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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 07-01-2015, and ending 06-30-2016

Name of foundation THE PUBLIC HEALTH FUND OF THE CHAMBER OF COMMERCE OF HAWAII		A Employer identification number 99-6010618
Number and street (or P O box number if mail is not delivered to street address) 1132 BISHOP STREET NO 2105	Room/suite	B Telephone number (see instructions) (808) 545-4300
City or town, state or province, country, and ZIP or foreign postal code HONOLULU, HI 96813		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply <input type="checkbox"/> Initial return <input checked="" type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 2,290,545	J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check ▶ <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	24,521	24,521		
	4 Dividends and interest from securities	53,135	53,135		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 _____	-6,423			
	b Gross sales price for all assets on line 6a 222,165				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	55	55		
	12 Total. Add lines 1 through 11	71,288	77,711		
	13 Compensation of officers, directors, trustees, etc	25,000	6,250		18,750
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).				
	b Accounting fees (attach schedule).	10,338	2,585		7,753
	c Other professional fees (attach schedule)	17,020	17,020		0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	3,551	0		0
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule).	3,491	0		3,491
	24 Total operating and administrative expenses. Add lines 13 through 23	59,400	25,855		29,994
	25 Contributions, gifts, grants paid	122,000			122,000
	26 Total expenses and disbursements. Add lines 24 and 25	181,400	25,855		151,994
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-110,112			
	b Net investment income (if negative, enter -0-)		51,856		
	c Adjusted net income (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	11,498	339	339
	2	Savings and temporary cash investments	97,895	85,855	85,855
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)	242,420	255,414	255,414
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)	420,875	376,667	376,667
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	1,627,214	1,569,754	1,569,754
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	15	Other assets (describe ▶ _____)	0	2,516	2,516
	16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	2,399,902	2,290,545	2,290,545
	17	Accounts payable and accrued expenses		17,536	
	18	Grants payable	71,765	84,965	
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities(add lines 17 through 22)	71,765	102,501	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted	2,328,137	2,188,044	
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances(see instructions)	2,328,137	2,188,044	
	31	Total liabilities and net assets/fund balances(see instructions) . .	2,399,902	2,290,545	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1 2,328,137
2	Enter amount from Part I, line 27a	2 -110,112
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3	4 2,218,025
5	Decreases not included in line 2 (itemize) ▶ _____	5 29,981
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6 2,188,044

Part IV

Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-6,423
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	

Part V

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	142,551	2,442,965	0 058352
2013			
2012			
2011			
2010			

2	Total of line 1, column (d).	2	0 058352
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 058352
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	2,218,492
5	Multiply line 4 by line 3.	5	129,453
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	519
7	Add lines 5 and 6.	7	129,972
8	Enter qualifying distributions from Part XII, line 4.	8	151,994

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	519
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3 Add lines 1 and 2.	3	519
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	519
6 Credits/Payments		
a 2015 estimated tax payments and 2014 overpayment credited to 2015	6a	3,040
b Exempt foreign organizations—tax withheld at source	6b	
c Tax paid with application for extension of time to file (Form 8868).	6c	
d Backup withholding erroneously withheld	6d	
7 Total credits and payments. Add lines 6a through 6d.	7	3,040
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	5
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	2,516
11 Enter the amount of line 10 to be Credited to 2015 estimated tax 2,516 Refunded	11	0

Part VII-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b		No
c Did the foundation file Form 1120-POL for this year?	1c		No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ _____ (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 \$ _____			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2		No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3		No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5		No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) HI _____			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	Yes	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9		No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10		No

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>COCHAWAII.ORG</u>	13	Yes	
14 The books are in care of ► <u>THE CHAMBER OF COMMERCE OF HAWAII</u> Telephone no ► <u>(808) 545-4300</u> Located at ► <u>1132 BISHOP STREET SUITE 2105 HONOLULU HI</u> ZIP+4 ► <u>96813</u>			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year ►	15		
16 At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes", enter the name of the foreign country ►	16	Yes	No

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year did the foundation (either directly or indirectly)				
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1b			
Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>				
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1c			No
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____				
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions).	2b			
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____				
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i>).	3b			
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a			No
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b			No

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

5a

During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b

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

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?

☐ Yes ☐ No

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

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b

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

6b

No

If "Yes" to 6b, file Form 8870

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

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

1

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

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

2

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

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total

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

0

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$ 50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ►		0

Part IX-A Summary of Direct Charitable Activities

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

Part IX-B Summary of Program-Related Investments (see instructions)

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

Part X

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	2,180,096
b	Average of monthly cash balances.	1b	72,180
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	2,252,276
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	2,252,276
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	33,784
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,218,492
6	Minimum investment return. Enter 5% of line 5.	6	110,925

Part XI

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

1	Minimum investment return from Part X, line 6.	1	110,925
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	519
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	519
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	110,406
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	110,406
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	110,406

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	151,994
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	151,994
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	519
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	151,475

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				110,406
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014. 23,430				
f Total of lines 3a through e.	23,430			
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 151,994				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				110,406
e Remaining amount distributed out of corpus	41,588			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	65,018			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions). . .	0			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	65,018			
10 Analysis of line 9				
a Excess from 2011. . . .				
b Excess from 2012. . . .				
c Excess from 2013. . . .				
d Excess from 2014. . . . 23,430				
e Excess from 2015. . . . 41,588				

<p>a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . ▶</p>		
--	--	--

a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2015	(b) 2014	(c) 2013	(d) 2012	

c	Qualifying distributions from Part XII, line 4 for each year listed				

e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c				
---	---	--	--	--	--

a	"Assets" alternative test—enter			
(1)	Value of all assets			

b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . .					

c "Support" alternative test—enter					
(1) Total support other than gross					

investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
--	--	--	--	--	--

<p>(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .</p>					
---	--	--	--	--	--

(3) Largest amount of support from an exempt organization					
---	--	--	--	--	--

(4) Gross investment income					
-----------------------------	--	--	--	--	--

Information Regarding Foundation Managers:

before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

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

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

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

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

PUBLIC HEALTH FUND

1132 BISHOP STREET SUITE 2105

HONOLULU, HI 96813

(808) 545-4300

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

COMPLETED APPLICATION FORM AND A DETAILED DESCRIPTION OF THE PROPOSED PROJECT

a. Any submission deadlines

c. Any submission deadlines

THE DEADLINES FOR SUBMITTING GRANT PROPOSALS EVERY YEAR ARE JUNE 15 AND DECEMBER 15

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

factors

GRANT SHOULD BE USED FOR PROMOTION AND MAINTENANCE OF THE HEALTH OF THE CITY AND COUNTY OF HONOLULU.

Form **000 DE** (2015)

Part XV

Supplementary Information(continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<div>a Paid during the year</div> <div>See Additional Data Table</div>				
<div>Total</div>			<div>▶ 3a</div>	122,000
<div>b Approved for future payment</div>				
<div>Total</div>			<div>▶ 3b</div>	0

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a _____					
b _____					
c _____					
d _____					
e _____					
f _____					
g Fees and contracts from government agencies					
2 Membership dues and assessments.					
3 Interest on savings and temporary cash investments			14	24,521	
4 Dividends and interest from securities.			14	53,135	
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.			18	55	
8 Gain or (loss) from sales of assets other than inventory			18	-6,423	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a _____					
b _____					
c _____					
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e).		0		71,288	0
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations)			13		71,288

[illegible]

Part XVII

a Transfers from the reporting foundation to a noncharitable exempt organization of

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

- (1) Sales of assets to a noncharitable exempt organization.
- (2) Purchases of assets from a noncharitable exempt organization.
- (3) Rental of facilities, equipment, or other assets.
- (4) Reimbursement arrangements.
- (5) Loans or loan guarantees.
- (6) Performance of services or membership or fundraising solicitations.

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

[illegible]

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

May the IRS discuss this return with the preparer shown below

(see instr) ? ☒ Yes ☐ No

Phone no (808) 735-8585

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
348 ISHARES MSCI EAFE ETF	P	2015-05-18	2016-05-20
5000 US TREASURY BONDS 4 25% 11/15/40	P	2010-11-24	2016-06-28
5000 US TREASURY BONDS 4 5% 8/15/39	P	2009-12-23	2016-06-28
5000 US TREASURY NONDS 7 25% 5/15/16	P	1999-05-12	2016-05-15
5000 US TREASURY BONDS 7 5% 11/15/16	P	2004-06-03	2016-06-02
5000 US TREASURY NOTES 5% 7/31/17	P	2012-08-24	2016-06-14
5000 US TREASURY NOTES 875% 11/30/16	P	2011-12-20	2015-12-16
5000 US TREASURY NOTES 2% 11/15/21	P	2011-11-08	2016-06-28
10000 FHLB 5% 12/21/15	P	2008-05-05	2015-12-21
10000 FHLMC MTN 1 25% 12/29/17	P	2014-12-23	2015-12-29

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
19,956		23,704	-3,748
7,039		5,674	1,365
7,263		5,074	2,189
5,000		5,650	-650
5,135		5,781	-646
4,991		4,951	40
5,005		5,005	0
5,247		5,100	147
10,000		10,499	-499
10,000		9,995	5

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-3,748
			1,365
			2,189
			-650
			-646
			40
			0
			147
			-499
			5

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
5000 AON CORP 3 125% 5/27/16	P	2012-05-01	2016-04-22
5000 ARIZONA PUB SERV 6 25% 8/1/16	P	2011-12-01	2016-06-28
5000 BARCLAYS BK PLC 6 75% 5/22/19	P	2013-01-30	2016-01-14
5000 BHP BILLITON FINANCE 5 25% 12/15/15	P	2006-04-06	2015-12-15
5000 BP CAPITAL PLC 3 2% 3/11/16	P	2011-08-04	2016-03-11
5000 BRANCH BANKING & TR 1% 4/3/17	P	2014-02-27	2016-04-07
5000 CELGENE CORP 2 45% 10/15/15	P	2012-03-05	2015-10-15
5000 CITICORP INC 6% 8/15/17	P	2012-08-15	2015-12-11
159 5 CONTL AIRLINES 9% 7/8/16	P	2009-10-28	2015-07-08
159 5 CONTL AIRLINES 9% 7/8/16	P	2009-10-28	2016-01-08

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
5,011		5,193	-182
5,021		5,884	-863
5,790		6,183	-393
5,000		4,856	144
5,000		5,304	-304
4,997		4,986	11
5,000		5,153	-153
5,393		5,665	-272
160		170	-10
160		170	-10

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-182
			-863
			-393
			144
			-304
			11
			-153
			-272
			-10
			-10

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)
5000 DEVON ENERGY CORP 6 3% 1/15/19	P	2011-07-14	2016-02-25
5000 GENENTECH INC (USA) 4 75% 7/15/15	P	2006-11-29	2015-07-15
5000 GILEAD SCIENCES 3 05% 12/1/16	P	2012-01-20	2015-09-10
5000 HESS CORP 8 125% 2/15/19	P	2012-02-13	2015-08-26
5000 INGRAM MICRO INC 5% 8/10/22	P	2014-02-11	2015-07-02
10000 JPMORGAN CHASE MTN 3 15% 7/5/16	P	2012-01-04	2016-04-06
5000 KINDER MORGAN ENERGY 9% 2/1/19	P	2011-03-08	2015-10-08
5000 MORGAN STANLEY MTN 5 75% 10/18/16	P	2012-10-10	2016-06-28
5000 MURPHY OIL CORP 2 5% 12/1/17	P	2013-02-22	2016-02-11
5000 RIO TINTO FINANCE 9% 8/1/19	P	2009-06-12	2015-10-08

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
4,725		5,945	-1,220
5,000		4,855	145
5,118		5,173	-55
5,851		5,985	-134
5,193		5,068	125
10,056		10,285	-229
5,788		6,331	-543
5,068		5,542	-474
4,075		5,027	-952
6,104		5,290	814

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-1,220
			145
			-55
			-134
			125
			-229
			-543
			-474
			-952
			814

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
5000 SYMANTEC CORP 4 2% 9/15/20	P	2014-04-22	2015-10-27
5000 TEVA PHARM FIN 2 4% 11/10/16	P	2011-11-07	2016-06-28
5000 TOYOTA MTR CRED MTN 2 8% 1/11/16	P	2011-01-05	2016-01-11
5000 VALERO ENERGY CORP 6 625% 6/15/37	P	2013-05-10	2015-07-17
5000 CONNECTICUT ST 5 295% 10/1/29	P	2012-01-03	2016-06-09
10000 LITTLE BLUE VLY MO 6 2% 9/1/30	P	2014-10-08	2016-02-11
5000 PORT VANCOUVER WA 3 614% 12/1/28	P	2015-01-06	2015-07-07

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
5,256		5,120	136
5,022		5,000	22
5,000		4,993	7
5,682		6,237	-555
6,133		5,673	460
12,100		12,067	33
4,826		5,000	-174

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			136
			22
			7
			-555
			460
			33
			-174

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CHAMBER OF COMMERCE OF HAWAII	TRUSTEE 0 50	25,000	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
GABE LEE	CHAIR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
MARK POLIVKA	CHAIR ELECT 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
DENNIS E FRANCIS	PAST CHAIR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
DONN M TAKAKI	VICE CHAIR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
TAYNE SEKIMURA	COMMITTEE CHAIR- BUDGET & FINANCE 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
ALICIA MOY	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
ANN BOTTICELLI	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
BERNIE COLEMAN	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
BRYAN ANADAYA	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
BRYAN LUKE	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
CAMERON W NEKOTA	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
CHRISTINE VAN BERGEIJK	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
DAVID OKABE	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
DAVID TUMILOWICZ	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
GEORGE M MORVIS	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
JAMES CHAN	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
JEFFREY S HARRIS	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
JENNIFER A HEE	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
KIPPEN DE ALBA CHU	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
KURT MATSUMOTO	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
KURT OSAKI	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
KU'UHAKU PARK	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
LANCE MIZUMOTO	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
MARTIN J WELCH	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
MICHAEL MAY	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
MICHELL E NISHIMOTO	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
NEAL YOKOTA	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
NEIL KUYPER	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
SAEDENE OTA	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
SCOTT BARBER	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
SIGNE GODFREY	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
STAFFORD KIGUCHI	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
TOBY TAMAYE	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
V VANCE ROLEY	DIRECTOR 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
KATU KIMURA	EX-OFFICIO 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
KRISTIN KAHALOA	EX-OFFICIO 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
MARK PERRIELLO	EX-OFFICIO 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
PAMELA TUMPAP	EX-OFFICIO 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				
WAYNE T ISHIHARA	EX-OFFICIO 0 25	0	0	0
1132 BISHOP STREET SUITE 2105 HONOLULU, HI 96813				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DEPARTMENT OF SOCIOLOGY UNIVERSITY OF HAWAII 2440 CAMPUS ROAD BOX 368 HONOLULU, HI 96822	NONE	115	UNDERSTANDING HEALTHY AGING AMONG CHINESE ELDERS IN HAWAII	17,660
KAHI MOHALA HOSPITAL 91-2301 OLD FORT WEAVER ROAD EWA BEACH, HI 96706	NONE	501(C)(3)	HEALING FORCES PARTIAL HOSPITALIZATION PROGRAM	17,100
KOKUA KALIHI VALLEY 2229 NORTH SCHOOL STREET HONOLULU, HI 96819	NONE	501(C)(3)	1ST ANNUAL KALIHI AHUPUAA BIKE RIDE	17,000
YMCA OF HONOLULU 1441 PALI HIGHWAY HONOLULU, HI 96813	NONE	501(C)(3)	ENHANCE FITNESS	9,240
GREGORY HOUSE 200 N VINEYARD BLVD A310 HONOLULU, HI 96817	NONE	501(C)(3)	SAVE THE FOODBASKET PROGRAM	13,000
Total ▶ 3a				122,000

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HAWAII FOOD BANK 2611 KILIAHUA STREET A HONOLULU, HI 96819	NONE	501(C)(3)	FOOD 4 KEIKI BACKPACK PROGRAM	15,000
HEALTHY MOTHER HEALTHY BABIES COALITION OF HAWAII 310 PAOAKALANI AVE 202A HONOLULU, HI 96815	NONE	501(C)(3)	PREGNANCY HEALTH INFORMATION MEETING COMMUNITY NEEDS	8,000
THE INSTITUTE FOR HUMAN SERVICES 546 KAAHI STREET HONOLULU, HI 96817	NONE	501(C)(3)	TUTU BERT'S HOUSE	25,000
Total ▶ 3a				122,000

TY 2015 Accounting Fees Schedule**Name:** THE PUBLIC HEALTH FUND

OF THE CHAMBER OF COMMERCE OF HAWAII

EIN: 99-6010618

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEE ACCOUNTING	10,338	2,585		7,753

TY 2015 Investments Corporate Bonds Schedule**Name:** THE PUBLIC HEALTH FUND

OF THE CHAMBER OF COMMERCE OF HAWAII

EIN: 99-6010618

Name of Bond	End of Year Book Value	End of Year Fair Market Value
DEBT SECURITIES	376,667	376,667

TY 2015 Investments Government Obligations Schedule

Name: THE PUBLIC HEALTH FUND
OF THE CHAMBER OF COMMERCE OF HAWAII

EIN: 99-6010618

US Government Securities - End of	
Year Book Value:	199,971

US Government Securities - End of	
Year Fair Market Value:	199,971

State & Local Government	
Securities - End of Year Book	
Value:	55,443

State & Local Government	
Securities - End of Year Fair	
Market Value:	55,443

TY 2015 Investments - Other Schedule**Name:** THE PUBLIC HEALTH FUND

OF THE CHAMBER OF COMMERCE OF HAWAII

EIN: 99-6010618

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MUTUAL FUNDS	FMV	1,569,754	1,569,754

TY 2015 Other Assets Schedule

Name: THE PUBLIC HEALTH FUND
OF THE CHAMBER OF COMMERCE OF HAWAII

EIN: 99-6010618

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PREPAID FEDERAL EXCISE TAX		2,516	2,516

TY 2015 Other Decreases Schedule

Name: THE PUBLIC HEALTH FUND
OF THE CHAMBER OF COMMERCE OF HAWAII

EIN: 99-6010618

Description	Amount
NET UNREALIZED LOSS ON INVESTMENTS	29,981

TY 2015 Other Expenses Schedule

Name: THE PUBLIC HEALTH FUND
OF THE CHAMBER OF COMMERCE OF HAWAII

EIN: 99-6010618

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	34	0		34
CONFERENCES, CONVENTIONS, AND MEETINGS	3,457	0		3,457

TY 2015 Other Income Schedule

Name: THE PUBLIC HEALTH FUND
OF THE CHAMBER OF COMMERCE OF HAWAII

EIN: 99-6010618

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
BANK OF HAWAII	55	55	55

TY 2015 Other Professional Fees Schedule**Name:** THE PUBLIC HEALTH FUND

OF THE CHAMBER OF COMMERCE OF HAWAII

EIN: 99-6010618

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEE INVESTMENT MANAGEMENT	17,020	17,020		0

TY 2015 Taxes Schedule

Name: THE PUBLIC HEALTH FUND
OF THE CHAMBER OF COMMERCE OF HAWAII

EIN: 99-6010618

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAX	3,546	0		0
PENALTY	5	0		0