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Form 990-PF

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public

OMB No 1545-0052 2016

		ent of the Treasury levenue Service  Information about Form	990-PF and its separate			-		en to Public Inspection	
Fo	r cal	endar year 2016 or tax year beginning	12/	28 , 2016,	and endin	ng		12/31, 20 16	
_		of foundation				A	Employer identifi		
	EUGI	ENE AND SOOK-KI MOON FOUNDAT	TON				81-	7006038	
		r and street (or P O box number if mail is not delivered			Room/suite	В	Telephone numbe		
	PO I	BOX 3708				}	9.0	8-525-5881	
_		town, state or province, country, and ZIP or foreign pos	tal code		L	_	00	0 323 3001	
	,	, , , , , , , , , , , , , , , , , , , ,				c	If exemption applical	tion is	
1	JONG	OLULU, HI 96811					pending, check here	· · · · · · · · · · · · · ·	
		ck all that apply X Initial return	Initial return	of a former n	ublic char	<del>-</del>		, [	
G	Cite	Final return	Amended ret	-	abile criair	"   0	1 Foreign organizati		
		Address change	Name change				2. Foreign organizati 85% test, check hi	ere and attach	
<u></u>	Cha	ck type of organization:   X   Section 501(	<del></del>				computation .		
7	$\neg$					E	If private foundation	status was terminated	
<u>.</u>		ection 4947(a)(1) nonexempt charitable trust	Other taxable pri				under section 507(b)	(1)(A), check here . >	
ı		1 —	unting method X Ca	asn Acc	rual	F		a 60-month termination	
			ther (specify)				under section 507(b)	(1)(B), check here	
			column (d) must be on ca	sn basis j	— —	,		(d) Disbursements	
نا	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)	(a) Revenue and	(b) Net inve	estment	(c)	Adjusted net	for charitable	
		may not necessarily equal the amounts in	expenses per books	incom	ne	• •	ıncome	purposes	
_		column (a) (see instructions) )						(cash basis only)	
ĺ	1	Contributions, gifts, grants, etc., received (attach schedule) .	1,000,000.						
	2	Check Line to the foundation is not required to attach Sch B							
	3	Interest on savings and temporary cash investments.		l					
	4	Dividends and interest from securities							
	5a	Gross rents	<del></del>						
1	b	Net rental income or (loss)					·		
Pa		Net gain or (loss) from sale of assets not on line 10							
cj.	b	Gross sales price for all assets on line 6a					DEA		
Revenue	7	Capital gain net income (from Part IV, line 2) .				<u></u>	DECEN		
2 R	8	Net short-term capital gain			<u> </u> i	ଅ 🖳	77	-U	
	9	Income modifications				P V	MAY 7 0 00	70/	
MAY	10a	Gross sales less returns and allowances				4	10 211	7   8	
⋛	b	Less Cost of goods sold .				$\overline{\Delta}$	75	161	
	C	Gross profit or (loss) (attach schedule)		Ĺ		<u> </u>	UEAT		
IJ	11	Other income (attach schedule)					THE L		
	12	Total Add lines 1 through 11	1,000,000.						
Ţ	13	Compensation of officers, directors, trustees, etc							
ဥ္တန္တ	14	Other employee salaries and wages $\dots$			NONE		NONE		
ĕ	15	Pension plans, employee benefits			NONE		NONE		
×	16a	Legal fees (attach schedule)							
es Es	b	Accounting fees (attach schedule)							
Ě	С	Other professional fees (attach schedule)		ļ					
tra	17	Interest							
is.	18	Taxes (attach schedule) (see instructions)							
Administrative Expense	19	Depreciation (attach schedule) and depletion .							
Þ	20	Occupancy		ļ					
/ p	21	Travel, conferences, and meetings			NONE		NONE		
an	21 22	Printing and publications		ļ	NONE		NONE		
bu	23 24 25	Other expenses (attach schedule)				_			
ati	24	Total operating and administrative expenses.							
ě		Add lines 13 through 23			NONE		NONE		
Ö	25	Contributions, gifts, grants paid							
	26	Total expenses and disbursements Add lines 24 and 25			NONE		NONE		
	27	Subtract line 26 from line 12							
	а	Excess of revenue over expenses and disbursements	1,000,000						
	b	Net investment income (if negative, enter -0-)							
	ء ا	Adjusted net income (if negative lenter -0-)		I	Ī				

JSA For Paperwork Reduction Act Notice, see instructions.

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Form **990-PF** (2016)

81-7006038

Ð	art II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year.	Beginning of year	End	of year
	311 6 11		amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearii	ng			
	2	Savings and temporary of	cash investments		1,000,000	1,000,000
	3	Accounts receivable 🕨				
		Less allowance for doub	otful accounts			
	4	Pledges receivable ▶				
		Less allowance for doub	otful accounts 🕨	<u> </u>		
	5	Grants receivable				
	6	Receivables due from	officers, directors, trustees, and other			
		disqualified persons (atta	ach schedule) (see instructions)			
	7	Other notes and loans re	eceivable (attach schedule)	Manyani ya an panya		
			otful accounts  NONE			
S			e			
Assets			eferred charges			
As			government obligations (attach schedule).			
			stock (attach schedule)			
		•	bonds (attach schedule)		29 1000	
	11	Investments - land, building				
		and equipment basis Less accumulated deprecia	ition <b>b</b>			
		(attach schedule)			<del> </del>	<del></del>
			loans			<del></del>
		Land, buildings, and	i			
		equipment basis Less accumulated deprecia	tron L			
		(attach schedule)				
			·)			
			completed by all filers - see the		1 000 000	1 000 000
$\dashv$			age 1, item I)		1,000,000	1,000,000
			ccrued expenses			-
اي						
Liabilities		Deferred revenue				-
틝	20		rs, trustees, and other disqualified persons		<u> </u>	
<u>.</u>	21		tes payable (attach schedule)			
-	22	Other liabilities (describe	• ▶ ) }			
$\dashv$	23	<del></del>	s 17 through 22)		NONE	
			ow SFAS 117, check here . ▶			
ĕ		•	4 through 26 and lines 30 and 31.			1.44
Balances	24					<b>.</b>
찖	25	Temporarily restricted				-
힏	26	Permanently restricted .				
.5	27 28 29 30 31		not follow SFAS 117, ►X			in the
ř		check here and comp	plete lines 27 through 31.			40.4
S	27	Capital stock, trust princ	ipal, or current funds		1,000,000	
šet	28	Paid-in or capital surplus, or	land, bldg , and equipment fund			
4SS	29	Retained earnings, accumul	ated income, endowment, or other funds 🔒 👢	<del></del> .		
¥	30	Total net assets or fund	d balances (see instructions)		1,000,000	
ž	31	Total liabilities and				
					1,000,000	
_			nges in Net Assets or Fund Bala			
1			palances at beginning of year - Part			
	end-	of-year figure reported	d on prior year's return)		1	
			line 27a		2	1,000,000.
4	4 Add lines 1, 2, and 3					1,000,000.
5	Dec	reases not included in	line 2 (ıtemize) ►		5	
6	Tota	I net assets or fund ba	alances at end of year (line 4 minus li	ne 5) - Part II, column (	b), line 30 6	1,000,000.
						Form <b>990-PF</b> (2016)

Par	t IV Capital Gains	and Losses for Tax on Inv	estment Income				
	• • •	d describe the kind(s) of property sold rick warehouse, or common stock, 200	. 3.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
<u>1 a</u>							
<u>b</u>				ļ			
<u>C</u>							
<u>d</u>	<del></del>						
<u>e</u>			(a) Cost or other basis	<del> </del>		<del></del>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu		
<u>a</u> b	_	<u> </u>		ļ	<del></del>	<del></del>	
c							
<u>d</u>	<del></del>		1.5.4.4				
е							
	Complete only for assets sh	lowing gain in column (h) and owned	by the foundation on 12/31/69	(1)	Gains (Col. (h) ga	in minus	
(i	) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co		
а					***************************************	<del></del>	
b							
c							
d							
е							
3	If gain, also enter in P	or (net capital loss)  If (lain or (loss) as defined in sections (art I, line 8, column (c) (see insections)	structions). If (loss), enter -0- in $\}$	2			
				3	<del> </del>		
Par		···	luced Tax on Net Investment In e section 4940(a) tax on net investment		N/	<u>A</u>	
Was			butable amount of any year in the b Do not complete this part	ase perio	d?	Yes No	
1			ar; see the instructions before makir	ng any en	tries	<del></del>	
	(a)	(b)	(c)		(d)		
Cale	Base period years ndar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets	,	Distribution rat (col (b) divided by	no col (c))	
	2015						
	2014						
	2013					-	
	2012						
	2011						
						·	
2	Total of line 1, column (	d)		2			
3	Average distribution rati	o for the 5-year base period - divid	de the total on line 2 by 5, or by the				
	number of years the fou	ndation has been in existence if le	ess than 5 years	3			
4	Enter the net value of no	oncharitable-use assets for 2016 f	rom Part X, line 5	4			
5	Multiply line 4 by line 3			5			
6	Enter 1% of net investm	ent income (1% of Part I, line 27b)		6			
7	Add lines 5 and 6			7			
8	Enter qualifying distributions from Part XII, line 4						

Par		struc	tions	<u> </u>
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	<u> IONE</u>
	here A and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2		N	ONE
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			ONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			ONE
6	Credits/Payments			
а	2016 estimated tax payments and 2015 overpayment credited to 2016   6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868)6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		N	ONE
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		N	ONE
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ► NONE Refunded ► 11			
	t 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		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		X
	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			٠,
_	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation ▶ \$			
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?	2		<u> X</u>
	If "Yes," attach a detailed description of the activities	l		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		v
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
_	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	6	Х	
7	conflict with the state law remain in the governing instrument?	7	X	
7 8a	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV  Enter the states to which the foundation reports or with which it is registered (see instructions).			
8a	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 <sup>2</sup> If "No," attach explanation	8b	Х	
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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		,	
	names and addresses	10		X
	To.	<u>99</u>	0-PF	2016)

Par	t 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	ie .	Yes	No			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		ŀ	X			
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualifie						
	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	1	X				
	Website address ► N/A						
14	TIDOM HALATIAN DANK	25-81.	19				
	Located at ▶ P.O. BOX 3708, HONOLULU, HI ZIP+4 ▶ 9681						
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		•	T			
	and enter the amount of tax-exempt interest received or accrued during the year	1	•				
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other autho		Yes	No			
	over a bank, securities, or other financial account in a foreign country?	·	1	X			
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name						
	the foreign country						
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u></u>			
	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? Yes X No						
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a						
	disqualified person?	,	į				
	(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 for		į į				
	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 ) Yes X No						
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation	s					
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	. 1b					
	Organizations relying on a current notice regarding disaster assistance check here						
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, the	ıt 🔚					
	were not corrected before the first day of the tax year beginning in 2016?	. 1c		X			
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	е					
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))						
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and						
	6e, Part XIII) for tax year(s) beginning before 2016?						
	If "Yes," list the years		ì				
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 )	. <u>2b</u>		<u>X</u>			
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here						
	<b>&gt;</b>						
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise						
	at any time during the year?	li e					
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation of	1					
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the	e					
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	H					
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the						
	foundation had excess business holdings in 2016 )		<u> </u>				
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes			<u>X</u>			
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it						
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016	7 4b	L	X_			

Form 990-PF (2016)

Sa During the year did the foundation pay or neur any amount to (1) Carry on propagands, or otherwise attempt to influence displation (section 4945(e))?	Par	t VII-B	Statements Regarding Activities for	or Which Form 4	1720 May Be Req	uired (continued)			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?	5a	During t	he year did the foundation pay or incur any amo	unt to					
deccity or indirectly, any votor registration drive?		(1) Carr	y on propaganda, or otherwise attempt to influer	nce legislation (sectio	n 4945(e))?	. Yes X No	,	Į	
(4) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc. organization described in section 4945(0)(4)(4)? (see instructions),		(2) Influ	ence the outcome of any specific public ele	ction (see section 4	4955); or to carry or	n,			
(4) Provide a grant to an individual for travel, study, or other similar purposes?  (4) Provide a grant to an organization other than a charitable, etc. organization described in section 4945(0)(4)(4)? (see instructions),		direc	ctly or indirectly, any voter registration drive?			Yes X No	,		
(4) Provide a grant to an organization other than a charitable, etc. organization described in section 4945(d)4(A)/C see instructions).  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelity to children or animals?							,		
section 49.65(d)4()A)? (See instructions),  (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  b If any answer is "Yes" to 53(1)4(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance (see instructions)?  If the answer is "Yes" to question 53 4945.5(d) sees the foundation disaster assistance check here.  Organizations relying to question 5449.5(d) does the foundation disaster assistance check here.  Organizations relying to question 5449.5(d) for the grant?  Organizations relying to question 5449.5(d) for indirectly, to pay premiums, directly or indirectly, to pay premiums, on a personal benefit contract?  Organizations relying the year, pay premiums, directly or indirectly, on a personal benefit contract?  Organizations relying the year, pay premiums, directly or indirectly, on a personal benefit contract?  Organizations relying the year, pay premiums, directly or indirectly, to pay premiums, directly or indirectly, to pay premiums, directly or indirectly, or a personal benefit contract?  Organizations relying the year, pay premiums, directly or indirectly, to pay premiums, directly organizations relying the year, pay premiums, directly organizations, the pay premiums of the transaction organization organi			•	• •					
(S) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?			•				,		
purposes, or for the prevention of cruelity to children or animals?						- —			
b if any answer is "Yes" to Sal1/(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)?  C If the answer is 'Yes' to question 53/41, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?			• • •	•	•				
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?  Organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organizations relying on a current notice regarding disaster assistance check here  organization organization for the tax  provided the foundation, during the year, pay premiums, directly or indirectly, to pay premiums  on a personal benefit contract?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes X No  by If "Yes" to 6b, file Form 8870  Ty Yes X No  by If "Yes" to 6b, file Form 8870  Ty Yes X No  by If "Yes" to 6b, file Form 8870  Ty Yes X No  by If "Yes" to 6b, file Form 8870  Ty Yes X No  by If "Yes X No  by If "Yes X No  check the foundation, during the year, year, year, year, pay premiums, directly or indirectly, to pay premiums  on a personal benefit contract?  Yes X No  by If Yes X No  check the foundation, during the year, yea	b								
Cryanizations 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?	D. 1								
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?		-		-				-	
because it maintained expenditure responsibility for the grant?		-					<u> </u>		
Second part	C		-		· ·				
on a personal benefit contract?  Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  No Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Ta At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  Ta At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  Ta At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  Ta At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  Ta At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  Ta At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  Ta At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  Ta At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  Ta At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction?  Ta Yes X No  Ta X  No  Ta Yes X			, , , , , , , , , , , , , , , , , , , ,	-		res No	<b>'</b>		
on a personal benefit contract?  b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  7b Text VIII Information receive any proceeds or have any net income attributable to the transactors.  7b 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  (b) Title, and average horized to position  7c 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  (b) Title, and average horized to position  7c Information About Officers, directors, trustees, foundation managers and their compensation (see instructions).  7c Information About Officers, directors, trustees, foundation managers and their compensation (see instructions).  7d Information About Officers, directors, trustees, foundation managers and their compensation (see instructions).  8c Information About Officers, directors, trustees, foundation managers and their compensation (see instructions).  8c Information About Officers, directors, trustees, foundation managers, Highly Paid Employees, and deferred compensation (see instructions).  9c Information About Officers, directors, trustees, foundation managers and their recompensation (see instructions).  9c Information About Officers, directors, trustees, foundation managers and their recompensation (see instructions).  9c Information About Officers, directors, trustees, foundation managers and their recompensation (see instructions).  9c Information About Officers, directors, trustees, foundation managers and their recompensation (see instructions).  9c Information About Officers, directors, tru			, , ,						
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	ьа			•					
## 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?									7,7
At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	D			tly or indirectly, on a	personal benefit contra	act/	6b	-	X
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their compensation (a) Name and address    Compensation	_		•						
Part VIII			- · · · · · · · · · · · · · · · · · · ·			. — . — .			
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Title, and average devoted to position  FIRST HAWAI IAN BANK  P 0 BOX 3708, HONOLULU, HI 96811  7 RUSTE  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  NONE									
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).  (a) Name and address  (b) Trile, and average hours per week devoted to position  TRUSTE  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  NONE  Total number of other employees paid over \$50,000 ▶ NONE	Par		and Contractors		_	•	Jioyees,		
Compensation   Comp	1	List all c	fficers, directors, trustees, foundation ma						
FIRST HAWAITAN BANK P O BOX 3708, HONOLULU, HI 96811  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  (b) Title, and average hours per week devoted to position  NONE			(a) Name and address	hours per week	(If not paid,	employee benefit plans			
P 0 BOX 3708, HONOLULU, HI 96811 0 -0000-  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 (b) Title, and average hours per week devoted to position  NONE NONE NONE NONE  Total number of other employees paid over \$50,000 · NONE		1 113113 773	II DANY		enter -0-)	and deferred compensation	Other an		
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 (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensation (c) Compensation (c) Expense account, other allowances of the plans and deferred compensation (c) NONE (c) Compensation (c) Compensat				1	•				_
"NONE."  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  NONE  NONE  NONE  NONE  Total number of other employees paid over \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  NONE  NONE  NONE  NONE  NONE  NONE  NONE	<u>P 0</u>	BOX 3/08	, HONOLULU, HI 968II	U	-U-	-0-			-0-
**NONE.**  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  NONE  NONE  NONE  NONE  Total number of other employees paid over \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  NONE  NONE  NONE  NONE  NONE  NONE  NONE			<del>-</del>						
**NONE.**  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  NONE  NONE  NONE  NONE  Total number of other employees paid over \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  NONE  NONE  NONE  NONE  NONE  NONE  NONE									
**NONE.**  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  NONE  NONE  NONE  NONE  Total number of other employees paid over \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  NONE  NONE  NONE  NONE  NONE  NONE  NONE	-								
**NONE.**  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  NONE  NONE  NONE  NONE  Total number of other employees paid over \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  NONE  NONE  NONE  NONE  NONE  NONE  NONE									
**NONE.**  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  NONE  NONE  NONE  NONE  Total number of other employees paid over \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  NONE  NONE  NONE  NONE  NONE  NONE  NONE									
**NONE.**  (a) Name and address of each employee paid more than \$50,000  (b) Title, and average hours per week devoted to position  NONE  NONE  NONE  NONE  NONE  Total number of other employees paid over \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  NONE  NONE  NONE  NONE  NONE  NONE  NONE		Compon	action of five highest poid ampleyees	lother than the	a included on lin	. 1 instructio	If		
(a) Name and address of each employee paid more than \$50,000  NONE  NONE  NONE  NONE  NONE  NONE  Total number of other employees paid over \$50,000  (b) Title, and average hours per week devoted to position  (c) Compensation  (d) Contributions to employee benefit plans and deferred compensation  NONE  NONE  NONE  NONE  NONE  NONE  NONE  NONE  NONE	2			totilei tilali tilos	se included on line	e i - see ilistructio	)115 <i>]</i> . II III	one, (	enter
NONE							(a) Eurana		
NONE NONE NONE  Total number of other employees paid over \$50,000	(a)	Name and	address of each employee paid more than \$50,000		(c) Compensation	plans and deferred			
Total number of other employees paid over \$50,000 NONE				dovoted to position		compensation			
Total number of other employees paid over \$50,000 NONE	NIONI				NONE	NONE	3.7		
	NON	<u> </u>		<u> </u>	NONE	NONE	N	ONE	
			41-7-40-7						
				ļ					
	Total	number	of other employees paid over \$50,000		· · · · · · · · · · · · · · · · · · ·	▶ │			

3 Five highest-paid independent contractors for professional services (see instruc	tions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ONE		NONE
		NONI
<del></del>	W. 2000	
otal number of others receiving over \$50,000 for professional services	<u></u>	NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year include relevant statistical in organizations and other beneficiaries served, conferences convened, research papers produced, etc	nformation such as the number of	Expenses
1 NONE		
2		
<u></u>		
3		
<u> </u>		_
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	d 2	Amount
1 NONE		
2		
All other program-related investments. See instructions	<u> </u>	
3 NONE		
otal. Add lines 1 through 3		

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	gn foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		<del></del>
	purposes:		
а	Average monthly fair market value of securities	1a	NONE
b	Average of monthly cash balances	1b	83,333.
С	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	83,333.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<del> </del>
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d	3	83,333.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	1,250.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	82,083.
6	Minimum investment return. Enter 5% of line 5	6	45.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part )	dations	
1	Minimum investment return from Part X, line 6	1	45.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b		
c	Add lines 2a and 2b	2c	NONE
3	Distributable amount before adjustments Subtract line 2c from line 1	3	45.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	45.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	45.
	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1 <sub>a</sub>	
a		1b	
b	Program-related investments - total from Part IX-B	18	<del></del>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		MONT
_	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
Ь	Cash distribution test (attach the required schedule) , , ,	3b	NONE
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	NONE
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	NONE
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years.	lculating wh	ether the foundation

Form 990-PF (2016)

Par	t XIII Undistributed Income (see instru	uctions)			
	Dutubutable agreement for 2010, from Dark VI	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	Distributable amount for 2016 from Part XI,				
	line 7				45.
	Undistributed income, if any, as of the end of 2016			NONE	
	Enter amount for 2015 only		NONE	NONE	
	Total for prior years 20,20,20		NONE		
	Excess distributions carryover, if any, to 2016				
a	From 2011 NONE				
b	From 2012 NONE				
c	From 2013 NONE				
đ	From 2014	İ			
e	From 2015 NONE	,,,,,,,,			
f	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2016 from Part XII,			Í	
	line 4 ▶ \$ <u>NONE</u>				
	Applied to 2015, but not more than line 2a			NONE	·····
	Applied to undistributed income of prior years		NONE		
	(Election required - see instructions)		NONE		
C	Treated as distributions out of corpus (Election	NONE			
_	required - see instructions)	IVOIVE	<del></del>		NONE
	Applied to 2016 distributable amount	NONE			NONE
	Remaining amount distributed out of corpus	NONE			NONE
5	Excess distributions carryover applied to 2016. [ (If an amount appears in column (d), the same)	NONE			NONE
	amount must be shown in column (a) )				
6	Enter the net total of each column as				
	indicated below:	NONE			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	NONE			
b	Prior years' undistributed income Subtract	Į.	NONE		
_	line 4b from line 2b				
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)		NONE		
	tax has been previously assessed		INOINI		<del></del>
d	Subtract line 6c from line 6b Taxable		NONE		
	amount - see instructions		INOIVE		<del></del>
·	4a from line 2a Taxable amount - see			NONE	
	instructions	<del></del>		NOINE	
f	Undistributed income for 2016 Subtract lines				
	4d and 5 from line 1 This amount must be				45.
	distributed in 2017	<u> </u>		-	40.
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	NONE			
_	required - see instructions)	NOME	<u>'                                    </u>		
8	Excess distributions carryover from 2011 not	NONE			
_	applied on line 5 or line 7 (see instructions)	INOINE			
9	Excess distributions carryover to 2017.	NONE			
	Subtract lines 7 and 8 from line 6a	IVOIVE	<u> </u>	<del></del>	
	Analysis of line 9 Excess from 2012 NONE				
	770777	· ·			
	27027			{	
e	Excess from 2016 NONE			<del></del>	000 DE

Par	TXIV Private Up	erating Foundations	(see instructions a	na Part VII-A, questi	on 9)	NOT APPLICABL
1 a	If the foundation has	•		•	<b>*</b>	· · · · · · · · · · · · · · · · · · ·
h	foundation, and the ruling Check box to indicate v		-		<u> </u>	21//21 05 4042///51
b	Check box to indicate v	Tax year	is a private operating	Prior 3 years	i section   494	2(j)(3) or   4942(j)(5)
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	I or the minimum investment return from Part X for each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part					
d	XII, line 4 for each year listed .  Amounts included in line 2c not				<u> </u>	
u	used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line					
3	2d from line 2c					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-					
	enter 2/3 of minimum invest- ment return shown in Part X,					
	line 6 for each year listed					
C	"Support" alternative test - enter (1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),					
	or royalties) (2) Support from general					
	public and 5 or more exempt organizations as provided in section 4942					
	(j){3)(B)(iii)				<del> </del>	
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income.		 	and if the founds	Ains had 65 000	
I del		uring the year - see		only if the founda	tion had \$5,000	or more in assets at
1	Information Regarding	•				
а	before the close of any					eived by the foundation )
	N/A	the foundation who	own 10% or more o	f the stock of a corr	poration for an agus	ally large portion of the
Ü	ownership of a partner				-	any large portion of the
_	N/A Information Regarding					
2						
	Check here ► X if t unsolicited requests for other conditions, comp	or funds. If the found	ation makes gıfts, gr	to preselected char ants, etc (see instruc	itable organizations itions) to individuals	and does not accept or organizations under
a	The name, address, an			e person to whom app	olications should be	addressed
b	The form in which app	lications should be su	bmitted and informati	on and materials they	should include	
С	Any submission deadli	nes				
d	Any restrictions or lifectors	mitations on awards	, such as by geogr	aphical areas, charita	able fields, kinds o	of institutions, or other

Part XV Supplementary Information (continued)

Recipient Name and address (home or business)	g the Year or Appro	oved for F	uture Payment	
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year		1	:	
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Total			▶ 3a	-
<b>b</b> Approved for future payment				
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				-
	}			
Total	· · · · · · · · · · · · · · · · · · ·	<u></u> .	▶ 3b	

Form 990-PF (2016)	<del></del>	<del></del>		·	Page 12
Part XVI-A Analysis of Income-Produ			T		
Enter gross amounts unless otherwise indicated	Unrela (a)	ted business income	Excluded by	y section 512, 513, or 514 (d)	(e) Related or exempt
1 Program service revenue	Business code	Amount	Exclusion code		function income (See instructions)
a					
С					
d					
e					
g Fees and contracts from government agencies			<del></del>		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments. 4 Dividends and interest from securities	ļ				
5 Net rental income or (loss) from real estate					
a Debt-financed property		<del> </del>	<del></del>		
b Not debt-financed property · · · · · · · · · · · · · · · · · · ·			+		
6 Net rental income or (loss) from personal property- 7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events · · ·					
10 Gross profit or (loss) from sales of inventory	<u> </u>			<del></del>	
b	<del></del>				
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calc					
Part XVI-B Relationship of Activities	s to the A	ccomplishment of	Exempt Pur	poses	
Explain below how each activity accomplishment of the foundati					
				<del></del>	<del></del>
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		NOT APPLICAE	OT F		······································
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JSA					Form <b>990-PF</b> (2016)

Part XVII

		Exempt O	rganizat	ions								_	
		-			ngage in any o ection 501(c)(3							Yes	No
		tions?	·				•	·	Ŭ	•		1 1	
	-		orting four	dation to a	noncharitable	exempt organ	zation of						
			•								1a(1)		Х
											1a(2)		X
-	•	ansactions.											
(1	) Sale	s of assets to a	noncharit	able exemp	t organization						16(1)	1 1	X
					e exempt organ						1b(2)		X
	•				ssets						1b(3)		X
											1b(4)		X
											1b(5)		X
•	•	•			or fundraising						1b(6)		X
					, other assets,								X
					," complete th							fair m	
					es given by th								
					ment, show in								
(a) Line	$\overline{}$	(b) Amount involv	<del>, -</del>		ncharitable exempt			cription of transfe					
(a) Line	<del>"</del>	(b) Amount myon	,	c) Italiic of ilo	icharitable exemp	torgameation	(4,500	oripitori di dansi	313, (1011300010	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	nig dira	ngome	
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2a ls	the f	oundation dire	ectly or inc	directly affil	liated with, or	related to, on	e or moi	re tax-exempt	t organizat	tions	_		_
d	escribe	ed in section 5	01(c) of th	e Code (oth	ner than section	n 501(c)(3)) or	ın sectioi	n 527 <sup>7</sup>		L	Y <sub>f</sub>	es <u>X</u>	) No
b if	"Yes,"	complete the	following s	schedule									
		(a) Name of orga	inization		(b) Type	e of organization			(c) Descriptio	n of relations	hip		
													_
				l									
					ed this return, includ (payer) is based on all				to the best of	my knowledg	e and b	elief it	ıs true,
Sign	Correct	, and complete Decia	<i>O</i>	A	.payer) is based off an	imornation of which	preparer rias	any knowledge	Г	M 100		- 45 -	
_	<b>P</b> 0	hnneli	t. Na	Kamu	05/13 م	3/2017	Vice	Presider	nt		discus eparer		below
Here	Sign	ature of officer or t	rustee		Date		Title			(see instruction	ıs)? X	Yes	No
	VI	CE PRESID	ENT						L				
D-11		Print/Type prepar			Preparer's sign	nature		Date	Chec	k ıf f	TIN		
Paid		DEBRA M (	CLEARY		Deera.	m Clea	~	05/13/2	2017 self-e	employed	P014	9728	39
Prepa	rer		► ERNST	& YOUNG			7		Firm's EIN		6565		
Use (	Only i			LARENDO									
	•		BOSTO			02	116		Phone no	617-5	87 <b>-</b> 9	025	

## Schedule B

(Form 990, 990-EZ, or 990-PF) Schedule of Contributors

.....

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

Employer identification number

EUGENE AND SOOK-KI MO	81-7006038					
Organization type (check one):						
Filers of:	Filers of: Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private four	ndation				
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion				
	501(c)(3) taxable private foundation					
Check if your organization is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions.						
General Rule						
X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions						
Special Rules						
For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization								
EUGENE	AND	SOOK-KI	MOON	FOUNDATION				

Employer identification number 81-7006038

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional space is needed							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
1_	EUGENE MOON  C/O FHB  HONOLULU, HI 96811	\$500,000.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
2	SOOK-KI MOON  C/O FHB  HONOLULU, HI 96811	\$500,000.	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
			Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)					