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For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation Central Pacific Bank Foundation		A Employer identification number 39-2068708	
Number and street (or P O box number if mail is not delivered to street address) 220 South King Street		B Telephone number (see instructions) (808) 544-3673	
City or town, state or province, country, and ZIP or foreign postal code Honolulu, HI 96813		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 13,014,526		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	

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) (see instructions))		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	2,074,787			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	238,219	238,219	0	
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	158,881			
	b Gross sales price for all assets on line 6a 632,508				
	7 Capital gain net income (from Part IV, line 2) . . .		158,881		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	2,471,887	397,100	0	
	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	5,131	2,566	0	2,565
	c Other professional fees (attach schedule)	159,188	159,188	0	0
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	10,027	0	0	0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications	648	0	0	648
	23 Other expenses (attach schedule).	805	0	0	805
	24 Total operating and administrative expenses. Add lines 13 through 23	175,799	161,754	0	4,018
	25 Contributions, gifts, grants paid	507,329			507,329
	26 Total expenses and disbursements. Add lines 24 and 25	683,128	161,754	0	511,347
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	1,788,759			
	b Net investment income (if negative, enter -0-)		235,346		
	c Adjusted net income (if negative, enter -0-)			0	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	1,702	1,169	1,169
	2	Savings and temporary cash investments	543,496	1,261,163	1,261,163
	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 (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach schedule) ▶ _____ 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 (attach schedule)	0	128,025	127,760
	b	Investments—corporate stock (attach schedule)	4,659,512	5,108,417	6,820,346
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	4,359,178	4,853,873	4,804,088
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	9,563,888	11,352,647	13,014,526	
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 (attach schedule).			
	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 ▶ <input type="checkbox"/> 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 ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	9,563,888	11,352,647	
	30	Total net assets or fund balances(see instructions)	9,563,888	11,352,647	
31	Total liabilities and net assets/fund balances(see instructions)	9,563,888	11,352,647		

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 9,563,888
2	Enter amount from Part I, line 27a	2 1,788,759
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3	4 11,352,647
5	Decreases not included in line 2 (itemize) ▶ _____	5 0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6 11,352,647

Part IV

Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 632,508		473,627	158,881
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			158,881
b			
c			
d			
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	158,881
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) (see instructions) If (loss), enter -0- in Part I, line 8		3	0

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 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))
2014	531,169	11,311,334	0 046959
2013	395,235	10,141,855	0 038971
2012	463,821	7,812,796	0 059367
2011	69,432	607,269	0 114335
2010	0	3,245	0 000000

2	Total of line 1, column (d).	2	0 259632
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	0 051926
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	11,874,987
5	Multiply line 4 by line 3.	5	616,621
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	2,353
7	Add lines 5 and 6.	7	618,974
8	Enter qualifying distributions from Part XII, line 4.	8	511,347

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 page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 <input type="checkbox"/> and enter 1% of Part I, line 27b	1	4,707
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	4,707
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	4,707
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	16,674
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	16,674
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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	11,967
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 11,967 Refunded ▶	11	0

Part VII-A **Statements Regarding Activities**

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?		Yes	No
1a				No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b		No
c	Did the foundation file Form 1120-POL for this year?	1c		No
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? <i>If "Yes," attach a detailed description of the activities</i>	2		No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5		No
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	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	
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? <i>If "No," attach explanation</i> .	8b	Yes	
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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10		No

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	13	Yes	
14	The books are in care of ► <u>SCOTT HINO</u> Telephone no ► <u>(808) 544-3597</u> Located at ► <u>220 SOUTH KING STREET 3RD FLOOR HONOLULU HI</u> ZIP+4 ► <u>96813</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2015, 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? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ►	16	Yes	No

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.			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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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			
	Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>			
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 2015? 1c			No
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____			
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). 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 ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2015 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? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i>). 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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 2015?	4b		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)?

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? ☐ **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?
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?

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

[illegible]

Total number of other employees paid over \$50,000.	0
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Part VIII

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

3 Five highest-paid independent contractors for professional services (see instructions). 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	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
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	12,054,404
b	Average of monthly cash balances.	1b	1,420
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	12,055,824
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	12,055,824
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	180,837
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	11,874,987
6	Minimum investment return. Enter 5% of line 5.	6	593,749

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	593,749
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	4,707
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	4,707
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	589,042
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	589,042
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	589,042

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	511,347
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	511,347
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 (see instructions).	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	511,347

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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				589,042
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			17,764	
b Total for prior years 2013 , 2012 , 2011		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014.				
f Total of lines 3a through e.	0			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ \$ 511,347				
a Applied to 2014, but not more than line 2a			17,764	
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 2015 distributable amount.				493,583
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2015 (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.		162		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				95,459
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 2010 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				
d Excess from 2014.				
e Excess from 2015.				

Part XIV

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b Check box to indicate whether the organization

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	

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Part XV

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))

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

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

SUBMISSION VIA THE INTERNET AT WWW.C
220 SOUTH KING STREET
HONOLULU, HI 96813
(808) 544-0500
CPBFoundation@centralpacificbank.com

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

THE APPLICATION FORM IS SUBMITTED AT WWW.CENTRALPACIFICBANK.COM Please see copy of grant application at <https://www.centralpacificbank.com/About-CPB/Works-For-You/Serving-Our-Community/CPB-Foundation>

c Any submission deadlines

MARCH 31, 2015/JUNE 30, 2015/SEPTEMBER 30, 2015

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

Applications are only accepted online and must include the following attachments - Organization's income statement (or profit/loss statement) for the most recent completed fiscal year - Audited financial statements are preferred but not required - Local units of national organizations must submit local unit financial information * Complete the online application and attach the required documents Additional documents that are not required on the application will not be considered To be eligible, organizations must be - a registered 501(c)(3), - in existence at least two years, and - in stable financial condition For more information please visit our website at <https://www.centralpacificbank.com/About-CPB/Works-For-You/Serving-Our-Community/CPB-Foundation>

Part XV

Supplementary Information(continued)

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

Recipient	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
Name and address (home or business)				
<div>a Paid during the year</div> <div>See Additional Data Table</div>				
<div>Total</div>			<div>3a</div>	507,329
<div>b Approved for future payment</div>				
<div>Total</div>			<div>3b</div>	0

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2015)



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)	No
(2) Other assets.		1a(2)	No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.		1b(1)	No
(2) Purchases of assets from a noncharitable exempt organization.		1b(2)	No
(3) Rental of facilities, equipment, or other assets.		1b(3)	No
(4) Reimbursement arrangements.		1b(4)	No
(5) Loans or loan guarantees.		1b(5)	No
(6) Performance of services or membership or fundraising solicitations.		1b(6)	No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.		1c	No
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.			

[illegible]

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

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.		
		2016-11-08 <hr/> Date	

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

Paid Preparer Use Only	Print/Type preparer's name KELLEY SIMON	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00791436
	Firm's name ▶ ERNST & YOUNG US LLP			Firm's EIN ▶ 34-6565596	
	Firm's address ▶ 370 17TH STREET 3300 DENVER, CO 80202			Phone no (720) 931-4690	

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Denis Isono	CHAIRMAN AND PRESIDENT 0 20	0	0	0
220 SOUTH KING STREET HONOLULU,HI 96813				
Catherne Ngo	VICE CHAIR AND VICE PRESIDENT 0 20	0	0	0
220 SOUTH KING STREET HONOLULU,HI 96813				
Dayna Matsumoto	VICE PRESIDENT AND TREASURER 0 20	0	0	0
220 SOUTH KING STREET HONOLULU,HI 96813				
Wayne Kirihara	VICE PRESIDENT 0 20	0	0	0
220 SOUTH KING STREET HONOLULU,HI 96813				
Kyle Sakamoto	VICE PRESIDENT 0 20	0	0	0
220 SOUTH KING STREET HONOLULU,HI 96813				
Glenn Ching	Vice President & Corporate Secretary 0 20	0	0	0
220 SOUTH KING STREET HONOLULU,HI 96813				
Donna Takeda	VICE PRESIDENT & Assistant Secretary 0 20	0	0	0
220 SOUTH KING STREET HONOLULU,HI 96813				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
Adult Friends for Youth 3375 Koapaka St Suite B290 Honolulu, HI 96819	No Relationship	PC	Clinical Competency Based Alternative Education (CBASE) Program	5,000
Aloha Independent Living Hawaii PO Box 283 Pearl City, HI 96782	No Relationship	PC	Furthering Independent Living Hawaii	5,000
Aloha United Way 200 N Vineyard Blvd Suite 700 Honolulu, HI 96817	No Relationship	PC	TO ORGANIZE EVENTS TO ADDRESS EDUCATION, POVERTY AND HOMELESSNESS, AND HEALTH AND HUMAN SERVICES	20,000
Alzheimer Association 1130 N Nimitz Highway Suite A -265 Honolulu, HI 96817	No Relationship	PC	2015 CPB walks for you	32,316
American Cancer Society 2370 Nuuanu Avenue Honolulu, HI 96817	No Relationship	PC	Hope Lodge Hawaii Capital CampaignConstruction of a lounge for cancer patients and their families	20,000
Armed Services YMCA of Honolulu 1260 Pierce Street Suite 145 Pearl Harbor, HI 96860	No Relationship	PC	Early Learning Readiness Program Provide early childhood education programs to low income	5,000
Best Buddies Hawaii 200 N Vineyard Blvd Suite B26 Honolulu, HI 96817	No Relationship	PC	Best Buddies Friendship Program	5,000
Camp Mokuleia Inc 68729 Farrington Hwy Waialua, HI 96791	No Relationship	PC	Childhood Cancer Program	10,000
Chaminade University 3140 Waialae Ave Honolulu, HI 96816	No Relationship	PC	New Intercollegiate Athletics Support FacilitiesConstruction of 2 new facilities	10,000
Downtown Athletic Club Hawaii 1000 Bishop St Suite 610 Honolulu, HI 96813	No Relationship	PC	Rugby4Good	10,000
Family Programs of Hawaii 250 Vineyard St Honolulu, HI 96734	No Relationship	PC	Hoomalu O Na Kamalii Cultural Activity Program	5,000
Food Basket Inc 2611 Kilihau St Honolulu, HI 96819	No Relationship	PC	Tenant Improvements for the new West Hawaii Site Capital Campaign	10,000
Friends of Kona Pacific Public Charter School PO Box 115 Kealahakua, HI 96750	No Relationship	PC	Schoolwide Written Curriculum Development Project To develop a common corealignedschoolwide writt	5,000
Hawaii 3Rs PO Box 2750 Honolulu, HI 96840	No Relationship	PC	Cooling Schools Program	25,000
Hawaii Academy of Science 1776 University Ave UA44 Honolulu, HI 96822	No Relationship	PC	Hawaii State Science and Engineering Fair	5,000
Total ▶ 3a				507,329

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a <i>Paid during the year</i>				
Hawaii Community Foundation 827 Fort Street Mall Honolulu, HI 96813	No Relationship	PC	SUPPORT THE PATHWAYS TO RESILIENT COMMUNITIES	30,000
Hawaii Community Foundation 827 Fort Street Mall Honolulu, HI 96813	No Relationship	PC	Centennial Campaign	12,500
Hawaii Community Foundation 827 Fort Street Mall Honolulu, HI 96813	No Relationship	PC	CPB Scholarship Fund	5,000
Hawaii Foodbank 2611 Kili Hau St Honolulu, HI 96819	No Relationship	PC	Food 4 Keiki Backpack Program	10,000
Hawaii Homeownership Center 1259 AALA ST STE 201 Honolulu, HI 96817	No Relationship	PC	TO PROVIDE EDUCATION, INFORMATION AND SUPPORT TO CREATE SUCCESSFUL FIRST TIME HOMEOWNERS IN HAWAII	5,000
Hawaii Public Television Foundation 2350 Dole St Honolulu, HI 96822	No Relationship	PC	PBS Hawaii NEW HOME Campaign	25,000
Hawaii Times Photo Archives Foundation 2454 S BERETANIA ST STE 301 Honolulu, HI 96826	No Relationship	PC	PROMOTE THE UNDERSTANDING AND APPRECIATION OF JAPANESE HISTORY AND CULTURE BY PRESERVING AND SHARING	5,000
Hospice of Hilo 1011 Wai'anuenue Ave Hilo, HI 96720	No Relationship	PC	Hospice of Hilo Computer Hardware and Software Capacity Upgrades	5,000
HUGS 3636 Kilauea Ave Honolulu HI 96816 Honolulu, HI 96816	No Relationship	PC	2015 CPB walks for you	27,076
Ihs the Institute for Human Services Inc 546 Kaa'ahi St Honolulu, HI 96817	No Relationship	PC	IHS "PopUp" (Mobile Employment Assistance Center PEAC)	20,000
Kahilu Theatre Foundation 671186 Lindsey Road Kamuela, HI 96743	No Relationship	PC	Youth EducationScholarship Fund Program	5,000
Kapiolani Health Foundation 55 Merchant St 26th Floor Honolulu, HI 96813	No Relationship	SO I	TO HELP FUND PHASE 1 RENOVATIONCAPITAL CAMPAIGN	10,000
Kristi Yamaguchi Always Dream Foundation 125 Railroad Ave S203 Danville, CA 94526	No Relationship	PC	Always Reading Program	10,000
MA KA HANA KA IKE BUILDING PROGRAM PO Box 968 Hana, HI 96713	No Relationship	PC	Ma Ka Hana Ka Ike Building Program Vocational education program for atrisk youths	7,500
Make A Wish Foundation of Hawaii Inc 223 South King St Suite 100 Honolulu, HI 96813	No Relationship	PC	2015 CPB walks for you	24,588
Total ▶ 3a				507,329

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year				
Maui Day Care Center for Senior Citizens and Disabled 11 Mahaolu St Suite B Kahului, HI 96732	No Relationship	PC	To subsidize direct services to elderly individuals and their caregivers	10,000
Maui Economic Opportunity Inc PO Box 2122 Kahului, HI 97733	No Relationship	PC	Core Four Business Training Tuition AssistanceProvide tuition assistance to attend the Core Four Business Planning Course	10,000
Maui Youth & Family Services Inc PO Box 790006 Paia, HI 96779	No Relationship	PC	Safe and Stable Housing Assistance for Former Foster and Homeless Youth Project	5,000
MidPacific Institute 2445 KAALA ST Honolulu, HI 96822	No Relationship	PC	MPI MIDDLE SCHOOL INNOVATION CENTER	10,000
Pacific Whale Foundation 300 Maalaea Road Suite 211 Wailuku, HI 96793	No Relationship	PC	Marine Science Youth Education	2,500
Partners in Development 2040 BACHELOT ST Honolulu, HI 96817	No Relationship	PC	2015 CPB walks for you	20,849
Polynesian Voyaging Society 10 SAND ISLAND PKWY Honolulu, HI 96819	No Relationship	PC	20132016 WORLDWIDE VOYAGE CAPITAL CAMPAIGN	10,000
Read Aloud America 1314 S King St G4 Honolulu, HI 96814	No Relationship	PC	Read Aloud Program to Provide tuition assistance to attend the Core Four Business Planning Tours	5,000
Rehabilitation Hospital of the Pacific Foundation 226 N Kuakini St Honolulu, HI 96817	No Relationship	PC	Renovation Rehabilitation Hospital of the Pacific	10,000
St Francis Healthcare Foundation of Hawaii PO BOX 29700 Honolulu, HI 96820	No Relationship	PC	ST FRANCIS SKILLED NURSING FACILITY CAPITAL CAMPAIGN	5,000
ST ANDREW'S PRIORY SCHOOL 224 QUEEN EMMA SQUARE Honolulu, HI 96817	No Relationship	PC	EDUCATION EQUITY AND ACCESS STRATEGIC INITIATIVE	10,000
The ARC of Hilo 1099 Waiuanue Ave Hilo, HI 96720	No Relationship	PC	Janitorial Service Equipment	10,000
University of Hawaii Foundation 2444 Dole Street Bachman Hall 105 Honolulu, HI 96822	No Relationship	PC	The Waikiki Aquarium, School of Fish	5,000
University of Hawaii Foundation PO Box 11270 Honolulu, HI 96828	No Relationship	PC	Senator Daniel K Akaka Regents Scholarship Endowment	5,000
Waikiki Health Center 277 Ohua Avenue Honolulu, HI 96815	No Relationship	PC	Educating Homeless Youth in a Supportive, Caring Environment Program	10,000
Total ▶ 3a				507,329

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	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
Name and address (home or business)				
a Paid during the year				
Young Womens Christian Association of Oahu 1040 Richards St Honolulu, HI 96813	No Relationship	PC	General Purpose	5,000
Total ▶ 3a				507,329

TY 2015 Accounting Fees Schedule**Name:** Central Pacific Bank Foundation**EIN:** 39-2068708

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX PREP FEES	5,131	2,566	0	2,565

TY 2015 Investments Corporate Stock Schedule**Name:** Central Pacific Bank Foundation**EIN:** 39-2068708

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ISHARES RUSSELL 2000 INDEX	441,300	589,904
ISHARES MSCI EAFE INDEX	490,728	583,090
SPDR S&P 500	4,070,609	5,517,742
CENTRAL PACIFIC FINANCIAL CORP STOCK	105,780	129,610

TY 2015 Investments Government Obligations Schedule**Name:** Central Pacific Bank Foundation**EIN:** 39-2068708**US Government Securities - End of
Year Book Value:**

128,025

**US Government Securities - End of
Year Fair Market Value:**

127,760

**State & Local Government
Securities - End of Year Book
Value:**

0

**State & Local Government
Securities - End of Year Fair
Market Value:**

0

TY 2015 Investments - Other Schedule

Name: Central Pacific Bank Foundation

EIN: 39-2068708

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ISHARES US BOND MARKET	AT COST	4,853,873	4,804,088

TY 2015 Other Expenses Schedule**Name:** Central Pacific Bank Foundation**EIN:** 39-2068708

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INSURANCE	805	0	0	805

TY 2015 Other Professional Fees Schedule**Name:** Central Pacific Bank Foundation**EIN:** 39-2068708

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISORY FEES	84,681	84,681	0	0
INVESTMENT SALES FEES	659	659	0	0
OTHER PROFESSIONAL SERVICES	73,848	73,848	0	0

TY 2015 Taxes Schedule**Name:** Central Pacific Bank Foundation**EIN:** 39-2068708

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
TAX EXPENSE	10,027	0	0	0

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990</div>	<div>OMB No 1545-0047</div> <div>2015</div>
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<div>Name of the organization</div> <div>Central Pacific Bank Foundation</div>	<div>Employer identification number</div> <div>39-2068708</div>
--------------------------------------------------------------------------------	-----------------------------------------------------------------

Organization type (check one)

<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>	<div>Section:</div> <div><input type="checkbox"/> 501(c)() (enter number) organization</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div> <div><input type="checkbox"/> 527 political organization</div> <div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div> <div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div> <div><input type="checkbox"/> 501(c)(3) taxable private foundation</div>
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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 other 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 33¹/₃% 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 990PF, 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 Central Pacific Bank Foundation	Employer identification number 39-2068708
----------------------------------------------------------------	-----------------------------------------------------

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	CENTRAL PACIFIC BANK	\$ 2,069,787	Person <input checked="" type="checkbox"/>
	220 SOUTH KING STREET		Payroll <input type="checkbox"/>
	HONOLULU, HI 96813		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	John C Dean	\$ 5,000	Person <input checked="" type="checkbox"/>
	41-467 Kalanianaʻole Hwy		Payroll <input type="checkbox"/>
	Waimanalo, HI 96795		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/>
			Payroll <input type="checkbox"/>
			Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization Central Pacific Bank Foundation	Employer identification number 39-2068708
----------------------------------------------------------------	-----------------------------------------------------

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

Name of organization Central Pacific Bank Foundation	Employer identification number 39-2068708
----------------------------------------------------------------	-----------------------------------------------------

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 information once. See instructions.) ► \$ _____

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	
-	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	<div></div> <div></div> <div></div>	
	(e) Transfer of gift			
	Transferee's name, address, and ZIP 4		Relationship of transferor to transferee	
	<div></div> <div></div> <div>--</div>	<div></div> <div></div> <div></div>		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
				<div></div> <div></div> <div></div>
				<div></div> <div></div> <div></div>
	(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee		
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(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
				<div></div> <div></div> <div></div>
				<div></div> <div></div> <div></div>
	(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee		
<div></div> <div></div> <div>--</div>	<div></div> <div></div> <div></div>			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
				<div></div> <div></div> <div></div>
				<div></div> <div></div> <div></div>
	(e) Transfer of gift			
Transferee's name, address, and ZIP 4		Relationship of transferor to transferee		
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