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DLN: 93493131030265

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

B Che	eck ıf a	applicable	C Name of organization PUNAHOU SCHOOL	, 2013, and ending 06-	30 2014	D Employ	er ider	ntification number
		hange	Doing Business As			99-00	73523	3
_	ne cha	_						
_	ıal retu		Number and street (or P O box if m	all is not delivered to street address) Room/s	uite	E Telepho	ne num	ber
_	minate		Suite	(808)	944-5	714		
		return	City or town, state or province, cour HONOLULU, HI 96822	itry, and ZIP or foreign postal code				
App	olication	n pending			1			143,186,979
			F Name and address of prin	cipai officer		this a group	return	for
			1601 PUNAHOU STREET HONOLULU,HI 96822					
			110110101010111 90022			re all subordır cluded?	nates	Γ Y es Γ No
Tax	k-exen	npt status	▼ 501(c)(3)	nsert no) 4947(a)(1) or 527	_		a lıst	(see instructions)
w	ebsite	e:► ww	w PUNAHOU EDU		H(c) ^G	roup exempti	on nun	nber ►
Forn	n of or	rganizatior	Corporation Trust Associatio	n	L Year o	of formation 185	53 M	State of legal domicile H
Pa	rt I	Sum	mary		•			
GOTTEINGHOC		PUNAH		n or most significant activities D SECONDARY SCHOOL THAT IS R ACTIVITIES FOR MORE THAN 375				-
	2	Check t	his box 🔰 if the organization dis	scontinued its operations or disposed	of more tha	n 25% of its	net as	sets
	3	Number	of voting members of the govern	ng body (Part VI, line 1a)		1	з	1
			-	of the governing body (Part VI, line 1b			4	1
	5	Total nu	mber of individuals employed in o	calendar year 2013 (Part V, line 2a)			5	2,11
•	6	Total nu	mber of volunteers (estimate if n	ecessary)		[6	5 ,0 0
				art VIII, column (C), line 12			7a	-32,27
	b	Net unre	elated business taxable income fi	om Form 990-T, line 34			7b	-32,27
						Prior Year		Current Year
<u>o</u>	8			ne 1h)		10,227,0		29,226,19
Hayenue	9 10			ne 2g)		82,412,9 13,362,1	-	85,399,10 3,106,89
Ť	11		· · ·	lines 5, 6d, 8c, 9c, 10c, and 11e)		2,495,1		2,768,07
	12		, , , , , , , , , , , , , , , , , , , ,	(must equal Part VIII, column (A), lir	ne	2,133,1	-	
		12) .	<u> </u>	· · · · · · · · · · ·		108,497,1		120,500,26
	13			IX, column (A), lines 1-3)		5,106,5		5,326,76
	14			X, column (A), line 4)	•		0	
88	15	Saları 5–10		e benefits (Part IX, column (A), lines		67,594,3	06	69,709,66
ý. K	16a		, ssional fundraising fees (Part IX,	column (A), line 11e)		18,0	55	13,45
<u>ਵੇਂ</u>	ь	Total fu	ındraısıng expenses (Part IX, column (D)	, line 25) 3 ,174,999				
	17	Other	expenses (Part IX, column (A), I	ınes 11a-11d, 11f-24e)		24,247,6	63	24,939,21
	18	Total	expenses Add lines 13-17 (mus	st equal Part IX, column (A), line 25)		96,966,6	01	99,989,09
	19	Rever	ue less expenses Subtract line	18 from line 12		11,530,5		20,511,17
500					Begin		nt	End of Year
35	20	Total	assets (Part X. line 16)				17	400,493,89
3 E								38,200,24
Far	22		ssets or fund balances Subtract			326,169,7		362,293,64
Par	t II		ature Block					
Not Assets or Expenses Fund Balances	b 17 18 19 20 21	Total for Other Total Rever	indraising expenses (Part IX, column (D) expenses (Part IX, column (A), lexpenses Add lines 13-17 (musture less expenses Subtract line assets (Part X, line 16) liabilities (Part X, line 26)	, line 25) • 3,174,999 Ines 11a-11d, 11f-24e)		24,247,6 96,966,6 11,530,5 ning of Currer Year 368,768,6 42,598,8	63 01 64 nt	24,939 99,989 20,511 End of Year 400,493 38,200
źĒ								
		_		ımıned this return, including accompa				
ny kr	rer ha	dge and as any k	belief, it is true, correct, and comnowledge	plete Declaration of preparer (other t				
\			KAWANO ASSISTANT TREASURER or print name and title					
		17	Print/Type preparer's name	1 ' -	Date	Check I If	PTIN	
Paic	i	L	RACHEL C ANTAL			self-employed	P01263	071
	, pare		Firm's name 🕨 KPMG LLP			Firm's EIN 🟲		
	On		Firm's address 🕨 1003 Bishop Street Suit	e 2100		Phone no (808)	944-58	312
					I			

Honolulu, HI 96813

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

✓ Yes ☐ No

Par	HIII			ervice Accompleresponse or note to	lishments Dany line in this Par	tIII		
1	Briefl	y describe the orga	ınızatıon's mıs	sion				
CON EACI THEN CREA FOUI SCHO FACU	SISTE HINDI HFOR ATIVII NDED DOLS JLTY A	NT WITH THE CHE VIDUAL, DEVELO HIGHER EDUCATI IY AND APPRECIA IN 1841, PUNAHO ERVING CHILDRE IND ACADEMIC SI	RISTIAN PRIN P INTELLECT ON AND FOR TION FOR TH U SCHOOL IS N FROM EVER JPPORT STAF IS DIVIDED I	CIPLES ON WHIC UAL, ACADEMIC CHALLENGES FA HE ARTS, APPREC STHE LARGEST IN Y RACIAL, RELIG FF OF APPROXIMA INTO TWO MAJOR	H PUNAHOU WAS AND PHYSICAL PO CING THEM NOW A IATE CULTURAL D NDEPENDENT SCH IOUS, SOCIAL AN TELY 600, SERVIN DIVISIONS THE	S CAN DEVELOP MORA FOUNDED, AFFIRMING DIENTIAL TO THE FULL AND IN THE FUTURE, DE IVERSTIY AND DEVELO OOL IN AMERICA IT IS D ECONOMIC GROUP IN NG ABOUT 3,700 STUDE JUNIOR SCHOOL (KIND	THE WORTH AND EST DEGREE, PRE EVELOP AND ENH OP SOCIAL RESPO S A PRIVATELY OF N HAWAII PUNAH ENTS FROM KINDE	DIGNITY OF PARING IANCE DNSIBILTY PERATED HOU HAS ERGARTEN
2	the pr	or Form 990 or 99	0-EZ?			ear which were not listed o		es 🔽 No
		s," describe these						
3	servi	es?			_	conducts, any program	Г Y е	es 🗸 No
4	Desci exper		n's program se c)(3) and 501(rvice accomplishm c)(4) organizations	are required to rep	three largest program ser ort the amount of grants a		
4a	(Code	e) (Expenses \$	73,739,851	ıncludıng grants of \$	5,326,761) (Reven	ue \$ 78,930,	,961)
	PERC GRAD OVER OF TH CASE DESIG DEVE GATH REQU	ENT OF PUNAHOU GRAI BE 8, AND THE ACADEM'S SEEING APPROXIMATEL' HESE GROUPS OF CHILL MIDDLE SCHOOL WAS OF GNED SPECIFICALLY TO LOPMENTAL PERIOD TH ERING SPACES DESIGN	DUATES GO ON TO (, GRADES 9-12 Y 2,000 STUDENT DOWN SUPPLEMEN COMPLETED IN 20 MEET THE INTELL ROUGH MORE INT ED TO ENCOURAGE	O ATTEND COLLEGE CU THE JUNIOR SCHOOL (I S THESE SMALLER, SEI ITAL EDUCATION, SUCH 105 FOR GRADES 6-8 ECTUAL AND SOCIAL N TIMATE ORGANIZATION, GE COLLABORATION AND	IRRENTLY, PUNAHOU IS K-8) IS COMPOSED OF T LF-CONTAINED SECTION H AS OUTDOOR AND CAM THIS EXPANDED AREA OF EEDS OF EARLY ADOLES AL STRUCTURES, FACILT D INTEGRATED LEARNING	AY SCHOOL OFFERING EDUCAT DIVIDED INTO THE JUNIOR SCITHREE SECTIONS WITH A PRINC IS FOR K-2, 3-5 AND 6-8 ARE INTERIOR OF SCIENCES, ARE ALSO OF CAMPUS WAS DESIGNED TO SCIENTS THE LEARNING ENVIROUTIES MORE OPEN TO THE ENVIROUTIES MORE OPEN, COLLEGE FOREIGN LANGUAGE, PHYSICAL	HOOL, KINDERGARTEN CIPAL AND FIVE SUPERV DESIGNED TO MEET THI FERED IN THE JUNIOR SUPPORT AN EDUCATION THE SUPPORT AN EDUCATION FROMENT AND CLASSR PREPARATORY GRADUA	THROUGH VISORS E SPECIAL NEEDS SCHOOL THE IN PROGRAM HIS COOM AND ATION
4b	(Code	2) (Expenses \$	4,853,359	including grants of \$) (Revenu	ue \$ 3,794,	 721)
שר	SUMN	MER SCHOOL OFFERS A	VARIED AND ENR	ICHED PROGRAM IN AC		SIC AND DANCE THE PROGRAM		•
4c	(Code) (Expenses \$	3,816,891	ıncludıng grants of \$) (Revenu	ue \$ 2,494,	145)
	CO-C CONF	URRICULAR ACTIVITIES	ARE AN ESSENTI	AL PART OF THE PUNAL S ON EXPERIENTIAL, H.		ING STUDENTS DEVELOP A SENS	SE OF RESPONSIBILITY,	, COMMITMENT,
	(Code	e ETICS) (Expenses \$	2,945,415	including grants of \$) (Revenu	e \$ 90,	070)
	(Code	e C DEPARTMENT & THEA) (Expenses \$ TER PROGRAMS	600,984	ıncludıng grants of \$) (Revenu	ie \$ 35,	310)
	(Code	e ENT ACTIVITIES) (Expenses \$	98,209	including grants of \$) (Revenu	e \$ 53,	893)
4d		er program services enses \$	(Describe in 9 3,644,608	Schedule O) including grants o	f \$) (Revenue \$	179,273)	

86,054,709

Total program service expenses ►

Part 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)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f g}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II"	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	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	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X $lacksquare$	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
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		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \footnote{M}	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

91	Statements Regarding Other IRS Filings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	.) No
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 120		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?	1 c	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	
ı	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
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		No
ı	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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
	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		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c	Yes	
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
		[1	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			IN
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	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?			NI.
		8		No
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 49662	0-		NI -
	Did the organization make any taxable distributions under section 4966?	9a ob		N o
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		N
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	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		No
	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 of	r note to any	line in this Part VI							.マ

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		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		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	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	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b	Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
b 11a b 12a b c 13 14	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No

- 7 List the States with which a copy of this Form 990 is required to be filed▶HI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 ▶JILL KAWANO 1601 PUNAHOU STREET
 HONOLULU,HI 96822 (808) 944-5711

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

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

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

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

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

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

(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is	one bot rect	not box h ar or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organızatıon and related organızatıons
(1) WARREN K K LUKE	1 0	V						0	0	
TRUSTEE	0 0	X						0	0	0
(2) CLAIRE O JOHNSON	1 0	.,								
TRUSTEE	0.0	X						0	0	0
(3) ETHAN D ABBOTT	1 0									
TRUSTEE	0 0	X						0	0	0
(4) DEBORAH K BERGER	1 0									
TRUSTEE	0 0	X						0	0	0
(5) W DAVID P CAREY III	1 0									
TRUSTEE	0 0	Х						0	0	0
(6) STEPHEN M CASE	1 0									
		Х						0	0	0
TRUSTEE (7) HAN H SONNY CHING	0 0									
		Х						0	0	0
TRUSTEE (8) MARGARET M COLE	0 0									
		х		Х				0	0	0
ASSISTANT SECRETARY	0 0									
(9) WENDY B CRABB	1 0	X						0	0	0
SECRETARY	0.0									
(10) JUDITH M DAWSON	1 0	X						0	0	0
TRUSTEE	0 0							ű		
(11) MARK H FUKUNAGA	1 0	x		×				0	0	0
SECOND VICE CHAIR	0 0	_ ^		^					0	
(12) RONALD D HIGGINS II	1 0	х						0	0	0
TRUSTEE	0 0	^							U	0
(13) CONSTANCE H LAU	1 0							_		_
TRUSTEE	0 0	X						0	0	0
(14) DUNCAN MACNAUGHTON	1 0									_
CHAIR OF THE BOARD	0 0	X		Х				0	0	0
(15) RANDOLPH G MOORE	1 0									
TRUSTEE	0 0	X						0	0	0
(16) PIERRE M OMIDYAR	1 0									
		x						0	0	0
TRUSTEE (17) MICHAEL A PIETSCH	0 0									
		х						0	0	0
TRUSTEE	0 0									
										Form 990 (2013)

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 pers	than on is	one bot	not box h ar	chec x, unlo n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F Estim amount comper from	nated of other nsation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organi and re organiz	lated
(18) JEFFREY N WATANABE	1 0	х						0	o	,	0
TRUSTEE (19) KATHLEEN S WO	0 0										
FIRST VICE CHAIR	0 0	х		×				0	o	ı	0
(20) JAMES K SCOTT	40 0			l							
PRESIDENT	0 0			Х				396,821	0)	41,973
(21) JOHN D FIELD JR	40 0			x				251,316	0		27,156
VP,TREAS, FINANCE/AD (22) JILL M KAWANO	0 0										
ASST TREASURER	0 0			Х				139,097	O	1	13,988
(23) KEVIN E CONWAY	40 0				х			265,953	0		23,737
PRINCIPAL - ACADEMY	0 0							203,333	, and the second		23,737
(24) MICHAEL T WALKER	40 0				x			235,204	o	,	33,272
PRINCIPAL - JUNIOR SCHOOL (25) KATHRYN A NELSON	0 0 40 0										
VP - INSTITUTIONAL ADVANCEMENT	0 0				Х			207,944	0		29,280
(26) RICHARD B SCHAUBLE	40 0					X		160,555	0		23,688
DIR - INSTITUTIONAL SERVICES	0 0							,			
(27) PAULA G HODGES	40 0					x		155,165	O	1	24,283
ACADEMY ASSISTANT PRINCIPAL (28) PAULINE L BAILEY	0 0 40 0										
DIRECTOR - HUMAN RESOURCES	0 0					X		153,142	O	1	13,253
(29) JOHN R OVERTON II	40 0					x		149,192	0		24,472
DIRECTOR - PHYSICAL PLANT	0 0					<u> </u>		149,192	0		24,472
(30) BARBARA Y MORGAN	40 0						×	147,000	o	,	24,158
SR DIR LEGACY PLANNING SVCS	0 0					<u> </u> ▶-					
1b Sub-Total	Dart VII Section A		•	•		-					
d Total (add lines 1b and 1c)				•		<u> </u>		2,261,389	0		279,260
Total number of individuals (included \$100,000 of reportable compensations)	ding but not limited to	those	liste		bove	e) who	rec				· · ·
										Yes	No
3 Did the organization list any forme											
on line 1a? If "Yes," complete Sche									<u> </u>	Yes	
4 For any individual listed on line 1a									om tne		

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

Section B. Independent Contractors

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

(A)	(B)	(C)
Name and business address	Description of services	Compensation
CAMBRIDGE ASSOCIATES LLC, PO BOX 83232 CHICAGO IL 606910232	CONSULTING SERVICES	380,526

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization \blacktriangleright 1

Contributions, Gifts, Grants and Other Similar Amounts	1a
Program Serwce Revenue	2. 1 3
venue	3 4 5 6 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Other R	
	11a

Form 99			_					Page 9
Part V	4++1	Statement o Check if Schedu	f Revenue ule O contains a respon	se or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ω <u>2</u>	1a	Federated cam	paigns 1a					
Grants mounts	ь	Membership du	es 1b					
ē, Gr	С	Fundraising eve	ents 1c					
Giffs, iilar A	d	Related organiz	ations 1d					
a,e E	e	Government grants	s (contributions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	29,226,195				
ontrib id Otl	g	1a-1f \$	ons included in lines	1,138,643	29,226,195			
<u>ة ٽ</u>	h	Total. Add lines	5 1a-1f	•	29,220,193			
₽	22	TUITION & EEEC		Business Code	70,000,061	70.000.001		
Program Serwoe Revenue	2a b	TUITION & FEES INSTRUCTIONAL SI	EDVICES	900099	78,930,961	78,930,961		
ው ሟ	°	- INSTRUCTIONAL SI	ERVICES	900099	6,468,139	6,468,139		
7. 2	d	_						
જુ	e							
gran	f	All other progra	ım service revenue					
<u>ڏ</u>	g	Total. Add lines			85,399,100			
	3		ome (including dividence				22.270	2 654 472
			ar amounts)	F	3,619,194		-32,279	3,651,473
	4 5	Royalties	tment of tax-exempt bond p	roceeds	0			
		Noyalties :	(ı) Real	(II) Personal				
	6a	Gross rents	333,328					
	ь	Less rental expenses	497,472					
	С	Rental income or (loss)	-164,144	0				
	d	, ,	me or (loss)		-164,144			-164,144
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	19,270,610	88,469				
	ь	Less cost or other basis and	19,485,496	385,885				
	 c	sales expenses Gain or (loss)	-214,886	-297,416				
	d		s)		-512,302			-512,302
ė	8a	Gross income f	rom fundraising	· .				
Other Revenue		\$of contributions See Part IV , lin	reported on line 1c)					
<u>.</u>	.		a	2,429,889				
ŧ,	b c		penses b [loss) from fundraising e	2,034,835	395,054			
-			rom gaming activities	venes p	,			
			a					
	b c		penses b [loss) from gaming activ	uties	0			
		Gross sales of returns and allo	inventory, less	ittes				
			a	251,786				
	ь		oods sold b	283,030	24.24			34 34
	С	Net income or (loss) from sales of inve	Business Code	-31,244			-31,244
	11a	CAFETERIA	3 Nevellue	900099	2,568,408			2,568,408
	ь	E.E.MA						
	С							
	d	All other revenu	ue					
	e	Total. Add lines	s 11a-11d	🕨	2,568,408			
	12	Total revenue.	See Instructions		120,500,261	85,399,100	-32,279	5,512,191

orm	990 (2013)				Page 10
Part					_
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	-		•	<u>_</u>
	Check if Schedule O contains a response or note to any line in this	Part IX	(B)		
	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	5,326,761	5,326,761		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,687,139	573,077	871,391	242,671
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	318,850	318,850		
7	Other salaries and wages	47,308,576	42,580,816	3,376,312	1,351,448
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,715,496	3,345,205	265,028	105,263
9	Other employee benefits	13,011,046	11,284,945	1,260,935	465,166
10	Payroll taxes	3,668,557	3,243,475	308,564	116,518
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	268,536		268,536	
c	Accounting	101,749		101,749	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	13,450			13,450
f	Investment management fees	542,247		542,247	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	846,900	131,544	688,721	26,635
12	Advertising and promotion	342,843	617	342,226	·
13	Office expenses	1,104,569	382,883	225,610	496,076
14	Information technology	349,330	305,551	31,535	12,244
15	Royalties	5,028	5,028		<u> </u>
16	Occupancy	4,100,389	3,967,719	121,606	11,064
17	Travel	1,158,006	1,027,816	66,827	63,363
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	158,218	105,916	41,701	10,601
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	8,191,045	7,926,020	242,923	22,102
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	INSTRUCTIONAL	3,059,605	3,059,605		
b	CAFETERIA EXPENSE	1,448,463	1,448,463		
C	OPERATION OF PHYSICAL PLANT	278,633	269,618	8,263	752
d	ADMINISTRATION	2,232,855		1,995,209	237,646
	All other expenses	750,800	750,800		
25	Total functional expenses. Add lines 1 through 24e	99,989,091	86,054,709	10,759,383	3,174,999
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

		Check if Schedule O contains a response or note to any line i	n this Part X			•	· · · · ·
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			2,063,708	1	8,063,752
	2	Savings and temporary cash investments		-	38,605,279	2	47,300,629
	3	Pledges and grants receivable, net			4,122,870	3	15,863,984
	4	Accounts receivable, net			2,156,309	4	321,681
	5	Loans and other receivables from current and former officers, employees, and highest compensated employees Complete Schedule L	Part II of		0	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 Schedul	d contributir employees'	ng employers		6	0
8	7	Notes and loans receivable, net			277,382	7	265,895
₹ ¥					196,912	8	240,810
	8	Inventories for sale or use			<u> </u>		
	9	Prepaid expenses and deferred charges		•	2,496,362	9	2,450,556
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	237,763,071			
	b	Less accumulated depreciation	10b	116,662,126	123,659,691	$\overline{}$	121,100,945
	11	Investments—publicly traded securities			73,046,017	11	71,400,451
	12	Investments—other securities See Part IV, line 11			100,417,696	12	109,115,875
	13	Investments—program-related See Part IV, line 11			0	13	0
	14	Intangible assets			0	14	0
	15	Other assets See Part IV, line 11		•	21,726,391	15	24,369,316
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			368,768,617	16	400,493,894
	17	Accounts payable and accrued expenses			22,584,015	17	23,552,949
	18	Grants payable			0	18	0
	19	Deferred revenue		-	6,773,379	19	6,922,306
	20	Tax-exempt bond liabilities			0	20	0
Ø	21	Escrow or custodial account liability Complete Part IV of Sc	hedule D .		0	21	0
<u>, av</u>	22	Loans and other payables to current and former officers, directly employees, highest compensated employees, and disquare		es,			
Liabilit		persons Complete Part II of Schedule L			0	22	0
\Box	23	Secured mortgages and notes payable to unrelated third part	ies		6,500,000	23	0
	24	Unsecured notes and loans payable to unrelated third parties			0	24	0
	25	Other liabilities (including federal income tax, payables to re and other liabilities not included on lines 17-24) Complete F					
		D			6,741,477	25	7,724,992
	26	Total liabilities. Add lines 17 through 25			42,598,871	26	38,200,247
S e S		Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34.	and con	nplete			
ä	27	Unrestricted net assets		-	219,327,959	27	228,155,135
Fund Balance	28	Temporarily restricted net assets		-	42,063,665	28	62,636,632
⊒	29	Permanently restricted net assets			64,778,122	29	71,501,880
Ė		Organizations that do not follow SFAS 117 (ASC 958), check	here ► ┌ a	and			
<u>-</u>		complete lines 30 through 34.	ŗ				
2	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
Ą	32	Retained earnings, endowment, accumulated income, or othe	r funds			32	
₩.	33	Total net assets or fund balances			326,169,746	33	362,293,647
Net Net							

Pai	T XI 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		120,	500,261
2	Total expenses (must equal Part IX, column (A), line 25)	2		99,9	989,091
3	Revenue less expenses Subtract line 2 from line 1	3		20,!	511,170
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		326,:	169,746
5	Net unrealized gains (losses) on investments	5			184,713
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		2,:	128,018
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		362,2	293,647
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🔽
				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		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	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				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	າt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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DLN: 93493131030265

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.

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

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

2013

Open to Public Inspection

Name of the organization PUNAHOU SCHOOL

Employer identification number

99-0073523

The o	rganı	zatıon ıs	not a priva	te foundation becaus	eitis (Forl	lines 1 throu	ıgh 11, check	conly one b	ox)			
1	Γ	A chur	ch, convent	ion of churches, or a	ssociation of	fchurches d	escribed in s e	ection 170(b)(1)(A)(i).			
2	굣	A scho	ol described	d in section 170(b)(1	L)(A)(ii). (At	tach Schedı	ule E)					
3	\sqcap	A hosp	ital or a cod	perative hospital se	rvice organiz	zatıon descr	ıbed ın sectio	n 170(b)(1)	(A)(iii).			
4	\sqcap	A medi	cal researc	h organization opera	ted ın conjun	ction with a	hospital des	cribed in se c	ction 170(b)(1)(A)(iii)	. Enter the	
	_			ity, and state								
5	ı	_	•	erated for the benefi	_	or universi	ty owned or o	perated by	a government	al unit de	scribed in	
	_			(A)(iv). (Complete P								
6	<u> </u>			local government o	5			. , .	,, ,, ,			
7	Г			at normally receives on 170(b)(1)(A)(vi).			support from	a governme	ental unit or fi	om the ge	neral publi	С
8	Г			described in section		-	nplete Part II	:)				
9	\vdash		•	at normally receives			•	•	outions, mem	bership fe	es, and gro	ss
		receipt	s from activ	rities related to its e	xempt functi	ons—subjec	t to certain e	xceptions, a	and (2) no mo	re than 33	31/3% of	
		ıts sup	port from gr	oss investment inco	me and unre	lated busine	ss taxable ın	come (less	section 511	tax) from	businesses	,
		acquire	d by the or	ganızatıon after June	30,1975 S	ee section !	509(a)(2). (C	omplete Pa	rt III)			
10	Γ	An orga	anization or	ganized and operated	dexclusively	to test for p	public safety	See sectio	n 509(a)(4).			
11	Γ	An org	anization or	ganized and operated	d exclusively	for the ben	efit of, to perf	orm the fun	ctions of, or t	o carry ou	t the purpo	ses of
			•	ly supported organiz				•		ee section	509(a)(3)	.Check
				ibes the type of supp b Type II c						n-functio	nallv integr	ated
e	\Box			ox, I certify that the			-				-	
	•			on managers and ot								
			1509(a)(2)									
f			rganızatıon :hıs box	received a written d	etermination	from the IR	S that it is a	Type I, Typ	e II, or Type	III suppo	rtıng organ	ızatıo <u>n,</u>
g				2006, has the organ	ization accer	oted any dift	or contributi	on from any	of the			,
9			ig persons?	,	izacion accep	occu an, gne	or continuati	on nom any	01 1110			
		(i) A p	erson who d	irectly or indirectly o	ontrols, eith	er alone or t	together with	persons de	scribed in (ii)		Yes	No
		and (111) below, the	governing body of th	ie supported	organizatioi	n?			1:	Lg(i)	<u> </u>
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) ab	ove?				11	.g(ii)	
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11	g(iii)	<u> </u>
h		Provide	the follow	ng information about	the support	ed organızat	ıon(s)					
				т	Γ				1			
) Nam		(ii) EIN	(iii) Type of	(iv) Is		(v) Did you		(vi) Is			mount of
	suppor ganiza			organization (described on	organızatı col (i) lıs		the organiz		organizati col (i) org		1	etary port
O.	yamzı	ation		lines 1- 9 above	your gove		suppor	•	in the U] sup	port
				or IRC section	docume	_		-		_		
				(see								
				instructions))	Yes	No	Yes	No	Yes	No		
Total												
				•		<u> </u>			•	·		

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is i	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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	A mounts 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	(1) 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 second of the secon	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		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction	
		Facts And Circumstances Test	
Retu	ırn Reference	Explanation	
		Schodulo A / Form 000 o	000 E7) 201

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493131030265

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.gov/form990.

Open to Public

ICITIC	ar revenue dervice		Inspection
	nme of the organization NAHOU SCHOOL		Employer identification number
			99-0073523
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990	, Part IV, line 6.	nds or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	3	
2	Aggregate contributions to (during year)	35,991	
3	Aggregate grants from (during year)	317,829	
4	Aggregate value at end of year	6,962,444	
5	Did the organization inform all donors and donor advis funds are the organization's property, subject to the or	_	radvised
6	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the bene conferring impermissible private benefit?	_ _	
Da	irt II Conservation Easements. Complete if	the organization answered "Ves" to	
1	Purpose(s) of conservation easements held by the org		101111 330, Fart IV, line 7.
_	Preservation of land for public use (e.g., recreation		ustorically important land area
	Protection of natural habitat		ertified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in th	e form of a conservation
	·	Γ	Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified histo	oric structure included in (a)	2c
d	Number of conservation easements included in (c) accommodates a commodate structure listed in the National Register	quired after 8/17/06, and not on a	2d
3	Number of conservation easements modified, transfer	red, released, extinguished, or terminated	by the organization during
	the tax year ►		
4	Number of states where property subject to conservat	ion easement is located ►	_
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, handl	ng of violations, and Yes No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easeme	ents during the year
	A mount of expenses incurred in monitoring, inspecting	a and enforcing conservation easements	during the year
7	► \$	g, and emoreing conservation casements	during the year
8	Does each conservation easement reported on line 2(and section $170(h)(4)(B)(II)^{2}$	d) above satisfy the requirements of secti	on 170(h)(4)(B)(ı)
9	In Part XIII, describe how the organization reports co balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organization's financial s	
Pai	rt IIII Organizations Maintaining Collection Complete if the organization answered "Y		r Other Similar Assets.
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide, in Part XIII, the text of the footnote	ets held for public exhibition, education, or	research in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to thes	ets held for public exhibition, education, or	
	(i) Revenues included in Form 990, Part VIII, line 1		► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS		
а	Revenues included in Form 990, Part VIII, line 1	· ,	▶ \$

b Assets included in Form 990, Part X

	Organizations Maintaining Co	niections of Art,	, mist	.orrcar	reasu	ics, or c	tner	Sillillai As	sets (c	ontinuea)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, che	eck any o	f the foll	owing that a	are a	sıgnıfıcant use	e of its	
а	Public exhibition		d	☐ Loa	n or exc	hange progr	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 explai	ın how	they furt	her the c	rganızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit	or receive donations	of art	, historica	al treasu	res or othe	rsımı	ılar		
_	assets to be sold to raise funds rather than								┌ Yes	│ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar					n answere	d "Y€	es" to Form 9	9 90,	
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?	dian or other interme	diary f	for contril	outions (or other ass	ets n		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI $$	II and complete the	follow	ıng table		_				
						-	_	An	nount	
С	Beginning balance					-	1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	21?						☐ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	II Check here if the	expla	nation ha	s been p	rovided in f	art X	(III		Γ
Pai	rt V Endowment Funds. Complete	ıf the organization	ı ansv	wered "Y						
		(a)Current year		rior year			(d)⊤	hree years back		rears back
1a	Beginning of year balance	194,881,890		187,609,57		188,286,691		171,887,008	1	63,956,574
	Contributions	4,567,655		3,805,65	9	3,054,138		4,559,539		2,894,026
С	Net investment earnings, gains, and losses	19,308,806		10,962,82	4	3,649,994		19,027,143		11,959,071
d	Grants or scholarships	2,191,676		2,026,78	4	1,967,870		1,892,535		1,762,040
e	Other expenditures for facilities and programs	5,237,265		5,013,23		4,945,137		4,912,865		4,644,080
f	Administrative expenses	518,866		456,15	0	468,245		381,599		516,543
g	End of year balance	210,810,544		194,881,88	9	187,609,571		188,286,691	1	71,887,008
2	Provide the estimated percentage of the cur	rent year end balanc	e (line	e 1g, colu	mn (a)) l	neld as				
а	Board designated or quasi-endowment 🕨	48 300 %								
b	Permanent endowment ► 33 918 %									
С	Temporarily restricted endowment ► 17 The percentages in lines 2a, 2b, and 2c sho	782 % uld equal 100%								
За							d for t	.l		
	Are there endowment funds not in the posse	ssion of the organiza	ation th	hat are he	eld and a	dministere	a 101 t	ine		
	organization by	_		hat are he	eld and a	dministere	1 101 0	ine	Yes	No
	organization by (i) unrelated organizations							3a	(i)	No
	organization by (i) unrelated organizations	· · · · · · ·						3a((i) (ii)	+
b	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization	ons listed as required	 d on So	 chedule R				3a	(i) (ii)	No
b 4	organization by (i) unrelated organizations	ons listed as required the organization's end	 I on So	chedule Rent funds				3a((i) (ii) b	No No
b 4	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization	ons listed as required the organization's end	 I on So	chedule Rent funds				3a((i) (ii) b	No No
b 4	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(ii), are the related organization Describe in Part XIII the intended uses of t	ons listed as required the organization's end	 I on So	chedule Rent funds	on ansv		to l	3a((i) (ii) b	No No
b 4 Par	organization by (i) unrelated organizations	ons listed as required the organization's end	 I on So	chedule Rent funds ganızatıc	on ansv	vered 'Yes (b)Cost or of basis (othe	to l	3a(3l 3l Form 990, Pa	(i) (ii) b	No No Ine
b 4 Par	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the two states of the two	ons listed as required the organization's end	 I on So	chedule Rent funds ganızatıc	on ansv	vered 'Yes (b)Cost or of basis (othe	ther r)	3a(3l 3l Form 990, Pa	(i)	No No ne
b 4 Par 1a l b E	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of to the second sec	ons listed as required the organization's end	 I on So	chedule Rent funds ganızatıc	on ansv	vered 'Yes (b)Cost or of basis (othe	to liner r) ,498 ,025	3a(3l Form 990, Pa (c) Accumulated depreciation	(i) (ii) b art IV, (d) Bo	No No No ine ook value
b 4 Par 1a l b E	organization by (i) unrelated organizations (ii) related organizations If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the second of the	ons listed as required the organization's end	 I on So	chedule Rent funds ganızatıc	on ansv	vered 'Yes (b)Cost or of basis (othe	ther r) ,498 ,025 ,353	3a(3a(3a(3a(Accumulated depreciation	(i) (ii) b (d) Bc (2 9 9	No No No ne sok value 500,498 95,093,593
b 4 Par 1a l b E c l d E	(i) unrelated organizations (ii) related organizations (ii) related organizations If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of t I Land, Buildings, and Equipmental See Form 990, Part X, line Description of property Land	ons listed as required the organization's endent. Complete if to 10.	 I on So	chedule Rent funds ganızatıc	on ansv	vered 'Yes (b)Cost or of basis (othe 500 158,635 21,595	ther r) ,498 ,025 ,353 ,898	3a((i)	No No No No No No No No No No No No No N

(including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)Financial derivatives		cost of end of year market value
2)Closely-held equity interests		
(3)Other (A)INVESTMENT IN LTD PARTNERSHIPS	109,115,875	F
A)INVESTMENT IN EID FAKTNEKSHIFS	109,113,073	'
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	109,115,875	
	200/220/0.0	answered 'Yes' to Form 990, Part IV, line 110
See Form 990, Part X, line 13.	omplete if the organization	answered res to form 550, rare iv, line iii
(a) Description of investment	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	b	
Part IX Other Assets. Complete if the organization	n answered 'Yes' to Form 990,	Part IV, line 11d See Form 990, Part X, line 15
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description	n answered 'Yes' to Form 990,	(b) Book value
Part IX Other Assets. Complete if the organization (a) Description (1) PERPETUAL TRUSTS	n answered 'Yes' to Form 990,	(b) Book value 24,369,31
(a) Description (b) must equal Form 990, Part X, col.(B) line 1	n answered 'Yes' to Form 990,	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Assets. Complete if the organization (a) Description (a) Description (b) Part X Other Liabilities. Complete if the organization (b) Part X Other Liabilities.	n answered 'Yes' to Form 990,	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line 1 Form 990, Part X, line 25.	n answered 'Yes' to Form 990,	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization (a) Description of liability	n answered 'Yes' to Form 990, ription	(b) Book value 24,369,310
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization Form 990, Part X, line 25. (a) Description of liability Federal income taxes	n answered 'Yes' to Form 990, ription 5.) anization answered 'Yes' to form 990, ription	(b) Book value 24,369,310
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization (a) Description of liability Federal income taxes DEPOSITS HELD IN CUSTODY	n answered 'Yes' to Form 990, ription 5.) anization answered 'Yes' to (b) Book value	(b) Book value 24,369,310
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization Form 990, Part X, line 25. (a) Description of liability Federal income taxes DEPOSITS HELD IN CUSTODY CAPITAL LEASE	n answered 'Yes' to Form 990, ription 2.5.) anization answered 'Yes' to (b) Book value 0 844,277 604,860 3,277,045	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization (a) Description of liability Federal income taxes DEPOSITS HELD IN CUSTODY CAPITAL LEASE LIABILITY UNDER SPLIT-INTEREST	n answered 'Yes' to Form 990, ription 5.) anization answered 'Yes' to (b) Book value 0 844,277 604,860	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes DEPOSITS HELD IN CUSTODY CAPITAL LEASE LIABILITY UNDER SPLIT-INTEREST	n answered 'Yes' to Form 990, ription 2.5.) anization answered 'Yes' to (b) Book value 0 844,277 604,860 3,277,045	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability Total (a) Description of liability Federal income taxes DEPOSITS HELD IN CUSTODY CAPITAL LEASE LIABILITY UNDER SPLIT-INTEREST	n answered 'Yes' to Form 990, ription 2.5.) anization answered 'Yes' to (b) Book value 0 844,277 604,860 3,277,045	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability Total (a) Description of liability Federal income taxes DEPOSITS HELD IN CUSTODY CAPITAL LEASE LIABILITY UNDER SPLIT-INTEREST	n answered 'Yes' to Form 990, ription 2.5.) anization answered 'Yes' to (b) Book value 0 844,277 604,860 3,277,045	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability Total (a) Description of liability Federal income taxes DEPOSITS HELD IN CUSTODY CAPITAL LEASE LIABILITY UNDER SPLIT-INTEREST	n answered 'Yes' to Form 990, ription 2.5.) anization answered 'Yes' to (b) Book value 0 844,277 604,860 3,277,045	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization (b) must equal Form 990, Part X, line 25.	n answered 'Yes' to Form 990, ription 2.5.) anization answered 'Yes' to (b) Book value 0 844,277 604,860 3,277,045	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability Total (a) Description of liability Federal income taxes DEPOSITS HELD IN CUSTODY CAPITAL LEASE LIABILITY UNDER SPLIT-INTEREST	n answered 'Yes' to Form 990, ription 2.5.) anization answered 'Yes' to (b) Book value 0 844,277 604,860 3,277,045	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability Form 990, Part X, line 25. 1 (a) Description of liability Federal income taxes DEPOSITS HELD IN CUSTODY CAPITAL LEASE LIABILITY UNDER SPLIT-INTEREST	n answered 'Yes' to Form 990, ription 2.5.) anization answered 'Yes' to (b) Book value 0 844,277 604,860 3,277,045	(b) Book value 24,369,31
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. Complete if the organization of liability Total (a) Description of liability Federal income taxes DEPOSITS HELD IN CUSTODY CAPITAL LEASE LIABILITY UNDER SPLIT-INTEREST	n answered 'Yes' to Form 990, ription 2.5.) anization answered 'Yes' to (b) Book value 0 844,277 604,860 3,277,045	(b) Book value 24,369,31

			r age I
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue per the organization answered 'Yes' to Form 990, Part IV, line 12a.	oer	Return Complete if
1	Total revenue, gains, and other support per audited financial statements	1	139,373,273
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	16,882,952
3	Subtract line 2e from line 1	3	122,490,321
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 542,247		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	-1,990,060
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	120,500,261
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	s pe	r Return. Complete
1	Total expenses and losses per audited financial statements	1	103,249,372
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIII)	1	
e	Add lines 2a through 2d	2e	3,802,528
3	Subtract line 2e from line 1	3	99,446,844
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 542,247		
b	Other (Describe in Part XIII)	1	
c	Add lines 4a and 4b	4 c	542,247
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	99,989,091

Part XIII Supplemental Information

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

Return Reference	Explanation
RECONCILIATION OF REVENUE	SCHEDULE D, PART XI, LINE 2D OTHER ADJUSTMENTS ARE AS FOLLOWS CHANGE IN VALUE OF SPLIT-INT AGR 2,776,167 LOSS ON SALE OF FIXED ASSETS 297,416 BOOKSTORE EXPENSES NET ON 990 283,030 FMV ADJUSTMENT - INVESTMENTS 41,625
RECONCILIATION OF EXPENSES	SCHEDULE D, PART XII, LINE 2D OTHER ADJUSTMENTS ARE AS FOLLOWS CARNIVAL EXPENSES NET ON 990 2,034,835 RENTAL EXPENSES NET ON 990 497,472 LOSS ON SALE OF FIXED ASSETS 297,416 BOOKSTORE EXPENSES NET ON 990 283,030 ACCOUNTING ADJ FOR ADOPTION OF FASB 158 689,775 TOTAL 3,802,528
FIN 48 FOOTNOTE	THE SCHOOL RECOGNIZES INCOME TAX POSITIONS IN ACCORDANCE WITH ASC TOPIC 740-10 (INTEREPRETATION 48), INCOME TAXES - OVERALL, (ASC TOPIC 740), WHICH PRESCRIBES A "MORE-LIKELY THAN-NOT" RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE (THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED UPON ULTIMATE RESOLUTION WITH TAX AUTHORITIES) FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF AN INCOME TAX POSITION EXPECTED TO BE TAKEN IN A TAX RETURN
INTENDED USES OF THE ORGANIZATION'S ENDOWMENT FUNDS	SCHEDULE D, PART V, LINE 4 THE PRIMARY PURPOSE OF THE ENDOWMENT FUNDS FOR PUNAHOU SCHOOL IS THE CREATION AND MAINTENANCE OF SCHOLARSHIPS IN ORDER TO HELP ALLEVIATE THE COST OF EDUCATING THEIR STUDENTS

	<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: 93493131030265

OMB No 1545-0047

SCHEDULE E

(Form 990 or 990-EZ)

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection Employer identification number

INAH	HOU SCHOOL	00 0072522			
Pa	rt I	99-0073523		YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its other governing instrument, or in a resolution of its governing body?	s charter, bylaws,	1	Yes	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students brochures, catalogues, and other written communications with the public dealing with student adm programs, and scholarships?		2	Yes	
3	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcasthe period of solicitation for students, or during the registration period if it has no solicitation progethat makes the policy known to all parts of the general community it serves? If "Yes," please described explain If you need more space use Part II	ram, in a way	3	Yes	
4	Does the organization maintain the following?				
	Records indicating the racial composition of the student body, faculty, and administrative staff?		4a	Yes	
	Records documenting that scholarships and other financial assistance are awarded on a racially n basis?	ondiscriminatory	4b	Yes	
C	Copies of all catalogues, brochures, announcements, and other written communications to the pub with student admissions, programs, and scholarships?		4c	Yes	
d	Copies of all material used by the organization or on its behalf to solicit contributions?		4d	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 Students' rights or privileges?		5a		No
b	Admissions policies?	-	5b		No
C	Employment of faculty or administrative staff?	-	5c		No
	Scholarships or other financial assistance?		5d		No
	Use of facilities?	-	5e 5f		No No
g	Athletic programs?		5g		No
h	O ther extracurricular activities?		5h		No
	If you answered "Yes" to any of the above, please explain If you need more space, use Part II				
	Does the organization receive any financial aid or assistance from a governmental agency?	<u> </u>	6a		Νo
b	Has the organization's right to such aid ever been revoked or suspended?	<u> </u>	6b		
7	If you answered "Yes" to either line 6a or line 6b, explain on Part II Does the organization certify that it has complied with the applicable requirements of sections 4 0 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," explain on Part	I	7	Yes	

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 NON-DISCRIMINATORY POLICY	FORM 990, SCHEDULE E, LINE 3 STATED IN PERIODIC NEWSPAPER ADVERTISEMENT

Schedule E (Form 990 or 990-EZ) 2013

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

DLN: 93493131030265

OMB No 1545-0047

Open to Public Inspection

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Supplemental Information Regarding

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.

Name of the organization PUNAHOU SCHOOL

Employer identification number

Indicate whether the organ	ızatıon raısed funds	through a	ny of the f	following activities Che	eck all that apply	
Mail solicitations			e	Solicitation of non	-government grants	
☐ Internet and email soli	cıtatıons		f	☐ Solicitation of gov	ernment grants	
Phone solicitations			g	Special fundraisin	g events	
☐ In-person solicitations	;					
Did the organization have a or key employees listed in	Form 990, Part VII)	or entity	ın connec	tion with professional f	undraising services?	Г _{Yes} Г
If "Yes," list the ten highes to be compensated at leas			fundraise	rs) pursuant to agreem	ents under which the fu	ndraiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai: cust cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No			
1			>			
List all states in which the	organization is regis	tered or li	censed to	solicit contributions o	r has been notified it is	exempt from

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribut			
			(a) Event #1 CARNIVAL (event type)	(b) Event #2 (event type)	(c) Other events 0 (total number)	(d) Total events (add col (a) through col (c))
Φ.					(cotal namber)	2 420 880
Revenue	1	Gross receipts	2,429,889			2,429,889
Æ	3	Less Contributions Gross income (line 1				
		minus line 2)	2,429,889			2,429,889
	4	Cash prizes				
Expenses	5	Noncash prizes	24,189)		24,189
	6	Rent/facility costs				
	7	Food and beverages .	239,855	5		239,855
	8	Entertainment	755,125	5		755,125
Direct	9	Other direct expenses .	1,015,666	5		1,015,666
	10	Direct expense summary Add lin	es 4 through 9 in column) (d)	<u> </u>	(2,034,835)
	11	Net income summary Subtract lii				395,054
Par	t II			"Yes" to Form 990, Pa	irt IV, line 19, or rep	
		\$15,000 on Form 990-EZ, lir		<i>4</i> .5.5.11.1.45.1.1.1		
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		Gross revenue				
Ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
_ Derect	5	Other direct expenses				
			┌ Yes%_	┌ Yes %	┌ Yes %	
	6	Volunteer labor	┌ No	┌ No	┌ No	
	7	Direct expense summary Add lines	s 2 through 5 in column ((d)		
		Net gaming income summary Subt				
	1 8	Net gaining income summary Subt	ractime / nominie 1, co	Juliii (a)		
9		ter the state(s) in which the organiza the organization licensed to operate		· · · · · · · · · · · · · · · · · · ·		「Yes 「No
a b	Is t	I fes I No				
10a b		re any of the organization's gaming l	icenses revoked, susper	nded or terminated during	the tax year?	

						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 -Schedule I

DLN: 93493131030265

OMB No 1545-0047

(Form 990)

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

> Open to Public **Inspection**

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990 Department of the Treasury Internal Revenue Service

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

Name of the organization PUNAHOU SCHOOL

Employer identification number 99-0073523

Part I General Information	on on Grants and	Assistance					
1 Does the organization maintain							
the selection criteria used to a							Г Yes
2 Describe in Part IV the organiz					1		п.
Form 990, Part IV, lin							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 gra or assistance
_							
2 Enter total number of section 5		-				· · · •	
3 Enter total number of other org							
For Paperwork Reduction Act Notice, se	e the Instructions for F	orm 990.		Cat No 50055P		Schedu	le I (Form 990) 2013

Part III	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	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance					
				Tirry, appraisal, other)						
(1) SCHOLARSHIPS	655	5,326,761	0	N/A	n/a					
Part IV Supplemental Inform	nation. Provide the info	rmation required in Pa	art I, line 2, Part III,	column (b), and any other	addıtıonal ınformatıon.					

Return Reference Explanation

PROCEDURES FOR MONITORING USE OF GRANT FUNDS CONSIST ALMOST ENTIRELY OF SCHOLARSHIPS AND FINANCIAL AID, WHICH ARE GIVEN TO STUDENTS IN THE FORM OF TUITION REDUCTIONS OR WAIVERS FUNDS ARE ALSO SET ASIDE FOR THE REIMBURSEMENT OF SCHOOL SUPPLIES FOR SOME STUDENTS THESE STUDENTS MUST SUBMIT RECEIPTS DETAILING THEIR PURCHASES SO THAT PUNAHOU CAN VERIFY THAT AMOUNTS SUBMITTED FOR REIMBURSEMENT CONSIST ENTIRELY OF APPROVED EXPENDITURES

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DLN: 93493131030265

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 PUNAHOU SCHOOL

Employer identification number

99-0073523

Pa	Tt 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			
	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?			
	directors, crustees, officers, metading the electric birector, regularing the feeling effected in fine fur	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	Yes	
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?	4c		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		No
ь	Any related organization?	5b		No
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

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

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

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

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

Schedule J (Form 990) 2013

Part IIII 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 addition	iai iiiloiiilatioii
Return Reference	Explanation
DETAIL REGARDING COMPENSATION	SCHEDULE J, PART I, LINE 1A FIRST-CLASS TRAVEL IS PROVIDED TO THE ACADEMY PRINCIPAL, AND IS NOT TREATED AS TAXABLE COMPENSATION A HOUSING ALLOWANCE IS PROVIDED TO KEVIN CONWAY AND JOHN FIELD AND IS INCLUDED IN THEIR REPORTABLE COMPENSATION THE PRESIDENT AND THE LOWER SCHOOL PRINCIPAL RESIDE ON CAMPUS AS A CONDITION OF EMPLOYMENT THIS BENEFIT WAS TREATED AS NONTAXABLE COMPENSATION THE PRESIDENT, TREASURER, AND VP OF INSTITUTIONAL ADVANCEMENT ARE MEMBERS OF SOCIAL CLUBS FOR THE PURPOSE OF RECREATION, NETWORKING, AND ENTERTAINMENT THE PORTION OF EXPENSES THAT CAN BE TRACED TO PERSONAL USE ARE TREATED AS TAXABLE COMPENSATION
EXPENSE REIMBURSEMENT POLICY	SCHEDULE J, PART I, LINE 1B THE SCHOOL FOLLOWS A WRITTEN EXPENSE REIMBURSEMENT POLICY REQUIRING ALL THREE OF THE FOLLOWING (1) THE EXPENSE MUST BE A SCHOOL-RELATED EXPENSE, (2) SUBSTANTIATION RECEIPTS ARE REQUIRED WITHIN A REASONABLE AMOUNT OF TIME, (3) EXCESS ADVANCES MUST BE RETURNED WITHIN A REASONABLE AMOUNT OF TIME
SEVERANCE PAYMENT	The former Senior Director of Legacy Planning became entitled to an aggregate separation payment of \$161,700, less applicable taxes and withholdings, upon termination of employment on December 31, 2012, in consideration of the executive signing a separation agreement and release of claims. The amount consisted of (i) \$147,000 paid as separation pay over twelve months following the executive's termination date and (ii) \$14,700 contributed to a defined contribution retirement plan. A total of \$147,000 of this aggregate amount was actually paid during the 2013 year. In addition, based on the executive's age and service as of her termination date she was eligible for benefits under the Punahou School's retiree medical and dental plans. The separation pay and benefits received by the executive were consistent with amounts paid by Punahou School to executives who have terminated employment in the past in consideration for the executives signing a separation agreement and release of claims.

Schedule J (Form 990) 2013

Software ID: Software Version:

EIN: 99-0073523

Name: PUNAHOU SCHOOL

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

Torin 990, Schedule 3, Part		- Officers, Direct	.ors, Trustees, Re	7 Employees, una	- mgmest compens	Juccu Employees		
(A) Name		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) O ther compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
	(ı) (ıı)	386,021 0	0	10,800	25,500 0	16,473 0	438,794	0
	(I) (II)	220,116 0	0	31,200	17,534 0	9,622	278,472	0
	(ı) (ıı)	139,097 0	0 0	0	13,988 0	0 0	153,085	0
	(I) (II)	234,753 0	0	31,200	18,827 0	4,910 0	289,690	0
	(I) (II)	228,004 0	0	7,200	21,203	12,069	268,476	0
KATHRYN A NELSON VP - INSTITUTIONAL ADVANCEMENT	(I) (II)	200,744 0	0	7,200	16,347 0	12,933	237,224	0
	(I) (II)	160,555 0	0	0	14,230 0	9,458 0	184,243	0
	(I) (II)	155,165 0	0	0	15,754 0	8,529 0	179,448	0
	(I) (II)	153,142 0	0	0	/	0	166,395	0
DIRECTOR - (PHYSICAL PLANT	(I) (II)	149,192 0	0	0		12,069	173,664	0
	(I) (II)	147,000 0	0	0	1 ' 1	9,458	171,158	0

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DLN: 93493131030265

OMB No 1545-0047

Transactions with Interested Persons

Schedule L (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

► 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 o PUNAHOU SCHOO								Employer identification number						
					3) and section		organı	zatıor						
					0, Part IV, line									
1 (a) Nan	ne of disqualif	ied person (n disqualified	(c) Des	cription	of tra	nsactio	' ⁿ	(d) Corr			
			perso	on and organ	ization						Yes	No		
											_			
2 Enterthe	amount of tax	incurred by or	ganization	managers or	disqualified per	sons durina	the vea	r unde	rsectio	n				
4958 .									> \$					
3 Enter the	amount of tax	, if any, on line	2, above,	reımbursed b	y the organization	on			F \$					
Part II Lo	nans to and	d/or From 1	Intereste	d Derson	<u> </u>									
					990-EZ, Part V	, lıne 38a, o	r Form 9	90, Pa	art IV,	line 26,	orıfthe			
	ganızatıon rep	orted an amou			line 5, 6, or 22									
(a) Name of interested	(b) Relationsh	(c) Ip Purpose of	(d) Loan or from t		(e)Original principal	(f)Balance due	(g) In		(h) Appro	ved	(i)Wrı agreen			
person	with	loan	organizati		amount	uuc	aciaai		by	veu	agreen	ilelie.		
	organizatio	on							board or					
									comm	ıttee?				
			То	From			Yes	No	Yes	No	Yes	No		
					1 1					+				
				<u> </u>	+					-				
					1						_			
					1						_			
Total	•	▶ \$	•	<u>'</u>			0			_				
					ed Persons.									
					Form 990, Pa					-) D	6			
(a) Name of perso	1	(b) Relationsl interested per			ınt of assıstance	e (a) iyi	e of ass	istanc	:e ((e) Purpo	se of ass	istance		
		organız												
						_								
						_								
						_								

Part IV Business Transactions Involving Interested Persons.

Complete if the organization	<u>n answered "Yes" on I</u>	<u>-orm 990, Part IV, lin</u>	e 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
See Additional Data Table					

Part V Supplemental Information

Provide additional information for responses to questions on Schodule I (see instructions)

Return Reference	Explanation
	SCHEDULE L, PART IV, COLUMN (D) THE FOLLOWING PAYMENTS WERE MADE TO THE ORGANIZATIONS OR COMPANIES THAT THE TRUSTEES WORK FOR, ARE BOARD MEMBERS OF, OR REPRESENT AND NOT TO THE INDIVIDUALS DIRECTLY CONSTANCE H LAU MS LAU IS THE PRESIDENT & CHIEF EXECUTIVE OFFICER OF HAWAIIAN ELECTRIC INDUSTRIES, WHICH IS THE PARENT COMPANY OF HAWAIIAN ELECTRIC COMPANY, THE ONLY ELECTRICITY PROVIDER ON THE ISLAND OF OAHU THE TRANSACTION REPRESENTS AMOUNTS PAID AT STANDARD RATES AVAILABLE TO THE PUBLIC FOR ELECTRICITY SERVICES TO HAWAIIAN ELECTRIC COMPANY JEFFREY N WATANABE MR WATANABE IS THE CHAIRMAN OF HAWAIIAN ELECTRIC INDUSTRIES, WHICH IS THE PARENT COMPANY OF HAWAIIAN ELECTRIC COMPANY, THE ONLY ELECTRICITY PROVIDER ON THE ISLAND OF OAHU THE TRANSACTION REPRESENTS AMOUNTS PAID AT STANDARD RATES AVAILABLE TO THE PUBLIC FOR ELECTRICITY SERVICES TO HAWAIIAN ELECTRIC COMPANY JAMES K SCOTT DR SCOTT IS A DIRECTOR OF HAWAIIAN ELECTRIC INDUSTRIES, WHICH IS THE PARENT COMPANY OF HAWAIIAN ELECTRIC COMPANY, THE ONLY ELECTRICITY PROVIDER ON THE ISLAND OF OAHU THE TRANSACTION REPRESENTS AMOUNTS PAID AT STANDARD RATES AVAILABLE TO THE PUBLIC FOR ELECTRICITY SERVICES TO HAWAIIAN ELECTRIC COMPANY THE PAYMENTS NOTED BELOW REPRESENT COMPENSATION PAID BY THE ORGANIZATION TO FAMILY MEMBERS OF INTERESTED PERSONS FOR SERVICES RENDERED TO THE ORGANIZATION PAYMENT AMOUNTS WERE DETERMINED BY INDIVIDUALS WITHOUT A CONFLICT OF INTEREST WITH RESPECT TO THE TRANSACTION, AND ANY INTERESTED PERSONS RECUSED THEMSELVES IN ACCORDANCE WITH THE CONFLICT OF INTEREST POLICY DISCLOSED ABOVE JOHN D FIELD MR FIELD'S SPOUSE, SUSAN FIELD, RECEIVED COMPENSATION FROM THE SCHOOL FOR SERVICES AS AN ACADEMY MATH TEACHER MICHAEL T WALKER MR WALKER'S SPOUSE, WENDY MACIAS-WALKER, RECEIVED
	TEACHER MICHAELT WALKER MR WALKER'S SPOUSE, WENDY MACIAS-WALKER, RECEIVED COMPENSATION FROM THE SCHOOL FOR SERVICES AS A PSYCHOSOCIAL EDCUATION INSTRUCTOR CLAIRE O JOHNSON MS JOHNSON'S DAUGHTER, MARI-JO-SCHULL, RECEIVED COMPENSATION FROM THE SCHOOL FOR SERVICES AS A 4TH GRADE TEACHER ETHAN D B ABBOTT MR ABBOTT'S DAUGHTER, MEGAN JOSWICK, RECEIVED COMPENSATION FROM THE SCHOOL FOR SERVICES AS A KINDERGARTEN TEACHER

Additional Data

Software ID: Software Version:

EIN: 99-0073523

Name: PUNAHOU SCHOOL

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

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
(1) CONSTANCE H LAU	TRUSTEE	2,421,689	SEE SCHEDULE L DISCLOSURE		No
(2) JEFFREY N WATANABE	TRUSTEE	2,421,689	SEE SCHEDULE L DISCLOSURE		No
(3) JAMES K SCOTT	OFFICER	2,421,689	SEE SCHEDULE L DISCLOSURE		No
(4) SUSAN J FIELD	FAMILY MEMBER OF OFFICER	96,679	SEE SCHEDULE L DISCLOSURE		No
(5) WENDY S MACIAS WALKER	FAMILY MEMBER OF KEY EMP	85,596	SEE SCHEDULE L DISCLOSURE		No
(6) MARI-JO SCHULL	FAMILY MEMBER OF TRUSTEE	94,408	SEE SCHEDULE L DISCLOSURE		No
(7) MEGAN JOSWICK	FAMILY MEMBER OF TRUSTEE	42,168	SEE SCHEDULE L DISCLOSURE		No

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DLN: 93493131030265

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

Open to Public Inspection

Internal Revenue Service Name of the organization PUNAHOU SCHOOL

Employer identification number

99-0073523

	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of det noncash contribu	_	ts
1 Art—Works of art			ille 19			
2 Art—Historical treasures .						
3 Art—Fractional interests						
4 Books and publications	X		47	REPLACEMENT CO	ST	
5 Clothing and household				REPLACEMENT CO		
goods	×		207	INCI EACEMENT CO	J1	
6 Cars and other vehicles						
7 Boats and planes						
8 Intellectual property						
9 Securities—Publicly traded .	X	82	1,135,480	AVG MARKET PRIC	E	
Securities—Closely held stock .						
1 Securities—Partnership, LLC, or trust interests						
2 Securities—Miscellaneous						
3 Qualified conservation contribution—Historic						
structures						
5 Real estate—Residential .						
6 Real estate—Commercial						
7 Real estate—Other						
3 Collectibles						_
Food inventory						_
Drugs and medical supplies .						
1 Taxidermy						
2 Historical artifacts						
Scientific specimens						
Archeological artifacts						
5 Other►(FT CERTIFICATE)	Х	1	75	REPLACEMENT CO	ST	
5 Other►(5 LILYPAD ARDUINO SETS)	Х	1	809	REPLACEMENT CO	ST	
7 Other▶ (CROSSMAN CHALLENGER SPORTER IR RIFLES)	_ X	1	525	REPLACEMENT CO	ST	
8 Other►(OLF CART)	X	1	1,200	REPLACEMENT CO	ST	
Other►(WELRY)	_ X	1	300	REPLACEMENT CO	ST	
9 Number of Forms 8283 received by the for which the organization completed				9		4
					Yes	No
0a During the year, did the organization	receive by	contribution any property i	reported in Part I, lines 1	through 28, that		
it must hold for at least three years f			, and which is not require	d to be used		
for exempt purposes for the entire ho	olding period	l ²		· · · · <u> 3</u>	0a	Νo
b If "Yes," describe the arrangement in	n Part II					
1 Does the organization have a gift acc	ceptance po	licy that requires the revie	ew of any non-standard co	ntributions?	31 Yes	
2a Does the organization hire or use thi contributions?				ncash		
				3	2a Yes	
 b If "Yes," describe in Part II 3 If the organization did not report an adescribe in Part II 	amount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,		

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.				
Return Reference Explanation				
NON-CASH DONATIONS DISCLOSURE	SCHEDULE M, COLUMN B The organization is reporting the number of contributions received on Column B of Schedule M For contributions of securities, each separate gift is reported on Column B			
	SCHEDULE M, PART I, LINE 32B THE ORGANIZATION USES A THIRD PARTY BROKERAGE SERVICE TO SELL ALL DONATED STOCK			
METHOD OF DETERMINING REVENUES	SCHEDULE M, PART I, COLUMN D CONTRIBUTED PROPERTY IS RECORDED AS INCOME AT THE FAIR VALUE OF THE PROPERTY ON THE DATE OF DONATION THE FAIR VALUE OF PUBLICLY TRADED SECURITIES IS BASED ON AVERAGE MARKET PRICES			

Schedule M (Form 990) (2013)

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DLN: 93493131030265

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization PUNAHOU SCHOOL	Employer identification number		
	99-0073523		

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

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

FORM 990, PART VI, SECTION B, LINE 12C This Conflict of Interest Policy was duly adopted by the Board of Trustees of Punahou School, a Haw aii nonprofit corporation (the School), on June 12, 2007. 1 Purpose The Board of Trustees recognizes that the Trustees, Directors, KEY EMPLOYES, and Officers are active participants in the communities in which they live. As such, these people may serve in many capacities with businesses, organizations, agencies and programs that may intersect with the interests of the School. While such roles may give rise to a dual interest which is beneficial to all parties, the Trustees, Directors, KEY EMPLOYES, and Officers may give rise to a dual interest which is beneficial to all parties, the Trustees, Directors, KEY EMPLOYES, and Officers in carrying out their fuduciary obligations, when the Trustees, Directors, KEY EMPLOYES, and Officers in carrying out their fuduciary obligations, when the Trustees, Directors, KEY EMPLOYES, and Officers in carrying out their fuduciary obligations, when the Trustees, Directors, KEY EMPLOYES, and Officers in carrying out their fuduciary obligations, when the Trustees, Directors, KEY EMPLOYES, and Officers in carrying out their fuduciary obligations. Arrangement shall mean any issue, matter, contract, agreement, transaction or other arrangement with the School or in which the School has an interest Conflict of Interest shall mean any action or proposed action by a Trustee, director, KEY EMPLOYEE, or officer with respect to an Arrangement with or involving (i) such Trustee, Director, KEY EMPLOYEE, or Officer (ii) the spouse of such person, or (iii) are related Entity of such person in An Arrangement in which no action is taken or proposed to be taken by a Trustee, Director, KEY EMPLOYEE, or Officer (iii) therest therested Person shall mean any organization in which a Trustee, Director, KEY EMPLOYEE, or Officer (iii) therest threatest depression shall mean any organization in which a Trustee, Director, KEY EMPLOYEE, or Officer, or the spouse of such Tru

Return Reference	Explanation	
	CONFLICT OF INTEREST POLICY	t, the content of the discussion (including any action taken to determine whether the Conf lict of Interest was in the School's best interest and any alternatives to the proposed Ar rangement), and a record of any votes taken in connection therewith 5 Annual Statements EACH TRUSTEE, DIRECTOR, KEY EMPLOYEE, or OFFICER SHALL ANNUALLY FILL OUT A CONFLICT OF IN TEREST STATEMENT IN IT, THEY SIGN A STATEMENT WHICH AFFIRMS THAT SUCH PERSON (I) HAS RECE IVED A COPY OF THE CONFLICT OF INTEREST POLICY, (II) HAS READ AND UNDERSTANDS THE POLICY, (III) AGREES TO COMPLY WITH THE POLICY, AND (IV) DISCLOSES ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST (AS DEFINED IN THE CONFLICT POLICY)

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

Return Reference Explanation	
INFORMATION AVAILABLE TO PUBLIC	FORM 990, PART VI, SECTION C, LINE 19 While federal tax laws do not mandate that the organization's governing documents, conflict of interest policy and financial statements be made available for public inspection, the organization makes its financial statements available upon request

Return Reference	Explanation
	FORM 990, PART XI, LINE 9 OTHER CHANGES ARE AS FOLLOWS CHANGE IN VALUE OF SPLIT-INT AGR 2,776,167 FMV ADJUSTMENT - INVESTMENTS 41,625 ADOPTION OF PROVISIONS OF SFAS 158 (689,774)

Return Reference	Explanation			
RELATIONSHIPS BETWEEN OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES	FORM 990, PART VI, SECTION A, LINE 2 CONSTANCE LAU, A MEMBER OF THE BOARD OF TRUSTEES, JEFFREY WATANABE, A MEMBER OF THE BOARD OF TRUSTEES, AND JAMES SCOTT, PRESIDENT, HAVE A BUSINESS RELATIONSHIP IN A FOR-PROFIT ENTITY			

DLN: 93493131030265

OMB No 1545-0047

Open to Public Inspection

Related Organizations and Unrelated Partnerships

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Name of the organization PUNAHOU SCHOOL

Employer identification number 99-0073523

Identification of Disfegarded Entitles Complete if the organization answered Tes on Form 990, Part IV, line 33.						
(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 10 4 11			

Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the		ne organization ar	iswerea "Yes" on I	orm 990, Part IV,	line 34 because it f	nad on	е
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity		
						Yes	No
(1) CNW FACULTY BENEFIT TRUST AT PUNAHOU	CHAR TRUST	HI	501(C)(3)	11	PUNAHOU SCH	Yes	
PO BOX 3170 DEPT 715							
HONOLULU, HI 968023170 99-0301435							
(2) CF CHARITABLE TRUST	CHAR TRUST	HI	501(C)(3)	PF	PUNAHOU SCH	Yes	
PO BOX 3170 DEPT 715							
HONOLULU, HI 968023170 91-6571634							
(3) JTW TE COTR PUNAHOU	CHAR TRUST	HI	501(C)(3)	11	PUNAHOU SCH	Yes	
1ST HWN BANK PO BOX 3708							
HONOLULU, HI 96811 99-6048709							

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.													
	(a) Name, address, and EIN of related organization		(b) Primary activity	ty Legal domicile (state o foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income				(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managing partner?		(k) Percentage ownership
						,			Yes	No		Yes	No	
												_		
													\square	
Part IV	Identification of Related Org line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
(a) (b) Name, address, and EIN of Primary activity related organization ((c) Legal domicile (state or foreign country)	Legal domicile (state or foreign		(e) Type of entit (C corp, S corp, or trust)	y Share of to income	total Share	(g) e of end- -year ssets		(h) Percentage ownership		i) on 512 (13) rolled tity?	No.	
						1	<u> </u>			-	ĺ	Yes		No
												ı		

Part V	Transactions With Related Organizations Complete if the organization a	answered "Yes" on Forr	n 990, Part IV, lın	e 34, 35b, or 36.						
Note	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No			
1 During	the tax year, did the orgranization engage in any of the following transactions with one or m	ore related organizations l	ısted ın Parts II-IV?							
a Rece	eipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No			
b Gıft,	grant, or capital contribution to related organization(s)				1b		No			
c Gıft,	grant, or capital contribution from related organization(s)				1c	Yes				
d Loar	ns or loan guarantees to or for related organization(s)				1d		No			
e Loar	ns or loan guarantees by related organization(s)				1e		No			
f Divid	dends from related organization(s)				1f		No			
g Sale	of assets to related organization(s)				1g		No			
h Purc	hase of assets from related organization(s)				1h		No			
i Exch	ange of assets with related organization(s)				1i		No			
j Leas	e of facilities, equipment, or other assets to related organization(s)				1j		No			
k Leas	k Lease of facilities, equipment, or other assets from related organization(s)									
I Performance of services or membership or fundraising solicitations for related organization(s)										
m Performance of services or membership or fundraising solicitations by related organization(s)										
n Sharı	ng of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No			
o Shar	ring of paid employees with related organization(s)				10		No			
p Reim	nbursement paid to related organization(s) for expenses				1 p		No			
q Reim	nbursement paid by related organization(s) for expenses				1q		No			
r Othe	er transfer of cash or property to related organization(s)				1r		No			
s Othe	er transfer of cash or property from related organization(s)				1s		No			
a Ifth	e answer to any of the above is "Yes," see the instructions for information on who must com	anlata this line, including s	overed relationships	and transaction throsholds						
2 11 111	(a)	(b)	(c)	(d)						
Name of related organization Name of related organization Name of related organization Name of related organization Transaction type (a-s) (b) (c) (d) Method of determining and type (a-s)										
(1) CNW FAC	CULTY BENEFIT TRUST AT PUNAHOU	С	850,450	CASH RECEIVED						
(2) CF TRUS	ज	С	106,166	CASH RECEIVED						
(3) JTW TE (COTR PUNAHOU	С	859,309	CASH RECEIVED						
		1	1							

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 regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
]	
												\Box	
	•												

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