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Form **990-PF**

EXTENDED TO NOVEMBER 15, 2 Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

For	caler	idar year 2015 or tax year beginning		, and ending		
Na	me of	foundation			A Employer identification	on number
H	AW	AII EMERGENCY PHYSICIAN	S EDUCATION			
_F	<u>'UU</u>	NDATION			99-026955	1
Nur	nber a	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_P	.0	. BOX 1266	·		808-263-7	203
Cit	y or t	own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here
_K	AΙ	LUA, HI 96734				
G (Check	call that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	ns, check here 🕨 🔲
		Final return	Amended return			
		Address change	Name change		Foreign organizations n check here and attach in	neeting the 85% test, computation
Н (Check	type of organization: Section 501(c)(3) ex	cempt private foundation		E If private foundation st	tatus was terminated
	<u>] Se</u>	ection 4947(a)(1) nonexempt charitable trust X	Other taxable private founda	ation	under section 507(b)(
I Fa	air ma	arket value of all assets at end of year J Accounti	ng method: X Cash	Accrual	F If the foundation is in a	a 60-month termination
(fi	rom l		her (specify)		under section 507(b)(
▶	\$_	203,356. (Part I, colu	mn (d) must be on cash l	basis.)		
Pa	art l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		necessarily equal the amounts in column (a)	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	
	2	Check X if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	3,924.	3,924.		STATEMENT 1
	5a	Gross rents				
	b	Net rental income or (loss)				
a)	6a	Net gain or (loss) from sale of assets not on line 10				
Ž	b	Gross sales price for all assets on line 6a				
Revenue	7	Capital gain net income (from Part IV, line 2)		0.		
~	8	Net short-term capital gain				
	9	Income modifications			<u> </u>	
	10a		<u> </u>			
	b	Less Cost of goods sold RECEIVED				
		Gross profit or (loss)	0			
	11	Other income CT 1 1 2016	PI		-	
	12	Total. Add lines Juthrough 11	2 3,924.	3,924.		<u> </u>
	13	Compensation of officers areators truelage etc Other employee salanes and wages	0.	0.		0.
	14	Other employee salaribs and wages				
w	15	Pension plans, employee benefits				<u> </u>
ses	16a	Legal fees				
Expense	b	Accounting fees				
ve Expe	C	Other professional fees				
Ĭ.	17	Interest				<u></u>
Administrative	18	Taxes STMT 2	80.	0.		0.
, ≿ inist	19	Depreciation and depletion				<u> </u>
Admin	20	Occupancy				<u> </u>
Ž	21	Travel, conferences, and meetings				
and	22	Printing and publications				
7 0	23	Other expenses STMT 3	305.	300.		5.
スペンプ perating	24	Total operating and administrative				_
Operating and		expenses. Add lines 13 through 23	385.	300.	·	5.
Ď	25	Contributions, gifts, grants paid	4,000.			4,000.
	26	Total expenses and disbursements.				
	_	Add lines 24 and 25	4,385.	300.	·	4,005.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	-461.			
	1	Net investment income (if negative, enter -0-)		3,624.		
	c	Adjusted net income (if negative, enter -0-)			N/A	

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

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D.	art	Balance Sheets Attached schedules and amounts in the description Column should be for end-of-year amounts only	Beginning of year	End of	year
P8	in	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1				
	2	Savings and temporary cash investments	83,033.	82,558.	82,558.
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts ▶			
2	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
₹	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 4	52,895.	52,909.	120,798.
	c	Investments - corporate bonds			•
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment; basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ▶			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	135,928.	135,467.	203,356.
T	17	Accounts payable and accrued expenses			
	18	Grants payable			
ς,	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
api	21	Mortgages and other notes payable			
ر ت		Other liabilities (describe)			
		·			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
\neg		Foundations that follow SFAS 117, check here			
İ		and complete lines 24 through 26 and lines 30 and 31.			
Se	24	Unrestricted			
auc	25	Temporarily restricted			
Ba	26	Permanently restricted			
밀		Foundations that do not follow SFAS 117, check here			
ᆲ		and complete lines 27 through 31.			
ğ	27	Capital stock, trust principal, or current funds	0.	0.	
ž	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	135,928.	135,467.	
*	30	Total net assets or fund balances	135,928.	135,467.	
_			200/3200		
:	31	Total liabilities and net assets/fund balances	135,928.	135,467.	
Pa	ırt	Analysis of Changes in Net Assets or Fund Ba			
1 T	otal	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)		1	135,928.
•		amount from Part I, line 27a		2	-461.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	135,467.
		eases not included in line 2 (itemize)		5	0.
		not access or fund halances at end of year /line 4 minus line 5). Port II, on	lump (h) lump 20		125 467

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FOUNDATION

Form 990-PF (2015) FOUNDATION 99-0269551 Page 3 Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) 1a b NONE C d 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 е 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 (i) 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 C d 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 (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 X No 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. (a) Base period years Calendar year (or tax year beginning in) (d) Distribution ratio (b) (c) Net value of noncharitable-use assets Adjusted qualifying distributions (col. (b) divided by col. (c)) 4,505. 198,962 2014 .022643 5,505. 187,099. 2013 .029423 3,025. 186,043 .016260 2012 9,005 176,897 2011 .050905 175,685 11,005 2010 .062641 2 Total of line 1, column (d) .181872 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 .036374 3 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 204,985. 4 Multiply line 4 by line 3 7,456. 5 Enter 1% of net investment income (1% of Part I, line 27b) 36. 7,492. Add lines 5 and 6 7 4,005. 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.

	990-PF (2015)	FOUNDATION			<u>0269</u>			<u>age 4</u>
		se Tax Based on Investment Income (Section 4940(a), 4940(b), 4940	(e), or	4948	- see ii	nstru	ctio	<u>15)</u>
1a	Exempt operating	foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.)	Ì				
		letermination letter: (attach copy of letter if necessary-see instructions)	į					
b	Domestic foundati	ions that meet the section 4940(e) requirements in Part V, check here 🕒 🔲 and enter 1%	•	1				<u>72.</u>
	of Part I, line 27b			:				
C	All other domestic	foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	J					
2	Tax under section	511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2				<u>0.</u>
3	Add lines 1 and 2			3				<u>72.</u>
4	Subtitle A (income	e) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4				<u>0.</u>
5	Tax based on inve	estment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	ļ			<u>72.</u>
6	Credits/Payments:	1 1						
a	2015 estimated ta	x payments and 2014 overpayment credited to 2015	8	•				
þ	Exempt foreign or	ganizations - tax withheld at source 6b		_				
C	Tax paid with appl	lication for extension of time to file (Form 8868)	80	•				
d	Backup withholdir	ng erroneously withheld 6d		-				
-		payments. Add lines 6a through 6d		7				<u>88.</u>
8	Enter any penalty	for underpayment of estimated tax. Check here L If Form 2220 is attached		8				
9	Tax due. If the tot	tal of lines 5 and 8 is more than line 7, enter amount owed	>	9	ļ			
		ine 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	ļ			<u> 16.</u>
		of line 10 to be: Credited to 2016 estimated tax	inded ►	11				<u>0.</u>
		atements Regarding Activities						
1a		ar, did the foundation attempt to influence any national, state, or local legislation or did it participate o	r interven	ie in			Yes	
	any political camp	•				1a		<u>X</u>
b	•	than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the		•		1b		_X_
		"Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	s publist	ned or				
	•	he foundation in connection with the activities.						
		n file Form 1120-POL for this year?				1c		<u> X</u>
d		(if any) of tax on political expenditures (section 4955) imposed during the year:	_					
	• •	ation. ► \$ 0 . (2) On foundation managers. ► \$	0	•				
е		sement (if any) paid by the foundation during the year for political expenditure tax imposed on found	ation					
_	managers. > \$_							٠,,
2		n engaged in any activities that have not previously been reported to the IRS?				2	-	<u> X</u>
_		a detailed description of the activities.						
3		n made any changes, not previously reported to the IRS, in its governing instrument, articles of incompanies and appears of the articles of incompanies and appears of the articles of incompanies.	poration,	or				.
4.		similar instruments? If "Yes," attach a conformed copy of the changes				3		X
		n have unrelated business gross income of \$1,000 or more during the year? d a tax return on Form 990-T for this year?		N.	I/A	4a		
		lation, termination, dissolution, or substantial contraction during the year?		1/	1/ A	4b 5		X
9		the statement required by General Instruction T.				่อ		^
_	•	ents of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
U		the governing instrument, or						
		the governing instrument, or from that effectively amends the governing instrument so that no mandatory directions that conflict wi	th the sta	te law				
		erning instrument?	ur ino sia	ic iaw		6	X	
7		n have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), ar	nd Part X	1 /		7	X	
•	Dia the realisation	in have at loads to 5,000 in additional attains along the year. In 100, complete i art in, cor (c), ar	10 / 0/1/			_ <u>'</u>		_
R a	Enter the states to	o which the foundation reports or with which it is registered (see instructions)						
va	HI							
ь		'es" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designation)	 ate)					
٠		equired by General Instruction G? If "No," attach explanation	,			8b	X	1
9		claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)	(5) for ca	lendar		<u> </u>		<u> </u>
•		taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	, , ,			9		x
10	•	Decome substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addre	esses			10		X

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HAWAII EMERGENCY PHYSICIANS EDUCATION FOUNDATION 99-0269551 Page 5 Part VII-A Statements Regarding Activities (continued) No Yes 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) X 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) 12 X 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ▶ DONNA LUZON Telephone no. $\triangleright 808-263-7203$ Located at ► 407 ULUNIU STREET, 4TH FLOOR, KAILUA, HI ZIP+4 ▶96734 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year 15 N/A 16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank. 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 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): Yes X No (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) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (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 Yes X No for the benefit or use of a disqualified person)? (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.)

before the first day of the tax year beginning in 2015?

defined in section 4942(1)(3) or 4942(1)(5)):

before 2015?

during the year?

If "Yes," list the years

statement - see instructions.)

section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here

b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations

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

2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation

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

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

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

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

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

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2015)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

Yes X 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? (Use Schedule C. N/A 3b

N/A

Yes X No

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4a

1b

1c

2b

X

Х

HAWAII EMERGENCY PHYSICIANS EDUCATION Form 990-PF (2015) FOUNDATION 99-0269551 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) Carry 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? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No (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 section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A Yes 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 Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b X If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation, (c) Compensation (d) Contributions to employee benefit plans and deferred (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances compensation SEE STATEMENT 5 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 (e) Expense account, other allowances (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation NONE

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

Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)	ation Managers, Highly	U269551 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter	r "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 Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the duced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year or	lines 1 and 2.	Amount
1 <u>N/A</u>		
	· · · · ·	
2		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3	•	0.

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	m 990-PF (2015) FOUNDATION	99-0269551	Page 8
Р	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, 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 124	1,317.
b	Average of monthly cash balances	1b83	790.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d 208	3,107.
е	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	3 208	3,107.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 3	3,122.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 204	1,985.
6	Minimum investment return Enter 5% of line 5	6 10	249.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations ar	nd certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1 10	7,249.
2a	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	2c _	72.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 10),177.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5 10	7,177.
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 10),177.
P	art XII Qualifying Distributions (see instructions)		
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 4	4,005.
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:		
а	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 4	1,005.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	_0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6 4	4,005.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
	4940(e) reduction of tax in those years.		

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Part XIII Undistril	buted Income (see I	nstructions)			
<u>'</u>		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for line 7	2015 from Part XI,		<u> </u>		10,177
2 Undistributed income, if any,	as of the end of 2015				
a Enter amount for 2014 or	nly			0.	
b Total for prior years:					
			0.		
3 Excess distributions carry	yover, if any, to 2015:				
a From 2010					
b From 2011	4.				
c From 2012					
d From 2013					
e From 2014					
f Total of lines 3a through	e	4.			
4 Qualifying distributions for	or 2015 from				
Part XII, line 4: ▶ \$	4,005.				
a Applied to 2014, but not	more than line 2a			0.	
b Applied to undistributed i	ncome of prior				
years (Election required -	see instructions)		0.		
c Treated as distributions of	out of corpus	_			
(Election required - see in	structions)	0.			
d Applied to 2015 distributa	able amount				4,005
e Remaining amount distrit	outed out of corpus	0.			
5 Excess distributions carryove	r applied to 2015	4.			4.
(If an amount appears in colur must be shown in column (a))				
6 Enter the net total of eac indicated below:	h column as				
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 undistributed income for deficiency has been issue the section 4942(a) tax h assessed	which a notice of ed, or on which		0.		
d Subtract line 6c from line	6b. Taxable				
amount - see instructions	l		0.		
e Undistributed income for	2014. Subtract line				
4a from line 2a. Taxable a	!			0.	
f Undistributed income for	2015. Subtract				
lines 4d and 5 from line 1	. This amount must				
be distributed in 2016					6,168.
7 Amounts treated as distri	butions out of				
corpus to satisfy requirer	nents imposed by				
section 170(b)(1)(F) or 4	·				
may be required - see ins	tructions)	0.			
8 Excess distributions carry					
not applied on line 5 or lii		0.			
9 Excess distributions carr					
Subtract lines 7 and 8 fro	·	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					

Form 990-PF (2015) FOUNDAT				99-0	269551 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	r 2015, enter the date of	the ruling	.		
b Check box to indicate whether the found	lation is a private operati	ng foundation described	I in section	4942(J)(3) or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII.			-		<u> </u>
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly			 		
,					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			 		
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)	-				
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					1
listed					1
c "Support" alternative test - enter:					
(1) Total support other than gross				İ	
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)		 			
(3) Largest amount of support from				İ	
an exempt organization					
(4) Gross investment income		1	· (1) - (- · · · · · · · · · · · · · ·	1.05.000	
Part XV Supplementary Info	rmation (Comple	ete this part only	it the foundation	n nad \$5,000 or m	ore in assets
at any time during t	ne year-see inst	ructions.)			
1 Information Regarding Foundatio	•				
a List any managers of the foundation wh	o have contributed more	than 2% of the total cor	itributions received by th	e foundation before the cl	ose of any tax
year (but only if they have contributed n	iore than \$5,000). (See s	section 507(d)(2).)			
NONE	<u> </u>				
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporation	(or an equally large port	ion of the ownership of a	partnership or
other entity) of which the foundation has	s a 10% or greater intere	st.			
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here ▶ ☐ If the foundation o	nly makes contributions	to preselected charitable	organizations and does	not accept unsolicited rec	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone numl	ber or e-mail address of	the person to whom app	lications should be addre	essed:	
DONNA LUZON, 808-263					
P.O. BOX 1266, KAILU					
b The form in which applications should b			should include.		
COPY OF APPLICATION			modia moduc.		
c Any submission deadlines:	1200 DIRIBE				
NONE					
d Any restrictions or limitations on awards	s such as hy neographic	al areas, charitable fields	kinds of institutions or	other factores	
COPY OF DISCLOSURE S					TEMENT 7)
COLI OI DIDCHODOME D	THIRDHAL OF	GIGHT PIAN.	THE EVOCEDO	VE (SEE SIA)	r 15111111 /)

Form 990-PF (2015)

Form 990-PF (2015) FOUNDATION

UNDATION

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year ASIA PAVAO NONE N/A SCHOLARSHIP C/O UNIVERSITY OF PORTLAND, 5000 N. WILLAMETTE BLVD. PORTLAND, OR 97203 500. KRYSTAL ANTOLIN NONE N/A SCHOLARSHIP C/O WESTERN OREGON UNIVERSITY, 345 MONMOUTH AVE, N MONMOUTH, OR 97361 500. ELLA RAGUINDIN NONE N/A SCHOLARSHIP C/O GRAND CANYON UNIVERSITY, 3300 W. PHOENIX, AZ 85017 CAMELBACK ROAD 500. AMBER AFELIN NONE N/A SCHOLARSHIP C/O WESLEYAN UNIVERSITY, 45 WYLLYS AVENUE MIDDLETOWN, CT 06459 500. NINA CARDOZA NONE N/A SCHOLARSHIP C/O HAWAII COMMUNITY COLLEGE, 200 W. KAWILI STREET HILO HI 96720 500. SEE CONTINUATION SHEET(S) Total ▶ 3a 4.000. b Approved for future payment NONE Total

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Page 11

Enter gross amounts unless otherwise indicated.

FOUNDATION

99-0269551

(e)

Excluded by section 512, 513, or 514

Page 12

Part XVI-A Analysis of Income-Prod	lucing Activities		
Enter gross amounts unless otherwise indicated.	Unrelated business income	Excluded by section 512, 513, or 514	(0)

1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	·		<u> </u>		
b		_	<u> </u>		
c			<u> </u>		
d			<u> </u>		
e			ļ		
f					
g Fees and contracts from government agencies			ļ	_	
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	3,924.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property		<u> </u>			
b Not debt-financed property		<u> </u>			
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
C				1	
· · · · · · · · · · · · · · · · · · ·					
d		0.		3.924.	0.
e		0.		3,924.	0. 3.924.
d e		0.		3,924.	
d e 2 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)				13	0. 3,924.
d e			æmp	13	0. 3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities (1)	to the Accor	nplishment of Ex		13 t Purposes	3,924.
d e	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
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d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
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d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)	to the Accor	mplishment of Ex		13 t Purposes	3,924.

Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 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 X 1a(1) (2) Other assets Х 1a(2) b Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) X (3) Rental of facilities, equipment, or other assets X 1b(3) (4) Reimbursement arrangements X 1b(4) (5) Loans or loan guarantees X 1b(5) (6) Performance of services or membership or fundraising solicitations Х 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees Х 1c 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. (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this prect, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign return with the preparer shown below (see instr)? Here X Yes No Signature of officer or trustee Title Date Print/Type preparer's name Preparer's signature Date Check self- employed SEP 2 3 2018 **Paid** CHARLENE WONG P00008045 Preparer Firm's name ► IKEDA & WONG CPA INC Firm's EIN $\triangleright 99 - 0209171$ **Use Only** Firm's address ▶ 1001 BISHOP ST STE 1717

HONOLULU, HI 96813-3429

Phone no. (808)524-3660

99-0269551

Form 990-PF (2015)

FOUNDATION

FOUNDATION

Part XV Supplementary Information

99-0269551

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y				
, • Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Alliount
				-
GLOW WATER				
SASHA KAUWALE	NONE	N/A	SCHOLARSHIP	
C/O HAWAII COMMUNITY COLLEGE, 200 W. KAWILI STREET HILO, HI 96720				E00
RAWIDI SIREET HIDO, HI 90720				
JONTE SING	NONE	N/A	SCHOLARSHIP	,
C/O UNIVERSITY OF HAWAII, 2500 CAMPUS				
ROAD HONOLULU HI 96822				500,
KAMALEI HASHIMOTO	NONE	N/A	SCHOLARSHIP	
C/O COLORADO MESA UNIVERSITY, 1100		[""		
NORTH AVENUE GRAND JUNCTION, CO				
81501				500,
			 	
Total from agetinustics chacts				
Total from continuation sheets	 .			1,500.

FORM 990-PF	DIVIDEND	S AND INTER	EST.	FROM SECUR	ITIES S	TATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
BANK OF HAWAII MERRILL LYNCH MERRILL LYNCH	14 3,897		0.	14. 3,897.			
TAX-EXEMPT INCOME	13	•	0.	13.	13.		
TO PART I, LINE 4	3,924		0.	3,924.	3,924.		
FORM 990-PF		TAX	ES		S	TATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOS	
FEDERAL INCOME TAXE	s —	80.		0.			0.
TO FORM 990-PF, PG	1, LN 18 =	80.	_	0.			0.
FORM 990-PF		OTHER E	XPE	NSES	S	TATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS			(C) ADJUSTED NET INCOME		
INVESTMENT EXPENSES LICENSES AND FEES	- FEES	300. 5.		300.			0.
TO FORM 990-PF, PG	1, LN 23	305.		300.			5.

FORM 990-PF:	CORPORATE STOCK		STAT	EMENT 4
DESCRIPTION		BOOK VALUE		MARKET ALUE
BANK OF HAWAII	•	28	6.	500
CONSOLIDATED EDISON INC		13,05	-	29,564
HAWAIIAN ELECTRIC INDS INC		9,05		11,580
MERCK & CO		18,12		42,256
QWEST COMM		7,02		2,944
VERIZON COMM AT&T INC.		2,91		5,916
COMCAST CORP NEW CL A		2,17	4.	1,514 8,465
EXPRESS SCRIPTS HLDG CO			0.	17,919
FRONTIER COMMUNICATIONS			0.	140
TOTAL TO FORM 990-PF, PART II, L	INE 10B	52,90	9.	120,798.
	ST OF OFFICERS, D D FOUNDATION MANA	GERS	STAT	
		COMPEN-	EMPLOYEE BEN PLAN	
NAME AND ADDRESS CRAIG S. THOMAS, MD	TITLE AND AVRG HRS/WK PRESIDENT	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
NAME AND ADDRESS	TITLE AND AVRG HRS/WK PRESIDENT	COMPEN-	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
TRUSTEES AN NAME AND ADDRESS CRAIG S. THOMAS, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 GEORGE R. BRUNO, MD	TITLE AND AVRG HRS/WK PRESIDENT 0.08 VICE PRESIDENT	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
TRUSTEES AN NAME AND ADDRESS CRAIG S. THOMAS, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734	TITLE AND AVRG HRS/WK PRESIDENT 0.08 VICE PRESIDENT	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
TRUSTEES AN NAME AND ADDRESS CRAIG S. THOMAS, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 GEORGE R. BRUNO, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 VINCENT RITSON, MD	TITLE AND AVRG HRS/WK PRESIDENT 0.08 VICE PRESIDENT 0.04 VICE PRESIDENT	COMPEN- SATION 0.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENSE ACCOUNT 0
TRUSTEES AN NAME AND ADDRESS CRAIG S. THOMAS, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 GEORGE R. BRUNO, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734	TITLE AND AVRG HRS/WK PRESIDENT 0.08 VICE PRESIDENT 0.04 VICE PRESIDENT	COMPEN- SATION 0.	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT 0
TRUSTEES AN NAME AND ADDRESS CRAIG S. THOMAS, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 GEORGE R. BRUNO, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 VINCENT RITSON, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 GARY GOLDBERG, MD	TITLE AND AVRG HRS/WK PRESIDENT 0.08 VICE PRESIDENT 0.04 VICE PRESIDENT 0.02	COMPEN- SATION 0.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENSE ACCOUNT 0
TRUSTEES AN NAME AND ADDRESS CRAIG S. THOMAS, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 GEORGE R. BRUNO, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 VINCENT RITSON, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734	TITLE AND AVRG HRS/WK PRESIDENT 0.08 VICE PRESIDENT 0.04 VICE PRESIDENT 0.02	COMPEN- SATION 0.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENSE ACCOUNT 0
TRUSTEES AN NAME AND ADDRESS CRAIG S. THOMAS, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 GEORGE R. BRUNO, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 VINCENT RITSON, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734 GARY GOLDBERG, MD C/O HEPA EDUC FDN, P.O. BOX 1266	TITLE AND AVRG HRS/WK PRESIDENT 0.08 VICE PRESIDENT 0.04 VICE PRESIDENT 0.02 VICE PRESIDENT 0.02 TREASURER, SEC	COMPEN- SATION 0. 0.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENSE ACCOUNT 0

HAWAII EMERGENCY PHYSICIANS EDUCATION FO			99	99-0269551	
OAKLEY DAVIS, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734	VICE PRESIDENT 0.02	0.	0.	0.	
ANN MALIA HALEAKALA, MD C/O HEPA EDUC FDN, P.O. BOX 1266 KAILUA, HI 96734	VICE PRESIDENT 0.02	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VIII	0.	0.	0.	

HAWAII EMERGENCY PHYSICIANS EDUCATION FOUNDATION

Scholarship Application

: ems K					
	Last	first	M.I.		
Address:	No.	Sciesc	Apt. No.		
City		State	Zip Code		
Phone Number:					
EDUCATION	L				
High Scho	ol:		****		
			Grade Point Average:		
Extracuri	icular Activities	s:			
NORK HIST	ORY				
Employer:					
		Phone No			
Imployer:					
		Phone No	**		

FINANCIAL INFORMATION	
present Source of Financial Suppo	rt:
plans for Financial Support while	Attending College:
Annual Family Income:	
\$0 - \$10,000	\$30,000 ~ \$40,000
\$10,000 - \$20,000	\$40,000 ~ \$50,000
\$20,000 - \$30,000	Over \$30,000
PERSONAL STATEMENT	
Attach a personal statement address why you need this scholarship to a situation; and your personal and o	attend college; your family
REFERENCES	••
Attach a list of the names, address three teachers, counselors or employeements.	ses and phone numbers of oyers whom we may contact as
Signature	Date
	·
Scholarship Application Deadline:	
48971	

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HAWAII EMERGENCY PHYSICIANS EDUCATION FOUNDATION

Reg. §53.4945-4(d)(1) Disclosure Statement of Individual Grant-Making Procedures

Pursuant to IRC §4945(g), Reg. §53.4945-4(d)(1) and Rev. Rul. 86-77. 1986-1 C.B. 334, the following are the procedures of the Hawaii Emergency Physicians Education Foundation (the "Foundation") in the awarding of grants to individuals.

1. The Selection Process -- Candidates for Grants.

(a) Goal

The Foundation's goal is to provide scholarships and grants to individuals to encourage their post-high school education.

(b) Criteria.

- (i) The Foundation intends to make scholarship grants to students beginning their university, college or community college studies that school year, and who is or will be a graduate from a high school in a geographical area served by Hawaii Emergency Physicians Associated, Inc. (the "Catchment Area")
- (ii) Financial need will be a primary consideration in selecting the scholarship grant recipients. Other criteria that may considered includes, but is not limited to, the following: prior academic performance; performance of each student on tests designed to measure ability and aptitude for educational work; recommendations from instructors of the student and any others who have knowledge of the student's capabilities; additional biographical information regarding a student's academic, employment, community service and other relevant experiences; and conclusions which the selection committee may draw as to the student's motivation, character, ability, or potential. Criteria may also include the student's place of residence, past or future attendance at a particular school, past or proposed course of study or evidence of the student's artistic, scientific or other special talent. Each recipient must be seriously interested in pursuing higher education.

(c) How Solicited.

The Foundation or the selection committee chosen by the Foundation will request that high schools within the Catchment Area recommend students or former students meeting the above criteria.

(d) How Selected.

The Foundation's Board of Directors, or a selection committee chosen by or under the direction of the Foundation's Board of Directors, will select the students or former students to receive the scholarship grants. Every member of any selection committee charged with the evaluation of candidates for scholarship grants will adhere to the relevant policies of the Foundation as they may be adopted and amended from time to time, including, but not limited to, conflict of interest and confidentiality policies. Every member of any selection committee charged with the evaluation of candidates for scholarship grants will be obligated to disclose any personal knowledge of and relationship with any potential grantee under consideration and to refrain from participation in the award process in a circumstance where he or she would derive, directly or indirectly, a private benefit if any potential grantee or grantees are selected over others. No grant covered by this policy may be awarded to any member of the Foundation's Board of Directors, any substantial contributor to the Foundation. any employee of the Foundation. or any other disqualified person (as defined in IRC § 4946(a)) with respect to the Foundation.

2. Terms and Conditions under which the Foundation Makes Individual Grants.

The terms and conditions of each scholarship grant will be contained in a letter sent to each recipient. The recipient will be required to communicate his or her acceptance thereof by a letter to the Foundation or the selection committee. The terms and conditions may include, but are not limited to, the following: specific purpose of the grant, its duration, the total amount of the grant, requirements for narrative reports and the terms of any renewal of the grant.

3. Procedure for Exercising Supervision over Individual Grants.

With respect to individual scholarship grants, the Foundation will arrange to receive a transcript of the recipient's courses taken and grades received for each academic period. Such transcript will be verified by the educational institution attended and will be obtained at least once a year, and prior to renewing any recipient's grant for the following academic year. Upon completion of a recipient's study at an educational institution, a final transcript will also be obtained.

The Foundation may not consider it necessary to obtain the foregoing transcript if the following conditions are met: (a) the grant is a scholarship or fellowship subject to the provisions of section 117(a) of the Internal Revenue Code and is to be used for study at an educational institution which normally maintains a regular faculty and curriculum and normally has a regularly organized body of students in attendance at the place where its educational activities are carried on: (b) the Foundation pays the scholarship or fellowship to the educational institution, and (c) the educational institution agrees to use the grant funds to defray the recipient's expenses or pay funds to the recipient only if he is enrolled at the educational institution and his standing at such institution is consistent with the purposes and conditions of the grant.

4. <u>Procedures for Investigation Where Diversion of Grant Funds from their Specified Purposes is Indicated, and for Recovery of Diverted Grant Funds.</u>

Where reports to the Foundation or other information (including failure to submit reports after a reasonable time has elapsed from their due date) indicates that all or any part of individual scholarship grant funds are not being used for the purposes of such grant, the Foundation will initiate an investigation. While conducting the investigation, the Foundation will withhold further payments to the extent possible until it has determined that no part of the grant has been used for improper purposes and until any delinquent reports have been submitted.

If the Foundation determines that any part of a grant has been used for improper purposes, the Foundation will take all reasonable and appropriate steps to recover diverted grant funds or to insure the restoration of diverted funds and the dedication of any remaining grants funds being held for the recipient to new scholarships being funded by the Foundation. These steps will include legal action unless such action would in all probability not result in the satisfaction of execution of a judgment.

If the Foundation determines that any part of the grant has been used for improper purposes and the recipient has not previously diverted grant funds to any use not in furtherance of a purpose specified in the grant, the Foundation will withhold further payments on the particular grant until:

- (i) it has received the recipient's assurances that future diversions will not occur:
- (ii) any delinquent reports have been submitted; and
- (iii) it has required the recipient to take extraordinary precaution to prevent future diversions from occurring.

If the Foundation determines that any part of the grant has been used for improper purposes and the recipient has previously diverted Foundation grant funds, the Foundation will withhold further payment until all three conditions of the preceding sentence are met and the diverted funds are in fact recovered and restored.