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 JUL 1, 2014 , and ending JUN 30, 2015

Name of foundation
ANTONE AND EDENE VIDINHA CHARIT. TRUST
C/O BANK OF HAWAII

A Employer identification number: 99-0273993

Number and street (or P O box number if mail is not delivered to street address): P.O. BOX 3170, DEPT 715 | Room/suite

B Telephone number: (808) 694-4525

City or town, state or province, country, and ZIP or foreign postal code: HONOLULU, HI 96802-3170

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) ▶$ 8,369,008.

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			N/A	
2 Check ▶ [X] if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	72.	72.		STATEMENT 1
4 Dividends and interest from securities	286,492.	286,492.		STATEMENT 2
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	160,670.			
b Gross sales price for all assets on line 6a 2,348,630.				
7 Capital gain net income (from Part IV, line 2)		160,670.		
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				
12 **Total** Add lines 1 through 11	447,234.	447,234.		
Operating and Administrative Expenses				
13 Compensation of officers, directors trustees, etc	99,854.	49,927.		49,927.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees				
b Accounting fees STMT 3	1,920.	576.		1,344.
c Other professional fees				
17 Interest				
18 Taxes STMT 4	3,613.	251.		0.
19 Depreciation and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses STMT 5	20,641.	36.		20,605.
24 **Total operating and administrative expenses** Add lines 13 through 23	126,028.	50,790.		71,876.
25 Contributions, gifts, grants paid	257,500.			257,500.
26 **Total expenses and disbursements** Add lines 24 and 25	383,528.	50,790.		329,376.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	63,706.			
b **Net investment income** (if negative, enter -0-)		396,444.		
c **Adjusted net income** (if negative, enter -0-)			N/A	

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Part II Balance Sheets — Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year (a) Book Value	End of year (b) Book Value	(c) Fair Market Value
Assets			
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments	121,875.	145,489.	145,489.
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			
c Investments - corporate bonds			
11 Investments - land, buildings and equipment basis ▶			
Less accumulated depreciation ▶			
12 Investments - mortgage loans			
13 Investments - other STMT 7	6,455,217.	6,515,159.	8,223,519.
14 Land, buildings, and equipment: basis ▶			
Less accumulated depreciation ▶			
15 Other assets (describe ▶)			
16 **Total assets** (to be completed by all filers - see the instructions. Also, see page 1, item I)	6,577,092.	6,660,648.	8,369,008.
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 ▶ ☐ and complete lines 24 through 26 and lines 30 and 31			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here ▶ [X] and complete lines 27 through 31			
27 Capital stock, trust principal, or current funds	6,577,092.	6,660,648.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	0.	0.	
30 **Total net assets or fund balances**	6,577,092.	6,660,648.	
31 **Total liabilities and net assets/fund balances**	6,577,092.	6,660,648.	

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	6,577,092.
2 Enter amount from Part I, line 27a	2	63,706.
3 Other increases not included in line 2 (itemize) ▶ RETURNED PRIOR YEAR GRANTS	3	20,641.
4 Add lines 1, 2, and 3	4	6,661,439.
5 Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 6	5	791.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	6,660,648.

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	PUBLICLY TRADED SECURITIES	P	VARIOUS	06/30/15
b	PUBLICLY TRADED SECURITIES	P	VARIOUS	06/30/15
c	LIGATION SETTLEMENTS	P	VARIOUS	06/30/15
d	CAPITAL GAINS DIVIDENDS			
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	79,018.		76,652.	2,366.
b	2,238,350.		2,111,258.	127,092.
c	150.		50.	100.
d	31,112.			31,112.
e				

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				2,366.
b				127,092.
c				100.
d				31,112.
e				

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** 160,670.

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	458,600.	7,993,361.	.057373
2012	401,490.	7,826,191.	.051301
2011	324,490.	7,439,379.	.043618
2010	408,976.	7,557,821.	.054113
2009	363,934.	7,233,707.	.050311

2	**Total** of line 1, column (d)	2	.256716
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	.051343
4	Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	4	8,399,974.
5	Multiply line 4 by line 3	5	431,280.
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	3,964.
7	Add lines 5 and 6	7	435,244.
8	Enter qualifying distributions from Part XII, line 4	8	329,376.

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 ▶ ☐ and enter 1% of Part I, line 27b			1	7,929.
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	7,929.
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	7,929.
6 Credits/Payments:				
a 2014 estimated tax payments and 2013 overpayment credited to 2014	6a	6,520.		
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	6,520.
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	1,409.
10 **Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶			10	
11 Enter the amount of line 10 to be: **Credited to 2015 estimated tax** ▶	**Refunded** ▶		11	

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)? *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*	1b		X
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? N/A	4b		
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)*

			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 ▶ HTTPS://WWW.BOH.COM/APPS/FOUNDATIONS/

14 The books are in care of ▶ BANK OF HAWAII Telephone no ▶ (808) 694-4525
Located at ▶ 130 MERCHANT STREET, HONOLULU, HI ZIP+4 ▶ 96813

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

			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

			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
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)*

		Yes	No
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
BANK OF HAWAII 130 MERCHANT ST. HONOLULU, HI 96813	TRUSTEE 1.00	99,854.	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
NONE		

Total number of others receiving over $50,000 for professional services ▶ 0

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

List the foundation's four largest direct charitable activities during the tax year. Include relevant 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	8,337,186.
b	Average of monthly cash balances		1b	190,706.
c	Fair market value of all other assets		1c	
d	**Total** (add lines 1a, b, and c)		1d	8,527,892.
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	8,527,892.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	127,918.
5	**Net value of noncharitable-use assets**. Subtract line 4 from line 3. Enter here and on Part V, line 4		5	8,399,974.
6	**Minimum investment return**. Enter 5% of line 5		6	419,999.

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	419,999.
2a	Tax on investment income for 2014 from Part VI, line 5	2a 7,929.		
b	Income tax for 2014 (This does not include the tax from Part VI)	2b		
c	Add lines 2a and 2b		2c	7,929.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	412,070.
4	Recoveries of amounts treated as qualifying distributions		4	20,641.
5	Add lines 3 and 4		5	432,711.
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	432,711.

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	329,376.
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	329,376.
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	0.
6	**Adjusted qualifying distributions**. Subtract line 5 from line 4	6	329,376.

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				432,711.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			141,756.	
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				
f **Total** of lines 3a through e	0.			
4 Qualifying distributions for 2014 from Part XII, line 4: ▶ $ 329,376.				
a Applied to 2013, but not more than line 2a			141,756.	
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				187,620.
e Remaining amount distributed out of corpus	0.			
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	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.			0.	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015				245,091.
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	0.			
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				

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))

NONE

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 ▶ [X] 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 - GUIDELINES

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

SEE STATEMENT - GUIDELINES

c Any submission deadlines:

SEE STATEMENT - GUIDELINES

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

SEE STATEMENT - GUIDELILNES

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*				
SEE STATEMENT - GRANTS	N/A	EXEMPT ORG.	SEE STMT - GRANTS	257,500.
Total			▶ 3a	257,500.
b *Approved for future payment*				
NONE				
Total			▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income (a) Business code	(b) Amount	Excluded by section 512, 513, or 514 (c) Exclusion code	(d) Amount	(e) Related or exempt function income
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	72.	
4 Dividends and interest from securities			14	286,492.	
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					
8 Gain or (loss) from sales of assets other than inventory			18	160,670.	
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.		447,234.	0.

13 **Total.** Add line 12, columns (b), (d), and (e) 13 447,234.

(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

BANK OF HAWAII, Trustee
Vice President

Signature of officer or trustee | Date OCT 2 6 2015 | Title

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
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no	

Form **990-PF** (2014)

423622
11-24-14

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
CALVARY CHAPEL	5.	5.	
DREYFUS CASH MANAGEMENT	67.	67.	
TOTAL TO PART I, LINE 3	72.	72.	

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
BOH #215128505	317,604.	31,112.	286,492.	286,492.	
TO PART I, LINE 4	317,604.	31,112.	286,492.	286,492.	

FORM 990-PF ACCOUNTING FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX PREPARATION FEE	1,920.	576.		1,344.
TO FORM 990-PF, PG 1, LN 16B	1,920.	576.		1,344.

FORM 990-PF TAXES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX WITHHELD	251.	251.		0.
EXCISE TAXES - FYE 6/30/15 ESTIMATES	3,362.	0.		0.
TO FORM 990-PF, PG 1, LN 18	3,613.	251.		0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
GRANT ADMINISTRATION	20,605.	0.		20,605.
INVESTMENT EXPENSE	36.	36.		0.
TO FORM 990-PF, PG 1, LN 23	20,641.	36.		20,605.

FORM 990-PF	OTHER DECREASES IN NET ASSETS OR FUND BALANCES STATEMENT 6
DESCRIPTION	AMOUNT
PRIOR YEAR RETURN OF CAPITAL ADJUSTMENT	791.
TOTAL TO FORM 990-PF, PART III, LINE 5	791.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
SEE STATEMENT - INV	COST	6,222,659.	6,796,519.
KAHILI DEVELOPMENT CO.	COST	292,500.	1,427,000.
TOTAL TO FORM 990-PF, PART II, LINE 13		6,515,159.	8,223,519.

Description	Units	Book Value	Market Value
00206R102 AT&T INC	805.000	21,787	28,594
002824100 ABBOTT LABORATORIES	100.000	3,982	4,908
003019395 ABERDEEN INTERNATIONAL EQUITY FUND INST	17,374.406	175,850	245,153
00846U101 AGILENT TECHNOLOGIES INC	110.000	3,299	4,244
020002101 ALLSTATE CORP	120.000	3,710	7,784
02209S103 ALTRIA GROUP INC	545.000	12,585	26,656
025537101 AMERICAN ELECTRIC POWER CO	115.000	4,564	6,092
025816109 AMERICAN EXPRESS CO	50.000	2,238	3,886
026874784 AMERICAN INTL GROUP	130.000	4,926	8,037
03073E105 AMERISOURCEBERGEN CORP	150.000	4,518	15,951
037833100 APPLE INC	265.000	4,646	33,238
05534B760 BCE INC	470.000	19,234	19,975
055622104 BP PLC SPONS ADR	415.000	17,037	16,583
057224107 BAKER HUGHES INC	65.000	3,890	4,011
064058100 BANK OF NEW YORK MELLON CORP	165.000	4,560	6,925
084670702 BERKSHIRE HATHAWAY INC CL B	215.000	18,557	29,264
099724106 BORGWARNER INC	105.000	3,961	5,968
124857202 CBS CORPORATION CL B	120.000	4,528	6,660
15135B101 CENTENE CORP	70.000	5,288	5,628
166764100 CHEVRON CORP	170.000	12,474	16,400
17275R102 CISCO SYSTEMS	180.000	4,233	4,943
189754104 COACH INC	445.000	21,324	15,401
191216100 COCA COLA CO	220.000	7,825	8,631
192446102 COGNIZANT TECH SOLUTIONS CORP	365.000	10,983	22,298
197199631 COLUMBIA ACORN INTERNATIONAL CL R5	309.701	10,610	13,472
20825C104 CONOCOPHILLIPS	200.000	8,227	12,282
231021106 CUMMINS ENGINE INC	75.000	7,239	9,839
244199105 DEERE & CO	70.000	5,795	6,794
253393102 DICK'S SPORTING GOODS INC	100.000	5,691	5,177
254709108 DISCOVER FINANCIAL SERVICES	155.000	9,032	8,931
25490A309 DIRECTV	80 000	6,816	7,423
25746U109 DOMINION RESOURCES INC /VA	175.000	8,236	11,702
260003108 DOVER CORP	95.000	3,869	6,667
26441C204 DUKE ENERGY CORP	258.000	14,412	18,220
268648102 EMC CORP	670.000	13,864	17,681
26875P101 EOG RESOURCES INC	40.000	3,475	3,502
278642103 EBAY INC	80.000	4,763	4,819
30219G108 EXPRESS SCRIPTS HOLDING CO	355.000	16,066	31,574
31428Q101 FEDERATED TOTAL RETURN BOND FUND	76,530.151	847,358	833,413
35671D857 FREEPORT-MCMORAN INC.	175.000	3,614	3,259
369604103 GENERAL ELECTRIC CO	410.000	10,203	10,894
370334104 GENERAL MILLS INC	160.000	8,360	8,915
37733W105 GLAXOSMITHKLINE PLC ADR	470 000	20,782	19,576
38141G104 GOLDMAN SACHS GROUP INC	40 000	4,400	8,352
38259P508 GOOGLE INC CL A	14.000	4,225	7,561
38259P706 GOOGLE INC CL C	10.000	1,945	5,205
40414L109 HCP INC	320.000	12,095	11,670
411511306 HARBOR INTL FD	4,017.088	282,769	279,589
42217K106 HEALTH CARE REIT INC	165.000	7,185	10,829
438516106 HONEYWELL INTERNATIONAL INC	80.000	2,492	8,158
458140100 INTEL CORP	275.000	4,994	8,364
46625H100 JP MORGAN CHASE & CO	185.000	6,482	12,536

Description	Units	Book Value	Market Value
47803W406 JOHN HANCOCK III DISC M/C-IS	11,366.527	149,761	233,468
478160104 JOHNSON & JOHNSON	180.000	11,018	17,543
494368103 KIMBERLY CLARK CORP	120.000	7,686	12,716
49456B101 KINDER MORGAN INC	140.000	5,690	5,375
50076Q106 KRAFT FOODS GROUP INC	395.000	18,356	33,630
501889208 LKQ CORPORATION	490.000	12,765	14,820
543487326 NATIXIS LOOMIS SAYLES LTD GOV AND AGCY FD C	43,569.957	512,111	505,847
55261F104 M & T BANK CORPORATION	130.000	15,158	16,241
56062X708 MAINSTAY HIGH YIELD CORP BOND FUND CL I	5,197.266	30,040	29,936
56585A102 MARATHON PETROLEUM CORP	100.000	4,853	5,231
577130834 MATTHEWS PACIFIC TIGER FUND CL INS	7,637.771	222,717	219,433
580135101 MCDONALDS CORP	220.000	18,436	20,915
582839106 MEAD JOHNSON NUTRITION CO CL A	105.000	9,150	9,473
58502B106 MEDNAX INC	70.000	4,046	5,188
58933Y105 MERCK & CO INC	400.000	16,058	22,772
594918104 MICROSOFT CORP	150.000	3,052	6,623
636274300 NATIONAL GRID PLC SP ADR	310.000	14,915	20,017
637071101 NATIONAL OILWELL VARCO INC	300.000	16,010	14,484
65339F101 NEXTERA ENERGY INC	90.000	4,834	8,823
67011P100 NOW INC.	32.000	862	637
68389X105 ORACLE CORP	125.000	3,265	5,038
69351T106 PPL CORPORATION	410.000	10,677	12,083
713448108 PEPSICO INC	65.000	4,112	6,067
718172109 PHILIP MORRIS INTERNATIONAL	335.000	23,834	26,857
74144Q203 T ROWE PRICE INST EMERGING MKTS EQUITY	6,941.462	210,648	212,339
74144T108 T ROWE PRICE GROUP INC	90.000	7,362	6,996
741503403 PRICELINE.COM INC	10.000	8,450	11,514
742718109 PROCTER & GAMBLE CO	255.000	16,663	19,951
74316J458 CONGRESS MID CAP GROWTH-INS	15,536.495	210,118	235,533
744573106 PUBLIC SERVICE ENT GROUP INC	150.000	4,991	5,892
747525103 QUALCOMM INC	390.000	19,317	24,426
756109104 REALTY INCOME CORP	155 000	6,307	6,880
761713106 REYNOLDS AMERICAN INC	390.000	13,967	29,117
77958B402 T ROWE PRICE INST FLOATING RATE FUND CL I	4,633.555	44,714	46,938
780259107 ROYAL DUTCH SHELL PLC ADR B	280.000	17,839	16,058
80004C101 SANDISK CORP	55.000	2,724	3,202
80105N105 SANOFI ADR	115.000	5,620	5,696
806857108 SCHLUMBERGER LTD	180.000	13,056	15,514
81721M109 SENIOR HOUSING PROP TRUST	315 000	7,869	5,528
842587107 SOUTHERN CO	400.000	15,873	16,760
858912108 STERICYCLE INC	100.000	6,374	13,391
87422J105 TALEN ENERGY CORP	51 211	770	879
880208400 TEMPLETON GLOBAL BOND FUND CL AD	10,730.639	140,415	131,021
884116401 THIRD AVENUE REAL ESTATE VALUE FUND CL	5,037.746	113,249	160,956
887317303 TIME WARNER INC	40.000	3,389	3,496
88732J207 TIME WARNER CABLE INC	50.000	3,612	8,909
89151E109 TOTAL SA SP ADR	380.000	17,958	18,685
902973304 US BANCORP	145.000	2,562	6,293
904767704 UNILEVER PLC SPONSORED ADR	325.000	12,738	13,962
913017109 UNITED TECHNOLOGIES CORP	70.000	5,062	7,765
921909818 VANGUARD TOTAL INTL ST INDEX FUND-ADM	9,956.731	275,897	269,230
921937603 VANGUARD TOTAL BOND MKT INDEX FUND ADM	73,192.695	793,082	784,626

Description	Units	Book Value	Market Value
92220P105 VARIAN MEDICAL SYSTEMS INC	125.000	6,987	10,541
92276F100 VENTAS INC	170 000	10,821	10,555
922908728 VANGUARD TOTL STK MKT IND-AD	26,411 154	1,300,709	1,376,021
92343V104 VERIZON COMMUNICATIONS	465.000	16,563	21,674
92345Y106 VERISK ANALYTICS INC	165.000	5,510	12,005
92826C839 VISA INC CL A SHARES	180.000	5,375	12,087
92857W308 VODAFONE GROUP PLC SP ADR	315.000	15,085	11,482
931142103 WAL-MART STORES INC	105.000	5,074	7,448
949746101 WELLS FARGO COMPANY	265.000	7,184	14,904
969457100 WILLIAMS COMPANIES INC	335.000	14,273	19,226
G0177J108 ALLERGAN PLC	30.000	4,806	9,104
G97822103 PERRIGO COMPANY PLC	60.000	8,732	11,090
N22717107 CORE LABORATORIES N V. COMMON	105.000	10,507	11,974
		6,222,659	6,796,519

Antone & Edene Vidinha Charitable Trust

TIN: 99-0273993

Form 990-PF, page 11, Part XV - Supplementary Information, line 3

Grants Paid July 01, 2014 to June 30, 2015

Payee Organization Project Title	Amount Paid Date	Foundation Status Codes
Hawaii Pacific University 1164 Bishop Street, Suite 800 Honolulu, HI 96813 *Antone & Edene Vidinha Charitable Trust Scholarship - AY 2015-2016*	$15,000.00 5/29/2015	PC
Koloa Union Church P O. Box 536 Koloa, HI 96756 *Parking Lot Project*	$40,000 00 5/29/2015	PC
Lihue Missionary Church P O Box 746 Lihue, HI 96766 *Youth & Young Adult Programs in 2015*	$15,000 00 5/29/2015	PC
Rehabilitation Hospital of the Pacific Foundation 226 North Kuakini Street Honolulu, HI 96817 *Purchase & Install AlterG Equipment (Anti-Gravity Technology)*	$20,000 00 5/29/2015	PC
The Salvation Army, Hawaiian & Pacific Islands Division 2950 Manoa Road Honolulu, HI 96822 *Hanapepe Corps Kokua Kitchen Renovation*	$50,000.00 5/29/2015	PC
St. Michael and All Angels' Episcopal Church 4364 Hardy Street P O. Box 572 Lihue, HI 96766 *Kauai Sacred Day Walk 2015*	$2,500 00 5/29/2015	PC
University of Hawaii Foundation 2444 Dole Street Bachman Hall 105 Honolulu, HI 96822 *Antone & Edene Vidinha Charitable Trust Scholarship - AY 2015-2016*	$80,000 00 5/29/2015	PC
Wilcox Health Foundation 3-3420 Kuhio Highway Lihue, HI 96766-1099 *Purchase (3) V60 Transport Ventilators*	$35,000 00 5/29/2015	PC
Grand Total (8 items)	$257,500 00	

Antone & Edene Vidinha Charitable Trust
Bank of Hawaii, Trustee

Grant Application Information for General Capital

Purpose
Antone and Edene Vidinha Charitable Trust was established to benefit the people of Kauai. Grants are made for charitable purposes to qualified tax exempt 501(c)(3) charitable organizations on Kauai or serving the residents of Kauai.

By trust provisions, contributions are awarded in four major fields:

- Churches on the Island of Kauai
- Hospitals that benefit Kauai residents
- Health organizations which benefit the people of Kauai
- Educational scholarships to colleges or universities in the State of Hawaii for deserving students from the Island of Kauai.

Grants or scholarships are not awarded to individuals, nor for endowments, or multiple-year pledges.

General Capital – Under $500,000
General Capital requests are for projects or equipment having a total cost under $500,000, and are not on-going maintenance projects at churches, which should be funded by church members.

Foundation Deadline - Proposals must be postmarked by December 1st.

APPLICATION PROCEDURES (A thru D)

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

(A) Funding Request Cover Sheet – To be placed on top of each set (see page 3).
(B) Proposal Narrative - Provide who, what, when, where, why, and how in three pages or less.

Format Information:
Pages: Maximum 3 pages
Margins: 1-inch margins on each side
Font: 12 point font
Spacing: Double space in between paragraphs
Paragraph Height: Maximum of 1 ½ inches
Bullet points: Acceptable

USE THESE 7 HEADINGS IN THE ORDER LISTED FOR THE PROPOSAL NARRATIVE:

1) Organization: Briefly describe your organization's mission and programs. (maximum of 3 sentences)
2) Population to be Served: Provide an estimated UNDUPLICATED number and age range of the eligible individuals you propose to serve.
   - If the projections are an increase over the current volume, provide information on current volume (percentages can only be used if accompanied with figures, i.e. 20% over 500)
3) Program/Project: Describe using specific information in layman terms. (Acronyms must be explained in the narrative and budgets.)
4) Goals & Objectives: **Separately** list each goal with corresponding objective, and specifically describe how the goal will be accomplished through the objective.
5) Outreach: For new, expansion, or existing program/project:
   - Describe how your organization will market the project/purchase to the community you propose to serve.
   - Provide an estimated UNDUPLICATED number of group/individuals who will be new participants
   - Provide UNDUPLICATED numbers for existing participants/groups/individuals.

6) Evaluation: Provide information on how and/or what the following measures are that will be used to evaluate the program/project (**note**: pre/post-tests are not acceptable):
   - Process Measures – extent to how the program/project will be implemented
   - Outcome Measures – effectiveness in meeting goals and objectives
7) Cost: Total cost of the program/project, amount requested, and plans for future support.

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

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

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

4. Project/Program Budget
   - List all revenue (funding sources) and expenses for the project or program.
   - Requests for small capital and/or to purchase equipment require additional information to validate the expenses in the project budget (i.e. estimates from vendors).
5. Organization's Operating Budget – Current Fiscal Year
   - If funding is for support during the following fiscal year, also provide a DRAFT of Operating Budget for such year.
6. Income Statement - Recently Completed Fiscal Year
7. Current Balance Sheet - (not older than three months)

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

Provide ONE copy only of each of the following:

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

All proposals are to be sent to the following mailing address:

Postal Mail
Vidinha Charitable Trust
c/o Bank of Hawaii, Corporate Trustee
Charitable Foundation Services #758
P. O. Box 3170
Honolulu, Hawaii 96802-3170

Over Night Deliveries
Vidinha Charitable Trust
c/o Bank of Hawaii
Charitable Foundation Services #758
130 Merchant Street, Room 530
Honolulu, Hawaii 96813

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

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

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

Contact Information for Vidinha Charitable Trust:

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

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

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

Antone & Edene Vidinha Charitable Trust

Bank of Hawaii, Trustee

Funding Request Cover Sheet (General Capital)

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

Date ____________________

Organization Information

(Must be a 501 (c) (3) tax-exempt organization)

(If this is a collaborative project, please submit names of collaborating agencies on a separate sheet.)

Name: ______________________________

Complete Address: ______________________________

Phone: ____________________ Fax: ____________________

BOARD MEMBER INFORMATION

No. of Board Members: __________ Percent (%) of Financial Participation. __________

Total Contribution During Fiscal Year: __________ Median Gift: __________ Average Gift: __________
(Check One: Past☐ or Current FY ☐)

Contact Information

Name: ____________________ Title: ____________________

Address: ______________________________

Phone: ____________________ Email: ____________________

Project Information

Project Title: ______________________________

Amount requested: $____________

Two signatures are required

______________________________ ______________________________
Executive Director (Chief Compensated Staff) Board Chair or President (Chief volunteer)

______________________________ ______________________________
Print or Type Name and Title *Print or Type Name and Title*

Vidinha – Genl Cptl
Rev 3/2012
Page 3 of 3

Antone & Edene Vidinha Charitable Trust
Bank of Hawaii, Trustee

Grant Application Information for Major Capital

Purpose
Antone and Edene Vidinha Charitable Trust was established to benefit the people of Kauai. Grants are made for charitable purposes to qualified tax exempt 501(c)(3) charitable organizations on Kauai or serving the residents of Kauai.

By trust provisions, contributions are awarded in four major fields:

- Churches on the Island of Kauai
- Hospitals that benefit Kauai residents
- Health organizations which benefit the people of Kauai
- Educational scholarships to colleges or universities in the State of Hawaii for deserving students from the Island of Kauai.

Grants or scholarships are not awarded to individuals, nor for endowments or multiple-year pledges.

Major Capital –$500,000 or more
Major Capital requests are for projects or equipment costing $500,000 or more, and are not on-going maintenance projects at churches, which should be funded by church members.

Foundation Deadline - Proposals must be postmarked by December 1st.

APPLICATION PROCEDURES (A thru E)

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

(A) Funding Request Cover Sheet – To be placed on top of each set (see page 3).
(B) Major Capital Fact Sheet – (page 4)
(C) Proposal Narrative - Provide who, what, when, where, why, and how in three pages or less.

Format Information:
Pages: Maximum 3 pages
Margins: 1-inch margins on each side
Font: 12 point font
Spacing: Double space in between paragraphs
Paragraph Height: Maximum of 1 ½ inches
Bullet points: Acceptable

USE THESE 7 HEADINGS IN THE ORDER LISTED FOR THE PROPOSAL NARRATIVE:

1) Organization: Briefly describe your organization's mission and programs. (maximum of 3 sentences)
2) Population to be Served: Provide an estimated UNDUPLICATED number and age range of the eligible individuals you propose to serve.
   - If the projections are an increase over the current volume, provide information on current volume (percentages can only be used if accompanied with figures, i.e. 20% over 500).
3) Program/Project: Describe using specific information in layman terms. (Acronyms must be explained in the narrative and budgets.)
4) Goals & Objectives: **Separately** list each goal with corresponding objective, and specifically describe how the goal will be accomplished through the objective.
5) Outreach: For new, expansion, or existing program/project:
   - Describe how your organization will market the program/project to the community you propose to serve.
   - Provide an estimated UNDUPLICATED number of group/individuals who will be new participants
   - Provide UNDUPLICATED numbers for existing participants/groups/individuals.

6) Evaluation: Provide information on how and/or what the following measures are that will be used to evaluate the program/project (**note**: pre/post-tests are not acceptable):
   - Process Measures – extent to how the program/project will be implemented
   - Outcome Measures – effectiveness in meeting goals and objectives
7) Cost: Total cost of the program/project, amount requested, and plans for future support.

(D) These 7 items must be attached to each of the 4 sets of the proposal narrative
1. Staff: Describe the qualifications of the staff or volunteers who will oversee and coordinate the program/project
2. Board of Directors - List of Board members with their professional or business affiliation.
   - Percent who actively participate in activities and attend meetings
3. Endorsement Letters - Two letters endorsing the activity

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

4. Project/Program Budget
   - List all revenue (funding sources) and expenses for the project or program.
   - Requests for small capital and/or to purchase equipment require additional information to validate the expenses in the project budget (i.e. estimates from vendors).
5. Organization's Operating Budget – Current Fiscal Year
   - If funding is for support during the following fiscal year, also provide a DRAFT of Operating Budget for such year.
6. Income Statement - Recently Completed Fiscal Year
7. Current Balance Sheet - (not older than three months)

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

Provide ONE copy only of each of the following:

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

Proposals are to be sent to the following mailing address:

Postal Mail
Vidinha Charitable Trust
c/o Bank of Hawaii, Corporate Trustee
Charitable Foundation Services #758
P. O. Box 3170
Honolulu, Hawaii 96802-3170

Over Night Deliveries
Vidinha Charitable Trust
c/o Bank of Hawaii
Charitable Foundation Services #758
130 Merchant Street, Room 530
Honolulu, Hawaii 96813

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

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

Contact Information for Vidinha Charitable Trust:

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email: paula.boyce@boh com
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Elaine Moniz, Trust Specialist
email: elaine.moniz@boh.com
Phone: (808) 694-4944

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

Antone & Edene Vidinha Charitable Trust

Bank of Hawaii, Trustee

Funding Request Cover Sheet (Major Capital)

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

Date ______________

Organization Information

(Must be a 501 (c) (3) tax-exempt organization)

(If this is a collaborative project, please submit names of collaborating agencies on a separate sheet.)

Name: ______________

Complete Address: ______________

Phone: ______________ Fax: ______________

BOARD MEMBER INFORMATION

No. of Board Members: ______________ Percent (%) of Financial Participation: ______________

Total Contribution During Fiscal Year: __________ Median Gift: __________ Average Gift: __________
(Check One: Past ☐ or Current FY ☐

Contact Information

Name: ______________ Title: ______________

Address: ______________

Phone: ______________ Email: ______________

Project Information

Project Title: ______________

Amount requested: $______________

Two signatures are required

______________ ______________
Executive Director (Chief Compensated Staff) Board Chair or President (Chief volunteer)

______________ ______________
Print or Type Name and Title *Print or Type Name and Title*

MAJOR CAPITAL FACT SHEET – VIDINHA CHARITABLE TRUST

Organization Name	$ Campaign Goal	Contact Person	Title	Telephone

PROJECT NAME. ____________________

ABOUT THE PROJECT:

PROJECT COSTS

Construction/Renovation $______
Equipment $______
Furnishings $______
Fees $______
Contingency $______
Fund Raising Expense $______
Financing Expense $______
Other ____________ (identify) $______

◆ Project Cost $______
◆ Building Maintenance Endowment Goal (if applicable) $______

TOTAL CAPITAL COST (A) $______

FUNDS AVAILABLE FOR PROJECT
Formally pledged or paid

◆ Trustees, Directors and/or Campaign Committee Members Total (**100% required)***** $______
Percentage of members contributing ______%
Median Gift $______
Average Gift $______

◆ Other Contributors
Corporations $______
Individuals $______
Foundation Grants $______
Government Grants $______
Organization's own funds $______

◆ Long-term Financing (in excess of five years)
Bond Issues $______
Loans $______
◆ Other ____________ (identify) $______

TOTAL FUNDS AVAILABLE (B) $______

BALANCE REQUIRED (A minus B) $______

◆ Amount requested from **Vidinha Trust** $______

◆ Fundraising timetable (**not** pledge period) for project

Start ________ Finish ________
mo./yr. mo./yr

◆ Project timetable.

Start ________ Finish ________
mo./yr. mo./yr.

ABOUT THE ORGANIZATION

◆ Year established ______

ACCREDITATION/LICENSURE
◆ Accrediting body, date of last accreditation review and current status:

FINANCIAL DATA/CURRENT UNRESTRICTED FUNDS
(Show budget figures with thousands omitted for current Fiscal Year and actual data for 3 prior years.)

	Income	Expense	Surplus or (Deficit)
◆ FY ___ (est.)			
◆ FY ___			
◆ FY ___			
◆ FY ___			

◆ **Attach** explanation of operating deficits and indicate how the deficits were covered, if applicable
◆ Market value of existing endowment funds $______
◆ Date of valuation ______

IMPACT OF COMPLETED PROJECT ON OPERATING AND MAINTENANCE BUDGETS

◆ Increase $______
or
Decrease $______

◆ Source of annual funds required to maintain project.

REQUEST PERCENTAGES

Percentage of **total capital cost** being requested from
this foundation ______%
all other local foundations ______%
local business sector ______%
individuals ______%
other ______ ______%
______ ______%
______ ______%
(specify)

TOTAL ______%

COMMENTS:
Attach any qualifying comments

PROPOSALS MUST BE POSTMARKED BY: December 1st

Vidinha – Major Cptl
Rev 3/2012
Page 4 of 4

Antone & Edene Vidinha Charitable Trust
Bank of Hawaii, Trustee

Grant Application Information for Program Support

Purpose
Antone and Edene Vidinha Charitable Trust was established to benefit the people of Kauai. Grants are made for charitable purposes to qualified tax exempt 501(c)(3) charitable organizations on Kauai or serving the residents of Kauai.

By trust provisions, contributions are awarded in four major fields:

- Churches on the Island of Kauai
- Hospitals that benefit Kauai residents
- Health organizations which benefit the people of Kauai
- Educational scholarships to colleges or universities in the State of Hawaii for deserving students from the Island of Kauai.

Grants or scholarships are not awarded to individuals, nor for endowments, multiple-year pledges, or on-going maintenance projects at churches, which should be funded by church members.

Foundation Deadline - Proposals must be postmarked by December 1st.

APPLICATION PROCEDURES (A thru D)

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

(A) Funding Request Cover Sheet – To be placed on top of each set (see page 3).
(B) Proposal Narrative - Provide who, what, when, where, why, and how in three pages or less.

> **Format Information:**
> **Pages: Maximum 3 pages**
> **Margins: 1-inch margins on each side**
> **Font: 12 point font**
> **Spacing: Double space in between paragraphs**
> **Paragraph Height: Maximum of 1 ½ inches**
> **Bullet points: Acceptable**

USE THESE 7 HEADINGS IN THE ORDER LISTED FOR THE PROPOSAL NARRATIVE:

1) Organization: Briefly describe your organization's mission and programs. (maximum of 3 sentences)
2) Population to be Served: Provide an estimated UNDUPLICATED number and age range of the eligible individuals you propose to serve.
   - If the projections are an increase over the current volume, provide information on current volume (percentages can only be used if accompanied with figures, i.e. 20% over 500).
3) Program/Project: Describe using specific information in layman terms. (Acronyms must be explained in the narrative and budgets.)
4) Goals & Objectives: **Separately** list each goal with corresponding objective, and specifically describe how the goal will be accomplished through the objective.
5) Outreach: For new, expansion, or existing program/project:
   - Describe how your organization will market the program/project to the community you propose to serve.
   - Provide an estimated UNDUPLICATED number of group/individuals who will be new participants
   - Provide UNDUPLICATED numbers for existing participants/groups/individuals.

6) Evaluation: Provide information on how and/or what the following measures are that will be used to evaluate the program/project (**note**: pre/post-tests are not acceptable):
   - Process Measures – extent to how the program/project will be implemented
   - Outcome Measures – effectiveness in meeting goals and objectives
7) Cost: Total cost of the program/project, amount requested, and plans for future support.

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

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

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

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

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

Provide ONE copy only of each of the following:

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

All proposals are to be sent to the following mailing address:

Postal Mail
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c/o Bank of Hawaii, Corporate Trustee
Charitable Foundation Services #758
P. O Box 3170
Honolulu, Hawaii 96802-3170

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Email address: elaine.moniz@boh com

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

Antone & Edene Vidinha Charitable Trust

Bank of Hawaii, Trustee

Funding Request Cover Sheet (Program)

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

Date ____________________

Organization Information

(Must be a 501 (c) (3) tax-exempt organization)

(If this is a collaborative project, please submit names of collaborating agencies on a separate sheet.)

Name: ____________________

Complete Address: ____________________

Phone. ____________________ Fax: ____________________

BOARD MEMBER INFORMATION

No. of Board Members: __________ Percent (%) of Financial Participation __________

Total Contribution During Fiscal Year: __________ Median Gift: __________ Average Gift: __________
(Check One: Past☐ or Current FY ☐)

Contact Information

Name: ____________________ Title: ____________________

Address: ____________________

Phone: ____________________ Email: ____________________

Project Information

Project Title: ____________________

Amount requested: $__________

Two signatures are required

____
Executive Director (Chief Compensated Staff)

____
Board Chair or President (Chief volunteer)

____
Print or Type Name and Title

____
Print or Type Name and Title

Antone & Edene Vidinha Charitable Trust
Bank of Hawaii, Trustee

Grant Application Information for Tuition Aid

Purpose
Antone and Edene Vidinha Charitable Trust was established to benefit the people of Kauai. Grants are made for charitable purposes to qualified tax exempt 501(c)(3) charitable organizations on Kauai or serving the residents of Kauai.

By trust provisions, contributions are awarded in four major fields:

- Churches on the Island of Kauai
- Hospitals that benefit Kauai residents
- Health organizations which benefit the people of Kauai
- Educational scholarships to colleges or universities in the State of Hawaii for deserving students from the Island of Kauai.

Grants or scholarships are not awarded to individuals, nor for endowments, multiple-year pledges, or on-going maintenance projects at churches, which should be funded by church members.

Tuition Aid Programs
The Distribution Committee provides grants for tuition aid to accredited colleges, universities and vocational schools in the State of Hawaii for the benefit of Kauai students. Criteria for QUALIFIED Kauai students receiving a scholarship can be found on page 4. ***Please ensure there are qualified students enrolled in your college or university prior to applying for a grant.***

Deadline Date - Proposals must be postmarked by December 1st.

APPLICATION PROCEDURES (A thru D)

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

(A) Funding Request Cover Sheet – To be placed on top of each set (see page 3).
(B) Proposal Narrative - Provide who, what, when, where, why, and how in three pages or less.

Format Information:
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Margins: 1-inch margins on each side
Font: 12 point font
Spacing: Double space in between paragraphs
Paragraph Height: Maximum of 1 ½ inches
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2) Population to be Served: Provide an estimated UNDUPLICATED number and age range of the eligible individuals you propose to serve
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3) Program/Project: Describe using specific information in layman terms. (Acronyms must be explained in the narrative and budgets.)
4) Goals & Objectives: **Separately** list each goal with corresponding objective, and specifically describe how the goal will be accomplished through the objective.

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

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

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

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

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

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

Provide ONE copy only of each of the following:

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

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Phone: (808) 694-4944

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

Antone & Edene Vidinha Charitable Trust

Bank of Hawaii, Trustee

Funding Request Cover Sheet (Tuition Aid)

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

Date ____________________

Organization Information

(Must be a 501 (c) (3) tax-exempt organization)

(If this is a collaborative project, please submit names of collaborating agencies on a separate sheet.)

Name: ______________________________

Complete Address: ______________________________

Phone: ______________________ Fax: ______________________

BOARD MEMBER INFORMATION

No. of Board Members: ____________ Percent (%) of Financial Participation: ____________

Total Contribution During Fiscal Year: __________ Median Gift: __________ Average Gift: __________
(Check One: Past ☐ or Current FY ☐)

Contact Information

Name: ______________________ Title: ______________________

Address: ______________________________

Phone: ______________________ Email: ______________________

Project Information

Project Title: ______________________________

Amount requested: $______________

Two signatures are required

______________________________ ______________________________
Executive Director (Chief Compensated Staff) Board Chair or President (Chief volunteer)

______________________________ ______________________________
Print or Type Name and Title *Print or Type Name and Title*

Antone and Edene Vidinha Charitable Trust
Tuition Aid Program

Criteria for Colleges, Universities & Vocational Schools in the State of Hawaii Awarding the Antone and Edene Vidinha Charitable Trust Scholarship

PURPOSE:

The purpose of this fund is to assist financially needy Kauai residents who are full or part-time students enrolled in any field of study on college or university campuses in the state of Hawaii.

DESCRIPTION OF PROGRAM:

To provide monetary assistance to Kauai residents who are of financial need attending any Hawaii campus in a college or university system including community colleges or vocational college, or transferring from one university system to another university system in the state of Hawaii.

Students must complete a Federal Application for Student Financial Aid (FAFSA) and receive a correctly processed Student Aid Report (SAR).

CRITERIA:

The scholarship is to be used to fund college or vocational scholarships for students from the Island of Kauai attending any Hawaii campus. Scholarship funds may be used toward tuition, fees, books, supplies and equipment required for the enrolled courses. Scholarships are based on the following criteria:

1. Students must demonstrate financial need, as determined by the college or university system.
2. Preference is to be given to those with roots on Kauai (those born and/or with ancestors from this area).
3. Students are to be at least a **12-month** resident of Kauai Island.
4. Students must be classified and enrolled, or plan to enroll, as full-time or part-time.
5. Cumulative GPA of at least 2.0.
6. No maximum scholarship size.

ELIGIBILITY:

This scholarship program is open to all incoming and continuing students from the island of Kauai who meet the above criteria and the following requirements:

Although students receiving a Vidinha Scholarship will be selected by the college prior to the academic year, scholarship checks will be issued only after the student provides evidence of having registered in a full or part time program of study at a Hawaii campus of his/her choice. Continued enrollment as a full or part time student is a requirement. If the necessary credit load is not maintained after the initial registration, the student will be required to return the scholarship funds.

APPLICATION PROCEDURES:

Scholarship Application forms should be available at the financial aid office on the campus the student is attending (i.e. Kauai Community College Financial Aid Office). Students must apply for this scholarship by submitting a completed Scholarship Application form to its respective financial aid office. Each system/campus financial aid office may have additional instructions relating to general eligibility and submission deadlines.