SCANNED MAR 2 6 2019

949106800007

Form 990-PF

Return of Private Foundation

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

2018

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.

OMB No 1545-0052

Foi	r calen	dar year 2018 or tax year beginning	ÿ <u>, 2</u>	018, aı	nd ending		, 20 .
	ne of fou		•			er identification numb	
A.TI	LAS IN	SURANCE AGENCY FOUNDATION			1 '	71-0894468	•
		street (or P O box number if mail is not delivered to street address)	R	oom/suit	e B Telepho	ne number (see instruct	ions)
102	2 BFTI	HEL STREET				808-564-8309)
City	or town	, state or province, country, and ZIP or foreign postal code			C If exemp	ition application is pend	
40	NOL UI	.U, Hi 96813					g,
_			n of a former put	olic cha	rity D. 1. Foreic	n organizations, check	here ▶ □
_	000	☐ Final return ☐ Amended	•		1	, ,	_
		. Address change Name cha	nge			in organizations meetin here and attach compi	
Н	Check	type of organization: Section 501(c)(3) exempt p		n .	I E, If private	foundation status was	terminated under
Ť		on 4947(a)(1) nonexempt charitable trust Other tax			section !	507(b)(1)(A), check here	▶□
_		narket value of all assets at J Accounting method			lal		
_	1 mail	f year (from Part II, col. (c), Other (specify)			pr materior	indation is in a 60-mont ection 507(b)(1)(B), chec	
	line 16	· · · · · · · · · · · · · · · · · · ·	e on cash basis.)				
P	art I	Analysis of Revenue and Expenses (The total of		. T	r		(d) Disbursements
_	Qi C I	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	¹ (b)	Net investment	(c) Adjusted net	for charitable
		the amounts in column (a) (see instructions))	books		income	income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	 	ida.		MANAGEMENT OF THE PARTY.	**********
	2	Check ► If the foundation is not required to attach Sch B	242				
	3	Interest on savings and temporary cash investments	2-30(13553.69.38+9)	318 7-800	7	1990 ADDIES ADDIES IN	CHESTITECH
	4	Dividends and interest from securities	1378	202	137892	127002	STATE OF SELECT
	5a	Gross rents	1370	92	137632	13/092	PERMANANAN
	, p	Net rental income or (loss)	STEPPENT TO	2003 132013	A SULT TO THE SECOND	250180465	
41	1	Net gain or (loss) from sale of assets not on line 10					RECEWE
ž	6a b	Gross sales price for all assets on line 6a	HAVE THEFT				CHECK AND
Revenue		Capital gain net income (from Part IV, line 2)	HOW A PROM			1000000 000000 1000	MAR006 2010
ě	7		THE RESERVE		147800	1 1001 -	CANALITY STATES
_	8	Net short-term capital gain		-		+ 	-Account
	9	Income modifications	发展的现在是				GDEN W
	10a	Gross sales less returns and allowances		o		IT COMPLETE COM	
	b	Less: Cost of goods sold	PSPZETRONEU DIPERT			42.000/AMAGENCARO	STORES OF STREET
	C	Gross profit or (loss) (attach schedule)		rint=10		· · · ·	
	11 12	Other income (attach schedule)	205		20700	107000	
_	13	Compensation of officers, directors, trustees, etc.	2856	92	285692	13/892	
es	14	Other employee salaries and wages					
Expenses	1	. ,					
9	15	Pension plans, employee benefits				-	
Ж	16a	Legal fees (attach schedule)				-	
Š	0	Other professional fees (attach schedule)		102	400	400	402
ŧ	17	1-4	1	103	103	103	103
턌		Taxes (attach schedule) (see instructions)	15	-			15410
ž	18	Depreciation (attach schedule) and depletion	154	19	O	0	15419
Ε	19 20	Occupancy		+			E-11-19191062 - F-12-20-1
Operating and Administrativ	21	Travel, conferences, and meetings					
덛	21						
<u>a</u>	I			<u> </u>		_	
	23			5	5	5	5
큻	24	Total operating and administrative expenses. Add lines 13 through 23			,		4550-
ĕ	05		155		108		
ŏ	25	Contributions, gifts, grants paid			·	HEATSWEETE	138492
	26	Total expenses and disbursements. Add lines 24 and 25	1540	19	108	108	
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements		73		THE PROPERTY OF THE	ACCOUNT OF THE PARTY OF THE PAR
	b	Net investment income (if negative, enter -0-)	PA SECULIA		285584		
		Adjusted not income (if pagative, enter -0-)	5-7-22-72-73-13-030-60-60-	2011/2014	THE PARTY OF THE PARTY.	400004	ENCORE STRUMENTS

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2018)



. .

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ĕ	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)	4747472	4016973	4016973
	11	Investments—land, buildings, and equipment: basis ▶			j
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments-mortgage loans			
	13	Investments—other (attach schedule)	585385	819719	819719
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ► Accr Investment Income)	6210	4302	4302
	16	Total assets (to be completed by all filers-see the			
		instructions. Also, see page 1, item l)	5339067	4840994	4840994
	17	Accounts payable and accrued expenses			,
S	18	Grants payable			
tie	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iak	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe ►)			<u> </u>
	23	Total liabilities (add lines 17 through 22)	0	. 0	- ,
6		Foundations that follow SFAS 117, check here ▶ □			** 'A.,
Ç		and complete lines 24 through 26, and lines 30 and 31.			·
an	24	Unrestricted			
nd Balances	25	Temporarily restricted			
d E	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ □			
rЕ		and complete lines 27 through 31.			
S 0	27	Capital stock, trust principal, or current funds			
Net Assets or Fu	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
\ss	29	Retained earnings, accumulated income, endowment, or other funds	5339067	4840994	
it A	30	Total net assets or fund balances (see instructions)	5339067	4840994	
ž	31	Total liabilities and net assets/fund balances (see		404004	
Da	٠٠٠ ا	instructions)	5339067	4840994	
	rt III		mn (a) line 20 /m	agree with	
1		I net assets or fund balances at beginning of year—Part II, colu-		-	5339067
^		of-year figure reported on prior year's return)			
2		er amount from Part I, line 27a			131673
3		lines 1, 2, and 3		4	5470740
4 5		reases not included in line 2 (itemize) Change in Unrealized Gain		5	629746
		I net assets or fund balances at end of year (line 4 minus line 5)—			4840994
	· Jia	and a series of the series of			1070334

Part	V Capital Gains and	Losses for Tax on Investm	ent Income				
	(a) List and describe the kind	(s) of property sold (for example, real est e, or common stock, 200 shs MLC Co)		(b) How acquired P-Purchase D-Donation	(c) Date ac (mo , day		(d) Date sold (mo , day, yr)
1a							
b							
<u>c</u>							
<u>d</u>							
<u>е</u>		(0 Comments of the control of the co	(-) ()			(h) C=-	(1)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis ense of sale			n or (loss) (f) minus (g))
<u>a</u>			· ···				
<u> </u>							
d							
<u>u</u>			- -				·
	Complete only for assets show	ring gain in column (h) and owned b	y the foundation	on 12/31/69.	m c	Sains (Co	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col (F	k), but no	t less than -0-) or rom col (h))
а							
b							
<u>d</u>							
		(If gain a	lso enter in Pa	rt Lline 7			
2	Capital gain net income or (enter -0- in Pai		2		147800
3	If gain, also enter in Part I,	or (loss) as defined in sections line 8, column (c). See instruc	1222(5) and (6) tions. If (loss)	: , enter -0- in }	3		
Part		r Section 4940(e) for Reduc					<u> </u>
		ate foundations subject to the s				ne.)	
•	•	-	0011011 10 10(4)			,	
If sect	non 4940(d)(2) applies, leave	this part blank.					·
		ection 4942 tax on the distributa alify under section 4940(e). Do			ase period	1?	☐ Yes ☑ No
1		nt in each column for each year	r; see the instru	uctions before ma	aking any e	ntries.	
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f nonchantable-use as	ssets		(d) tribution ratio divided by col (c))
	2017	144	1448	422	3897		034198
	2016	133	2434	347	7734		0.038081
	2015		1317		3083		0.047373
	2014 2013		9600		3833		0.051148
	2013	10_	1789	236	4544		0.043048
2	Total of line 1, column (d)				. 2		0.213848
3	, , ,	or the 5-year base period—divident			<u> </u>		
		indation has been in existence i					0.042770
4	Enter the net value of nonch	naritable-use assets for 2018 fro	om Part X, line	5	. 4		5046450
5	Multiply line 4 by line 3 .				. 5		215837
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6		2856
7	Add lines 5 and 6				. 7		218693
8		s from Part XII, line 4			. 8	ing = 4	154019
	If line 8 is equal to or greate Part VI instructions.	er than line 7, check the box in	ran vi, line 16	o, and complete t	nat part us	ing a 1	70 tax rate. See the

Part '		instructions)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	
	Date of ruling or determination letter: (attach copy of letter if necessary – see instructions)	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	
	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).	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	5712
3	Add lines 1 and 2	5712
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5712
6	Credits/Payments	
a	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 8000	
b	Exempt foreign organizations—tax withheld at source 6b	
c	Tax paid with application for extension of time to file (Form 8868) . 6c	
_d	Backup withholding erroneously withheld	
7	Total ordate and payments. Add into ba through by	8000
8	Enter any ponding for an applyment of community tark and a second and	
9		2200
10		2288
11 Post	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ 2288 Refunded ▶ 11 VII-A Statements Regarding Activities	<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Yes No
1a	participate or intervene in any political campaign?	1a /
L	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	-
b	instructions for the definition	1b 🗸
	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 🗸
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	
	(1) On the foundation. ▶ \$ None (2) On foundation managers. ▶ \$ None	.
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	
	on foundation managers. > \$ None	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2 /
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3 /
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a ✓
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b /
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5 7
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 1
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 /
8a	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 √
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 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"	
	complete Part XIV	9 🗸
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	4
	names and addresses	10 🗸

Pärt	VII-A Statements Regarding Activities (continued)		_	
			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			1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualific person had advisory privileges? If "Yes," attach statement. See instructions	ed 12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applicatio	n? 13	1	
	Website address ► N/A			
14	The books are in care of ► Atlas Insurance Agency Foundation Telephone no. ►	808-564		
	Located at ▶ 1022 Bethel Street, Honolulu, HI 96813 ZIP+4 ▶	968		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	• •	•	▶ □
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	None
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other author		Tes	NO ✓
	over a bank, securities, or other financial account in a foreign country?		 	+ *
	the foreign country ►	"		
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			-
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	 (1) Engage in the sale or exchange, or leasing of property with a disqualified person?	io		
	disqualified person?	lo		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes 🗹	ol		
	(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)?	lo	'	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	lo		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described	in	141	
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b	N	<u>#</u>
	Organizations relying on a current notice regarding disaster assistance, check here		'	`
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, the		.	.
_	were not corrected before the first day of the tax year beginning in 2018?		↓	<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a prival operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	te	6	
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?	lo		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20		1	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)		.	
	all years listed, answer "No" and attach statement—see instructions.)	2b		/
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20 . 20 . 20 . 20			
3a	► 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Ja	at any time during the year?	lo		
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation	or	1	
-	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse	of		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	<u> </u>		- -
	foundation had excess business holdings in 2018.)	3b	$\perp \nu$	NA.
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes		<u> </u>	V /
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 201		 	-

Par	VII-B	Statements Regarding Activities	s for W	/hich Form	4720	May Be F	lequire	ea (contil	nuea)			
5a	During	the year, did the foundation pay or incur	any am	ount to:					-		Yes	No
	(1) Car	ry on propaganda, or otherwise attempt t	o influe	nce legislatio	on (sect	ion 4945(e))? .	☐ Yes	 ✓ No			1
		ience the outcome of any specific public						•				
	dıre	ctly or indirectly, any voter registration dr	ive?					☐ Yes	✓ No		,	•••
	(3) Prov	vide a grant to an individual for travel, stu	dy, or d	ther similar	ourpose	es?		☐ Yes	✓ No		' • "	
		vide a grant to an organization other thar										Ì
	sect	tion 4945(d)(4)(A)? See instructions						☐ Yes	✓ No			1
	(5) Prov	vide for any purpose other than religious,	, charita	able, scientif	ic, litera	ary, or edu	cationa					Į
	pur	poses, or for the prevention of cruelty to o	children	or animals?				☐Yes	✓ No			. 1
b		nswer is "Yes" to 5a(1)-(5), did any of th							scribed		,	المفاحا
	in Regu	lations section 53.4945 or in a current no	tice reg	garding disas	ter assi	istance? S	ee instr	uctions		5b		1 P
		rations relying on a current notice regardi						AIN	, ▶□			<u>'</u> 1
C		nswer is "Yes" to question 5a(4), does t						۱ ۲			,	
	becaus	e it maintained expenditure responsibility	for the	grant?				Yes)	∕ 🗌 No			
		" attach the statement required by Regula										
6a		foundation, during the year, receive any		-	-		emiums		_			`
	•	rsonal benefit contract?						Yes	✓ No			
b		foundation, during the year, pay premiun	ns, dire	ctly or indire	ctly, on	a persona	l benefi	t contract	?.	6b	ļļ	✓,
		to 6b, file Form 8870.										1
7a		ime during the tax year, was the foundation						_	✓ No			
ь		" did the foundation receive any proceeds							n7 .	7b	 i	 i
8		oundation subject to the section 4960 ta										i
		ration or excess parachute payment(s) do Information About Officers, Direc							V No			• •
Par	t VIII	and Contractors	tors, i	rustees, r	bunua	tion man	agers,	riigiliy r	alu E	при	ees,	
1	Liet all	officers, directors, trustees, and found	lation r	nanagers ar	d their	compens	ation 5	See instru	ıctions	<u> </u>		
	List an	omeers, an esters, trustees, and round		e, and average		mpensation		Contribution				
		(a) Name and address	hou	rs per week	i (If r	not paid,	emple	yee benefit	plans	(e) Expe	allowan	
Stater	nent 1	(a) Name and address	hou		i (If r		emple	oyee benefit erred compe	plans	other	allowan	ces
Stater	nent 1	(a) Name and address	hou	rs per week	i (If r	not paid,	emple	yee benefit	plans	other		ces
Stater	nent 1	(a) Name and address	hou	rs per week	i (If r	not paid,	emple	yee benefit	plans	other	allowan	ces
Stater	nent 1	(a) Name and address	hou	rs per week	i (If r	not paid,	emple	yee benefit	plans	other	allowan	ces
Stater	nent 1	(a) Name and address	hou	rs per week	i (If r	not paid,	emple	yee benefit	plans	other	allowan	ces
Stater	nent 1	(a) Name and address	hou	rs per week	i (If r	not paid,	emple	yee benefit	plans	other	allowan	ces
Stater	nent 1	(a) Name and address	hou	rs per week	i (If r	not paid,	emple	yee benefit	plans	other	allowan	ces
Stater			hou devot	rs per week ed to position	(If r	not paid, iter -0-)	emple and def	oyee benefit erred compe	plans	other	NON(2)
Stater 2		ensation of five highest-paid employee	hou devot	rs per week ed to position	(If r	not paid, iter -0-)	emple and def	oyee benefit erred compe	plans	other	NON(2)
	Compe	ensation of five highest-paid employee	hou devot	er than thos	(if r	not paid, iter -0-)	emple and def	see instr	plans	other	NON(enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than those (b) Title, and a hours per vectors	se inclusiverage	not paid, iter -0-)	emple and def	see instr	uction: utions to benefit deferred	other	NON(enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than thos	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	other	one,	enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than those (b) Title, and a hours per vectors	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	other	one,	enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than those (b) Title, and a hours per vectors	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	other	one,	enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than those (b) Title, and a hours per vectors	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	other	one,	enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than those (b) Title, and a hours per vectors	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	other	one,	enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than those (b) Title, and a hours per vectors	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	other	one,	enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than those (b) Title, and a hours per vectors	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	other	one,	enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than those (b) Title, and a hours per vectors	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	other	one,	enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than those (b) Title, and a hours per vectors	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	other	one,	enter
	Compe "NONE	ensation of five highest-paid employee	hou devot	er than those (b) Title, and a hours per vectors	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	other	one,	enter
2	Compe "NONE	ensation of five highest-paid employee	es (oth	er than those (b) Title, and a hours per v devoted to p	se inclusiverage	uded on li	emple and def	see instr	uction: utions to benefit deferred	s). If n	one,	enter

Pärt VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five	highest-paid independent contractors for professional services. See instructions. If none, enter "NOI	IE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	per of others receiving over \$50,000 for professional services	None
Part IX-A		
	indation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ns and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 Found	ation pursues charitable donations of IRC 501(c)(3) organizations	
		None
2		
3		
4		
Part IX-B	Summary of Program-Related Investments (see instructions)	
Describe th	ne two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		
2		
AH - 12		-
	ogram-related investments. See instructions	
3		
Total Add	lines 1 through 3	None
i ytal. Add	lines 1 through 3	None

Form **990-PF** (2018)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	gn tour	idations,
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	5123300
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	5123300
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	C
3	Subtract line 2 from line 1d	3	5123300
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	76850
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5046450
6	Minimum investment return. Enter 5% of line 5	6	252323
Part :		oundat	ions
1	Minimum investment return from Part X, line 6	1	252323
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI.)	1	
С	Add lines 2a and 2b	2c	5712
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	246611
4	Recovenes of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	246611
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	246611
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	154019
b	Program-related investments—total from Part IX-B	1b	c
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:	٩ ,	
а	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	154019
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	154019
	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.		
			QQA-DE (2010

₽art	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				246611
2	Undistributed income, if any, as of the end of 2018:				
а	Enter amount for 2017 only			119302	
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2018:				
а	From 2013		1		
b	From 2014				
С	From 2015				
d	From 2016				
e	From 2017				
f	Total of lines 3a through e	· · · · · · · · · · · · · · · · · · ·	-		
4	Qualifying distributions for 2018 from Part XII, line 4: ► \$				
а	Applied to 2017, but not more than line 2a .		ļ	119302	
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2018 distributable amount				34717
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a).)				0
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract line 4b from line 2b				•
С	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				1
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				211894
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)				
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:	-			1
	Excess from 2014				
b	Excess from 2015		1		
С	Excess from 2016				
d	Excess from 2017				
е	Excess from 2018				

Part	XIV Private Operating Founda	tions (see instru	ctions and Part \	VII-A, question 9)	
1a	If the foundation has received a ruling foundation, and the ruling is effective fo					
b	Check box to indicate whether the four				ction 4942(j)	(3) or 4942(j)(5)
2a		Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	investment return from Part X for each year listed	137784	115096	90124	74101	417105
b	85% of line 2a .	117116		76605	62986	+
c	Qualifying distributions from Part XII,					
	line 4 for each year listed	154019	144448	132434	141317	572218
d	Amounts included in line 2c not used directly for active conduct of exempt activities .	0	0	.0	0	
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	154019	144448	132434	141317	572218
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
h	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
	of minimum investment return shown in Part X, line 6 for each year listed					
C	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)	6	1469469	516034	550500	2536003
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	0	0	0	0	0
	(3) Largest amount of support from an exempt organization		0	0	0	
	(4) Gross investment income	285692		92966		
Part		n (Complete th	is part only if th			
	any time during the year-				• •	
1	Information Regarding Foundation					
a	List any managers of the foundation		ted more than 2%	of the total contr	ibutions received	by the foundation
	before the close of any tax year (but o					
J/A						
b	List any managers of the foundation ownership of a partnership or other en					rge portion of the
I/A						
2	Information Regarding Contribution Check here ▶ ☐ if the foundation unsolicited requests for funds. If the foundation complete items 2a, b, c, and d. See in	only makes contri oundation makes (ibutions to presel	ected charitable of		
а	The name, address, and telephone nu	mber or email add	lress of the persor	to whom applica	tions should be ac	dressed:
Atlas I	nsurance Agency Foundation, Franklin T	okioka, 1022 Bethel	Street, Honolulu. I	H 96813		
b	The form in which applications should	be submitted and	I information and r	materials they show	uld include:	
etter	to foundation stating request and purpos	e of organization s	hould be submitted	l.		
	Any submission deadlines:					
)pen v	year-round.					
d	Any restrictions or limitations on av	ards, such as by	geographical are	eas, charitable fie	lds, kinds of ins	titutions, or other
	factors:	-				

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 or substantial contributor Recipient Purpose of grant or status of Amount contribution recipient Name and address (home or business) a Paid during the year Statement 3 За 138492 b Approved for future payment N/A 501(c)(3) General fund campaign \$30,000 **Child & Family Service** \$15,000 501(c)(3) General fund campaign **Goodwill Industries** N/A 45000

Рa	rt XVI	Analysis of Income-Producing Ac					
nte	r gros	s amounts unless otherwise indicated.	Unrelated bu	usiness income	Excluded by sect	on 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1	Progr	ram service revenue:					(See mandenons.)
	a _						<u>.</u>
	b _					_	
	c						
	d						
	е						
	f						
	g F	ees and contracts from government agencies					•
2	Mem	bership dues and assessments					-
		est on savings and temporary cash investments		i	14		137892
4		ends and interest from securities					
5		ental income or (loss) from real estate:				-	
_		ebt-financed property					
		lot debt-financed property					
6		ental income or (loss) from personal property					
7		r investment income					
8		or (loss) from sales of assets other than inventory	 -		14		147800
_		ncome or (loss) from special events			14		147800
9		s profit or (loss) from sales of inventory				-	
10							
11		r revenue: a					
	b _						
	<u>-</u> -						
	d _			· · · · · · · · · · · · · · · · · · ·			
	e –						
12	e Subto	otal. Add columns (b), (d), and (e)		0		0	
13	e Subto	otal. Add columns (b), (d), and (e)		0		13	285692 285692
13 See	e Subto Total works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.)			13	
13 See Pa	e Subto Total works	otal. Add columns (b), (d), and (e)	s.) ccomplishm	ent of Exemp	t Purposes	13	285692
13 See Pa	e Subto Total works	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.) ccomplishm	ent of Exemp	t Purposes	13	285692
13 See Pa Lin	e Subto	otal. Add columns (b), (d), and (e)	s.) ccomplishm income is repoposes (other than	nent of Exemported in column in by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed ir oses) (See instruc	285692
13 See Pa Lin	e Subto Total works rt XV e No. ▼	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm income is repoposes (other than	nent of Exemported in column in by providing fun	t Purposes (e) of Part XVI ds for such purp	-A contributed ir oses) (See instruc	285692
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Form **990-PF** (2018)

Part	XVII	Information Organization		sfers to and Transac	tions and R	elationship	s With N	lonchar	itable	e Exe	empt
1	ın se			engage in any of the follo 501(c)(3) organizations)						Yes	No
а	Trans	sfers from the rep		o a noncharitable exempt					1a(1)		1
L	(2) 0	ther assets .							1a(2)		1
ь	(1) S	ales of assets to	a nonchantable exe						1b(1)		<u> </u>
				able exempt organization					1b(2) 1b(3)		1
	(3) Rental of facilities, equipment, or other assets								1b(4)	1	
	(5) Loans or loan guarantees								1b(5)		1
				nip or fundraising solicitat					1b(6)		1
				sts, other assets, or paid					1c		✓
d				s," complete the following							
•				ices given by the reporting tement, show in column (
(a) Line		b) Amount involved		hantable exempt organization		ption of transfer					
					 	t to reimburs	•			<u> </u>	
1b(4	"	U	Atlas Insurance Age	ncy, inc		made on beh					
	-			<u> </u>		ns made dire				2010	
					un donate	ms made and	ouy nome		<u> </u>		
	o					_					
	\neg										
			` _								
_											
	desc	ribed in section 5		ffiliated with, or related action 501(c)(3)) or in section					Y€	es 🗸] No
	11 10	(a) Name of organ		(b) Type of organiza	tion	(c) Description	n of relation	ship		
		()		<u> </u>						halid.	
Sign Here	corre	er penalties of perjury act, and complete Deci	declare than have examine the the stee	ed this return, including accompany an taxpayer) is based on all information of the company and taxpayer).	ing schedules and ition of which prepared to the control of the co	statements, and arer has any know	viedge	May the IR with the pro-	S discu	iss this shown b	return pelow?
Paid Prepa	1	Print/Type preparer	r's name	Preparer's signature		Date		k if F	PTIN		
Use (Firm's name ▶				Firm's EIN	•				
•	J	Firm's address					Phone no				

Form 990-PF, Part I, Line 16c: Investment Manager Fees	-	103		
Form 990-PF, Part I, Line 23 Dues, Assessments and Fees	-	5		
Form 990-PF, Part II, Line 10b		Beginning	Ending	FMV
Raymond James	-	4,747,472	4,016,973	4,016,973
Form 990-PF, Part II, Line 13. Raymond James	-	585,385	819,719	819,719
Capital Gains and Losses, Part IV		Short-Term	Long-Term	Total
Raymond James Capital Gain Distributions		0 0 0	147,800 0 147,800	147,800 0 147,800
Form 990-PF, Part VIII, Line 1.				
Tomi 990-FT, Fait VIII, Line 1.	-		(d) Contr to	(e) Expense
(a) Name & Address	(b) Title	(c) Comp	Bene Plans	Acct
Franklin M. Tokioka, c/o 1132 Bishop Street		0	0	0
Honolulu, HI 96813 Colbert M Matsumoto, c/o 1022 Bethel St., Honolulu, HI 96813	Director Vice President/ Director	0	0	0
Chason T. Ishii, c/o 1132 Bishop St,	Director	0	0	0
Honolulu, HI 96813				
Lionel Y. Tokioka, c/o 1022 Bethel St., Honolulu, HI 96813	Director	0	0	0
Dana Tokioka, c/o 1132 Bishop St., Honolulu, HI 96813	Director	0	0	0
Tyler M. Tokioka, c/o 1022 Bethel St., Honolulu, HI 96813	President/ Sec/Director	0	0	0
Scott A. Kuioka, c/o 1132 Bishop St , Honolulu, HI 96813	Treasurer	0	0	0

Atlas Insurance Agency Foundation Form 990PF December 31, 2018 Statement 2

Part X, page , Minimum Investment Return

Average FMV of Investments.	
January	5,352,006
February	5,121,543
March	5,119,073
April	5,143,114
May	5,167,281
June	5,145,813
July	5,157,464
August	5,194,282
September	5,099,254
October	5,023,962
November	5,119,131
December	4,836,692
	61,479,615
Divide by 12	12
Average FMV of Investments:	5,123,300