Form **990-PF**

Return of Private Foundation

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

OMB No. 1545-0052 2018

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection ► Go to www.irs.gov/Form990PF for instructions and the latest information. , 2018, and ending For calendar year 2018 or tax year beginning 20 A Employer identification number Name of foundation 99-0267975 The S. and E. Mukai Foundation Number and street (or P.O box number if mail is not delivered to street address B Telephone number (see instructions) Room/suite 808-732-5116 729 Elepaio St City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here▶ Honolulu, HI 96816 Initial return Check all that apply: Initial return of a former public charity D 1. Foreign organizations, check here . ☐ Final return ☐ Amended return 2. Foreign organizations meeting the 85% test, Address change □ Name change check here and attach computation E If private foundation status was terminated under H Check type of organization: X Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation J Accounting method: X Cash Accrual Fair market value of all assets at If the foundation is in a 60-month termination under section 507(b)(1)(B), check here end of year (from Part II, col. (c), Other (specify) line 16) ► \$ 292.660 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment for chantable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income purposes hooks the amounts in column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule) Check ► ☐ If the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 3750 Net rental income or (loss) Start 2 -Net gain or (loss) from sale of assets not on line 10 Revenue Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications ©CON DAY 0 7 2020 Operating and Administrative Expenses 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) . 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 . 48750 13750 Compensation of officers, directors, trustees, etc. 3000 13 14 Other employee salaries and wages Pension plans, employee benefits 15 Legal fees (attach schedule) 378 Accounting fees (attach schedule) 5(m(. 3 Other professional fees (attach schedule) 250 250 17 Interest Taxes (attach schedule) (see instructions) 18 Depréciation (attach schedule) and depletion 7.77. 4 432 19 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications . . . 2399 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 19862 Add lines 13 through 23 9565 Contributions, gifts, grants paid 25 26 Total expenses and disbursements. Add lines 24 and 25 29427 27 Subtract line 26 from line 12: 19323 Excess of revenue over expenses and disbursements

Form **990-PF** (2018)

Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-)

Pá	art II	Balance Sheets Attached schedules and amounts in the description column		End	of 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	1555	6310	6310
	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 ▶	·		
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
ď	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) .5tm t 6 .	20688	20,688	26750
	C	Investments—corporate bonds (attach schedule)	x man and a state of the state	TOTAL PROVEST PROVES TO THE STREET	on moreover environment entition of the
	11	Investments land, buildings, and equipment, basis ► 143370			
	ł	Less: accumulated depreciation (attach schedule) ► 76.208	70798	67162	259600
	12	Investments—mortgage loans		stmt 7	
	13	Investments—other (attach schedule)	Turka king a sa sa sa sa sa ka king a sa s	addrawianski swamski bros na tatros na katawa	andushas andushas and an angusta san Latinson a
	14	Land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►)		·	
	16	Total assets (to be completed by all filers—see the	022.41	0.4.14.0	
	ļ	ınstructions. Also, see page 1, item l)	93041	94 160	292,660
	17	Accounts payable and accrued expenses			
S	18	Grants payable			are specification and
ij	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	(7 2 4		
흔	21	Mortgages and other notes payable (attach schedule) Fint. 8	15000	0	
	22	Other liabilities (describe ► <u>\$\xext{fmt} 9</u>)	275	275	
	23	Total liabilities (add lines 17 through 22)	15275	275	
Ś		Foundations that follow SFAS 117, check here ▶ □			
Net Assets or Fund Balances		and complete lines 24 through 26, and lines 30 and 31.			
lar	24	Unrestricted			
Ва	25	Temporarily restricted			
힏	26	Permanently restricted		· -	Self-transfer share share at
ַבַּ		Foundations that do not follow SFAS 117, check here ▶ □			
ř		and complete lines 27 through 31.			
SC	27	Capital stock, trust principal, or current funds			
šet	28	Paid-in or capital surplus, or land, bldg., and equipment fund		00,001	
155	29	Retained earnings, accumulated income, endowment, or other funds	77.766	93885	
ž	30	Total net assets or fund balances (see instructions)	77 766	93885	
ž	31	Total liabilities and net assets/fund balances (see	43 041	011110	Part of the last
Dà		Instructions)	93041	94 160	
	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		I net assets or fund balances at beginning of year—Part II, colu			777/
_		of-year figure reported on prior year's return)			77766
2		r amount from Part I, line 27a			19323
3					07.00
4		lines 1, 2, and 3			97089
5		reases not included in line 2 (itemize) Book/Tax Deprecia			3204 93885
О	rotal	I net assets or fund balances at end of year (line 4 minus line 5) – I	ranın, colunin (D), III	ne 30 6	1 72803

Part	IV Capital Gains and L	osses for Tax on Investm	ent Income			
`		s) of property sold (for example, real es or common stock, 200 shs. MLC Co.)	state,	(b) How acquired P—Purchase D—Donation	(c) Date acqui (mo., day, yi	
1a						
b		·				
c						
d				 		
<u>e</u>	I.	(2.5	410 .	<u> </u>		L) C 4)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis inse of sale		h) Gain or (loss) plus (f) minus (g))
a						
b						
С						
<u>d</u>						
<u>e</u>				10/01/00		
	Complete only for assets show	ng gain in column (h) and owned b				ns (Col. (h) gain minus out not less than -0-) or
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) . (j), if any		sses (from col (h))
a				3,7		
_ <u>b</u>						
d						
е						
2	Capital gain net income or (r		also enter in Pa enter -0- in Pa		2	
3	If gain, also enter in Part I,	or (loss) as defined in sections line 8, column (c). See instruc	ctions. If (loss)	, enter -0- in }	3	
Part		Section 4940(e) for Redu				
		te foundations subject to the s				1
Was t	s," the foundation doesn't qua	ection 4942 tax on the distribut	not complete t	hıs part.		☐ Yes 🔀 No
		nt in each column for each yea	r; see the instru	uctions before ma	aking any ent	
Cale	(a) Base penod years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions		(c) f nonchantable-use a	ssets (co	(d) Distribution ratio (b) divided by col. (c))
	2017	11019		281478		. 039147
	2016	14202		<u> 171, 921</u>		.052228
	2015	12.742		196334		,04299
	2014	15,200 8825		278 646		.054550
	2013	002)	<u>.</u>	267 007	+ +	.033 052
2	Total of line 1, column (d)				. 2	. 221976
3	Average distribution ratio fo	r the 5-year base period—divindation has been in existence	ide the total on			. 044395
	·		_			
4		aritable-use assets for 2018 fr	om Part A, line	5		281900
5	Multiply line 4 by line 3 .				. 5	12515
6	Enter 1% of net investment i	income (1% of Part I, line 27b)			. 6	37
7	Add lines 5 and 6				. 7	12552
8		from Part XII, line 4			. 8	14365
	If line 8 is equal to or greater Part VI instructions.	r than line 7, check the box in	raπ vi, line 1b	, and complete t	nat part using	ן a ז% tax rate. See the

The S. and E. Mukai Foundation 99-0267975 Form 990-PF (2018) Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions 1à Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. (attach copy of letter if necessary—see instructions) Date of ruling or determination letter: Domestic foundations that meet the section 4940(e) requirements in Part V, check 1 All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) 2 3 3 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-. 6 Credits/Payments: 329 2018 estimated tax payments and 2017 overpayment credited to 2018 а Exempt foreign organizations—tax withheld at source 6b C Tax paid with application for extension of time to file (Form 8868) . 6c 6d 7 Total credits and payments. Add lines 6a through 6d 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 10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . . . 10 292 11 Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ Refunded Statements Regarding Activities Yes During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it 1a Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the 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. Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ► \$ 0 (2) On foundation managers. ► \$ 0 Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes." attach a detailed description of the activities. Has the foundation made any changes not previously reported to the IRS, in its governing instrument, articles 3 4a 4b 5

•	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?
b	If "Yes," has it filed a tax return on Form 990-T for this year?
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?
	If "Yes," attach the statement required by General Instruction T.
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:
	By language in the governing instrument, or
	By state legislation that effectively amends the governing instrument so that no mandatory directions that
	conflict with the state law remain in the governing instrument?
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
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
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
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

names and addresses.

8b

10

Par	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	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	Ė
	Website address ► NA			
14	The books are in care of ► The S. and E. Mukai Foundation Telephone no. ► 808- Located at ► 729 Elepaio St, Honolulu, HI ZIP+4 ► 96816		116	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here		•	D
	and enter the amount of tax-exempt interest received or accrued during the year	1		
16	At any time during calendar year 2018, 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	57 E 29 R 54 N 1	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
Dom	the foreign country VII-B Statements Regarding Activities for Which Form 4720 May Be Required	間波線		
Par	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
40	During the year, did the foundation (either directly or indirectly):		163	NO
1a	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? \square Yes \boxtimes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in		X a	
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	1985-AS-,1967	namana namana
	Organizations relying on a current notice regarding disaster assistance, check here			
С	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 2018?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
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?			
b	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
ь	(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	etelesce:	148521CU0
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	阿科		
	▶ 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 2018 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2018.)	3b	A VENT	e ar sa a
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		Х

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Part	VII-B Statements Regarding Activities	s for V	Vhich Form	4720	May Be F	Require	ed (contil	nued)			
5a	During the year, did the foundation pay or incur	any am	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt t	o influe	ence legislatio	on (sec	tion 4945(e))? .	☐ Yes	⊠ No			
	(2) Influence the outcome of any specific public							•			
	directly or indirectly, any voter registration dr	ive?					☐ Yes	X No			
	(3) Provide a grant to an individual for travel, stu	dv. or	other similar	ourpos	es?		☐ Yes	⊠ No			
	(4) Provide a grant to an organization other than										
	• • • • • • • • • • • • • • • • • • • •							⊠ No			
	(5) Provide for any purpose other than religious	. charit	able, scientif	c, litera	arv, or edu	cational					
	purposes, or for the prevention of cruelty to							⊠ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the										
-	in Regulations section 53.4945 or in a current no							. NA	5b	SEE SELECT	STREET
	Organizations relying on a current notice regardi							▶□			H-48 72 H
С	If the answer is "Yes" to question 5a(4), does t							_			
•	because it maintained expenditure responsibility						☐Yes	☐ No			
	If "Yes," attach the statement required by Regula					•					
6a	Did the foundation, during the year, receive any					emiums					
ou	· · · · · · · · · · · · · · · · · · ·			-			Yes	X No			
b	Did the foundation, during the year, pay premiun							_	6b	(41.035V)	∠ Y
D	If "Yes" to 6b, file Form 8870.	iio, dii c	city of mano	July, 011	a poroona	DOMONI	COMMICCO	• •	20.EA		first.
7a	At any time during the tax year, was the foundation a	a nartv	to a probibited	l tay sh	elter transac	etion?	Yes	⊠ No			
b	If "Yes," did the foundation receive any proceeds							•	7b	EXEL COLUMN	ECOURAGE.
8	Is the foundation subject to the section 4960 ta		•					•••			
Ū	remuneration or excess parachute payment(s) du							No.			
Part	VIII Information About Officers, Direc									ees.	<u> </u>
	and Contractors	,	, , ,			,			,	,	
1	List all officers, directors, trustees, and found	ation r	nanagers ar	d their	compens	ation. S	See instru	uctions	·•		
	/-\ \\		e, and average		mpensation		Contribution		(e) Expe	nse acc	ount,
	(a) Name and address		rs per week ed to position		not paid, nter -0-)		yee benefit erred compe		other	allowand	ces
	See Statement 10				3,000		0			0	
						l					
2	Compensation of five highest-paid employee "NONE."	es (oth	er than thos	se incl	uded on li	ne 1—	see instr	uction	s). If no	one, €	enter
	-NONE."										
	a) Name and address of each employee paid more than \$50,00	io	(b) Title, and a		(c) Compe	acation	(d) Contribution (d) (d) (d) (d)	benefit	(e) Expe	nse acc	ount,
,	a) Name and address of each employee paid more than \$50,00		devoted to pe		(C) Compe	isation	plans and compens		other a	allowand	ces
					 -						
	NAME				İ						
	NONE	•									
			j								
					-						
			 		 						
Total -	number of other employees paid over \$50,000 .		l					. ▶		0	
otair	idifiber of other employees paid over \$50,000 .	• •	<u> </u>	<u> </u>	· · · ·	<u> </u>	<u> </u>		orm 99		(2019)
								J	Oun 23	<i>-</i>	(۵۱ مع)

99-0267975 The S. and E. Mukai Foundation Page 7 Form 990-PF (2018) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services 0 **Summary of Direct Charitable Activities** Part IX-A List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of Expenses organizations and other beneficianes served, conferences convened, research papers produced, etc 3 Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 NONE

All other program-related investments. See instructions. Total. Add lines 1 through 3

Part		ign tot	indations,
	see instructions.)	Kencesa	
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	21935
b	Average of monthly cash balances	1b	4658
	Fair market value of all other assets (see instructions)	1c	259600
C	Total (add lines 1a, b, and c)	1d	286193
d	Reduction claimed for blockage or other factors reported on lines 1a and	22/2018/25	_ 200,110
е			
_	\		\sim
2	Acquisition indebtedness applicable to line 1 assets	2	286193
3	Subtract line 2 from line 1d	3	206172
4	· ·	1 . 1	4293
_	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	281.900
6	Minimum investment return. Enter 5% of line 5	6	14095
Part :	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	ounda	tions
1	Minimum investment return from Part X, line 6	1	14095
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.) 2b		
С	Add lines 2a and 2b	2c	37
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14058
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	14058
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	14058
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	14365
b	Program-related investments—total from Part IX-B	1b	
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:		
а	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	14365
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	37
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	14328
	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.	g whet	her the foundation

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Part	XIII Undistributed Income (see instructi	ons)			
`		(a) Corpus	' (b) Years pnor to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				14058
2	Undistributed income, if any, as of the end of 2018:				
а	Enter amount for 2017 only			13 165	
b	Total for prior years: 20 , 20 , 20		0		
3	Excess distributions carryover, if any, to 2018				
а	From 2013				
b	From 2014				
C	From 2015				
d	From 2016				
е	From 2017	THE STATE OF THE STATE OF			
f	Total of lines 3a through 6	0			and the state of the state of
4	Qualifying distributions for 2018 from Part XII, line 4: ► \$ 14365				
а	Applied to 2017, but not more than line 2a .			13,165	
b	Applied to undistributed income of prior years				
-	(Election required—see instructions)		0		
¢	Treated as distributions and of corpus (Election required—see instructions)	0			
d	Applied to 2018 distributable amount				1200
ē	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2018				
	(If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		Q		
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		0		
d	Subtract line 6c from line 6b. Taxable				
	amount—see instructions				
e	Undistributed income for 2017. Subtract line				er oans early also been
	4a from line 2a. Taxable amount—see instructions			O	
	Undistributed income for 2018. Subtract lines				Carter University Meeting Constitution of the
T	4d and 5 from line 1. This amount must be				
	distributed in 2019				12858
7	Amounts treated as distributions out of corpus	AND		43,000,000,000,000	
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be	1			
	required — see instructions)	0			
8	Excess distributions carryover from 2013 not	_			
•	applied on line 5 or line 7 (see instructions) .	0			
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:				
a	Excess from 2014				
b	Excess from 2015				
c	Excess from 2016				
d	Excess from 2017				
ė	Excess from 2018			PARTICIPATION OF THE	

Page **11**

3.	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ure Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Containation	
а	Paid during the year				
	See Statement 11				9,565
	•				
					:
	Total			▶ 3a	9,565
b	Approved for future payment				7,303
			ļ		
	•				
	Total		L l	2h	

Form **990-PF** (2018)

Pa	rt XV	I-A Analysis of Income-Producing Ac					
		s amounts unless otherwise indicated.		isiness 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	_	ram service revenue:			<u> </u>		, , , , , , , , , , , , , , , , , , ,
	а Ь						
	С _				 	· · ·	<u> </u>
	d -						
	e _						
	f -						
	G F	ees and contracts from government agencies					
2	-	bership dues and assessments					
3		est on savings and temporary cash investments					
4		lends and interest from securities					
5		rental income or (loss) from real estate.					
		Debt-financed property					
	b N	lot debt-financed property			16	3675	
6	Net i	rental income or (loss) from personal property					
7		r investment income					
8	Gaın	or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					
10	Gros	s profit or (loss) from sales of inventory					
11	Othe	r revenue: a					
	b _						
	°. –			-			· · · · · · · · · · · · · · · · · · ·
					1		
	ď _				1		
40	e -					3/15	
	e Subt	otal. Add columns (b), (d), and (e)					31-75
13	e _ Subt	otal. Add columns (b), (d), and (e)				3675 13_	3675
13 See	e _ Subt Tota work	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	 ıs.)				3675
13 See Pa	e _ Subt	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e _ Subt Tota work	otal. Add columns (b), (d), and (e) I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
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13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
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13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
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13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	
13 See Pa	e Subt Tota work rt XV	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	 ns.) Accomplishm	ent of Exemp	t Purposes	13	

Part	XVII	Information Organization	n Regarding Tra ons	nsfers to and 1	Fransaction	ns and I	Relationships	With Nonch	aritable Ex	empt
1 a	ın seci organiz	tion 501(c) (o ations?	directly or indirectly ther than section corting foundation	501(c)(3) organ	nizations) or	ın sect	tion 527, relatir		STATE OF THE PERSON	No
	(1) Cas								1a(1) 1a(2)	X
b	Other t	ransactions:								
			a noncharitable ex ets from a nonchari					· · · · ·	1b(1) 1b(2)	×
			, equipment, or oth						1b(3)	×
			rrangements					· • • • •	1b(4)	_×_
		ins or loan gua							1b(5)	<u> </u>
			ervices or members						1b(6)	×
C	-		quipment, mailing l						1c	ТХ
d	value o value ir	f the goods, o any transaction	of the above is "Ye ther assets, or sen on or sharing arran	rices given by the gement, show in	reporting fo	undatior e value	n. If the foundate of the goods, oth	on received le ner assets, or	ess than fair i services rece	market eived.
(a) Line	no. (b)	Amount involved	(c) Name of none	charitable exempt orga	anization	(d) Desc	cription of transfers, t	ransactions, and	shanng arranger	nents
		11/				-				
	-	NH.								
	+									
-	-									
								· · · · · · · · · · · · · · · · · · ·		
							····	-		
							• •			
				•						
			. =							
	describ If "Yes,	ed in section 5 " complete the	ectly or indirectly a 01(c) (other than so following schedule	ection 501(c)(3)) o e.	r in section 5				☐ Yes 🏻	 ☑ No
		(a) Name of organi	zation	(b) Type	of organization		(c) L	Description of rela	tionship	
		NA								
					·					
							-			
			declare that I have examin						rledge and belief,	it is true,
Sign Here) x /	ire of officer or trus	aration of preparer other th	nan taxpayer) is based o		Presid	•	May the with the	e IRS discuss this o preparer shown tructions Yes	below?
		rint/Type preparer		Preparer's signatu			Date		PTIN	
Paid Prend		Edwin Kob					10/29/19	Check I if self-employed	D010559	540
Prepa Use (ırm's name ▶	Edwin Kobasl				Fırr	n's EIN ▶ 99-	0240298	
		ırm's address ▶	60 N Beretan		Honolul	ı , Ш	96817 Pho	one no. 808-	536-5666	
									Form 990-PI	(2018)

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

2018

Employer identification number

	he S. and E. Mukai Foundation	99–0267975					
Organization type (check one):							
Filers of:	Section:						
Form 990 o	r 990-EZ						
	4947(a)(1) nonexempt charitable trust not treated as a private	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	☐ 527 political organization						
Form 990-l	F 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private four	idation					
	501(c)(3) taxable private foundation						
•	or organization is covered by the General Rule or a Special Rule. a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule.	e and a Special Rule. See					
General R	le						
or	r an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, o more (in money or property) from any one contributor. Complete Parts I and II. See i ntributor's total contributions.	3 .					
Special Ru	es						
re 13	r an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met th julations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 16a, or 16b, and that received from any one contributor, during the year, total contr 000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, li	990 or 990-EZ), Part II, line ibutions of the greater of (1)					
oc lite	r an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ ntributor, during the year, total contributions of more than \$1,000 exclusively for religrary, or educational purposes, or for the prevention of cruelty to children or animals. (A" in column (b) instead of the contributor name and address), II, and III	ious, charitable, scientific,					
cc du G (r an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ ntributor, during the year, contributions exclusively for religious, charitable, etc., purportributions totaled more than \$1,000. If this box is checked, enter here the total contring the year for an exclusively religious, charitable, etc., purpose. Don't complete an neral Rule applies to this organization because it received nonexclusively religious, along \$5,000 or more during the year.	oses, but no such obutions that were received y of the parts unless the					

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
The S. and E. Mukai Foundation

Employer identification number 99–0267975

Part I	Contributors (see instructions). Use duplicate co	ppies of Part I if additional space is	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Stanley Mukai 729 Elepaio St Honolulu, HI 96816	\$ 35,000	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
		s	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

The S. and E. Mukai Foundation

Employer identification number 99–0267975

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		 \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		 \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received			

Employer identification number Name of organization The S. and E. Mukai Foundation 99-0267975 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or Part III (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

i

	(a) Revenue & Expenses per Books	(b) Net Investment Income
Statement 1 - Rental Income		
Form 990-PF - Part I		
Line 5a - Rental Income		
236 Liliuokalani Ave, Hon, HI 96815	13,750	13,750
Statement 2 - Rental Expenses and Net Rental Income (Loss)		
Form 990-PF - Part I		
236 Liliuokalani Ave, Hon, HI 96815		
Maintenance Fees		6,097
Management Fees		1,023
Real Property tax		854
General Excise Tax		619
Interest		250
Depreciation		432
Miscellaneous		25
Insurance		650
Cleaning	<u> </u>	125
Total Rental Expences	_	10,075
Net Rental Income (Loss) to Form 990-PF, Part I, Line 5b		3,675

Statement 3 - Accounting Fees Line 16b - Accounting Fees	(a)Revenue & Expenses per Books	(b) Net Investment Income	(d)Disbursement for Charitable Purposes
Line 100 - Accounting rees			
Edwin Kobashigawa	3,781	_	1,800
Statement 4 - Depreciation Line 19 - Depreciation			
See Stmt 4 - Attachment	432	432	
Statement 5 - Other Expenses Line 23 - Other Expenses			
License and Fees	6		
Maintenance Fees	6,097	6,097	
Management Fees	1,023	1,023	
Real Property Tax	854	854	
General Excise Tax	619	619	
Miscellaenous	25	25	
Insurance	650	650	
Administrative service	3,000		1,500
Cleaning	125	125	<u> </u>
	12,399	9,393	1,500
	12,399	9,393	1,500

Attachment to Statement 4 - Schedule of Depreciation

Schedule of Depreciation Year 12/31/18

Description	Date Aquired	Cost or Basis	Prior Year Accumulated Depreciation	Method	Conv	Life	Current Year Depreciation
HC 902 - Bldg	12/31/97	11,885	8,622	SL	MM	27.5 yr	432
	_	11,885	8,622				432

Form 990-PF - Part II - Balance Sheet

Form 990-PF - Part II - Balance Sheet			
	Beginning of Year (a) Book Value	End of Year (b) Book Value	(c) Fair Market Value
Statement 6 - Investments - Corporate Stock Line 10b - Corporation Stock	ck		
Castle Group	20,688	20,688	26,750
Statement 7 - Investments - Land, Building Line 11 - Land, Building, Equipment Hawaiian Crown, Unit 902		143,370	259,600
Accumulated Depreciation - End of Year Hawaiian Crown, Unit 902		76,208	
Net Book Value		67,162	259,600

Form 990-PF - Part II - Other Notes Payable

Statement 8 - Mortgages and Other Notes Payable Line 21 - Other Notes Payable

Lender: Herbert T. Oda (Relationship: Unrelated)

ler: Herbert T. Oda	i (Relationship	: Unrelated)	
	Maturity	Original Loan	
Date of Note	Date	Amount	Interest Rate
12/31/2013	12/31/2017	20,000	5.00%
3/1/2015	3/1/2018	10,000	3.00%
		Beginning of Year	End of Year
		(a) Book Value	(b) Book Value
Part II, Line 21	•	15.000	
Note Payable		15,000	0

	BOY AMOUNT	EOY AMOUNT
Statement 9 - Other Liabilities		
Form 990-PF - Part II		
Line 22 - Other Liabilities		
Reserve Fund	275_	275

The S and E Mukai Foundation Statements to Form 990-PF 12/31/18 EIN: 99-0267975

Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Foundation Managers

Statement 10

Name & Address	Title	Time Devoted to Position	Compensation	Contribution to Employee Benefit Plan	Expense Account
Stacey M. Robinson 2727 Manoa Rd Honolulu, HI 96822	President / Sec / Director	Part-Time	3000	0	0
Howard Mukai 1022 Akoko St Honolulu, HI 96814	V.P./Treas/ Director	Part-Time	0	0	0
Luella Kawamura 2652 South King St Honolulu, HI 96826	Ass Sec / Ass Treas / Director	Part-Time	0	0	0
		Total	3000	0	0

The S. and E. Mukai Foundation EIN: 99-0267975 Statement to Form 990-PF Tax Year - 12/31/18 Page 1 of 3

Waimea, HI 96766

Statement 11 - Grants and Contributions Paid During Year Part XV, Line 3a - Grants and Contributions

Relationship to Foundation Status Purpose of Grant or Foundation Contribution Amount Recipient Name and Address Manager of Recipient PC Education 2,000 Punahou School NA 1601 Punahou Street Honolulu, HI 96822 NA PC **Cultural Activities** 200 Kapahulu Center 3410 Campbell Avenue Honolulu, HI 96815 PC Education 2,000 Iolani School NA 563 Kamoku St Honolulu, HI 96826 PC Education 150 NA Harvard Magazine 7 Ware Street Cambridge, MA 02138 PC Religious 100 NA Palolo Hongwanji 1641 Palolo Ave Honolulu, HI 96816 PC Education 100 Williams College NA PO Box 425 Williamstown, MA 01267 200 NA PC Education Amherst College 220 S Pleasant Street Amherst, MA 01002 Education 100 NA PC University of Virginia Law School 580 Massie Road Charlottesville, VA 22903 100 NA PC Religious Waimea Hongwanji PO Box 149

The S. and E. Mukai Foundation EIN: 99-0267975 Statement to Form 990-PF Tax Year - 12/31/18 Page 2 of 3

Statement 11 - Grants and Contributions Paid During Year Part XV, Line 3a - Grants and Contributions

Relationship to Foundation Purpose of Grant or Foundation Status Recipient Name and Address Manager of Recipient Contribution **Amount** NA PC Hanahauoli School Education 100 1922 Makiki Street Honolulu, HI 96822 Lesley University NA PC Education 100 29 Everett Street Cambridge, MA 02138 PC Education 250 Children's Discovery Center NA 111 Ohe Street Honolulu, HI 96813 Bishop Museum NA PC **Cultural Actitives** 250 1525 Bernice Street & Education Honolulu, HI 96817 John Hart Hunter Educ Fdn NA PC Education 200 c/o Cornell University Chapter New York, NY PWP Alumni Association NA PC Funding for 1,000 2042 Lanihuli Drive Activities Honolulu, HI 96822 PC Honolulu Zoo Society NA Funding for 100 151 Kapahulu Avenue **Activities** Honolulu, HI 96815 New Life Church NA PC Funding for 500 1190 Nuuanu Avenue Activities Honolulu, HI 96817 PC St Clement's School NA Education 1,000 1515 Wilder Avenue Honolulu, HI 96822

The S. and E. Mukai Foundation EIN: 99-0267975 Statement to Form 990-PF Tax Year - 12/31/18 Page 3 of 3

Statement 11 - Grants and Contributions Paid During Year Part XV, Line 3a - Grants and Contributions

Relationship to Foundation **Foundation Status** Purpose of Grant or Contribution Recipient Name and Address Manager of Recipient Amount PC 200 NA Funding for Friends of Waikiki Aquarium Activities 2777 Kalakaua Avenue Honolulu, HI 96815 PC Cultural 100 NA Honolulu Museum of Arts Education 900 S Beretania Street Honolulu, HI 96814 PC Religious 200 Korean Christian Church NA 1832 Liliha Street Honolulu, HI 96817 NA PC Funding for Hawaii Nature Center 100 2131 Makiki Heights Drive Activities Honolulu, HI 96822 Miscellaneous Donations NA PC Funding for 515 Activities **Under \$100**

Total Contributions for 2018

9,565