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Form 990-PF Department of the Treasury

Extended to November 15 **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

For calendar year 2015 or tax year beginning and ending A Employer identification number Name of foundation MARIGNOLI DI MONTECORONA FOUNDATION, INC. <u>46-0618691</u> DUCCIO K. MARIGNOLI, PRESIDENT Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (808) 524-5750 C/O SMOLENSKI & WOODDELL 841 BISHOP ST. City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here 96813 HONOLULU, HI Initial return of a former public charity D 1. Foreign organizations, check here G Check all that apply: Initial return Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 2,454,202. (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)) (d) Disbursements for charitable purposes (cash basis only) (a) Revenue and expenses per books (c) Adjusted net (b) Net investment income income 185,831 Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 0. 7 Capital gain net 0 8 Net short-term capital gair Income modifications 10a Gross sales less and allowances 2 2 2016 b Less Cost of go c Gross profit of (loss) 11 Other income 185,831 0 0 Total Add lines 1 through 11 0. О. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 0 15 Pension plans, employee benefits C@ 16a Legal fees b Accounting fees 5,028 Stmt 1 0 0 5,028. c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 1,630 0 0 0. 22 Printing and publications Ο. 10,953 0 10,707. 23 Other expenses Stmt 2 24 Total operating and administrative 0 17.611 0 15,735. expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 0 26 Total expenses and disbursements Add lines 24 and 25 <u>17,61</u>1 0 0 15,735. Subtract line 26 from line 12: 168,220 a Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-) 0 C Adjusted net income (if negative, enter -0-) 523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

For	m 99	0-PF (2015) DUCCIO K. MARIGNOLI, PR	ESIDENT	4.	6-061	8691	Page 2
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	Er	nd of year		
	are	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c)) Fair Market V	'alue
	1	Cash - non-interest-bearing	215.	6,23	7.	6,	237.
	2	Savings and temporary cash investments		_			
	3	Accounts receivable >					
	1	Less: allowance for doubtful accounts			{		
	4	Pledges receivable ►					
	ļ	Less: allowance for doubtful accounts ▶			1		
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	ļ	disqualified persons			- 1		
	7	Other notes and loans receivable					
	l	Less: allowance for doubtful accounts ▶					
ţ	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ä	10a	Investments - U.S. and state government obligations					
	b	Investments - corporate stock					
	С	Investments - corporate bonds			}		
	11	Investments - land, buildings, and equipment basis					
	Ì	Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other					
	14	Land, buildings, and equipment: basis ►					
		Less accumulated depreciation					
	15	Other assets (describe Statement 5)	2,280,176.	2,447,96	5.	2,447,	<u>965.</u>
	16	Total assets (to be completed by all filers - see the					
_		instructions. Also, see page 1, item I)	2,280,391.	2,454,20	2.	2,454,	202.
	17	Accounts payable and accrued expenses					
	18	Grants payable					
es.	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
lab	21	Mortgages and other notes payable			_		
_	22	Other liabilities (describe 🕨)					
	23	Total liabilities (add lines 17 through 22)	0,		0.		
		Foundations that follow SFAS 117, check here					
s	1	and complete lines 24 through 26 and lines 30 and 31.	}		İ		
or Fund Balances	24	Unrestricted					
alar	25	Temporarily restricted			_		
8	26	Permanently restricted					
Ĕ		Foundations that do not follow SFAS 117, check here			1		
o.	i	and complete lines 27 through 31.	0 000 500	0 445 061	_		
şţ	27	Capital stock, trust principal, or current funds	2,280,589.	2,447,96			
SS	1	Paid-in or capital surplus, or land, bldg., and equipment fund	0.		0.		
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	-198.	6,23			
ž	30	Total net assets or fund balances	2,280,391.	2,454,20	<u>4 • </u>		
		Tatal link little and and another found belower	2 200 201	2 454 20	,		
_	31	Total liabilities and net assets/fund balances	2,280,391.	2,454,20	۷٠]		
P	art	Analysis of Changes in Net Assets or Fund B	alances				
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30				
1		t agree with end-of-year figure reported on prior year's return)			1	2,280,	391
9		amount from Part I, line 27a		ţ	2		$\frac{391.}{220.}$
		increases not included in line 2 (itemize)	See Sta	tement 4	3		227.
		ines 1, 2, and 3	DCG_DCG	COMOTIC 4	4	2,454,	
		eases not included in line 2 (itemize) EXCHANGE RATE	ADJUSTMENT	ļ	5		636.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co			6	2,454,	
						Form 990-P	

Form 990-PF (2015) • DUCCIO K. MARIGNOLI, PRESIDENT 46-0618691 Page 3 Part IV' Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) D - Donation 1a b NONE C đ е (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) b d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 Losses (from col. (h)) as of 12/31/69 over col. (j), if any b C þ е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) ¶ If (loss), enter -0- in Part I, line 7 2 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 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income N/A (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. Yes Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d) Distribution ratio (a) Base period years Adjusted qualifying distributions Net value of noncharitable-use assets Calendar year (or tax year beginning in) 2014 2013 2012 2011 2010 2 Total of line 1, column (d) 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 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 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.

MARIGNOLI DI MONTECORONA FOUNDATION, INC. DUCCIO K. MARIGNOLI, PRESIDENT 46-0618691 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 X and enter "N/A" on line 1. Date of ruling or determination letter: 04/25/14 (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% N/A 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-) 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-6 Credits/Payments: a 2015 estimated tax payments and 2014 overpayment credited to 2015 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 0. 7 Total credits and payments. Add lines 6a through 6d 8 8 Enter any penalty for underpayment of estimated tax. Check here ____ if Form 2220 is attached Õ. 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 Enter the amount of line 10 to be: Credited to 2016 estimated tax 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 X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b 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. X c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ _____ (2) On foundation managers. ▶ \$ ____ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0. X 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. 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 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a X N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b Х 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: · 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 X remain in the governing instrument? 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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) 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 X 86 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)? If "Yes," complete Part XIV

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10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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Pa	art VIÎ-A Statements Regarding Activities (continued)			
	1		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?	 		- 25
12		12		X
••	If "Yes," attach statement (see instructions)	13	X	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		
	Website address ► marignolifoundation.org	F 0.4		
14	The books are in care of ► ROBERT J. SMOLENSKI Telephone no. ► (808)	524	-5/	<u> 5U_</u>
	Located at ► SEE STATEMENT 3 ZIP+4 ►			
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	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,	r	Yes	No
	securities, or other financial account in a foreign country?	16	X	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country Italy			
Pa	art 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available		1	
	for the benefit or use of a disqualified person)?	1 1		
	(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.)]	
b	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
٠	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	16		х
	Organizations relying on a current notice regarding disaster assistance check here			
	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	1	х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	-"		
۲.	defined in section 4942(j)(3) or 4942(j)(5)):			
	that the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1 1	1	
a	before 2015? West Inc. of tax year 2015, the the foundation have any undistributed meeting times of and be, i art xin/ for tax year (s) beginning Yes X No.			
h	If "Yes," list the years \(\sum_{\text{inst}} \), \(\text{inst} \) Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
U	valuation of assets) to the year's undistributed income? (If applying the provisions of section 4942(a)(2) to all years listed, answer "No" and attach			
		0.	-	
	statement - see instructions.) N/A	2b		
Ç	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	'		
Зa	· · · · · · · · · · · · · · · · · · ·			
	during the year? Yes X No			
D	of "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after		j	
	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,	\ <u>.</u> .	Į	
	Form 4720, to determine if the foundation had excess business holdings in 2015) N/A	3b		 -
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u> _
D	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		}	77
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	46	DE-	<u>X</u>
	FC FC	rm 990	7-PF ((2015)

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MARIGNOLI DI MONTECORONA FOUNDATION, INC. DUCCIO K. MARIGNOLI, PRESIDENT 46-0618691 Form 990-PF (2015) Page 6 Part VII-B. Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Garry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/AOrganizations 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 Yes No expenditure responsibility for the grant? N/AIf "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 Yes X No a personal benefit contract? 6b Х b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b b_If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (b) Title, and average (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other hours per week devoted to position (If not paid, enter -0-) (a) Name and address allowances DUCCIO KAUMUALII MARIGNOLI DIRECTOR/PRESIDENT/TREASUR SEE STATEMENT 3 40.00 0 0 0. KAPIOLANI K. MARIGNOLI DIRECTOR SEE STATEMENT 3 0.50 0 0 0. ROBERT J. SMOLENSKI DIRECTOR/SECRETARY SEE STATEMENT 3 0.50 0 0 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 (c) Compensation allowances NONE

Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Foundat 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 statistic number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the confer	ıced, etc.	Expenses
1 CONTINUE ORGANIZATION OF SCHOLARLY RESEARCH I	FACILITY/ART	
LIBRARY		•
- DEGELECULARE DELAMED ACMILITARY BOD DOGGEDLE DE	THE PROTECTION	0.
2 RESEARCH AND RELATED ACTIVITY FOR POSSIBLE FO	TURE PROJECTS	
		0.
3 ORGANIZATION OF A NEW EDITION OF THE ART HIS	PORV VOLUME OF	<u> </u>
SPOLETO	IOKI VOBOME OF	
DIOBBIO		0.
4 SUPPORT OF THE "PORTRAITS AND FIGURES FROM RU	JBENS TO	
GIAQUINTO" EXHIBITION		
		10,707.
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions. 3		
Total, Add lines 1 through 3	<u> </u>	0.

Form 990-PF (2015) * DUCCIO K. MARIGNOLI, PRESIDENT 46-0618691 Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 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 b Average of monthly cash balances 1b c Fair market value of all other assets 10 d Total (add lines 1a, b, and c) 1d Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 754. 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here > X and do not complete this part.) Minimum investment return from Part X, line 6 1 Tax on investment income for 2015 from Part VI, line 5 b Income tax for 2015. (This does not include the tax from Part VI.) c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 15,735. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a b Program-related investments - total from Part IX-B 16 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 15,735. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b Adjusted qualifying distributions. Subtract line 5 from line 4 6

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4940(e) reduction of tax in those years.

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

Part XIII Undistributed Income (se	e instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2014	2014	2015
1 Distributable amount for 2015 from Part XI,				
line 7				
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only		_		
b Total for prior years:				
,,				
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				<u> </u>
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$				
a Applied to 2014, but not more than line 2a		 		
b Applied to undistributed income of prior				
years (Election required - see instructions)		<u> </u>		
c Treated as distributions out of corpus				
(Election required - see instructions)		- 		
d Applied to 2015 distributable amount				ļ
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount				
must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5		 	 	
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
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 d Subtract line 6c from line 6b. Taxable				
amount - see instructions				
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				
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)				
8 Excess distributions carryover from 2010	·			
not applied on line 5 or line 7				
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a				
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		<u> </u>		<u> </u>

other entity) of which the foundation has a 10% or greater interest.

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

🔟 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:

N/A

b The form in which applications should be submitted and information and materials they should include:
c Any submission deadlines:

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

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Part XV Supplementary Information				
3 Grants and Contributions Paid During the	Year or Approved for Future F	ayment	,	
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)	or substantial contributor	recipient		
a Paid during the year				
None				
			}	
			 	
	,			
Total			▶ 3a	0
b Approved for future payment				
None	1			
	1			
				
Total				
Total			► 3b	0.00 PF (0) (5)

Form **990-PF** (2015)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated b	usiness income		oy section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue: a	 		1000		
b					
C					
d					
e	_				<u> </u>
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments	<u> </u>				
3 Interest on savings and temporary cash					
investments 4 Dividends and interest from securities			+-+		
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			1 1		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	•				
a	_				
b					<u> </u>
C					
d	_				
e	_		++-		
12 Subtotal. Add columns (b), (d), and (e)		0	•	0.	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.	`			13 _	0.
Part XVI-B Relationship of Activities	s to the Accom	iplisnment of E	xempt P	urposes 	
Line No. Explain below how each activity for which in			A contributed	d importantly to the acco	mplishment of
the foundation's exempt purposes (other th	an by providing funds	s for such purposes).			
	·	···			
					·
					
				···	
					
523621 11-24-15					Form 990-PF (2015

		O K. MARIGNOL			618691	Page 13
Part	Exempt Organ		o and Transactions	and Relationships With Non	cnaritable	
1 Did		·	with any other eranged	non described in section 501(c) of		res No
		c)(3) organizations) or in section			 	100
	•	dation to a noncharitable exempt		mizations.		
	Cash	ation to a noncharitable exempt	t organization of.		1a(1)	x
	Other assets				1a(2)	X
	ner transactions:				10(2)	-
-	Sales of assets to a noncharita	able exempt organization			1b(1)	X
		oncharitable exempt organization	n		1b(2)	X
	Rental of facilities, equipment,		•		1b(3)	X
٠,	Reimbursement arrangements				1b(4)	X
	Loans or loan guarantees				1b(5)	X
		embership or fundraising solicit	ations		1b(6)	X
c Sh	aring of facilities, equipment, ma	ailing lists, other assets, or paid	employees		1c	X
d if t	he answer to any of the above is	s "Yes," complete the following s	chedule. Column (b) should a	ilways show the fair market value of the gi	oods, other asse	ts,
or	services given by the reporting	foundation. If the foundation rec	ceived less than fair market va	lue in any transaction or sharing arrangen	nent, show in	
col		, other assets, or services receiv				
(a) Line r	o (b) Amount involved		able exempt organization	(d) Description of transfers, transaction	s, and sharing arra	ngements
 .		N/A	<u>4</u>			
						
		 				
	_ -					
						
		 			 _	
		 				
						
						
2a Is 1	the foundation directly or indirec	ctly affiliated with, or related to, o	one or more tax-exempt organ	nizations described		
ın :	section 501(c) of the Code (othe	er than section 501(c)(3)) or in s	section 527?		Yes	X No
b lf "	Yes," complete the following sch					
, _	(a) Name of or	ganization	(b) Type of organization	(c) Description of rel	ationship	
	N/A					
						<u></u>
				 		
				 		
	Under penalties of person I declare	a that I have examined this return und	uding accompanying echodules es	d statements, and to the best of my knowledge		
Sign				mation of which preparer has any knowledge	May the IRS dis	cuss this preparer
Here	but	Smolensh:	Vulatil	SECRETARY	shown below (s	ee instr)?
	Signature of officer or truste	10/11	Date	Title	_ X Yes	L No
	Print/Type preparer's n	· — — , — — — — — — — — — — — — — — — —	s signature		PTIN	
	Je Je Fragania		11	self- employed		
Paid	Stephen Zi	lobrowski 🛚 🗸 🖍	7)/\ J\\\	11/11/14	P010697	53
Prep		Y PITNEY LLP	1/ / 1	Firm's EIN ▶ 0 €		

Form **990-PF** (2015)

Phone no. (617) 345-4600

Use Only

Firm's address > ONE INTERNATIONAL PL BOSTON, MA 02110

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2015

Name of the organization

MARIGNOLI DI MONTECORONA FOUNDATION, INC. DUCCIO K. MARIGNOLI, PRESIDENT

46-0618691_

Organization type (check one).						
Filers of:		Section:				
Form 990 or 9	990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 990-PF		X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Note. Only a	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	•					
	-	ling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or ne contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special Rules	s					
secti any d	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II.					
year,	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					
year, ıs ch purp	, contributions ex lecked, enter her lose Do not com	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the colusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year.				
but it must ar	nswer "No" on Pa	is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), art IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

MARIGNOLI DI MONTECORONA FOUNDATION, INC. DUCCIO K. MARIGNOLI, PRESIDENT

46-0618691

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

	Contributors (see instructions) ose depinate copies on all in addition		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KAPIOLANI K. MARIGNOLI C/O SMOLENSKI & WOODDELL 1628 DAVIES PACIFIC CENTER 841 BISHOP STREET HONOLULU, HI 96813	\$18,042.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	KAPIOLANI K. MARIGNOLI C/O SMOLENSKI & WOODDELL 1628 DAVIES PACIFIC CENTER 841 BISHOP STREET HONOLULU, HI 96813	\$167,789.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

MARIGNOLI DI MONTECORONA FOUNDATION, INC.

46-0618691

DUCCIO K. MARIGNOLI, PRESIDENT

Part II	Noncash Property (see instructions). Use duplicate copies of Part II	ıf addıtıonal space ıs needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	COLLECTION OF 2,499 VOLUMES (BOOKS, PERIODICALS AND CATALOGUES)	_	
		\$\$\$	10/29/15
(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
			90. 990-EZ. or 990-PF) (2

Name of organi MARIGNO	zation LI DI MONTECORONA FOUN	DATION, INC.		Employer identification number				
	K. MARIGNOLI, PRESIDEN Exclusively religious, charitable, etc., contri the year from any one contributor. Complete co completing Part III, enter the total of exclusively religious,	TD butions to organizations described i lumns (a) through (e) and the follow charitable, etc., contributions of \$1,000 or 1	ing line entry. For organization	ne				
(a) No. from	Use duplicate copies of Part III if additional (b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
Part I	(b) i di pose oi giit	(0) 000 01 giil	(0) 2030	The state of the s				
-								
		(e) Transfer of gift						
-	Transferee's name, address, and	1 ZIP + 4	Relationship of tra	nsferor to transferee				
(a) No. from	(h) D	(a) Un - of -iff	(4) Door					
Part i	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
-								
	(e) Transfer of gift							
	Transferee's name, address, and	1 ZIP + 4	Relationship of tra	Relationship of transferor to transferee				
-								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
Part I								
_								
		(e) Transfer of gift						
		-						
_	Transferee's name, address, and	3 ZIP + 4	Relationship of tra	nsferor to transferee				
(a) No								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
_								
		(e) Transfer of gift						
	Transferee's name, address, and		Dalationahin of t-	neferor to transferor				
	mansieree's name, address, and	1 & IF T 4	neiationship of tra	nsferor to transferee				
-	<u>.</u>							

Form 990-PF C	ther Professional Fees		Statement 1		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
CURATOR FEES WEB DESIGN FEES	1,142. 3,886.	0.	0.	1,142. 3,886.	
To Form 990-PF, Pg 1, ln 16c	5,028.	0.	0.	5,028.	
Form 990-PF	Other Expenses		Statement 2		
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
BANK CHARGES	246.	0.	0.	0.	
SUPPORT OF "RUBENS TO GIAQUNTO"EXHIBITION	10,707.	0.	0.	10,707.	
To Form 990-PF, Pg 1, ln 23	10,953.	0.	0.	10,707.	
To Form 990-PF, Pg 1, ln 23	10,953. Footn			0.	

LOCATION BOOKS ARE IN CARE OF PART VII-A, LINE 14

SMOLENSKI & WOODDELL 1628 DAVIES PACIFIC CENTER 841 BISHOP STREET HONOLULU, HI 96813

OFFICER ADDRESSES PART VIII, LINE 1

DUCCIO KAUMUALII MARIGNOLI C/O SMOLENSKI & WOODDELL 1628 DAVIES PACIFIC CENTER 841 BISHOP STREET HONOLULU, HI 96813

KAPIOLANI K. MARIGNOLI C/O SMOLENSKI & WOODDELL 1628 DAVIES PACIFIC CENTER 841 BISHOP STREET HONOLULU, HI 96813

ROBERT J. SMOLENSKI C/O SMOLENSKI & WOODDELL 1628 DAVIES PACIFIC CENTER 841 BISHOP STREET HONOLULU, HI 96813 PART X, LINES 1-6

ALL CASH ON HAND IS NEEDED TO COVER CURRENT ADMINISTRATIVE EXPENSES AND DISBURSEMENTS DIRECTLY CONNECTED WITH THE FOUNDATION'S CHARITABLE AND EDUCATIONAL ACTIVITIES. THE AVERAGE CASH ON HAND DURING THE YEAR WAS \$3,754 AND CHARITABLE/EDUCATIONAL ACTIVITY EXPENSES WERE \$15,735.

Form 990-PF Other Increases in 1	Net Assets or Fu	nd Balances	Statement	4
Description			Amount	
INSURANCE REIMBURSEMENT RECEIVED I	6,227.			
Total to Form 990-PF, Part III, 1:	ine 3		6,2	27.
Form 990-PF	Other Assets		Statement	5
Description	Beginning of End of Year Yr Book Value Book Value		Fair Market Value	
LIBR. OF ARTIST MONOGRAPHS, BOOKS, EXHIBITION & ART CATALOGUES & PERIODICALS	2,280,176.	2,447,965.	2,447,9	65.
To Form 990-PF, Part II, line 15	2,280,176.	2,447,965.	2,447,90	65.