408 333 Wiliwili St P O Box 125 P O Box 225( P O Box 39 IRS Status 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3 501 (c)(3) 501 (c)(3) 20-4420646 | 99-0254581 | 49-0254581 | 99-0218901 | 99-0234811 | 99-0185196 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-0196090 | 99-01 95-1679700 51-0447372 99-6001152 23-7024314 26-3841515 99-0222784 99-0109970 99-0343488 99-0279188 99-0243991 20-4124164 94-6187633 99-0074594 13-1788491 99-6005407 81-0575345 99-0293418 24-0772407 13-1685039 93-0386887 99-0073477 99-0161980 23-1667959 95-4601798 23-7267983 94-3267103 99-0286990 52-1501259 27-2000025 99-0107223 99-0212360 Assistance League of Hawaii Assistive Technology Resource Centers of Hawaii Association of Fundraising Professionals - Aloha Chapter Alzheimer's Disease and Related Disorders Association Born Free USA United with Animal Protection Institute Big Brothers Big Sisters Hawaii, Inc Big Island Mediation, Inc Big Island Resource Conservation and Development American Lung Association of the Mountain Pacific Boy Scouts of America - Maui County Council
Boys & Girls Club of Hawaii
Boys and Girls Club of the Big Island
Bridge House, Inc
Bucknell University
CARE, Inc 442nd Regimental Combat Team Foundation Amencan Heart Association, Hawaii Affiliate ARCS Foundation, Inc. - Honolulu Chapter Armed Services YMCA of the USA Agricultural Leadership Foundation Hawaii American Cancer Society
American Friends of New College Limited Name of Organization Aloha School Early Learning Center Inc American Red Cross - Hawaii Chapter American Wildlife Foundation Anderson Ranch Arts Center Alaka Ina Foundation Alexander & Baldwin Sugar Museum Aloha Medical Mission Alternative Structures International Bloomsburg Area High School Bobby Benson Center Adult Friends for Youth After-School All-Stars Hawai American Bird Conservancy Arts & Sciences Center Academy of the Pacıfic Accessurf Hawaii Inc Aloha United Way 00Schools4Haiti 31shop Museum Bay Clinic Inc Alu Like, Inc Book Trust Awaraulu ounci

Hawaii Community Foundation EIN 99-0261283

For Grants 1/1/2013 to 12/31/2013

Form 990 Schedule I, Part II

Name of Organization	EIN	IRS Status	Address	Ç	State	Zip	Purpose of grant assistance	Amount
Castle Medical Center	99-0107330	501 (c)(3)	640 Ulukahiki St		-	96734-4498 Health	Health	\$75,000 00
Catholic Charities Hawai'i	99-0073547	501 (c)(3)	Clarence T C Ching Campus	Honolulu	Ī	96822	Religion/Spiritual Development	\$92,270 79
Center for International Policy	52-1446207	501 (0)(3)	1822 Ke eaumoku Street 2000 M Street NW Suite 720	Machineton	2	20036	Commission Observation	\$10,000,00
Chamber Music Hawaii	99-0215895	501 (c)(3)	P.O. Box 61939	Honolulu	<u>†</u>	96839	Arts Culture & Humanities	\$7,000,00
Chautauqua Foundation Inc	16-6028421	501 (c)(3)	PO Box 28	Chautaugua	ž	14722	Education	\$5,000,000
Chickasaw Foundation	73-1069557	501 (c)(3)	P O Box 17	Ada	ð	74821	Human Services	\$13,536 88
Child and Family Service	99-0073483	501 (c)(3)	200 N Vineyard Blvd Bldg B	Honolulu	₹	96817	Human Services	\$255,755 00
Children's Alliance of Hawaii, inc	99-0257743	501 (c)(3)	1100 Alakea Street, Suite 400	Honolulu	₹	96813	Youth Development	\$7,500 00
Children's Discovery Center	99-0241632	501 (c)(3)	111 Ohe Street	Honolutu		96813-5517	Education	\$10,000 00
Chinese Catholic Club	99-6007179	501 (c)(3)	P O Box 683	Area	Ī	96701	Religion/Spiritual Development	\$6,673 85
Chnst United Methodist Church of Honolulu	99-0077812	501 (c)(3)	1639 Keeaumoku St	Honolulu	Ī	96822	Religion/Spintual Development	\$12,800 52
Circles of Light	99-0346671	501 (c)(3)	P O Box 347	Lihue	₹	99296	Arts, Culture & Humanities	\$7,500 00
Collaborative Leaders Network	27-4662010	501 (c)(3)	700 Bishop St., Suite 1701	Honolulu	₹	96813	Community Development	\$450,000 00
Common Cause Education Fund	31-1705370	501 (c)(3)	1133 19th St Nw, Ninth Floor	Washington, DC	2	20036	Civil Rights/Civil Liberties	\$10,000 00
Community Clinic of Maui Inc	99-0303304	501 (c)(3)	48 Lono Avenue	Kahului	ੁ	96732	Health	\$75,000 00
Community Health Outreach Work to Prevent Aids	99-0284222	501 (c)(3)	677 Ala Moana Blvd , Suite 226	Honolulu	Ē		Health	\$25,000 00
Conservation International Foundation	52-1497470	501 (c)(3)	2011 Crystal Drive, Suite 500	Arlingotn	۸A	22202	Environment	\$49,961 00
Consuelo Zobel Alger Foundation	99-0266163	501 (c)(3)		Honolulu	Ī	96817	Human Services	\$25,600 00
Coral Reef Alliance	94-3211245	501 (c)(3)		San Francisco	CA	94104	Environment	\$45,000 00
County of Kauaı, Office of Economic Development	99-600658	Public Agencies	4444 Rice Street, Suite 200	Lihue	Ī	99296	Hawaiian Culture, Language, and/or History	\$30,000 00
Department of Education, Kauai District Office	99-6001081	Public Agencies	3060 Eiwa Street, Room 305	Lihue	Ī	96766	Education	\$5,000 00
Department of Land and Natural Resources	99-0266119	Public Agencies	PO Box 621	Honolulu	Ī	60896	Environment	\$49,558 00
Diamond Head Theatre	99-0073495		520 Makapuu Avenue	Honolulu	Ī	96816	Arts, Culture & Humanities	\$9,427.95
Discovery Children's Museum	94-2943891		360 Promenade Place	Las Vegas	≩	89106	Science & Technology	\$10,000 00
Domestic Violence Action Center	99-0290389		P O Box 3198	Honolutu	=    =	96801	Human Services	\$10,000 00
Dunwoody College of Technology	41-0693856	501 (c)(3)	818 Dunwoody Blvd	Minneapolis	7	55403	Education	\$33,713 90
Earthjustice	94-1730465	501 (c)(3)	426 17th St , 6th Fl	Oakland	1	ន្តា	Environment	\$9,585 00
Easter Seals Hawaii	99-0075235	501 (c)(3)	710 Green Street	Honolulu	寸	96813	Human Services	\$38,766 91
Effective Diamera Incommission	99-0294540	501 (c)(3)	1500 Kalaniana ole Avenue	Hilo		6720-4914	96720-4914 Arts, Culture & Humanities	\$10,000 00
EGlobal Family	26-2751421	501 (c)(3)	200 North Vineyard Boulevard,	Honolulu	<u> </u>	6817-3938	96817-3938 Human Services	\$36,000 00
			Building B Ste 103			$\neg$		
Enterprise Honolulu	99-0229787	501 (c)(3)	737 Bishop St , Mauka Tower, Ste 2040	Honolulu	Ī	96813	Advancing Nonprofits	\$50,000 00
Equality Hawaii Foundation	27-0314628	501 (c)(3)	P O Box 11444	Honolutu	Ξ	96828	Education	\$50,000 00
Equus Therapeutic Inc	04-3059468	501 (c)(3)	651 Henderson Rd	Williamtown	MA	01267	Education	\$5,000 00
Eye of the Pacific Guide Dogs Foundation	99-0103779	501 (c)(3)	747 Amana Street, #407	Honolulu	Ξ	96814	Human Services	\$95,357.87
Faith Action for Community Equity	99-0335935	501 (c)(3)		Honolulu	Ξ	96817	Food, Agriculture, Nutrition	\$25,000 00
Family Promise of Hawaii	20-2645489	501 (c)(3)	245 N Kukui St Suite 101	Honolulu	Ī	96817	Human Services	\$44,000 00
Family Support Services of West Hawaii	99-0230341	501 (c)(3)	75-127 Lunapule Rd , Ste 11	Kailua-Kona	Ξ	96740	Human Services	\$6,635 00
Farrington Alumni and Community Foundation	99-0171947	501 (c)(3)	P O Box 4261	Honolulu	₹	96812	Education	\$15,580 58
First Presbyterian Church of Honolulu	99-0108712	501 (c)(3)	45-550 Kionaole Rd	Kaneohe	Ξ	96744	Religion/Spiritual Development	\$5,000 00
Foundry 47 Foundation	27-3457879	501 (c)(3)	re West, Apt 6D	New York	≥	10003	International	\$10,000 00
Friends of Honouliuli	83-0389059	501 (c)(3)		Kapoleı	± =	96707	Environment	\$5,400 00
Friends of the Children's Justice Centers of Oahu	27-3663109	501 (c)(3)		Honolulu	=	T	Youth Development	\$15,250 00
Friends of the Future	99-0296604			Kamuela	=	Т	Health	\$154,150 00
Friends of the Library of Hawaii	99-6003670	501 (c)(3)	690 Pohukaina St	Honolulu	=	T	Education	\$5,000 00
Friends of the Library of nawall - Nona	88-028/8/3		690 Ponukaina St	Honolulu	Ē	96813	Education	\$22,947.51

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\$8,000 00 \$10,000 00 \$35,000 00 \$146,500 00 \$10,000 00 \$10,000 00 \$68,500 00 \$25,000 00 \$30,000 00 \$49,500 00 \$75,000 00 \$75,000 00 \$38,000 00 \$38,000 00 \$10,000 00 \$30,300 80 \$850,000 00 \$5,000 00 \$53,000 00 \$129,000 00 \$8,000 00 \$8,000 00 \$17,500 00 \$30,000 00 \$15,000,00 Arts, Culture & Humanities Arts, Culture & Humanities Religion/Spintual Development Purpose of grant assistance Education Hawaiian Culture, Language, Hawaiian Culture, Language, Hawaiian Culture, Language, 96822 Education 96823-3519 Arts, Culture & Humanities 96812-3948 Arts, Culture & Humanities 96813 Community Development Education - Grades K-12 Arts, Culture & Humanities Arts, Culture & Humanities Arts, Culture & Humanities Youth Development Community Development Education - Grades K-12 Community Development Arts - Performing Arts Advancing Nonprofits Youth Development Human Services Human Services Human Services Human Services Human Services Human Services Human Services Human Services and/or History and/or History and/or History Environment Environment Environment 96766-1315 Environmen 96714 Environmen 02138-5762 Education Education Education Education Housing Health 논름 96746 30079 96766 96734 96814 03755 05055 96817 96745 96814 96803 96744 96797 96768 96817 96813 96743 96819 96732 99296 96727 96713 96713 96822 96789 96714 96813 96778 96813 96813 96816 96822 96731 96734 96774 96813 96727 | | ਜ਼ੜੀ ਜ਼ੀ ਜ਼ੀ ਜ਼ੀ ਜ਼ੀ ਜ਼ੀ ਜ਼ੀ ∯ ≡ਡਿ≡ 크로된토로 Ī 로로 도로로 로 티티토 되로 Ξ 물로 Ī ᄝᄝ Ī 티티티티로 ᇁ Laupahoehoe Norwich Honolulu Kailua-Kona Cambridge Honoka a Honokaa Waipahu Makawao Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Hana Hana Honolulu Miliani Honolulu Honolulu Kaneohe Honolulu Honolulu Kamuela O'okala Honolulu Honolulu Honolulu Honolulu Kahuku Kahulu Pahoa Kapaa Lıhu'e Lihue Lihue 547 Auwai St 410 Atkinson Drive, Suite 2E1, Box 3 1 45 Lyme Road, Suite 206 P O Box 712 200 N Vineyard Blvd A310 P O Box 4619 3599 Waialae Ave , Suite 23 1910 East-West Road, Sherman 101 P O Box 757 2611 Kilihau Street 36-1095 Stevens Road P O Box 66 201 Merchanl Street, Suite 1810 124 Mount Auburn St, Suite 430 1776 University Ave P O Box 236010 PO Box 3948 677 Ala Moana Blvd , Ste 702 PO Box 1803 650 Iwiler Rd , Surte 400 677 Ala Moana Bivd , Surte 320 33 South King Street, Suite 501 Office of Recording Secretary 1585 Kapiolani Blvd , #1212 1088 Bishop Street, #2506 700 Bishop St, Suite 1701 P O Box 1494 P O Box 827 4253 Rice Street, Suite C 615 Piikoi St., Suite #203 472 Kaulana Street 45-549 Plumena Street
45-3438 Mamane St Bldd
P O Box 686
P O Box 489
1922 Makiki St
94-294 Anania Dr
P O Box 1285 P O Box 2775 47-231 Kamakoı Road 4-1751 Kuhio Highway PO Box 388 P O Box 970967 2959 Umi St PO Box 446 38 Haili St 501 (c)(3) Public Agencies 99-0073497 501 (c)(3) 23-7067376 501 (c)(3) 26-1563850 501 (c)(3) 30-0261277 501 (c)(3) 26-2128617 501 (c)(3) 99-0220699 501 (c)(3) 99-0279337 Other 90-0108457 501 (c)(3) 45-3084351 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) Other 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3 501 (c)(3 501 (c)(3 501 (c)(3 99-0352607 (99-0325672 (99-0325672 (99-0190207 (99-0190207 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288553 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-0288555 (99-028 46-0898634 99-0073488 41-2156862 43-1957920 99-0265111 99-0355149 23-7061499 99-0080460 99-0155279 99-0115515 80-0410125 99-0340564 30-0131313 99-0074143 23-7334963 99-0153704 99-0321160 16-1628674 04-6073871 45-4910317 99-0347416 20-2216525 99-0353694 88-0483350 20-5591648 26-0639538 99-0211535 99-0308587 99-0339135 99-6006863 99-0353345 Hawai'i Leadership Forum Hawaii Academy of Arts & Science Public Charter School Garden Island Arts Council
Garden Island Resource Conservation and Development Hawaii Academy of Science
Hawaii Agricultural Foundation
Hawaii Alliance for Arts in Education
Hawaii Alliance for Community-Based Economic Hawaii Alliance of Nonprofit Organizations Hawaii Association of Independent Schools Harvard College Class Endowment Fund Hawaii Canines for Independence, Inc Hawaii Children's Foundation Hawaii Conservation Alliance Foundation Name of Organization Hawaii Academy of Performing Arts Hawaii Building Industry Foundation Gregory House Programs Habitat for Humanity West Hawaii Hawaii Council for the Humanities Hawaii Ecotourism Association Hawaii Fi-Do Service Dogs Hawaii Forest Industry Association Hawaii Forest Institute Hawaii Health Connector Gay Mens Chorus of Honolulu Inc Girl Scouts of Hawaii Global Grassroots Hawaii First Community Ventures Hamakua Health Center Inc Hamakua Youth Foundation Inc Friends of the Palace Theater Hawaii Autism Foundation Hawaii Book & Music Festival Hale Makua Health Services Hale 'Opio Kaua'ı, Inc Hanalei Watershed Hui Grassroot Soccer Inc Hana Retreat Hanahauoli School Hanalani Schools Fugees Family Inc Hawaii Foodbank Friendship Club Hale Kipa, Inc Developmen Hana Arts

Hawaii Community Foundation EIN 99-0261283

For Grants 1/1/2013 to 12/31/2013

Form 990 Schedule I, Part II

\$32,000 00 \$43,139 35 \$17,593 00 \$25,000 00 \$88,727 56 \$45,000 00 \$109,750 00 \$31,500 00 \$13,000 00 \$125,205 83 \$121,043 00 \$7,876 41 \$20,000 00 \$13,000 00 \$40,000 00 \$75,000 00 \$5,500 00 \$62,360 00 \$9,000 00 \$15,168 10 \$47,802 57 \$25,000 00 \$13,000 00 \$13,000 00 \$42,576 21 \$33,749 30 \$28,865 00 \$186,721 85 \$33,348 60 \$10,000 00 \$20,000 00 \$17,560 00 \$164,379 62 \$173,924 84 \$200,000 0 Religion/Spiritual Development Purpose of grant assistance Hawaiian Culture, Language, Arts, Culture & Humanities Hawaiian Culture, Language, Hawaiian Culture, Language, Arts, Culture & Humanities Education Health - Community Health 96814 Arts, Culture & Humanities 96828 Arts, Culture & Humanities 96819-2337 Human Services Arts, Culture & Humanities Arts, Culture & Humanities Education Youth Development Arts, Culture & Humanities Arts, Culture & Humanities Arts, Culture & Humanities Arts, Culture & Humanities Education Arts - Performing Arts Environment Arts - Performing Arts Human Services
Recreation & Sports
Animal - related
Youth Development Recreation & Sports Health Youth Development Arts - Visual Arts Housing Animal - related Environment Human Services Anımal - related and/or History and/or History and/or History Environment Education Education Education Education Education Housing Centers Health 96822 / 96743 / 96743 | 96813-4718 | 96813 Zıp 96839 96817 96813 96813 96720 96745 96740 96720 96808 96813 96813 96785 96826 96814 96826 96813 96813 96814 96813 96755 96828 96766 96740 96730 96738 96813 96813 State Ŧ ᆵ ᆿ ᇎ ᇁ 토토 티티티티티티티 Ī ヺヺ 뒫로 ᆵ 되되도 Î ੁ ᇁ 되되도 Ξ Ξ 로 되되되되 Ī |되되되되되 Ξ Kailua-Kona Kailua-Kona Lihue Kailua-Kona ij Kamuela Kamuela Honolulu Honolulu Honolulu Waikoloa Holualoa Hilo Kamuela Honolulu Honolulu Wailuku Wailuku Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Каааwа Honokaa Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Kapa'au 1259 Aaia St #201
1001 Bishop Street, Suite 1132
1001 Bishop Street, Ste 745, ASB
34 Rainbow Drive
P O Box 5221
74-5225 Queen Kaahumanu Highway K
116 Hualalai St, Suite 100
P O Box 1340
P O Box 1335
P O Box 1135 711 Kapıolanı Boulevard, 5th Floor 680 Iwilei Road, Ste 690 900 South Beretania Street 1670 Makaloa Street • #204, PMB #370 987 Waimanu Street 1164 Bishop Street, Suite 800 2833 East Manoa Road PO Box 474 65-1692 Kohala Mountain Road 345 Queen St. Ste 601 P O Box 551752 P O Box 70 1110 University Ave , Ste 200 1050 Queen St , #201 2700 Waialae Avenue 1500 S Beretania St #308 2100 North Nimitz Highway 711 Kapiolani Bivd , Suite 1430 1001 Bishop St, Suite 2880 P O Box 384239 78-6670 Mamalahoa Hwy 1728 Pali Highway 1132 Bishop St., Ste 1404 738 Kaheka Street P O Box 11599 716 Umi Street, Ste 210 3610 Waialae Ave 1149 Bethel St, Ste 700 P O Box 11685 P O Box 3990 73-1263 Onaona Drw 84-766 Lahaina St PO Box 300304 PO Box 965 553 S King St PO Box 62029 P O Box 39 RS Status 26-1965567 501 (c)(3) 99-0197758 501 (c)(3) 99-0113930 501 (c)(3) 99-0148833 501 (c)(3) 86-1138670 501 (c)(3) 99-0078306 501 (c)(3) 99-0268275 501 (c)(3) 51-0191809 501 (c)(3) 99-0334518 501 (c)(3) 99-0235218 501 (c)(3) 45-2861988 501 (c)(3) 99-0229658 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 99-0107563 501 (c)(3) 99-0210974 27-1984372 99-6009437 84-0385934 94-3275827 99-6010563 94-3274865 99-032669 99-0348777 99-0348767 99-035323 99-02926491 99-0299264 23-7365077 26-1210564 99-0292820 80-0359663 99-0349152 99-0317895 99-0200874 68-0544935 22-3859306 99-0280373 76-0717301 99-0250542 27-2520663 26-1537168 23-7441972 31-1813333 99-0330769 20-1489691 Hawaii High School Athletic Association (Save our Sports) Honolulu Academy of Arts dba Honolulu Museum of Art Honolulu Gay and Lesbian Cultural Foundation Hawaii Public Television Foundation dba PBS Hawaii Hawaii State Coalition Against Domestic Violence Hawaii Symphony Orchestra Hawaii Symphony Orchestra Hawaiian Humane Society Hawaiian Islands Land Trust Hawaiian Mission Children's Society Healitry Mothers, Healitry Babies Coalition of Hawaii Holualoa Foundation for Arts and Culture Name of Organization Hawaii Pacific University Hawaii Performing Arts Company, Ltd Hawaii Performing Arts Festival Hawaii Youth Symphony Association Hawaii HomeOwnership Center Hawaii Institute for Public Affairs Hawaii International Film Festival Hawaii Island Adult Care, Inc Hawaii Island Humane Society Hawaii Island Young Life Hawaii Learning Resource Hawaii Lions Foundation Hawaii Maoli Honokaa United Methodist Church Hawaii Preparatory Academy Hawaii Primary Care Association Hawaiian Community Assets Inc Ho'ala Aina Kupono Corporation Hokuloa United Church of Christ Honolulu Theatre for Youth Historic Hawaii Foundation Ho Okako O Corporation Hongwanji Mission School Hawaii Meth Project Inc Hawaii Opera Theatre Hawaii Wildlife Center Helping Hands Hawaii Hi'ilei Aloha LLC Hawaii Wildlife Fund Ho opa Hawaii VBC Hoa Aina 'O Makaha Hawaii Public Radio Ho ola Lahui Hawaii Hi'ipaka, LLC

Hawaii Community Foundation EIN 99-0261283

For Grants 1/1/2013 to 12/31/2013

Form 990 Schedule I, Part II

Nome of Organisation	5. 3-13 3GI	CONTRA CONTRACTOR	14.0	2.5	D	,v
Hopping Ward Encomple	743 501	680 hale Pd Suite 410	Hopping	ľ	Are Culture & Humanning	\$35,000,000
Hookuaana	3 5	44	-	+	Youth Development	\$9,600 00
Hoomalu Kau		P O Box 384	2	╀	Environment	\$45,000 00
HOPE Services Hawaii, Inc	501	296 Kilauea Avenue			Human Services	\$48,000 00
Hospice Hawaii	501	860 twilei Road	Honolulu	$\vdash$	Human Services	\$183,423 19
Hospice Maur, Inc	501	400 Mahalanı St	-			\$6,000 00
Hospice of Kona, Inc	201	PO Box 4130	$\dashv$	8		\$6,635 00
Hualalaı Academy, Inc	<u>2</u>	74-4966 Kealakaa Street	na	1		\$60,000 00
HUGS-Help, Understanding Group Support	99-0213594 501 (c)(3)	3636 Kilauea Avenue	1	8		\$19,128 47
Hui Aloha Kiholo		P O Box 1868	ela	+	Public Policy & Advocacy	\$10,000 00
Hui Malama O Kaneiolouma	20	PO Box 244	+	$\pm$	Arts, Culture & Humanities	\$13,000 00
Hui Malama O Ke Kai Foundation	99-0356784 501 (c)(3)	41-1537 Kalanianole Hwy, Ste 201B		$\pm$	Youth Development	\$18,000 00
Hui No'eau Visual Arts Center	띬	2841 Baldwin Avenue	30	1	Arts, Culture & Humanities	\$21,000 00
Hui o Koolaupoko	20	1051 Keolu Dr #208	1	$\dashv$	Environment	\$74,530 00
Hui O Laka-Kokee Natural History Museum	99-0085977 501 (c)(3)	P O Box 100	Kekaha HI	$\dashv$	Environment	\$68,500 00
Hula Preservation Society	201	P O Box 6274	Kaneohe H		Hawaiian Culture, Language, and/or History	\$60,913 18
I Ola Lahur, Inc	20-8924382  501 (c)(3)	677 Ala Moana Blvd, Suite 904	Honolulu	l 96813	Health	\$75,000 00
IHS, The Institute for Human Services, Inc	501	546 Ka aahi St	Honolulu HI	H	Human Services	\$91,065 00
Imua Family Services		95 Mahalanı St , Ste 19A		1 96793	Human Services	\$58,000 00
Innovations Public Charter School Foundation	501	75-5815 Ka'ahumanu Hwy	Karlua-Kona HI		Education	\$5,000 00
Institute for Asian Democracy		3509 Connecticut Ave NW 945	Washington DC	20008	Civil Rights/Civil Liberties	\$10,000,00
Institute for Native Pacific Education and Culture	501	1001 Kamokila Blvd, Suite #226	Н		Education	\$30,000 00
Institute on Violence Abuse and Trauma	501	10065 Old Grove Road	ot	$\dashv$	Human Services	\$5,000 00
Iolani School	<u>3</u>	563 Kamoku Street	Honolulu	$\dashv$	Education	\$85,000 00
Isha Foundation Inc	62-1794866 501 (c)(3)	951 Isha Lane		$\dashv$	Recreation & Sports	\$10,000 00
Isis Hawaii	2	P O Box 161296		╁	Health	\$29,395 57
Island Connect Consulting LLC	20	4152 Koko Drive	_	╢	Environment	\$10,000 00
Island Pacific Academy	Т	909 Haumea Street	- -	7	_	\$71,000 00
Island School	20	3-1875 Kaumualii Highway	+	8	_	\$45,000 00
Japanese American National Museum		100 N Central Ave	Sies	+	Arts, Culture & Humanities	\$5,000 00
Japanese Cultural Center of Hawaii	20	2454 South Beretania Street	Honolulu	+	Arts, Culture & Humanities	\$15,400 00
Ka Ahahui o Ka Nahelehele		PO Box 2933	+	+	Environment	\$40,000 00
Va Louis Manage International	2 2	43-3006 Figure Walpio Rd	+	17/06	Education - Early Childridge	00 000 00
Ka 'Ohana O Kalaupapa	72-1595460   501 (c)(3)	P O Box 1111	Kalaupapa HI	╁	Hawaiian Culture, Language,	\$30,000 00
				_	and/or History	
Kahılu Theatre Foundation	99-0200138 501 (c)(3)	P O Box 549	Kamuela	$\dashv$	Arts - Performing Arts	\$17,000 00
Kaho'olawe Island Reserve Commission		811 Kolu Street, Suite 201	Wailuku	96793	Hawaiian Culture, Language, and/or History	\$40,000 00
Kahoomiki	47-0890686 501 (c)(3)	PO Box 38136	Honolulu HI	96837-1136		\$7,500 00
Kailapa Community Association	501	P O Box 44512	Kamuela	96743	Hawaiian Culture, Language,	\$37,000 00
Kailua Canoe Club	23-7190027 501 (c)(3)	P O Box 177	Kaılua	96734	Environment	\$9,175.00
Kailua Sailboards and Kayaks, Inc	₫	130 Kaılua Road, Surte 101B		H	Environment	\$20,000 00
Kailua Village Business Improvement District, Inc	П	75-5751 Kuakını Hwy , #202	Kaılua-Kona Hi	H	Community Development	\$15,000 00
Kaımukı High School	Put	2705 Kaımukı Avenue	Honolulu HI	Н	Youth Development	\$7,500 00
Kaiola Canoe Club	99-0236180  501 (c)(3)	P O Box 3502		99296	Environment	\$40,000 00
Kakoo Oiwi		46-005 Kawa St Suite 104	Kaneohe HI		Environment	\$26,482 10
Kama'aına Care, Inc	99-0261935 501 (c)(3)	156 C Hamakua Dr	Kailua	96734	Education	\$25,000 00
KAMP Hawaii, Inc	501	P O Box 13041		$\vdash$	Youth Development	\$10,000 00
Kamuela Philharmonic Orchestra Society	501	PO Box 2597	Kamuela	1 96743	Arts, Culture & Humanities	\$5,000 00

Name of Organization	EIN	IRS Status	Address	City	State	Zip	Purpose of grant assistance	Amount
Капи Наман	20-5552831 5	i01 (c)(3)	1050 Bishop St, #504	Honolulu	Б Н	96813	Community Development	\$200,000 00
Kanu o ka Aina Learning Ohana	99-0352665	501 (c)(3)	P O Box 6511	Kamuela	H H	Г	Education	\$40,000 00
Kapiolani Health Foundation		i01 (c)(3)	55 Merchant St., 26th Fir	Honolulu	Н	96813	Health - Hospitals	\$227,062 49
Kauai Economic Development Board		(c)(3)	4290 Rice St	Lihue	Н		Environment	\$52,998 58
Kauai Food Bank Inc		i01 (c)(3)	3285 A Waapa Road	Lihue	$\dashv$	٦	Food, Agriculture, Nutrition	\$11,000 00
Kauai Habitat for Humanity	- 1	(c)(3)	P O Box 28	Eleele	+	7	Human Services	\$47,500 00
Kauai Historical Society	_	(01 (c)(3)	P O Box 1778	Lihue	+	T	Arts, Culture & Humanities	\$17,500 00
Nadal Hospice, IIIC	1	01 (0)(3)	4437 Panee Street	riune	+	7	nearin	900,000 000 000,000
Kauai independent Daycare Service Inc	П	01 (c)(3)	1346 Inia St	Kapaa	+	7	Education	\$8,500 00
Kauai Museum Association, Ltd	- F	501 (c)(3)	4428 Rice St	Lihue	1	7	Arts - Museum	\$5,000 00
Kaua'i Planning and Action Alliance	- 1	501 (c)(3)	2959 Umi Street, Suite 201	Lihue		99296	Community Development	\$32,671 20
Ke Kula Ni'hau O Kekaha Learning Center-Public Charter	30-0012402 F	ublic Agencies	P O Box 129	Kehaha	HI 967	96752-0129	Food, Agriculture, Nutrition	\$10,000 00
Notice Use Sepan Casa		(0)(-)	0000		1	10007		00000
Kekehi Edindaton Inc	99-0349903	501 (5)(3)	P O Box 4062	Kailua-Kona		740-4007	96/43-406z Yourn Development	\$6,000,00
KHM International	مار	(5/3)	DO Box 482188	Kamakaka	+	T	Vouth Development	000000
Kinabulu Obana Inc		(5/3)	D O Box 454	Land	+	T	Food Agnorithme Nutation	\$13,405,00
Kitchen Gardeners International	56-2380230	(5/3)	2 Douglathorn Drug	Conformingh	+	Ť	Food Agriculture Nutrition	85 000 000
Koalke	56-2370551	501 (c)(3)	84-255 Makaha Valley Road	Walanae	╀	T	Commings Development	\$10,000,00
Kokua Kalihi Valley Comprehensive Family Segures	90.0140707	01 (c)(3)	2230 North School St	Honolidia	+	T	Hoolth	6243 000 00
Kona Adult Day Center Inc	99-0273644 50	01(c)(3)	P.O. Box 1360	Kealakekiia	Ē	96750	Himan Services	\$8,000,00
Kona Historical Society	т	01 (5)(3)	81-6551 Mamalahoa Hwy	Kealakekus	+	T	Arts Culture & Humanities	\$18,000,00
Kona Hosnital Foundation	т	01(c)(3)	70-1019 Hankania Street	Kealakekua	╀	T	Hoolth	\$52,826.76
Kona Misic Society	_	01(5/3)	PO Box 5007	Kailia-Kona	+	Т	Arts Culture & Humanities	\$14,000,00
Kona Dacific Dublic Charter School	7	01 (0)(0)	DO 500 115	Kanda-houra	+	Ī	diestina d'indianaes	414,000,00
Konko Mission of Manachii	20-2003-20	01 (5)(3)	PO BOX 113	Nealakekua	+	Ť	Education	\$ 10,000 00
Volsila Comment Light and Well-	Т	(5/(5))	94-100 Mokukada St	walpanu	+	Ť	Keligion/Spiritual Development	\$12,323 93
Roolauloa Community Health and Wellness Center, Inc	/3-1681833 5	01 (c)(3)	P O Box 395	Kahuku	5 —— <b>Ξ</b>	96731	Health - Community Health Centers	\$35,000 000
Koolauloa Educational Alliance Corporation	94-3262594 5	01 (c)(3)	56-490 Kamehameha Hwy	Kahuku	<u>5</u>	96731	Education	\$5.500 00
Korean Church		01 (c)(3)	1832 Liliha Street	Honolulu	H	Γ	Health	\$8,533 68
Kuakını Foundation	99-0225067 5	501 (c)(3)	347 North Kuakını Street	Honolulu	┢	Γ	Health	\$15,792 50
Kualapu'u Public Conversion Charter School	27-2796554 5		P O Box 260	Kualapuu	$\vdash$		Hawaiian Culture, Language,	\$40,000 00
							and/or History	
Kualoa-Heela Ecumenical Youth Project	99-0118209 50	01 (c)(3)	47-200 Waihee Rd	Kaneohe	<u>∓</u>	96744	Hawaiian Culture, Language, and/or History	\$5,000 00
Kuikahi Mediation Center, Inc	20-3997875 5		101 Aupuni St , Ste 1014 B2	일도	H	96720	Human Services	\$30,181 20
Kukui Children's Foundation	20-1247747 5	501 (c)(3)	245 North Kukuı Street	Honolulu	H	96817	Human Services	\$19,000 00
Kula No Na Po'e Hawai'i	_		2150 Tantalus Dr	Honolulu	_	П	Education	\$12,551 00
Kumu Kahua Theatre			46 Merchant St	Honolulu			Arts - Performing Arts	\$21,000 00
Kupu			677 Ala Moana Blvd, Suite 1200	Honolulu	$\dashv$		Sustainability	\$115,000 00
Lahaina Arts Association			648 Wharf Street #103	Lahaına	ති <u>=</u>		Arts, Culture & Humanities	\$10,000 00
Lahainaluna High School Foundation	- 1		P O Box 11617	Lahama	$\dashv$	7	Education	\$30,471 79
Lanai High and Elementary School	- 1	ncies	P O Box 630630	Lana'i Cıty	+	╛	Education	\$10,000 00
Lanakila Pacific	- 1	501 (c)(3)	1809 Bachelot St	Honolulu	5 =	┪	Food, Agniculture, Nutrition	\$15,000 00
Lanakila Rehabilitation Center Inc			1809 Bachelot St	Honolulu	┪		Human Services	\$75,000 00
Lawyers for Equal Justice		01 (c)(3)	P O Box 37952	Honolulu	HI 9683	96837-0952 (	Civil Rights/Civil Liberties	\$25,000 00
Le Jardin Academy	99-0146978 5(	)1 (c)(3)	917 Kalanianaole Highway	Kaılua	$\dashv$	96734 E	Education	\$75,000 00
Lead4Tomorrow		)1 (c)(3)	P O Box 109	Kaneohe			Education	\$10,000 00
Leadership Kauai	76-0752398 50	)1 (c)(3)	P O Box 1567	Lihue	$\exists$	Ť	Community Development	\$7,933 11
League of Women Voters of Honolulu Education Fund, Inc	97-0355692   5	)1 (c)(3)	49 S Hotel Street, Surte 314	Honolulu	გ  Ξ	96813 (	Community Development	\$7,038 59
Learning Disabilities Association of Hawaii	99-0119223 5	501 (c)(3)	245 N Kukuı Street, Suite 205	Honolulu	HI 96	П	Human Services	\$9,000 00
Legal Aid Society of Hawaii	99-0076020 5		924 Bethel Street	Honolulu		96813 1	Legal Services	\$36,307 61

Name of Organization	FIN	IRS Status	Address	Çışı	State	Zin	Purpose of grant assistance	Amount
Life Foundation	542 501		677 Ala Moana Blvd Suite 226	Honolulu	₹	96813	Health	\$39,500 00
Life's Bridges Hawaii, Inc	20-8958857 501 (c)(3)		P O Box 1965	Lihue	≡	99296	Human Services	\$5,000 00
Lihue Hongwanji Mission	Ι.			Lihue	₹	96766	Religion/Spiritual Development	\$5,000 00
Loma Linda University	1		11139 Anderson St	Loma Linda	5	92350	Education	\$6,438 70
Lotus Arts Foundation			P O Box 1108	Kılauea	Ξ	96754	Arts, Culture & Humanities	\$6,000 00
Love a Cat Charity			PO Box 11753	Honolulu	Ξ	96828	Anımal - related	\$8,060 00
Love the Journey, Inc	27-2898564 501 (c)(3)		PO Box 3076	Lihue	Ξ	99296	Health - Substance Abuse	\$7,500 00
Lincold Homo	00 0075944 504 (5)/9)	Ī	EO1 Kokouluah St	Honolide	5	06025	Prevention and/or Treatment	£42 500 14
Luiamo nome	- 1		OU I NEKAUIUOIII SI	חסוסוטב	= :	30053	nealul	945,030 14
Lutheran Church of Honolulu	Т	1	1730 Punanou Street	Honolulu	₹ :	30822	Keligion/spiritual Development	\$0,021.04
Ma Na Hana Na Ike Buliding Program	T		P U Box 968	Hana	= =	96/13	Yourn Development	\$68,400 00
Makaulia, Inc	_		1839 Keeaumoku St	Honolulu	= =	30822	Education	\$78,000,00
Makawao Union Church	7		P U Box /900/1	Pala	=	96//9	Keligion/Spiritual Development	00 000,00
Making Dreams Come True, Valley of Kainbows Inc	- 1		PO Box 1009	Walanae	Ŧ	36/35	Youth Development	\$5,000 00
Maiaai - The Culinary Garden of Warmea Middle School	51-06466/0 501 (C)(3)		P U Box 543	Kamuela	=	96/43	Education	\$30,000 00
Malama Learning Center	20-513/488 501 (c)(3)		PU Box 846	Kanolei	Ę	96707	Environment Hawaijan Culture Language	\$45,000,00
					:	5	and/or History	
Malama Loko Ea Foundation			P O Box 553	Haleiwa	Ī	96712	Environment	\$30,000 00
Malama Maunalua			P O Box 240421	Honolulu	Ī	96824	Environment	\$75,428 50
Malama Na Apapa	20-5866464 501 (c)(3)		PO Box 428	Kılauea	Ī	96754	Environment	\$38,322 00
Malama Na Honu			91-1012 Kaipalaoa Street, Unit #5506	Ewa Beach	Ī	96706	Environment	\$43,750 00
Malama Na Makua A Keiki			PO Box 791749	Paia	Ī		Mental Health	\$5,000 00
Malama Pono Health Services	99-0260914 501 (c)(3)		4357 Rice Street, Suite 101	Lihue	Ī	96766-5950	Human Services	\$15,000 00
Malama Pupukea-Waimea			P O Box 188	Halerwa	Ξ	96712	Environment	\$15,000 00
Malamalama Waldorf School, Inc	. [		HC 3, Box 13068	Keaau		96749-9220	Education	\$35,000 00
Malie Foundation			P O Box 13	Kapaa	Ξ	96746	Arts, Culture & Humanities	\$10,000 00
Mana Maoli			1110 University Ave , #310	Honolulu	₹	96826	Environment	\$17,862 00
Manoa Hentage Center	99-0329524 501 (c)(3)		2859 Manoa Road	Honolutu	₹	96822	Arts, Culture & Humanities	\$39,750 00
Manu O Ke Kai Canoe Club	- 1	1	278-B Karsten Dr	Wahiawa	╗	96786	Recreation & Sports	\$5,000 00
March of Dimes Birth Defects Foundation, Pacific Chapter	13-1846366   501 (c)		1451 South King St , PH 504	Honolulu	<u></u>	96814-2509	Human Services	\$8,011.21
Marlborough School	95-2816435 501 (c)(3)		250 S Rossmore Ave	Los Angeles	Ą	90004	Education - Grades K-12	\$10,000 00
Maryknoll Schools			1526 Alexander St	Honolulu	Ξ	96822	Education	\$70,471 41
Maur Academy of Performing Arts			81 N Church St	Wailuku	₹		Education	\$18,373 77
Maur Arts & Cultural Center	99-0222998 501 (c)(3)		One Cameron Wy	Kahuluı	7		Arts, Culture & Humanities	\$32,292 55
Maul Community Theatre		1	68 N Market St	Wailuku	T.	9	Arts, Culture & Humanities	\$14,000 00
Maul Dance Council	99-0279116 (501 (c)(3)		P O Box 180	Makawao	₹	96768	Arts, Culture & Humanities	\$60,877.00
Maul Day Care Center for Senior Citizens and Disabled, Inc	99-0216306  501 (c)		11 Mahaolu Street, Suite B	Kahulu	Ī	96732	Human Services	\$75,000 000
Maur Economic Development Board Inc	99-0226377  501 (c)(3)		1305 N Holopono Street, Surte 1	Kihei	Ī	96753	Community Development	00 000'6\$
Maur Economic Opportunity, Inc			99 Mahalanı Street	Wailuku	Ξ	96793	Education - Literacy	\$18,735 00
Maui Family Support Services, Inc	99-0208152 501 (c)(3)		1844 Wili Pa Loop	Wailuku	₹	96793	Education	\$208,400 00
Maur Humane Society			P O Box 1047	Puunene	₹	96784	Anımal - related	\$12,060 00
Mauı Preparatory Academy	99-0354508  501 (c)(3)		PMB #186 5095 Napilihau Street, #109B	Lahaina	 Ī	96761	Education	\$77,000 00
Maui Tomorrow Foundation, Inc.			55 N Church St , Suite A-5	Wailuku		96793	Environment	\$25,000 00
Maur Youth and Family Services Inc			PO Box 790006	Paia	П	96779-0006	Human Services	\$6,000 00
Maunalua Fishpond Heritage Center	П		P O Box 240204	Honolulu	₹	96824	Environment	\$19,090 00
Mental Health America of Hawaii	- 1		1124 Fort Street Mall, Room 205	Honolulu	₹	96813	Mental Health	\$40,468 64
Mid-Pacific Institute	99-0073514   501 (c)(3)	1	2445 Kaala Street	Honolulu	=	96822	Education	\$78,202.80
Missoun Valley College			500 E College	Marshall	2 :	65340	Education	\$5,505,98
Monala Pua School	99-0106494  501 (c)(3)		350 Ulua Street	Honolulu	₹	30821	Education	00 000 nr

Hawaii Community Foundation EIN 99-0261283 Form 990 Schedule I, Part II For Grants 1/1/2013 to 12/31/2013

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Name of Organization	- 1	IRS Status	Address	AD:	State	diz	Purpose of grant assistance	Amount
Mollilli Hongwanji Mission	- 1	01 (c)(3)	902 University Ave	Honolulu	₹ :	96826	Human Services	\$68,505,00
Molokai Arts Center, Inc	- 1	501 (c)(3)	PO Box 116	Kualapu'u	=	96/57	Arts, Culture & Humanities	\$15,000 00
Molokai Community Service Council	I	01 (c)(3)	P O Box 2047	Kaunakakai		96748	Environment	\$60,000 00
Molokai Land Trust	- 1	01 (c)(3)	P,O Box 1884	Kaunakakai	╗	8	Environment	\$77,250 00
Molokai Ohana Health Care Inc		01 (c)(3)		Kaunakakai	₹	96748	Health	\$33,455 00
Montesson Hale O Kerkı Inc		01 (c)(3)		Kihei	Ī	96753	Education	\$16,250 00
Montesson School of Maui	- 1	501 (c)(3)	2933 Baldwin Ave	Makawao	₹	96768	Education	\$10,000 00
Music for Life Foundation	- 1	01 (c)(3)	P O Box 6328	Kaneohe	₹	96744	Arts, Culture & Humanities	\$6,000 00
Na Hoaloha Maur Interfaith Volunteer Caregivers		i01 (c)(3)	P O Box 3208	Wailuku	₹	96793	Human Services	\$50,000 00
Na Kalaı Waa	99-0304846 5	501 (c)(3)	65-1206 Mamalahoa Hwy , Suite 3-11	Kamuela	≡	96743	Arts, Culture & Humanities	\$30,000 00
Na Kama Kai	26-2034996 5	01 (c)(3)	P O Box 240039	Honolulu	Ī	96824	Hawaiian Culture, Language, and/or History	\$25,000 00
Na Lei Hulu I Ka Wekiu Hula Halau	94-3228844 5	501 (c)(3)	153 Bradford St	San Francisco	₹	94110-5703	Hawaiian Culture, Language,	\$10,000 00
Nanakuli Housing Corporation	99-0273980 5	01 (c)(3)	P O Box 17489	Honolulu	₹	96817	Housing	\$7,000 00
Napili Bay and Beach Foundation, Inc		(c)(3)	P O Box 10823	Lahaina	Î	1929	Environment	\$8,750 00
NASUAD		501 (c)(3)	1201 15th Street, NW #350	Washington	വ	20002	Advancing Nonprofits	\$7,475 00
National Center For State Courts	52-0914250 5	01 (c)(3)	P O Box 8798	Williasmburg		23187-8798	Other	\$5,998 70
National Kidney Foundation of Hawaii, Inc		[501 (c)(3)	1314 S King St, # 305	Honolulu	Ŧ	96814	Health	\$30,000 00
National Tropical Botanical Garden	52-6057064 5	501 (c)(3)	3530 Papalina Rd	Kalaheo	Ξ	96741	Environment	\$143,400 00
Native Hawaiian Legal Corporation		(c)(3)	1164 Bishop St , Suite 1205	Honolulu	Ī	96813	Civil Rights/Civil Liberties	\$30,000 00
Nat'l Spirtual Assembly of the Bahais of the Hawn Islands	99-6009203	501 (c)(3)	3264 Allan Place	Honolulu	Ī	96817	Religion/Spiritual Development	\$20,797 18
North Hawaii Community Hospital Inc	99-0260423	(01 (0)/3)	67-1125 Mamalahoa Hichway	Kamilela	Ī	96743	Health	\$67 643 15
North Hawaii Hospice, Inc	1	01 (c)(3)	65-1328 Kawaihae Rd	Kamuela	₹	Т	Health	\$25,527 24
North Kohala Community Resource Center	Т	501 (c)(3)		Hawi	₹	96719	Community Development	\$71,912 00
NTI Upstream	Ι.	Other	wr. Surte F-267	Chicago	_	Γ	Health	\$75,000 00
Oahu Resource Conservation & Development Council		01 (c)(3)	urte 111	Aiea	₹	Г	Sustainability	\$131,500 00
Ohana Pacific Foundation		501 (c)(3)	Г	Kaneohe	₹	96744	Human Services	\$75,000 00
Ohi'a Productions, Inc	_	i01 (c)(3)	2051 Young Street, #125	Honotulu	Ĩ	96826	Arts, Culture & Humanities	\$14,500 00
Ohu Ohu Koolau, Inc	20-3039461 5	01 (c)(3)	2551 Waimano Home Road	Pearl City	Ξ	96782	Environment	\$25,000 00
Outrigger Duke Kahanamoku Foundation	2	01 (c)(3)	P.O. Box 2498	Honolulu	Ξ	96804	Recreation & Sports	\$7,785.05
Pacific American Foundation	4	01 (c)(3)	45-285 Kaneohe Bay Dr., #102	Kaneohe	Ξ	96744	Youth Development	\$126,500 00
Pacific Financial Aid Association	20-0429061 5	01 (c)(3)	PO Box 235002	Honolulu	Ξ	96823	Education	\$7,000 00
Pacific Forum, CSIS	2 5	01 (c)(3)	1003 Bishop Street, Ste 1150	Honolulu	Ī	96813	Environment	\$9,000 00
Pacific Gateway Center	2	01 (c)(3)	723-C Umi Street	Honolulu	Ξ	96819	Public Policy & Advocacy	\$30,000 00
Pacific Health Research and Education Institute	99-0312283 5(	(c)(3)	3375 Koapaka Street, Suite I-540	Honolulu	₹	96819	Medical Research	\$40,000 00
Pacific Islanders in Communications	99-0293514 5	01 (c)(3)	615 Piikoi Street, Ste 1504	Honolulu	Ī	96814	Hawaiian Culture, Language,	\$30,000 00
Pacific Survivor Center	27-293643 5	01 (c)(3)	220 South King Street Suite 980	Honolulu	₹	96813	Human Services	\$49.343 51
Pahoha I Ka Lanı - Napoʻopoʻo		501 (c)(3)	P O Box 412	Kurtistown	Ξ	96760	Hawaiian Culture, Language, and/or History	\$5,000 00
Pa'i Foundation	99-0354949 5	01 (c)(3)	P O Box 235012	Honolulu	₹	96823	Hawaiian Culture, Language,	\$30,000 00
		(-X-X-)					and/or History	
Para Elementary School PTA	2	01 (c)(3)		Paia	₹	62296	Education	\$11,000 00
Para Youth Council, Inc	T	01 (c)(3)		Paia	₹	╗	Youth Development	\$40,500 00
Palama Settlement	_ 1	501 (c)(3)	810 North Vineyard Blvd	Honolulu	=	T	Human Services	\$48,025 00
Palo Alto Medical Foundation		501 (c)(3)	2350 W El Camino Real	Mountain View	5	94040	Health	\$5,000.00
Palolo Chinese Home	- 1	01 (c)(3)	2459 10th Avenue	Honolulu	Ξ	┪	Human Services	\$127,832 06
Papa Ola Lokahi	. <b>_ I</b> .	501 (c)(3)	894 Queen St	Honolulu	=	T	Arts, Culture & Humanities	\$9,700 00
Papahana Kuaola		501 (c)(3)	P O Box 6484	Kaneohe	=	T	Food, Agriculture, Nutrition	\$32,862 00
Parasol Tanoe Community Foundation, Inc		01 (c)(3)		Incline Village	2 5	T	Community Development	\$63,457,00
Parents and Children Logether	99-0119678 5	01 (c)(3)	1485 Linapuni St., Ste. 105	Honolulu	Ē	96819	Education	\$140,902 40

Statement #3 Page 9 of 11

Hawaii Community Foundation EIN 99-0261283 Form 990 Schedule I, Part II For Grants 1/1/2013 to 12/31/2013

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Name of Organization	AE 4055110 EC	atus	Address	CIIZ	State	017 0404	Purpose or grant assistance	& 20 000 00
Partners in Development	_	501 (c)(3)	2040 Bachelot Street	Honolulu	Ę	1	Youth Development	\$21,000,00
Partners in Development Foundation	94-3271325 50		2040 Bachelot Street	Honolulu	Ī	T	Human Services	\$35,000 00
PATCH (People Attentive to Children)	_		560 North Nimitz Highway, Ste 218	Honolulu	Ŧ		Human Services	\$30,000 00
PATH Peoples Advocacy for Trails Hawaii			P O Box 62	Kailua-Kona	≢	96745	Public Policy & Advocacy	\$9,000 00
Physicians for Human Rights		501 (c)(3)	2 Arrow Street, Suite 301	Cambndge	┪	_	Human Services	\$5,000 00
Pilchuck Glass School		ĺ	430 Yale Ave North	Seattle	1	딠	Arts, Culture & Humanities	\$5,000 00
Planned Parenthood Federation of America, Inc	J		434 West 33rd Street	New York	≥	T	Health	\$10,000.00
Planned Parenthood of Hawaii	- 1	ĺ	1350 S King Street, Ste 309	Honolulu	=	Т	Health	\$8,750 00
PMAH Ohana Medical Missions Inc	- 1	501 (c)(3)	PO Box 1294	Pearl City	=	T	Health	\$5,000 00
Pohaha I Ka Lanı			P O Box 412	Kurtistown	=	┪	Youth Development	\$15,000 00
Pohai Nani Foundation	╗		45-090 Namoku Street	Kaneohe	₹	T	Human Services	\$11,045 18
Poipu Beach Foundation, Inc	┪		P O Box 730	Koloa	Ξ	┪	Environment	\$11,050 00
Polynesian Voyaging Society	┪		10 Sand Island Parkway	Honolulu	Ŧ	╗	Sustainability	\$10,000,00
Prevent Child Abuse Hawaii	- 1		PO Box 147	Honolulu	Ŧ		Human Services	\$10,000 00
Project Hawaii, Inc	٠l		PO Box 1844	Keaau	Ξ	╗	Recreation & Sports	\$5,000 00
Project Vision Hawaii			P O Box 23212	Honolulu	ੁ	T	Youth Development	\$22,240 00
Punahou School			1601 Punahou Street	Honolulu		96822	Education	\$1,020,058 87
Pure Light Racing			PO Box 25930	Honolulu	Ξ	6825-0930	96825-0930 Recreation & Sports	\$5,000 00
Read To Me International Foundation			126 Queen St , Surte 303	Honolulu	Ī		Education	\$10,000 00
Real Medicine, Inc	20-2897266 50		11700 National Blvd, Suite 234	Los Angeles	CA		Health	\$10,000 00
Rehabilitation Hospital of the Pacific Foundation	99-0241634 50		226 North Kuakını Street	Honolulu	Ŧ	96817	Health - Hospitals	\$20,807 43
Research Corporation of the University of Hawaii	т	encies	2800 Woodlawn Dr	Honolulu	₹	Г	Community Development	\$544,828 00
Research Corporation of the University of Hawaii at Hilo	99-6000354 Pt	-	200 W Kawili St	아H	Ξ		Medical Research	\$90,000 00
Re-use Hawaii	-	_	PO Box 161291	Honolulu	₹	96816	Sustainability	\$80,000 00
Roman Catholic Church in the State of Hawaii			1184 Bishop St	Honolulu	) H	58	Religion/Spiritual Development	\$11,543.75
Rotary Foundation of Rotary International	36-3245072 50		1560 Sherman Ave	Evanston	II.	60201	Human Services	\$7,000 00
Sacred Hearts Academy	99-0093012 50		3253 Waralae Avenue	Honolulu	H	96816	Education - Grades K-12	\$95,000 00
Safe Zone Foundation, Inc		501 (c)(3)	4224 Waialae Avenue, #248	Honolulu	Ξ	96816	Arts, Culture & Humanities	\$5,000 00
Saint George's School	- 1		P O Box 1910	Newport	2		Education	\$6,733 51
Saint Louis School			3142 Waiałae Ave	Honolulu		62	Education	\$17,000 00
Save the Redwoods League	- 1		114 Sansome Street, Room 1200	San Francisco	<u>ჯ</u>	╗	Environment	\$6,733 53
Scottish Rite Foundation of Hawaii	- 1		1611 Kewalo Street	Honolulu	되	╗	Health	\$20,000 00
Seagull Schools, Inc	99-0155163 50		1300 Kailua Rd	Kaılua	Ξ	96734	Human Services	\$75,000 00
Self-Help Housing Corporation of Hawaii	- 1		1427 Dillingham Blvd, Ste 305	Honolulu	Ξ	╗	Housing	\$5,000 00
Shriners Hospital for Children	- 1		1310 Punahou Street	Honolulu	Ξ	┪	Health	\$130,362 34
Sister Maureen Intergenerational Learning Environment	_ I	501 (c)(3)	2715 Pamoa Road, #103	Honolulu	Ξ	╛	Human Services	\$40,000 00
Smithsonian Asian Pacific American Center	53-0206027   50		600 Maryland Ave SW	Washington	<u>ဗ</u>	20004	Arts, Culture & Humanities	\$125,000 00
Society for Kona's Education & Art	00.0211785 50		D O Box 256	Honomoni	Ī	96726	Arts Culture & Humanities	\$5,000,00
Society For the Propagation of the Faith		501 (c)(3)	National Office	New York	ž	T	Religion/Spiritial Development	\$6 401 23
			366 Fifth Ave		:			
Special Education Center of Hawaii	99-0141008 50	501 (c)(3)	708 Palekaua St	Honolulu	H	96816-4755 Health	Health	\$80,000 00
Special Olympics Hawaii, Inc	23-7173957 50	501 (c)(3)	P O Box 3295	Honolulu	Ī	96801	Human Services	\$25,000 00
St Andrew's Priory School			224 Queen Emma Square	Honolulu	Ξ		Education	\$48,500 00
St Anthony Junior Senior High School			1618 Lower Main Street	Wailuku	Ī	П	Education	\$40,901 75
St Anthony School - Kailua			148 Makawao St	Kaılua	Ξ	96734	Education - Grades K-12	\$86,550 00
St Elizabeth Church	53-0196617 50		99-312 Moanalua Road Alea Hi 96701-3632	Aiea		96701-3632	Religion/Spiritual Development	\$7,500 00
St Fitzabeth's Foisconal Church	99-0092456 50	501 (c)(3)	720 N King St	Honolulu	Ī	96817	Youth Development	\$30,000,00
St Francis Healthcare Foundation of Hawaii			P.O. Box 30100	Honolulu	=	Г	Health	\$155,634 20
St John Vianney Education Foundation		Γ	940 Keolu Drive	Kaılua	T	142	Education	\$8,080 40
St of Hawaii DOF - Kalani High School	10	Sucies	4580 Kalanianaole Highway	Honolulu	T	96821	Youth Development	\$5,500 00
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0 Education - Higher Education
Education - Early Childhood
Religion/Spintual Development
Food, Agriculture, Nutrition
Arts, Culture & Humanities Purpose of grant assistance Education - Early Childhood 96817 Religion/Spiritual Development 96839-1338 Arts, Culture & Humanities Religion/Spintual Development Religion/Spintual Development Religion/Spiritual Development Arts, Culture & Humanities Education - Grades K-12 Arts - Performing Arts Medical Research Education Human Services Education Human Services Environment Human Services Human Services Human Services Health - Hospital Sustainability Environment Environment Environment Environment Environment Environment Education Education Education Environmen Education Education Education Education Education Education Education Zıp 96813 96738 96740 96813 96819 96706 96793 96740 96778 96822 96720 96796 96795 96815 96795 96814 98134 96733 96816 96712 94104 State ζ Ξ Ξ 되되되도 되모모 티티카카 [5]임토토토토 되되되도 Ŧ Ξ Ξ Ξ 코로 ]Ξ Ξ Ξ Ξ Ξ 포 Ξ Ξ ᇁ Ξ È San Francisco Wailuku Kailua-Kona Kamuela Kailua-Kona Kailua-Kona Washington Honolulu Honolulu Ewa Beach Kaunakakai Kaılua-Kona Waimanalo Waimanalo Makawao Waikoloa Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Honolulu Kamuela Warmea Honolulu Honolulu Honolulu Honolulu Honolul Stanford Honolulu Honolulu Halerwa Seattle Kahulu Koloa 울 82Public Agencies1302 Queen Emma Street82Public Agencies1803 Kam IV Rd82Public Agenciesc/o Keoneula Elementary School82Public Agenciesc/o Keoneula Elementary School82Public Agencies260 S Market Street82Public Agencies74-5062 Onipa'a St82Public Agencies15-3038 Puna Rd82Public Agencies1202 Prospect Street82Public Agencies200 W Puainako St82Public Agencies3555 Huakat Road82Public Agencies41-1330 Kalanianaole Highway Address
Executive Chambers, State Capitol
415 S Beretania St 815 Seattle Boulevard South #216 Box 338 101 Montgomery Street, Suite 900 500 Ala Moana Blvd , Suite 3-400 2550 Pali Highway 41-202 Kalanianaole Hwy 1314 South King Street, Ste 306 3989 Diamond Head Road
1099 Waiannenue Ave
326 Galvez Street
1575 Eye St, NW, Suite 500
229 Queen Emma Square
40 Holomua St
P O Box 2259
P O Box 101
PO Box 101
PO Box 437462 949 Kapiolani Blvd , Ste 100 1301 Punchbowl Street P O Box 620 74-5000 Puohulihuli P O Box 820 55 Merchant St, St P O Box 6010 1117 Kall Street 3409 Sierra Drive P O Box 250 68-1730 Ho'oko St 402 Kapahulu Ave 923 Nu'uanu Ave P O Box 1302 P O Box 1179 P O Box 613; P O Box 90 Public Agencies Public Agencies Public Agencies 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3) 501 (c)(3 501 (c)(3) 501 (c)(3) 501 (c)(3 99-0266482 F 99-0266482 F 99-0266482 F 99-0266482 F 68-0327175 5 99-0278397 5 23-7222333 5 99-0266482 99-0266482 99-0266482 99-0266482 99-0266482 99-0266482 94-1156365 1 52-1254948 1 99-0073522 2 26-0349475 1 99-0115665 1 74-3042528 1 99-0348023 1 99-0354676 1 99-0234062 99-0109350 95-3941826 99-0073528 45-2596726 27-3261673 99-0260930 99-0089327 99-0109668 99-0109952 99-0085044 27-4375797 EIN 99-0275730 13-3541913 99-6001135 99-0266482 99-6003670 State of HI-DOE, lao Intermediate School
State of HI-DOE, Kealakehe Intermediate School
State of HI-DOE, Pahoa High and Intermediate School
State of HI-DOE, Robert Louis Stevenson Middle School
State of HI-DOE, Waiakea Intermediate School
State of HI-DOE, Waimea Canyon Middle School
State of HI-DOE, Waimea Canyon Middle School
State of HI-DOE, Waimea Canyon Aidele School Tibet House, Inc Tibetan Nuns Project Tn-Isle Resource Conservation and Development Council Trust for Public Land State of HI-Library for the Blind & Physically Handicapped The Board of Trustees of the Leiand Stanford Junior Univ The Center for the Study of Social Policy The Episcopal Church in Hawaii The Pearson Foundation of Hawaii, Inc The People's Fund The Queen's Medical Center The Salvation Army-Hawaiian & Pacific Islands Division Three Ring Ranch Inc State of Hawaii, DOE - Waikoloa Elementary & Middle The Food Basket Inc
The Friends of Iolani Palace
The Friends of the D T Fleming Arboretum
The Hawaiian Legacy Foundation
The Kohala Center, Inc
The Koloa Early School
The Nature Conservancy of Hawaii
The Nature Conservancy of Hawaii
The North Shore Community Land Trust State of HI - DOE, Kealakehe High School State of HI-DOE, Central Middle School State of HI-DOE, Dole Middle School State of HI-DOE, Ewa Makai Middle School Name of Organization State of Hawaii - Office of the Governor Susannah Wesley Community Center Sustainable Coastlines Hawaii Sustainable Molokai Teach For America Temple Emanu-el Tendai Educational Foundation, Inc The Arc in Hawaii Storybook Theatre of Hawaii The Oceanic Institute
The Outdoor Circle Surfrider Foundation Straub Foundation he Arc of Hilo The Pantry

Hawaii Community Foundation EIN 99-0261283

For Grants 1/1/2013 to 12/31/2013

Form 990 Schedule I, Part II

Hawaii Community Foundation EIN 99-0261283 Form 990 Schedule I, Part II For Grants 1/1/2013 to 12/31/2013

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Name of Organization		INS STATUS	SSAIDDY	)	┪		ר עו שטיים שו שו שיים שו היים	יווסמווג
United Service Organization, Inc	13-1610451	501 (c)(3)	PO Box 96860	Washington		20077-7677	Human Services	\$47,060 80
United States Veterans Initiative	95-4382752	501 (c)(3)		poomalbul	CA	90301	Human Services	\$32,060 00
University of Hawaii - Hilo	99-6000354	Public Agencies	Financial Aid Office, 200 W Kawili St	Hilo	Ī	96720-4091	Hawaiian Culture, Language, and/or History	\$25,000 00
University of Hawaii - Office of Research Services	99-6000354	Public Agencies	2440 Campus Rd . Box 368	Honolulu	Ξ	36822-2234	96822-2234 Medical Research	\$1,107,481 70
University of Hawaii Foundation	99-0085260	501 (c)(3)	PO Box 11270	Honolulu	Г	96822	Environment	\$644,426.11
Upaya Zen Center, Inc	85-0402649	501 (c)(3)	1404 Cerro Gordo Road	Santa Fe	Σ	87501	Health - Disease Prevention,	\$10,000 00
US Japan Council	90-0447211	501 (c)(3)	18191 St NW Ste 200	Washington	2	20036	Education	\$55,000,00
Variety School of Hawaii	99-0105604	501 (c)(3)	710 Palekaua Street	Honolulu	₹	96819	Education - Grades K-12	\$54,043 72
Volcano Art Center	99-0162321	_	P O Box 129	Volcano	Ī	96785	Environment	\$25,000 00
Waianae Community Re-Development Corporation	99-0350803	501 (c)(3)	P O Box 441	Wai'anae	Ξ	96792	Food, Agnculture, Nutrition	\$7,500 00
Waianae District Comprehensive Health & Hospital Board. Inc	99-0148164	<del></del>	gton Hwy	Waianae	Ξ	96792	Health	\$75,829 64
Waianae Hawaiian Civic Club	91-2108389	501 (c)(3)	P O Box 687	Waianae	Ī	96792	Hawaiian Culture, Language, and/or History	\$20,000 00
Waikiki Community Center	99-0179392	501 (c)(3)	310 Paoakalanı Avenue	Honolulu	Ŧ	96815	Health - Community Health Centers	\$5,000 00
Waikiki Health	99-0159253	501 (c)(3)	277 Ohua Avenue	Honolulu	₹	96815	Health	\$158,282 38
Walkiki Improvement Association	99-0118423	501 (c)(3)	2250 Kalakaua Avenue, Suite 315	Honolulu	Ī	96815	Hawaiian Culture, Language, and/or History	\$100,000 00
Warkoloa Dry Forest Initiative	45-2689264		68-3720 Lua Hoana Pi	Waikoloa	₹	96738	Environment	\$30,000 00
Waimanalo Health Center	99-0273205	4.	41-1347 Kalanianaole Highway	Waimanalo	Ξ	96795	Health	\$40,000 00
Waimea Hawaiian Homesteaders' Association, Inc	99-0317807		P O Box 126	Kamuela	н	96743	Community Development	\$20,000 00
Waimea Middle Public Conversion Charter School	99-0266482	Public Agencies	67-1229 Mamalahoa Highway	Kamuela	Ξ	96743	Education	\$142,218 20
Waimea Preservation Association	99-0301077	501 (c)(3)		Kamuela	н	96743	Arts, Culture & Humanities	\$12,960 00
Watoli Corporation	99-0079200	501 (c)(3)	P O Box 1631	Lihue	Ħ	96766	Education	\$10,000 00
Waipa Foundation	99-0313224	501 (c)(3)	P O Box 1189	Hanaleı	Ī	96714	Community Development	\$32,500 00
WCIT Foundation	26-1562635	501 (c)(3)	725 Kapıolanı Blvd, Suite 400	Honolulu	Ī	96813	Hawaiian Culture, Language, and/or History	\$15,000 00
West Hawaii Community Health Center	20-0495394	501 (c)(3)	75-5751 Kuakını Highway, Suite 203	Kaılua-Kona	王	96740	Health - Community Health Centers	\$111,000 00
West Hawaii Explorations Academy Public Charter School	99-0346450	Public Agencies	73-4460 Queen Kaahumanu Hwy , #105	Kailua Kona	Ī	96740	Youth Development	\$15,000 00
Wilderness Society	53-0167933	501 (c)(3)	1615 M Street NW 2nd Floor	Washington	ည	20036	Environment	\$8,101.76
YMCA of Honolulu, Metropolitan Office	99-0073533	501 (c)(3)	1441 Palı Hwy	Honolulu	Ξ	96813	Community Development	\$37,058 07
YWCA of Hawaii Island	99-0079762		treet	Hib	Ŧ	96720	Human Services	\$25,000 00
YWCA of Kauai	99-0073504	_	3094 Elua St	Lihue	Ξ	99296	Human Services	\$50,794 68
YWCA of Oahu	99-0073534	-	1040 Richards Street	Honolulu	Ξ	96813	Human Services	\$5,260 77
Zonta Club of Kauai	42-1649554	[501 (c)(3)	PO Box 3032	Lihue	₹	99296	Development	\$20,000 00
							+	\$24,744,465.50
	Total Other	<b>.</b>				_	LESS TIMING DIFFERENCES Final Total	-152,232 50 24,592,233 00

**Total Other** 

499

Total 501 (c)(3) or Public Agency

(Rev. January 2014)

Department of the Treasury

# Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868,

OMB No 1545-1709

Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Employer identification number (EIN) or Type or Name of exempt organization or other filer, see instructions. print HAWAII COMMUNITY FOUNDATION 99-0261283 Number, street, and room or suite no. If a P.O. box, see instructions Social security number (SSN) File by the due date for 827 FORT STREET MALL filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See HI 96813-2817 HONOLULU instructions 01 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return is For Code Is For Code Form 990 or Form 990-EZ Form 990-T (corporation) 01 07 Form 990-BL 02 Form 1041-A 80 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 8870 12 Form 990-T (trust other than above) 06 WALLACE CHIN 827 FORT STREET MALL The books are in the care of >HONOLULU HI 96813 Telephone No. ▶ 808-537-6333 FAX No. ▶ 808-521-6286 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is ▶ ☐. If it is for part of the group, check this box for the whole group, check this box and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15/14, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2013 or , and ending tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

	rev. 1-2014)			<del></del>		Page <b>2</b>
•	filing for an Additional (Not Automatic) 3-Month E		· ·			► X
	omplete Part II if you have already been granted an a			filed Form 8868	}	
Part II	filing for an Automatic 3-Month Extension, complemental Additional (Not Automatic) 3-Month E			inal (no coni	os poodod)	
Faitii	Additional (Not Adtomatic) 3-Nonth	xtension				
	Name of exampt organization or other files and in	ota iotiona				, see instructions
Type or print	Name of exempt organization or other filer, see in	istructions.		Employer identif	ication numbe	r (EIN) or
<b>F</b>	HAWAII COMMUNITY FOUNDAT	'ION		99-02612	83	
File by the	Number, street, and room or suite no If a P O bo			Social security r		
due date for filing your	827 FORT STREET MALL			•	,,	
return See	City, town or post office, state, and ZIP code For	a foreign add	dress, see instructions.			
instructions	HONOLULU H:	I 96813	3-2817			
Enter the Reti	um code for the return that this application is for (file	a separate a	application for each return)			01
		<del></del> -	<del>г</del>			···
Application	1	Return	Application			Return
Is For		Code	Is For			Code
	r Form 990-EZ	01				
Form 990-B		02	Form 1041-A			08
Form 4720		03	Form 4720 (other than indivi	dual)	<del></del>	09
Form 990-P		04	Form 5227 Form 6069			10
	(trust other than above)	06	Form 8870	<del> </del>	<del></del>	11
						1 12
STOP! Do no	t complete Part II if you were not already granted	d an automa	tic 3-month extension on a p	eviously filed f	Form 8868.	
	827 FORT STREET MALI are in the care of ► HONOLULU e No ► 808-537-6333	FAX No.	<b>▶</b> 808-521-6286		HI	96813
-	anization does not have an office or place of busines			•		▶□
•	or a Group Return, enter the organization's four digit		•	If this is		
		•	ip, check this box	and attach	a	
· ·	ames and EINs of all members the extension is for.	J	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		_	
		**				
4 I reques	st an additional 3-month extension of time until $$ 1.1	./17/14	•			
5 For cale	endar year 2013, or other tax year beginnin	g	, and ending			
6 If the ta	x year entered in line 5 is for less than 12 months, c	heck reason:	Initial return Fina	al return		
	ange in accounting period					
	detail why you need the extension	T =				
	ADDITIONAL TIME FOR COME			T AND PE	(EPAKAT)	LON OF
RETU	JRN TO CONFORM WITH THE AU	DITED	STATEMENTS			
8a If this a	pplication is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, ent	er the tentative tay loss any	<del></del> -		
•	ndable credits. See instructions.	Or 0000, ent	er the ternative tax, less any	8	a \$	0
	pplication is for Form 990-PF, 990-T, 4720, or 6069,	enter any re	fundable credits and			
	ed tax payments made. Include any prior year overp	<del>-</del>				
	paid previously with Form 8868			81	s s	0
	e due. Subtract line 8b from line 8a. Include your pa	yment with the	nis form, if required, by using E			<del></del>
(Electro	nic Federal Tax Payment System). See instructions	· ·		8	s <b>\$</b>	0
	Signature and Verifi	cation mu	st be completed for Pa	rt II only.	-	<del></del>
	_		·	-		
	es of perjury, I declare that I have examined this form d belief, it is true, correct, and complete, and that I a			statements, and	to the best of i	my
anomicage an		GGG10112C				
Signature	-James B. Wood		itle <b>CPA</b>			<b>▶</b> 08/12/14
	( )				For	m <b>8868</b> (Rev 1-2014