是認為自然的關係 N/A

EXTENDED TO NOVEMBER 16, 2020 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

Form 990-PF

& Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)

C Adjusted net income (if negative, enter -0-)

Départme		er social security numbers of w.irs gov/Form990PF for inst			Open to Public Inspection
	ndar year 2019 or tax year beginning	· · · · · · · · · · · · · · · · · · ·	, and ending	omation.	Open to 1 abile mapection
	f foundation		, and an an a	A Employer identification	number
	ALIAN AIRLINES FOUNDAT	TION			
	BANK OF HAWAII			46-4283879	
	and street (or P O box number if mail is not delivered to st	reet address)	Room/suite	B Telephone number	
P. C	BOX 3170, DEPT. 715			(808) 694-	4122
	town, state or province, country, and ZIP or foreig	n nostal code		C If exemption application is p	
	IOLULU, HI 96802-3170	ii postai code		o if exemption application is p	ending, check here
	k all that apply: Initial return	Initial return of a fe	ormer public charity	D 1 Foreign organizations	chack here
u onec	Final return	Amended return	officer public charity	b i roreign organizations	s, circumiter
	Address change	Name change		2 Foreign organizations me check here and attach co	eting the 85% test,
H Chao) exempt private foundation		1	
		Other taxable private found	$\mu_{\rm C}$ notes	E If private foundation state	
	ection 4947(a)(1) nonexempt charitable trust			under section 507(b)(1)	
	·	•	Accrual	F If the foundation is in a l	
	Part II, col. (c), line 16)	Other (specify) lumn (d), must be on cash bas	··· \	under section 507(b)(1)	(B), check here
▶ \$					741 -
Part	The total of amounts in columns (b), (c), and (d) may no	(a) Revenue and expenses per books	(b) Net investment	(c) Adjusted net income	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a))		income	l	(cash basis only)
1	Contributions, gifts, grants, etc , received	100,000.	The second secon	N/A	
2	Check I If the foundation is not required to attach Sch. B. Interest on savings and temporary	The state of the s	704	The state of the state of	COM 2 CO 2
3	cash investments	704.	704.	<u></u>	STATEMENT 1
4	Dividends and interest from securities	18,113.	18,113.	<u> </u>	STATEMENT, 2
5	a Gross rents				155个新型的变体。15
	Net rental income or (loss)	11.70	1. 11 76 76 1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
w (Net gain or (loss) from sale of assets not on line 10	6,534.	in the gray time	a din sii di	
Revenu	Gross sales price for all assets on line 6a 31,074		2 1. 6. 3. 10	RF(FIVED
<u>a</u> 7	Capital gain net income (from Part IV, line 2)	The state of the s	6,534.		- IVE
8 ²²	Net short-term capital gain	"好了"。"人"是不知事中"。"		2 2 2 2 2	S S
9	Income modifications	भागामा सम्बद्धाः व	e an marinistration of the second	18 2FY	30 2020
10:	Gross sales less reteros a and allowances	and the state of the state of the	The state of the said		TO STATE OF THE
	Less Cast of goods sold	THE WORLD	図では他は 変いです。	1-1-1-1-3-0GD	EN UT
- 1 -	Gross profit or (loss)		医乳病 教育 经收益		
11	Other income				まずる でんだがい
12	Total Add lines 1 through 11	125,351.	25,351.		And the contract of the contra
13	Compensation of officers, directors, trustees, etc	0.	0.		0
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
S 16	a Legal fees				
i je	Accounting fees STMT 3	1,780.	534.		1,246
Ω.	Other professional fees STMT 4	6,077.	4,558.		1,519
	Interest				
Administrative 61 12 12 12 12 12 12 12 12 12 12 12 12 12	_	395.	0.	1	0
19 Ist	Depreciation and depletion			1	
E 20	•			 	and to be the man of \$10 de
P 21	Travel, conferences, and meetings			 	
P 22	-				
B 23	Other expenses				
	Total operating and administrative				
pera	expenses Add lines 13 through 23	8,252.	5,092.	1	2,765
\sim 1	Contributions, gifts, grants paid	25,000.			25,000
	Total expenses and disbursements.	23,000.	THE PROPERTY OF SHEET SHEETS AND ADMINISTRATION AND	ALMERICAN PROPERTY AND PROPERTY OF THE PROPERT	23,000
120	Add lines 24 and 25	33,252.	5,092.	1	27,765
-		33,434.		PATRICK TRANSPORTER TORONOMEN	
2/	Subtract line 26 from line 12 ⁻	1		《大學》的學科學學學學學學學學學學學學學學學學學學學學學學學學學學學學學學學學學學	"我们"的" "

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Form 990-PF (2019)

Cash - non-interest-bearing

3 Accounts receivable

4 Pledges receivable

disqualified persons

8 Inventories for sale or use

b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans

7 Other notes and loans receivable

13 Investments - other

18 Grants payable

or Fund Balances

Net Assets

19 Deferred revenue

Less accumulated depreciation 15 Other assets (describe ▶

5 Grants receivable

2 Savings and temporary cash investments

Less allowance for doubtful accounts

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts |

9 Prepaid expenses and deferred charges

14 Land, buildings, and equipment basis

instructions Also, see page 1, item I) 17 Accounts payable and accrued expenses

21 Mortgages and other notes payable 22 Other liabilities (describe

23 Total liabilities (add lines 17 through 22)

24 Net assets without donor restrictions 25 Net assets with donor restrictions

and complete lines 26 through 30

29 Total net assets or fund balances

26 Capital stock, trust principal, or current funds

30 Total liabilities and net assets/fund balances

and complete lines 24, 25, 29, and 30

16 Total assets (to be completed by all filers - see the

20 Loans from officers, directors, trustees, and other disqualified persons

Foundations that follow FASB ASC 958, check here

27 Paid-in or capital surplus, or land, bldg, and equipment fund 28 Retained earnings, accumulated income, endowment, or other funds

Foundations that do not follow FASB ASC 958, check here

10a Investments - U.S. and state government obligations

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column should be for end-of year amounts only

Part II Balance Sheets Attached schedules and amounts in the description

6 Receivables due from officers, directors, trustees, and other

46-4283879 Page 2 Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 504 504. 14,503. 31,377. 31,377. THE STATE OF THE S 709,253. 634,532. 649,035. 741,134 STATE OF THE و دورون میرود میرکدی. در دورون میرود میرکدی 649,035 741,134. 0. 649,035. 741,134. 649,035. 741,134 **Analysis of Changes in Net Assets or Fund Balances**

Part III 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 649,035. (must agree with end-of-year figure reported on prior year's return) 92,099. Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) 3 Add lines 1, 2, and 3 741,134 4 Decreases not included in line 2 (itemize) 5 741,134.Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29

Form 990-PF (2019) C/O BAN

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	Part IV Capital Gains a	nd Losses for Tax on Ir	nvestmen	Income							
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)		(9)	How ac - Purch - Dona	quired nase tion	(c) Date acquired (mo., day, yr.)			te sold ay, yr)			
1	a PUBLICLY TRADED	SECURITIES						04/0	1/19	11/1	4/19
	b PUBLICLY TRADED						Р ,	VARI	ous	11/1	4/19
_	c CAPITAL GAINS D	IVIDENDS			<u> </u>						
_	d				_					ļ	
_	e		,		L_,					<u></u>	
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis xpense of sale					ain or (loss s (f) minus		
_	a 7,597.			6,92							671.
_	ь 16,582.			17,61	4.						,032.
_	c 6,895.			_						6	,895.
_	<u>d</u>										
_	Complete only for assets showing	ann in column (h) and award by	the foundation	on 12/21/60				0 10) - I (I-)		
_	Complete only for assets showing		, 		\dashv		(I) COL	Gains (C (k), but i	ol (h) gain not less tha	mınus n -0-) ar	
	(ı) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col (ı), ıf any	1				(from col (
_											671.
_	a b				\dashv						,032.
_	C			-						6	,895.
_	d			-							,055.
_	e										
-		C. H	David Live		$\neg \vdash$						
2	Capital gain net income or (net capi	tal loss) $\begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0} \end{cases}$	r in Part I, line)- in Part I, line	7	<u>}</u>	2_				6	,534.
3	Net short-term capital gain or (loss)	as defined in sections 1222(5) ar	nd (6).								
	If gain, also enter in Part I, line 8, co		` ,) l	Ì					
_	If (loss), enter -0- in Part I, line 8				لل	3			N/A	·	
L	Part V │ Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	Inv	estm	ent Inc	ome			
(F	or optional use by domestic private for	oundations subject to the section	4940(a) tax on	net investment in	come	€.)					
۱f	section 4940(d)(2) applies, leave this	part blank									
	as the foundation liable for the section			•	logs					Yes	X No
_	"Yes," the foundation doesn't qualify Enter the appropriate amount in ear				atrica						
1	(a)		iistructions be	iore making any e				T		(d)	
	Base periód vears	(b) Adjusted qualifying dis	tributions	Net value of no	(C) Inchai		use assets			oution ratio	(0))
_	Calendar year (or tax year beginning	""/	7,420.	100 100 01 110			5,732		(coi (n) aiv	rided by col	27839
_	2018		3,265.				$\frac{3,732}{9,166}$				46358
_	2017		0,728.				$\frac{3,100}{2,519}$				56619
_	2016		1,520.				$\frac{2,519}{6,581}$				$\frac{36019}{74920}$
_	2015 2014		1,105.				$\frac{0,301}{3,066}$				20025
_	2014		1,100.				3,000	┼			20023
2	Total of line 1, column (d)							2		1 7	25761
	Average distribution ratio for the 5-	year hase period - divide the total	on line 2 hy 6 () or by the numb	ar af	voore			· · · · · ·		23/01
J	the foundation has been in existence		on line 2 by 3 t	o, or by the numb	ei ui j	years		3	 	. 3	45152
	the roundation has been in existent	e ii icaa tilaii a yeara						<u> </u>	<u> </u>		43132
4	Enter the net value of noncharitable	-use assets for 2019 from Part X	line 5					4	ì	816	,367.
•	Ento: the fiet value of frontalianable	asc assors for EO to from that A,	11110 0					-	 		, , , , ,
5	Multiply line 4 by line 3							5		281	,771.
Ŭ	Watthly line 7 by line 0							<u>"</u>	<u> </u>		7 7 7 2 0
6	Enter 1% of net investment income	(1% of Part line 27h)						6			203.
J	Cittor 170 of not invosting incomic	(170 or 1 art 1, mile 270)						 -	 		
7	Add lines 5 and 6							7	ļ	281	,974.
•	, tag inited of third of							- -	 		, , , , , .
8	Enter qualifying distributions from F	Part XII, line 4						8		27	,765.
	If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, line	e 1b, and comp	lete that part usin	ıg a 1'	% tax r	ate				

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Pa	rt.VI Excise Tax Based on Investment Income (Section 494	40(a), 4	4940(b), 4	940(e), or 4	1948	- see i	nstru	ction	าร)
18	Exempt operating foundations described in section 4940(d)(2), check here and e	enter "N/	A" on line 1.)	200	1			
	Date of ruling or determination letter. (attach copy of letter if ne	ecessary	-see instructio	ons)	10.00				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	ightharpoons	and enter 1%	>	1			4	05.
	of Part I, line 27b			1				34.50	Telepina.
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4	% of Par	t I. line 12. co	l (b)	2004	1000	200		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; of			(-)	2	105. 77 2.7	ar " halidi ", Ta	Contract Co	0.
3	Add lines 1 and 2		,		3			4	05.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, or	others, e	nter -0-)		4				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	0111070, 0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		5			4	05.
6	Credits/Payments				34,35	THEFT AS	CONTRACTOR OF THE PARTY OF THE	74.6 P. 75	2000
_	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	1	400.		民族	1		
	Exempt foreign organizations - tax withheld at source	6b	 	0.	100	13/3	AL 2	1.54	
	Tax paid with application for extension of time to file (Form 8868)	- 6c		445.					
			 	0.	33%	多常學			
	Backup withholding erroneously withheld	6d	<u> </u>		29.55	E.A.S.M.		0	45.
7	Total credits and payments Add lines 6a through 6d				7	├		<u> </u>	4 0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	аспеа		_	8	ļ			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed				9	ļ		4	4.0
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		4.4.0	.	10				40.
11	Enter the amount of line 10 to be Credited to 2020 estimated tax		440.	Refunded ►	11	<u> </u>			0.
	rt VII-A Statements Regarding Activities						14		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legi-	islation o	r did it particij	oate or intervent	e in		2 , 3	Yes	
	any political campaign?						1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo				nition		1b		Х
	If the answer is "Yes" to $1a$ or $1b$, attach a detailed description of the activities and copies	of any m	naterials publis	shed or			12.7	J., 6.1	1
	distributed by the foundation in connection with the activities						1.,		1,1
C	Did the foundation file Form 1120-POL for this year?						10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th	ie year					1	٠.,	2575 ***
	(1) On the foundation \blacktriangleright \$ (2) On foundation manager	rs 🕨 \$		0.	_		7.00		7.6
е	Enter the reimbursement (if any) paid by the foundation during the year for political expend	dıture tax	imposed on t	foundation			} : `		13/30
	managers ▶\$ 0.						ات نياز د	منه ولدويد	- 7 6
2	Has the foundation engaged in any activities that have not previously been reported to the	IRS?					_ 2		Х
	If "Yes," attach a detailed description of the activities						4.34		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	instrum	ent, articles of	incorporation,	or _		1	1.	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes						3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the ye	ar?					4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?				N	[/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year	?					5		X
	If "Yes," attach the statement required by General Instruction T						12.00	O. Ber	MECO.
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied 6	either:						12	1.5
	By language in the governing instrument, or								1
	By state legislation that effectively amends the governing instrument so that no mandato	rv direct	ions that conf	lict with the stat	e law				53
	remain in the governing instrument?	,					6	X	***************************************
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," com	nlete Par	rt II. col. (c). a	nd Part XV			7	Х	
			,					PS:	(Turkey
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ons 🕨					125		
va	HI	5110							1
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney	General (or de	esinnate)	· ·				1
·	of each state as required by General Instruction G? If "No," attach explanation	rittorney	Gondai (or u	ooignato)			8b	X	1 2011
9	Is the foundation claiming status as a private operating foundation within the meaning of s	ection Al	042(1)(3) or 40	142(1)(5) for cal	ender				SA.
3	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," cor			ידב(וונט) וטו נמו	uiuai			engi.	X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a sched	-		4 - 44			10	\vdash	X
_10	Did any persons become substantial continuators during the tax year in "Yes," attach a sched	aule listing	their names and	addresses			10		_ 42

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Pа	art VII-A Statements Regarding Activities (continued)					
`		18.5%	Yes	No		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	ļ		х		
	section 512(b)(13)? If "Yes," attach schedule. See instructions					
12	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	l		
	Website address ► N/A					
14	The books are in care of ► BANK OF HAWAII Telephone no. ► (808)		-41	22		
	Located at ► 111 S. KING STREET, DEPT. 758, HONOLULU, HI ZIP+4 ►96	813				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		, . ▶	لـــا		
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No		
	securities, or other financial account in a foreign country?	16		Х		
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the		COL	9.		
_	foreign country	325	*************************************	No.		
r,a	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Tara war				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No		
1a	1 During the year, did the foundation (either directly or indirectly)	9		12.73		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	3	**************************************	16 64 17 7 1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	10 mg	4 1	1		
	a disqualified person?	200	3	E 3-74 8		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	ST.		21.4		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	3.1				
	(5) Transfer any income or assets to a disqualified person (or make any of either available		. 10. 1	7 3 4		
	for the benefit or use of a disqualified person)?		# - 7	. 7		
	(6) Agree to pay money or property to a government official? (Exception Check "No"	4,1	.37	y		
	if the foundation agreed to make a grant to or to employ the official for a period after		. "\"	12,5		
	termination of government service, if terminating within 90 days.)	1, 5	*15.			
D	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A					
	``	1b				
_	Organizations relying on a current notice regarding disaster assistance, check here	3.85	3 (
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	1 4	27.7	X		
2	before the first day of the tax year beginning in 2019? Taxon on follows to distribute groups (section 4043) (does not easily for years the foundation was a power operation foundation.	1c	ع قدر جا	A.		
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))		100	4 TE		
			1	1 1		
a	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? Yes X No	15.20	200	74.3		
	6d and 6e) for tax year(s) beginning before 2019? If "Yes," list the years , , , , , , , , , , , , , , , , , ,	1	1	13.4		
.	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	新建	3.5			
U	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		3.1	13.0		
	statement - see instructions) N/A	2b	25,53	2973		
^	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20	58.18.EV.	100 S		
·	the the provisions of section 4342(a)(2) are being applied to any of the years listed in 2a, list the years here.		高級			
22	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1		1		
Ja	during the year? — Yes X No	188	3			
h	of "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after	認識	1			
J	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	138				
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	100	變	200		
	Schedule C, to determine if the foundation had excess business holdings in 2019.) N/A	3p				
An	1. Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	x		
	Did the foundation mivest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	**a	数分泌			
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b	***********	X		
_	nac not been to more grouper by before the mot day of the tax year beginning in 2019.	1 70	Щ	<u></u> _		

C/O BANK OF HAWAII

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)		
5a During the year, did the foundation pay or incur any amount to:				Yes	No
` (1) Carry on propaganda, or otherwise attempt to influence legislation (section	es 🗶 No				
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?		Y6	es 🗶 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es 🗓 No	- 1	
(4) Provide a grant to an organization other than a charitable, etc., organization			ŀ		
4945(d)(4)(A)? See instructions		Y6	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or			
the prevention of cruelty to children or animals?	, , ,		es X No	- {	1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations			1
section 53 4945 or in a current notice regarding disaster assistance? See instri	•	- 0	N/A 5	iβ	
Organizations relying on a current notice regarding disaster assistance, check l					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		ned	_		'
expenditure responsibility for the grant?			es 🗆 No	ŀ	١,
If "Yes," attach the statement required by Regulations section 53 4945-5(d)					ļ
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	nav premiums on		ļ		
a personal benefit contract?	pay promising on	☐ Y/	es X No	l	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal henefit contract?			6b	X
If "Yes" to 6b, file Form 8870.	or domail bottom domaide				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Y#	es X No	- 1	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			⊢	7b	
B Is the foundation subject to the section 4960 tax on payment(s) of more than \$		•	- 11/11 -		
excess parachute payment(s) during the year?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		es X No		
Part VIII Information About Officers, Directors, Trust	ees Foundation Ma				
Paid Employees, and Contractors	ees, i ouildation ma	magers, riiging	y		
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(e) Exp	enșe
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	account allowa	, other
ANN BOTTICELLI	PRESIDENT		compensation		
P.O. BOX 20008	1.2222211				
HONOLULU, HI 96820-0008	1.00	0.	o .l		0.
SHANNON OKINAKA	VP/TREASURER	 			
P.O. BOX 20008	, , , , , , , , , , , , , , , , , , , ,				
HONOLULU, HI 96820-0008	1.00	0.	0.		0.
	SECRETARY				
P.O. BOX 20008					
HONOLULU, HI 96820-0008	1.00	0.	o .		0.
HONOLOLO, HI JOOZO COCC	1.00				••
	1				
	1				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1), If none,	enter "NONE."	<u> </u>		
	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Exp	pense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred	ačcount allowa	l, other inces
NONE	dovoted to position		compensation	4110	
		 			
	1	([[
		 			
	1				
		 			
	1	1			
	1				
Total number of other employees paid over \$50,000		1	<u> </u>		0
		 	Form	990-PF	(2019)

Total. Add lines 1 through 3

46-4283879 Form 990-PF (2019) C/O BANK OF HAWAII Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (c) Compensation (b) Type of service NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions

Form **990-PF** (2019)

C/O BANK OF HAWAII

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	art X Minimum Investment Return (All domestic foundation		t Foreign foundation	ns, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out chari	table, etc., purposes.		
а	Average monthly fair market value of securities		1a	794,690. 34,109.
b	Average of monthly cash balances		1b	34,109.
C	Fair market value of all other assets		1c]	
đ	Total (add lines 1a, b, and c)		1d	828,799.
е	Reduction claimed for blockage or other factors reported on lines 1a and		€ • 1× 4	
	1c (attach detailed explanation)	1e	0.	
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	828,799.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amo	unt, see instructions)	4	12,432.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and	d on Part V, line 4	5	816,367.
6_	Minimum investment return Enter 5% of line 5		6	40,818.
P	art XI - Distributable Amount (see instructions) (Section 4942(j)(3 foreign organizations, check here		foundations and certa	in
-	Minimum investment return from Part X, line 6	art.)	11	40,818.
	Tax on investment income for 2019 from Part VI, line 5	2a	405.	10,0100
b		2b		
C		20	2c	405.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	40,413.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	40,413.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on F	Part VIII lina 1	7	40,413.
_		art Airi, mile i		40,413.
L	art XII Qualifying Distributions (see instructions)			_
1	Amounts paid (including administrative expenses) to accomplish charitable, etc.,	purposes.		
а	Expenses, contributions, gifts, etc - total from Part 1, column (d), line 26		1a	27,765. 0.
b	Program-related investments - total from Part IX-B		1b	_0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out chair	ritable, 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	3, and Part XIII, line 4	4	27,765.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net i	nvestment		
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4		6	27,765.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent year	s when calculating whether	the foundation qualifies	
	4940(e) reduction of tax in those years	-		

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(D) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				40,413.
2 Undistributed income, if any, as of the end of 2019		である。 では、 では、 では、 では、 では、 では、 では、 では、	三十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二	ZARIANTARIA
a Enter amount for 2018 only			0.	
b Total for prior years.		ACCOUNT TO A STATE OF THE PARTY		
<u> </u>		0.		
3 Excess distributions carryover, if any, to 2019.		经国际现代的		
a From 2014 79,774. b From 2015 92,781.				
				第56年的
cFrom 2016 81,209.				
dFrom 2017 82,676.				
e From 2018				
f Total of lines 3a through e	336,440.		民智學的學學的學學	的是不是不是不是一个人的。
4 Qualifying distributions for 2019 from				《美国教育》
Part XII, line 4 ► \$ 27,765.			_	
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		O.	CONTROL OF STREET	CARRY STATE OF STATE
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount	7. 内面的 18 18 18 18 18 18 18 18 18 18 18 18 18		The second secon	27,765.
e Remaining amount distributed out of corpus	0.	を表現して、これ、またには、 を表現して、これには、 を表現して、これには、 を表現して、これには、 を表現して、これには、 を表現して、これには、 を表現して、これには、 を表現して、これには、 を表現して、これには、 を表現して、これには、 を表現して、 をまままままままままままままままままままままままままままままままままままま	一方面 とうかん とうしょう	是是我的人们的政策
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	12,648.			12,648.
6 Enter the net total of each column as	,			
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	323,792.		される。	
b Prior years' undistributed income. Subtract				
line 4b from line 2b	The said to the sa	0.	是是一种的 的 经 人名	新展的發展了影響 了
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which	"特别"。			
the section 4942(a) tax has been previously		_		
assessed	· · · · · · · · · · · · · · · · · · ·	0.	CONTRACTOR OF THE PROPERTY OF	は ない
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions e Undistributed income for 2018. Subtract line	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	· U	文学是企业的工作的	THE STATE OF THE S
4a from line 2a. Taxable amount - see instr			0.	
f Undistributed income for 2019 Subtract	不是是一种的人们的人们的人们的人们的人们的人们们们们们们们们们们们们们们们们们们们们们		THE STATE OF THE S	
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of	THE PROPERTY OF THE PROPERTY O			表記書於在流行物的文化與於深
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014		AND THE PROPERTY OF THE PARTY O		THE RESERVE OF THE PARTY OF THE
not applied on line 5 or line 7	67,126.			
9 Excess distributions carryover to 2020.				The second secon
Subtract lines 7 and 8 from line 6a	256,666.			
10 Analysis of line 9.				
a Excess from 2015 92,781.				
b Excess from 2016 81, 209.				
c Excess from 2017 82,676.				
d Excess from 2018				
e Excess from 2019	"是是是我们是是是我们的			

HAWAIIAN AIRLINES FOUNDATION Form 990-PF (2019) C/O BANK OF HAWAII 46-4283879 Page 10 Part XIV: Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 'a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or Prior 3 years 2 a Enter the lesser of the adjusted net Tax year (d) 2016 (b) 2018 (a) 20 19 (c) 2017 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4, for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942(1)(3)(B)(1) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV: Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2)) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here Lift the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed. SEE STATEMENT POLICY-1 b The form in which applications should be submitted and information and materials they should include: SEE STATEMENT POLICY-1 c Any submission deadlines. SEE STATEMENT POLICY-1 d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: SEE STATEMENT POLICY-1

Form 990-PF (2019) C/O BANK OF HAWAII

Part XV Supplementary Information (continued)

46-4283879 Page 11

if recipient is an individual,	Foundation	Purpose of grant or	
any foundation manager or substantial contributor	I status of	contribution	Amount
}			
	PC	,	
		THE TV SHOW PILITALA	25,0
	ļ		
			
	<u> </u>	▶ 3a	25,0
		,	
I	1	i	
	If recipient is an individual, show any relationship to any foundation manager or substantial contributor		PC TO PROVIDE FUNDING FOR THE TV SHOW PILIKIA

HAWAIIAN AIRLINES FOUNDATION C/O BANK OF HAWAII

Form 990-PF (2019) C/O BANK OF	HAWAII			46-4	283879 Page 1
Part XVI-A Analysis of Income-P	Producing Activitie	es			
Enter gross amounts unless otherwise indicated.		ousiness income		y section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b					
c		 			
d					
e	— — -				
T	—— 				
g Fees and contracts from government agencies2 Membership dues and assessments	<u> </u>				
3 Interest on savings and temporary cash				_	· · · · · · · · · · · · · · · · · · ·
investments			14	704.	
4 Dividends and interest from securities			14	18,113.	
5 Net rental income or (loss) from real estate:	, , ,		+	1 20,000	7, 7,
a Debt-financed property	-	<u>-</u>	-		· · · · · · · · · · · · · · · · · · ·
b Not debt-financed property			+		
6 Net rental income or (loss) from personal					_
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	6,534.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue					
a					
b					
C					
d			_		
e		·		25 251	
2 Subtotal. Add columns (b), (d), and (e)	<u> </u>		0.	25,351.	0 25,351
3 Total Add line 12, columns (b), (d), and (e)	V			13	25,351
See worksheet in line 13 instructions to verify calcula					
Part XVI-B Relationship of Activ	ities to the Accon	nplishment of	Exempt Po	urposes	
Line No Explain below how each activity for wh	uch income is reported in a	column (e) of Part XV	N-A contributed	importantly to the accomp	hishment of
the foundation's exempt purposes (oth				importantly to the decemp	Allominone of
					_
		_ _			
			· <u> </u>		
					
					

Form 990-PF (2	2019) C/O B	ANK OF HAWAII			46-428	3879	Page 13
Part XVII		egarding Transfers to	and Transactions a	nd Relations	nips With Noncha	ritable	
1 Did the or	Exempt Organ	rectly engage in any of the follow	una with any other argonizati	on described in sect	on F01/a)		es No
		rectly engage in any of the follow fizations) or in section 527, relati			un 50 f(c)	-	65 110
**		ation to a noncharitable exempt o	• .			'	
(1) Cash						1a(1)	X,
(2) Other	r assets					1a(2)	X
b Other tran	sactions:						
(1) Sales	of assets to a noncharital	ble exempt organization				1b(1)	X '
(2) Purcl	hases of assets from a no	ncharitable exempt organization				1b(2)	X
(3) Renta	al of facilities, equipment,	or other assets				1b(3)	X
(4) Reim	bursement arrangements					1b(4)	X
	s or loan guarantees					1b(5)	X
		embership or fundraising solicitat				1b(6)	X
_		uling lists, other assets, or paid e				1c	X
		"Yes," complete the following sch					ts,
		oundation. If the foundation received		ue in any transaction	or sharing arrangement,	snow in	
(a) Line no	(b) Amount involved	other assets, or services received (c) Name of noncharitati		(d) Constitution	of transfers, transactions, and	choung area	
(a) Line 110	(b) Amount involved	N/A		(b) Description	on transfers, transactions, and	Sharing arran	
		N/A					
					 		
				 			_
							-
							
	·						
		tly affiliated with, or related to, or	ne or more tax-exempt organ	izations described	_	_	[-
		on 501(c)(3)) or in section 527?			Ĺ	Yes	X No
b If "Yes," co	omplete the following sch		(h) Type of economication		(a) Decorration of relations		
	(a) Name of org	Janizanon	(b) Type of organization		(c) Description of relations		
	IN/A		_				
_				 			
			 				
Under	penalties of perjury, I declare	that I have examined this return, include	I ding accompanying schedules and	I statements, and to the	best of my knowledge	ou the #WY	alles Res
Sign and b	elief, it is true, correct, and cor	molete Recla aton of preparer (other the	nan taxpayer) is based on all inform	mation of which prepare	r has any knowledge ret	ay the IRS dis turn with the j own below?	preparer
Here			9,62,60	Seek		X Yes	No D
Sigi	nature of officer or trustee		Date	Title	 L		
	Print/Type preparer's na		signature	Date	Check if PTIN		
		Min		CED II anan	self- employed		
Paid	JAY YAMAUC			SEP 0 4 2020		05298	
Preparer	Firm's name ► BAN	K OF HAWALA	· · · · · · · · · · · · · · · · · · ·		Firm's EIN ► 99-0	03390	0
Use Only							
	4	O. BOX 3170, D					
	но	NOLULU, HI 968	02-3170			694-	
					- <u></u> -	orm 990	-PF (2019)

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

2019

Employer identification number

	HAWAIIAN AIRLINES FOUNDATION C/O BANK OF HAWAII	46-4283879
Organization type (chec		10 1203073
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	on is covered by the General Rule or a Special Rule . 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special R	ule See instructions
X For an organiza	ition filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalin any one contributor. Complete Parts I and II. See instructions for determining a contributo	
Special Rules		
sections 509(a) any one contrib	tion described in section 501(c)(3) filing Form 990 or 990·EZ that met the 33 1/3% suppor (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990·EZ), Part II, line 13, 16a outor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount EZ, line 1 Complete Parts I and II	, or 16b, and that received from
year, total cont	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III	
year, contributi is checked, ent purpose Don't	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ons exclusively for religious, charitable, etc., purposes, but no such contributions totaled ner here the total contributions that were received during the year for an exclusively religiou complete any of the parts unless the General Rule applies to this organization because it able, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box s, charitable, etc ,
Caution: An organization	n 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
HAWAIIAN AIRLINES FOUNDATION
C/O BANK OF HAWAII

Employer identification number

46-4283879

C/O B	ANK OF HAWAII		3-4203013
Part	Contributors (see instructions) Use duplicate copies of Part I	if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HAWAIIAN AIRLINES 3375 KOAPAKA STREET, #G350 HONOLULU, HI 96819	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
;i		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Schedule B (Form 990, 990 EZ, or 990-PF) (2019) Name of organization HAWAIIAN AIRLINES FOUNDATION C/O BANK OF HAWAII

Employer identification number

46-4283879

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		

Schedule B (Form 990, 990-EZ, or 990 PF) (2019) Page 4 Name of organization **Employer identification number** HAWAIIAN AIRLINES FOUNDATION C/O BANK OF HAWAII 46-4283879 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (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 linfo once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

FORM 990-PF INTERE	ST ON SAVI	NGS AND	rempor <i>a</i>	ARY CASH	INVESTMENTS	STATEMENT 1
SOURCE BANK OF HAWAII A/C #XXXXX04905			(A) EVENUE R BOOKS			(C) ADJUSTED NET INCOME
			704.		704.	
TOTAL TO PART I, LINE 3			704.		704.	
FORM 990-PF	DIVIDENI	os and in	rerest	FROM SEC	URITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPI GAII DIVIDI	NS	(A) REVENUE PER BOOK		
BANK OF HAWAII A/C #XXXXX04905	25,008	3. 6	,895.	18,11	3. 18,11	
TO PART I, LINE 4	25,008	6	,895.	18,11	3. 18,11	13.
FORM 990-PF		ACCOU	NTING E	FEES		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOM		(B) T INVEST- VT INCOME		
			ito iidi	AT THEOME	MEI INCOL	ME PURPOSES
TAX PREPARATION FEE	s	1,78		534		1,246.
TAX PREPARATION FEE TO FORM 990-PF, PG	_	1,78	80.		•	
	1, LN 16B =		80.	534 534	•	1,246.
TO FORM 990-PF, PG	1, LN 16B =	1,78	FESSION	534 534	(C)	1,246. 1,246. STATEMENT 4 (D) CHARITABLE
TO FORM 990-PF, PG FORM 990-PF	1, LN 16B =	1,78 OTHER PROD (A) EXPENSES	FESSION	534 534 NAL FEES (B) T INVEST-	(C) ADJUSTEI	1,246. 1,246. STATEMENT 4 (D) CHARITABLE

FORM 990-PF	XAT	ES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO				
2018 FEDERAL EXTENSION PAYMENT	395.		0.	0.		
TO FORM 990-PF, PG 1, LN 18	395.		0.	0.		
FORM 990-PF	OTHER INV	ESTMENTS	-	STATEMENT 6		
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE		
SEE STATEMENT INV		COST	709,253.	845,952.		
TOTAL TO FORM 990-PF, PART I	I. LINE 13		709,253.	845,952.		

HAWAHAN AIRLINES FOUNDATION EIN #46-4283879 FORM 990-PF, PART II LINE 13 OTHER INVESTMENTS FYE 12/31/2019

Description	Units	Tax Cost	Market Value
066922204 ISHARES S&P 500 INDEX FUND	206.029	E2 424 02	79.051.40
09253F879 ISHARES MSCI EAFE INTERNATIONAL INDEX FUND		53,434 03	78,851 42
	4,221.736	51,630 96	58,555.48
256206103 DODGE & COX INTERNATIONAL STOCK FUND	363 589	14,152 56	15,852 48
31428Q101 FEDERATED TOTAL RETURN BOND FUND	5,865 772	63,204 87	64,934 10
38142Y773 GOLDMAN SACHS LARGE CAP VALUE FD - INST	1,786 592	26,209.58	27,174.06
38144N593 GOLDMAN SACHS INTERNATIONAL SMALL CAP INSIGHTS INSTL	1,520 255	16,158 32	18,182.25
41664R184 HARTFORD CORE EQUITY - R6	959 662	27,535.94	33,991 23
47803W406 JOHN HANCOCK III DISC M/C-IS	1,446 743	26,826 12	32,218 97
56062X641 MAINSTAY WINSLOW LRG CAP GROWTH FUND CL I	2,723 954	25,286 25	27,648.13
577130834 MATTHEWS PACIFIC TIGER FUND CL INS	364 220	9,828 76	10,456 76
74144Q203 T ROWE PRICE INSTITUTIONAL EMERGING MARKETS EQUITY FUND	282 091	9,381 70	12,005 79
74316J458 CONGRESS MID CAP GROWTH-INS	1,532.138	23,789 25	33,967.50
74316J490 BECKER VALUE EQUITY FD-INST	1,529.884	27,922 51	28,593 53
78462F103 SPDR S&P 500 ETF TRUST	85 000	21,107 86	27,358 10
921909818 VANGUARD TOTAL INTL ST INDEX FUND-ADM	2,268 725	59,097 78	67,766.82
921937603 VANGUARD TOTAL BOND MARKET INDEX FUND ADM	11,780 254	125,856 91	130,171.81
922908728 VANGUARD TOTL STK MKT IND-AD	2,081 866	116,584 52	165,903 90
94984B348 WELLS FARGO ADVANTAGE INTERNATIONAL EQUITY FUND - I	1,030 970	11,245 16	12,320 09
Total Other Investments		709,253.08	845,952.42

Hawaiian Airlines Foundation

The Hawaiian Airlines Foundation was established in 2013 to provide support to Hawai'i-based organizations that promote individual and community well being in three areas:

Education

As one of the largest employers in Hawai'i, Hawaiian Airlines is committed to furthering the education of its future workforce. Hawaiian Airlines will provide a single annual grant of \$50,000 to support programs or projects that seek to improve student achievement in Hawai'i.

Culture

As a destination carrier, Hawaiian Airlines' singular focus is carrying guests to and between the Hawaiian Islands with service that embodies the unique hospitality that springs from the host culture. The airline will provide a single annual grant of \$25,000 to support programs or projects that perpetuate Hawaiian cultural knowledge and awareness.

Environment

Hawai'i's comparative advantage as a destination lies in its incomparable climate and natural beauty. Hawaiian Airlines will provide a single annual grant of \$25,000 to support programs that protect and preserve the ecology and ecosystems of the state.

Policy

Each year, the Hawaiian Airlines Foundation will invite three programs in each category to submit applications for the grant offered. One applicant will be selected to receive the entire grant amount.

Applicants are invited to submit proposals by June 30 of the calendar year.

Grants will be awarded on July 31 of each calendar year.

Applicants must:

- Have a 501(c)3 non-profit status.
- Provide a clear plan that articulates the proposed use of the grant and its alignment to the program mission and identifies measurable and achievable outcomes.

Grants are not awarded to individuals, endowments or for capital programs or ongoing operational expenses.

Multiple-year grants will not be considered.

Programs must be within the State of Hawai'ı.

Grantees must submit a final report reflecting on the successes and challenges of the initiative funded by the grant.

EIN: 46-4283879

FYE: 12/31/2019

EIN: 46-4283879 FYE: 12/31/2019

Application process

Submit 4 (four) completed sets of the proposal containing:

- A cover sheet to be placed on top of each set.
- A brief description (2 or 3 sentences) of the applying organization's mission and program.
- A description (not to exceed 3 pages) of how the grant would be used to further the program's objectives and mission.
- A budget and timeline for the expenditure of the grant.
- Metrics that will be used to evaluate the success of the initiative funded by the grant.
- A copy of the program's 501(c) 3 Internal Revenue Service determination letter.
- · Current Board members.
- Program charter and bylaws.
- Operating budget for current and subsequent Fiscal Year.
- Income statement for the most recently completed Fiscal Year.
- Current Balance Sheet.

Mailing Address

Proposals should be mailed to:

Postal Service
Hawaiian Airlines Foundation
c/o Bank of Hawaii
Charitable Foundation Services #758
P.O. Box 3170
Honolulu, HI 96802-3170

Delivery Address
Hawaiian Airlines Foundation
c/o Bank of Hawaii
Charitable Foundation Services #758
111 S. King Street
Honolulu, HI 96813

Contact information

Carol Tom, Vice President & Team Leader Email. carol tom@boh.com
Phone: 808-694-4525

Fran Scott, Trust Administrator email. fran.scott@boh.com Phone: 808-694-4399 Fax: 808-694-4647

HAWAIIAN AIRLINES FOUNDATION FORM 990-PF, PART XV, LINE 2

EIN: 46-4283879 FYE: 12/31/2019

Hawaiian Airlines Foundation

Funding Request Cover Sheet

Organization Information (must	t be a 501(c)3 tax-exempt organization	1)
Name:		
Address:		_
Phone:	Fax:	
Website:		
Executive Director of applicant	organization (if no ED, name chief co	npensated staff
person)		
Name:		
Address ⁻		<u> </u>
Phone:	Email:	
Contact person for this applicat	ion	
Name:	Title:	
Address:		
Phone:	Email:	
Project information		
Project Title:		
Purpose of project (one sentence)		
Two signatures are required		
Executive Director (Chief Compensated Staff)	Board Chair or President (Chief Voluntee	r)
Print or type name and title Date	Print or type name and title [Date