

# Form 990-PF

### **Return of Private Foundation**

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

For	calen	dar year 2017 or tax year beginning	, 2017	, and e	nding		, 20
Nar	ne of fou				A Employe	r identification numb	
		street (or P.O box number if mail is not delivered to street address)	Room/	/surte		e number (see instruct - 396-0269	ions)
City	or town	, state or province, country, and ZiP or foreign postal code	<del></del>		C If exempt	tion application is pend	ling, check here ▶ □
Ho	nolul	ı, HI, 96821		]	·		
G	Check	all that apply:  Initial return  Initial return	n of a former public	charity	D 1. Foreig	n organizations, check	here ▶ 🔲
		☐ Final return ☐ Amended		1	2. Foreig	n organizations meetin	a the 85% test.
		Address change Name cha			check	here and attach compi	utation >
		type of organization: Section 501(c)(3) exempt p				foundation status was 07(b)(1)(A), check here	
		n 4947(a)(1) nonexempt charitable trust					_
		arket value of all assets at J Accounting method	i: [v] Casn ∐ Ac	cruai		ndation is in a 60-mon	
	ine 16	year (from Part II, col. (c), ☐ Other (specify)  > 714,568 ☐ (Part I, column (d) must b	e on cach basis \		ulluer se	ction 507(b)(1)(B), chec	Kildle .
_	art I		T				(d) Disbursements
	21 ( )	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for chantable
		the amounts in column (a) (see instructions).)	books	121	come	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	75,000	an 5		70 M 700 0 00 0 0 0 0 0 0 0 0 0 0 0 0 0	5.35
	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B	The Book of the state of the	- 12 mg 2 mg 2	27	THE MIDDEN TO COLOR WAS A TO SE	and the second of the second
	3	Interest on savings and temporary cash investments	211				
	4	Dividends and interest from securities					
	5a	Gross rents					
	b	Net rental income or (loss)					
9	6a	Net gain or (loss) from sale of assets not on line 10			· · · · · · · · · · · · · · · · · · ·		
晨		Gross sales price for all assets on line 6a	where we are supportunity	* . * ** . **	12 34 pt 24	ما المام	a di indocessa beren idabili da
Revenue	7	Capital gain net income (from Part IV, line 2)				william that some with	Particular and the second of the second of
Ť	18/	Net short-term capital gain	,				
	1. Y	unceme modifications					
<u> </u>	(10a)	Gross legs less returns and allowances					
•	18	Avess: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					ļ
	11	Other ncome (attach schedule)	70.044				المعلى خراجه بيها محاد ال محاد المراد المرا
	12	Total. Add lines 1 through 11	75,211		0		} <u>-</u>
S	13	Compensation of officers, directors, trustees, etc.	0		0		0
38	14	Other employee salaries and wages	-				<del> </del>
Expenses	15	Pension plans, employee benefits  Legal food (ettach populus)  Schedule 5	;} <del></del>				<del>                                     </del>
鮤	16a	Legal fees (attach schedule)	2.000			<del> </del>	<del>  </del>
	0	Accounting fees (attach schedule) Schedule 5  Other professional fees (attach schedule)	2,000			<del> </del>	<del> </del>
á	17	Other professional fees (attach schedule)					<del> </del>
Str	18	Taxes (attach schedule) (see instructions)			<del></del>	<del> </del>	<del> </del>
Ë	19	Depreciation (attach schedule) and depletion			<del></del>	<del> </del>	<del> </del>
Ē	20	Occupancy				<del> </del>	<del> </del>
Ă	21	Travel, conferences, and meetings				<del> </del>	<del> </del>
5	22	Duinting and multipations		<del></del>		<del> </del>	<del> </del>
Ę.	23	Other expenses (attach schedule) Schedule 8	175				1
Ę	24	Total operating and administrative expenses.					
Ē		Add lines 13 through 23	2,175		0	(	0
Operating and Administrative	25	Contributions, gifts, grants paid Schedule 9	34,100				34,100
0	26	Total expenses and disbursements. Add lines 24 and 25	36,275		0	0	<del></del>
}	27	Subtract line 26 from line 12:					
b 2	а	Excess of revenue over expenses and disbursements	38,936				
	b	Net investment income (if negative, enter -0-) .	- 4 - 52		0		· · · · · · · · · · · · · · · · · · ·
ڈ		Adjusted net income (if negative, enter -0-)		L			4
n For	Paper	work Reduction Act Notice, see instructions.	Cat. No	11289X		F	orm <b>990-PF</b> (2017)

2 Enter amount from Part I, line 27a       2       38,936         3 Other increases not included in line 2 (itemize) ► Schedule       3         4 Add lines 1, 2, and 3       4       714,568         5 Decreases not included in line 2 (itemize) ► Schedule       5	Da	Attached schedules and amounts in the description column		Beginning of year	End o	ot year
2 Savings and temporary cash nivestments	-Pa	Iden	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
A Accounts receivable ▶ Less: allowance for doubtful accounts ▶    Pledges receivable ▶ Less: allowance for doubtful accounts ▶		1				
A Accounts receivable ▶ Less: allowance for doubtful accounts ▶    Pledges receivable ▶ Less: allowance for doubtful accounts ▶		2	Savings and temporary cash investments	675,632	714,568	714,568
Less: allowance for doubtful accounts ►  4 Piedges receivable Less: allowance for doubtful accounts ►  5 Grants receivable  7 Other notes and loars receivable, described by less: allowance for doubtful accounts ►  7 Other notes and loars receivable stude, sheedule) ►  Less: allowance for doubtful accounts ►  7 Other notes and loars receivable fattach schedule) ►  Less: allowance for doubtful accounts ►  8 Inventronies for sale or use  9 Prepaid expenses and deferred charges  10a investments—Cus and state government obligations (attach schedule)  1 Investments—Corporate stock (attach schedule)  1 Investments—Corporate stock (attach schedule)  1 Investments—Corporate stock (attach schedule)  1 Investments—Other (attach schedule)  1 Investments—Charle (attach schedule)  2 Investments—Charle (attach schedule)  3 Investments—Charle (attach schedule)  4 Investments—Charle (attach schedule)  5 Investments—Charle (attach schedule)  2 Investments—Charle (attach schedule)  2 Investments—Charle (attach schedule)  3 Investments—Charle (attach schedule)  4 Investments—Charle (attach schedule)  5 Investments—Charle (at		3	Accounts receivable ▶			
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Less: allowance for doubtful accounts ▶  5 Grants receivable  7 Other notes and loans receivable (attach schedule)  Less: allowance for doubtful accounts ▶  10a Investments—Other of the schedule   Less: allowance for doubtful accounts ▶  10b Investments—U.S. and state government obligations (attach schedule)  b Investments—Corporate stock (attach schedule)  c Investments—Corporate stock (attach schedule)  1 Investments—Corporate stock (attach schedule)  1 Investments—Investments—Graph (attach schedule)  1 Investments—Graph (attach schedule)  2 Investments—Graph (attach schedule)  3 Investments—Graph (attach schedule)  4 Investments—Graph (attach schedule)  5 Other assets (describe ▶ Schedule  5 Other assets (describe ▶ Schedule  6 Grants payable and accrued expenses  1 Grants payable and accrued expenses  1 Grants payable and accrued expenses  1 Total liabilities (add lines 17 through 22)  2 Other liabilities (accleribe ≯ Deferred revenue  2 Total liabilities (accleribe ≯ Deferred revenue  2 Total liabilities (accleribe ≯ Deferred revenue  3 Total liabilities (accleribe ≯ Deferred revenue  4 Unrestricted  5 Total read sasets or fund balances (see instructions)  5 Total liabilities and not follow SFAS 117, check here ▶ Ø and complete lines 27 through 31.  2 Total liabilities (accleribe ≯ Deferred revenue)  3 Total liabilities and not assets/fund balances  1 Total read assets or fund balances (see instructions)  3 Total read assets or fund balances (see instructions)  4 Total read assets or fund balances (		4				
S Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule)  2						
Tother notes and loans receivable (attach schedule)   Less: allowance for doubtful accounts   9 Prepaid expenses and deferred charges   10a investments—U.S. and state government obligations (attach schedule)   10 investments—Corporate stock (attach schedule)   11 investments—Groporate stock (attach schedule)   12 investments—or mortgage loans   13 investments—or mortgage loans   14 Land, buildings, and equignent loans   15 investments—or mortgage loans   16 investments—or mortgage loans   17 Accounts payable and accrued expenses   18 Grants payable and accrued expenses   19 Total assets (to be completed by all filers—see the instructions Also, see page 1, item 1)   17 Accounts payable and accrued expenses   18 Grants payable and accrued expenses   19 Deferred revenue   20 Loans from officers, directors, trustees, and other disqualified directors   21 Mortgages and other notes payable (attach schedule)   22 Other liabilities (describe   23 Total liabilities (describe   24 Investricted   25 Temporarily restricted   26 Permanently restricted   27 Capital stock, trust principal, or current funds   28 Paid-in or capital surplus, or land, bldg., and equipment fund   29 Retained samings, accumulated income, endowment, or other funds   30 Total reit assets or fund balances (see instructions)   31 Total intabilities and net assets/fund balances (see instructions)   31 Total intabilities and net assets/fund balances (see instructions)   31 Total net assets or fund balances (see instructions)   31 Total net assets or fund balances (see instructions)   32 Total reit assets or fund balances (see instructions)   33 Total net assets or fund balances (see instructions)   34 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)   4 Add lines 1, 2, and 3.   5 Chectures   5 Schedule   5 Checture   5 Chec		5	Grants receivable			
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11   Investments—land, buildings, and equipment: pass   Less: accumulated depreciation (lattach schedule)		l	· · · · · · · · · · · · · · · · · · ·	<del>-</del>		
12   Investments—mortgage loans   Investments—other (attach schedule)   Schedule   Land, buildings, and equipmegt   Page   Land, buildings, and equipment fund   Page   Page   Land, buildings   Page			Investments—land huldings and adultment hasis			<del>                                     </del>
12   Investments—mortgage loans   Investments—other (attach schedule)   Schedule   Land, buildings, and equipmegt   Page   Land, buildings, and equipment fund   Page   Page   Land, buildings   Page		' '	Local controlled depreciation (etter) schedule	[	<del></del>	<del> </del>
13		12				
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Less: accumulated depreciation (attach schedule)    15 Other assets (describe   Schedule   )  16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item i)   675,632   714,568    17 Accounts payable and accrued expenses		1		[ - 7.47	క్షాం కండి. <sup>1</sup> . కార్మ హెక్క	
Total assets (to be completed by all filers—see the instructions. Also, see page 1, item i)		14	Land, buildings, and oddipings, page	J		
16 Total assets (to be completed by all filers—see the instructions. Also, see page 1, item l)		45				
instructions. Also, see page 1, item I) 675,632 714,568 714,56		1				<del></del>
17 Accounts payable and accrued expenses		ם ו			<b>7</b> 44 <b>700</b>	
18   Grants payable   Schedule   20   Loans from officers, directors, trustees, and other disqualifies   Grants payable   21   Mortgages and other notes payable (attach schedule)   22   Other liabilities (describe   23   Total liabilities (add lines 17 through 22)   0   0   0   0   0   0   0   0   0		4-		6/5,632	/14,568	/14,568
19 Deferred revenue . Schedule 20 Loans from officers, directors, trustees, and other disqualifies persons 21 Mortgages and other notes payable (attach schedule)		1	, -			
Description officers, directors, trustees, and other disqualifies descriptions.    20	S		• •			1024
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Foundations that follow SFAS 117, check nere and complete lines 24 through 26, and lines 30 and 31.  24 Unrestricted			Other liabilities (describe > )			4
Foundations that follow SFAS 117, check nere and complete lines 24 through 26, and lines 30 and 31.  24 Unrestricted	_	23	lotal Habilities (add lines 17 through 22)	0	0	4
Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds	S		Foundations that follow SFAS 117, check here >			
Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds	Ö	1	· -	}		· · · · · · · · · · · · · · · · · · ·
Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds	a					4 -3 50 1336970
Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations that do not follow SFAS 117, check here Foundations and complete lines 27 through 31.  27 Capital stock, trust principal, or current funds	匆	1	· · · · · · · · · · · · · · · · · · ·			_}
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) Schedule  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) Schedule	70	26	·		<del> </del>	_
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) Schedule  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) Schedule	S	-		ļ		
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) Schedule  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) Schedule	Ŀ		•	]		
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) Schedule  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) Schedule	ō	27	· · · · · · · · · · · · · · · · · · ·	100	100	
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) Schedule  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) Schedule	뜮	28	· · · · · · · · · · · · · · · · · · ·			_
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) Schedule  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) Schedule	SS	29				4
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) Schedule  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) Schedule	₹.	30		675,632	714,568	
Part III Analysis of Changes in Net Assets or Fund Balances  1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)  2 Enter amount from Part I, line 27a  3 Other increases not included in line 2 (itemize) Schedule  4 Add lines 1, 2, and 3  5 Decreases not included in line 2 (itemize) Schedule	ē	31		]		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	_	<u></u>			714,568	<u> </u>
end-of-year figure reported on prior year's return)						
2 Enter amount from Part I, line 27a						
3 Other increases not included in line 2 (itemize) ► Schedule  4 Add lines 1, 2, and 3		enc	d-of-year figure reported on prior year's return)		· · · <u>[ 1</u>	675,632
4 Add lines 1, 2, and 3	:				2	38,936
4 Add lines 1, 2, and 3	;	3 Oth	ner increases not included in line 2 (itemize) ▶ Schedule	3		
5 Decreases not included in line 2 (itemize) ► Schedule 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 714,568	•	4 Add	d lines 1, 2, and 3			714,568
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 714,568		5 Dec	creases not included in line 2 (itemize) ► Schedule		5	
	(	6 Tot	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lin	ne 30 <b>6</b>	714,568

Part	V Capital Gains and	I Losses for Tax on Investm	<u>nent In</u>	come				
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story bnck warehouse, or common stock, 200 shs MLC Co)  1a NA							o, day, yr)	(d) Date sold (mo., day, yr.)
1a	NA							
b_					·			
<u> </u>				···		ļ		
<u>d</u>		· · · · · · · · · · · · · · · · · · ·				ļ		
<u>θ</u>		(O.D.) and Alban allowed		(-1.01	-166	<del>                                     </del>		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		plus exper	other basis nse of sale			n or (loss) f) minus (g))
<u>a</u>							· · · · · · · · · · · · · · · · · · ·	
b						<b> </b> -		
<u>c</u> _					<del> </del>	<b> </b>		· · ·
<u>d</u>				<del></del>	<u>-</u>		<del></del>	
<u> </u>	Complete only for assets sho	wing gain in column (h) and owned	by the fo	undation	on 12/31/69			
	(i) FMV as of 12/31/69	(i) Adjusted basis as of 12/31/69		(k) Exces	s of col. (i) (j), if any		coi (k), but no	l (h) gain minus t less than -0-) <b>or</b> rom col (h))
a				.,		<del> </del>		<del>, , , , , , , , , , , , , , , , , , , </del>
<u>_</u>						<u> </u>		
С				•				
d								
е								
2	Capital gain net income o				rt I, line 7 t I, line 7	2		
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instru	ctions.	If (loss)	, enter -0- in \	3		
Part		ler Section 4940(e) for Redu					me	
Was t		e this part blank. section 4942 tax on the distribu qualify under section 4940(e). Do				base p	period?	☐ Yes ☐ No
1	Enter the appropriate amo	ount in each column for each yea	ar, see t	the instru	ictions before m	akıng	any entries.	
Cale	(a)  Base penod years endar year (or tax year beginning in	(b) Adjusted qualifying distribution	s I	Net value of	(c) nonchantable-use a	ssets	Dıs (col. (b)	(d) tribution ratio divided by col. (c))
	2016	<del>i</del>	,500		640	,250	(	6.33%
	2015	39	.340		<del></del>	,342		6.54%
	2014	31	,750		567	,944		5.59%
	2013	37	,665		530	,915		7.09%
	2012	35	,955		492	,500		7.30%
2	Total of line 1, column (d)						2	32.85%
3	Average distribution ratio	for the 5-year base period—divoundation has been in existence				٠,	3	6.57%
4	Enter the net value of non	charitable-use assets for 2017 f	rom Pa	rt X, line	5		4	669,800
5	Multiply line 4 by line 3						5	44,006
6	Enter 1% of net investme	nt income (1% of Part I, line 27b	) .				6	
7	Add lines 5 and 6						7	44,006
8		ons from Part XII, line 4 ater than line 7, check the box in				that n	8 art using a 1	34,100 % tay rate. See the
	Part VI instructions	ator diarrillo 1, officer die box ii		.,	, and complete	mat p	w.rusniy d. I	/v tax rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstrue	ction	15)					
1a	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)	-13 E.	در آه اه	€. je , z					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check								
-	here ▶ ☐ and enter 1% of Part I, line 27b								
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).	<del></del>							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0						
3	Add lines 1 and 2		0						
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0						
5									
6	Credits/Payments:		-						
a	2017 estimated tax payments and 2016 overpayment credited to 2017		ſ	ı					
b	Tax paid with application for extension of time to file (Form 8868) . 6c			ı					
ď	Backup withholding erroneously withheld 6d		. e. E.						
7	Total credits and payments. Add lines 6a through 6d	<del></del>	0						
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 ▶ 9		0						
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		0						
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11								
	VII-A Statements Regarding Activities	ा ज्या							
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	<del></del>	Yes	No					
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	1a		✓					
	instructions for the definition	1b		1					
	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.								
C	Did the foundation file Form 1120-POL for this year?	1c		<b>√</b>					
d	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$								
е	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		1					
	If "Yes," attach a detailed description of the activities.	.	ļ	Į					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			ستجصد					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<b>√</b>					
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<b>√</b>					
ь 5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b 5	N N	_					
•	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:	] [	1	l					
	By language in the governing instrument, or		ı						
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that		ł						
	conflict with the state law remain in the governing instrument?	6	N	Α					
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	<b>✓</b>						
<b>8</b> a	Enter the states to which the foundation reports or with which it is registered. See instructions. ►  Hawaii								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General								
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<b>✓</b>						
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			.5 %					
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"			,					
46	complete Part XIV	9		✓_					
10	names and addresses	40	,	/Δ					
		10 m 990	N) 2-PF						
	F(	m 111 27274		1/11/1					

Part	VII-A Statements Regarding Activities (continued)			
		28 July	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		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address   None	13	1	
14	The books are in case of P. Dieberd Okite	/396-0	1269	
		96.82		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here	<u> </u>		▶ [
	and enter the amount of tax-exempt interest received or accrued during the year		•	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<b>✓</b>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	. 30 7	رايدات الموس	د نه تانعه س
	the foreign country ▶	Service of	J. 3 P. C.	- appr
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u></u>	Yes	No
1a	During the year, did the foundation (either directly or indirectly):			1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	مد السيالين الأعداد	يىر ئىڭلىرى ئايلىل	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   Yes Vo			
	(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" if the			1
	foundation agreed to make a grant to or to employ the official for a period after			ŀ
	termination of government service, if terminating within 90 days.)	4000	94.75°938	Sea orași
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	5. E. 6	2.5 30°-	A 28-2
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		1
_	Organizations relying on a current notice regarding disaster assistance, check here			٠
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 2017?	1c		1
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)):	d-700.554	~ 20.	المقدم والأو
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?	A SAT CH	ž Žďď	A.C.
	be, Part XIII) for tax year(s) beginning before 2017?			
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.)	2b		1
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20 , 20 , 20 , 20			, .
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or	] ]		
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		l l	
	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	منند	أعضمه	30 es e 5 - 5
_	foundation had excess business holdings in 2017.)	3b	N	Α
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	_		
	chamado parpode triat had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		✓

Part	VIEE Statements Regarding Activities	TOP W	nich Form	4/20	мау ве н	equire	<b>a</b> (continu	iea)		
5a	During the year, did the foundation pay or incur a	any am	ount to:		-				Yes	No
	(1) Carry on propaganda, or otherwise attempt to	o influe	nce legislatio	n (sect	ion 4945(e	))? .	Yes	Z No		CEA
	(2) Influence the outcome of any specific public	electi	on (see secti	on 495	5); or to ca	arry on,				
	directly or indirectly, any voter registration dri	ve?					∏Yes ƙ	Z No	1. 表现是	400
	(3) Provide a grant to an individual for travel, stu-	dv ord	other similar i	nurnosi	967			No	La Carrier and	of fine
	(4) Provide a grant to an organization other than							K) 140	Page 12 Philips	1.0
	section 4945(d)(4)(A)? See instructions							7	4.8	\$ 100 E
								Z] No	The man of the state of	20,
	(5) Provide for any purpose other than religious,	children or animals?						_		1
								<b>Z</b> No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the							ed ın		
	Regulations section 53.4945 or in a current notice	•	•			tructions	s		5b N	Α
	Organizations relying on a current notice regarding							▶ 🗌		
C	If the answer is "Yes" to question 5a(4), does to						N/A			
	because it maintained expenditure responsibility	for the	grant?					□No		No.
	If "Yes," attach the statement required by Regula	ations s	ection 53.49	45-5(d)	).				AND THE PARTY OF	Mess of
6a	Did the foundation, during the year, receive any	funds,	directly or inc	directly	, to pay pre	emiums	<b>,</b>			
	on a personal benefit contract?									
b	Diddle foundation of the state									
	b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .   6b   ✓   If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, was the foundation a	narty	to a probabitor	l tov ch	oltor transa	ation?	☐ Yes [	<b>7</b> No	100 Per 100 Pe	in a
b	If "Yes," did the foundation receive any proceeds								2.700.00	
	VIII Information About Officers, Direct									<u>(A</u>
rait	and Contractors	tors, i	rustees, r	Junua	uon man	agers,	підпіў Ра		mpioyees,	
1	List all officers, directors, trustees, and found	ation r	nonogoro or	d thair		ation (	San innterior			
	List all Officers, directors, trustees, and round		e, and average		mpensation	· · · · · · · · · · · · · · · · · · ·			i <u>.</u>	
	(a) Name and address	hou	rs per week	(If a	not paid,	(d) Contributions to employee benefit plans		ans	(e) Expense account other allowances	
		devoted to position		enter -0-) and		and def	deferred compensation		outer allowances	
	a Matsueda	Dir		0	1	0				
	sipo St; Honolulu, HI, 96825									
	e Okita	Dir/VP/	Sec .		0		0			
	(uliouou Road; Honolulu, HI, 96821						·············		<u> </u>	
Rich	ard Okita	Dir/Pre	s/Treas			ŀ	_			•
<u> 385 I</u>	Kuliouou Road; Honolulu, HI, 96821				0			0		0
						Į				
2	Compensation of five highest-paid employee	s (oth	er than thos	se incl	uded on li	ne 1-	see instruc	tion	s). If none,	enter
	"NONE."									
			(b) Title, and a	verane			(d) Contribute		i	
	<ul> <li>a) Name and address of each employee paid more than \$50,00</li> </ul>	0	hours per v	veek 🖱	(c) Compe	nsation	employee be plans and def		(e) Expense ac other allowar	
			devoted to p	osition			compensat		other allower	1003
NON										
						0		0		0
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	**************************************		<u> </u>		<del> </del>				<u> </u>	
			İ							
					<del>                                     </del>					
			<u> </u>							
	***************************************							i		
Total	number of other employees paid eyes \$50,000		<u> </u>		<u> </u>		L			
ıotal	number of other employees paid over \$50,000 .	• •	<u> </u>		· · · ·			▶	0	

Par	VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
3	Five t	nighest-paid independent contractors for professional services. See instructions. If none, enter "NONE	n
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NO	NE		0
			U
Tota	numbe	er of others receiving over \$50,000 for professional services	0
-	* I V A	Commence of Direct Observable Astinities	
Par	t IX-A	Summary of Direct Charitable Activities	
		adation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of s and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	None	9	
			0
2			
_			
3			
4			
•		,	
Par	t IX-B	Summary of Program-Related Investments (see instructions)	
De	scribe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	Non	D	_
			0
2			
Al	other pro	gram-related investments. See instructions	
3	Non		
			0
Tota	I. Add i	nes 1 through 3	

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn found	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	NA
b	Average of monthly cash balances	1b	680,000
C	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	680,000
Θ	Reduction claimed for blockage or other factors reported on lines 1a and	12.3.1	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	680,000
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	<b>!</b>	
	instructions)	4	10,200
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	669,800
6	Minimum investment return. Enter 5% of line 5	6	33,490
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations, check here ► ☐ and do not complete this part.)	oundatio	าร
1	Minimum investment return from Part X, line 6	1	33,490
2a	Tax on investment income for 2017 from Part VI, line 5		<del></del>
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b	1	
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	33,490
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	33,490
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		· · · · · · · · · · · · · · · · · · ·
	line 1	7	33,490
Part	XII Qualifying Distributions (see instructions)	<del></del>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		<del></del>
' a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	34,100
b	Program-related investments—total from Part IX-B	1b	37,100
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	<del>10</del>	
~	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	<del></del>	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	34,100
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del></del>	34,100
•	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	34,100
Ü	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	<del></del>	<del></del>

Part	XIII Undistributed Income (see instruction	ns)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	<b>(c)</b> 2016	<b>(d)</b> 2017
	line 7				33,490
2	Undistributed income, if any, as of the end of 2017:			·	
a	Enter amount for 2016 only				
b	Total for prior years: 20 20 ,20 ,20 ,20		···		
3	Excess distributions carryover, if any, to 2017:	.			
a	From 2012				
b	From 2013				
C	From 2014				
d e	From 2016 8,487				
f	Total of lines 3a through e	43,562			
4	Qualifying distributions for 2017 from Part XII,	10,002	<del></del>		
•	line 4: ▶ \$ 34,100				- ,
а	Applied to 2016, but not more than line 2a .				
_	Applied to undistributed income of prior years		· · · · · · · · · · · · · · · · · · ·		
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election			<del></del>	
	required—see instructions)				
d	Applied to 2017 distributable amount				33,490
е	Remaining amount distributed out of corpus	610			, ,
5	Excess distributions carryover applied to 2017				
	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	44,172			ير ج
b	Prior years' undistributed income. Subtract				A 1.1 (F)
	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				
d	Subtract line 6c from line 6b. Taxable amount—see instructions		0		,
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions			0	
f	Undistributed income for 2017. Subtract lines				i
	4d and 5 from line 1. This amount must be				
	distributed in 2018				0
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				ļ
	170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2012 not	<del></del>			
0	applied on line 5 or line 7 (see instructions).	11,330			
9	Excess distributions carryover to 2018.	11,000			
9	Subtract lines 7 and 8 from line 6a	32,842			- {
10	Analysis of line 9:	02,042			
a	Excess from 2013				
Ь	Excess from 2014 3,353				
c	Excess from 2015 9,273				
d	Excess from 2016 8,487				
е	Excess from 2017 <b>610</b>				

Part 2	XIV Private Operating Founda	tione (see instru	otions and Part \	/II-A guestion C	1	1 age 10
					<del> </del>	
1a	If the foundation has received a ruling		-	, ,		f
	foundation, and the ruling is effective for		•			
_	Check box to indicate whether the four	<del>,</del>	operating foundati		ection   4942(j)(	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	<b>(b)</b> 2016	(c) 2015	(d) 2014	(0) 1044
	each year listed	N/A	N/A	N/A	N/A	N/A
b	85% of line 2a	N/A	N/A	N/A	N/A	N/A
c	Qualifying distributions from Part XII,					
•	line 4 for each year listed	N/A	N/A	N/A	N/A	N/A
	• .	100	14/4	- INA	N/A	N/A
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					N/A
е	Qualifying distributions made directly					ļ
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c	NÌA	N/A	N/A	N/A	N/A
3	Complete 3a, b, or c for the					·
	alternative test relied upon:					
а	"Assets" alternative test-enter:					
•	(1) Value of all assets					N/A
	(2) Value of assets qualifying under		<del></del>		· · · · · · · · · · · · · · · · · · ·	17/2
	section 4942(i)(3)(B)(i)					A.//A
h	"Endowment" alternative test—enter 2/3		<b></b>			N/A
D	of minimum investment return shown in					
	Part X, line 6 for each year listed	N/A	N/A	N/A	N/A	N/A
C	"Support" alternative test enter:	ļ			Į.	ļ
	(1) Total support other than gross					
	investment income (interest,				1	}
	dividends, rents, payments on			\ \ \		
	securities loans (section 512(a)(5)), or royalties)					N/A
	(2) Support from general public	·	ļ. ———	<u> </u>	<del></del>	<u>!\/\</u>
	and 5 or more exempt					
_	organizations as provided in					
	section 4942(j)(3)(B)(iii)	<u></u>	<u> </u>			N/A
	(3) Largest amount of support from	\	1			
	an exempt organization	ļ				N/A
	(4) Gross investment income			L	<u> </u>	N/A
Part	XV Supplementary Information	on (Complete th	his part only if the	ne foundation h	ad \$5,000 or me	ore in assets at
	any time during the year-	-see instruction	ns.)			
1	Information Regarding Foundation	Managers:			<del></del>	
а	List any managers of the foundation	who have contrib	uted more than 2%	6 of the total cont	ributions received	by the foundation
	before the close of any tax year (but o	only if they have c	ontributed more th	an \$5,000). (See s	ection 507(d)(2).)	•
1. G	race Y. Okita 2. Richard Y. Oki			, , , , , , , , , , , , , , , , , , , ,	(-/(-//	
	List any managers of the foundation		r more of the ston	k of a corporation	o (or an equally la	rge portion of the
J	ownership of a partnership or other e					tac bornon or the
NA	omitted a partitionally of other of		. Juniadion Has a	. C / C O G G G G I III		
		0	0-1-1-11			
2	Information Regarding Contribution					
	Check here ▶ ☐ if the foundation					
	unsolicited requests for funds. If the f		gifts, grants, etc.,	to individuals or o	rganizations unde	r other conditions,
	complete items 2a, b, c, and d. See in	nstructions.				
а	The name, address, and telephone nu	umber or email ad	dress of the person	n to whom applica	itions should be ac	ddressed:
			-			
NA						
<u>b</u>	The form in which applications should	be submitted an	d information and	materials they sho	nlq iucliide.	
_	The series of th					
NA						
	Any submission deadlines		<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>	
C	Any submission deadlines:					
NA						
d	Any restrictions or limitations on av	varos, such as b	y geographical ar	eas, chantable fi	eids, kinds of ins	titutions, or other
***	factors:					
ΝΔ						

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or status of **Amount** contribution Name and address (home or business) recipient or substantial contributor a Paid during the year See Fm 990-PF, Part I, Line 25, SCHEDULE 9, attached **Community Support Donee** None POF 4,700 See Fm 990-PF, Part I, Line 25, SCHEDULE 9, attached None POF **Educational Donee** 28,200 POF See Fm 990-PF, Part I, Line 25, SCHEDULE 9, attached Other Donee 1,200 34,100 Approved for future payment

nte	r gross amounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by section	on 512, 513, or 514	(e) Related or exempt
	į	_ (a)	(b)	(c)	(d)	function income
4	Program service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
•	a Not Applicable	<del></del>				<del> </del>
	b					<del> </del>
	С	<del> </del>		<del></del>		<del>                                     </del>
	d	<del></del>		<del> </del>		<del></del>
	<u> </u>			<del> </del>		
	•			<u> </u>	<del></del>	<del> </del>
			·	<del></del>		<u> </u>
_	g Fees and contracts from government agencies	ļ				
2	Membership dues and assessments			ļ		<u> </u>
3	Interest on savings and temporary cash investments	14	211	<u> </u>		
4	Dividends and interest from securities	14		L	<del></del>	
5	Net rental income or (loss) from real estate:		7 -2 34 -2"		· · · · · · · · · · · · · · · · · · ·	The state of the s
	a Debt-financed property				·	<u> </u>
	<b>b</b> Not debt-financed property	ļ	<del></del>	<u> </u>		
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11					y - 4	<u> </u>
	h	<u> </u>				1
		<del></del>		<del> </del>	· · · · · · · · · · · · · · · · · · ·	·
	·	-		<del>   </del>	<del></del>	
	d	<del> </del>		<del> </del>		<del> </del>
		L		1 3		
10	Subtotal Add columns (b) (d) and (e)	1	244		^	
					0	
13	Total. Add line 12, columns (b), (d), and (e)				13	211
<b>13</b> See	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	s.)				
<b>13</b> See Pai	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation TXVI-B Relationship of Activities to the A	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
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13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
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13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211
13 See Pal Lin	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation rt XVI-B Relationship of Activities to the A e No. Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishme	ent of Exemp	t Purposes	13	211

Part	XVII	Information Organization	n Regarding Trans	fers to and Trans	actions and R	elationship	s With N	onchar	itable	Exe	mpt
1	ın se	e organization d	lirectly or indirectly er ther than section 5							Yes	No
а	-		oorting foundation to	a noncharitable exen	npt organization	of:					
									1a(1)	N.	A
		her assets .							1a(2)		A
b	• •	transactions:						• •		3 sp	1 3
			a noncharitable exem	nnt organization					1b(1)	N	A
			ets from a noncharitat					• •	1b(2)		A
			equipment, or other	•							A
			• •						1b(3)	-	
			rangements						1b(4)		A
			rantees					• •	1b(5)		<u> </u>
			rvices or membership						1b(6)		Α
C			quipment, mailing list						1c		A
d	If the	answer to any	of the above is "Yes,	" complete the follow	wing schedule. (	Column <b>(b)</b> s	hould always	ays shov	v the	fair m	narket
			ther assets, or service								
		in any transaction	on or sharing arrange			f the goods,	other asse	ts, or se	rvices	recei	ived.
(a) Line	e no (l	Amount involved	(c) Name of noncha	ritable exempt organization	n (d) Descr	ription of transfer	s, transaction	ns, and sha	nng arr	angem	ents
		·· _, · · · · · · · · · · · · · · · · ·			<del></del>	<del></del>					
			<del></del>			<del></del>					
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		···_				<del></del>	· · · · · -				
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<del></del>		<del> </del>	····				<del></del>				
	<u> </u>	· · · · · · · · · · · · · · · · · · ·									
2a b	descr	nbed in section 5	ectly or indirectly affil 501(c) (other than sec e following schedule.	iated with, or related tion 501(c)(3)) or in so	d to, one or mo action 527? .	re tax-exemp	ot organiza	ations · · [	] Yes	<b>Z</b>	No
		(a) Name of organ	ization	(b) Type of orga	nization	(	c) Descriptio	n of relation	nship		
	_										
			declare that I have examined					my knowled	ge and	belief, it	is true.
Sign	corre	ct, and complete. Deci	aration of preparer (other than	taxpayer) is based on all info	ormation of which prep	parer has any know	rledge	May the IF	OC eller	oo Abio	
Here	1 <b>b</b> .	Redand	COBT	17/2/2019	President			May the IF with the pr	eparer s	shown b	relow?
11016		ature of officer or tru	stee	Date Fresident				See instruc			
		Print/Type preparer		Preparer's signature		Date	<del></del> '	J <sub>D</sub>	TIN		
Paid			o namo	r reparer a signature		Daile		K ∐_} # [	(1)4		
Prep	arer	Self Prepared		L		J,	self-e	mployed			
Use		Firm's name 🕨		·			Firm's EIN 🕨				
		Firm's address ▶				Phone no.	-				

#### Attachments to IRS Form 990-PF Grace & Richard Okita Foundation 99-0349094

Tax Year 2017

					Amount
Grace Y. Okita, Dır					37,50
Richard Y. Okita, Dır					37,50
Total .					75,00
Schedule 5: Part I, Line 16a - Legal Fees					
Type of service					Amount
N/A					
Fotal					
Schedule 5: Part I, Line 16b - Accounting	Fees				
Type of service					Amount
Heli-Logistics, Inc: Svc Expenses - Account	ing, tax returns, gifting op	erations expenses		•	2,00
Total .					2,00
Schedule 5: Part I, Line 16c - Other Profes	ssional Fees				
Schedule 5: Part I, Line 16c - Other Profes  Type of service  N/A  Total	ssional Fees				Amount
Type of service 1 N/A					
Type of service 1 N/A Total					
Type of service 1 N/A Total Schedule 8: Part I, Line 23 - Other Expens					
Type of service  1 N/A Total  Schedule 8: Part I, Line 23 - Other Expens  Description  1 Morgan Stanley, etal: Bank charges  10 Amortization from schedule below					Amount 17:
Type of service  1 N/A Total  Schedule 8: Part I, Line 23 - Other Expens  Description  1 Morgan Stanley, etal: Bank charges					Amount
Type of service  1 N/A Total  Schedule 8: Part I, Line 23 - Other Expens  Description  1 Morgan Stanley, etal: Bank charges  10 Amortization from schedule below	es Date Acquired,		Deduction	Amortization	Amount 17: 17: Current
Type of service  1 N/A Total  Schedule 8: Part I, Line 23 - Other Expens  Description  1 Morgan Stanley, etal: Bank charges  10 Amortization from schedule below  Total  Amortization	Date Acquired, Completed	Cost or Other	Allowable in	Period	Amount 17: 17: Current Year
Type of service  1 N/A  Total  Schedule 8: Part I, Line 23 - Other Expens  Description  1 Morgan Stanley, etal: Bank charges  10 Amortization from schedule below  Total	es Date Acquired,	Cost or Other Basis			Amount 17: 17: Current

#### Attachments to IRS Form 990-PF Grace & Richard Okita Foundation 99-0349094

Tax Year 2017

Schedule 9: Part I, Line 25 - Co	ntributions, Gifts, Grants Paid				
		Cash	Property Other		
From detail below:		Amount	than Cash	Total	ī
Paid during the year		34,100	0	34,100	
Approved for future payment	_	0	0	0_	•
Total	=	34,100	0	34,100	ī
Paid During the Year:					
				Relationship to	
			Property Other	Disqualified	Organizational
Class of Activity:		Cash	than	Persons	Status of Dones
Donee Name	Donee Address	Amount	Cash (1)	(2)	(3)
Community Support Donee					
1 1 Volcano Community Assn	Volcano, Hawaii	200		None	Community Ctr
1.2 Cooper Center	Volcano, Hawaii	500		None	Community Ctr
1 3 Assisted Dogs Hawaii	Kahalui, Maui, HI	1,000		None	Training School
1 4 Humane Society, Hawaii	Honolulu, Hi	1,000		None	Human Society
1 5 Rehabilitation Hawaii	Honolulu, Hi	1,000		None	Rehab Ctr
1.6 Canine Companions	Oceanview, CA	1,000		None	Training School
Total Community Support Donee	_	4,700	0	•	
Educational Donee					
2.1 Le Jardin Academy	Kailua, Oahu, HI	200		None	School
2.2 St Francis Convent	Honolulu, HI	5,000		None	School
2 3 U of Washington Fdn	Seattle, WA	8,000		None	University
2.4 Cabrillo High School	Cabrillo, CA	1,000		None	High School
2.5 Tau Beta Pi	Knoxville, TN	1,000		None	Univ Honorary
2 6 Damien Memorial School	Honolulu, HI	6,000		None	School
2.7 St Louis High School	Honolulu, Hi	7,000		None	School
Total Educational Donee	_	28,200	0		00.1001
, , , ,	=			:	
Other Donee 3.1 James Pflueger Fdn	Honolulu. Hi	100		Neme	Did Obe-4: Fed-
3.2 USAF Assn	Washington, DC	100		None	Pvt Chanty Fndn
	New York, NY			None	Service Fndn
3 3 Institute of Elec, Electronic Engr Total Other Donee	INCM FOIR, INT	1,000	0	None	Prof Society
Total Other Donee	-	1,200	0	:	
Total amount paid for which the four	dation exercised				
expenditure responsibility	-		<del> </del>	•	
Total Paid During the Year		34,100	0		

<sup>(1)</sup> Additional information for property other than cash included on continuation sheet

<sup>(2)</sup> Relationship of donee if related by blood, marriage, adoption or employment (including children of employees) to any disqualified person

<sup>(3)</sup> The organizational status of donee (e.g., public charity—an organization described in section 509(a)(1), (2), or (3))

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2017

Employer identification number

Grace & Richard Okita Foundation 99 - 0349094					0349094	
Organizatio	on type (check on	e):				
Filers of:		Section:				
Form 990 or 990-EZ		☐ 501(c)( ) (enter number) organization				
		4947(a)(1) nor	nexempt chantable trust not treated as a private for	undation		
		527 political organization				
Form 990-PF		501(c)(3) exempt private foundation				
		4947(a)(1) nor	nexempt chantable trust treated as a private founda	ation		
		☐ 501(c)(3) taxa	ble private foundation			
General Ru	ile r an organization i	filing Form 990, 99 r property) from an	ization can check boxes for both the General Rule and the General Rule and the General Rule and General Rule	tributions t	otaling \$5,000	
Special Ru	les					
re <sub>!</sub> 13	gulations under se , 16a, or 16b, and	ections 509(a)(1) an that received from	on 501(c)(3) filing Form 990 or 990-EZ that met the 3 d 170(b)(1)(A)(vi), that checked Schedule A (Form 9 any one contributor, during the year, total contributorm 990, Part VIII, line 1h; or (ii) Form 990-EZ, line	90 or 990-l utions of th	EZ), Part II, line e greater of <b>(1)</b>	
co	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, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
co co du <b>G</b> e	ntributor, during t ntributions totaled ring the year for a <b>eneral Rule</b> applie	he year, contribution of more than \$1,000 on exclusively religion of this organization	on 501(c)(7), (8), or (10) filing Form 990 or 990-EZ the ons exclusively for religious, charitable, etc., purpose. If this box is checked, enter here the total contribute, charitable, etc., purpose. Don't complete any contribute on because it received nonexclusively religious, chart.	es, but no utions that of the parts aritable, etc	such were received unless the c., contributions	
	-	-	the General Rule and/or the Special Rules doesn't fi		•	

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 Employer identification number Grace & Richard Okita Foundation 99 - 0349094

Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Grace Y. Okita  385 Kuliouou Rd  Honolulu, HI, 96821		Person Payroli Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Richard Y. Okita  385 Kuliouou Rd  Honolulu, HI, 96821	\$ 37,500	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Moncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person