

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



efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493127023055

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		2013 cal pplicable	C Name of organization	ng 07-01-2013 , 2013, and ending 06-	30-2014	D Employ	yer ider	ntification number
_	dress ch		'IOLANI SCHOOL			99-00	73502	<u>)</u>
— _{Na}	me cha	nge	Doing Business As				, , , , ,	
— Ind	tıal retu	rn	Number and street (or P O box if i	mail is not delivered to street address) Room/s	suite	E Telepho	ne numl	her
Te	rmınate	d	563 KAMOKU STREET Suite				949-5	
— Am	nended	return	City or town, state or province, cou HONOLULU, HI 96826	untry, and ZIP or foreign postal code		(808)	949-3	355
Ap	plication	n pending				G Gross re	eceipts \$	118,838,683
			F Name and address of pri	ncıpal officer		s this a group	return	
			REID GUSHIKEN 563 KAMOKU STREET		s	subordinates?		Γ Yes Γ No
			HONOLULU, HI 96826		1	re all subordi	nates	┌ Yes ┌ No
r Ta	ıx-exem	npt status	✓ 501(c)(3)	(insert no)	_	ncluded? f "No " attach	a lict	(see instructions)
		<u> </u>	w iolani org	(IIISCICITO) 4347(d)(1) 01 327				
					1 11(-)	Group exempt		
			Corporation Trust Association	on ○ Other ►	L Year	of formation 194	42 M	State of legal domicile HI
Pa	rt I		nmary					
Governance	'	'IOLANI	I SCHOOL IS A COLLEGE-PRE	ion or most significant activities P SCHOOL FOR GRADES K-12 WHO /ELL PREPARED FOR COLLEGE	SE MISSIO	ON IS TO DEV	'ELOP	EDUCATED, WELL-
Ē								
<u> </u>	2	Check th	his box 🔭 if the organization d	iscontinued its operations or disposed	of more th	an 25% of its	net as:	sets
	l							
ACTIVITIES &			-	ning body (Part VI, line 1a)			3 4	22
Ě				calendar year 2013 (Part V, line 2a)			5	1,174
<u> </u>				necessary)			6	4,453
•			·	Part VIII, column (C), line 12			7a	0
	1			from Form 990-T, line 34			7b	
						Prior Year	Т	Current Year
	8	Contri	ibutions and grants (Part VIII, I	ıne 1h)		3,529,0	80	3,700,404
Revenue	9	Progra	am service revenue (Part VIII, l		36,677,6	18	40,057,001	
e.Ke	10	Invest	tment income (Part VIII, colum		11,840,5	78	10,068,227	
茁	11			, lines 5, 6d, 8c, 9c, 10c, and 11e)		-1,459,2	38	-1,022,679
	12			1 (must equal Part VIII, column (A), lı • • • • • • • • • •	ne	50,588,0	38	52,802,953
	13			t IX, column (A), lines 1–3)		3,297,5	-	3,654,210
	14		·	IX, column (A), line 4)		· · ·	0	0
	15			ree benefits (Part IX, column (A), lines				
Expenses	l.,	5-10)	•			30,924,2	_	33,382,957
<u>₹</u>	16a			, column (A), line 11e)	•		0	0
五	b		undraising expenses (Part IX, column (E			44.020.0		45.456.737
	17			lines 11a-11d, 11f-24e)		11,929,0		15,456,727
	18 19			ust equal Part IX, column (A), line 25)		46,150,9 4,437,0		52,493,894
× %	1.5	Nevell	ac 1000 expenses oubtract fille	. TO HOME MICE TO THE TELESCOPE		nning of Curre		
Net Assets or Fund Balances						Year	\perp	End of Year
2 48 18 18 18 18 18 18 18 18 18 18 18 18 18 1	20				<u> </u>	261,060,4		275,754,072
# E	21					61,130,5		56,756,410
	22			t line 21 from line 20		199,929,8	64	218,997,662
Jnde ny k	nowled	alties of dge and		camined this return, including accompa mplete Declaration of preparer (other				
Sigr	1	Signa	ature of officer			Date		
Her			O GUSHIKEN CFO					
		Туре	e or print name and title					
_			Print/Type preparer's name RACHEL C ANTAL	Preparer's signature	Date 2015-05-06	Check if self-employed	PTIN P01263	
Paid		F	Firm's name F KPMG LLP	1		Firm's EIN 🟲		
	pare		Firm's address 1002 Birking Charles Co	to 2100		Dhone no (000)	. 042.22	200
Use	• Onl	ly ∣⁵	Firm's address 🟲 1003 Bishop Street Su	RE ∠100		Phone no (808)	943-22	נטא

Honolulu, HI 96813

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

✓ Yes No

Form	990 (2	2013) Pa	age 2
Par	31111		<u>.</u> [
1	Briefl	y describe the organization's mission	
roote mona reloc 'Iolar appro coacl	d in thi rchy di ated I r ni has r eximate nes, an	Founded in 1863 after King Kamehameha IV and Queen Emma set out to establish an Anglican Church in Hawaii The school in ree small schools - a Lahaina School on the island of Maui, St. Alban's College and 'Iolani College - formed duiring Hawaii's ays. The school's campus was once located on the grounds of St. Andrew's Cathedral, moved to Nu'uanu, and then finally in 1946 to its present 25-acre property. 'Iolani was originally an all-boys school, BUT became co-educational in 1979. Today more than 10,310 living alumni around the world. There are approximately 306 full-time faculty and staff dedicated to sely 1,880 students from diverse backgrounds enrolled in grades k - 12. Roughly 700 part-time or seasonal teachers, aides, distaff supplement the school's expansive after-school, summer, performing arts, athletic and extra-curricular programs. Dur, students from throughout the state and around the wo	′,
2		e organization undertake any significant program services during the year which were not listed on nor Form 990 or 990-EZ?	
	If"Ye	s," describe these new services on Schedule O	
3	servic		
4	Descr expen	s," describe these changes on Schedule O The the organization's program service accomplishments for each of its three largest program services, as measured by Ses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, tal expenses, and revenue, if any, for each program service reported	
4a	(Code	e) (Expenses \$ 38,450,799 including grants of \$ 3,725,668) (Revenue \$ 36,926,628)	
	Increa Cente effect make a come educa covers tuition year o priorit that ti stay a to coll Renev Foreig and A studei devele Invita Econo in the Science colleg	is School is a private school yet serves the public purpose of reaching out the community as well as being a resource for other organizations. The school is singly becoming more global as students are connected by technology to other parts of the world. In the fall of 2013, the school opened the new Sullivan or for Innovation and Leadership, a four-story, 40,000 square foot green designed building offering collaborative learning spaces where students learn to be live leaders through courses emphasizing empathy, interpersonal communication and real-world problem solving. The building includes a fabrication lab are repacted, a library with collaboration rooms, flexible open learning spaces, a wet lab, a media center, a seminar room, and a rooftop garden. The center is immunity resource for VARIOUS LOCAL AND NATIONAL groups. 'Iolani upholds high standards of academic excellence AND is considered AMONGST THE titional leaders in Hawaii and AROUND the world. The school maintains a healthy financial portfolio and attempts to keep tuition as low as possible. Tuttons a SPPROXIMATELY 75% of the cost of educating A child with interest income from the school's endowment and fundraising covering the difference between and the actual cost. In the 2013-14 school year, 'Iolani provided APPROXIMATELY \$3.7 million in financial aid to qualifying families. 2013-14 was the sec of the school-wide One to One iPad Initative. The school's faculty is also highly qualified and committed to their students with relational teaching a high y. The school also established the Education Innovation Lab which aims to provide ongoing professional development and learning opportunities for facult hey may continue to engage and inspire students with 21st century applications. Teachers are encouraged to attend conferences either locally or nationall abreast of current and effective pedagogies. 2013-14 was the first year of full implementation of the 1-Department, which provides students with electives lege-level courses that inspire innovation and en	noe nod ns also n en cond ey so ly to s akin n, ence ort es for ondon tional eaders
4b	all sch prepa Asia to addition Depar discipl travel	(Expenses \$ 4,497,249 including grants of \$) (Revenue \$ 3,042,699) I offers an extensive summer and after school program with reinforcement, enrichment, elective and credit courses. These courses are open to students frools and are available on a first come first serve registration basis. From dance, physical education, art, math, reading, robotics, video game design, SAT ration classes, more than 3,500 STUDENTS enroll each year IN 'IOLANI'S SUMMER AND SPECIAL PROGRAMS. Many students come from the U.S. mainland of enroll their children in 'Iolani's summer programs, which employs teachers who are employed by 'Iolani, other independent schools, and public schools from the KA'I PROGRAM is a summer mentoring partnership between 'Iolani and Jarrett Middle School, a neighboring public middle school. The Performing timent at 'Iolani offers orchestra, dance (hula, ballet, jazz), stage band, marching band, jazz band, theater, musical theater, and choir. These different lines showcase their students' abilities through performances held either on campus or at theaters and other venues in the community. These groups also to the mainland and foreign countries to perform. A fall play and spring musical are presented each year and auditions are open to all students in Upper and, if required by the production, the Lower School. Guest artists/teachers visit the school through sponsorship under the Tam & Young Arts Chair.	d and In Arts
4c	(Code	e) (Expenses \$ 1,802,177 including grants of \$) (Revenue \$ 87,674)	

'Iolanı is a member of the Interscholastic League of Honolulu (ILH) All participants are expected to fulfill all athletic requirements, to display good sportsmanship, and to follow the program set forth by coaches and the athletic department. There are 17 varsity sports for boys and girls, as well as many sports in the junior varsity and intermediate grade levels. In 2013-14, 948 students, or 71 3%, of the student body in grades seven through twelve participated in athletic programs 'Iolani won six ILH championships and two state championships. For the lower grade levels, 'Iolani participates in the Christian Schools Athletic League for basketball and baseball. There are also opportunities for youngsters to participate in intramural sports. The campus hosts numerous athletic tournaments and sporting games, which schools and teams from across the state and around the world participate in Some examples of how the school shares its resources include the 'Iolani Classic Basketball Tournament, State Forensics Tournament, 'Iolani Invitational Cross Country Meet, Hawaii Educational Summit, and many more

including grants of \$ (Code) (Expenses \$ 1,356,491) (Revenue \$ COLLEGE COUNSELING

) (Revenue \$

Other program services (Describe in Schedule O)

(Expenses \$ 1,356,491 including grants of \$

46,106,716 4e Total program service expenses ▶

art IV	Checklist of	Required	Schedules

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

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \blacksquare	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

GI I	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	. J No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 119		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
3	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
)	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	_	1	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make any taxable distributions under section 49667	9a 9b		
	Section 501(c)(7) organizations. Enter	טפ		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	_		
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	[
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

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

Check if Schedule O contains a response or note to any line in this Part VI							▽

36	ction A. Governing body and management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax 1a 22			
	year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any		V	
3	other officer, director, trustee, or key employee?	3	Yes	N o
4	supervision of officers, directors or trustees, or key employees to a management company or other person? . Did the organization make any significant changes to its governing documents since the prior Form 990 was	3		NO
7	filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		Νo
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Νo
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Cod	e.)
	· · · · · · · · · · · · · · · · · · ·		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
L	Describe in Schedule O the process, if any, used by the organization to review this Form 990	114	105	
		42-	V	
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed►HI			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			

- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website V Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►WEI LEE-YONAMINE 563 KAMOKU STREET HONOLULU, HI 96826 (808) 949-5355

Form 990	(2013	
----------	-------	--

_				_
D	-	α	Δ	4
г	a	ч	_	•

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	(A) Name and Title	(B) Average hours per week (list any hours	more t	tion (han d n is	ne l both	box, an c			Repor comper from organiza	table isation the tion (W-	(E) Reportable compensation from related organizations (W	- '	(F) Estima mount o compens from t	ted f other ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
								Ļ						
1b c	Sub-Total		 ection /	٠.	•			*						
d	Total (add lines 1b and 1c) .			· ·	٠.	٠.		Þ		1,485,665		0		252,605
2	Total number of individuals (in \$100,000 of reportable comp						d abov	e) w	ho receive	d more th	an			
													Yes	No
3	Did the organization list any f						emplo	yee	, or highes	t compen	sated employee [
4	on line 1a? <i>If "Yes," complete S</i> For any individual listed on lin					•		•				3		No
4	organization and related organ													
5	Did any person listed on line 1	· · · · · · · · · · · · · · · · · · ·	rue coi	npen	• satı	• on fr	om an	• y unr	· · related org	anızatıon	or individual for	4	Yes	
	services rendered to the organ			-					_			5		No
Se	ection B. Independent Co	ontractors												
1	Complete this table for your fire compensation from the organization												tax vear	
		(A) Name and business						, ,			(B) cription of services		(C Comper)
												+	T. T.	
												\perp		
	Total number of independent co \$100,000 of compensation fror			not	lımıt	ed to	thos	e list	ted above)	who rece	ived more than			

4	
둪	
Š	
Ť	
<u>a</u>	
₽	
0	
0	
0	
0	
0	
0	

Part V	ДÙ	Statement of Revenue								
		Check If Sched	ule O contains a respo	nse or note to any lir						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
2 2	1a	Federated cam	ipaigns 1a							
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership di	ues 1b							
المِ ق	c	Fundraising ev	ents 1c	610,584						
iffs, ar A	d	Related organi	zations 1d							
n :	e	Government grant	ts (contributions) 1e							
Sir	f	All other contributi	ions, gifts, grants, and 1f	3,089,820						
uti je je	'	similar amounts n								
를등	g	Noncash contribut	ions included in lines	389,741						
) In di	h	Total. Add line	s 1 a - 1 f		3,700,404					
				Business Code						
Program Serwce Revenue	2a	TUITION & FEES		900099	36,926,628	36,926,628				
e ve	ь	SUMMER SCHOOL		900099	2,490,387	2,490,387				
o G		SPECIAL PROGRAM	-	900099	552,312	552,312				
rwc	d	ATHLETIC/FACILIT		900099	87,674	87,674				
38	e			300033	57,67	0,,0,,				
<u> </u>	f	All other progra	am service revenue							
્રે										
			s 2a-2f		40,057,001			<u> </u>		
	3		come (including dividen lar amounts)		3,751,817			3,751,817		
	4	Income from inve	stment of tax-exempt bond	proceeds 🕨	0					
	5	Royalties .		▶	0					
	_		(ı) Real	(II) Personal						
	6a b	Gross rents Less rental	2,779,054 3,779,313							
	"	expenses	, ,							
	°	Rental income or (loss)	-1,000,259	0						
	d	Net rental inco	me or (loss)	· · · · · · · · · · · · · · · · · · ·	-1,000,259			-1,000,259		
	7a	Gross amount	(ı) Securities	(II) O ther						
	''	from sales of assets other than inventory	67,256,595	132,636						
	Ь	Less cost or other basis and	61,070,619	2,202						
	c	sales expenses Gaın or (loss)	6,185,976	130,434						
	d	, ,	ss)	<u> </u>	6,316,410			6,316,410		
Other Revenue	8a	events (not inc \$610	0,584 s reported on line 1c) ne 18							
<u>.</u>			a	696,394						
뜑	b c		(loss) from fundraising		-287,619			-287,619		
•	9a	Gross income	from gaming activities ne 19	events p-	207,015			207,013		
	.		a							
	b c		(penses b (loss) from gaming acti		0					
		Gross sales of		VICES 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
		returns and all								
			a	274,438						
	b	_	oods sold b	199,583	74 955			74 955		
	С	Net income or Miscellaneou	(loss) from sales of inv	entory p - Business Code	74,855			74,855		
	11a	THRIFT SHOP		900099	99,751			99,751		
	ь	CAFETERIA	GOTHER	900099	90,086			90,086		
		TENNIS SHOP	D & VENDING	900099	507			507		
	d	All other reven								
	e		s 11a-11d	>						
	12		See Instructions .	.	190,344			 		
	1	. o.u. revellue.	220 INSU 4000013 .	📂	52 802 953	40 057 001		9 045 548		

Part IX Statement of Functional Expenses

	section 501(c)(3) and 501(c)(4) o	rganizations must complete all columns	All other organizations must complete column (A	()
--	-----------------------------------	--	---	----

	on 501(c)(3) and 501(c)(4) organizations must complete all columns. All	_	•	iete column (A)	
	Check if Schedule O contains a response or note to any line in this		 (B)		<u> </u> (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	3,654,210	3,654,210		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	884,192	136,153	611,886	136,153
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	24,213,118	22,460,027	902,357	850,734
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,119,661	1,864,372	252,276	3,013
9	Other employee benefits	4,250,587	3,869,498	84,115	296,974
10	Payroll taxes	1,915,399	1,589,330	324,813	1,256
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	76,859		76,859	
c	Accounting	109,869		109,869	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	1,142,240		1,142,240	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	161,397		161,397	
12	Advertising and promotion	39,608		39,413	195
13	Office expenses	1,855,396	1,276,917	258,508	319,971
	Information technology			238,308	· · · · · · · · · · · · · · · · · · ·
14 15	Royalties	423,204	411,059		12,145
	·		1 610 526	17.750	17.150
16	Occupancy	1,653,454	1,618,536		17,159
17	Travel	482,917	388,773	80,386	13,758
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	780,007	763,812	8,098	8,097
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,989,996	3,882,582	53,707	53,707
23	Insurance	773,610	670,210	103,400	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	MEMBERSHIP DUES	293,756	249,189	39,290	5,277
b	REPAIRS/RENEWALS	788,681	772,305	8,188	8,188
c	BUILDINGS/GROUNDS	400,736	392,416	4,160	4,160
d	ATHLETICS	459,372	459,372		
e	All other expenses	2,025,625	1,647,955	183,772	193,898
25	Total functional expenses. Add lines 1 through 24e	52,493,894	46,106,716	4,462,493	1,924,685
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	τχ	Check if Schedule O contains a response or note to any line ii	n this l	Part X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			1,300	1	1,300
	2	Savings and temporary cash investments			11,336,717	2	5,461,493
	3	Pledges and grants receivable, net			1,733,578	3	1,030,274
	4	Accounts receivable, net			85,844	4	89,861
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete Eschedule L	of	o	5	0	
Assets	6	Loans and other receivables from other disqualified persons ($4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary organizations (see instructions) Complete Part II of Schedule	ibuting employers	0		0	
20	7	Notes and loans receivable, net			0	7	
₹	8	Inventories for sale or use			136,508		135,147
	9	Prepaid expenses and deferred charges			1,121,450		1,104,591
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	 10a	140,713,577	1,121,400	-	1,104,001
	ь	Less accumulated depreciation	10b	50,194,762	87,416,212	10c	90,518,815
	11	Investments—publicly traded securities		<u> </u>	155,962,847	11	174,259,618
	12	Investments—other securities See Part IV, line 11			0	12	0
	13	Investments—program-related See Part IV, line 11			0		0
	14	Intangible assets			0		0
	15	Other assets See Part IV, line 11			3,265,950		3,152,973
	16	Total assets. Add lines 1 through 15 (must equal line 34).			261,060,406	_	275,754,072
	17	Accounts payable and accrued expenses			6,905,128		5,404,346
	18	Grants payable			0	18	0
	19	Deferred revenue			2,982,086		3,296,726
	20	Tax-exempt bond liabilities			0	20	0,288,728
	21	Escrow or custodial account liability Complete Part IV of Sci		0	21		
<u>ie</u> s	22	Loans and other payables to current and former officers, direc		0	21		
Liabiliti		key employees, highest compensated employees, and disqua	lıfıed				
<u> </u>		persons Complete Part II of Schedule L			0	22	0
_	23	Secured mortgages and notes payable to unrelated third part			40,319,964	23	37,350,464
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to rel and other liabilities not included on lines 17-24) Complete P D	art X	of Schedule	10,923,364	25	10,704,874
	26	Total liabilities. Add lines 17 through 25			61,130,542	26	56,756,410
—— Ф	20	Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.			31,110,101	20	
Fund Balance	27	Unrestricted net assets	_		161,319,177	27	176,461,727
<u>छ</u>	28	Temporarily restricted net assets			17,959,658	28	21,069,522
<u> </u>	29	Permanently restricted net assets			20,651,029	29	21,466,413
Ĭ		Organizations that do not follow SFAS 117 (ASC 958), check			25,551,525		2., .55, 415
		complete lines 30 through 34.	F	, wild			
s or	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
AS:	32	Retained earnings, endowment, accumulated income, or other				32	
Net '	33	Total net assets or fund balances			199,929,864	33	218,997,662
Ź	34	Total liabilities and net assets/fund balances			261,060,406	34	275,754,072
	<u>. </u>	. 1 1			231,000,400	5 7	2. 3,734,372

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		52,8	302,953
2	Total expenses (must equal Part IX, column (A), line 25)	2		F 2 /	193,894
3	Revenue less expenses Subtract line 2 from line 1			32,5	193,094
_		3		3	309,059
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		199,9	29,864
5	Net unrealized gains (losses) on investments	5		104	:05.022
6	Donated services and use of facilities	3		10,0	505,922
Ū		6			
7	Investment expenses	7			
8	Prior period adjustments	_			
9	Other changes in net assets or fund balances (explain in Schedule O)	8			
,	Ctief Changes in het assets of fund Darances (explain in Schedule O)	9		1	52,817
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		218.9	97,662
Par	t XII Financial Statements and Reporting				,
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed or	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				1
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	1e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: Software Version:

> **EIN:** 99-0073502 Name: 'IOLANI SCHOOL

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation Compensated Employees, and Inde	pendent Cor	pirect	ors, ers	ıru	ste	es, r	cey	Employees, Higi	nest	
(A) Name and Title A verage hours per week (list any hours for related		(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		_,,	related organizations
Cathy Bell	1 0	,				<u> </u>				
Member of Board of Governors Earl M Ching	0 0	Х						0	0	0
Member of Board of Governors	1 0	х						0	0	0
Thomas B Fargo	1 0	х						0	0	0
Member of Board of Governors Mufi Hannemann	0 0	-								
Member of Board of Governors	0 0	Х						0	0	0
Warren H Harukı	1 0	х						0	0	0
Member of Board of Governors David C Hulihee	0 0									
Member of Board of Governors	0 0	Х						0	0	0
Melvin Kaneshige	1 0	х						0	0	0
Member of Board of Governors James Kawashima	0 0	<u> </u>						_		
Member of Board of Governors	0 0	Х						0	0	0
Bill D Mills Member of Board of Governors	1 0	х						0	0	0
Calvin S Oishi	1 0	x						0	0	0
Member of Board of Governors Russell K Saito	0.0							0	0	
Member of Board of Governors	10	x						0	0	0
Lisa MK Sakamoto	1 0	x						0	0	0
Member of Board of Governors Donald M Takakı	0 0									
Member of Board of Governors	0 0	X						0	0	0
Peter Tomozawa	1 0	х						0	0	0
Member of Board of Governors Mark H Yamakawa	0 0									
Member of Board of Governors	0 0	Х						0	0	0
RIGHT REV ROBERT L FITZPATRICK	1 0	х						0	0	0
Member of Board of Governors Guy Kamıtakı	0 0									
Member of Board of Governors	0 0	Х						0	0	0
Jenai S Wall	1 0	x		Х				0	0	0
Board of Governors Chairman Mark M Mugiishi	0 0	<u> </u>		<u> </u>				_		
Board of Governors Vice Chairm	0 0	Х		Х				0	0	0
Donald G Horner Board of Governors Treasurer	1 0	x		х				0	0	0
Steven C Ai	1 0	X		x				0	0	0
Board of Governors Secretary	0 0							0	0	
Timothy R Cottrell Head of School	40 0	х		х				315,287	0	55,935
Stanley Y Mukai	1 0	X						0	0	0
Member of Board of Governors Dudley SJ Seto	0 0	<u> </u>					_			
Member of Board of Governors	0 0	х						0	0	0
Ken Kawahara	10	х						0	0	0
Member of Board of Governors	0 0						1			

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

(A) Name and Title	(B) A verage hours per week (list any hours	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					;	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
Glenn NCK Ching	40 0			х				174,393	0	28,626
DIR OF FINANCE/ADVISOR TO CFO	0 0			l ^				171,333	,	20,020
REID GUSHIKEN	40 0			<u> </u>						42.200
CHIEF FINANCIAL OFFICER	0.0			Х				66,264	0	12,398
Val T Iwashita	40 0					\ ,		205 202	0	F2 267
ADVISOR TO HEAD OF SCHOOL	0.0					X		305,203	0	53,267
Deborah Hall	40 0					х		171,767	0	22,516
Faculty	0 0					_ ^		171,707	O .	22,310
Ann Yoneshige	40 0					х		159,648	0	21,998
Director of Special Programs	0.0					, and		133,010	Ç	
Carey Inouye	40 0					х		149,600	0	24,508
Dean of Instruction	0 0							145,000	0	24,300
Gerald M Teramae	40 0					х		143,503	0	33,357
Dean of Lower School	0 0					_ ^		143,303	Ů	33,337

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493127023055

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

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

Open to Public **Inspection**

Name of the organization 'IOLANI SCHOOL

Employer identification number

				instructions))	Yes	No	Yes	No	Yes	No			
su	ppor	ne of ted ation	organization organization in col (i) listed in your governing or IRC section (see		(v) Did you notify the organization in col (i) of your support?		(vi) Is organiza col (i) or in the l	tion in ganized	(vii) A mount of monetary support				
h		Provide	the following	ng information about	the support	ed organıza	tion(s)						
			*	lled entity of a perso			above?			11g			
		-	•	governing body of th er of a person descri		_	on ?			11g			
		(i) A p		rectly or indirectly o			_	persons de	escribed in (ii		Yes No		
f g		check	hıs box	received a written de 2006, has the organi						e III support	ing organization,		
e l	Γ	other tl section	nan foundatı ı 509(a)(2)	ox, I certify that the on managers and oth	ner than one	or more pu	blicly suppor	ted organiza	itions descri	bed in sectio	n 509(a)(1) or		
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated											
10	厂		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety See section 509(a)(4).										
		•	_	oss investment inco Janization after June				•		. tax) from bu	ısınesses		
				ities related to its ex									
			A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross										
7 8	 -	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)											
6				local government or									
		sect ion	170(b)(1)(A)(iv). (Complete P	art II)				_				
5	\sqcap			ty, and state erated for the benefit	t of a college	or univers	ity owned or o	perated by	a governmer	ntal unit desc	ribed in		
4	Γ			n organization operat	ed in conjun	ction with a	hospital des	cribed in se	ection 170(b)	(1)(A)(iii). E	nter the		
3	Γ			perative hospital se									
2	<u>~</u>			ın section 170(b)(1									
1	Γ		-	on of churches, or as	•		= :	•	-				
				e foundation becaus						IIISTructions	•		
Part		Poss	on for Du	blic Charity Sta	tue (All or	nanization	c must com	ploto thic	99-0073				

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

_Se	ection A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	2,563,993	8,821,524	3,995,592	3,229,080	3,700,4	03 22,310,592
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	2,563,993	8,821,524	3,995,592	3,229,080	3,700,4	03 22,310,592
	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included						4,222,143
	on line 1 that exceeds 2% of the amount shown on line 11, column						
6	(f) Public support. Subtract line 5 from line 4						18,088,449
	ection B. Total Support						
Cale	endar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	2,563,993	8,821,524	3,995,592	3,229,080	3,700,4	22,310,592
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	4,015,113	4,831,173	4,348,965	4,925,847	6,437,4	14 24,558,512
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	838,323	883,622	940,294	992,744	796,6	52 4,451,635
11	Total support (Add lines 7 through 10)						51,320,739
12	Gross receipts from related activities	es, etc (see instr	uctions)			12	180,576,624
13	First five years. If the Form 990 is this box and stop here						
Se	ection C. Computation of Pub						
14	Public support percentage for 2013	(line 6, column (f) divided by line	11, column (f))		14	35 246 %
15	Public support percentage for 2012	Schedule A, Par	t II, line 14			15	35 291 %
16a	33 1/3% support test—2013. If the				ne 14 is 33 1/3%	or more, chec	
	and stop here. The organization qua 33 1/3% support test—2012. If the box and stop here. The organization 10%-facts-and-circumstances test- is 10% or more, and if the organization part IV how the organization mee	organization did r n qualifies as a pu –2013. If the orga tion meets the "fa	not check a box o blicly supported inization did not d icts-and-circums	n line 13 or 16a, organization :heck a box on lir tances" test, che	ne 13, 16a, or 16 eck this box and s	b, and line 14 stop here. Expl	ain pported
b 18	organization 10%-facts-and-circumstances test- 15 is 10% or more, and if the organization Explain in Part IV how the organization Private foundation. If the organizations	nization meets the tion meets the "fa	e "facts-and-circu icts-and-circums	ımstances" test, tances" test The	check this box a e organization qu	nd stop here. alıfıes as a pub	

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt						
	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

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

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).										
	Facts And Circumstances Test									
Retu	ırn Reference	Explanation								
		Schodulo A / Form 000 o	000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493127023055

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.aov/form990.

Open to Public

lai Revenue Service		тпэре	cuon
ame of the organization DLANI SCHOOL		Employer identification num 99-0073502	nber
organizations Maintaining Donor organization answered "Yes" to Form			lete if the
	(a) Donor advised funds	(b) Funds and other acc	ounts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor a funds are the organization's property, subject to the		onor advised Ye s	s ┌ No
Did the organization inform all grantees, donors, a used only for charitable purposes and not for the b conferring impermissible private benefit?			s
rt II Conservation Easements. Comple	te if the organization answered "Yes"	to Form 990, Part IV, line 7	
Purpose(s) of conservation easements held by the Preservation of land for public use (e g , recreated Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization h	ation or education)	an historically important land are a certified historic structure	ea
easement on the last day of the tax year	leid a quaimed conservation contribution in	Title form of a conservation	
		Held at the End of t	he Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easemen	nts	2b	
Number of conservation easements on a certified	historic structure included in (a)	2c	
Number of conservation easements included in (c) historic structure listed in the National Register) acquired after 8/17/06, and not on a	2d	
Number of conservation easements modified, tran the tax year -	sferred, released, extinguished, or termina	ted by the organization during	
Number of states where property subject to conse	rvation easement is located ►		
Does the organization have a written policy regard enforcement of the conservation easements it hold	ling the periodic monitoring, inspection, ha		s ┌ No
Staff and volunteer hours devoted to monitoring, in	nspecting, and enforcing conservation eas	ements during the year	
Amount of expenses incurred in monitoring, inspe	cting, and enforcing conservation easemer	nts during the year	
▶ \$	3,		
Does each conservation easement reported on lin and section 170(h)(4)(B)(II)?	e 2(d) above satisfy the requirements of s	ection 170(h)(4)(B)(i)	s ┌ No
In Part XIII, describe how the organization reports balance sheet, and include, if applicable, the text of the organization's accounting for conservation eas	of the footnote to the organization's financi		
rt IIII Organizations Maintaining Collect Complete if the organization answere		, or Other Similar Assets	•
If the organization elected, as permitted under SF, works of art, historical treasures, or other similar a service, provide, in Part XIII, the text of the footn	assets held for public exhibition, education	n, or research in furtherance of p	
If the organization elected, as permitted under SF, works of art, historical treasures, or other similar service, provide the following amounts relating to	AS 116 (ASC 958), to report in its revenu assets held for public exhibition, educatior	e statement and balance sheet	ublic
(i) Revenues included in Form 990, Part VIII, line	e 1	► \$	
(ii) Assets included in Form 990, Part X		▶ \$	
If the organization received or held works of art, his following amounts required to be reported under S		for financial gain, provide the	
Revenues included in Form 990, Part VIII, line 1		> \$	
Assets included in Form 990, Part X		·	
ADDECO METAGEA IN FORM DOUBLE		- →	

Part	Organizations Maintaining Co	llections of Art	t, His	torical 1	<u> Treasu</u> i	res, or O	<u>ther</u>	Similar As	sets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other recor	ds, cl	neck any o	f the follo	wing that a	re a s	significant use	of its	
а	Public exhibition		d	┌ Loai	n or exch	ange progra	ams			
b	Scholarly research		e	┌ Oth	er					
c	Preservation for future generations									
4	Provide a description of the organization's c Part XIII	ollections and expla	ıın hov	w they furtl	her the o	rganızatıon	's exe	empt purpose	ın	
5	During the year, did the organization solicit	or receive donations	sofar	t, historica	al treasuı	es or other	sımı	lar	_	_
	assets to be sold to raise funds rather than								☐ Yes	│ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					answered	d "Ye	s" to Form S	990,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other interme	ediary	for contrib	outions o	r other ass	ets no		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	follov	wing table		_				
						<u> </u>		An	nount	
C	Beginning balance					_	1c			
d	Additions during the year					L	1d			
е	Distributions during the year					—	1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, lın	e 21?	•					┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	e expl	anation ha	s been pi	ovided in P	art X	III		Γ
Pa	rt V Endowment Funds. Complete	ıf the organızatıo	n ans	wered "Y						
		(a)Current year	(b)	Prior year			(d) Th	ree years back		ears back
1a	Beginning of year balance	144,289,471		134,282,82	_	142,899,202		119,429,867	1	10,080,827
b	Contributions	585,280		924,62	9	1,364,822		851,473		814,575
C	Net investment earnings, gains, and losses	27,455,277		17,552,98	9	-2,865,415		30,072,727		15,144,397
d	Grants or scholarships	6,027,058		5,531,97	3	4,815,783		4,454,865		4,409,932
е	Other expenditures for facilities and programs	0		2,939,00	0	2,300,000		3,000,000		2,200,000
f	Administrative expenses									
g	End of year balance	166,302,970		144,289,47		134,282,826		142,899,202	1	19,429,867
2	Provide the estimated percentage of the cur		ce (lır	ne 1g, colu	mn (a)) h	eld as				
а	Board designated or quasi-endowment 🕨	80 455 %								
b	Permanent endowment ► 12 881 %									
C	Temporarily restricted endowment ► 6 € The percentages in lines 2a, 2b, and 2c sho	664 % uld equal 100%								
3a	Are there endowment funds not in the posse	ssion of the organiz	ation	that are he	eld and a	dministered	fort	he		
	organization by								Yes	+
	(i) unrelated organizations						•	3a(No
b	(ii) related organizations							3a(No
4	Describe in Part XIII the intended uses of t	•					•		<u>, </u>	<u> </u>
	t VI Land, Buildings, and Equipme				on answ	ered 'Yes'	' to F	orm 990. Pa	rt IV. I	ne
	11a. See Form 990, Part X, line									
	Description of property			(a) Cost of basis (inve		(b) Cost or ot basis (other		(c) Accumulated depreciation	(d) Bo	ook value
1a	Land					25,471,	.588		:	25,471,588
Ь	Buildings					88,318,	250	28,899,30	9 !	59,418,941
c	Leasehold improvements									
d I	Equipment					26,740,	847	21,295,45	3	5,445,394
_ e	Other	<u> </u>	•			182,	,892			182,892
	I. Add lines 1a through 1e <i>(Column (d) must c</i>		X, colu	ımn (B), lın	e 10(c).)					90,518,815
								Schedule [) (Form 9	990) 2013

Part VII Investments—Other Securities. Co	omplete if the organization	answered 'Yes' to Form 990, Part IV, line 11
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	Complete if the organizatio	on answered 'Yes' to Form 990, Part IV, line 1
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Table (California (b) annabarra (Earra 2000, Bart V, an (40) (bart 42)	>	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organizati		
(a) Desc		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line		
Part X Other Liabilities. Complete if the org	ganization answered 'Yes' t	to Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25. 1 (a) Description of liability	(b) Book value	
	(2) BOOK VAING	
Federal income taxes STUDENT DEPOSITS	1,643,189	
OBLIGATION UNDER INTEREST RATE	2,044,726	
DEPOSITS HELD IN CUSTODY FOR O	1,122,893	
ACCRUED POSTRETIREMENT HEALTHC	3,592,050	
DUE TO BROKERS	869,749	
CAPITAL LEASE OBLIGATIONS	1,432,267	
	,	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	10,704,874	

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p the organization answered 'Yes' to Form 990, Part IV, line 12a.	er R	eturn Complete ıf
1	Total revenue, gains, and other support per audited financial statements	1	67,113,489
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	18,954,169
3	Subtract line 2e from line 1	3	48,159,320
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 1,142,240		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4 c	4,643,633
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	52,802,953
Part		per	Return. Complete
1	If the organization answered 'Yes' to Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	1	48,045,691
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		10,013,031
a	Donated services and use of facilities		
ъ b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII) 2d		
e	Add lines 2a through 2d	2e	348,247
3	Subtract line 2e from line 1	3	47,697,444
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 1,142,240		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4 c	4,796,450
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	52,493,894
	Supplemental Information		
Part '	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and $2b$ /, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and $4b$ Also complete this part to		de any additional
inforr	nation		
	Return Reference Explanation		
STATE	SCHEDULE D, PART XI, LINE 2D \$ 199,583 - BOOKSTORE EXPENSES AND GROSS ON FINANCIAL STATEMENTS \$ 148,664 - RECLASS OF \$ 348,247 REVENUE ON TAX RETURN NOT INCLUDED ON FINAN SCHEDULE D, PART XI, LINE 4B \$ 3,654,210 - FINANCIAL AID EXPE ON 990 AND NET ON FINANCIAL STATEMENTS \$ (483,317) - UNREATINE STATE SWAP AGREEMENT \$ 330,500 - LOSSES ON UNCOL \$ 3,501,393 INTENDED USES OF THE ORGANIZATION'S ENDOSCHEDULE D, PART V, LINE 4 THE PRIMARY PURPOSE OF THE PART PURPOSE	RENT NCIAI NSES ALIZE LECT LECT WMEN WME OL OP CATIN	AL EXPENSES L STATEMENTS REPORTED GROSS D LOSS ON IBLE PLEDGES NT FUNDS FORM 990, NT FUNDS FOR PERATIONS AND FOR
STATE	SCHEDULE D, PART XII, LINE 2D \$ 199,583 - BOOKSTORE EXPENSE AND GROSS ON FINANCIAL STATEMENTS \$ 148,664 - RECLASS OF \$ 348,247 EXPENSE ON TAX RETURN NOT ON FINANCIAL STAT PART XII, LINE 4B \$ 3,654,210 - FINANCIAL AID EXPENSES REPORT NET ON FINANCIAL STATEMENTS ORGANIZATION'S LIABILITY FOR POSITIONS UNDER FIN 48 SCHEDULE D, PART X, LINE 2 THE SCHOOL FUTURES LLC RECOGNIZE THE EFFECT OF INCOME TAX POSITIONS POSITIONS ARE MORE LIKELY THAN NOT OF BEING SUSTAINED NO PROVISION HAS BEEN RECORDED AS THE NET INCOME, IF ANY, FR TRADE OR BUSINESS, IN THE OPINION OF MANAGEMENT, IS NOT M CONSOLIDATED FINANCIAL STATEMENTS TAKEN AS A WHOLE KAI A WHOLLY OWNED SUBSIDIARY OF THE SCHOOL, IS A TAXABLE EN	RENT TEMEN TED G R UNC OL AN S ONL O INC OM A MATEI NEO H	TAL EXPENSES NTS SCHEDULE D, GROSS ON 990 AND CERTAIN TAX ND BUILDING LY IF THOSE COME TAX NY UNRELATED RIAL TO THE BASIC HE PROPERTIES, INC,

CURRENTLY INACTIVE

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493127023055

OMB No 1545-0047

2012

(Form 990 or 990-EZ) ►Complete if the

Schools

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

► Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SCHEDULE E

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

Employer identification number

'IOLANI SCHOOL 99-0073502 Part I YES NO Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? Yes Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? Yes Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe If "No," please explain If you need more space use Part II Yes Does the organization maintain the following? a Records indicating the racial composition of the student body, faculty, and administrative staff? Yes 4a b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory 4b Yes c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? 4c Yes 4d d Copies of all material used by the organization or on its behalf to solicit contributions? Yes If you answered "No" to any of the above, please explain If you need more space, use Part II Does the organization discriminate by race in any way with respect to a Students' rights or privileges? 5a Νo **b** Admissions policies? 5b Νo c Employment of faculty or administrative staff? **5c** Νo d Scholarships or other financial assistance? 5d Νo e Educational policies? 5e Νo f Use of facilities? 5f Νo g Athletic programs? <u>5g</u> Νo h Other extracurricular activities? 5h Νo If you answered "Yes" to any of the above, please explain If you need more space, use Part II Νo 6a Does the organization receive any financial aid or assistance from a governmental agency? 6a b Has the organization's right to such aid ever been revoked or suspended? 6b If you answered "Yes" to either line 6a or line 6b, explain on Part II 7 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part II

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

Return Reference	Explanation
PUBLICATION OF RACIALLY NONDISCRIMINATORY POLICY	FORM 990, SCHEDULE E, LINE 3 PERIODIC NEWSPAPER ADVERTISEMENTS STATING NON-DISCRIMINATORY POLICY OF THE SCHOOL

Schedule E (Form 990 or 990-EZ) 2013

DLN: 93493127023055

OMB No 1545-0047

Open to Public Inspection

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

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

Employer identification number

'IOI	LANI SCHOOL										
								99-0073502			
Pa	Form 990-EZ filers						o Form	1 990, Part IV	, line 17	7.	
1	Indicate whether the organization raised funds through any of the following activities Check all that apply										
а	Mail solicitations			е	Γ	Solicitation of non	-govern	ment grants			
b	☐ Internet and email solid	citations		f	Γ	Solicitation of gov	ernmen	t grants			
С	Phone solicitations			g	Γ	Special fundraising	g event:	S			
d	In-person solicitations										
2a	Did the organization have a or key employees listed in l	_				•	•	•	Г	Yes	Г _N
b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization											
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of outions?) Gross receipts from activity	(orı	mount paid to retained by) aiser listed in col (i)	orı)	mount pretained ganizati	d by)
			Yes	No							

ındıvıdual or entity (fundraıser)	custo	ser have ody or rol of outions?	from activity	(or retained by) fundraiser listed in col (i)	(or retained by) organization
	Yes	No			
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Total	 	>			

,	registration or licensing

Cat No 50083H

Sche	dule	e G (Form 990 or 990-EZ) 2013				Page 2
Pai	rt I	Fundraising Events. Commore than \$15,000 of fundrevents with gross receipts of	aising event contribut			
		<u> </u>	(a) Event #1 FAMILY FAIR (event type)	(b) Event #2 HAMADA TOURNEY (event type)	(c) O ther events 1 (total number)	(d) Total events (add col (a) through col (c))
₽	1	Gross receipts	762,493	45,290	499,195	1,306,978
Revenue	2	Less Contributions	151,053	32,540	426,991	610,584
ž	3	Gross income (line 1				
		minus line 2)	611,440	12,750	72,204	696,394
	4	Cash prizes	2,100	0		2,100
မွာ	5	Noncash prizes	51,574	5,639		57,213
euse Sus	6	Rent/facility costs		6,912		6,912
Expenses	7	Food and beverages .	82,752	4,697	385,593	473,042
Drea	8	Entertainment	9,216	5		9,216
튭	9	Other direct expenses .	431,811	3,719		435,530
	10	Direct expense summary Add lir	nes 4 through 9 in column	· (d)		(984,013)
	11	Net income summary Subtract li				
Par	t III	·			rt IV. line 19. or repo	-287,619 rted more than
	ı	\$15,000 on Form 990-EZ, li		,	, , ,	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
မှ မွ	2	Cash prizes				
xpenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
à	5	Other direct expenses				
	6	Volunteer labor	│ Yes % % % % % % % % % %		┌ Yes %	
	7	Direct expense summary Add line	s 2 through 5 in column (d)		
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)		
9 a b	Is	ter the state(s) in which the organize the organization licensed to operate 'No," explain	gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming	licenses revoked, susper	nded or terminated during		

						1:
Does	s the organization operate gaming activi	ties with nonmember	rs?		T Yes T No	
12	Is the organization a grantor, beneficia					
	formed to administer charitable gaming	g [,]			· Fyes [– No
13	Indicate the percentage of gaming act	ıvıty operated ın				
а	The organization's facility					%
b	An outside facility			13b		%
14	Enter the name and address of the per	son who prepares the	e organization's gaming/special e	vents books and reco	ords	
	Name ▶					
	Address 🟲					
15a b	Does the organization have a contract revenue?	evenue received by t	the organization 🟲 \$		· · 「Yes「	– No
	amount of gaming revenue retained by	the third party 🟲 \$ _				
C	If "Yes," enter name and address of th	e thırd party				
	Name ▶					
	Address ►					
16	Gaming manager information					
	Name 🕨					
	Gaming manager compensation ► \$					
	Description of services provided					
	Director/officer	T Employee	☐ Independent cor	ntractor		
17	Mandatory distributions					
а	Is the organization required under stat	e law to make charit	able distributions from the gaming	g proceeds to		
	retain the state gaming license?				┌ Yes 「	— No
b	Enter the amount of distributions requi	red under state law (distributed to other exempt organi	ızatıons or spent		
	ın the organızatıon's own exempt actıv	ities during the tax y	⁄ear ⊳ \$			
Pai		5b, 15c, 16, and 1	xplanations required by Part I 7b, as applicable. Also compl			and
	Return Reference		Explanat	ıon		
		<u> </u>	<u> </u>		rm 990 or 990-	7) 2012

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493127023055

OMB No 1545-0047

Schedule I (Form 990)

'IOLANI SCHOOL

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

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

Open to Public **Inspection**

Attach to Form 990 Department of the Treasury ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization

Employer identification number

						99-00/3502	
Part I General Informati	on on Grants and	d Assistance				•	
 Does the organization maintain the selection criteria used to a Describe in Part IV the organization 	ward the grants or as	sıstance?					┌ Yes ┌ N
Part II Grants and Other A Form 990, Part IV, II	Assistance to Go ne 21, for any reci	vernments and O pient that received	r ganizations in the more than \$5,000. Pa	United States. Con ort II can be duplicate	nplete if the orga d if additional spa	nization answered "Y ace is needed.	es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran
2 Enter total number of section 5						- _	
3 Enter total number of other org	janizations listed in th	ne line 1 table				<u>.</u>	
For Paperwork Reduction Act Notice, se	ee the Instructions for	Form 990.		Cat No 50055P		Schedu	le I (Form 990) 2013

3	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990,	Part IV,	line 22
	Part III can be duplicated if additional space is needed.		

(a)Type of grant or assistance		umber of ipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) SCHOLARSHIPS		384	3,654,210		N/A	NONE
Part IV Supplemental Info	ormation. Pi	rovide the info	rmation required in Pa	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.
Return Reference Ex	xplanation					

PROCEDURES FOR
MONITORING USE OF GRANT
FUNDS

FORM 990, SCHEDULE I, PART I, LINE 2 GRANT FUNDS CONSIST ALMOST ENTIRELY OF SCHOLARSHIPS AND FINANCIAL AID, WHICH ARE GIVEN TO STUDENTS WHOSE FAMILIES DEMONSTRATE FINANCIAL NEED SCHOLARSHIPS & FINANCIAL AID ARE USED BY STUDENTS IN ORDER TO DEFRAY THE COST OF TUITION, BOOKS, AND OTHER NECESSARY SCHOOL SUPPLIES

Schedule I (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493127023055

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

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

Open to Public Inspection

Name of the organization 'IOLANI SCHOOL

Employer identification number

99-0073502

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

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)Timothy R Cottrell Head of School	(i) (ii)	262,500 0	35,000 0	17,787 0	14,896 0	41,039 0	371,222 0	0	
(2)Glenn NCK Ching DIR OF FINANCE/ADVISOR TO CFO	(i) (ii)	174,393 0	0	0	17,931 0	10,695 0	203,019	0	
(3)Val T Iwashita ADVISOR TO HEAD OF SCHOOL	(i) (ii)	305,203 0	0	0	42,500 0	10,767 0	358,470 0	0	
(4) Deborah Hall Faculty	(i) (ii)	171,767 0	0	0	16,787 0	5,729 0	194,283 0	0 0	
(5) Ann Yoneshige Director of Special Programs	(i) (ii)	159,648 0	0	0	16,240 0	5,758 0	181,646 0	0	
(6)Carey Inouye Dean of Instruction	(i) (ii)	149,600 0	0 0	0	15,085 0	9,423 0	174,108 0	0	
(7)Gerald M Teramae Dean of Lower School	(i) (ii)	143,503 0	0	0	14,256 0	19,101 0	176,860 0	0	

Schedule J (Form 990) 2013

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
COMPENSATION EXPENSE	FORM 990, SCHEDULE J, PART I, LINE 1A THE HEAD OF SCHOOL RESIDES ON CAMPUS AS A CONDITION OF EMPLOYMENT AS SUCH, THIS BENEFIT WAS TREATED AS A NONTAXABLE WORKING CONDITION FRINGE BENEFIT IT IS NOT TREATED AS TAXABLE COMPENSATION AND IS NOT REPORTABLE IN COLUMN (D) OF SCHEDULE J THE HEAD OF SCHOOL'S ON-CAMPUS RESIDENCE IS USED ROUTINELY BY THE SCHOOL FOR HOSTING EVENTS, AND IS CLEANED ON A REGULAR BASIS BY EMPLOYEES OF THE SCHOOL THIS BENEFIT WAS TREATED AS NONTAXABLE COMPENSATION FORM 990, SCHEDULE J, PART I, LINE 3 COMPENSATION COMMITTEE 'IOLANI DOES NOT HAVE A SEPARATE COMPENSATION COMMITTEE TO DETERMINE COMPENSATION THE DUTIES OF A COMPENSATION COMMITTEE ARE PERFORMED BY 'IOLANI'S EXECUTIVE COMMITTEE
INITIAL CONTRACT EXCEPTION	FORM 990, SCHEDULE J, PART I, LINE 8 THE AMOUNTS PAID UNDER THE COMPENSATION AGREEMENT ENTERED INTO BY THE SCHOOL AND REID GUSHIKEN IS SUBJECT TO THE INITIAL CONTRACT EXCEPTION DESCRIBED IN REG 53 4958-4(A)(3) THE BOARD OF GOVERNORS UNDANIMOUSLY VOTED TO APPOINT REID GUSHIKEN AS THE SCHOOL'S NEXT CHIEF FINANCIAL OFFICER THE APPOINTMENT BECAME EFFECTIVE IN AUGUST 2013 WHEN REID GUSHIKEN ASSUMED HIS NEW ROLE REID GUSHIKEN'S APPOINTMENT FOLLOWED A THOROUGH EVALUATION PROCESS LED BY A SEARCH COMMITTEE COMPRISED OF SEVERAL MEMBERS OF THE BOARD OF GOVERNORS DURING THE SEARCH PROCESS, THE BOARD CHAIR AND THE SEARCH COMMITTEE, ALL OF WHOM DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION AGREEMENT, ESTABLISHED REID GUSHIKEN'S COMPENSATION PACKAGE BASED ON NUMEROUS FACTORS, INCLUDING COMPARABLE MARKET DATA, THE DUTIES AND RESPONSIBILITIES OF THE POSITION, AND REID GUSHIKEN'S BACKGROUND AND EXPERIENCE FOR GUIDANCE, THE BOARD CHAIR AND THE SEARCH COMMITTEE CONSIDERED COMPARABLE COMPENSATION SURVEY RESULTS CONDUCTED BY NAIS, GUIDESTAR, AND OTHER SOURCES OF COMPENSATION INFORMATION RELEVANT AND COMPARABLE TO OTHER CHIEF FINANCIAL OFFICERS AT PEER INSTITUTIONS The amounts paid under the compensation agreement entered into by the School and Dr Timothy Cottrell are subject to the initial contract exception described in Reg 53 4958-4(a)(3) In February 2012, the BOARD CHAIR assumed his new role Dr Cottrell's appointment followed a thorough evaluation process led by a Search Committee comprised of several members of the Board of Governors During the search process, the Board Chair and the Search Committee, all of whom do not have a conflict of interest with respect to the compensation agreement, established Dr Cottrell's compensation package based on numerous factors, including comparable market data, the duties and responsibilities of the position, and Dr Cottrell's background and experience For guidance, the Board Chair and the Search Committee considered comparable compensation survey results conducted by NAI

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493127023055

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

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

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

Open to Public Inspection

Name of the or 'IOLANI SCHOOL	ganızatıon										fication	numbei	r														
						and section		rganız		s only)																	
Comp	olete if the org	anızatıon an				, Part IV , line .	25a or 25b, or	Form	990-E	Z, Part	V, line 4	40b															
1 (a) Nam	e of disqualifie	ed person				disqualified	(c) Descr	iption	of tran	saction		(d) Corre	ected?														
			p€	erson a	ınd organıza	ition						Yes	No														
											<u></u>																
4958 .						Isqualified pers		e year • •	under •	section \$ \$																	
Co	•	organızatıon	answered	l "Yes"	on Form 99	90-EZ, Part V , ne 5 , 6 , or 22	, line 38a, or F	orm 99	0, Pa	rt IV, lır	ne 26, o	r ıf the															
(a) Name of interested person	(b) Relationshi with organization	(c) Purp of loa	ose (d) n or	Loan from th	he	(e)O riginal principal amount	(f) Balance due			(g) In default?				(g) In default?										(h) Approv by board or commit		(i)Wri agreem	
			Т	0	From	1		Yes	No	Yes	No	Yes	No														
(1) TIMOTHY J COTTRELL	HEAD OF SCHOOL	PERSON			Х	175,00	0 175,000		No	Yes		Yes															
												- - -															
Total	•	▶ s			•	•	175,000					7															
Part III Gra	ants or Ass					Persons. Form 990, Pa	·																				
(a) Name of Ir	nterested	(b) Relation interested p	shıp betw	een/		t of assistance			stance	e (e)	Purpos	e of ass	ıstance														
				\dashv			_																				

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) DAVID HULIHEE	MEMBER OF BOARD OF GOVNRS		SEE SCHEDULE L DISCLOSURE		No
(2) THOMAS B FARGO	MEMBER OF BOARD OF GOVNRS	·	SEE SCHEDULE L DISCLOSURE		No
(3) DONALD G HORNER	MEMBER OF BOARD OF GOVNRS	· · · · · · · · · · · · · · · · · · ·	SEE SCHEDULE L DISCLSOSURE		No
(4) JENAI S WALL	MEMBER OF BOARD OF GOVNRS	·	SEE SCHEDULE L DISCLOSURE		No
(5) DONALD TAKAKI	MEMBER OF BOARD OF GOVNRS		SEE SCHEDULE L DISCLOSURE		No
(6) LISA SAKAMOTO	MEMBER OF BOARD OF GOVNRS	, , ,	SEE SCHEDULE L DISCLOSURE		No

Part V Supplemental Information

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

Flovide additional informa	ation for responses to questions on Schedule L (see instructions)
Return Reference	Explanation
BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS	SCHEDULE L, PART IV, COLUMN (D) THE FOLLOWING PAYMENTS WERE MADE TO THE ORGANIZATIONS OR COMPANIES THAT THE TRUSTEES WORK FOR, ARE BOARD MEMBERS OF, OR REPRESENT AND NOT TO THE INDIVIDUALS DIRECTLY DAVID C HULIHEE MR HULIHEE IS A DIRECTOR OF FIRST HAWAIIAN BANK, ONE OF THE LARGEST BANKS IN THE STATE OF HAWAII TRANSACTION AMOUNTS REPRESENT INTEREST PAYMENTS MADE ON LOANS FROM FIRST HAWAIIAN, AND CREDIT CARD FEES THESE TRANSACTIONS WERE CONCLUDED ON AN ARMS-LENGTH BASIS THOMAS B FARGO MR FARGO IS A DIRECTOR OF HAWAIIAN ELECTRIC INDUSTRIES, THE PARENT OF HAWAIIAN ELECTRIC COMPANY, THE SOLE PROVIDER OF ELECTRICITY ON THE ISLAND OF OAHU THE TRANSACTION AMOUNTS REPRESENT PAYMENTS MADE TO HAWAIIAN ELECTRIC COMPANY TO PROVIDE ELECTRICITY SERVICES TO THE ORGANIZATION DONALD G HORNER MR HORNER IS CHAIRMAN AND THE FORMER CEO OF FIRST HAWAIIAN BANK, ONE OF THE LARGEST BANKS IN THE STATE OF HAWAII TRANSACTION AMOUNTS REPRESENT INTEREST PAYMENTS MADE ON LOANS FROM FIRST HAWAIIAN, AND CREDIT CARD FEES THESE TRANSACTIONS WERE CONCLUDED ON AN ARMS-LENGTH BASIS JENAIS WALL MS WALL IS A DIRECTOR OF FIRST HAWAIIAN BANK, ONE OF THE LARGEST BANKS IN THE STATE OF HAWAII TRANSACTION AMOUNTS REPRESENT INTEREST PAYMENTS MADE ON LOANS FROM FIRST HAWAIIAN, AND CREDIT CARD FEES THESE TRANSACTION AMOUNTS REPRESENT INTEREST PAYMENTS MADE ON LOANS FROM FIRST HAWAIIAN, AND CREDIT CARD FEES THESE TRANSACTION AMOUNTS REPRESENT INTEREST PAYMENTS MADE ON LOANS FROM FIRST HAWAIIAN, AND CREDIT CARD FEES THESE TRANSACTION SWERE CONCLUDED ON AN ARMS-LENGTH BASIS DONALD M TAKAKI MR TAKAKI IS A DIRECTOR OF BANK OF HAWAII, ONE OF THE LARGEST BANKS IN THE STATE OF HAWAII TRANSACTION ONE OF THE LARGEST BANKS IN THE STATE OF HAWAII TRANSACTION ONE OF THE LARGEST BANKS IN THE STATE OF HAWAII TRANSACTION AMOUNTS REPRESENT INTEREST PAYMENTS MADE ON LOANS FROM BANK OF HAWAII, AND BANK FEES THESE TRANSACTIONS WERE CONCLUDED ON AN ARMS-LENGTH BASIS LISA SAKAMOTO MS SAKAMOTO IS A DIRECTOR OF HAWAII MEDICAL SERVICE ASSOCIATION (HMSA), THE
	LARGEST HEALTH CARE INSURANCE PROVIDER IN THE STATE OF HAWAII TRANSACTION AMOUNTS REPRESENT INSURANCE PREMIUMS PAID TO HMSA THESE TRANSACTIONS WERE CONCLUDED ON AN ARMS-LENGTH BASIS
LOAN TO/FROM INTERESTED PERSON	SCHEDULE L, PART II 'IOLANI SCHOOL CO-SIGNED AS A GUARANTOR ON A LOAN OF \$175,000 FROM THE BANK OF HAWAII, AN UNRELATED THIRD-PARTY, TO TIMOTHY COTTRELL, HEAD OF SCHOOL THE LOAN WAS NOT IN DEFAULT AS OF THE CLOSE OF THE FISCAL YEAR, AND THE TRANSACTION WAS CONCLUDED AT ARMS-LENGTH BETWEEN THE HEAD OF SCHOOL AND THE UNRELATED THIRD PARTY

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493127023055

OMB No 1545-0047

SCHEDULE M (Form 990)

Department of the Treasury

Noncash Contributions

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

Open to Public Inspection

Internal Revenue Service ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization 'IOLANI SCHOOL

Employer identification number

Tues of B			99	9-0073502	
Part I Types of Property		<u> </u>		Ι	
	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g		d) determining bution amounts
1 Art—Works of art	X	5	4,250	REPLACEMENT O	COST
2 Art—Historical treasures .					
3 Art—Fractional interests					
Books and publications	X			REPLACEMENT O	
Goods	Х		65,108	REPLACEMENT C	COST
Cars and other vehicles					
Boats and planes					
Intellectual property					
Securities—Publicly traded .	X	23	180,443	AVG MARKET PR	ICE
Securities—Closely held stock .					
Securities—Partnership, LLC, or trust interests					
 Securities—Miscellaneous Qualified conservation contribution—Historic structures 					
Qualified conservation contribution—Other					
Real estate—Residential .					
Real estate—Commercial					
Real estate—O ther					
Collectibles					
Food inventory	X	59	21,423	REPLACEMENT O	COST
Drugs and medical supplies .					
Taxıdermy					
Historical artifacts	X	1	70,275	APPRAISAL	
Scientific specimens					
Archeological artifacts					
Other►(×	8	1,279	REPLACEMENT (COST
WELRY) Other►(X	254	22,956	REPLACEMENT O	COST
FT CERTIFICATES) Other► (x	16	12.002	REPLACEMENT O	COST
ORTS GEAR)	^		12,002	INC. FLACEMENT C	.031
Other (CKETS)	Х	1	600	REPLACEMENT C	COST
Other►(ANTS & LUMBER)	X	13	11,306	REPLACEMENT C	COST
Number of Forms 8283 received by for which the organization complete				9	
n Dimma tha i i a didit			and a submitted to the form of the first of	*h	Yes I
During the year, did the organization					
it must hold for at least three years			, and which is not require	d to be used	
for exempt purposes for the entire					30a N
b If "Yes," describe the arrangement	in Part II				
Does the organization have a gift a					31 Yes
a Does the organization hire or use the contributions?	hırd partıes or • • • •	related organizations to s	olicit, process, or sell no	ncash • • •	32a N
b If "Yes," describe in Part II					
If the organization did not report ar	n amount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,	
describe in Part II					

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contribution number of items received, or a combination of both. Also complete this part for any additional inform										
Return Reference	Explanation									
REPORTING NONCASH DONATIONS	SCHEDULE M, COLUMN B THE ORGANIZATION IS REPORTING THE NUMBER OF CONTRIBUTIONS RECEIVED IN COLUMN B OF SCHEDULE M FOR GIFTS OF SECURITIES, EACH SEPARATE GIFT IS TREATED AS A SINGLE CONTRIBUTION FOR PURPOSES OF COLUMN B									
METHOD OF DETERMINING REVENUES	SCHEDULE M, PART I, COLUMN D CONTRIBUTED PROPERTY IS RECORDED AS INCOME AT THE FAIR VALUE OF THE PROPERTY ON THE DATE OF DONATION THE FAIR VALUE OF PUBLICLY TRADED SECURITIES IS BASED ON AVERAGE MARKET PRICES									

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493127023055

OMB No 1545-0047

2013

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

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

Employer identification number Name of the organization 'IOLANI SCHOOL 99-0073502

Return Reference	Explanation
REVIEW PROCESS FOR FORM 990	FORM 990, PART VI, SECTION B, LINE 11 The organization's Chief Financial Officer works closely with the outside accounting firm it engages to review the return, and the final draft of the Form 990 is also reviewed by the Controller prior to providing the final draft to the Board of Governors for their review. In addition to consulting with the Controller and Chief Financial Officer, the finance committee of the Board of Governors votes to approve the Form 990 before it is filed.

Return Reference	Explanation
CONFLICTS OF INTEREST POLICY	The Chair & Executive Committee of the Board is charged with monitoring proposed or ongoing transactions for conflicts of interest and addressing any potential or actual conflicts. Pursuant to the Conflicts of Interest Policy, an annual conflict of interest questionnaire, aimed at determining any family and business relationships and transactions or other transactions that may pose a potential conflict, is distributed to all covered persons (i.e., board members, officers and key employees). Covered persons are required to disclose real or potential conflicts at the time when such conflicts arise. When someone becomes a covered person and annually thereafter, each covered person is required to sign a statement affirming that he/she. (1) has received a copy of the Conflicts or Interest Policy, (2) has read the Policy and understands said Policy, and (3) agrees to comply with all requirements of the Policy, including completing the conflicts of interest questionnaire. The procedures for addressing any conflict of interest includes, but is not limited to, the following. (1) the conflicting interest is fully disclosed to the Board or Chair, (2) the person with the conflict of interest is excluded from voting on such transaction, (3) any person with conflicting issues is referred to the Secretary and told that he/she has 7 days to comply and shall not be allowed to attend or vote until compliance is met, and (4) no employee except the head of the school may serve on the board unless approved by a majority of disinterested persons.

Return Reference	Explanation
COMPENSATION DETERMINATION - TOP MANAGEMENT OFFICIAL	FORM 990, PART VI, SECTION B, LINE 15A In 2013, the Board of Governors unanimously voted to appoint Dr. Timothy Cottrell as the school's next Head of School. The appointment became effective in 2013 when Dr. Cottrell assumed his new role. Dr. Cottrell's appointment followed a thorough evaluation process led by a Search Committee comprised of several members of the Board of Governors. During the search process, the Board Chair and the Search Committee, all of whom do not have a conflict of interest with respect to the compensation agreement, established Dr. Cottrell's compensation package based on numerous factors, including comparable market data, the duties and responsibilities of the position, and Dr. Cottrell's background and experience. For guidance, the Board Chair and the Search Committee considered comparable compensation survey results conducted by NAIS, Guidestar, and other sources of compensation information relevant and comparable to other Heads of School at peer institutions. THE MOST RECENT COMPARABILITY STUDY DONE FOR DR. COTTRELL FOR THE 06/30/2014 FISCAL YEAR END WAS DONE IN AFRIL 2013. TO DETERMINE THE COMPENSATION OF THE HEAD OF SCHOOL. I Board Chair will appoint a committee to evaluate the HEAD OF SCHOOL (Committee). The Committee is comprised of active board members all of whom do not have conflicts-of-interest with each other or with the Head OF SCHOOL. 2. Head of School performance review. Is conducted no less than annually. Results of the evaluation ARE reported to the Board by the Chair of the Committee in closed session with separate minutes taken. 3. Evaluation as to the Head OF SCHOOL is annual performance includes a review of the Head OF SCHOOL'S job description as contained in the bylaws adopted by the Board of Governors. 4. In addition to the duties as described in the Bylaws, the Committee CONSIDERS performance objectives set forth by the Board Chair in conjunction with the Head OF SCHOOL. 5. Should evaluation results be satisfactory, the Committee may recommend an adjustment in c

Return Reference	Explanation
COMPENSATION - KEY EMPLOYEES	FORM 990, PART VI, SECTION B, LINE 15B CHIEF FINANCIAL OFFICER THE BOARD OF GOVERNORS UNANIMOUSLY VOTED TO APPOINT REID GUSHIKEN AS THE SCHOOL'S NEXT CHIEF FINANCIAL OFFICER THE APPOINTMENT BECAME EFFECTIVE IN AUGUST 2013 WHEN REID GUSHIKEN ASSUMED HIS NEW ROLE. REID GUSHIKENS APPOINTMENT FOLLOWED A THOROUGH EVALUATION PROCESS LED BY A SEARCH COMMITTEE COMPRISED OF SEVERAL MEMBERS OF THE BOARD OF GOVERNORS. DURING THE SEARCH PROCESS, THE BOARD CHAIR AND THE SEARCH COMMITTEE, ALL OF WHOM DO NOT HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION AGREEMENT, ESTABLISHED THE CHIEF FINANCIAL OFFICER'S COMPENSATION PACKAGE BASED ON NUMEROUS FACTORS, INCLUDING COMPARABLE MARKET DATA, THE DUTIES AND RESPONSIBILITIES OF THE POSITION, AND REID GUSHIKENS. BACKGROUND AND EXPERIENCE FOR GUIDANCE, THE BOARD CHAIR AND THE SEARCH COMMITTEE CONSIDERED COMPENSATION SURVEY RESULTS CONDUCTED BY NAIS, GUIDESTAR, AND OTHER SOURCES OF COMPENSATION INFORMATION RELEVANT AND COMPARABLE TO OTHER CHIEF FINANCIAL OFFICERS AT PEER INSTITUTIONS. ADVISORS THE COMMITTEE DETERMINED THE SALLARIES FOR THE ADVISOR TO THE HEAD OF SCHOOL AND ADVISOR TO THE CHIEF FINANCIAL OFFICER UNDER CIRCUMSTANCES THAT MEET THE REBUTTABLE PRESUMPTION OF REASONABLENESS. THE SALLAIRES WERE 1 DETERMINED AND APPROVED BY THE SEARCH/TRANSITION COMMITTEE COMPRISED OF BOARD MEMBERS WHO DO NOT HAVE A CONFLICT OF INTEREST 2 MADE USING COMPARABLE WARKET DATA 3 ADEQUATELY DOCUMENTED BY THE AUTHORIZED BODY FOR THE BASIS OF TIS DETERMINATION OTHER KYEY EMPLOYEES Initial recommended compensation of key employees will be included in the budget parameters set by the Chief Financial Officer who then submits it to the Head of School for consideration Recommended compensation information provided by NAIS, Guidestar, or any other source of compensation information relevant and comparable to the duties or job description of key employee The reason for any key employee compensation which is not comparable to the Board will include the key employee compensation determined by th

Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19 Federal tax laws do not mandate that the organization's governing documents, conflict of interest policy and financial statements be made available for public inspection

Return Reference	Explanation
RELATIONSHIPS BETWEEN OFFICERS, DIRECTORS, KEY EMPLOYEES, AND TRUSTEES	FORM 990, PART VI, SECTION A, LINE 2 DUDLEY S J SETO, A MEMBER OF THE BOARD OF GOVERNORS, AND GLENN CHING, AN OFFICER OF 'IOLANI SCHOOL, HAVE A FAMILY RELATIONSHIP DONALD HORNER, DAVID HULIHEE, AND JENAI WALL HAVE A BUSINESS RELATIONSHIP ALL ARE MEMBERS OF THE BOARD OF GOVERNORS MARK MUGIISHI AND LISA SAKAMOTO, MEMBERS OF THE BOARD OF GOVERNORS, HAVE A BUSINESS RELATIONSHIP

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

DLN: 93493127023055

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

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

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

Department of the Treasury Internal Revenue Service

'IOLANI SCHOOL

Name of the organization

(Form 990)

SCHEDULE R

Employer identification number 99-0073502

(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
(1) BUILDING FUTURES LLC 563 KAMOKU STREET HONOLULU, HI 96826 26-4097997	REAL ESTATE	HI	-983,738	24,465,838	'IOLANI SCH		
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during the	a tions Complete if ne tax year.	the organization a	nswered "Yes"	on Form 990, Pai	rt IV, line 34 because it	had or	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	(e) Public charity sta (if section 501(c)	atus Direct controlling entity	Section (13) co	g) n 512(tontrolle tity?
(1) H&M MIST TRUST	CHAR TRUST	HI	501(C)(3)	PF	IOLANI SCH	Yes Yes	No
PO BOX 3170 DEPT 715	The state of the s			i.	202 111 3611	103	
HONOLULU, HI 968023170 99-0259507							
		1	1				

Part III Identification of Related Org because it had one or more rela							ation ans	wered "Ye	es" on	Form	990, Part	IV, lı	ne 3	4	
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predon income(unrela exclude tax u	unrelated, excluded from tax under sections 512-		(g) Share of e end-of-year assets		ortionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		Perce owne	
					31,	+)			Yes	No		Yes	No		
Part IV Identification of Related Organic line 34 because it had one or m	ganizations Taxable ore related organizati	e as a Corpo ons treated a	ration s a cor	or Trust poration o	: Comple or trust d	te ıf th urıng	ne organ the tax y	zatıon ans ear.	wered	d "Yes	" on Form	990,	Part	ΙV,	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicil (state or fo country	le oreign		(d) et controlling entity	Type (C corp	(e) of entity p, S corp, trust)	(f) Share of total Income	Share	(g) of end- year assets	of-Percen owner	tage		(i) Section (b)(1 control entity	512 .3) lled
(1) KANEOHE PROPERTIES INC	REAL ESTATE	HI		NA		C Corp		-40)	1,0	53 100 00	0 %		Yes	No No
563 KAMOKU STREET HONOLULU, HI 96826 94-3263925															
													\dashv		

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

No

Yes

1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more re	elated organizations li	sted in Parts II-IV?					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No	
b	Gift, grant, or capital contribution to related organization(s)				1b		No	
c	Gift, grant, or capital contribution from related organization(s)				1c	Yes	,	
d	Loans or loan guarantees to or for related organization(s)				1d		No	
e	Loans or loan guarantees by related organization(s)				1e		No	
f	Dividends from related organization(s)				1f		No	
	Sale of assets to related organization(s)				1g		No	
_	Purchase of assets from related organization(s)				1h		No	
	Exchange of assets with related organization(s)				1i		No	
	Lease of facilities, equipment, or other assets to related organization(s)				1j		No	
•								
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		No	
Performance of services or membership or fundraising solicitations for related organization(s)								
m Performance of services or membership or fundraising solicitations by related organization(s)								
 m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 								
	Sharing of paid employees with related organization(s)				10	Yes		
р	Reimbursement paid to related organization(s) for expenses				1p		No	
					1q		No	
•								
r	Other transfer of cash or property to related organization(s)				1r		No	
	Other transfer of cash or property from related organization(s)				1s		No	
	- ····································							
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete	this line, including co	vered relationships	and transaction thresholds				
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount II	nvolved		
1) H	&M MIST TRUST	С	38,000	CASH RECEIVED				
		1	l					

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

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

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

revenue) that was not a related organization. See instructions													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
		·					<u> </u>						

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013