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Form **990-PF**

EXTENDED TO NOVEMBER 15, 20 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

Department of the Treasury Internal Revenue Service

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

rorca	ilendar year 2016 or tax year deginning		, and ending		
	e of foundation			A Employer identification	number
	ANK OF HAWAII FOUNDATION	_		00 0010467	ı
	O BANK OF HAWAII, DEPT 71		Room/suite	99-0210467	
	O. BOX 3170	duressy	Additivatile	8 08-694-45	25
City	or town, state or province, country, and ZIP or foreign pos	stal code			
	ONOLULU, HI 96802-3170	stat code		C If exemption application is p	ending, check here
	heck all that apply: Initial return	Initial return of a fo	rmer nublic charity	D 1 Foreign organization:	s check here
E .	Final return	Amended return	Thich public charity	i i oreign organization.	s, check field
ቸ ጠ	Address change	Name change		2 Foreign organizations mi	eeting the 85% test,
H C	heck type of organization: X Section 501(c)(3) exe			7	
<u> </u>	· 	Other taxable private founda	tion	E If private foundation sta under section 507(b)(1	
Fai	ir market value of all assets at end of year J Accountin		Accrual	F If the foundation is in a	• • • • • • • • • • • • • • • • • • • •
	om Part II, col. (c), line 16)	er (specify)		under section 507(b)(1	
<u> </u>		nn (d) must be on cash t	pasis)	```	
Pa	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
ŝ	necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	1,563,482.		N/A	
	2 Check If the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	954.	954.		STATEMENT 1
	4 Dividends and interest from securities	319,244.	319,244	<u>, </u>	STATEMENT 2
'	5a Gross rents			 	
	b Net rental income or (loss)	622 655		 	
Ę	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 1 1 1 1 1 1 0 0	633,277.			
Revenue	b Gross sales price for all 1,114,408.		622 277	RECEIVED	
Ŗ	7 Capital gain net income (from Part IV, line 2)		633,277 8		\$\frac{\text{\text{\$\gamma\$}}{\text{\$\gamma\$}}}\rightarrow\righta
	8 Net short-term capital gain 9 Income modifications			12111 217 2 11 271124 1	фi
	Gross sales less returns and allowances 74,246.				STATEMENT 3
	b Less Cost of goods sold 2,310.			 OGDEN, UT 	STATEMENT 4
1	c Gross profit or (loss)	71,936.			
Se S	11 Other income				
š R	12 Total Add lines 1 through 11	2,588,893.	953,475	•	
<u> </u>	13 Compensation of officers, directors, trustees, etc	0.	0		0.
á	14 Other employee salaries and wages				
<u> </u>	15 Pension plans, employee benefits				
· 0	16a Legal fees				
Expen	b Accounting fees STMT 5	22,759.			13,578
ă	c Other professional fees STMT 6	36,760.	4,352	•	32,408
tive	17 Interest			ļ	
and Administrative	18 Taxes STMT 7	20,179.	0	•	15,179
. <u>.</u>	19 Depreciation and depletion				
Ę	20 Occupancy				
4	21 Travel, conferences, and meetings		 	 	-
		01 100	 		01 100
tino	23 Other expenses STMT 8	91,190.	0	•	91,190
Operating	24 Total operating and administrative expenses Add lines 13 through 23	170,888.	12 522		150 255
O	25 Contributions, gifts, grants paid	1,850,168.		•	152,355 1,850,168
	26 Total expenses and disbursements	1,000,100.	 	 	1,000,100
	Add lines 24 and 25	2,021,056.	13,533		2,002,523
	27 Subtract line 26 from line 12:	4,041,050.	10,000	•	4,004,343
	Subtract line 20 from line 12. Excess of revenue over expenses and disbursements.	567,837.			
	b Net investment income (if negative, enter -0-)	30,7037	939,942		
	c Adjusted net income (if negative enter -0-)		000,044	N/A	
_	501 11-23-16 LHA For Paperwork Reduction Act Notice	e see instructions			6 Form 990-PF (2016

n-		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
Pa	πı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
\top	1	Cash - non-interest-bearing	55,011.	61,426.	61,426.
	2	Savings and temporary cash investments	230,990.	460,544.	460,544.
1	3	Accounts receivable ►			
		Less; allowance for doubtful accounts			
1	4	Pledges receivable >			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
1	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
şţ	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
•		Investments - U.S. and state government obligations			
- 1		Investments - corporate stock STMT 11	1,253,476.	1,232,466.	12,795,572.
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
		Investments - mortgage loans	460 122		4 220 000
1	13	Investments - other STMT 12	460,122.	0.	4,320,000.
	14	Land, buildings, and equipment: basis			
	15	Other assets (describe			
		Total assets (to be completed by all filers - see the			
	10	instructions. Also, see page 1, item 1)	1,999,599.	1,754,436.	17,637,542.
_	17	Accounts payable and accrued expenses	1,200,300.	1112414200	1110371311
	18	Grants payable	552,000.	405,300.	
Ś	19	Deferred revenue	332/3333		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
apı	21	Mortgages and other notes payable			
	22	Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)	552,000.	405,300.	
		Foundations that follow SFAS 117, check here			
s	ĺ	and complete lines 24 through 26 and lines 30 and 31.			
a)		Unrestricted			
ala	25	Temporarily restricted			
g B	26	Permanently restricted			1
ᇤ		Foundations that do not follow SFAS 117, check here			
5	27	and complete lines 27 through 31 Capital stock, trust principal, or current funds	1,447,599.	1,349,136.	
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	1,349,130.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	†
Net Assets or Fund Balanc	30		1,447,599.	1,349,136.	1
2	"		1/11/1999.	1/31//130.	7
	31	Total liabilities and net assets/fund balances	1,999,599.	1,754,436.	
	ar	HIII Analysis of Changes in Net Assets or Fund E			
1	Tot	al net assets or fund balances at beginning of year - Part II, column (a), line	e 30		
	•	ist agree with end-of-year figure reported on prior year's return)		1	1,447,599.
2		er amount from Part I, line 27a		2	567,837.
3		er increases not included in line 2 (itemize)	SEE ST	PATEMENT 9 3	146,700.
4		I lines 1, 2, and 3	_	4	2,162,136.
5		creases not included in line 2 (itemize)		TATEMENT 10 5	813,000.
<u>6</u>	To	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, i	column (b), line 30		1,349,136.

Part IV Capital Gains a	ind Losses for	r Tax on In	vestment						
	be the kind(s) of pro ehouse; or common				(b) How ac P - Purch D - Dona	quired hase ition	(c) Date acq (mo., day,	uired yr.)	(d) Date sold (mo., day, yr)
a 4500 SHARES BOH	CORPORA	rion				D	09/06/	/88	08/17/16
b 3500 SHARES BOI						D	09/06/		11/16/16
c PUBLICLY TRADE	SECURIT:	IES				P	09/14/		04/07/16
d PUBLICLY TRADE	SECURIT:	IES			_	P	VARIOU	JS	04/07/16
е									
(e) Gross sales price	(f) Depreciation (or allowa			or other basis opense of sale			(h) Gain (e) plus (f)	or (loss) minus	(g)
a 312,858.				11,81	8.				301,040.
ь 297,015.				9,19	2.				287,823.
c 12,428.				12,58	9.				-161.
d 492,107.				447,53	2.				44,575.
e			<u> </u>						
Complete only for assets showin	g gain in column (h)	and owned by	the foundation	on 12/31/69			I) Gains (Col.		
(i) F.M.V. as of 12/31/69	(j) Adjusted			cess of col. (1)	İ	co	l. (k), but not Losses (fr		
(1) F.W.V. as U1 12/3 1/09	as of 12/3	1/69	over	col. (j), if any			LU3565 (III	onii cui.	(11))
a									301,040.
b									287,823
С									-161
d									44,575
e					ļ	•			
2 Capital gain net income or (net ca	ipital loss)	f gain, also ente f (loss), enter -	er in Part I, line 0- in Part I, line	7 7	} 2				633,277
Net short-term capital gain or (los	•				,				
If gain, also enter in Part I, line 8,	•	10115 1222(3) 8	ind (0).		\				
If (loss), enter -0- in Part I, line 8	ooluliiii (o):) 3			N/R	A
Part V Qualification U	Inder Section	4940(e) fo	r Reduced	Tax on Net	lnvestr	nent in	come		
Was the foundation liable for the sec f "Yes," the foundation does not qua	lify under section 49	140(e). Do not o	complete this pa	ırt.				,, ,	Yes X No
1 Enter the appropriate amount in	each column for eac	th year; see the	instructions be	fore making any e	entries.				(4)
(a) Base period years Calendar year (or tax year beginni	ing in) Adjust	(b) ed qualifying d		Net value of no			1,0	Dıstr ol. (b) d	(d) button ratio ivided by col. (c))
2015			<u>45,881.</u>			52,27			.14908
2014			<u>93,410.</u>			77,96			.17624
2013			62,374.			01,41			.14974
2012			<u>88,173.</u>			92,46			.16402
2011		2,2	<u>07,842.</u>	L	7,7	<u>96,73</u>	0.		.28317
2 Total of line 1, column (d)							2		.92226
3 Average distribution ratio for the			il on line 2 by 5,	or by the numbe	r of years				
the foundation has been in existe	ence if less than 5 ye	ars					3		.18445
4 Enter the net value of noncharita	ble-use assets for 20	016 from Part >	K, line 5				4		14,822,050
5 Multiply line 4 by line 3									
• Midribia iule 4 na iille 2							5		2,733,972
6 Enter 1% of net investment inco	me (1% of Part I, line	e 27b)					6		9,399
7 Add lines 5 and 6							7		2,743,371
_									0 000 500
8 Enter qualifying distributions fro	m Part XII, line 4						8		2,002,523
8 Enter qualifying distributions fro If line 8 is equal to or greater tha See the Part VI instructions.		ox in Part VI, li	ne 1b, and com	plete that part us	ing a 1% ta	x rate.	8	·-···	2,002,523

3 Add lines 1 and 2

6 Credits/Payments:

BANK OF HAWAII FOUNDATION				
1990-PF (2016) C/O BANK OF HAWAII, DEPT 715		99-0210		Page 4
art VI Excise Tax Based on Investment Income (Section 4940(a),	1940(b), 4940(e), or 4	948 - see i	nstruc	tions)
Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A"	A* on line 1.			
Date of ruling or determination letter: (attach copy of letter if necessary-	-see instructions)			
Domestic foundations that meet the section 4940(e) requirements in Part V, check here	and enter 1%	1	18	<u>,799.</u>
of Part I, line 27b				
: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part	t I, line 12, col. (b)	į į		
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others en	nter -0-)	2		0.
Add lines 1 and 2		3	<u> </u>	,799.
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others et	nter -0-)	4		<u> </u>
Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5	<u> 18 </u>	<u>,799.</u>
Credits/Payments:	1			
a 2016 estimated tax payments and 2015 overpayment credited to 2016	6,288.			
b Exempt foreign organizations - tax withheld at source 6b	 			
c Tax paid with application for extension of time to file (Form 8868)	15,000.	}		
d Backup withholding erroneously withheld 6d	<u></u>			
Total credits and payments. Add lines 6a through 6d		7	<u>21</u>	<u>.,288.</u>
Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		8		
Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	.	9		100
Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	2 400 5	10	2	2,489.
Enter the amount of line 10 to be: Credited to 2017 estimated tax ▶ art VII-A Statements Regarding Activities	2,489. Refunded	11		0.
a During the tax year, did the foundation attempt to influence any national, state, or local legislation of	or did it participate or interior		1	Yes No
any political campaign?	or the it participate of line vent	: III	1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (se	e instructions for the definition	1/3	1b	$\frac{x}{x}$
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and co		•	"	
distributed by the foundation in connection with the activities	prod or arry materials pashe	.00 0.		
c Did the foundation file Form 1120-POL for this year?			1c	Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1	
(1) On the foundation. ➤ \$ 0. (2) On foundation managers. ➤ \$	0.		1 1	
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure ta		-	1	
managers. ► \$0 .			1 1	
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	X
If "Yes," attach a detailed description of the activities				
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrun	nent, articles of incorporation,	or		1
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	X
4a 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?		N/A	4b	
Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	X
If "Yes," attach the statement required by General Instruction ${\cal T}$				
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
 By language in the governing instrument, or 			1	

	distributed by the foundation in connection with the activities	1 1	Í	
c	Did the foundation file Form 1120-POL for this year?	1c_		X_
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. > \$ 0 . (2) On foundation managers. > \$ 0 .			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1	Ì	
	managers. ► \$0.	1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X_
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		1	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3_		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u>X</u> _
b	If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Χ_
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	HI			
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b_	\mathbf{x}_{-}	
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_
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
		rm 990)-PF	(2016)

C/O BANK OF HAWAII, DEPT 715

<u>Pa</u>	nt VII-A Statements Regarding Activities (continued)			
		1	Yes∤	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		[7.7
	If "Yes," attach statement (see instructions)	12	- ; ; -	<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A		- O -	
14	The books are in care of ► BANK OF HAWAII, DEPT. 758 Telephone no. ►808-69		545	
	Located at ► 130 MERCHANT STREET, HONOLULU, HI ZIP+4 ►96	813		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	NT.	/ >	
40	and enter the amount of tax-exempt interest received or accrued during the year 15	1/1	/A Yes	No
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,	16	162	X
	securities, or other financial account in a foreign country? See the instructions for expectance and tiling requirements for ExpCEN Form 114. If Type Teacher the game of the	16		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
P	foreign country ► art 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.	T	Yes	No
1.	a During the year did the foundation (either directly or indirectly):		103	110
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1	}	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes 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)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"		1	
	if the foundation agreed to make a grant to or to employ the official for a period after	-		
	termination of government service, if terminating within 90 days.)		-	
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	L	X
	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, that were not corrected			
	before the first day of the tax year beginning in 2016?	1c	ļ	X
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 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2016? Yes X No			
	If "Yes," list the years ▶			
	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			1
	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.) N/A	<u>2b</u>	 	<u> </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.			
				
3	Ba Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	1		}
	b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after			1
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	3b	+	1
•	4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	_ 4a	┼	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			v
_	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	<u> </u>	X (0016)
	i i i i i i i i i i i i i i i i i i i	-orm 😏	ソリーピト	(2016)

Form 990-PF (2016)

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

Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
NONE		
		
tal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	<u> </u>	1
ist the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the umber of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		Expenses
N/A		
		~
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
N/A		
All other program-related investments. See instructions.		
otal. Add lines 1 through 3	>	

Form 990-PF (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	14,552,483.
b	Average of monthly cash balances	1b	495,283.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	15,047,766.
	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	15,047,766.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	225,716.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	14,822,050.
6	Minimum investment return. Enter 5% of line 5	6	741,103.
P	Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (j)(5) private operating foundations at foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	741,103.
2a	Tax on investment income for 2016 from Part VI, line 5		
b]	
C	Add lines 2a and 2b	2c	18,799.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	722,304.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	722,304.
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	722,304.
F	Part XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
á	a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,002,523.
ì	b Program-related investments - total from Part IX-B	16	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:		
4	a Suitability test (prior IRS approval required)	3a	
ı	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	2,002,523.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,002,523.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	nualifies i	for the section

Form **990-PF** (2016)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions) (a) (b) (d) (c) 2015 2016 Corpus Years prior to 2015 1 Distributable amount for 2016 from Part XI. 722,304. line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2015 only 0. h Total for prior years: 0 3 Excess distributions carryover, if any, to 2016: 1,777,310. a From 2011 1,123,769. **b** From 2012 c From 2013 1,107,247. ,505,096. d From 2014 299,155. e From 2015 6,812,577 f Total of lines 3a through e 4 Qualifying distributions for 2016 from Part XII, line 4; ►\$ 2,002,523 a Applied to 2015, 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 0 (Election required - see instructions) 722,304. d Applied to 2016 distributable amount 1,280,219 e Remaining amount distributed out of corpus 0 0. Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 8,092,796 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 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 0 amount - see instructions e Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount - see instr. 0 f Undistributed income for 2016, Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017 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 2011 1,777,310. not applied on line 5 or line 7 9 Excess distributions carryover to 2017 6,315,486. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 ,123,769. a Excess from 2012 1,107,247. b Excess from 2013 1,505,096. c Excess from 2014 299,155. d Excess from 2015

623581 11-23-16

e Excess from 2016

Form **990-PF** (2016)

280,219

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

SEE STATEMENT 14

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

c Any submission deadlines:

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

Form **990-PF** (2016)

Form 990-PF (2016) C/O BANK OF HAWAII, DEPT 715 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	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
SEE STATEMENT GRANT-1	NONE			. 250 160
 				1,850,168,
				<u> </u>
		 	 	
Total		<u></u>	> 3a	1 850 168.
b Approved for future payment				
SEE STATEMENT GRANT-2	NONE			405 200
				405,300.
Total			▶ 3b	405 300
, otal				405 300

g. 500 um	ounts unless otherwise indicated.	Unrelated b	usiness income		by section 512, 513, or 514	(e)
Program se	rvice revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a						
b						
c		_		_		
d						
_	···					
1						
g Fees and	d contracts from government agencies	L				
Membershi	p dues and assessments					
Interest on	savings and temporary cash					
investment	s			14	954.	
Dividends a	and interest from securities			14	319,244.	
Net rental in	ncome or (loss) from real estate:					
a Debt-fin	nanced property					
b Not deb	ot-financed property					
	ncome or (loss) from personal					
property				1 1		
Other inves	stment income					
Gain or (lo:	ss) from sales of assets other					
than invent	tory			18	633,277.	
Net income	e or (loss) from special events					
	fit or (loss) from sales of inventory			0.5	71,936.	
Other rever	nue:					
a						
		i i				
d	Add columns (b), (d), and (e)			0.	1,025,411.	
de Subtotal. A				0.	1,025,411.	1,025,41
eSubtotal. A	Add columns (b), (d), and (e)	s.)		0.		1,025,41
e Subtotal. A Total Add	Add columns (b), (d), and (e) d line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculation:				13	1,025,41
d e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
e Postal Add See workshee	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) ret in line 13 instructions to verify calculations Relationship of Activities	income is reported in	mplishment of	Exempt I	Purposes	1,025,41
e Subtotal. A Total Add Gee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	1,025,41
d e 2 Subtotal. A 3 Total Add 6ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	1,025,41
e Subtotal. A Total Add Gee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	1,025,41
e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
d e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
d e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
e Subtotal. A Total Add Gee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
d e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
d e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
d e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
d e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	
e Subtotal. A Total Add ee workshe Part XVI	Add columns (b), (d), and (e) If line 12, columns (b), (d), and (e) et in line 13 instructions to verify calculations Relationship of Activitie Explain below how each activity for which	income is reported in	mplishment of	Exempt I	Purposes	

Form **990-PF** (2016)

BANK OF HAWAII FOUNDATION C/O BANK OF HAWAII, DEPT 715 99-0210467 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets 1a(2) b Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) X (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 16(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 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. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes X No

b If "Yes," complete the following schedule.			
(a) Name of organization	(b) Type of organization	(c) Description of relationship	
N/A			

Sign Here	and be	penalties of opinity, I declare that I have examined the elief, it is due to correct and complete. Declaration of produce the produce of officer of trustee.	is return, including acco eparer (other than taxpa	mpanying schedules and yer) is based on all inform NOV 1 3 2017	statements, and to the nation of which prepare TREASI Title	r has any knowledge	May the IRS discuss this return with the preparer shown below (see instr.)? X Yes No
Paid		Print/Type preparer's name WENDY OTA	Preparer's signatu	Ω_{-}	Date NOV - 9 2017	Check if self- employed	PTIN P00639415
Prepa Use (Firm's EIN ► 9	9-0033900
	Firm's address ▶ P.O. BOX 3170, DEPT. 715 HONOLULU, HI 96802-3170					Phone no. (80	08) 694-4478

Form 990-PF (2016)

Schedule B

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

Department of the Treasury nternal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2016

BANK OF HAWAII FOUNDATION C/O BANK OF HAWAII, DEPT 715 99-0210467 Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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)

Name of organization
BANK OF HAWAII FOUNDATION
C/O BANK OF HAWAII, DEPT 715

Employer identification number

Part I Contributors (See instruct	ions) Use duplicate copies of Part I if additional space is needed
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Parti	Contributors (See instructions) Use duplicate copies of Part I if ad	ditional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	BANK OF HAWAII CORPORATION 130 MERCHANT STREET \$ 20,305. HONOLULU, HI 96813		Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2	BANK OF HAWAII CORPORATION 130 MERCHANT STREET HONOLULU, HI 96813	\$\$.	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
3	BANK OF HAWAII CORPORATION 130 MERCHANT STREET HONOLULU, HI 96813	\$ 391,400.	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4	BANK OF HAWAII CORPORATION 130 MERCHANT STREET HONOLULU, HI 96813	\$\$.	Person Payroll Noncash X (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
5	EYE PRODUCTIONS (HAWAII FIVE 0) 510 18TH AVENUE HONOLULU, HI 96816	\$7,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
6	PETER HO P.O. BOX 2900 HONOLULU, HI 96846	\\$13,515.	Person X Payroll	

Name of organization
BANK OF HAWAII FOUNDATION
C/O BANK OF HAWAII DEPT 715

Employer identification number

/O BA	BANK OF HAWAII, DEPT 715 99-0			
Part I	Contributors (See instructions) Use duplicate copies of Part I if	f additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
7	PETER HO P.O. BOX 2900 HONOLULU, HI 96846	\$\$.	Person Payroll Noncash X (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
8	ALTON KUIOKA P.O. BOX 2900 HONOLULU, HI 96846	s7,063.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
9	ALTON KUIOKA P.O. BOX 2900 HONOLULU, HI 96846	\$360.	Person Payroll Noncash X (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
10	DONNA TANOUE P.O. BOX 2900 HONOLULU, HI 96846	\$10,663.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
11	JILL HIGA P.O. BOX 2900 HONOLULU, HI 96846	\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
12	KENT LUCIEN P.O. BOX 2900	ss	Person X Payroll X Noncash (Complete Part II for	
22152 10	HONOLULU, HI 96846		noncash contributions	

Name of organization
BANK OF HAWAII FOUNDATION
C/O BANK OF HAWAII, DEPT 715

Employer identification number

Part I	Contributors (See instructions) Use duplicate copies of Part I r	r additional space is needed.		
(a) No.	(ხ) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
13	13 KENT LUCIEN P.O. BOX 2900		Person Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
14	SHARON CROFTS P.O. BOX 2900 HONOLULU, HI 96846	\$\$5,213.	Person X Payroll X Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
15	SHARON CROFTS P.O. BOX 2900 HONOLULU, HI 96846	\$ 250.	Person Payroll Noncash X (Complete Part II for a noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
16	WAYNE HAMANO P.O. BOX 2900 HONOLULU, HI 96846	\$\$	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
17	JIM POLK P.O. BOX 2900 HONOLULU, HI 96846	\$\$, 8,785.	Person X Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
18	MARY SELLERS P.O. BOX 2900 HONOLULU, HI 96846	\$\$\$\$\$	Person X Payroll	

Name of organization BANK OF HAWAII FOUNDATION Employer identification number

C/O BZ	BANK OF HAWAII, DEPT 715 99-0210467				
Part I	Contributors (See instructions) Use duplicate copies of Part I if additional				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
19	MARK ROSSI P.O. BOX 2900 HONOLULU, HI 96846	\$ 4,763.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
20	MARK ROSSI P.O. BOX 2900 HONOLULU, HI 96846	\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
21	SUSAN ING P.O. BOX 2900 HONOLULU, HI 96846	\$4,693.	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
22	SUSAN ING P.O. BOX 2900 HONOLULU, HI 96846	\$1,150.	Person Payroll Noncash X (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
23	KEVIN SAKAMOTO P.O. BOX 2900 HONOLULU, HI 96846	s6,609.	Person X Payroll X Noncash (Complete Part II for noncash contributions)		
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
24	KEVIN SAKAMOTO		Person Payroll		

623452 10-18-16

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

Noncash (Complete Part II for

noncash contributions)

150.

P.O. BOX 2900

HONOLULU, HI 96846

Name of organization
BANK OF HAWAII FOUNDATION
CAO BANK OF HAWAII DEPT. 715

Employer identification number

C/O B	ANK OF HAWAII, DEPT 715	-0210467	
Part I	Contributors (See instructions) Use duplicate copies of Part I i		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	P.O. BOX 2900 HONOLULU, HI 96846	\$\$.	Person X Payroll X Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26	ROBERT WHEELER P.O. BOX 2900 HONOLULU, HI 96846	\$\$ 750.	Person Payroll Moncash X (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
		s	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
**************************************			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for

noncash contributions)

Name of organization

BANK OF HAWAII FOUNDATION

Employer identification number

C/O BANK OF HAWAII, DEPT 715

Part II	Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed.				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
2	3,900 SHARES VISA, INC. CLASS B COMMON STOCK				
		\$ 409,100.	09/16/16		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
3	3,900 SHARES VISA, INC. CLASS B COMMON STOCK				
		\$ 391,400.	12/19/16		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
4	2016 LIVE KOKUA GIVING CAMPAIGN: T-SHIRTS, DRESSDOWN PINS, DRESSDOWN STICKERS, ETC.	\$ 2,310.	07/27/16		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
	1996 CHATEAU DUCRU BEAUCAILLOU (31)				
		\$1,500.	09/29/16		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
9	12 BOTTLES OF WINE				
		\$360.	09/29/16		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received		
13	ONE MONTH USE OF RESERVED BASEMENT PARKING STALL				
		\$ 250.	09/29/16 990, 990-EZ, or 990-PF) (2		

BANK OF HAWAII FOUNDATION C/O BANK OF HAWAII, DEPT 715 Employer identification number

Part II	Noncash Property	(See instructions). Use duplicate copies of Part II if additional space is needed.
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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
15	LAKER TICKETS			
		\$ <u>250.</u>	09/29/16	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
20	GOLF FOR 3 AT OAHU COUNTRY CLUB-INCLUDES LUNCH, GOLF & ON COURSE/POST ROUND REFRESHMENT	\$\$	09/29/16	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
22	LAPIS & WHITE TOPAZ BANGLE; PAVE HEART & 16" CHAIN BY L LEVINSON; "MAKIKI MANOR GARDEN"; PRINT BY KC	\$1,150.	09/26/16	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
24	YOU & A GUEST WILL GOLF, SIP FINE WINE AND DINE AT OAHU COUNTRY CLUB			
		s150.	09/26/16	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
26	5 HOUR SAIL ON KANEOHE BAY ON MAKAOIOI FOR SIX PEOPLE, FOOD AND BEVERAGES PROVIDED	\$ 750.	09/26/16	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
	18-16	\$Sabadula B (Farm	990, 990-EZ, or 990-PF) (2	

tification number 10467 more than \$1,000 for w gift is held					
nore than \$1,000 for w gift is held					
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(e) Transfer of gift					
Relationship of transferor to transferee					
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ansferee					
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FORM 990-PF INTE	REST ON SAVING	S AND TEMPORA	RY CASH IN	/ESTMENTS S	TATEMENT 1
SOURCE		(A) REVENUE PER BOOKS	NET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME
BANK OF HAWAII AG #XXXXXX008 BANK OF HAWAII AG			71.	71.	
#XXXXXX403		88	33.	883.	
TOTAL TO PART I,	LINE 3	9!	54.	954.	
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECUR	ITIES S	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
BANK OF HAWAII ACCOUNT NO. #XXXXXXX008 BANK OF HAWAII ACCOUNT NO.	2,253.	0.	2,253.	2,253.	•
#XXXXXX403	281,796.	0.	281,796.	281,796	•
VISA INC DIVIDEND	35,195.	0.	35,195.	35,195	•
TO PART I, LINE	4 319,244.	0.	319,244.	319,244	•

FORM 990-PF	INCOME AND COST OF GOODS SOLD INCLUDED ON PART I, LINE 10		STATEMENT 3
INCOME			
1. GROSS RECEIPTS 2. RETURNS AND ALLOWA 3. LINE 1 LESS LINE 2		74,246	74,246
	(LINE 15)	2,310	71,936
6. OTHER INCOME		•	
	LINES 5 AND 6)		71,936
9. MERCHANDISE PURCHA 10. COST OF LABOR		0	
11. MATERIALS AND SUPE 12. OTHER COSTS 13. ADD LINES 8 THROUGH		2,310	2,310
14. INVENTORY AT END O	OF YEAR	0	2,310

FORM 990-PF	TAXI	ES		STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
GENERAL EXCISE TAX	15,179.	0.		15,179.
FEDERAL EXTENSION PAYMENT (FYE 12/31/15)	5,000.	0.		0.
TO FORM 990-PF, PG 1, LN 18 =	20,179.	0.		15,179.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK OF HAWAII LIVE KOKUA GIVING CAMPAIGN EXPENSES	36,580.	0.		36,580.
BANK OF HAWAII LIVE KOKUA CREDIT CARD FEES 2015 BANK OF HI FOUNDATION	6,529.			6,529.
MONTY RICHARDS COMMUNITY LEADERSHIP AWARDS EVENT BANK OF HAWAII FOUNDATION	16,319.	0.		16,319.
SCHOLARSHIP RECEPTION AND COLLATERAL	30,912.	0.		30,912.
BANK OF HAWAII LIVE KOKUA - COMMUNITY WALK EXPENSES	850.	0.		850.
TO FORM 990-PF, PG 1, LN 23	91,190.	0.		91,190.
FORM 990-PF OTHER INCREASE	S IN NET ASS	ETS OR FUND B	ALANCES	STATEMENT 9
DESCRIPTION				AMOUNT
CHANGE IN TOTAL GRANTS APPRO	VED FOR FUTU	JRE PAYMENT	_	146,700.
TOTAL TO FORM 990-PF, PART I	II, LINE 3		_	146,700.

FORM 990-PF OTHER DECREASES IN NE	T ASSETS OR F	JND BALANCES	STATEMENT	10
DESCRIPTION			AMOUNT	
UNREALIZED GAIN ON 7,800 VISA, INC. UNPAID GRANT	CLASS B COMMO	N SHARES	800,5 12,5	
TOTAL TO FORM 990-PF, PART III, LINE	2 5		813,0	00.
FORM 990-PF CORE	PORATE STOCK		STATEMENT	11
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	T
BANK OF HAWAII CORPORATION COMMON ST	rocks	1,232,466.	12,795,5	572.
TOTAL TO FORM 990-PF, PART II, LINE	10B	1,232,466.	12,795,5	572.
FORM 990-PF OTHER	R INVESTMENTS		STATEMENT	12
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKI VALUE	ET
BANK OF HAWAII A/C #XXXXX2008 VISA INC. CLASS B COMMON STOCKS	COST COST	0.	4,320,	0.00
TOTAL TO FORM 990-PF, PART II, LINE	13	0.	4,320,	000.

FORM 990-PF PART VIII TRUSTEE	- LIST OF OFFICERS, DI S AND FOUNDATION MANAG	RECTORS SERS	STATE	EMENT 13
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
DONNA A. TANOUE P.O BOX 3170 HONOLULU, HI 96802	PRES/DIR 35.00	0.	0.	0.
PETER S. HO P.O BOX 3170 HONOLULU, HI 96802	CHAIRMAN OF THE	E BOARD/DIR 0.	0.	0.
STAFFORD J. KIGUCHI P.O BOX 3170 HONOLULU, HI 96802	VP 0.00	, 0.	0.	0.
MARK A. BURAK P.O BOX 3170 HONOLULU, HI 96802	DIRECTOR 0.00	0.	0.	0.
TERRY T. SASAMURA P.O BOX 3170 HONOLULU, HI 96802	SECRETARY 0.00	0.	0.	0.
SHARLENE K. BLISS P.O BOX 3170 HONOLULU, HI 96802	ASSISTANT SECR	ETARY	0.	0.
MARY G.F. BITTERMAN P.O BOX 3170 HONOLULU, HI 96802	DIRECTOR 0.00	0.	0.	0.
MICHAEL J. CHUN P.O BOX 3170 HONOLULU, HI 96802	DIRECTOR 0.00	0.	0.	0.
CLINTON R. CHURCHILL P.O BOX 3170 HONOLULU, HI 96802	DIRECTOR 0.00	0.	0.	0.
ROBERT A. HURET P.O BOX 3170 HONOLULU, HI 96802	DIRECTOR 0.00	0.	0.	0.
BARBARA J. TANABE P.O BOX 3170 HONOLULU, HI 96802	DIRECTOR 0.00	0.	0.	0.

BANK OF HAWAII FOUNDATION	N C/O BANK OF HA		99-02	210467
ROBERT W. WO P.O BOX 3170 HONOLULU, HI 96802	DIRECTOR 0.00	0.	0.	0.
ALTON T. KUIOKA P.O BOX 3170 HONOLULU, HI 96802	VP/DIRECTOR 0.00	0.	0.	0.
KENT T. LUCIEN P.O BOX 3170 HONOLULU, HI 96802	TREASURER/DIRECTOR 0.00	0.	0.	0.
S. HAUNANI APOLIONA P.O BOX 3170 HONOLULU, HI 96802	DIRECTOR 0.00	0.	0.	0.
RAYMOND P. VARA P.O BOX 3170 HONOLULU, HI 96802	DIRECTOR 0.00	0.	0.	0.
VICTOR K. NICHOLS P.O BOX 3170 HONOLULU, HI 96802	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	0.	0.	0.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 14

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

BANK OF HAWAII FOUNDATION, C/O BANK OF HI, CHARITABLE FOUNDATION SERVICES P.O. BOX 3170, DEPT. 758 HONOLULU, HI 96802-3170

FORM AND CONTENT OF APPLICATIONS

NONPROFIT ORGANIZATIONS MAY SUBMIT A LETTER REQUEST, PROVIDING THE ORGANIZATION'S MISSION AND PROPOSED USE OF FUNDS, TOGETHER WITH DOCUMENTATION REFLECTING TAX-EXEMPT STATUS.

ANY SUBMISSION DEADLINES

GRANT REQUESTS MAY BE SUBMITTED AT ANY TIME.

RESTRICTIONS AND LIMITATIONS ON AWARDS

GEOGRAPHIC AREAS: GENERALLY, STATE OF HAWAII, GUAM, SAIPAN AND AMERICAN SAMOA.

EIN: 99-0210467

Organization	Project Title	Amount	Status
Aloha United Way 200 North Vineyard Boulevard, Suite 700 Honolulu, HI 96817-3938	2015 Live Kõkua Giving Campaign	57,472 57	PC
Aloha United Way 200 North Vineyard Boulevard, Suite 700 Honolulu, HI 96817-3938	2016 Live Kōkua Giving Campaign	99,802 00	PC
American Cancer Society, Hawaii Pacific Region 2370 Nuuanu Avenue Honolulu, HI 96817	Hope Lodge	25,000 00	PC
American Diabetes Association, Hawaii Affiliate 1500 South Beretania Street, Suite 111 Honolulu, HI 96826	2016 Live Kõkua Giving Campaign	19,037 00	PC
American Heart Association 677 Ala Moana Blvd , Suite 600 Honolulu, HI 96813	2016 Live Kōkua Giving Campaign	8,432 00	PC
American Red Cross, Guam Chapter Bldg 285, Rt 4 Hagatna, GU 96910	2015 Live Kõkua Giving Campaign	3,581 81	PC
American Red Cross, Guam Chapter Bldg 285, Rt 4 Hagatna, GU 96910	2016 Live Kōkua Giving Campaign	11,817 00	PC
American National Red Cross, Hawaii State Chapter 4155 Diamond Head Road Honolulu, HI 96816	2015 Live Kōkua Giving Campaign	7,809 64	PC
American National Red Cross, Hawaii State Chapter 4155 Diamond Head Road Honolulu, HI 96816	2016 Live Kōkua Giving Campaign	10,326 00	PC
American Red Cross, Commonwealth of Northern Mariana Islands Chapter P O Box 500814 Saipan, MP 96950	2015 Live Kōkua Giving Campaign	1,365 25	PC
Blood Bank of Hawaii 2043 Dillingham Blvd Honolulu, Hi 96819	2016 Live Kōkua Giving Campaign	16,519 00	PC

EIN: 99-0210467

Organization	Project Title	Amount	Status
Boy Scouts of America, Maui County Council 200 Liholiho Street Wailuku, HI 96793	Program support	5,000 00	PC
Boys & Girls Club of American Samoa P. O. Box 998381 Pago Pago, AS 96799	Program support for low-to-moderate income youth	10,000 00	PC
Boys and Girls Club of Hawaii 345 Queen Street, Suite 900 Honolulu, HI 96813-4724	2015 Live Kōkua Giving Campaign	9,457 30	PC
Boys and Girls Club of Hawaii 345 Queen Street, Suite 900 Honolulu, HI 96813-4724	2016 Live Kõkua Giving Campaign	26,877 00	PC
Carole Kai Charities, Inc 418 Kuwili Street, Suite 102 Honolulu, HI 96817	Great Aloha Run - Sounds of Freedom	8,500 00	PC
Cathedral of Saint Andrew 229 Queen Emma Square Honolulu, HI 96813-2304	Restoration of Aeolian-Skinner Pipe Organ	5,000 00	Church
Catholic Charities Hawaii 1822 Keeaumoku Street Honolulu, HI 96822	Program support of the Kauai Community Office	1,300 00	PC
Catholic Charities Hawaii 1822 Keeaumoku Street Honolulu, HI 96822	2016 Live Kōkua Giving Campaign	13,023 00	PC
Center for Tomorrow's Leaders 677 Ala Moana Boulevard, Suite 1100 Honolulu, HI 96813	Program support	5,000 00	PC
Child & Family Service 91-1841 Fort Weaver Road Ewa Beach, HI 96706-1909	2015 Live Kōkua Giving Campaign	9,603 36	PC
Child & Family Service 91-1841 Fort Weaver Road Ewa Beach, HI 96706-1909	2016 Live Kōkua Giving Campaign	19,156 00	PC

EIN: 99-0210467

Organization	Project Title	Amount	Status-
Domestic Violence Action Center P O Box 3198 Honolulu, HI 96801-3198	2016 Live Kōkua Giving Campaign	12,773 00	PC
Downtown Athletic Club Hawaii 1000 Bishop Street, Suite 610 Honolulu, HI 96813	Afterschool Rugby program	5,000 00	PC
East Hawaii Cultural Center 141 Kalakaua Street Hilo, Hl 96720	Culture and Arts programs for low-to- moderate income youth and their families	6,000 00	PC
Easter Seals Hawaii 710 Green Street Honolulu, HI 96813	2015 Live Kõkua Giving Campaign	7,612 00	PC
East-West Center 1601 East-West Road Honolulu, HI 96848	International Union for Conservation of Nature (IUCN) World Conservation Congress, Hawaii 2016	50,000 00	PC
Faith Action for Community Equity P O Box 235950 Honolulu, HI 96823	Program support	10,000 00	PC
Faith Action for Community Equity P O Box 235950 Honolulu, HI 96823	Housing and Homelessness Program	10,000 00	PC
Family Promise of Hawaii 245 N. Kukui Street, Suite 101 Honolulu, HI 96817	2015 Live Kōkua Giving Campaign	6,950 08	PC
Friends of Hawaii Robotics 2640 Ipulei Place Honolulu, HI 96816-3508	Robotics programs for Elementary, Middle and High School students statewide	25,000 00	PC
Girl Scouts of Hawaii 410 Atkinson Drive, Suite 2E1, Box 3 Honolulu, HI 96814-4730	Program support	5,000 00	PC
Goodwill Industries of Hawaii 2610 Kilihau Street Honolulu, HI 96819-2020	Program support	20,000 00	PC

EIN: 99-0210467

Organization	Project Title	Amount	Status
Hale Kıpa 615 Pııkoı Street, Suite 203 Honolulu, HI 96814-3139	2016 Live Kōkua Community Walk - Youth Outreach Program	19,408 00	PC
Hawaii Children's Cancer Foundation 1814 Liliha Street Honolulu, Hi 96817	2015 Live Kõkua Giving Campaign	11,203 84	PC
Hawaii Children's Discovery Center 111 Ohe Street Honolulu, HI 96813	Program support	10,000 00	PC
Hawaii Community Foundation 827 Fort Street Honolulu, HI 96813	Bank of Hawaii Foundation Scholarship Fund	125,000 00	PC
Hawaii Community Foundation 827 Fort Street Honolulu, HI 96813	Centennial Campaign	75,000 00	PC
Hawaii Foodbank, Inc 2611 Kilihau Street Honolulu, HI 96819	Program support FBO the Kauai Branch	1,200 00	PC
Hawaii Foodbank, Inc 2611 Kilihau Street Honolulu, HI 96819	2016 Live Kōkua Giving Campaign	26,647 00	PC
Hawaii Hotel Industry Foundation 2270 Kalakaua Ave Suite 1506 Honolulu, HI 96815-2561	Program support FBO Family Programs Hawaii (\$2,500) and Parents Attentive to Children Hawaii (\$2,500) for Hawaii Island programs	5,000 00	PC
Hawaii Institute for Public Affairs 1001 Bishop Street American Savings Bank Tower, Suite 1132 Honolulu, HI 96813	Program support	5,000 00	PC
Hawaii Island United Way 76 Kea'a Street Hilo, HI 96720-4764	2015 Live Kōkua Giving Campaign	3,289 24	PC
Hawaii Island United Way 76 Kea'a Street Hilo, HI 96720-4764	2016 Live Kōkua Giving Campaign	12,285 00	PC

EIN: 99-0210467

Organization	Project Title	Amount	Status
Hawaii Meals on Wheels, Inc P O Box 61194 Honolulu, HI 96839-1194	2016 Live Kŏkua Giving Campaign	32,844 00	PC
Hawaii Nature Center 2131 Makiki Heights Drive Honolulu, HI 96822	2015 Live Kõkua Giving Campaign	3,200 78	PC
Hawaii Opera Theatre Hawaii Opera Plaza 848 S Beretania Street, Suite 301 Honolulu, HI 96813	Opera Express outreach and education program	6,000 00	PC
Hawaii Pacific University One Aloha Tower Drive, Suite 3100 Honolulu, HI 96813	Student Learning Commons at Aloha Tower Campus	31,250 00	PC
Hawaii Public Television dba PBS Hawaii 315 Sand Island Access Road Honolulu, HI 96819	HIKI NO program	100,000 00	PC
Hawaiian Humane Society 2700 Waialae Avenue Honolulu, HI 96826-1899	Construction of 2nd campus in West Oahu and renovation of Moilill campus	20,000 00	PC
Hiipaka LLC dba Waimea Valley 59-864 Kamehameha Hwy Haleiwa, HI 96712	Return of Pu'ukua	5,000 00	PC
Hiipaka LLC dba Waimea Valley 59-864 Kamehameha Hwy Haleiwa, HI 96712	Program support for Waimea Valley annual Makahiki	10,000 00	PC
Holualoa Foundation for Arts and Culture 78-6670 Mamalahoa Hwy Holualoa, HI 96725	Art classes for grades 1 - 6 at Title I schools	6,000 00	PC
Honolulu Theatre for Youth 1149 Bethel Street, Suite 700 Honolulu, HI 96813	2015 Live Kõkua Giving Campaign	2,030 97	PC
Hospice Hawaii înc 860 Iwilei Road Honolulu, HI 96817-5018	2016 Live Kōkua Giving Campaign	50,685 00	PC

EIN: 99-0210467

Organization	Project Title	Amount	Status
Hospice Hawaii Inc 860 Iwilei Road Honolulu, HI 96817-5018	2015 Live Kōkua Giving Campaign	20,837 99	PC [^]
HUGS (Help, Understanding and Group Support) 3636 Kilauea Avenue Honolulu, HI 96816-2318	2015 Live Kōkua Giving Campaign	4,566 36	PC
Institute for Human Services 546 Kaaahi Street Honolulu, HI 96817	2016 Live Kōkua Giving Campaign	14,912 00	PC
Kahilu Theatre Foundation P O Box 549 Kamuela, HI 96743	Youth Shows for the 2016-2017 season	6,000 00	PC
KAMP Hawaii Inc P O Box 13041 Alea, HI 96701	Program support	5,000 00	PC
Kamuela Philharmonic Orchestra Society P O Box 2597 Kamuela, HI 96743	Music education for underserved youth in Hawaii County through the children's concert and school visits, particularly Hilo	6,000 00	PC
Kanu O Ka Aina Learning 'Ohana P O Box 6511 Kamuela, HI 96743	Mele Mural project to be created in the Kanu a ka 'Aina New Century Public Charter School gymnasium	6,000 00	PC
Kapiolani Health Foundation 55 Merchant Street, 26th Floor Honolulu, HI 96813	"Campaign for Hawaii's Children" Capital Campaign	20,000 00	PC
Kauai United Way P O Box 1087 4374 Kukui Grove Street, Ste 201 Lihue, HI 96766	2015 Live Kõkua Giving Campaign	2,552 00	PC
Kauai United Way P O Box 1087 4374 Kukui Grove Street, Ste 201 Lihue, HI 96766	2016 Live Kŏkua Giving Campaign	9,750 00	PC
Kuakını Foundation 347 North Kuakını Street Honolulu, HI 96817-9980	Replacement of emergency generator	25,000 00	PC

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Organization	Project Title	Amount	Status
Make A Wish Foundation of Hawaii 223 South King Street, Suite 100 Honolulu, HI 96813	2015 Live Kõkua Giving Campaign	9,558 58	PC
Make A Wish Foundation of Hawaii 223 South King Street, Suite 100 Honolulu, HI 96813	2016 Live Kõkua Giving Campaign	26,967 00	PC
Manoa Heritage Center 2859 Manoa Road Honolulu, HI 96822	Education programs	10,000 00	PC
Maui AIDS Foundation 1935 Main Street, Suite 101 P O Box 858 Wailuku, HI 96793-0858	Aloha Emergency Fund (AEF) program	10,000 00	PC
Maui Arts & Cultural Center One Cameron Way Kahului, Hl 96732	Exhibition Programming	20,000 00	PC
Maui United Way 270 Hookahi Street, Suite 301 Wailuku, HI 96768	2015 Live Kōkua Giving Campaign	6,697 34	PC
Maui United Way 270 Hookahi Street, Suite 301 Wailuku, HI 96768	2016 Live Kōkua Giving Campaign	10,540 00	PC
Mental Health Association in Hawaii dba Mental Health America of Hawaii 1136 Union Mall, Suite 510 Honolulu, HI 96813	2016 Live Kõkua Community Walk - (prevention of youth suicide & bullying)	38,816 00	PC
Mid-Pacific Institute 2445 Kaala Street Honolulu, HI 96822-2299	Middle School Innovation Center	31,250 00	PC
Friendly Isle United Fund c/o Molokai Community Service Council P O Box 2047 Kaunakakai, HI 96748	2016 Live Kõkua Giving Campaign	6,450 00	PC

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Organization	Project Title	Amount	Status
Friendly Isle United Fund c/o Molokai Community Service Council P O Box 2047 Kaunakakai, HI 96748	2015 Live Kōkua Giving Campaign	415 00	PC
Na Kama Kai P O Box 240039 Honolulu, Hl 96824	Ocean safety and cultural education	2,500 00	PC
Nahoku 'Ala Inc. 1012 Piikoi Street Honolulu, HI 96814	SAT Prep Programs	2,000 00	PC
Northern Marianas College Small Business Development Center As Terlaje Campus, Building T P O Box 501250 CK Saipan, MP 96950-1250 Northern Mariana Islands	Support education programs relating to workforce needs of Commonwealth of Northern Mariana Islands, including the Business Bachelor's program	10,000 00	PC
Ohana Arts 95-729 Makaunulau Street Mılılanı, HI 96789	"Peace on Your Wings" program	5,000 00	PC
Pacific Century Fellows Program - Marianas Chapter P O Box 8501280 Saipan, MP 96950	Development of leaders from Commonwealth of Northern Mariana Islands	10,000 00	PC
Pacific Financial Aid Association 1314 South King Street Honolulu, HI 96814	Financial Aid Nights	7,800 00	PC
Pacific Historic Parks 94-1187 Ka Uka Blvd Waipahu, HI 96717	75th commemoration of Pearl Harbor , "Honoring the Past, Inspiring the Future"	34,250 00	PC
Pacific Region Baseball Inc P O Box 17865 Honolulu, HI 96817-0865	Goodwill Tour	2,500 00	PC
Pacific Resources for Education and Learning 1136 Union Mall, PH 1A Honolulu, HI 96813	Ulu Kalıhı Program	3,000 00	PC

EIN: 99-0210467

Organization	Project Title	Amount .	Status
Palolo Chinese Home 2459 10th Avenue Honolulu, Hi 96816-3051	Phase IV of campus redevelopment - construction of Progressive Care Complex	16,000 00	PC
Parents and Children Together 1485 Linapuni Street, Suite 105 Honolulu, HI 96819-3575	Keiki Day Program	8,000 00	PC
Parents and Children Together 1485 Linapuni Street, Suite 105 Honolulu, HI 96819-3575	2015 Live Kōkua Giving Campaign	7,790 00	PC
Puget Sound Region of the United States Volleyball Assoc 6900 220th Street SW Mount Lake Terrace, WA 98043-2123	Scholarships for students to attend volleyball clinics	4,800 00	PC
Queen's Medical Center 1301 Punchbowl Street Fund Development Department Harkness Annex, Room 11 Honolulu, HI 96813	Renovation of The Queen's Medical Center - West O'ahu	30,000 00	PC
Hawaii Community Television P O Box 61816 Honolulu, HI 96839	Education Program for Hawaii Public Middle and High Schools (Fiscal Sponsor for Red Sun Productions)	10,000 00	PC
Roman Catholic Church in Samoa-Pago Pago Diocese of Samoa - Pago Pago P O Box 596 Pago Pago, AS 96799	Hope House for low-to moderate-income elderly	10,000 00	Church
Ronald McDonald House Charities of Hawaii, Inc 1970 Judd Hillside Road Honolulu, HI 96822	2015 Live Kōkua Giving Campaign	8,633 82	PC
Ronald McDonald House Charities of Hawaii, Inc 1970 Judd Hillside Road Honolulu, HI 96822	2016 Live Kōkua Giving Campaign	16,644 00	PC
Sacred Hearts Academy 3253 Waialae Avenue Honolulu, HI 96816	Annual Science Symposium for Girls	10,000 00	PC

EIN: 99-0210467

Organization	Project Title	Amount -	Status
Sacred Hearts Academy 3253 Waialae Avenue Honolulu, HI 96816	Personal Finance Day with the Federal Reserve Bank of San Francisco	2,750 00	PC ·
The Salvation Army Hawaiian & Pacific Islands Division 2950 Manoa Road Honolulu, HI 96822	Soup Kitchen Program in Salpan	5,000 00	PC
Searider Productions Foundation 84-370 Makaha Valley Road Waianae, HI 96792	Program support	5,000 00	PC
Special Education Center of Hawaii (SECOH) 708 Palekaua Street Honolulu, HI 96816-4755	2015 Live Kōkua Giving Campaign	2,000 97	PC
Special Olympics Hawaii, Inc 1833 Kalakaua Avenue, Suite 500 Honolulu, HI 96815	2015 Live Kōkua Giving Campaign	9,003 93	PC
Special Olympics Hawaii, Inc 1833 Kalakaua Avenue, Suite 500 Honolulu, HI 96815	2016 Live Kōkua Giving Campaign	14,698 00	PC
Susan G Komen® Breast Cancer Foundation, Hawaii 3555 Harding Ave - Suite 2D Honolulu, Hawaii 96816	2016 Live Kökua Giving Campaign	12,351 00	PC
Sustainable Coastlines Hawaii 3409 Sierra Drive Honolulu, HI 96816	Coastline Preservation and Education Program	2,500 00	PC
Teach For America Hawaii 500 Ala Moana Blvd , Suite 3-400 Honolulu, HI 96813	Program support	30,000 00	PC
Nature Conservancy, Hawaii Chapter 923 Nuuanu Ave Honolulu, Hi 96817	Program support	5,000 00	PC
St Andrew's Schools 224 Queen Emma Square Honolulu, HI 96813-2304	St Andrew's Preparatory School for Boys	16,000 00	PC

EIN: 99-0210467

Form 990-PF, Part XV, Line 3a - Grants Paid in 2016

Organization	Project Title	Amount	Status
United States Navy Memorial Foundation 701 Pennsylvania Avenue NW Washington, DC 20004	Lone Sailor Statue at Pearl Harbor	30,000 00	PC
University of Guam Endowment Foundation UOG Station Mangilao, Guam 96923	Center for Entrepreneurship and Innovation	25,000 00	PC
University of Hawaii Foundation 2444 Dole Street Bachman Hall 105 Honolulu, HI 96822	Pacific Regional Breadfruit Initiative research, testing and development in American Samoa	5,000 00	PC
University of Hawaii Foundation 2444 Dole Street Bachman Hall 105 Honolulu, HI 96822	University of Hawaii Shidler College of Business, Pacific Asian Center for Entrepreneurship (PACE)	12,500 00	PC
Volcano Art Center P O Box 129 Volcano, HI 96785	Educational programs for youth and families	6,000 00	PC
Waikiki Health Center 277 Ohua Avenue Honolulu, HI 96815	2015 Live Kõkua Giving Campaign	3,451 72	PC
Waikıkı Health Center 277 Ohua Avenue Honolulu, HI 96815	2016 Live Kōkua Community Walk - Youth Outreach Program	19,408 00	PC
West Hawaii Community Health Center Inc 75-5751 Kuakini Highway, Suite 203 Kailua-Kona, Hl 96740	Medical and dental facility at Kealakehe, North Kona	17,000 00	PC
YMCA of Honolulu 1441 Palı Hıghway Honolulu, HI 96813	Youth programs, including Healthy Kids Day	5,000 00	PC
YWCA of Oahu 1040 Richards Street Honolulu, HI 96813	2016 Live Kōkua Community Walk - Homebase at Fernhurst Transitional Housing	38,816 00	PC

STATEMENT GRANT-1 Page 11 of 11

Bank of Hawaii Foundation EIN: 99-0210467 Form 990-PF, Part XV, Line 3b - 2016 Grants Approved For Future Payment

Payee Organization	Foundation Status	Purpose of Grant or Contribution	<u>Amount</u>
American Cancer Society, Hawaii Pacific Region 2370 Nuuanu Avenue Honolulu, HI 96817	PC	Hope Lodge	\$50 000 00
American National Red Cross, Hawaii State Chapter 4155 Diamond Head Road Honolulu, HI 96816	PC	Disaster Preparedness & Response Program	\$10,000 00
Assets School One Ohana Nui Way Honolulu, Hl 96818	PC	K-4 Village (Campus expansion)	\$100,000 00
Carole Kai Charities, Inc 418 Kuwili Street, Suite 102 Honolulu, HI 96817	PC	2017 Kaiser Permanente Great Aloha Run - Sounds of Freedom	\$8,500 00
Friends of the Makiki Community Library 1527 Keeaumoku Street Honolulu, HI 96822	PC	Program Support	\$1,000 00
Hale Kipa Inc 615 Piikoi Street, Suite 203 Honolulu, HI 96814-3139	PC	New West Oahu campus	\$50,000 00
Hawaii Community Foundation 827 Fort Street Honolulu, HI 96813	PC	Bank of Hawaii Foundation Scholarship Fund for the 2017-2018 academic year	\$105,000 00
Hawaiian Community Assets Inc 1050 Queen Street, Suite 201 Honolulu, HI 96814	PC	Financial Education for Homeless Individuals and Families	\$1,500 00
University of Guam Endowment Foundation Inc UOG Station Mangilao, Guam 96923	PC	Center for Entrepreneurship and Innovation	\$75 000 00
Young Men's Christian Association of Honolulu 1441 Pali Hwy Honolulu, HI 96813	PC	Healthy Kids Day	\$3,000 00
Young Men's Christian Association of Honolulu 1441 Pali Hwy Honolulu, HI 96813	PC	Central Middle School Mentoring Program	\$1,300 00
		Total	\$405,300 00

FORM 990-PF	ACCOUNTII	NG FEES	Si	PATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK OF HAWAII TAX PREPARATION FEES AUDIT FEES	10,995. 11,764.	3,299. 5,882.		7,696. 5,882.
TO FORM 990-PF, PG 1, LN 16B	22,759.	9,181.		13,578.
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FORM 990-PF O	THER PROFES	SIONAL FEES	S'	TATEMENT 6
FORM 990-PF C	(A)	(B)	(C)	(D)
FORM 990-PF O	 			
DESCRIPTION BANK OF HAWAII INVESTMENT MANAGEMENT FEES BANK OF HAWAII CHARITABLE	(A) EXPENSES	(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE
DESCRIPTION BANK OF HAWAII INVESTMENT MANAGEMENT FEES	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITABLE PURPOSES