

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



Form 990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2013

Open to Public Inspection

For c	alendar year 2013 or tax year beginning		, and ending		
Nam	ne of foundation			A Employer identification	number
	EORGE N. WILCOX GENERAL T			99-6002445	
	ber and street (or P.O. box number if mail is not delivered to street a	address)	Room/suite	B Telephone number	
_P	. O. BOX 3170, DEPT. 715	···		(808)694-4	525
_	or town, state or province, country, and ZIP or foreign poon ONOLULU, HI 96802-3170	ostal code		C If exemption application is po	ending, check here
	heck all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	chack hare
ų o	Final return	Amended return	into public charty	1. Toroign organizations	, cricck field
	Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
H C	Check type of organization: X Section 501(c)(3) ex]	
ٿ"	_	Other taxable private founda	ation	E If private foundation star under section 507(b)(1)	
_ <u>↓</u>	ur market value of all assets at end of year J Accounting		Accrual	1	• •
•	, I —	her (specify)	Aoorda	F If the foundation is in a (under section 507(b)(1)	
\\ >			basis.)	under Section 307(b)(1)	(b), check here
	art Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received		**	N/A	
	2 Check X if the foundation is not required to attach Sch. 8		4 1		- 7,
	3 Interest on savings and temporary cash investments	220.	220		STATEMENT 1
	4 Dividends and interest from securities	437,533.	437,533		STATEMENT 2
	5a Gross rents				*~
	Net rental income or (loss)			St. 1 2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠, ٠
Ð	68 Net gain or (loss) from sale of assets not on line 10	777,659.		1 2 3 3 3 5 7 6	
Revenue	b Gross sales price for all 8,520,960.	7, 1		1, 7, 4, 5, 4, 4	., .
eve	7 Capital gain net income (from Part IV, line 2)	<u>, , , , , , , , , , , , , , , , , , , </u>	777,659	, , ,	
—	8 Net short-term capital gain	<u> </u>			*,* *
	9 Income modifications	· '.' . '			. ~
	Gross sales less returns and allowances			1 1 5	1 12 14
4	b Less Cost of goods sold	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
2014	c Gross profit or (loss)		,, , , , , , , , , , , , , , , , , , , ,	<u></u>	,
o o	11 Other income	4 44 4 44		 	ļ
<u> </u>	12 Total. Add lines 1 through 11	1,215,412.	1,215,412		12 12
۵.	13 Compensation of officers, directors, trustees, etc	24,243.	12,121	·	12,122.
SEP	14 Other employee salaries and wages				
ة ت	15 Pension plans, employee benefits	5 410	0.506	<u> </u>	2.504
E E	16a Legal fees STMT 3	5,412.	2,706		2,706
₹ §	b Accounting tees CEIVEDSTMT 4	2,000.	600	<u> </u>	1,400.
A	c Other professional fees			 	
SCANNE Administrative Expens	c Other professional fees 17 Interest 18 Taxes SEP 0 9 2014 STMT 5 19 Depreciation and depletion	8,744.	0		
St.	18 Tayes SEP U 3 2017 STMT 5	0,/44.	<u> </u>	•	0.
Ē	19 Depreciation and depletion Company Of The LIT				
퉏	20 Occupancy GDEN, UT	2,109.	0	 	2 100
and /	21 Travel, conferences, and meetings 22 Printing and publications	4,109.	<u> </u>		2,109.
ซี ฉ	22 Printing and publications 23 Other expenses STMT 6	53,775.	0		53,775
ţ	24 Total operating and administrative		<u> </u>	·	33,773
Operating	24 Total operating and administrative expenses. Add lines 13 through 23	96,283.	15,427		72 112
Ö	25 Contributions, gifts, grants paid	1,207,625.	13,441	<u>'</u>	72,112.
	26 Total expenses and disbursements.	1,401,043.		 	1,207,625
	Add lines 24 and 25	1,303,908.	15,427		1,279,737
	27 Subtract line 26 from line 12:	1,303,300.	13,441		1,417,131
		-88,496.			
	Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	00,490.	1,199,985		
	C Adjusted net income (if negative, enter -0-)			N/A	
	, - rialegade not mount (in mogento, oiner o /		<u> </u>	+1/ 53	

Forn	n 990	O-PF (2013) GEORGE N. WILCOX GENERA		99-	6002445	Page 2
D	art l	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year	
	11 (column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market	Value
	1	Cash - non-interest-bearing	49,936.			
	2	Savings and temporary cash investments	618,725.	667,826.	. 667	,826.
-	3	Accounts receivable ▶	the second of the	9 		- : . j
		Less: allowance for doubtful accounts				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
j	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other		<u> </u>		
		disqualified persons				
	7	Other notes and loans receivable			7 7 25	
		Less: allowance for doubtful accounts ▶				
g	8	Inventories for sale or use		·		
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments - U.S. and state government obligations				
	l	Investments - corporate stock				
		Investments - corporate bonds				
		investments - land buildings, and equipment basis	**************************************	Callera Landa Se		, T.
		Less accumulated depreciation		l to the same and		
	12	Investments - mortgage loans				
	13	Investments - other STMT 7	18,275,282.	18,191,075	20,906	.901.
	14		4 4	10111111111111	,	
	` `	Less accumulated depreciation				
	15	Other assets (describe ►				
		Total assets (to be completed by all filers - see the		†	 	
		instructions. Also, see page 1, item 1)	18.943.943.	18,872,762	21.588	.588.
_	17		10,310,310		22/300	, , , , , , , , , , , , , , , , , , ,
	18	Grants payable		 		
ra.	19	Deferred revenue				1 - 1
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			다	(
<u> </u>	21	Mortgages and other notes payable			-	ars - Erif
<u></u>	22				-	ji
	**	Other habilities (describe)			-1 -1 " '	
	23	Total liabilities (add lines 17 through 22)	0.	. 0		- 4
_	23	Foundations that follow SFAS 117, check here	<u> </u>	· · · · · · · · · · · · · · · · · · ·	-	ن ن
		and complete lines 24 through 26 and lines 30 and 31.				;
es	24	Unrestricted				- [
Š	25	Temporarily restricted			- , ; ; ,	, ,
3ale	26				-	' !
Net Assets or Fund Balances	20	Foundations that do not follow SFAS 117, check here			┥ ः	, ni
Ē		and complete lines 27 through 31.				
ŏ	27		18,943,943	18,872,762		-1
ets	28		0,			
ASS	29		0	-	-	, ,
et/	30		18,943,943	- 1	<u></u> 1	
Ž	30	Total net assets of fully balances	10,943,943	10,012,102	4	•
	, ,	T-A-1 12-1-1142	18,943,943	18,872,762		
=	31			10,012,102	•1	·
F	ar	Analysis of Changes in Net Assets or Fund I	Balances			
_	T-4	all and proceeds are found belonging of the processing of the second Port II. column (a) line	- 20	· · · · · · · · · · · · · · · · · · ·		
1		al net assets or fund balances at beginning of year - Part II, column (a), lin	g 90		10 043	0.42
_	•	ust agree with end-of-year figure reported on prior year's return)			18,943	
		er amount from Part I, line 27a	222000			3,496.
3		er increases not included in line 2 (itemize) RETURNED GI	CTMAX			7,315.
4		d lines 1, 2, and 3			18,872	
5		creases not included in line 2 (itemize)			10 073	0.
<u>6</u>	Tol	al net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30		18,872	
					Form 990.	-₽₽ (2013

12220011 701510 005400

		N. WILCOX GEI						<u>99-600</u>	2445	Page 3
		nd(s) of property sold (e.g., or common stock, 200 shs.		· ···	(b) F	low acquired - Purchase - Donation	(c) Da (mo.	te acquired , day, yr.)	(d) Date (mo., da	
1a PUBLICLY TRADE	D SEC	CURITIES				P	VAR	IOUS	VARIO	ous
b PUBLICLY TRADE	D SEC	CURITIES				P		IOUS	VARIO	
c CLASS ACTION L	ITIG	ATION PROCEE	DS			P				
d CAPITAL GAINS	DIVII	DENDS			<u> </u>					
<u>e</u>					<u> </u>					
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss lus (f) minus		-
a 847,949.				821,25	0.		-		26	,699.
b 7,534,264.				6,921,95	1.					,313.
<u>c</u> 978.				10	0.					878.
d 137,769.									137	,769.
<u>e</u>	<u> </u>			-						
Complete only for assets shown	ng gain in	column (h) and owned by t	the foundation	on 12/31/69				(Col. (h) gair		
(i) F.M.V. as of 12/31/69	((j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any		C	ol. (k), b Loss	ut not less that es (from col.	an -0-) or (h))	
a									26	,699.
b										,313.
C										878.
d							_		137	,769.
ее			_							
2 Capital gain net income or (net c	apıtal loss	If gain, also enter If (loss), enter -0-			}	2			777	,659.
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8.	•	ined in sections 1222(5) an			٦					
If (loss), enter -0- in Part I, line 8	,	•			ľ	3		N/A	A	
Part V Qualification L	Jnder S	Section 4940(e) for	Reduced	Tax on Net	t Inv	estment Ir	ncome)		
(For optional use by domestic privat	e foundati	ons subject to the section 4	4940(a) tax or	net investment ii	ncome	3.)				
If control 4040(d)(2) control legge	hio and hi	la al c								
If section 4940(d)(2) applies, leave	inis part bi	ank.								
Was the foundation liable for the sec	tion 4942	tax on the distributable am	nount of any y	ear in the base pe	riod?				Yes	X No
If "Yes," the foundation does not qua										
1 Enter the appropriate amount in	each colu	mn for each year; see the ir	nstructions be	fore making any e	entries	3.				
(a) Base period years Calendar year (or tax year beginn	ing in)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncha	ritable-use asse	ets		(d) ibution ratio ivided by col.	(c))
2012		1,14	9,889.		20	,082,43	8.		.0	57258
2011		1,01	3,106.			,493,90				49435
2010		92	9,816.			,938,12				46635
2009		1,00	9,241.		18	,373,03	9.			54931
2008		1,12	8,533.		21	,035,97	11.		.0	53648
2 Total of line 1, column (d)							2	:	. 2	61907
3 Average distribution ratio for the the foundation has been in exist			on line 2 by 5,	or by the number	r of ye	ears	3			52381
4 Enter the net value of noncharita		·	luna E							
	DIG-USE 45	isets for 2013 from Part A,	illie 5				-4	-	21,004	
5 Multiply line 4 by line 3							5	-	1,100	<u>,251.</u>
6 Enter 1% of net investment inco	me (1% of	f Part I, line 27b)					6	 	12	,000.
7 Add lines 5 and 6							7		1,112	,251.
8 Enter qualifying distributions fro	m Part XII	, line 4					8		1,279	<u>,737.</u>
If line 8 is equal to or greater tha	n line 7, cl	heck the box in Part VI, line	tb, and com	plete that part usii	ng a 1	% tax rate.	. –			
See the Part VI instructions.										
323521 10-10-13									Form 990-	PF (2013)

	990-PF (2013) GEORGE N. WILCOX GENERAL TRUST					<u>6002</u>		F	Page 4
Pa	t VI Excise Tax Based on Investment Income (Section 4940)(a), 4	1940(b), 4940(e),	or 49) 48 -	see ir	ıstru	ction	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and en	ter "N/	A" on line 1.				,	¥ .	7- !
	Date of ruling or determination letter: (attach copy of letter if nece		 			٠,٠٠٠ نو.	ž - '	`	· · ·
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here			- 1	1		_ 1	2,0	οõ.
	of Part I, line 27b			ľ	.	17	· -	-,, -	
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Pari	t Lline 12 col (h)		- /	, f , ' , '	Ť.		
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other			ŀ	9	~ · · · · · · · · · · · · · · · · · · ·		145	0.
	Add lines 1 and 2	1013 01	itor o j	}	3			2,0	
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	hara a	ntor ()	ŀ				4,0	00.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	11612 61	11(61 -0-)		4		1	2,0	
	Credits/Payments:			- }	5			4,0	00.
	2013 estimated tax payments and 2012 overpayment credited to 2013	٠.	9,3	20	, j.	- 1			
		6a	3,3	20.	. 7.				
	Exempt foreign organizations - tax withheld at source	6b	0.0	~	- Ş.Ş.			7.	
	Tax paid with application for extension of time to file (Form 8868)	6c	8,8	00.		1	, , ,	Taring W	************************
	Backup withholding erroneously withheld	<u>6d</u>	<u> </u>			وز فرآ سال ما		<u>,</u>	·
	Total credits and payments. Add lines 6a through 6d				_7_		1	8,1	<u> 20.</u>
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attack.	ched		.	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				10			6,1	
	Enter the amount of line 10 to be: Credited to 2014 estimated tax		6,120. Refunde	d ▶	_11_				<u>0.</u>
	rt VII-A Statements Regarding Activities							· · · · · · · · · · · · · · · · · · ·	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation c	or did it participate or inte	ervene	ın	1	<u> </u>	Yes	No
	any political campaign?					İ	_1a	L	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (se	e instructions for the def	inition)	?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copi	es of any matenals pu	blishe	d or		ĺ	w ; ; ;	1
	distributed by the foundation in connection with the activities.						;	, i	, , , , , , , , , , , , , , , , , , ,
C	Did the foundation file Form 1120-POL for this year?						_ 1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	year:						1 \ 2 \	36%
	(1) On the foundation. > \$ (2) On foundation managers.	.▶\$		0.			1	100	1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendi	ture ta:	k imposed on foundation	1					1 3 3
	managers. > \$0.						2000	180	13.5
2	Has the foundation engaged in any activities that have not previously been reported to the IF	RS?					2		X
	If "Yes," attach a detailed description of the activities.							1 10	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrum	ent, articles of incorpora	ition, o	r		İ	, 3° 4.	1, 1
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es					3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	r?				i	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?				N	/A	4b		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?					•	5		X
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther:					÷ '	3. 1	
	By language in the governing instrument, or							r ,	2
	By state legislation that effectively amends the governing instrument so that no mandator	v direc	tions that conflict with th	e state	law		Í	^ #	
	remain in the governing instrument?	,	none that commet wan th	o state	1411		6	x	'
7		nnlete	Part II col (c) and D	ort Y1/			7	X	
•	the tree content in the action of the content and the content	ipiete	rait ii, coi. (c), and r	ait v			' -	A	┝
Q.	Enter the states to which the foundation reports or with which it is registered (see instructio	nc\ -						1.5	ا
U	HI	113/	 				, ·		,
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Horne	Consol (or desired)				, ·	,	, '
		worney	deneral (or designate)						•
_	of each state as required by General Instruction G? If "No," attach explanation	·	0.40(.)(0)				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of se			or cale	ndar		ĺ		
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," c						9_	Ļ	X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ile listino	their names and addresses				10	<u></u>	X
						Forr	n 99 0)-PF	(2013)

t r

		02445	F	age 5
Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		ĺ	
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12]	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► BANK OF HAWAII Telephone no. ►808			
	· · · · · · · · · · · · · · · · · · ·	<u> 96813</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,	1	Yes	No
	securities, or other financial account in a foreign country?	16	L	<u>X</u>
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
P۶	country Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
<u> </u>	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1:	During the year did the foundation (either directly or indirectly):	, , , , , , , , , , , , , , , , , , ,		,i 3
•	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No -, '	-	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		· .	1 3
	a disqualified person?	No .		1 3
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No		7.1
		No ,	, î.,	- *
	(5) Transfer any income or assets to a disqualified person (or make any of either available	,	, -	1 13
	for the benefit or use of a disqualified person)?	No .	10, 10	ļ. \j
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	, ,	7.3 %	` 4 '
	if the foundation agreed to make a grant to or to employ the official for a period after	((°).	
	termination of government service, if terminating within 90 days.)	No		
I	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	-	F	7, 2
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	<u>1b</u>	ļ	X
	Organizations relying on a current notice regarding disaster assistance check here	-	1.23	
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		1	<u></u>
_	before the first day of the tax year beginning in 2013?	1c	 	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		7.5	
	defined in section 4942(j)(3) or 4942(j)(5)):		` `	
	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013?	N	<u> </u>	1 13
	before 2013? If "Yes," list the years ▶ , ,	NO .		()
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		,	, ,
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	`	()	- '
	statement - see instructions.)	A 2b	1"	
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	11 20	<u> </u>	
				- ' ',
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	٠.		/ "
	during the year?	No .	·	: `
	b If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after		1-	'
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,		1.	
	Form 4720, to determine if the foundation had excess business holdings in 2013.)	А 36	<u></u>	
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
_	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		X
		Form 99	10-PF	(2013)

10-10-13

orm 990-PF (2013) GEORGE N. WILCOX GENERAL			99-6002 4 4	15 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	equired (continu	ied)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	☐ Ye	B X No	
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	ctly,		
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	•	☐ Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational ournoses, or fo			
the prevention of cruelty to children or animals?	or observational parpooper or in		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the excentions described ii			
section 53.4945 or in a current notice regarding disaster assistance (see instrui	•	Tricgulations	N/A	ib
Organizations relying on a current notice regarding disaster assistance check his	·			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		nod		1/. 1 - 1
• • • • • • • • • • • • • • • • • • • •			. — wa ·	- 1 /2
expenditure responsibility for the grant?		/A Ye	8 No	
If "Yes," attach the statement required by Regulations section 53.4945			1	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on	<u> </u>	- Teel	
a personal benefit contract?		Ye	s X No	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		<u> </u>	6b X
If "Yes" to 6b, file Form 8870.			[]	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No	
b If 'Yes,' did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trustone Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<i>1</i>	
				
1 List all officers, directors, trustees, foundation managers and their		(c) Compensation	(d) Contributions to	(-) [vnanaa
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	`enter'-0-)	compensation	allowances
	TRUSTEE			
130 MERCHANT STREET			_	_
HONOLULU, HI 96813	1.00	24,243.	0.	0.
				<u> </u>
		İ		
		ļ		
		ļ		i
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allowances
NONE				
				ļ
			<u> </u>	
	1			
		 		
	1			
				
# 1 1 mm b 1 1 b 1 mm c	L	L		<u> </u>
Total number of other employees paid over \$50,000		 		0
			Form	990-PF (2013)

10-10-13

12220011 701510 005400

Form 990-PF (2013) GEORGE N. WILCOX GENERAL TRUST	99-6	002445 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the ced, etc.	Expenses
1N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1N/A		
2		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3		

Form **990-PF** (2013)

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2013)

1,279,737.

1,267,737.

12,000.

3a

3b

4

6

a Suitability test (prior IRS approval required)

income. Enter 1% of Part I, line 27b

b Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,	Outpus	rears prior to 2012	2012	2013
line 7				1,055,554.
2 Undistributed income, if any, as of the end of 2013			7.2	1,000,004.
a Enter amount for 2012 only			465,659.	
b Total for prior years:	, + Ž+ .		203,033.	
		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008				<i>* * * * * * * * * *</i>
b From 2009		,		
c From 2010	, , , , , , , , , , , , , , , , , , ,			
d From 2011				
e From 2012	- 1	State of the second		
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from		1		
Part XII, line 4: ►\$ 1,279,737.				الاست مير آخر الاست. الاست مير الاست.
a Applied to 2012, but not more than line 2a			465,659.	
b Applied to undistributed income of prior			()	· ' . ',
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	- 11-1	· · ·	
d Applied to 2013 distributable amount			ı	814,078.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount	0.		n ,	0.
must be shown in column (a).)				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			7.
b Prior years' undistributed income. Subtract		_		,
line 4b from line 2b	, , , , , , , , , , , , , , , , , , ,	0.		1 ()
c Enter the amount of prior years' undistributed income for which a notice of				<i>"</i>
deficiency has been issued, or on which				4 43 y 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
the section 4942(a) tax has been previously				
assessed d Subtract line 6c from line 6b. Taxable	~	0.	. ,	, ,
amount - see instructions	* * *			,
	· · · · · · · · · · · · · · · · · · ·	0.	-	, - , , ,
e Undistributed income for 2012. Subtract line 4a from line 2a. Taxable amount - see instr.			0	
f Undistributed income for 2013. Subtract	· · · · · · · · · · · · · · · · · · ·		0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2014		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		241,476.
7 Amounts treated as distributions out of		1 ,		241,4/0.
corpus to satisfy requirements imposed by			·	,
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008	<u>v.</u>	,	-	`
not applied on line 5 or line 7	0.		` · · · · · · · · · · · · · · · · · · ·	•
9 Excess distributions carryover to 2014.	<u>v.</u>			<u> </u>
Subtract lines 7 and 8 from line 6a	0.		,	
10 Analysis of line 9:	,			
a Excess from 2009	-			_
b Excess from 2010				,
c Excess from 2011	1			
d Excess from 2012]			
e Excess from 2013	1			***

12220011 701610 006400

	N. WILCOX G			99-60	02445 Page 10
Part XIV Private Operating F	oundations (see ins	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2013, enter the date of t	the ruling	▶ L		
b Check box to indicate whether the foun	dation is a private operatir	ng foundation described i	n section	4942(j)(3) or 49	142(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed				,	
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed	1]			
d Amounts included in line 2c not			·	 	
used directly for active conduct of			ļ		
exempt activities					
e Qualifying distributions made directly		<u> </u>		 	
for active conduct of exempt activities.	1				•
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the			 		<u> </u>
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
• • • • • • • • • • • • • • • • • • • •			}		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Inf	ormation (Comple	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during	the year-see inst	tructions.)			
1 Information Regarding Foundat	ion Managers:				
a List any managers of the foundation v	vho have contributed more	than 2% of the total con	tributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed	l more than \$5,000). (See	section 507(d)(2).)	•		•
NONE					
b List any managers of the foundation v	vho own 10% or more of t	he stock of a corporation	(or an equally large port	ion of the ownership of a	partnership or
other entity) of which the foundation i	nas a 10% or greater intere	est.			
NONE					
2 Information Regarding Contribu	ution, Grant, Gift, Loar	n, Scholarship, etc., F	rograms:		<u> </u>
Check here 🕨 🔲 if the foundation			-	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, et					
a The name, address, and telephone nu	mber or e-mail address of	the person to whom app	lications should be addre	essed:	
SEE STATEMENT GUIDE	-1				
b The form in which applications should SEE STATEMENT - A	d be submitted and inform	ation and materials they	should include:		
c Any submission deadlines:					
SEE STATEMENT - A					
d Any restrictions or limitations on awa	rds, such as by geographi	cal areas, charitable fields	s, kinds of institutions, or	other factors:	
SEE STATEMENT - A					
					

12220011 701510 005400

Part XV Supplementary Information	ILCOX GENERAL TRU On (continued)		99-6002	445 Page 11
3 Grants and Contributions Paid During the	Year or Approved for Future P	ayment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
SEE STATEMENT - GRANT -1				
				1,207,625,
				
Table		<u> </u>		
b Approved for future payment			▶ 3a	1,207,625
a Approved for fature payment				
NONE				
110112				
				······································
		, , , , , , , , , , , , , , , , , , ,		
Total		<u> </u>	> 3b	0

Part XVI-A	Analys	is of Inco	me-Produci	ng Activities

nter gross amounts unless otherwise indicated.	Unrelated			by section 512, 513, or 514	(e)
	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
•			- -		
a	-				
b					
<u> </u>	-				
d	_		+-+		
e	_ 				
f	-				
g Fees and contracts from government agencies		·			
2 Membership dues and assessments					
3 Interest on savings and temporary cash	- 1				
investments			14	220.	
4 Dividends and interest from securities		······	14	437,533.	
5 Net rental income or (loss) from real estate:	1- 11	- 1	` *, . ·		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal		•			
property				;	
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	-		18	777,659.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			ŀ		
b					
c					
d					
A		· · · · · · · · · · · · · · · · · · ·			···
12 Subtotal. Add columns (b), (d), and (e)	•		0.	1,215,412.	
13 Total. Add line 12, columns (b), (d), and (e)			 	13	1,215,41
(See worksheet in line 13 instructions to verify calculations	1				<u> </u>

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	the favordation's every access (ather then by according funds for each average)			
				
				

323621 10-10-13

Form **990-PF** (2013)

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)3) organizations) or in section 527, relating to political organizations? 1 Transfers from the reporting floundation to a noncharitable exempt organization of. (1) Cash (2) Other assets 1 14(1) X 1 (2) Other assets 1 (3) Rental of tacilities, equipment, or other assets (3) Rental of tacilities, equipment, or other assets (4) Rembursement arrangements (5) Loans or loan guarantees (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Performance of services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (9) Performance of services or membership or fundraising solicitations (1) In an answer to any of the above is "95," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of varieties, variacations, and sharing arrangements, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of varieties, variacations, and sharing arrangements are section 501(c) of the Code (other than section 501(c)(d)) or in section 527? (a) If yes (complete the following schedule. (b) Type of organization (e) Description of relationship N/A (b) Type of organization or mice prequire has any knowledge and before the finite prequire of the section of the product of the produ	Part XVII	Information Re Exempt Organi		fers To a	nd Transactions a	nd Relations	hips With Noncha	ritable)	
a Transfers from the reporting foundation to a nonchardable exempt organization of: (1) Cash 2) Other assets 5 Other transactions: (2) Purchases of assets from a nonchardable exempt organization (2) Purchases of assets from a nonchardable exempt organization (3) Rental of dischese, equipment, or other assets (4) Rembursement arrangements (5) Loans or of ann guarantes (5) Loans or of ann guarantes (6) Performance of services or membership or fundasing solicitations (6) Performance of services or membership or fundasing solicitations (6) Performance of services or membership or fundasing solicitations (6) Performance of services or membership or fundasing solicitations (6) Loans or of ann guarantes (7) Loans or of ann guarantes (8) Performance of services or membership or fundasing solicitations (9) Amount motive of the solicies of the assets, or paid employees (9) International or the solicitation of the solicities, equipment, making lists, other assets, or paid employees (9) Amount motived (1) Loans or of the solicities	1 Did the or			f the following	g with any other organizatio	n described in sect	ion 501(c) of	7	Yes	No
a Transfers from the reporting foundation to a noncharidable exempt organization of: (1) Cash (2) Other assets (3) Exhibit of assets to a noncharidable exempt organization (4) Reinbursement arrangements (5) Purchases of assets from a noncharidable exempt organization (5) Reinbursement arrangements (6) Nearon of facilities, equipment, or other assets (7) Cash (8) Reinbursement arrangements (9) Loss or of ann gurarities (9) Fefformance of services or membership or hudrasing solicitations (9) Loss or of ann gurarities (9) Fefformance of services or membership or hudrasing solicitations (9) Loss or of ann gurarities (1) Loss or of ann gurarities (1) Loss or of ann gurarities (1) Loss or of ann gurarities (1) Loss or of ann gurarities (1) Loss of the assets, or provided the following schedule. Column (1) should always show the fair market value of the goods, other assets, or services production. If the following schedule. Column (2) should always show the fair market value on the fair market value on the goods, other assets, or services production. If the following schedule. (2) Name of noncharitable exempt organization (4) Description of relationship 2a is the foundation directly or indirectly sifiliated with, or related to, one or more tax-exempt organization (4) Description of relationship (5) Loss of the Code (other than section 501(c)(3)) or in section 527? (7) Yes X No (8) Amount shroked (9) Amount shroked (9) Name of noncharitable exempt organization (9) Type of organization (9) Description of relationship (9) Programment (9) Loss of the Code (other than section 501(c)(3)) or in section 527? (9) Individual shroked (1) Type of organization (9) Description of relationship (9) Programment (9) Programment (9) Programment (1) Loss of the Code (other than section 501(c)(3)) or in section 527? (1) Type of organization (1) Type of organization (1) Loss of the Code (other than section 501(c)(3)) or in section 527? (1) Type of organization (1) Type of organization (1) Loss o							, ,			. 5/4
(2) Other assets Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Pertual of facilities, equipment or other assets (4) Rembursiment arrangements (5) Loans or foran guarantees (5) Loans or foran guarantees (5) Loans or foran guarantees (6) Fefformance of services or membership or fundasing solicitations (6) Performance of services or membership or fundasing solicitations (6) Including a foranguarantees (7) Loans or foranguarantees (8) Loans or foranguarantees (9) Loans or foranguarantees (1) Loans or foranguarantees (1) Loans or foranguarantees (1) Loans or foranguarantees (1) Loans or foranguarantees (1) Loans or foranguarantees (1) Loans or foranguarantees (2) Loans or foranguarantees (3) Loans or foranguarantees (4) Revalue of the goods, other assets, or services received. (5) Loans or foranguarantees (6) Amount shocked (6) Amount shocked (6) Amount shocked (6) Rame of noncharitable exempt organization (7) Loans or foranguarantees (8) Loans or foranguarantees (9) Amount shocked (1) Rame of noncharitable exempt organization (9) Coansiption of relationship (1) Loans of the Code (either than seatment bits return, including accompanying schedules and attenuation of which pregister has any honostopic programments of the code of the code of code for the season of my knowledge of the code of	a Transfers	from the reporting founda	ation to a noncharitab	le exempt org	janization of:					
Committee Com								1a(1)		
(1) Sales of assets to a nonchartable evempt organization (2) Purchases of assets from a noncharitable evempt organization (3) Rental of facilities, equipment, noncharitable evempt organization (4) Reimbursament arrangements (5) Loans or foat ong puranties (6) Performance of services or membership or fundrasing solicitations (7) A sharing of facilities, equipment, analing lists, other assets, or paid employees (8) Herdinary or the above is "kes," complete the following schedule. Column (a) should always show the fair market value of the goods, other assets, or services previous or received. (9) Amount involved (1) Amount involved (1) Amount involved (2) Rame of noncharitable exempt organization (3) Loans or exercise growing the recognition foundation received less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services received. (3) Loans or (1) Amount involved (4) Rame of noncharitable exempt organization (5) Loans or Storage and transfer and assets and statisments, and to this last of my knowledge in section 501(to) of the Code (other than section 501(c)(3)) or in section 5277 (a) No (b) Type of organization (c) Description of relationship N/A (a) Name of organization (b) Type of organization (c) Description of relationship N/A N/A	(2) Othe	r assets						1a(2)		<u>X</u>
(2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursament arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Sharing of facilities, equipment, making lists, other assets, or paid employees (8) If the answer to any of the above or "Sec", complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services repended. (8) Lineano (9) Amount involved (1) Amount involved (1) Amount involved (1) Amount involved (1) Amount involved (1) Amount involved (2) Name of noncharitable exempt organization (3) Lineano (4) Description of transfers, transactions, and sharing errangement, show in section 501(c) of the Code (other than section 501(c)) of missection 5277 (3) Wires, complete the following schedule. (4) Years of organization (5) London properties the following schedule. (6) Type of organization (7) Type of organization (8) Type of organization (9) Description of relationship (1) Type of organization (1) Type of organization (1) Type of organization (1) Type of organization (1) Type of organization (1) Type of organization (2) Description of relationship (3) Wires, complete the following schedule. (4) Warm of organization (5) Description of relationship (6) Description of relationship (7) Performance than exempted than exempte	b Other trai	nsactions:						. , ,	23.7	C3. 1
(a) Rental of facilities, equipment, or other assets (b) Loans or loan guarantees (c) Performance of services or membership or fundraising solicitations (d) Loans or loan guarantees (e) Performance of services or membership or fundraising solicitations (e) Performance of services or membership or fundraising solicitations (e) Performance of services or membership or fundraising solicitations (e) Sharing of facilities, equipment, making lists, other assets, or paid employees (f) Loans or services grower by the reporting fundation. If the foundation received lists than fair market value in any transaction or sharing arrangement, show in column (e) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of relationship in the following aschaelule. If Yes, complete the following aschaelule. If Yes, complete the following aschaelule. In the personner of the following aschaelule. In the personner of the following aschaelule. In the personner of the following aschaelule. In the personner of the following aschaelule. In the personner of the following aschaelule. In the personner of the following aschaelule. In the personner of the following aschaelule. In the following aschaelule and statements and to the best of my knowledge as any knowledge as	· ·								<u> </u>	
(4) Rembursement arrangements (5) Loars or foran quarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) Performance of services or membership or fundraising solicitations (8) Line of the services or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (a) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (a) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of vanders, transactions, and sharing arrangements N/A (d) Description of vanders, transactions, and sharing arrangements in section 501(c) of the Code (other than section 501(c)(s)) or in section 527? yes X No b If Yes, complete the following schedules. (a) Name of organization (b) Type of organization (e) Description of relationships N/A (ii) If Yes, complete the following schedules. (a) Name of organization (b) Type of organization (e) Description of relationships of organization of the best of my knowledge and statements, and to the best of my knowledge schedules. N/A (iii) If Yes (iiii) If Y	• •									
(6) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations 1	••									X
(8) Performance of services or membership or fundrasing solicitations 11(6) X 6 If the answer to any of the above is "Fes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly affidiated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 5277 2 If the foundation directly or indirectly affidiated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 5277 3 If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship N/A 1 If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship N/A 1 If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship N/A 1 If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship N/A 1 If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship N/A 1 If Yes if Name of organization (e) Description of relationship N/A 1 If Yes if Name of organization (e) Description of relationship N/A 1 If Yes if Name of organization (e) Description of relationship N/A 1 If Yes if Name of organization (e) Description of organization of organizations of organization of organization of organization (e) Descripti	• • • • • • • • • • • • • • • • • • • •								 	X
c Sharing of facilities, equipment, making lists, other assets, or paid employees 4 if the answer to any of the above in "Yes" complete the following speakedule. Column (a) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (a) the value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangements show in column (b) Amount involved (c) Name of noncharitable exempt organization N/A 2 is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b If Yes, "complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Ves			mharahin ar fuadraia	ina nolinitatio					_	A V
d If the answer to any of the above is Yes, "complete the following schedule. Column (s) should always show the fair market value of the goods, other assets, or services green by the reporting foundation. If the foundation received less than fair market value in any transferon or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Live no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b) If Yes, "complete the following schedule. (a) Name of organization (b) Type of organizations (c) Description of relationship N/A (a) Name of organization (b) Type of organization (c) Description of relationship N/A (b) Type of organization (c) Description of relationship N/A Linda penalties of perpir, I declare that I have examined this return, recluding accompanying schedules and distarrants, and to the best of my knowledge AUG 2 0 2014 Primit S LIN Primit S LIN Firm's address Phone no.									 -	-A
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) I-ma no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, variasactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c) of one code (other than section 501(c)) or in section 52? b if Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A	-		-	•		vave show the fair i	market value of the goods		L	
(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b. If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Signal Under penalties of penalty, I declare that I have examined this relium, including accompanying schedules and alianments, and to the best of my knowledge and interest, and to the best of my knowledge and schedules and alianments, and to the best of my knowledge and schedules and alianments, and to the best of my knowledge and schedules and alianments, and to the best of my knowledge and schedules and alianments, and to the best of my knowledge and schedules and alianments, and to the best of my knowledge and schedules and alianments, and to the best of my knowledge and schedules and schedules and alianments, and to the best of my knowledge and schedules and alianments, and to the best of my knowledge and schedules a	or service	es given by the reporting f	oundation. If the foun	dation receive					,,,,	
N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b. If "yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Sign Here Linder penalties of persoy, I. declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and balled, it is true, corresponding than dispersor (other than taxacayer) at based on all information of which prepare has any knowledge and balled, it is true, corresponding to the phase of th					exempt organization	(d) Description	n of transfers, transactions, and	sharing a	rangem	ents
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? b If Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No				· · · · · · · · · · · · · · · · · · ·						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No					-·		 			
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No				· · · · · · · · · · · · · · · · · · ·		 				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No					*****	-				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No	-		 							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No										
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No			 		······					
N/A Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and cape in a wait in use of perjury is based on all information of which preparer has any knowledge return with the preparer shown below (see instr.)? AUG 2 0 2014	ın sectio	n 501(c) of the Code (othe complete the following sch	er than section 501(c) nedule.		tion 527?	zations described]		<u> </u>	No No
Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct anticopy plane for the perparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below (see inst)? AUG 2 0 2014 Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name			ganization		(b) Type of organization		(c) Description of relations	ship		
AUG 2 0 2014 Print/Type preparer's name Preparer's signature		N/A				 				
AUG 2 0 2014 Print/Type preparer's name Preparer's signature		···· ··-								 -
AUG 2 0 2014 Print/Type preparer's name Preparer's signature										
AUG 2 0 2014 Print/Type preparer's name Preparer's signature	-					-				
Signature of officer or drustee	Sign and	belief, it is true, correct and co	op hawait, trustes	eparer (other tha	in taxpayer) is based on all inform	nation of which prepare	er has any knowledge Mi	turn with ti	he prepa	rer
Paid Print/Type preparer's name Preparer's signature Date Check if self- employed Self- employed Firm's name Firm's address Print/Type preparer's name Preparer's signature Firm's address Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's name Preparer's signature Print/Type preparer's name Prepare	Z			y -	 	· /	[Ye:	3 L	_ No
Paid Preparer Use Only Firm's address ▶ Self- employed Firm's EIN ▶ Phone no.		,		Dropore-te -		 	Chack L. Charte			
Preparer Use Only Firm's address ▶ Firm's address ▶ Phone no.		rilliv type preparer's n	ianië	reparer's s	agnature	Date	<u> </u>			
Preparer Use Only Firm's address ▶ Firm's address ▶ Phone no.	Paid						acu- cmpioyeu			
Use Only Firm's address ▶ Phone no.		Eirm's name		<u> </u>			Firmin CINI N			
Firm's address Phone no.	-	, o					rirm's Ein 🕨			
Phone no.	-		<u> </u>			 		······································		
······································							Phone no			
		1.		·-=		 		orm 99	0-PF	(2013)

12220011 701510 005400

FORM 990-PF INTERE	ST ON SAVI	IGS AND TEME	PORARY	CASH IN	VESTMENTS	STATEMENT	1
SOURCE	(A) REVEN PER BO	WE	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOM	E	
BANK OF HAWAII #215	022500		220.		220.		
TOTAL TO PART I, LI	NE 3		220. 220		220.		
FORM 990-PF	DIVIDEND	S AND INTER	EST FRO	M SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS		(A) EVENUE R BOOKS	(B) NET INVES MENT INCO		
BANK OF HAWAII #215022500	575,302	. 137,76	9.	137,533.	437,53	3.	
TO PART I, LINE 4	575,302	137,76	437,533.		437,53	3.	
FORM 990-PF		LEGAL	FEES			STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
LEGAL FEES	_	5,412.		2,706.		2,7	06.
TO FM 990-PF, PG 1, LN 16A		5,412.	2,706.			2,7	06.
FORM 990-PF		ACCOUNTI	NG FEE			STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM		
TAX RETURN PREPARA	rion fee	2,000.	-	600.		1,4	00.
TO FORM 990-PF, PG	1, LN 16B	2,000.		600.		1,4	00.
	=						

FORM 990-PF	TAX	ES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
1ST QTR FEDERAL EXCISE TAX PAYMENT FOR FYE 12/31/13 2ND QTR FEDERAL EXCISE TAX	1,754.	0.		0.	
PAYMENT FOR FYE 12/31/13	2,330.	0.		0.	
3RD QTR FEDERAL EXCISE TAX PAYMENT FOR FYE 12/31/13 4TH QTR FEDERAL EXCISE TAX	2,330.	0.		0.	
PAYMENT FOR FYE 12/31/13	2,330.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	8,744.	0.		0.	
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
GRANT ADMINISTRATION FEES SPECIAL SERVICE FEE	53,287. 488.	0.		53,287. 488.	
TO FORM 990-PF, PG 1, LN 23	53,775.	0.		53,775.	
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 7	
DESCRIPTION		LUATION ETHOD BO	OOK VALUE	FAIR MARKET VALUE	
SEE STATEMENT - INV	COST 1		.8,191,075.	20,906,901.	
TOTAL TO FORM 990-PF, PART I	1	.8,191,075.	20,906,901.		

G. N. Wilcox Trust

Grant Paid 1/1/2013 to 12/31/2013

12/31/2013

Payee Organization Project Title	Amount
Adult Friends for Youth	\$20,000 00
3375 Koapaka Street, Suite B290	
Honolulu, HI 96819	
Clinical/Competency Based Alternative Education Program - 2013-2014	
Aloha School Early Learning Center	\$10,000 00
P.O. Box 1408	
Hanalei, HI 96714	
2013-2014 Tutton Aid Progam	
Aloha School Early Learning Center	\$6,800.00
P.O. Box 1408	
Hanalei, HI 96714	
Purchase. Preschool Outlast Block Set	
American National Red Cross, Hawaii State Chapter	\$25,000 00
4155 Diamond Head Road	
Honolulu, HI 96816	
General Operating - Kauai Island Disasier Response & Preparedness	
ARC of Maui County	\$9,400 00
95 Mahalani Street, Suite 17	
Wailuku, HI 96793	
Acquire Furniture & Furnishings for New Group Home on Molokai	
ASSETS School	\$11,000 00
One Ohana Nui Way	
Honolulu, HI 96818	
2013-2014 Tutton Aid Program	
Assistance League of Hawaii	\$10,000.00
1505 Young Street	
Honolulu, HI 96826	
Operation School Bell - FY June 2013 - May 2014	
Big Brothers Big Sisters Hawaii	\$15,000.00
418 Kuwili Street, Suite 106	
Honolulu, HI 96817-5364	
Community Based Program - Kauai Island	
Boys and Girls Club of Hawaii	\$45,000 00
1523 Kalakaua Avenue, Suite 202	
Honolulu, HI 96826	
Kauaı Island - General Operatıng Support for FYE 12/31/2014	

Payee Organization	Amount
Project Title	
Central Union Church	\$10,000 00
1660 South Beretania Street	
Honolulu, HI 96826	
Community Music Programs - ONLY FOR MESSIAH	
CONCERT - DECEMBER 2013	
Chamber Music Hawaii	\$7,000 00
P. O. Box 61939	
Honolulu, HI 96839	
Statewide Music Education Outreach. Schools &	
Communities - 2013/2014	
Charting de Universita of Henslala	\$15,000.00
Chaminade University of Honolulu 3140 Waialae Avenue	315,000.00
Honolulu, HI 96816-1578 Physics Instrumentation	
r nysics instrumentation	
Child & Family Service	\$10,000 00
91-1841 Fort Weaver Road	
Ewa Beach, HI 96706-1909	
Unsolicited Award to Support Food Pantries at Nana's	
House and Hale Ho'omalu on Kauai in 2014	
Children's Discovery Center	\$25,000 00
111 Ohe Street	
Honolulu, HI 96813	
Educational Programs in 2014	
Church of the Pacific, UCC	\$19,000.00
P. O Box 223154	\$10,000.00
Princeville, HI 96722-3154	
Food Pantry Program in 2014	
1 00a 1 ami y 1 7087 am in 2017	
Early School	\$5,000 00
2510 Bingham Street	
Honolulu, HI 96826	
2013-2014 Tuttion Aid Program	
Foundation Center	\$5,000.00
79 Fifth Avenue	20,00
New York, NY 10003-3076	
General Operating Support for 2013	
Contrar operating capper for 2010	
Girl Scouts of Hawaii	\$15,000 00
410 Atkinson Drive, Suite 2E1, Box 3	
Honolulu, HI 96814-4730	
International Space Station Project. Phase II (2013/2014)	
Good Shepherd Preschool	\$4,000 00
638 N Kuakinı Street	
Honolulu, HI 96817	

2013-2014 Tuition Aid Program

Payee Organization Project Title	Amount
Gregory House Programs	\$20,000.00
200 N Vineyard Blvd , Suite A310	
Honolulu, HI 96817	
Permanent Rental Assistance - Support Services during FYE 6/30/2014	
Haleakala Waldorf School	\$5,500 00
4160 Lower Kula Road	
Kula, HI 96790	
2013-2014 Tutton Aid Progam	
Hana Arts	\$20,000 00
P O Box 686	
Hana, HI 96713	
Hana Arts Academy SY 2013/2014	
Hanahauoli School	\$5,000 00
Hanahauoli School	
1922 Makiki Street	
Honolulu, HI 96822	
2013-2014 Tutton Aid Program	
Hawaii Alliance for Arts In Education dba Hawaii Arts Alliance	\$20,000.00
P O Box 3948	
Honolulu, HI 96812-3948	
Travel Subsidies for Neighbor Island DOE Teachers to Attend STEAM Training in 2014	
Hawaii Children's Theatre	\$8,000.00
P. O. Box 662295	
Lihue, HI 96766	
Summer Stars 2013	
Hawaii Conference United Church of Christ 467 North Judd Street	\$20,000.00
Honolulu, HI 96817	
2013 Youth Events	
Hawaii Foodbank, Inc.	\$30,000.00
2611 Kilihau Street	
Honolulu, HI 96819	
Helping to Feed Kauai's Hungry - FYE 6/30/2014	
Hawaii Learning Resource	\$12,500.00
65-1229A Opelo Road	
Hana Hou Cottage #2	
Kamuela, HI 96743	
Academic Enrichment Camps - Summer 2014	
Hawaii Montessori Inc.	\$5,000 00
74-978 Manawalea Street	10,000 00
Kailua-Kona, HI 96740	
2013-2014 Tuitton Aid Program	

Payee Organization Project Title	Amount
Hawaii Opera Theatre Hawaii Opera Plaza 848 S. Beretania Street, Suite 301	\$10,000 00
Honolulu, HI 96813	
Opera Express - Kauaı Tour SY 2013/2014	
Hawaii Public Radio 738 Kaheka Street Honolulu, HI 96814-3726 Matching Challenge Grant - Fall Pledge Drive 2013-	\$10,000 00
2014	
Hawaii Theatre Center 1132 Bethel Street, Suite 1404 Honolulu, HI 96813 Educational Programming for School Year 2013-2014	\$10,000 00
Hawaiian Humane Society 2700 Waialae Avenue Honolulu, HI 96826-1899 Adoptions Program - FYE 6/30/2014	\$25,000 00
Hawaiian Mission Children's Society dba Hawaiian Mission Houses Historic Site and Archives	\$10,000 00
553 South King Street Honolulu, HI 96813-3002 Digitization & Preservation of Kauai Materials (journals pertaining to Waimea, Koloa, & Waioli)	
Hoala School 1067 A California Avenue Wahiawa, HI 96786 2013-2014 Tutton Aid Program	\$5,000 00
Holy Nativity School 5286 Kalanianaole Highway Honolulu, HI 96821-1883 2013-2014 Tuttion Aid Program	\$5,000 00
Hongwanji Mission School 1728 Palı Highway Honolulu, HI 96813 2013-2014 Tutton Aid Program	\$5,000 00
Honolulu Chorale P O Box 4411 Honolulu, HI 96812 Operating Support for 2013-2014 Season	\$4,100 00
Honolulu Theatre for Youth 1149 Bethel Street, Suite 700 Honolulu, HI 96813 Neighbor Island Youth - Kauai Tour 2013-2014	\$10,000 00

Payee Organization Project Title	Amount
Institute for Human Services	\$22,000 00
546 Ka'aahi Street	
Honolulu, HI 96817	
Safety & Security Improvements at Shelters	
Iolani School	\$6,500 00
563 Kamoku Street	20,2 32 22
Honolulu, HI 96826	
2013-2014 Tutton Aid Program	
Island Pacific Academy	\$7,000 00
909 Haumea Street	\$7,000 00
Kapolei, HI 96707	
2013-2014 Tutton Aid Program	
Island Sahasi	\$4,000,00
Island School	\$6,000 00
3-1875 Kaumualii Highway	
Lihue, HI 96766-9597 2013-2014 Tutton Aid Progam	
2015-2014 Tutton Ata 110gum	
Ka Hale O Na Keiki Inc	\$7,500 00
45-3668 Honokaa-Waipio Road	
Honokaa, HI 96727	
2013-2014 Tutton Aid Progam	
Kalaheo Missionary Church	\$5,000 00
P O Box 395	
Kalaheo, HI 96741-0395	
Unsolicited Award to Support Food Pantry in 2014	
Kamaaina Care dba Kamaaina Kids	\$7,500 00
156 Hamakua Drive, Suite C	
Kailua, HI 96734	
2013-2014 Tutton Aid Progam	
Kauai Habitat for Humanity	\$25,000 00
P O. Box 28	
Eleele, HI 96705	
Purchase of Light Duty Construction Vehicles	
Kauai United Way	\$2,500 00
P O. Box 1087	,-
4374 Kukui Grove Street, Ste. 201	
Lihue, HI 96766	
Walk-A-Thon Incentives & Promotion for October 2014	
KCAA Preschools of Hawaii	\$8,000 00
2707 South King Street	
Honolulu, HI 96826-3325	
2013-2014 Tutton Aid Program	

Payee Organization Project Title	Amount
Kokua Kalihi Valley Comprehensive Family Services 2239 North School Street	\$30,000.00
Honolulu, HI 96819	
Kalıhı Valley Youth Active Living Project	
Koloa Missionary Church	\$8,525 00
P. O. Box 307	
Koloa, HI 96756	
Youth Ministries - Oahu Spring Break (March 2014) and Sports Camp Kauai (July 2014)	
Le Jardin Academy	\$5,000 00
917 Kalanıanaole Highway	
Kailua, HI 96734	
2013-2014 Tutton Aid Program	
Life Foundation	\$10,000 00
677 Ala Moana Blvd., Suite 226	
Honolulu, HI 96813	
Sustainable Future Project - Development of Comprehensive Strategic & Business Plan during FYE 6/30/2014	
Lihue United Church	\$1,600 00
P O Box 1247	
Lihue, HI 96766-5247	
Christian Leadership Formation [*] Kauai Sacred Walkand Apprenticeship	
Lyman House Memorial Museum	\$10,000 00
276 Hailı Street	
Hilo, HI 96720	
Maintenance, Repairs, & Renovations to Facility and Specific Exhibits	
Ma Ka Hana Ka Ike Building Program	\$20,000 00
P. O. Box 968	
Hana, HI 96713	
Operating Support for 2013/2014 - Hana School Building Program	
Malama Pono Health Services	\$15,000 00
4357 Rice Street, Suite 101 P O Box 1950	
Lihue, HI 96766-5950	
General Operating Support - FYE 6/30/2014	
Malamalama Waldorf School, Inc.	\$4,500.00
HC 3, Box 13068	
Keaau, HI 96749-9220	
2013-2014 Tuition Aid Program	

Payee Organization	Amount
Project Title	
Mountmell Cahaal	00,000,03
Maryknoll School 1526 Alexander Street	\$9,000 00
Honolulu, HI 96822	
2013-2014 Tutton Aid Progam	
Mental Health Association in Hawaii	\$25,000 00
1124 Fort Street Mall, Suite 205	
Honolulu, HI 96813	
Mental Health Awareness & Education Program at	
Windward Community College	
Mid-Pacific Institute	\$8,500 00
2445 Kaala Street	2 1,1
Honolulu, HI 96822-2299	
2013-2014 Tutton Aid Program	
Mid-Pacific Institute	\$50,000 00
2445 Kaala Street	
Honolulu, HI 96822-2299	
Elementary Cottages - Fire Alarm System Upgrade &	
Roof Replacement	
Mohala Pua School dba Honolulu Waldorf School	\$5,500.00
350 Ulua Street	
Honolulu, HI 96821	
2013-2014 Tutton Aid Program	
Mohala Pua School dba Honolulu Waldorf School	\$10,000 00
350 Ulua Street	·
Honolulu, HI 96821	
Auditorium Renovations and Upgrades	
Montessori School of Maui	\$6,000.00
2933 Baldwin Avenue	
Makawao, HI 96768	
2013-2014 Tutton Aid Program	
Natural Bridges	\$12,000 00
P. O Box 727	0.2,000 00
Kilauea, HI 96754	
2013-2014 Tuition Aid Program	
2010 2017 1411000 1144 170 grain	
Nature Conservancy, Hawaii Chapter	\$25,000 00
923 Nuuanu Ave	
Honolulu, HI 96817	
Protecting Kauat's Forests - FYE 6/30/2014	
Nuuanu Congregational Church	\$10,000 00
2651 Palı Highway	
Honolulu, HI 96817	
Alakaı Program	
-	

Payee Organization Project Title	Amount
Ohia Productions	\$8,000 00
2051 Young Street #125	
Honollu, HI 96826	
Wishes and Legends Educational Theatre Touring Program - 2013-2014 Season	
Pacific and Asian Affairs Council	\$3,000.00
1601 East-West Road, 4th Floor	
Honolulu, HI 96848-1601	
After-School Class Initiative: Connect to the World at Kapaa High School (Fall 2013 & Spring 2014) 10/21/2013)	
Parker School	\$5,500 00
65-1224 Lindsey Road	
Kamuela, HI 96743	
2013-2014 Tutton Aid Progam	
Rehabilitation Hospital of the Pacific Foundation	\$10,000 00
226 North Kuakini Street	
Honolulu, HI 96817 Ohana Program for Neighbor Island Residents and Children on Oahu (FYE 9/30/2014)	
The Salvation Army Hawaiian & Pacific Islands Division 2950 Manoa Road	\$50,000 00
Honolulu, HI 96822	
Program Operating Support for FY 10/1/2013 - 9/30/2014	
The Salvation Army	\$5,000.00
Hawanan & Pacific Islands Division 2950 Manoa Road	
Honolulu, HI 96822	
Unsollicited Award to Purchase Food ONLY in Support of Hanapepe Hawaiian Congregational Church & Hanapepep Corps Food Pantry during 2014	
The Salvation Army	\$5,000 00
Hawaiian & Pacific Islands Division 2950 Manoa Road	,
Honolulu, HI 96822	
Unsollicited Award to Purchase Food in Support of Lihue Corps Soup Kitchen during 2014	
Seagull Schools, Inc.	\$4,000 00
1300 Kailua Road	
Kailua, HI 96734	
2013-2014 Tutton Aid Program	

Payee Organization Project Title	Amount
Trojoct Title	
St. Andrew's Priory School	\$5,000 00
224 Queen Emma Square	
Honolulu, H1 96813-2304	
2013-2014 Tutton Aid Program	
St. Andrew's Priory School	\$10,000 00
224 Queen Emma Square	
Honolulu, HI 96813-2304	
Priory in the City Program: One-Week Summer Session	
(6/1/2014-7/31/2014)	
St. Michael and All Angels' Episcopal Church	\$10,000 00
4364 Hardy Street	
P O. Box 572	
Lihue, HI 96766	
Funding Restriction: ONLY Toward the Purchase of	
Food and Food Pantry (NOTE. Cannot be used toward	
parking lot improvements)	
Teach For America Hawaii	\$15,000 00
500 Ala Moana Blvd., Suite 3-400	• •
Honolulu, HI 96813	
Operating Support for Oahu & Hawaii Island -	
2013/2014 School Year	
University of Hawaii Foundation	\$10,000 00
2444 Dole Street	
Bachman Hall 105	
Honolulu, HI 96822	
Kauai Community College Student Lanai & Gathering	
Place (installation of rock wall)	
Variety School of Hawaii	\$15,000 00
710 Palekaua Street	
Honolulu, HI 96816	
2013-2014 Tutton Aid Program	
Waianae Coast Early Childhood Services	\$6,500.00
84-1061 Noholio Road	
Waianae, HI 96792	
2013-2014 Tuition Aid Progam	
Waikiki Community Center	\$20,000.00
310 Paoakalani Avenue	,
Honolulu, HI 96815	
Keiki Building Community	
Waikiki Health	\$30,000.00
277 Ohua Avenue	
Honolulu, HI 96815	
Primary Care to Uninsured & Underserved Patients & Expansion to Makahiki Clinic in 2013	

Payee Organization Project Title		Amount
Waimea Country School P O. Box 399		\$4,000 00
Kamuela, HI 96743		
2013-2014 Tutton Aid Program		
Waioli Corporation		\$30,000 00
P O. Box 1631		
Lihue, HI 96766		
Grove Farm Sesquicentennial Resotration Project		
Waipa Foundation		\$25,000 00
P O Box 1189		
Hanalei, HI 96714		
Purchase Equipment for Community Kuchen		
Wider Church Ministries		\$8,000 00
700 Prospect Avenue, 7th Floor		
Cleveland, OH 44115-1100		
Support for Retired Medical & Educational Missionaries (Per Trust Document)		
Wilcox Health Foundation		\$28,700 00
3-3420 Kuhio Highway		
Lihue, HI 96766-1099		
Ultrasound System		
YWCA of Kauai		\$20,000 00
3094 Elua Street		
Lihue, HI 96766		
Family Violence Shelter Program - Operating Expenses (includes telephone, utilities, repair and maintenance of equipment & supplies)		
YWCA of Oahu		\$10,000 00
1040 Richards Street		,
Honolulu, HI 96813		
Dress of Success Professional Women's Group		
	Grand Total	\$1,207,625.00

Grand Total	\$1,207,625.00
(92 items)	

GEORGE N. WILCOX 2013 FORM 990PF PART II, INVESTMENTS - OTHER EIN: 99-6002445

Description	Units	Book Value	Mkt Value
003019395 ABERDEEN INTERNATIONAL EQUITY FUND INST	123580.827	1,497,035.16	1,917,974.00
003021409 ABERDEEN CORE FIXED INCOME FUND CL I	131730.750	1,317,307.50	1,392,394.00
003021698 ABERDEEN ASIA-PACIFIC EX-JAPAN EQUITY FUND INSTITUTIONAL CLASS	67784.746	721,112.13	777,491.00
197199631 COLUMBIA ACORN INTERNATIONAL CL R5	9959.176	347,467.22	464,695.00
314172560 FEDERATED STRATEGIC VALUE DIVIDEND FUND CL INST	336138.254	1,512,622.14	1,963,047.00
38142Y773 GOLDMAN SACHS LARGE CAP VALUE FD - INST	63578.936	680,294.62	1,067,490.00
47103C357 JANUS TRITON FUND CL I	31428.440	436,990.58	748,311.00
47803W406 JOHN HANCOCK III DISC M/C-IS	42198.861	539,723.43	765,487.00
543487326 NATIXIS LOOMIS SAYLES LTD GOV AND AGCY FD CL Y	80115.453	943,434.34	934,947.00
56062X641 MAINSTAY LARGE CAP GROWTH FUND CL I	99113.629	602,610.87	1,031,773.00
56062X708 MAINSTAY HIGH YIELD CORP BOND FUND CL I	19161.422	112,860.78	115,927.00
74144Q203 T ROWE PRICE INSTITUTIONAL EMERGING MARKETS	26618.462	795,538.47	782,583.00
74972H648 RS GLOBAL NATURAL RESOURCES FUND CL Y	15257.144	590,194.24	545,595.00
77958B402 T ROWE PRICE INSTITUTIONAL FLOATING RATE FUND	16943.320	163,503.03	174,347.00
78462F103 SPDR S&P 500 ETF TRUST	7075.000	1,131,842.23	1,306,682.00
880208400 TEMPLETON GLOBAL BOND FUND CL AD	20066.513	268,912.81	262,671.00
884116401 THIRD AVENUE REAL ESTATE VALUE FUND CL IS	18856.559	423,895.45	543,446.00
921909792 VANGUARD TOTAL INTERNATIONAL STOCK INDEX FUND CL SI	29913.903	995,534.69	1,005,107.00
921937835 VANGUARD TOTAL BOND MARKET ETF	15815.000	1,338,622.27	1,265,991.00
921937868 VANGUARD TOTAL BOND MARKET INDEX FD	68080.367	723,694.30	718,929.00
922908488 VANGUARD TOTAL STOCK MARKET INDEX FUND	69285.709_	3,047,878.35	3,122,014.00
Investments - Other	=	18,191,074.61	20,906,901.00

G. N. WILCOX TRUST Bank of Hawaii, Trustee

Grant Application Information for General Capital

I. Policy

Applications for grants are accepted by the Committee on Beneficiaries from qualified tax-exempt 501(c)(3), charitable organizations. The Committee's general policy is to confine grants to organizations within the State of Hawaii, with a priority is to assist Kauai organizations serving that island.

Although the Trust is broad-purposed, it does not make grants to individuals, nor for reserve purposes, endowments, or deficit financing. No multiple-year pledges are made for programs or capital projects. Generally grants will not be made to government agencies, nor to organizations supported substantially by government funds.

The Committee on Beneficiaries will consider only one request a year from an organization. A new request will not be entertained if a prior pledge or report is still outstanding. The exception to this policy is a tuition aid program (separate guidelines available) which may be considered in addition to one other request from a school.

II. Capital Criteria

General Capital - Under \$500,000

General Capital requests are for projects or equipment having a total cost under \$500,000; however at the discretion of the Trust, projects or purchases of certain values and scope may be treated as large capital projects and may not be eligible. Deadline Dates: Requests must be postmarked by the 1st of April, July, or October.

- General Capital grants are provided for the purchase of equipment, renovations and construction of buildings. G. N. Wilcox Trust does not provide grants for the purchase of real estate; nor does the foundation provide grants for deficit funding or for endowments.
- o Generally, the Trust prefers to be one of several contributors, expecting the organization to acquire needed funds from several sources to assure the project is completed at a specific time and/or in a timely manner.
- o In the interest of public causes, G. N. Wilcox Trust prefers that all board of directors of an organization make an annual financial contribution, at some level, to support the organization; in addition to participating in fundraising activities. Directors are also required to attend Board meetings, volunteer work when needed, and make significant efforts to gain community and business support.

Some other factors considered in reviewing a proposal are:

- the community's need for the proposed project in relation to other similar activities
- reasonableness of the project's income/expenditure budget
- ability of the applicant to obtain entire funding and complete the proposed project.

III. APPLICATION PROCEDURES (A thru D)

Submit 4 (four) completed sets of the proposal containing:

(A) Funding Request cover sheet - To be placed on top of each set (see page 4).

(B) Proposal Narrative - Provide who, what, when, where, why, and how in three pages or less.

Narrative Format Information:

Pages: Maximum 3 pages

Margins: 1-inch margins on each side

Font: 12 point font

Spacing: Double space in between paragraphs Paragraph Height: Maximum of 1 ½ inches

Bullet points: Acceptable

Narrative Headings - Use these 7 (seven) headings in the order listed:

- 1) Organization: Briefly describe your organization's mission and programs. (maximum of 2 sentences)
- 2) <u>Population to be Served</u>. Provide an estimated UNDUPLICATED number and age range of the eligible individuals you propose to serve.
 - If the projections are an increase over the current volume, provide information on current volume (percentages can only be used if accompanied with figures, i.e. 20% over 500).
- 3) Project/Purchase: Describe using specific information in layman terms.
 - > (Acronyms must be explained in the narrative and budgets.)
- 4) <u>Goals & Objectives</u>: **Separately** list each goal with corresponding objective, and specifically describe how the goal will be accomplished through the objective.
- 5) Outreach: For new, expansion, or existing project:
 - Describe how your organization will market the program/project to the community you propose to serve.
 - Provide an estimated UNDUPLICATED number of group/individuals who will be new participants
 - > Provide UNDUPLICATED numbers for existing participants/groups/individuals.
- 6) <u>Evaluation</u>: Provide information on how and/or what the following measures are that will be used to evaluate the program/project (**note**: pre/post-tests are not acceptable):
 - > Process Measures extent to how the program/project will be implemented
 - > Outcome Measures effectiveness in meeting goals and objectives
- 7) Cost. Total cost of the program/project, amount requested, and plans for future support.

(C) These 7 (seven) items must be attached to each of the 4 (four) sets of the proposal narrative

- 1) <u>Staff</u> Describe the qualifications of the staff or volunteers who will oversee and coordinate the program/project
- 2) Board of Directors List of Board members with their professional or business affiliation.
 - > Percent who actively participate in activities and attend meetings
- 3) Endorsement Letters Two letters endorsing the activity

(The following items require Start & End date that includes: month, day and year):

- 4) Project/Program Budget
 - > List all revenue (funding sources) and expenses for the project or equipment.
 - > Validation of capital expenses is required (i.e...estimates from vendors).
- 5) Organization's Operating Budget Current Fiscal Year
 - > If funding is for support during the following fiscal year, <u>also</u> provide a DRAFT of Operating Budget for such year.
- 6) Income Statement Recently Completed Fiscal Year
- 7) Current Balance Sheet (not older than three months)

(D) IRS, Charters, By-Laws, Articles of Incorporation

Provide 1 (one) copy only of each of the following:

- IRS Internal Revenue Service determination letter advising the organization is tax-exempt under Section 501(c)(3) of the Code and is considered a public charity.
- Charter & By-Laws
- Articles of Incorporation if applicable

The proposal is to be sent to the following mailing address:

Postal Deliveries

G. N. Wilcox Trust c/o Bank of Hawaii, Trustee Charitable Foundation Services #758 P. O. Box 3170 Honolulu, Hawaii 96802-3170

Overnight Deliveries

G. N. Wilcox Trust c/o Bank of Hawaii Charitable Foundation Services #758 130 Merchant Street, Room 530 Honolulu, Hawaii 96813

Due to security measures hand-delivered proposals are strongly discouraged.

There may be times due to unforeseen circumstances or unusually high volume, that a request may not be reviewed in time for the intended project. An average of 90 - 120 days is required to process a proposal, allowing for a possible site visit and for studying the proposal in relation to other activities of the Foundation.

Applicants will be notified in writing of the action taken on their requests. The recipient of a grant will be required to submit a narrative report specific to the Foundation's Reporting Guidelines on what has been accomplished as a result of the grant, and a fiscal accounting of the grant expenditures.

The Foundation receives more requests for assistance than its funds permit supporting. However, normally, all applications are considered, and each is acted upon according to its current and projected relative merit, provided it is in keeping with the deed of trust.

NOTE: Although not ordinarily required, an audited financial statement may be requested if circumstances warrant.

Contact Information for the G. N. Wilcox Trust:

Paula Boyce, AVP & Grants Administration Officer Phone: (808) 694-4945 Fax: (808) 694-4006 Email address: paula.boyce@boh.com

Elaine Moniz, Trust Specialist Phone: (808) 694-4944 Fax: (808) 694-4006 Email address: elaine.moniz@boh.com

Toli-free from Neighbor Islands 1-800-272-7262

G. N. Wilcox Trust Bank of Hawaii, Trustee

Funding Request Cover Sheet (General Capital)

(TYPE all information, except for signatures, and submit with your request for funding.)

	Date		
(Must (If this is a collaborative project, p	be a 501 (c) (ion Information 3) tax-exempt organization) names of collaborating agenc	ies on a separate sheet.)
Name:	·····		
Complete Address:			
Phone:	Fax:	Email:	
	BOARD MEM	BER INFORMATION	······
No. of Board Members:	'	Percent (%) of Financial Partic	cipation:
Total Contribution During Fiscal Year: (Check One: Past or Current FY	J	Median Gift:	Average Gift:
	Contac	t Information	
Name:	Title	e:	
Complete Address:			
Phone:	Email:		
	Projec	t Information	
Project Title:			
Amount requested: \$	_		
	Two signat	ures are required	
Executive Director (Chief Compensated	Staff)	Board Chair or Pres	ident (Chief volunteer)
Print or Type Name and Title		Print or Type Nam	e and Title

G. N. WILCOX TRUST Bank of Hawaii, Trustee

Grant Application Information for Program

I. Policy

Applications for grants are accepted by the Committee on Beneficiaries from qualified tax-exempt 501(c)(3), charitable organizations. The Committee's general policy is to confine grants to organizations within the State of Hawaii, with a priority is to assist Kauai organizations serving that island.

Although the Trust is broad-purposed, it does not make grants to individuals, nor for reserve purposes, endowments, or deficit financing. No multiple-year pledges are made for programs or capital projects. Generally grants will not be made to government agencies, nor to organizations supported substantially by government funds.

The Committee on Beneficiaries will consider only one request a year from an organization. A new request will not be entertained if a prior pledge or report is still outstanding. The exception to this policy is a tuition aid program (separate guidelines available) which may be considered in addition to one other request from a school.

NOTE: If a fiscal sponsor is being used, it is necessary to contact the Charitable Foundation Services office prior to submitting a grant proposal.

II. General Information

a. Board of Directors

In order to be successful in accomplishing its purposes, a charitable organization generally must have community and business support, rather than relying solely on foundations or government funding.

For this reason the Committee on Beneficiaries pays particular attention to how active members of an organization's Board of Directors carry out their responsibilities to the organization.

In the interest of public causes, G. N. Wilcox Trust prefers all directors make an annual financial contribution, at some level, to the support of the organization; in addition to participating in fundraising activities. Directors are also required to attend Board meetings, volunteer work when needed, and make significant efforts to gain community and business support.

b. School Participation

If the request for funding supports a program that involves school or classroom participation, the applying charity must provide a list of the schools that will be involved in the program along with a letter of support from the schools' principals or teachers who have either committed or are interested in the program. The organization must also provide us with an approximate number of students that will be involved and/or benefiting from the program.

c. Other Factors

Some other factors considered in reviewing a proposal are:

- the community's need for the proposed program or project in relation to other similar activities
- reasonableness of the project's income/expenditure budget
- ability of the applicant to obtain entire funding and sustain the proposed project.

III. Foundation Deadlines

> Requests – Must be postmarked by the 1st of April, July, or October.

IV. APPLICATION PROCEDURES (A thru D)

Submit 4 (four) completed sets of the proposal containing:

(A) Funding Request cover sheet - To be placed on top of each set (see page 4).

(B) Proposal Narrative - Provide who, what, when, where, why, and how in three pages or less.

Narrative Format Information:

Pages: Maximum 3 pages

Margins: 1-inch margins on each side

Font: 12 point font

Spacing: Double space in between paragraphs Paragraph Height: Maximum of 1 1/2 inches

Bullet points: Acceptable

Narrative Headings - Use these 7 (seven) headings in the order listed:

Organization: Briefly describe your organization's mission and programs. (maximum of 2 sentences)

- 2) Population to be Served: Provide an estimated UNDUPLICATED number and age range of the eligible individuals you propose to serve.
 - If the projections are an increase over the current volume, provide information on current volume (percentages can only be used if accompanied with figures, i.e. 20% over 500).
- 3) Program/Project. Describe using specific information in layman terms.
 - > (Acronyms must be explained in the narrative and budgets.)
- 4) Goals & Objectives: Separately list each goal with corresponding objective, and specifically describe how the goal will be accomplished through the objective.
- 5) Outreach: For new, expansion, or existing program/project:
 - > Describe how your organization will market the program/project to the community you propose to serve.
 - Provide an estimated UNDUPLICATED number of group/individuals who will be new participants
 - Provide UNDUPLICATED numbers for existing participants/groups/individuals.
- 6) Evaluation: Provide information on how and/or what the following measures are that will be used to evaluate the program/project (note: pre/post-tests are not acceptable):
 - Process Measures extent to how the program/project will be implemented
 - > Outcome Measures effectiveness in meeting goals and objectives
- 7) Cost: Total cost of the program/project, amount requested, and plans for future support.

(C) These 7 (seven) items must be attached to each of the 4 (four) sets of the proposal narrative

- 1) Staff Describe the qualifications of the staff or volunteers who will oversee and coordinate the program/project
- 2) Board of Directors List of Board members with their professional or business affiliation.
 - Percent who actively participate in activities and attend meetings
- 3) Endorsement Letters Two letters endorsing the activity

(The following items require Start & End date that includes: month, day and year):

- 4) Project/Program Budget
 - > List all revenue (funding sources) and expenses for the project or program.
- 5) Organization's Operating Budget Current Fiscal Year
 - If funding is for support during the following fiscal year, also provide a DRAFT of Operating Budget for such year.
- 6) Income Statement Recently Completed Fiscal Year
- 7) Current Balance Sheet (not older than three months)

(D) IRS, Charters, By-Laws, Articles of Incorporation

Provide 1 (one) copy only of each of the following:

- IRS Internal Revenue Service determination letter advising the organization is tax-exempt under Section 501(c)(3) of the Code and is considered a public charity.
- Charter & By-Laws
- Articles of Incorporation if applicable

The proposal is to be sent to the following mailing address:

Postal Deliveries

G. N. Wilcox Trust c/o Bank of Hawaii, Trustee Charitable Foundation Services #758 P. O. Box 3170 Honolulu, Hawaii 96802-3170

Overnight Deliveries

G. N. Wilcox Trust c/o Bank of Hawaii Charitable Foundation Services #758 130 Merchant Street, Room 530 Honolulu, Hawaii 96813

Due to security measures hand-delivered proposals are strongly discouraged.

There may be times due to unforeseen circumstances or unusually high volume, that a request may not be reviewed in time for the intended project. An average of 90 - 120 days is required to process a proposal, allowing for a possible site visit and for studying the proposal in relation to other activities of the Foundation.

Applicants will be notified in writing of the action taken on their requests. The recipient of a grant will be required to submit a narrative report specific to the Foundation's Reporting Guidelines on what has been accomplished as a result of the grant, and a fiscal accounting of the grant expenditures.

The Foundation receives more requests for assistance than its funds permit supporting. However, normally, all applications are considered, and each is acted upon according to its current and projected relative merit, provided it is in keeping with the deed of trust.

NOTE: Although not ordinarily required, an audited financial statement may be requested if circumstances warrant.

Contact Information for the G. N. Wilcox Trust:

Paula Boyce, AVP & Grants Administration Officer Phone: (808) 694-4945 Fax: (808) 694-4006 Email address: paula.boyce@boh.com

Elaine Moniz, Trust Specialist

Phone: (808) 694-4944 Fax: (808) 694-4006 Email address: elaine.moniz@boh.com

Toll-free from Neighbor Islands 1-800-272-7262

G. N. Wilcox Trust Bank of Hawaii, Trustee

Funding Request Cover Sheet (Program)

(TYPE all information, except for signatures, and submit with your request for funding.)

	Date		
(Mu (If this is a collaborative project	st be a 501 (c) (tion Information 3) tax-exempt organization) names of collaborating agent	cies on a separate sheet.)
Name:			
Complete Address:			· · · · · · · · · · · · · · · · · · ·
Phone:	Fax:	Email:	
		IBER INFORMATION	
No. of Board Members:		Percent (%) of Financial Parti	
Total Contribution During Fiscal Year: (Check One: Past or Current FY _		Median Gift:	Average Gift:
	Contac	et Information	
Name:	Titl	e:	
Address:			
Phone:	Email:		
	Projec	t Information	
Project Title:			
Amount requested: \$			
	Two signat	ures are required	
Executive Director (Chief Compensate	ed Staff)	Board Chair or Pres	sident (Chief volunteer)
Print or Type Name and Title		Print or Type Nam	e and Title

G. N. WILCOX TRUST Bank of Hawaii, Trustee

Grant Application Information for General Operating Support

I. Policy

Applications for grants are accepted by the Committee on Beneficiaries from qualified tax-exempt 501(c)(3), charitable organizations. The Committee's general policy is to confine grants to organizations within the State of Hawaii, with a priority to assist Kauai organizations serving that island.

Although the Trust is broad-purposed, it does not make grants to individuals, nor for reserve purposes, endowments, or deficit financing. No multiple-year pledges are made for programs or capital projects. Generally grants will not be made to government agencies, nor to organizations supported substantially by government funds.

The Committee on Beneficiaries will consider only one request a year from an organization. A new request will not be entertained if a prior pledge or report is still outstanding. The exception to this policy is a tuition aid program (separate guidelines available) which may be considered in addition to one other request from a school.

NOTE: General Operating support is usually provided to Kauai organizations that have an established relationship with G. N. Wilcox Trust.

II. General Information

a. Board of Directors

In order to be successful in accomplishing its purposes, a charitable organization generally must have community and business support, rather than relying solely on foundations or government funding.

For this reason the Committee on Beneficiaries pays particular attention to how active members of an organization's Board of Directors carry out their responsibilities to the organization.

In the interest of public causes, G. N. Wilcox Trust prefers all directors make an annual financial contribution, at some level, to the support of the organization; in addition to participating in fundraising activities. Directors are also required to attend Board meetings, volunteer work when needed, and make significant efforts to gain community and business support.

b. School Participation

If the request for funding supports a program that involves school or classroom participation, the applying charity must provide a list of the schools that will be involved in the program along with a letter of support from the schools' principals or teachers who have either committed or are interested in the program. The organization must also provide us with an approximate number of students that will be involved and/or benefiting from the program.

c. Other Factors - General Operating Grants

Some other factors considered in reviewing a proposal for general operating support are:

- the community's need for continuance of the applicant's existence in relation to other similar organizations
- o reasonableness of applicant's operating budget
- o ability of the applicant to obtain funding and sustainability for organization

III. Foundation Deadlines

Paguests - Must be postmarked by the 1st of April, July, or October 1.

IV. APPLICATION PROCEDURES (A thru D)

Submit 4 (four) completed sets of the proposal containing:

(A) Funding Request cover sheet - To be placed on top of each set (see page 4).

(B) Proposal Narrative - Provide who, what, when, where, why, and how in three pages or less.

Narrative Format Information:

Pages: Maximum 3 pages

Margins: 1-inch margins on each side

Font: 12 point font

Spacing: Double space in between paragraphs Paragraph Height: Maximum of 1 ½ inches

Bullet points: Acceptable

Narrative Headings - Use these 7 (seven) headings in the order listed:

1) Organization: Briefly describe your organization's mission and programs. (maximum of 2 sentences)

2) <u>Population to be Served</u>. Provide an estimated UNDUPLICATED number and age range of the eligible individuals you propose to serve.

- ➤ If the projections are an increase over the current volume, provide information on current volume (percentages can only be used if accompanied with figures, i.e. 20% over 500).
- 3) <u>Program/Project</u>: Describe using specific information in layman terms, & plans for sustainability.

> (Acronyms must be explained in the narrative and budgets.)

- 4) Goals & Objectives: Separately list each goal with corresponding objective, and specifically describe how the goal will be accomplished through the objective.
- 5) Outreach: For new, expansion, or existing program/project:
 - Describe how your organization will market the program/project to the community you propose to serve.
 - Provide an estimated UNDUPLICATED number of group/individuals who will be new participants
 - > Provide UNDUPLICATED numbers for existing participants/groups/individuals.
- 6) <u>Evaluation</u>: Provide information on how and/or what the following measures are that will be used to evaluate the program/project (**note**: pre/post-tests are not acceptable):
 - Process Measures extent to how the program/project will be implemented
 - Outcome Measures effectiveness in meeting goals and objectives
- 7) Cost. Total cost of the program/project, amount requested, and plans for future support.

(C) These 7 (seven) items must be attached to each of the 4 (four) sets of the proposal narrative

- Staff Describe the qualifications of the staff or volunteers who will oversee and coordinate the program/project
- 2) Board of Directors List of Board members with their professional or business affiliation.
 - Percent who actively participate in activities and attend meetings
- 3) Endorsement Letters Two letters endorsing the activity

(The following items require Start & End date that includes: month, day and year):

- 4) Project/Program Budget
 - > List all revenue (funding sources) and expenses for the project or program.
- 5) Organization's Operating Budget Current Fiscal Year
 - If funding is for support during the following fiscal year, <u>also</u> provide a DRAFT of Operating Budget for such year.
- 6) Income Statement Recently Completed Fiscal Year
- 7) Current Balance Sheet (not older than three months)

(D) IRS, Charters, By-Laws, Articles of Incorporation

Provide 1 (one) copy only of each of the following:

- IRS Internal Revenue Service determination letter advising the organization is tax-exempt under Section 501(c)(3) of the Code and is considered a public charity.
- Charter & By-Laws
- Articles of Incorporation if applicable.

The proposal is to be sent to the following mailing address:

Postal Deliveries

G. N. Wilcox Trust c/o Bank of Hawaii, Trustee Charitable Foundation Services #758 P. O. Box 3170 Honolulu, Hawaii 96802-3170

Overnight Deliveries

G. N. Wilcox Trust c/o Bank of Hawaii Charitable Foundation Services #758 130 Merchant Street, Room 530 Honolulu, Hawaii 96813

Due to security measures hand-delivered proposals are strongly discouraged.

There may be times due to unforeseen circumstances or unusually high volume, that a request may not be reviewed in time for the intended project. An average of 90 - 120 days is required to process a proposal, allowing for a possible site visit and for studying the proposal in relation to other activities of the Foundation.

Applicants will be notified in writing of the action taken on their requests. The recipient of a grant will be required to submit a narrative report specific to the Foundation's Reporting Guidelines on what has been accomplished as a result of the grant, and a fiscal accounting of the grant expenditures.

The Foundation receives more requests for assistance than its funds permit supporting. However, normally, all applications are considered, and each is acted upon according to its current and projected relative merit, provided it is in keeping with the deed of trust.

NOTE: Although not ordinarily required, an audited financial statement may be requested if circumstances warrant.

Contact Information for the G. N. Wilcox Trust:

Paula Boyce, AVP & Grants Administration Officer Phone: (808) 694-4945 Fax: (808) 694-4006 Email address: paula.boyce@boh.com

Elaine Moniz, Trust Specialist

Phone: (808) 694-4944 Fax: (808) 694-4006 Email address: elaine.moniz@boh.com

Toll-free from Neighbor Islands 1-800-272-7262

G. N. Wilcox Trust Bank of Hawaii, Trustee

Funding Request Cover Sheet (General Operating)

(TYPE all information, except for signatures, and submit with your request for funding.)

Date	
(Must be a 501 (c) (3)	on Information tax-exempt organization) ames of collaborating agencies on a separate sheet.)
Name:	
Complete Address:	
Phone: Fax:	Email:
BOARD MEMB	BER INFORMATION
No. of Board Members: Pe	ercent (%) of Financial Participation:
Total Contribution During Fiscal Year: (Check One: Past or Current FY)	Median Gift: Average Gift:
Contact	Information
Name: Title:	
Address:	•
Phone: Email: _	
Project	Information
Project Title:	
Amount requested: \$	
Two signatu	res are required
Executive Director (Chief Compensated Staff)	Board Chair or President (Chief volunteer)
Print or Type Name and Title	Print or Type Name and Title

RETURN OF PRIVATE FOUNDATION FORM 990-PF

FYE	EIN	NAME	TAX DUE
12/31/2013	99-6002445	GEORGE N. WILCOX GENERAL TRUST	0.00
3/31/2014	94-3275357	DAVID C & ALTHA B HUNTER CHARITABLE TRUST	0.00
12/31/2013	99-6002441	ELSIE H. WILCOX FOUNDATION	0.00
12/31/2013	94-3276214	GARMAR FOUDATION	0.00
3/31/2014	94-3275323	ARTHUR H. ABERNETHY TRUST	0.00
12/31/2013	99-6003321	SAMUEL N. & MARY CASTLE FOUNDATION	0.00
3/31/2013	99-6089401	TOYO SAKUMOTO CHARITABLE TRUST	0.00
FOR IRS			

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

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

OMB No. 1545-1709

nternal Hew	enue Service	miorination about Form 8860	and its i	nstructions is at www.irs.gov/iom	10000.		
If you	are filing for an Aut	omatic 3-Month Extension, complete	e only Par	rt I and check this box		*************************************	▶ X
•	-	ditional (Not Automatic) 3-Month Ext	•		this form).		-
•	-	less you have already been granted a	•			m 8868.	
		ou can electronically file Form 8868 if ye			-		progration
		or an additional (not automatic) 3-mon			•		
		ns listed in Part I or Part II with the exc					
		which must be sent to the IRS in paper					
		lick on e-file for Chanties & Nonprofits.		good mondomonoj. For more detaile e		aronio ilining or an	
Part I		c 3-Month Extension of Time		ubmit original (no copies ne	eded).	 	
		e Form 990-T and requesting an autom		·			
Part I on	•	- ,					
	•	dıng 1120-C filers), partnerships, REMI	ICs and ti	 Justs must use Form 7004 to reques	t an extens	sion of time	
to file inc	come tax returns.	ang 1720 o moroy, pararorampo, 1721vii		asis mast ase roim roof to reques		<u>r's identifying </u>	number
Type or	Name of exemp	ot organization or other filer, see instruc	ctions			identification ni	
print	, value of exemp	or organization of other mor, ood more	J.10110.		Linployer	identification in	ambor (Eliv) or
Pilli	GEORGE 1	. WILCOX GENERAL TR	RUST			99-6002	445
File by the due date fo	N	, and room or suite no. If a P O. box, se		tions.	Social sec	curity number (S	
filing your	•	OX 3170, DEPT. 715				,	,
return See instructions		ost office, state, and ZIP code. For a fo	reign add	ress, see instructions.			
	•	J, HI 96802-3170	- 3				
Enter the	e Return code for t	he return that this application is for (file	a separa	te application for each return)			0 4
						•	(
Applica	tion		Return	Application			Return
Is For			Code	Is For			Code
	0 or Form 990-EZ		01	Form 990-T (corporation)			07
Form 99			02	Form 1041-A			08
	20 (individual)		03	Form 4720 (other than individual)			09
Form 99			04	Form 5227			10
Form 99	0-T (sec. 401(a) or	408(a) trust)	05	Form 6069			11
	0-T (trust other tha		06	Form 8870			12
		BANK OF HAWAII					
• The b	ooks are in the cai	e of ▶ 130 MERCHANT ST	TREET	- HONOLULU, HI 96	813		
		3-694-4525		Fax No. ▶			
		not have an office or place of business	s in the Ur	·			
		um, enter the organization's four digit			If this is foi	the whole arou	ip. check this
box 🕨	. If it is for pa	rt of the group, check this box	and atta	ch a list with the names and ElNs o	f all memb	ers the extension	on is for.
		ic 3-month (6 months for a corporation					
	AUGUST 1			tion return for the organization nam		The extension	
ıs	for the organization	·	.				
	Calendar yea						
•	tax year begi		. an	d endina			
_			,			_ ·	
2 If	the tax vear entere	d in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retur	n	
_ [Change in acco				,		
3a If		or Forms 990-BL, 990-PF, 990-T, 4720,	or 6069.	enter the tentative tax, less any			
	· ·	s See instructions.	, 0000,	and to the tornaire tan 1600 any	3a	\$	18,120.
_		or Forms 990-PF, 990-T, 4720, or 6069	enter an	v refundable credits and	Ja	Ψ	
		ints made. Include any prior year overp		*	26	s	9,320.
		act line 3b from line 3a. Include your pa			3b	Ψ	2,320.
		ctronic Federal Tax Payment System).	-	• •	اما		8,800.
					3c	- Del Form 9070 F	
Instructi		o make an electronic funds withdrawal	lanect de	bid with this Form 8	5433.EU ai	14 FUIII 00/9-E	o ioi payinent

Form 8868 (Rev. 1-2014)		·			Page 2
If you are filing for an Additional (Not Automatic) 3-Mont	h Extension, c	omplete only Part II and check this	box		$\triangleright \mathbf{X}$
Note. Only complete Part II if you have already been granted	an automatic	3-month extension on a previously fil	led Form 8	868.	
If you are filing for an Automatic 3-Month Extension, cor					
Part II Additional (Not Automatic) 3-Mont	th Extension	n of Time. Only file the origin	al (no co	pies ne	eded)
		Enter filer's	dentifying	number	see instructions
Type or Name of exempt organization or other filer, see in	Name of exempt organization or other filer, see instructions. Employer identification number				on number (EIN) or
print					
File by the GEORGE N. WILCOX GENERAL				99-6	002445
due date for Number, street, and room or suite no. If a P.O. b	•	tions.	Social sec	unty num	ber (SSN)
return See P. O. BOX 3170, DEPT. 715					
City, town or post office, state, and ZIP code. Fo	or a foreign add	ress, see instructions.			
HONOLULU, HI 96802-3170					
Enter the Return code for the return that this application is for	or (file a separa	te application for each return)			0 4
		r			
Application	Return	Application			Return
<u>Is For</u>	Code	Is For			Code
Form 990 or Form 990-EZ	01	F 1041 A			
Form 990-BL Form 4720 (individual)	02	Form 1041-A Form 4720 (other than individual)			08
Form 990-PF	03	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069		-	11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already gra			iously file	d Form 8	
BANK OF HAWA					
• The books are in the care of ▶ 130 MERCHANT		- HONOLULU, HI 96	813		
Telephone No. ► 808-694-4525		Fax No. ▶			
If the organization does not have an office or place of bu	— siness in the Ui	nited States, check this box			ightharpoons
• If this is for a Group Return, enter the organization's four	digit Group Ex	emption Number (GEN)	If this is foi	the whole	group, check this
box ▶ If it is for part of the group, check this box ▶	and atta	ach a list with the names and EINs o	f all memb	ers the ex	tension is for.
4 I request an additional 3-month extension of time unti		BER 15, 2014.			
5 For calendar year 2013 , or other tax year beginning	g	, and endir	ng		<u> </u>
6 If the tax year entered in line 5 is for less than 12 mon	ths, check reas	son: Initial return	Final r	eturn	
Change in accounting period					
7 State in detail why you need the extension					
ADDITIONAL TIME IS NEEDED T		R THE INFORMATION	NECES	SARY	TO FILE A
COMPLETE AND ACCURATE RETUR	<u>KN</u>				
2 Kills - Laster (a. 5. 000 DL 000 DE 000 T	4700 0000				
8a If this application is for Forms 990-BL, 990-PF, 990-T,	4720, or 6069,	enter the tentative tax, less any		_	10 120
nonrefundable credits. See instructions.	.6060		8a	\$	18,120.
b If this application is for Forms 990-PF, 990-T, 4720, or tax payments made. Include any prior year overpaym		•			
previously with Form 8868.	ent allowed as	a credit and any amount paid	- Ob	\$	18,120.
C Balance due. Subtract line 8b from line 8a. Include you	our navment w	th this form if required by using	8b	3	10,120.
EFTPS (Electronic Federal Tax Payment System). See		in this form, if required, by using	8c	\$	0.
·		st be completed for Part II		Ψ	
Under penalties of perjury, I declare that I have examined this form,		-	_	f my knowl	edge and helief
it is true, correct, and complete, and that I am authorized to prepare	this form.	panying conceans and statements, and		•	
	e >		Date	► Al	IG 1 1 2014
/Vice President)				n 8868 (Rev. 1-2014)
/ V.C.3 FIRSIGENT				. 511	