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EXTENDED TO AUGUST 17, 2015 Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

► Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

-		endar year 2014 or tax year beginning of foundation		,	A Employer identification r	umber
'					76-0705445	
_	GE	RMAINE HOPE BRENNAN FOUNI	Room/suite	B Telephone number		
		r and street (or P O box number if mail is not delivered to street a	808-524 <u>-809</u>	9		
_	<u>73</u>	7 BISHOP STREET, SUITE 29	990		C If exemption application is per	
	City o	r town, state or province, country, and ZIP or foreign po	ostal code		If exemption application is po	laining, check flore
_	HO	NOLULU, HI 96813	The state of the form	mar public charity	D 1. Foreign organizations,	check here
G	Che	ck all that apply: Initial return	Initial return of a for	mer public charty	D 1. 1 of eight of gameactories	
		Final return	Amended return		Foreign organizations mee check here and attach con	ting the 85% test,
_		Address change	Name change		E If private foundation stati	
ŀ	<u>C</u> h	eck type of organization: X Section 501(c)(3) ex		100	under section 507(b)(1)(A), check here
-	<u>لـــا</u>	Section 4547 (a)(1) Honoxempt street	Other taxable private foundating method: X Cash	Accrual	F If the foundation is in a 6	
I			her (specify)		under section 507(b)(1)(B), check here
	•	in art in con (o), into 10)	mn (d) must be on cash b	asis.)		
r	<u>▶</u> \$	1 Analysis of Revenue and Expenses		(b) Net investment	(c) Adjusted net	(d) Disbursements
l	Par	—— (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	income	income	for charitable purposes (cash basis only)
-		necessarily equal the amounts in column (a))				
		1 Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attach Sch 8				
		Interest on savings and temporary	29,441.	18,441	. 29,441.	STATEMENT 1
			21,879.	21,879		STATEMENT 2
			22/0.50			
a	- 1	5a Gross rents				
0 6 2015	1	b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10	<63.	>		
	Revenue	Gross sales price for all				
©		7 Capital gain net income (from Part IV, line 2)		0		
9		8 Net short-term capital gain			N/A	
AUG		9 Income modifications				
	İ	Gross sales less returns and allowances				
SCANNED	ļ	b Less Cost of goods sold				
	ļ	c Gross profit or (loss)				
Carrier Carrier		11 Other income		40 000	F1 220	
T.		12 Total. Add lines 1 through 11	51,257.	40,320		3,750.
\mathbb{Q}		13 Compensation of officers, directors, trustees, etc	5,000.	1,250		3,750.
~ ~ <i>(4)</i>		14 Other employee salaries and wages				
	.,	15 Pension plans, employee benefits	F 000	1 250	EOFIVED 0.	3,750.
1 23	ses	16a Legal fees STMT 3	5,000.	301		
e.	Expens	b Accounting fees STMT 4	1,204.	1501		903.
	Ä	c Other professional fees		12	AUG 03 2015	
,	tive	17 Interest		304	- AUU V	民/
4	tra	18 Taxes		 	DEDEN, LIT	
	<u>:</u>	19 Depreciation and depletion		· · · · · · · · · · · · · · · · · ·	11.00	
1112	眶	20 Occupancy21 Travel, conferences, and meetings				
ာ က	ΑÞ					
څ. ۲۰	ᄪ		20.		0.	0.
200	ţį	23 Other expenses STMT 5 24 Total operating and administrative				
	Operating and Administrative	expenses. Add lines 13 through 23	11,224.	2,801	L. 0	8,403.
	o	25 Contributions, gifts, grants paid	54,000.			54,000
		26 Total expenses and disbursements.				
		Add lines 24 and 25	65,224.	2,80	L. <u>0</u>	62,403
		27 Subtract line 26 from line 12:				
		2 Excess of revenue over expenses and disbursements	<13,967	>		
		b Net investment income (if negative, enter -0-)		37,51	9.	
		c Adjusted net income (if negative, enter -0-)		<u></u>	51,320	. 000 DE (0044

LHA For Paperwork Reduction Act Notice, see instructions.

	90-PF (2014) GERMAINE HOPE BRENNAN FO	DUNDATION Beginning of year	76 – 0 End of)705445 Pag year
arl	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	X'		
	Savings and temporary cash investments	85,916.	71,949.	71,949
	Accounts receivable ▶	•		
-	Less: allowance for doubtful accounts			
4	Pledges receivable ►			
•	Less: allowance for doubtful accounts ▶]		
5				
-	Receivables due from officers, directors, trustees, and other			
Ŭ	disqualified persons			
7	Other notes and loans receivable			
•	Less: allowance for doubtful accounts		ĺ	
8	· · · · · · · · · · · · · · · · · · ·			
_	Prepaid expenses and deferred charges			
	a Investments - U.S. and state government obligations STMT 6	928,308.	928,308.	965,543
	b Investments - corporate stock		320/0001	303/323
	c Investments - corporate bonds			
	Investments - land, buildings, and equipment basis			
''	Less accumulated degreciation		}	
12	Investments - mortgage loans			
13				
	Land, buildings, and equipment: basis			
14	Less accumulated depreciation]		
15				
	Total assets (to be completed by all filers - see the			
10	instructions. Also, see page 1, item I)	1,014,224.	1,000,257.	1,037,492
17		1,014,224	1,000,231.	1,031,432
	Accounts payable and accrued expenses			
18	. ,			
19	F			
20				
21				
22	Other liabilities (describe >)			
23	Total liabilities (add lines 17 through 22)	0.	0.	
20	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
24	1	1,014,224.	1,000,257.	
25	_	1,013,2230	1,000,237.	
	Permanently restricted			
-0	Foundations that do not follow SFAS 117, check here			
	and complete lines 27 through 31.			
27	· · · · · · · · · · · · · · · · · · ·	l		
28	rangeria di mangangkan di m			
29				
30		1,014,224.	1,000,257.	
••	Total net assets of fano paramets			
31	Total liabilities and net assets/fund balances	1,014,224.	1,000,257.	
	Analysis of Changes in Net Assets or Fund Balances		1,000,25/	
	al net assets or fund balances at beginning of year - Part II, column (a), line 3	30		1 014 00
	ust agree with end-of-year figure reported on prior year's return)		1	1,014,22
	er amount from Part I, line 27a		2	<13,96
Uth	er increases not included in line 2 (itemize)		3	1 000 05
_	I lines 1, 2, and 3		4	1,000,25
			F - 1-	
Dec	treases not included in line 2 (itemize) al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		5	1,000,25

423511 11-24-14

(a) List and describ	e the kind(s) of property sold (e.g.	., real estate,	- moonie	1 · P -	ow acquired Purchase		acquired day, yr.)	(d) Date sold (mo., day, yr.)	
2-story brick warehouse; or common stock, 200 shs. MLC Co.) 1a FFCB 3133EDE6					Donation P		8/14	03/05/14	
b E				03/1	0/14	03/03/14			
d									
<u>e</u>		· · · · · · ·		<u> </u>				<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		<u> </u>		Gain or (loss is (f) minus	(g)	
a 40,000.			40,06	3.				<63.	
<u>b</u>									
d				_					
e									
Complete only for assets showing	gain in column (h) and owned by t	the foundation	n on 12/31/69			(I) Gains (Col. (h) gain	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (i)		C	ol. (k), but Losses	not less that (from col.	.n -0-) or (h))	
	as 01 12/3 1/69	Over	col. (j), if any				·		
8								<63.	
b c				-+					
d				_					
е									
	∫ If gain, also enter	ın Part I, line	7		}				
2 Capital gain net income or (net capit		- ın Part I, line	7	上	2			<63.	
3 Net short-term capital gain or (loss)		nd (6):			- (
If gain, also enter in Part I, line 8, co	lumn (c).			1	2			<63	
Part V Qualification Unc	der Section 4940(e) for	Reduced	Tax on Net	Inve	stment Ir	come			
(For optional use by domestic private for	undations subject to the section 4	4940(a) tax or	n net investment in	icome.)				
If section 4940(d)(2) applies, leave this	nart hlank								
Was the foundation liable for the section			•	rıod?				Yes X No	
If "Yes," the foundation does not qualify 1 Enter the appropriate amount in each				ntries.					
(a)	(b)	1011 40110110 20		(c)			O a feet	(d)	
Base periód years Calendar year (or tax year beginning	المرام وأورا فأرام والمرام المرام في المرام الم	Adjusted qualifying distributions			able-use asse	ts	Distribution ratio (col. (b) divided by col. (c))		
2013		0,190.		1,075,731.					
2012		8,535.	ļ		<u>996,68</u>			.018597	
2011			7,035.		939,78				
2010		0,800. 7,276.			968,53 882,49				
2009		1,410.	<u>L</u>		004,43	4.	T	.053571	
2 Total of line 1, column (d)						2		.200359	
3 Average distribution ratio for the 5-y	ear base period - divide the total o	on line 2 by 5,	or by the number	of yea	rs				
the foundation has been in existence	e if less than 5 years	•	•			3	<u></u>	.040072	
4 Enter the net value of noncharitable-	use assets for 2014 from Part X, I	line 5				4	<u> </u>	1,085,522	
E. Minimahalima di harilma O						_		42 400	
5 Multiply line 4 by line 3						5	 	43,499	
6 Enter 1% of net investment income	(1% of Part I line 27h)					6	1	375	
	(· · · · · · · · · · · · · · · · · · ·					<u> </u>			
7 Add lines 5 and 6						7		43,874.	
8 Enter qualifying distributions from P						8	L	62,403.	
If line 8 is equal to or greater than lin	ne 7, check the box in Part VI, line	1b, and comp	plete that part usin	ıg a 1%	tax rate.				

	990-PF (2014) GERMAINE HOPE BRENNAN FOUNDATION 76	-0705	445		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	<u>} - see i</u>	nstrı	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	ł		_	
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%			3	75.
	of Part I, line 27b	1			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				<u> 0 </u>
_	Add lines 1 and 2			3	75.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				<u> 0.</u>
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			3	75.
	Credits/Payments:				
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 616.]			
	Exempt foreign organizations - tax withheld at source	ŀ			
	Tax paid with application for extension of time to file (Form 8868)	1			
	Backup withholding erroneously withheld 6d 6d			ے	1 ~
	Total credits and payments. Add lines 6a through 6d			0	16.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				41.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				0.
	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ 241. Refunded ▶ 11 rt VII-A Statements Regarding Activities				<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
ıa	any political campaign?		1a	1.03	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		1b		X
IJ	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	-	- 10	ļ	<u> </u>
	distributed by the foundation in connection with the activities.			}	}
^	Did the foundation file Form 1120-POL for this year?		10	1	х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		-"		
u	(1) On the foundation. \$]	
Δ.	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		:		
·	managers. > \$ 0.		Ì		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	j	x
_	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		l	1	l
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
		N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-	5		X
	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			}	ļ
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		Ì		l
	remain in the governing instrument?		_6_	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV		7	X	
			ļ		1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	HI		{	[[
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		1	İ	
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		9	ļ	<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10_	l	X

X

3b

4a

N/A

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2014)

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 990-PF (2014) GERMAINE HOPE BRENNAN FO	OUNDATION		<u>76-07054</u>	45	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)		 -
 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section). (2) Influence the outcome of any specific public election (see section 4955); 			s X No		
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purpose			s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions)			s X No		
 (5) Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un 		Ye	s X No		
section 53.4945 or in a current notice regarding disaster assistance (see instr Organizations relying on a current notice regarding disaster assistance check	ructions)?	iii negulations	N/A	5b	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 494	from the tax because it mainta ${f h}$		s No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	• •	Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a <i>lf</i> "Yes" to 6b, file Form 8870.	personal benefit contract?		-	6b	<u> </u>
7a At any time during the tax year, was the foundation a party to a prohibited tax b If "Yes," did the foundation receive any proceeds or have any net income attrib			7b		
Part VIII Information About Officers, Directors, Trus Paid Employees, and Contractors		nagers, Highly	/ 		
1 List all officers, directors, trustees, foundation managers and their		T. Componentian	(d) Coatributosa to		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acco	Expense ount, other owances
ELLIOT H LODEN 737 BISHOP STREET, SUITE 2990	TRUSTEE			ļ	
HONOLULU, HI 96813	4.00	5,000.	0.		0.
GERMAINE BRENNAN	TRUSTEE				
2600 PUALANI WAY, APT #3305	_		_	i	
HONOLULU, HI 96815	2.00	0.	0.		0.
	-				
2 Compensation of five highest-paid employees (other than those in	acluded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	acco	Expense ount, other owances
NONE					
		-			
Total number of other employees paid over \$50,000	<u> </u>		>		0

Total. Add lines 1 through 3

Page 8

GERMAINE HOPE BRENNAN FOUNDATION

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	1,000,772.
	Average of monthly cash balances	1b	101,281.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,102,053.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3_	1,102,053.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4_	16,531.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,085,522.
6_	Minimum investment return. Enter 5% of line 5	6_	54,276.
Р	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certaii	
1	Minimum investment return from Part X, line 6	1	54,276.
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	375.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	53,901.
4	Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5	Add lines 3 and 4	5	53,901.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	53,901.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	62,403.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	62,403.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	375.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	62,028.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies	for the section

Form **990-PF** (2014)

Part XIII Undistributed Income (see ins	nstructions)
---	--------------

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,				52 001
line 7				53,901.
2 Undistributed income, if any, as of the end of 2014			51 050	
a Enter amount for 2013 only			51,850.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013	0.			
f Total of lines 3a through e				
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$ 62,403.			51,850.	
a Applied to 2013, but not more than line 2a			31,0501	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)			<u> </u>	
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	U •			10,553.
d Applied to 2014 distributable amount	0.			
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	<u> </u>			
6 Enter the net total of each column as indicated below:				,
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		·
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line]		
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				43,348.
be distributed in 2015				43,340.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009	0			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.	0.			
Subtract lines 7 and 8 from line 6a	<u> </u>			
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				Form 990-PF (2014)

3 Grants and Contributions Paid During the Ye		ayment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
	,			
PROJECT OPEN HAND			CHARITABLE	
P.O. BOX 642910				
SAN FRANCISCO, CA 94164				2,000
SAN FRANCISCO PERFORMANCES FOUNDATION			CHARITABLE	
500 SUTTER STREET 710			CHARITABLE	
SAN FRANCISCO, CA 94102				2,000
MATERIAL PLATES APONT			TIDITGA TITONA I	
TUDENTS RISING ABOVE			EDUCATIONAL	
SAN FRANCISCO CA 94129 _				2,000
FAN FRANCISCO JAZZ FOUNDATION B EMBARCADERO CENTER			CHARITABLE	
SAN FRANCISCO CA 94111				2,500
111111111111111111111111111111111111111				
			-	
CCSM PUBLIC RADIO			CHARITABLE	
1700 W. HILLDALE BOULEVARD SAN MATEO, CA 94402				2.000
	TINUATION SHEET	r(S)	▶ 3a	54 000
b Approved for future payment		-		
NONE				
NONE				
1				
1				
]]	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	Amount	
a	 				
b					
<u> </u>					
d			+		
e			1		
g Fees and contracts from government agencies					
Membership dues and assessments			+		· · · · · · · · · · · · · · · · · · ·
3 Interest on savings and temporary cash	 				
investments			14	29.441.	
4 Dividends and interest from securities			14	29,441. 21,879.	
5 Net rental income or (loss) from real estate:		· · · · · · · · · · · · · · · · · · ·			······································
a Debt-financed property			<u> </u>		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<63.>	·
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			4		
11 Other revenue:	1		1 1		
a					
b			4		
c					
d					
e			_		
12 Subtotal. Add columns (b), (d), and (e)		0	لـــــــــــ	51,257.	
13 Total. Add line 12, columns (b), (d), and (e)				13	51,257.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acco	emplishment of E	Exemp	t Purposes	
Line No. Explain below how each activity for which incor			-A contrib	uted importantly to the accomp	olishment of
the foundation's exempt purposes (other than t	by providing fur	ids for such purposes).			

▼	the foundation's exempt purposes (other than by providing funds for such purposes).
-	

423621 11-24-1

Form 990				N FOUNDATION		76-0705			age 13
Part 2		on Regarding Ti rganizations	ransfers To a	and Transactions	and Relations	ships With Nonchar	ritable	•	
1 Did			any of the follower	ng with any other organizat	ion described in sec	tion 501(c) of	7	Yes	No
			=	27, relating to political orga		11011 30 1(6) 01			
	nsfers from the reporting		•		, in Edition 5 :				
	Cash	Touridation to a noner	arnable exempt of	gamzation of.			1a(1)		X
٠,	Other assets						1a(2)		X
	er transactions:						10/2/		<u> </u>
	Sales of assets to a none	charitable exempt orga	nization				16(1)		Х
	Purchases of assets from						1b(2)		Х
٠.	Rental of facilities, equip		p.: 0. ga==1.011				1b(3)		X
	Reimbursement arrange						1b(4)		Х
• •	Loans or loan guarantees						1b(5)		Х
	Performance of services		ndraising solicitatio	ons			1b(6)		X_
	arıng of facilities, equipme						1c		X
d If th	ne answer to any of the ab	ove is "Yes," complete	the following sche	edule. Column (b) should a	lways show the fair	market value of the goods, o	ther ass	ets,	
ors	services given by the repo	rting foundation. If the	foundation receiv	ed less than fair market val	ue in any transactio	n or sharing arrangement, sl	now in		
col	umn (d) the value of the g		services received.						
(a) Line n	• (b) Amount involve	ed (c) Nam	ne of noncharitable	e exempt organization	(d) Description	n of transfers, transactions, and s	haring an	rangeme	nts
			N/A						
						· · · · · · · · · · · · · · · · · · ·			
									
				 	<u> </u>				
									
									
									
	-								
		- 							
	- 								
									
-									
				or more tax-exempt organ	izations described		¬	-	—— п.,
	ection 501(c) of the Code	•	ri(c)(3)) or in seci	ion 5277		<u></u>	Yes	LA] No
	es," complete the following	of organization		(b) Type of organization	T	(c) Description of relationsh	in		
		/A		(b) Type or or gameaner.		(o) = conspiction of rolations.	<u> </u>		
		<u>/ 21</u>							
-	·								
				g accompanying schedules and			the IRS	iscuss t	this
Sign	and belief it a true correct	and complete Declaration	of preparer (other that >	n taxpayer) is based on all infori		returns any knowledge	n with the	e prepar	er
Here	C LEG TY	1X run		1/22/15	TRUST	EE X	Yes		No
	Signature of officer or to	rustee		Date	Title				
	Print/Type prepare	er's name	Preparer's s	ignature	Date	Check if PTIN			
.			Alon on	Lean Town		self- employed			
Paid	JAMES JI		Hames	10 10 1	07/13/15		290		_
Prepa Use (1 / // / O II CATIO F	JAMES D. J	ENNINGS,	VCPA, INCV		Firm's EIN ► 43-19	523	38	
J36 (1600 7357	OT ANT PT	TO CITAR 1	211		.		
	THILL S GUUICSS			VD., SUITE 1	7311	Dhanna 0.00 0.4	ام د ا	012	
		HONOLULU,	TROST	4		Phone no. 808 – 94	<u>: 4 - 0</u>	<u>013</u>	

Phone no. 808-942-8813 Form **990-PF** (2014)

76-0705445

GERMAINE HOPE BRENNAN FOUNDATION

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution status of any foundation manager Name and address (home or business) recipient or substantial contributor SAN FRANCISCO FOOD BANK CHARITABLE 900 PENNSYLVANIA AVE SAN FRANCISCO, CA 94107 2,000. SAN FRANCISCO SOCIETY FOR THE CHARITABLE PREVENTION OF CRUELTY TO ANIMALS 2500 16TH STREET SAN FRANCISCO, CA 94103 1,000. JEWISH FAMILY AND CHILDREN'S SERVICE CHARITABLE 2150 POST STREET SAN FRANCISCO CA 94115 1,500, CHARITABLE AMERICAN ASSOCIATES, BEN-GURION UNIVERSITY OF THE NEGEV SOUTHWEST REGION 1880 CENTURY PARK EAST 612 LOS ANGELES, CA 90067 1,000. AMERICAN TECHNION SOCIETY CHARITABLE 55 E 59TH STREET LF 14 NEW YORK, NY 10126 1,000. AMERICAN COMMITTEE FOR THE WEIZMANN CHARITABLE INSTITUTE OF SCIENCE 633 THIRD AVENUE, 20TH FLOOR 4,000. NEW YORK, NY 10017 TECHNION UNIVERSITY RAMBAM HEALTH CHARITABLE CARE CAMPUS P.O. BOX 9602 8,000. HAIFA, ISRAEL, ISRAEL 31096 UCSD/TECHNION UNIVERSITY CHARTITABLE 9415 CAMPUS POINT DRIVE LA JOLLA, CA 92093 25,000, Total from continuation sheets 43,500.

FORM 990-PF INTERE	ST ON SAVI	NGS AND TEM	IPORARY C	ASH IN	VESTMENTS	STATEMENT 1		
SOURCE	(A REVE PER B	NUE	(B) NET INVESTMENT INCOME 13. 18,428.		(C) ADJUSTED NET INCOME 13. 29,428.			
BANK OF HAWAII CHARLES SCHWAB	2	13. 29,428.						
TOTAL TO PART I, LI	NE 3	2	29,441.		18,441. 29,44			
FORM 990-PF	DIVIDEND	S AND INTER	REST FROM	SECUR	ITIES	STATEMENT 2		
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE		(B) NET INVES MENT INCO			
CHARLES SCHWAB	21,879	•	0. 2	1,879.	21,87	9. 21,879.		
TO PART I, LINE 4	21,879	•	0. 2	1,879.	21,87	9. 21,879.		
FORM 990-PF		LEGAL	FEES			STATEMENT 3		
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM			
LEGAL	_	5,000.	1	,250.	· · · · · · · · · · · · · · · · · · ·	0. 3,750.		
TO FM 990-PF, PG 1, LN 16A		5,000.	1,250.			0. 3,750.		
FORM 990-PF		ACCOUNTI	ACCOUNTING FEES			STATEMENT 4		
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM			
ACCOUNTING		1,204.	. ———	301.		0. 903.		
TO FORM 990-PF, PG	 1, LN 16B	1,204.	-	301.		0. 903.		
	=			 :				

FORM 990-PF	OTHER EXPENSES				STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM			
CHECK ORDER	20	•	0.		0.	0.	
TO FORM 990-PF, PG 1, LN 23	20	•	0.		0.	0.	
FORM 990-PF U.S. AND S DESCRIPTION	U.; GOV	S. OTHER	<u>,</u>	GATIONS OK VALUE	STATEMENT FAIR MARKE' VALUE	r	
BANK AMER CORP SUB 5.500% 8/1 BANK AMER CORP SUB 5.450% 9/1 BANK AMER CORP SUB INTNTS BEI	 15/2030 X 15/2030 X			100,000. 100,000.	100,12 100,12		
5.400% HONOLULU CITY 6.478% 12/01/35 HAWAII ST ARPTS SYS MUNIT 5% HONOLULU HAWAII MUNI 4.75% GENERAL ELEC CAP C FLT 1973				125,000. 5,088. 120,750. 98,225. 379,245.	125,23 5,93 139,83 110,33 383,98	30 24 33	
GENERAL BLEC CAP C FIII 1973		•		928,308.	965,56		
TOTAL U.S. GOVERNMENT OBLIGAT	LIONS			720,300.		43	

Form **8868** (Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

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

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

OMB No. 1545-1709

 $\triangleright |\mathbf{X}|$

Do not co	omplete Part II unless you have already been granted a	an automa	itic 3-month extension on a previous	ily filed Fo	rm 8868.			
Electron	ic filing (e-file). You can electronically file Form 8868 if y	ou need a	a 3-month automatic extension of tin	ne to file (6	6 months for a corpo	oration		
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fi	le Form 8	368 to request an ex	xtension		
of time to	file any of the forms listed in Part I or Part II with the exi	ception of	Form 8870, Information Return for 7	Fransfers /	Associated With Cei	rtaın		
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details o	on the elec	tronic filing of this f	orm,		
visit www	urs gov/efile and click on e-file for Chanties & Nonprofits							
Part I	Automatic 3-Month Extension of Time	o. Only s	submit original (no copies ne	eded).				
A corpora	ation required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete				
Part I onl	у				▶	Ш		
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	ICs, and t	rusts must use Form 7004 to reques		sion of time er's identifying nun	nber		
Type or	Name of exempt organization or other filer, see instru	Employe	Employer identification number (
print								
File biraba	GERMAINE HOPE BRENNAN FOUNI	CITAC	N		76-0705445			
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions. 737 BISHOP STREET, SUITE 2990				Social security number (SSN)			
return See instructions	City, town or post office, state, and ZIP code. For a fo		ress, see instructions.					
	HONOLULU, HI 96813							
	,	•						
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 4		
Applicat	ion	Return	Application			Return		
Is For		Code	Is For		Code			
	or Form 990-EZ	01	Form 990-T (corporation)		07			
Form 990		02	Form 1041-A			08		
Form 4720 (individual)			Form 4720 (other than individual)		09			
Form 990-PF			Form 5227		10			
Form 990-T (sec. 401(a) or 408(a) trust)			Form 6069					
Form 990-T (trust other than above)			Form 8870		11 12			
	GERMAINE BRENNA	AN						
• The b	ooks are in the care of ▶ 737 BISHOP STRI		SUITE 2990 - HONOL	ULU,	HI 96813			
	none No. ► 808-524-8099	•	Fax No. ▶					
	organization does not have an office or place of business	s in the Ur	nited States, check this box					
	is for a Group Return, enter the organization's four digit			f this is fo	r the whole group, c	heck this		
box 🕨	. If it is for part of the group, check this box	1						
1 I re	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until				
	AUGUST 17, 2015, to file the exemp	t organiza	tion return for the organization name	ed above.	The extension			
ıs f	or the organization's return for:							
•	X calendar year 2014 or							
	tax year beginning	, an	d ending		•			
2 If the	ne tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Fınal retur	n			
	Change in accounting period							
3a If ti								
nonrefundable credits. See instructions. 3a \$						<u> </u>		
b If the	nis application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and					
est	ımated tax payments made. Include any prior year overp	ayment a	llowed as a credit.	3b	\$	616.		
с Ва	lance due. Subtract line 3b from line 3a. Include your pa	yment wit	h this form, if required,					
by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$					\$	0.		
Caution.	If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 8	453-EO ar	nd Form 8879-EO fo	r payment		
instructio	ns.							

For Privacy Act and Paperwork Reduction Act Notice, see instructions. 423841 05-01-14

Form 8868 (Rev. 1-2014)

LHA