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EXTENDED TO NOVEMBER 16, 2015

Form 990-PF

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

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

OMB No 1545-0052

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning , and ending

Name of foundation: JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION

A Employer identification number: 99-0203078

Number and street (or P O box number if mail is not delivered to street address): 1001 KAMOKILA BLVD. CAMPBELL BLDG. Room/suite: 200

B Telephone number: 808-674-6674

City or town, state or province, country, and ZIP or foreign postal code: KAPOLEI, HI 96707

C If exemption application is pending, check here ▶ ☐

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization: [X] Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶$ 21,551,241.

J Accounting method: [X] Cash ☐ Accrual ☐ Other (specify) (Part I, column (d) must be on cash basis.)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue				
1 Contributions, gifts, grants, etc., received	506,287.		N/A	
2 Check ▶ ☐ if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	744.	744.		STATEMENT 1
4 Dividends and interest from securities	487,381.	487,381.		STATEMENT 2
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	1,256,298.			
b Gross sales price for all assets on line 6a 2,350,458.				
7 Capital gain net income (from Part IV, line 2)		1,254,369.		
8 Net short-term capital gain				
9 Income modifications				
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income	<11,618.>	<9,749.>		STATEMENT 3
12 **Total.** Add lines 1 through 11	2,239,092.	1,732,745.		
Operating and Administrative Expenses				
13 Compensation of officers, directors, trustees, etc	0.	0.		0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees				
b Accounting fees STMT 4	18,220.	0.		18,220.
c Other professional fees STMT 5	208,777.	141,777.		67,000.
17 Interest	44,923.	44,923.		0.
18 Taxes STMT 6	14,252.	0.		0.
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 7	29,115.	0.		29,115.
24 **Total operating and administrative expenses.** Add lines 13 through 23	315,287.	186,700.		114,335.
25 Contributions, gifts, grants paid	1,057,463.			1,057,463.
26 **Total expenses and disbursements.** Add lines 24 and 25	1,372,750.	186,700.		1,171,798.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	866,342.			
b **Net investment income** (if negative, enter -0-)		1,546,045.		
c **Adjusted net income** (if negative, enter -0-)			N/A	

423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions. Form 990-PF (2014)

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	2,472,909.	271,904.	271,904.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 9	3,514,567.	23,373.	23,373.
	c Investments - corporate bonds STMT 10	3,129,209.	0.	0.
	11 Investments - land, buildings, and equipment: basis ▶			
	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 11	12,934,939.	21,254,389.	21,254,389.
	14 Land, buildings, and equipment: basis ▶			
	Less accumulated depreciation ▶			
	15 Other assets (describe ▶ STATEMENT 12)	875.	1,575.	1,575.
	16 **Total assets** (to be completed by all filers - see the instructions. Also, see page 1, item I)	22,052,499.	21,551,241.	21,551,241.
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities** (add lines 17 through 22)	0.	0.	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ [X] and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted	21,980,896.	21,518,880.	
	25 Temporarily restricted	71,603.	32,361.	
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ [ ] and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances**	22,052,499.	21,551,241.	
	31 **Total liabilities and net assets/fund balances**	22,052,499.	21,551,241.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	22,052,499.
2 Enter amount from Part I, line 27a	2	866,342.
3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 8	3	404.
4 Add lines 1, 2, and 3	4	22,919,245.
5 Decreases not included in line 2 (itemize) ▶ UNREALIZED GAIN(LOSS) ON INVESTMENTS	5	1,368,004.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	21,551,241.

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b	SEE ATTACHED STATEMENTS			
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a				
b				
c				
d				
e	2,350,458.		1,586,638.	1,254,369.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a				
b				
c				
d				
e				1,254,369.

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7; If (loss), enter -0- in Part I, line 7 }	2	1,254,369.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2013	1,098,222.	20,557,882.	.053421
2012	912,009.	19,071,901.	.047820
2011	1,327,885.	19,519,115.	.068030
2010	606,871.	18,682,995.	.032483
2009	687,755.	15,005,798.	.045833

2	Total of line 1, column (d)	2	.247587
3	Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.049517
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	4	21,789,426.
5	Multiply line 4 by line 3	5	1,078,947.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	15,460.
7	Add lines 5 and 6	7	1,094,407.
8	Enter qualifying distributions from Part XII, line 4	8	1,171,798.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ [X] and enter 1% of Part I, line 27b		1	15,460.
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0.
3	Add lines 1 and 2		3	15,460.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5	**Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-		5	15,460.
6	Credits/Payments:			
a	2014 estimated tax payments and 2013 overpayment credited to 2014	6a 33,782.		
b	Exempt foreign organizations - tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments. Add lines 6a through 6d		7	33,782.
8	Enter any **penalty** for underpayment of estimated tax. Check here [X] if Form 2220 is attached		8	
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶		9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶		10	18,322.
11	Enter the amount of line 10 to be: **Credited to 2015 estimated tax** ▶	18,322. **Refunded** ▶	11	0.

Part VII-A Statements Regarding Activities

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
c	Did the foundation file **Form 1120-POL** for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ $ 0. (2) On foundation managers. ▶ $ 0.			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ $ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or 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	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • 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 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	
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 year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

Part VII-A Statements Regarding Activities *(continued)*

		Line	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ▶ HTTP://WWW.CAMPBELLFAMILYFOUNDATION.ORG/

14 The books are in care of ▶ KEOLA LLOYD Telephone no. ▶ 808-674-6674

Located at ▶ 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 ZIP+4 ▶ 96707

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** - Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 N/A

		Line	Yes	No
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country ▶			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

			Line	Yes	No
1a	During the year did the foundation (either directly or indirectly):				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☒ Yes ☐ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b		X
	Organizations relying on a current notice regarding disaster assistance check here	▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):				
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?	☐ Yes ☒ No			
	If "Yes," list the years ▶ ____, ____, ____, ____				
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement - see instructions.)	N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here. ▶ ____, ____, ____, ____				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (**1**) any purchase by the foundation or disqualified persons after May 26, 1969; (**2**) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (**3**) the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.)*	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

5a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions) ☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A | 5b | | |

Organizations relying on a current notice regarding disaster assistance check here ▶ ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A ☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 6b | | X |

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A | 7b | | |

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(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	(e) Expense account, other allowances
SEE STATEMENT 13		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included 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	(e) Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** *(continued)*

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
CAMBRIDGE ASSOCIATES LLC 100 SUMMER STREET, BOSTON, MA 02110-2112	INVESTMENT MANAGEMENT	96,488.
JAMES CAMPBELL COMPANY LLC - JAMES CAMPBELL BLDG, 1001 KAMOKILA BLVD, SUITE 200, KAPOLEI,	MANAGEMENT	67,000.
Total number of others receiving over $50,000 for professional services ▶		0

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

Part IX-B **Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions. 3	
Total. Add lines 1 through 3 ▶	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities		1a	21,009,855.
b	Average of monthly cash balances		1b	1,111,390.
c	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	22,121,245.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	22,121,245.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	331,819.
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3. Enter here and on Part V, line 4		5	21,789,426.
6	**Minimum investment return.** Enter 5% of line 5		6	1,089,471.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6		1	1,089,471.
2a	Tax on investment income for 2014 from Part VI, line 5	2a 15,460.		
b	Income tax for 2014. (This does not include the tax from Part VI.)	2b 5,270.		
c	Add lines 2a and 2b		2c	20,730.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	1,068,741.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	1,068,741.
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	1,068,741.

Part XII 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	1,171,798.
b	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:		
a	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	1,171,798.
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	15,460.
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	1,156,338.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				1,068,741.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years: ____, ____, ____		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011 374,915.				
d From 2012				
e From 2013 97,162.				
f Total of lines 3a through e	472,077.			
4 Qualifying distributions for 2014 from Part XII, line 4: ▶ $ 1,171,798.				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2014 distributable amount				1,068,741.
e Remaining amount distributed out of corpus	103,057.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	575,134.			
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.			0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7	0.			
9 **Excess distributions carryover to 2015.** Subtract lines 7 and 8 from line 6a	575,134.			
10 Analysis of line 9:				
a Excess from 2010				
b Excess from 2011 374,915.				
c Excess from 2012				
d Excess from 2013 97,162.				
e Excess from 2014 103,057.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year-see instructions.)

1 **Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000). (See section 507(d)(2).)

SEE STATEMENT 14

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

SEE STATEMENT 15

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution **	Amount
a Paid during the year				
LANIKUHONUA CULTURAL INSTITUTE 92-1101 ALI'INUI DRIVE KAPOLEI, HI 96707	N/A	PF	4TH ANNUAL CANOE FESTIVAL	7,800.
NANAKULI HIGH & INTERMEDIATE SCHOOL 89-980 NANAKULI AVENUE WAIANAE, HI 96792	N/A	PUBLIC SCHOOL	PURCHASE COMPUTERS AND EQUIPMENT FOR THE DIGITAL MEDIA AND BROADCAST MEDIA CLASSES	10,000.
PACIFIC ISLANDS ATHLETIC ALLIANCE 1130 2ND AVENUE, APT. C1 HONOLULU, HI 96816	N/A	PC	EQUIPMENT PURCHASE	25,256.
TEACH FOR AMERICA- HAWAII 500 ALA MOANA BOULEVARD SUITE 3-400 HONOLULU, HI 96813	N/A	PC	PROGRAM SUPPORT TO RECRUIT, SELECT, TRAIN AND SUPPORT NEW AND EXISTING CORPS MEMBERS FOR 2014-2015 SCHOOL	50,000.
UNIVERSITY OF HAWAII FOUNDATION 2444 DOLE STREET, BACHMAN HALL #105 HONOLULU, HI 96822	N/A	PC	SCHOLARSHIP FUNDING	30,000.
Total SEE CONTINUATION SHEET(S)			▶ 3a	1,057,463.
b Approved for future payment				
WAIANAE COAST COMPREHENSIVE HEALTH CENTER 86-260 FARRINGTON HIGHWAY WAIANE, HI 96792	N/A	PC	NEW EMERGENCY DEPT. BUILDING	200,000.
POLYNESIAN VOYAGING SOCIETY 10 SAND ISLAND PARKWAY HONOLULU, HI 96819	N/A	PC	SUPPORT FOR WORLDWIDE VOYAGE FOR THE HOKULEA AND HIKIANALIA CANOES	300,000.
QUEEN'S MEDICAL CENTER 1301 PUNCHBOWL STREET HONOLULU, HI 96813	N/A	PC	WEST OAHU FACILITY	800,000.
Total			▶ 3b	1,300,000.

** SEE PURPOSE OF GRANT CONTINUATIONS

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	744.	
4 Dividends and interest from securities			14	487,381.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income			14	<11,618.>	
8 Gain or (loss) from sales of assets other than inventory			18	1,256,298.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		1,732,805.	0.

13 Total. Add line 12, columns (b), (d), and (e) 13 1,732,805.

(See worksheet in line 13 instructions to verify calculations.)

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: [signature] Date: 10/13/15 Title: GRANTS MGR/ASST SECRETARY

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
GUY S. NISHIHIRA	[signature]	10/06/15		P00167026
Firm's name ▶ KKDLY LLC			Firm's EIN ▶ 99-0292355	
Firm's address ▶ 745 FORT ST STE 2100 HONOLULU, HI 96813			Phone no. 808-521-3962	

Form **990-PF** (2014)

423622 11-24-14

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at *www.irs.gov/form990* .

OMB No 1545-0047

2014

Name of the organization
JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION

Employer identification number
99-0203078

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☒ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . . ▶ $ ______________

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization	Employer identification number
JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION	99-0203078

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ALICE K. ROBINSON C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 10,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	BEATRICE C MCKINNEY C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 10,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	CYNTHIA C. FOSTER REVOCABLE LIVING TRUST AGREEMENT C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 31,390.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4	CYNTHIA K. SORENSON REVOCBALE LIVING TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 15,064.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5	EDWARD K. KAWANANAKOA JR. REV. LIV. TRUST DTD 2-26-01 C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 7,833.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
6	FLANDERS-STAUB 2007 IRREVOCABLE TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 36,164.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION	99-0203078

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	REVOCABLE TRUST OF GAYLORD HART WILCOX C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 14,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
8	JAMES W. GROWNEY TRUST DTD 12-14-90 C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 43,329.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
9	JONATHAN R. SUTHERLAND AND MARY C. SUTHERLAND REV. LIV. TRUS C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 18,310.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
10	KAPIOLANI K. MARIGNOLI TRUST AGREEMENT DTD 9-28-89 C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 76,786.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
11	KING 2008 IRREVOCABLE TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 19,841.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
12	PRICILLA WITT C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 10,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION	99-0203078

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	QUENTIN K. KAWANANAKOA TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 6,640.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
14	P. KELLER TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 9,959.	Person [ ] Payroll [ ] Noncash [X] (Complete Part II for noncash contributions.)
15	RONALD L HOOLULU OLSON C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 30,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
16	SUZANNE M. AVINA REVOCABLE LIVING TRUST DTD 3-2-2000 C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 44,170.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
17	WENDY B. CRABB REVOCABLE LIVING TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 24,580.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
18	PATRICIA WILCOX SHEEHAN C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 5,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION	99-0203078

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	GUILD IRREVOCABLE TRUST C/O JAMES CAMPBELL COMPANY LLC 1001 KAMOKILA BLVD STE. 200 KAPOLEI, HI 96707	$ 19,033.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization	Employer identification number
JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION	99-0203078

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
14	13 SHARES OF APPLE INC STOCK AND 40 SHARES OF STARBUCKS STOCK	$ 9,959.	03/26/14

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		$	

Name of organization: JAMES & ABIGAIL CAMPBELL FAMILY FOUNDATION

Employer identification number: 99-0203078

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year (Enter this info once) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	ABERDEEN EMERGING MARKET FUND		VARIOUS	VARIOUS
b	BANK OF HAWAII SECURITIES		VARIOUS	VARIOUS
c	VANGUARD ENERGY SERVICES		VARIOUS	VARIOUS
d	NORTHGATE VENTURE GROWTH		VARIOUS	VARIOUS
e	FROM K-1 - 1607 CAPITAL INTERNATIONAL EQUITY FUND		VARIOUS	VARIOUS
f	FROM K-1 - 1607 CAPITAL INTERNATIONAL EQUITY FUND		VARIOUS	VARIOUS
g	FROM K-1 - FORESTER PARTNERS II, L.P.		VARIOUS	VARIOUS
h	FROM K-1 - FORESTER PARTNERS II, L.P.		VARIOUS	VARIOUS
i	FROM K-1 - FORESTER PARTNERS II, L.P. - SECTION 1		VARIOUS	VARIOUS
j	FROM K-1 - FORESTER PARTNERS II, L.P. - SECTION 1		VARIOUS	VARIOUS
k	FROM K-1 - FORESTER PARTNERS II, L.P. - SECTION 1		VARIOUS	VARIOUS
l	FROM K-1 - ANALYTIC U.S. LOW VOLATILITY FUND LP		VARIOUS	VARIOUS
m	FROM K-1 - ANALYTIC U.S. LOW VOLATILITY FUND LP		VARIOUS	VARIOUS
n	FROM K-1 - NORTHGATE VENTURE GROWTH II, L.P.		VARIOUS	VARIOUS
o	FROM K-1 - NORTHGATE VENTURE GROWTH II, L.P.		VARIOUS	VARIOUS

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	1,138,285.		509,541.	628,744.
b	345,841.		417,830.	<71,989.>
c	300,000.		241,437.	58,563.
d	417,830.		417,830.	0.
e				1,336.
f				12,620.
g				57,784.
h				248,631.
i				18.
j				<779.>
k				<1,168.>
l				95,232.
m				133,298.
n				<71,797.>
o				15,374.

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a				628,744.
b				<71,989.>
c				58,563.
d				0.
e				1,336.
f				12,620.
g				57,784.
h				248,631.
i				18.
j				<779.>
k				<1,168.>
l				95,232.
m				133,298.
n				<71,797.>
o				15,374.

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter "-0-" in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	CAPITAL GAINS DIVIDENDS			
b				
c				
d				
e				
f				
g				
h				
i				
j				
k				
l				
m				
n				
o				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	148,502.			148,502.
b				
c				
d				
e				
f				
g				
h				
i				
j				
k				
l				
m				
n				
o				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a				148,502.
b				
c				
d				
e				
f				
g				
h				
i				
j				
k				
l				
m				
n				
o				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter "-0-" in Part I, line 7 }	2	1,254,369.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A

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Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
WAIANAE COAST COMPREHENSIVE HEALTH CENTER 86-260 FARRINGTON HIGHWAY WAIANAE, HI 96792	N/A	PC	SUPPORT THE EXPANSION OF WAI'ANAE COAST COMPREHENSIVE HEALTH CENTER'S ADOLESCENT HEALTH SERVICE AND	50,000.
HAWAII HIGH SCHOOL ATHLETIC ASSOCIATION P.O. BOX 62029 HONOLULU, HI 96839	N/A	PC	MIDDLES SCHOOL ATHLETICS PROGRAM	50,000.
POLYNESIAN VOYAGING SOCIETY 10 SAND ISLAND PARKWAY HONOLULU, HI 96819	N/A	PC	SUPPORT FOR WORLDWIDE VOYAGE FOR THE HOKULEA AND HIKIANALIA CANOES	100,000.
QUEEN'S MEDICAL CENTER 1301 PUNCHBOWL STREET HONOLULU, HI 96813	N/A	PC	WEST OAHU FACILITY	200,000.
SPECIAL OLYMPICS HAWAII INC. P.O. BOX 3295 HONOLULU, HI 96801	N/A	PC	SPECIAL OLYMPICS SPORTS AND WELLNESS COMPLEX IN KAPOLEI	150,000.
WAIANAE COAST COMPREHENSIVE HEALTH CENTER 86-260 FARRINGTON HIGHWAY WAIANAE, HI 96792	N/A	PC	NEW EMERGENCY DEPT. BUILDING	100,000.
AFTER-SCHOOL ALL-STARS HAWAII 4747 KILAUEA AVENUE #210 HONOLULU, HI 96816	N/A	PC	AFTER SCHOOL PROGRAMS FOR NANAKULI INTERMEDIATE SCHOOL FOR 2014-2015 SCHOOL YEAR	50,000.
HAWAII FOODBANK, INC. 2611 KILIHAU STREET HONOLULU, HI 96819	N/A	PC	PURCHASING AND DISTRIBUTION OF FOOD THROUGH PARTNER AGENCIES	30,000.
PBS HAWAII 2350 DOLE STREET HONOLULU, HI 96822	N/A	PC	HIKI NO - STATEWIDE STUDENTS NEWS NETWORK	10,000.
INPEACE 1001 KAMOKILA BOULEVARD, SUITE 226 KAPOLEI, HI 96707	N/A	PC	PROGRAM SUPPORT FOR KULIA & KA LAMA EDUCATION ACADEMY	50,000.
Total from continuation sheets				934,407.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
KAHI MOHALA BEHAVORIAL HEALTH 91-2301 OLD FORT WEAVER ROAD EWA BEACH, HI 96706	N/A	PC	SUPPORT SERVICE DELIVERY IMPROVEMENTS FOR CHILD AND ADOLESCENT PATIENTS	5,000.
WAIANAE HAWAIIAN CIVIC CLUB P.O. BOX 687 WAIANAE, HI 96792	N/A	PC	RESTORE A HAWAIIAN VOYAGING CANOE FOR EDUCATIONAL PROGRAMMING OFFERED TO WAIANAE COAST STUDENTS	30,000.
WAIANAE INTERMEDIATE SCHOOL 85-626 FARRINGTON HIGHWAY WAIANAE, HI 96792	N/A	PUBLIC SCHOOL	WAI'ANAE INTERMEDIATE SCHOOL ROBOTICS PROGRAM	11,907.
KAPOLEI HIGH SCHOOL 91-5007 KAPOLEI PKWY KAPOLEI, HI 96707	N/A	PUBLIC SCHOOL	ADVANCED VIA INDIVIDUAL DETERMINATION PROGRAM (AVID)	20,000.
SURFRIDER SPIRIT SESSIONS P.O. BOX 1677 KAILUA, HI 96734	N/A	PC	SUPPORT THE CORE SURFING MENTORING AND JUNIOR MENTOR TRAINING/EMPLOYMENT PROGRAM	7,500.
VALLEY OF RAINBOWS P.O. BOX 1009 WAIANAE, HI 96792	N/A	PC	YOUTH LEADERSHIP CONFERENCES	25,000.
HAWAII OPERA THEATRE 848 S. BERETANIA STREET, SUITE 301 HONOLULU, HI 96813	N/A	PC	EDUCATIONAL OUTREACH PROGRAMS	10,000.
READING IS FUNDAMENTAL, HONOLULU, INC. P.O. BOX 61826 HONOLULU, HI 96839	N/A	PC	PURCHASE CHILDREN'S BOOKS FOR DISTRIBUTION IN THE PROGRAM	15,000.
HAWAII AGRICULTURAL FOUNDATION 3538 WAIALAE AVENUE #203 HONOLULU, HI 96816	N/A	PC	SUPPORT "IN THE FIELDS AG PARTNERSHIP AND INTERNSHIP PROGRAM"	15,000.
WAIANAE INTERMEDIATE & HIGH SCHOOL 85-626 FARRINGTON HIGHWAY WAIANAE, HI 96792	N/A	PUBLIC SCHOOL	SEND 125 STUDENTS FROM WAIANAE INTERMEDIATE AND HIGH SCHOOL TO 2-DAY FOOTBALL CLINIC AT PUNAHOU SCHOOL	5,000.
Total from continuation sheets				

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - TEACH FOR AMERICA- HAWAII

PROGRAM SUPPORT TO RECRUIT, SELECT, TRAIN AND SUPPORT NEW AND EXISTING CORPS MEMBERS FOR 2014-2015 SCHOOL YEAR

NAME OF RECIPIENT - WAIANAE COAST COMPREHENSIVE HEALTH CENTER

SUPPORT THE EXPANSION OF WAI'ANAE COAST COMPREHENSIVE HEALTH CENTER'S ADOLESCENT HEALTH SERVICE AND ESTABLISHMENT OF THE NEW ADOLESCENT HEALTH CLINIC

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BANK OF HAWAII	744.	744.	
TOTAL TO PART I, LINE 3	744.	744.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST-MENT INCOME	(C) ADJUSTED NET INCOME
BANK OF HAWAII	163.	0.	163.	163.	
DODGE & COX FUNDS	24,704.	11,849.	12,855.	12,855.	
FROM K-1 - 1607 CAPITAL INTL EQUITY FUND	32,314.	0.	32,314.	32,314.	
FROM K-1 - ANALYTIC U.S. LOW VOLATILITY FUND	79,193.	0.	79,193.	79,193.	
FROM K-1 - FORESTER PARTNERS II, L.P.	31,999.	0.	31,999.	31,999.	
FROM K-1 - NORTHGATE VENTURE GROWTH	53.	0.	53.	53.	
HARBOR INTERNATIONAL FUND 011	19,787.	0.	19,787.	19,787.	
IRONWOOD INSTITUTIONAL MULTI-STRATEGY	38,235.	0.	38,235.	38,235.	
IVA INTERNATIONAL FUND	90,496.	46,470.	44,026.	44,026.	
JOHCM EMERGING MARKETS OPPS FUND, INST.	35,588.	23,644.	11,944.	11,944.	
JOHN HANCOCK GLOBAL ABSOLUTE RETURN	78,480.	0.	78,480.	78,480.	
PIMCO COMMODITY REAL RETURN	1,127.	0.	1,127.	1,127.	
PIMCO TOTAL RETURN FUND	84,148.	13,422.	70,726.	70,726.	
PIMCO UNCONSTRAINED BOND FUND	13,689.	0.	13,689.	13,689.	

VANGUARD EMERGING MARKETS STOCK INDEX ADM	8,198.	0.	8,198.	8,198.	
VANGUARD ENERGY FUNDS 0551	71,316.	50,332.	20,984.	20,984.	
VANGUARD GROWTH INDEX FUND	9,808.	0.	9,808.	9,808.	
VANGUARD INT TERM TREASURY 535	16,585.	2,785.	13,800.	13,800.	
TO PART I, LINE 4	635,883.	148,502.	487,381.	487,381.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST-MENT INCOME	(C) ADJUSTED NET INCOME
FROM K-1 - ORDINARY INCOME	0.	<29.>	
FROM K-1 - NET RENTAL REAL ESTATE INCOME	0.	<9.>	
FROM K-1 - OTHER PORTFOLIO INCOME	0.	3,260.	
FROM K-1 - SEC. 988 GAIN	0.	9,954.	
FROM K-1 - SEC. 59(E)(2) EXPENSE	0.	<1.>	
FROM K-1 - FOREIGN TAXES PAID	0.	<1,948.>	
OTHER INCOME	34.	34.	
FROM K-1 - OTHER INCOME	0.	<21,010.>	
OTHER INCOME FROM PARTNERSHIPS	<11,652.>	<11,652.>	
OTHER INCOME FROM PARTNERSHIPS	0.	11,652.	
TOTAL TO FORM 990-PF, PART I, LINE 11	<11,618.>	<9,749.>	

FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST-MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
AUDIT & TAX FEE	18,220.	0.		18,220.
TO FORM 990-PF, PG 1, LN 16B	18,220.	0.		18,220.

FORM 990-PF — OTHER PROFESSIONAL FEES — STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT ADVISORY FEES	141,777.	141,777.		0.
MANAGEMENT FEES	67,000.	0.		67,000.
TO FORM 990-PF, PG 1, LN 16C	208,777.	141,777.		67,000.

FORM 990-PF — TAXES — STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX	14,252.	0.		0.
TO FORM 990-PF, PG 1, LN 18	14,252.	0.		0.

FORM 990-PF — OTHER EXPENSES — STATEMENT 7

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
GENERAL & ADMINISTRATIVE	29,115.	0.		29,115.
TO FORM 990-PF, PG 1, LN 23	29,115.	0.		29,115.

FORM 990-PF — OTHER INCREASES IN NET ASSETS OR FUND BALANCES — STATEMENT 8

DESCRIPTION	AMOUNT
UNREALIZED GAIN(LOSS) ON MARKETABLE SECURIITES	404.
TOTAL TO FORM 990-PF, PART III, LINE 3	404.

FORM 990-PF CORPORATE STOCK STATEMENT 9

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE EQUITY SECURITIES	23,373.	23,373.
TOTAL TO FORM 990-PF, PART II, LINE 10B	23,373.	23,373.

FORM 990-PF CORPORATE BONDS STATEMENT 10

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
FIXED INCOME BONDS	0.	0.
TOTAL TO FORM 990-PF, PART II, LINE 10C	0.	0.

FORM 990-PF OTHER INVESTMENTS STATEMENT 11

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS	FMV	13,049,426.	13,049,426.
INVESTMENTS IN LIMITED PARTNERSHIPS	FMV	8,204,963.	8,204,963.
TOTAL TO FORM 990-PF, PART II, LINE 13		21,254,389.	21,254,389.

FORM 990-PF OTHER ASSETS STATEMENT 12

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
CONTRIBUTIONS RECEIVABLES	250.	950.	950.
OTHER ASSETS	625.	625.	625.
TO FORM 990-PF, PART II, LINE 15	875.	1,575.	1,575.

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 13

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
WENDY B. CRABB C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707	PRESIDENT/DIRECTOR 1.00	0.	0.	0.
ALICE K. SHINGLE C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707	VICE PRESIDENT/DIRECTOR 1.00	0.	0.	0.
ALICE F. GUILD C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707	SECRETARY/DIRECTOR 1.00	0.	0.	0.
JONATHAN E. STAUB C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707	TREASURER/DIRECTOR 1.00	0.	0.	0.
KAPI'OLANI K. MARIGNOLI C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707	DIRECTOR 1.00	0.	0.	0.
MARION PHILPOTTS-MILLER C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707	DIRECTOR 1.00	0.	0.	0.
JULIETT K. SHEEHAN C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707	DIRECTOR 1.00	0.	0.	0.
CYNTHIA K. SORENSON C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707	DIRECTOR 1.00	0.	0.	0.
RICHARD J. DAHL C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707	DIRECTOR 1.00	0.	0.	0.

D. KEOLA LLOYD C/O 1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200 KAPOLEI, HI 96707	GRANTS MANAGER/ASST. SECRE 2.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF PART XV - LINE 1A STATEMENT 14

LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

WENDY B. CRABB
ALICE K. SHINGLE
ALICE F. GUILD
JONATHAN E. STAUB
KAPI'OLANI K. MARIGNOLI
CYNTHIA K. SORENSON

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION STATEMENT 15
PART XV, LINES 2A THROUGH 2D

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

BOARD OF DIRECTORS, JAMES AND ABIGAIL CAMPBELL FAMILY FOUNDATION
1001 KAMOKILA BLVD. JAMES CAMPBELL BLDG. STE. 200
KAPOLEI, HI 96707

TELEPHONE NUMBER

808-674-3167

FORM AND CONTENT OF APPLICATIONS

GUIDLINES ARE POSTED ONLINE AT WWW.CAMPBELLFAMILYFOUNDATION.ORG.

ANY SUBMISSION DEADLINES

GRANT APPLICATION MUST BE POSTMARKED BY: FEB. 1 FOR THE APRIL MTG.; AUG. 1 FOR THE OCTOBER MTG.

RESTRICTIONS AND LIMITATIONS ON AWARDS

GUIDELINES ARE POSTED ONLINE AT WWW.CAMPBELLFOUNDATION.ORG.