Form **990**

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust

OMB No. 1545-0047 1997

Note: The organization may have to use a copy of this return to satisfy state reporting requirements.

This Form is Open to Public Inspection

AF	or the 19	997 calendar year, OR tax year period beginning	7/ 1	, 1997, and ending		6/30	, 19 9 8
ВС	heck if:	Please C Name of organization			D Employe	r identification n	umber
	Change	use IRS				:	
	address	habelor KAMEHAMEHA ACTIVITIE	S ASSOCIATION		51-	0190227	
	Initial return	type. Number and street (or P.O. box if mail is no	ot delivered to street address)	Room/suite	E State reg	istration number	г
	Final return	Specific P. O. BOX 3466					
	Amende return	Instruc- tions. City, town, or post office, state, and ZIP+4			F Check 🕨		
	return (required als for State reporting)	MONOLULU, HI 96801					ion is pending
	ype of o	$rganization \longrightarrow [X] $ Exempt under 501(c) (3)					
<u>Not</u>	e: Sect	ion 501(c)(3) exempt organizations and 4947(a)	(1) nonexempt charitable	trusts MUST attach a c	ompleted S	Schedule A (Fo	orm 990).
H(a)	Is this a	a group return filed for affiliates?	Yes 🗶 No I	If either box in H is checked	l "Yes," enter	: four-digit group	
(b)	If "Yes,"	enter the number of affiliates for which this		exemption number (GEN)	_►		
	return i	is filed:		Accounting method:		Accrual	_
		separate return filed by an organization covered by a group ruling		X Other (specify)			<u>i</u>
		e 🕨 🔲 if the organization's gross receipts are norm				the IRS; but	
		ed a Form 990 Package in the mall, it should file a return					
	: Form S	990-EZ may be used by organizations with gross receipt	s less than \$100,000 and tota	l assets less than \$250,000 a	t end of year	<u>• </u>	
Pa		Revenue, Expenses, and Changes in		Balances			
	1	Contributions, gifts, grants, and similar amounts received		میر ایا	00	;	
	I .	Direct public support		1a 24,4	90.	[;	
	b	Indirect public support		1b		!	
	°.	Government contributions (grants)		STMT	1		
-	đ	Total (add lines 1a through 1c) (attach schedule of cor (cash \$ 24,490 noncash \$			_		24,490.
	,	Program service revenue including government fees an					14,470.
	2						
25	3	Membership dues and assessments Interest on savings and temporary cash investments	***************************************				
200	5	Dividends and interest from securities					99,533.
0	6 a	Gross rents		l _ [<u>, , , , , , , , , , , , , , , , , , , </u>
⊃	Ь	Less; rental expenses					
		Net rental income or (loss) (subtract line 6b from line 6			60	,	
3 5	7	Other investment income (describe	~/	***************************************) 7		
	1 '	Gross amount from sale of assets other	(A) Securities	(B) Other			
٦٣		than inventory					
ħ	b	Less: cost or other basis and sales expenses	1,637,977.			,	
2	C		112,646.	8c			
	d	Net gain or (loss) (combine line 8c, columns (A) and (I	B)) STMT 2	******	8d	1 11	L2,646.
Ó	9	Special events and activities (attach schedule):					
	a	Gross revenue (not including \$	of contributions			·	
		reported on line 1a)	,	9a			
	b	Less: direct expenses other than fundraising expenses				i	
	C	Net income or (loss) from special events (subtract line	9b from line 9a)	·······	90	<u> </u>	
	10 a	Gross sales of inventory, less returns and allowances Less: cost of goods sold		-10a-			
	b	Less; cost of goods sold	HEC	110P/1CD		i	
	C	Gross profit or (loss) from sales of inventory (attach so			10		F 00F
	11	Other revenue (from Part VII, line 103)		31 1999	11		<u>5,285.</u>
	12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10		<u> </u>	12		<u>11,954.</u>
ø	13	Program services (from line 44, column (B))	OGT	TEXT III	13		L5,125.
Expenses	14				14		54,050 <u>.</u>
ğ	15	Fundraising (from line 44, column (D))					
Ш	16		.,				79,175.
	17	Total expenses (add lines 16 and 44, column (A)) Excess or (deficit) for the year (subtract line 17 from line)	ne 12)	·····	<u>17</u> 18		52,779.
ر بر ب	19	Net assets or fund balances at beginning of year (from	line 73. column (A))		19		70,252.
Net Assets	20	Other changes in net assets or fund balances (attach e.					0.
<(21	Net assets or fund balances at end of year (combine lin					33,031.
LHA		Paperwork Reduction Act Notice, see page 1 of the se	**************************************	·····	<u>اع :</u> م.		orm 990 (1997)
7230 03-1	01 2-98	. apaom modaonon sior munoo, dou pago i oi tito del	1		16	σ_{i}	230 (1001)

Statement of All or	ganizatio	CTIVITIES AS	ı (A), Columns (B), (C), an	51-0 d (D) are required for section usts but optional for others.	190227 Page 2 n 501(c)(3) and
Do not irrelude amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22 Grants and allocations (attach schedule)					
cash \$215,125 noncash \$	22	215,125.	215,125.	STATEMENT 4	
23 Specific assistance to individuals (attach schedule)	23]	1
24 Benefits paid to or for members (attach schedule)	24				
25 Compensation of officers, directors, etc.	25	0.	0.	0.	0.
26 Other salaries and wages					
27 Pension plan contributions					
28 Other employee benefits					
29 Payroll taxes					
30 Professional fundraising fees					;
31 Accounting fees					
32 Legal fees					
33 Supplies					
34 Telephone					
35 Postage and shipping					1
36 Occupancy		<u> </u>			
37 Equipment rental and maintenance					
38 Printing and publications					i
39 Travel					
40 Conferences, conventions, and meetings					:
41 Interest					
43 Other expenses (itemize):	42				
a PROFESSIONAL SERVICES	43a	63,692.		63,692	1
b MISCELLANEOUS	43b	358.		358.	
	43c	330.		330.	
¢	43d				
0	43e			· · · · · · · · · · · · · · · · · · ·	
44 Total functional expenses (add lines 22 through 43)	438	-			
Organizations completing columns (B)-(D), carry these	44	279,175.	215,125	64,050.	0.
totals to lines 13-15 Reporting of Joint Costs Did you report in column (B					
fundraising solicitation?	-				Yes X No
If "Yes," enter (i) the aggregate amount of these joint co	ete \$	• 1	ii) the amount allocated to	Program services \$:
(iii) the amount allocated to Management and general \$	οιο ψ <u> </u>	; and (iv) the amount allocated to	o Fundraising \$	
Part III Statement of Program Serv			TY HIS ANTOSIK GROSSICS K	o r andraionig φ	
What is the organization's primary exempt purpose?			3	· · · · · · · · · · · · · · · · · · ·	
What is the digalization o phinary exempt purpose;	<u>Lunu</u>	DIIIIIIIIIII	<u></u>		Program Service
All organizations must describe their exempt purpose achievemen	nts in a cle	ear and concise manner. State t	the number of clients served, p	ublications issued, etc. Discuss	Expenses (Required for 501(c)(3) and
achievements that are not measurable. (Section 501(c)(3) and (4) callocations to others.)	organizatio	ns and 4947(a)(1) nonexempt o	haritable trusts must also ente	r the amount of grants and	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a TO PROVIDE SCHOLARSHIP	S AN	D GRANTS TO	ALUMNI AND	CURRENT	
STUDENTS OF THE KAMEHA					
DIODERIO OI IIIE IGGILIGI			DDOCLAL LOIN	<u> </u>	
<u>, , , , , , , , , , , , , , , , , , , </u>		10	Grants and allocations \$	215,125.)	215,125.
b			лано ано вносеново ф		
					1
		10	Grants and allocations \$	1	1 :
C			а алго алго апросатото ф		
<u> </u>					1
			· · · · · · · · · · · · · · · · · · ·		i
			Grants and allocations \$,	
d			лано ани апочаноно ф		
W					'
		11	Grants and allocations \$,	{
Other program services (attach schedule)			Frants and allocations \$	1	
f Total of Program Service Expenses (should equal	line ///				215,125.
· ratas at Lindiani aciate Exhanses follonia edage	11110 771	Solding (D), Frogram Sciv			<u> </u>

Part IV Balance Sheets

lote:		e required, attached schedules and amounts within the id-of-year amounts only.	descrip	tion column should be		(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing				5,605.		<12,994.
	46	Savings and temporary cash investments					46	- i
	47 a	Accounts receivable	47a					!
	Ь	Less: allowance for doubtful accounts	47b		-		47c	
	48 a	Pledges receivable			_			:
	40	Less: allowance for doubtful accounts	+		48c			
	49 50	Grants receivable Receivables from officers, directors, trustees, and key schedule)	employ	ees (attach			50	
ets	51 a	Other notes and loans receivable	51a	***************************************	··		00	!
Assets	b	Less: allowance for doubtful accounts	51b				51c	
`	52	Inventories for sale or use			[52	
	53	Prepaid expenses and deferred charges					53	
ļ	54	Investments - securities (attach schedule) S.	TMT	5		5,130,880.	54	4,745,685
	55 a	Investments - land, buildings, and		1				
1		equipment; basis	55a					1
	ט	schedule)	55b				55c	!
	56	Investments - other SI			\dashv	34,367.	56	600,340
-	57 a	Land, buildings, and equipment; basis			·	5475074	- 00	0007010
		Less: accumulated depreciation					57c	,
	58	Other assets (describe)	·	58	1
	59	Total assets (add lines 45 through 58) (must equal lines	ne 741			5,170,852.	59	5,333,031
	60	Accounts payable and accrued expenses				600.	60	
	61	Grants payable					61	
န္	62	Deferred revenue					62	
Ě	63	Loans from officers, directors, trustees, and key empl					63	
Labilities		Tax-exempt bond liabilities					64a	
-	Ь	Mortgages and other notes payable			C		64b	'
	65	Other liabilities (describe			.)	- 10	65	
	66	Total liabilities (add lines 60 through 65)		<u> </u>		600.	66	o
	Organ			mplete lines 67 through				
		69 and lines 73 and 74						ļ
8	67	Unrestricted		,	L	845,372.	67	851,585
ᇤ	68	Temporarily restricted				4,324,880.	68	4,481,446
ĕ	69	Permanently restricted				· · · · · · · · · · · · · · · · · · ·	69	·
Net Assets or Fund Balances	Organ	nizations that do not follow SFAS 117, check here	لـــا	and complete lines	ŀ			•
P	70	70 through 74					70	1
ets	70	Capital stock, trust principal, or current funds					70	
SS	71	Paid-in or capital surplus, or land, building, and equip						
et/	72	Retained earnings, endowment, accumulated income, Total net assets or fund balances (add lines 67 throu					72	
Z	73	column (A) must equal line 19 and column (B) must e				5,170,252.	73	5,333,031
	74	Total liabilities and net assets / fund balances (ad			. –	5,170,852.	74	5.333.031

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

	990 (1997) KAMEHAMEHA ACTIVITIE	S AS	SOCIA	MOIT		51-	0190:	227 Page
Pai	rt IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per		t IV-B	Recond	iliation of Exp al Statements	ense	s per A	Audited
	Return			Return	ai Statements	VVILII	EXDA	ises per
a	Total revenue, gains, and other support per audited financial statements a 441,954	a	Total exp	enses and lo	sses per			220 125
		- b	Amounts	nanciai state included on	ments line a but not on	····· >	2	279,175.
	Amounts included on line a but not on line 12, Form 990:		line 17, F					
	Net unrealized gains	(1)	Donated :	services of facilities	\$			
, ,	on investments\$. (2)		r adjustment				-
	Donated services	`	_	on line 20,				
	and use of facilities\$		Form 990)	\$			
, ,	Recoveries of prior	(3)	Losses re	eported on				
	year grants\$				\$			
(4)	Other (specify):	(4)	Other (sp	ecify):				
	Add amounts on lines (1) through (4)		Add ama	unto an linas	\$		- 	
	Line a minus line b.				(1) through (4)			270 175
	Amounts included on line 12, Form				line 17. Form		<u> </u>	<u>279,175.</u>
.,	990 but not on line a:		990 but r	no de dine a:	ing 17, Form			
(1)	Investment expenses	(1)	Investme	nt expenses				
	not included on	''	not includ	•				
	line 6b, Form 990\$		line 6b, F	orm 990	\$			
	Other (specify):	(2)	Other (sp					
	\$	_ _			\$			
	Add amounts on lines (1) and (2)	_	Add amo	unts on lines	(1) and (2)		<u>a · </u>	
ß	Total revenue per line 12, Form 990 (line c plus line d)		Total exp	enses per lín	e 17, Form 990			
[Da	rt V List of Officers, Directors, Trustees, and Key	Empl	CHING E PI	Liet nach oa	n aven if ant anomae	antori V	е	<u>279,175.</u>
11.4	ne v alor of officially products, reasters, and rey						ributions to	/El Evnence
	(A) Name and address	107 p	er week de	oted to	(C) Compensation (if not paid, enter	emple; plans	flened ser benefit	(E) Expense account and other allowances
WA)	LLACE CHIN		SIDEN			comp	ensation	Other anowances
56				`-				ŀ
		PAF	T		0.	}	0.	0.
	DY LAYFIELD	TRE	ASURI	ER				
<u>56'</u>	7 SOUTH KING ST., STE 200, HON, HI						i I	
3/17/27	DOIT TEMPOTEUR CO.	PAR			0.		<u> </u>	0.
	RON MITSUYASU	_\AIC	E PRE	ESIDEN	T'		1	
20	7 SOUTH KING ST., STE 200, HON, HI		mt.		_		;	
SA	м ната	PAF		CTDDA	0.		0.	0.
56'	· · · · · · · · · · · · · · · · · · ·		L PRE	SIDEN	. <u>T.</u>		-	
	A DOUGH RING DIE, DIE 200, MON, HI	PAR	т		0.		0	0.
LAI	RRY LEE		RETAR	ΣΥ	U •			9.
<u>56'</u>	7 SOUTH KING ST., STE 200, HON, HI			·- i			i ;	
		PAR	T.		0.		0.	0.
	CHARD S.H. WONG		ECTOR	1			!	
<u>56</u>	7 SOUTH KING ST., STE 200, HON, HI	_						
0.01		PAR			0.		0.	0.
<u>081</u>	WALD K. STENDER		ECTOR	١			1	
36	7 SOUTH KING ST., STE 200, HON, HI		m				,	
<u>M</u> .	M. LOKELANI LINDSEY	PAR	ECTOR		0.		0.	0.
56'			.EC.LOF				1	
		PAR	T	ł	0.		0.	0.
GEI	RARD A. JERVIS		ECTOR					· ·
56'		Ţ- `		-			1	
		PAR	T		0.		0.	0.
	NRY H. PETERS	DIR	ECTOR					
<u>56'</u>	7 SOUTH KING ST., STE 200, HON, HI	_					1	1
	D.L.	PAR		·	0.		0.	0.
/5 D	Did any officer, director, trustee, or key employee receive aggregate compens organizations, of which more than \$10,000 was provided by the related organ	ation of r	nore than \$	100,000 froi			elated	
	organizations, or minor more man a report was provided by the related organ	zauons?	it Yes, a	uach schedu	ie. ▶ L Yes L	X No		

Form	990 (1997) KAMEHAMEHA ACTIVITIES ASSOCIATION 51-0190	227		Page 5
Par	t VI Other Information		Yes	
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		<u>X</u>
77	Were any changes made in the organizing or governing documents but not reported to the IRS?	77		X
	If "Yes," attach a conformed copy of the changes.			
78 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year?	79		<u>X</u>
	If "Yes," attach a statement;			
80 a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership,		٠,,	
	governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X	
þ	If "Yes," enter the name of the organization SEE STATEMENT 7			
	and check whether it is exempt OR nonexempt.			
81 a	Enter the amount of political expenditures, direct or indirect, as described in the instructions for line 81 81a 0.			
	instructions for line 81 0. Did the organization file Form 1120-POL for this year?	81b		Х
D -	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than	0 10		
02 A		82a		X
h.	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an	O.Lu		
U	expense in Part II. (See instructions for reporting in Part III)			İ
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	x	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions? N/A	83b		
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a		X
b				
	tax deductible? N/A	84b		
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? N/A	85a		<u> </u>
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? N/A	85b		
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax			
	owed for the prior year.			
C	Dues, assessments, and similar amounts from members 85c N/A			
đ	Section 162(e) lobbying and political expenditures 85d N/A	-		
е	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A			
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A	1		
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f? N/A N/A	85g		
n	If section 6033(e)(1)(A) dues notice were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues	056		į
••	allocable to nondeductible lobbying and political expenditures for the following tax year? N/A	85h		
86	501(c)(7) organizations Enter: Initiation fees and capital contributions included on line 12			
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A	1		
87	501(c)(12) organizations Enter: a Gross income from members or shareholders 87a N/A			
D.	Gross income from other sources. (Do not net amounts due or paid to other sources	1		
•	against amounts due or received from them.) 87b N/A			
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership?	-		
	If "Yes," complete Part IX	88		X
89 a	501(c)(3) organizations Enter: Amount of tax imposed during the year under:			
	section 4911▶			ĺ
b	501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit			
	transaction during the year? If "Yes," attach a statement explaining each transaction	89b		X
C	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under			
	sections 4912, 4955, and 4958			0.
d	Enter: Amount of tax in 89c, above, reimbursed by the organization			0.
	List the states with which a copy of this return is filed N/A			
b	Number of employees employed in the pay period that includes March 12, 1997	90b	<u> </u>	0
	The backs are at A TITOY TAYETETD)2. <i>E</i>	3 E 0	
91	The books are in care of ► JUDY LAYFIELD Telephone no. ► 808-52	<u>, 5 - 0</u>	330	
	Located at ► 567 S. KING ST., SUITE 320, HON, HI ZIP +4 ► 9	681	3	
	CONTRACTOR OF THE PROPERTY AND THE PROPERTY AND THE PROPERTY OF THE PROPERTY O		_	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 Check here		. ▶ [
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92			

Part VII Analysis of Income-Pr	oducing Activ	ities	3			· · · · · · · · · · · · · · · · · · ·
Enter gross amounts unless otherwise		Unre	lated business income		ded by section 512, 513, or 514	(E)
indicated.	D. (A	A) iness	(B)	(C)	(D)	Related or exempt
93 Program service revenue:	. CO		Amount	sion	Amount	function income
(a)						
(b)						
(c)						i
(d)						,
(e)						:
(f) Medicare/Medicaid payments						
(g) Fees and contracts from government ag						· · · · · · · · · · · · · · · · · · ·
94 Membership dues and assessments						
95 Interest on savings and temporary	•••••					
						İ
cash investments				1 4	000 533	
96 Dividends and interest from securities			,	14	299,533.	-
97 Net rental income or (loss) from real estate:		-		,		
(a) debt-financed property				_		<u>'</u>
(b) not debt-financed property						
98 Net rental income or (loss) from personal p				ļ		
99 Other investment income	·····					
100 Gain or (loss) from sales of assets						; ;
other than inventory				1.8	112,646.	
101 Net income or (loss) from special events						
102 Gross profit or (loss) from sales of inventor	у					1
103 Other revenue:						;
a MISC. RECEIPTS						<u>5,285.</u>
b						
C						
d		ĺ				
	li li		,			
e			0.		412,179.	5,285.
105 TOTAL (add line 104, columns (B), (D), and	(E))					
Note: (Line 105 plus line 1d, Part I, should equa				********		
Part VIII Relationship of Activit	ies to the Acc	omp	olishment of Exemp	t Pur	poses	
Line No. Explain how each activity for which			· · · · · · · · · · · · · · · · · · ·		•	the organization's
exempt purposes (other than by pro						, , , , , , , , , , , , , , , , , , , ,
	The state of the s		·			

					, ,	
						
						•
						i
Part IX Information Regarding	Taxable Sub	sidis	aries (Complete this Part i	f the "V	ae" hay an 88 is chacked \	
N		ordic.	1100 (complete tilla i art i	i tilo i	es box on ou is enecked.	End of year
	Percentage of mership interest	N	lature of business activities		Total income	End-of-year
						assets
N/A	%					
	%					
	%					
1	%		a accompanying ashedulas	and alak	ements, and to the best of my knowle	

SCHEDULE A (Form 990)

Department of the Treasury

Internal Revenue Service

Organization Exempt Under 501(c)(3)

(Except Private Foundation), and Section 501(e), 501(f), 501(k), 501(n) or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information

► Must be completed by the above organizations and attached to their Form 990 (or Form 990EZ)

1997

OMB No. 1545-0047

Employer identification number Name of the organization 51 0190227 KAMEHAMEHA ACTIVITIES ASSOCIATION Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See instructions.) (List each one. If there are none, enter "None.") (d) Contributions to employee benefit plans & deferred compensation (e) Expense account and other (b) Title and average hours per week devoted to (a) Name and address of each employee paid (c) Compensation more than \$50,000 position allowances NONE Total number of other employees paid Part II | Compensation of the Five Highest Paid Independent Contractors for Professional Services (See instructions.) (List each one (whether individuals or firms.) (If there are none, enter "None.")) (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service NONE Total number of others receiving over \$50,000 for professional services

723101 03-12-98 11330422

7

KAMEHAMEHA ACTIVITIES ASSOCIAT

51-01901

Schedule A (Form 990) 1997

092

For Paperwork Reduction Act Notice, see page 1 of the Instructions to Form 990 (or Form 990-EZ).

51-0190227

Par	t IV-A Support Schedule (C Note: You may use the	omplete only if you choworksheet in the instruct	ecked a box on line 16 fons for converting from	0, 11, or 12 above.) Us the accrual to the cash m	e cash method of a ethod of accounting.	ccounting. N/A
	dar year (or fiscal year ning in)	(a) 1996	(b) 1995	(c) 1994	(d) 1993	(e) Total
15	Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)					
16	Membership fees received					!
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose					
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19	Net income from unrelated business activities not included in line 18					i
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22:	Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23	Total of lines 15 through 22	0.	0.	0.	0	. 0.
24	Line 23 minus line 17					
25	Enter 1% of line 23				<u> </u>	
26	Organizations described in lines 10					N/A
b	Attach a list (which is not open to pu					
	governmental unit or publicly suppo					37/3
	in line 26a. Enter the sum of all these	excess amounts			2 6b	N/A
						27./3
	Total support for section 509(a)(1) t					N/A
d	Add: Amounts from column (e) for li			9		n/A
	Dublic and and the OCs asimus lies of			6b		
e 4	Public support (fine 26c minus line 2 Public support percentage (fine 26c					
27	Organizations described on line 12					
Li	of, and total amounts received in each					,
	(1996)					3)
b	For any amount included in line 17 tl	hat was received from a n	ondisqualified person, a	ttach a list to show the na	me of, and amount rece	ived for each year,
	that was more than the larger of (1)	the amount on line 25 fo	r the year or (2) \$5,000.	(Include in the list organiz	ations described in line	s 5 through 11, as well as
	individuals.) After computing the diff	ference between the amor	unt received and the larg	er amount decribed in (1)	or (2), enter the sum of	these differences (the
	excess amounts) for each year:					
	(1996)	(1995)	.,	(1994)	(199	3)
						1
C	Add: Amounts from column (e) for it	ines: 15		16	▶ 270	N/A
a	Add: Amounts from column (e) for it 17 Add: Line 27a total	20	and line 27h total	Z1	270	
u e	Public support (line 27c, total minus	line 27d total)	and mid 210 total _		276	4-
e f	Total support for section 509(a)(2) t	est: Enter amount on line	23. column (e)	▶ 27f S	N/A	
0	Public support percentage (lin					N/A %
•	Investment income percentage	•				
	Jnusual Grants: For an organization ublic inspection) for each year showing					h a list (which is not open to
p t	ublic inspection) for each year showing these grants in line 15. (See instruction	ng the name of the contril os 1	outor, the date and amou	int of the grant, and a brie	r description of the nati	THE OF THE GLADITY NO DOT INCINGE

51-0190227

104.0	(To be completed ONLY by schools that checked the box on line 6 in Part IV)	N/	A	
)	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	N
	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?			
	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	: 		
a	Does the organization maintain the following: Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32ь		
C	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
đ	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)	32₫		
	Does the organization discriminate by race in any way with respect to:	 33a		
a	Students' rights or privileges? Admissions policies?		†	H
C	Employment of faculty or administrative staff?			
d	Scholarships or other financial assistance?	· •		Г
e	Educational policies?			Γ
f	Use of facilities?			
	Athletic programs?	,		
h	Other extracurricular activities?			
"	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
		<u></u>		
a	Does the organization receive any financial aid or assistance from a governmental agency?		┼	\vdash
þ	Has the organization's right to such aid ever been revoked or suspended?	34b	+	╀
	If you answered "Yes" to either 34a or b, please explain using an attached statement. Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50,			

1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation

092

Page 5

FORM 990 GAIN (LOSS) F.	ROM PUBLICLY T	RADED SECURIT	IES ST	PATEMENT	2
DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS	
SALE OF SECURITIES (SEE STATEMENT 9)	1,750,623.	1,637,977.	0.	112,64	6.
TO FORM 990, PART I, LINE 8	1,750,623.	1,637,977.	0.	112,64	6.
FORM 990 STATEMENT OF ORGA	NIZATION'S PRI PART III	MARY EXEMPT F	URPOSE ST	PATEMENT	3
EXPLANATION					
SEE STATEMENT !!					
FORM 990 CASH	GRANTS AND ALL	OCATIONS	S	PATEMENT	4
FORM 990 CASH CLASSIFICATION DONEE'S NAME	GRANTS AND ALI	DC	S' NEE'S LATIONSHIP	PATEMENT AMOUN	4 T
		DC ADDRESS RE	nee's		
CLASSIFICATION DONEE'S NAME	DONEE'S	ADDRESS RE	NEE'S LATIONSHIP	AMOUN	5.
CLASSIFICATION DONEE'S NAME SEE STATEMENT (0 TOTAL INCLUDED ON FORM 990, P	DONEE'S	ADDRESS RE	NEE'S LATIONSHIP NE	AMOUN 215,12	5.
CLASSIFICATION DONEE'S NAME SEE STATEMENT (O TOTAL INCLUDED ON FORM 990, P FORM 990 NON-	DONEE'S ART II, LINE 2	ADDRESS RE NO 22 CURITIES OTHER PUBLICLY	ONEE'S LATIONSHIP ONE S'	AMOUN 215,12 215,12 TATEMENT TOTAL NON-GOV	5. 5.
CLASSIFICATION DONEE'S NAME SEE STATEMENT 10 TOTAL INCLUDED ON FORM 990, P FORM 990 NON-	DONEE'S ART II, LINE 2 GOVERNMENT SEC ORATE CORPORAT OCKS BONDS	ADDRESS RE NO 22 CURITIES OTHER PUBLICLY TRADED SECURITIES	ONEE'S LATIONSHIP ONE S'	AMOUN 215,12 215,12 TATEMENT TOTAL NON-GOV	5. 5. 5. ES

FORM 990	OTHER INVESTMENTS		STA	TEMENT	6
DESCRIPTION		VALUATION METHOD		AMOUNT	
LIQUID ASSETS		COST		600,3	40.
TOTAL TO FORM	990, PART IV, LINE 56, COLUMN B			600,3	40.
FORM 990	IDENTIFICATION OF RELATED O PART VI, LINE 80		STA	ATEMENT	7
NAME OF ORGANI	ZATION		EXEMPT	NONEXE	MPT
THE KAMEHAMEHA ESTATE	SCHOOLS/BERNICE PAUAHI BISHOP		X		
SCHEDULE A	EXPLANATION OF QUALIFICATIONS TO PART III, LINE		ENTS ST	ATEMENT	8

GRANTS AND AWARDS ARE GIVEN TO THE STUDENTS AND GRADUATES OF KAMEHAMEHA SCHOOLS BASED UPON THE NEED AND INTENTIONS OF THE APPLICANT. A SCREENING COMMITTEE REVIEWS THE APPLICANT'S FINANCIAL DATA AND QUALIFICATIONS AND COMMENDS THE GRANT OR AWARD.

Kamehameha	activities	association
FIN : 51 - 019022	7	

Grain/Loss on vale of Gurets

		•			5 6			
		Securitics	Jrade date	unit	Jotal . Cost	unit Proceed	Jotal Proceds	Grain/(Loss)
	400	MBIA	07/01/97	60.42	24,168.46	112.36	44,944.74	20,776.28
	200 100	COCA COLA CO IMATION	08/08/97 08/08/97	37.83 25.66	7,565.75 2,565.74	65.23 23.90	13,045.81 2,389.91	5,480.06 175.83
	2,700	INTERNATIONAL PAPER	08/25/97	40.14	o 108,383.77	53.84	145,378.90	36,995.13
FIXE	E INCOME	,					;	
	SALES CALLED 200,000	FED. HOME LOAN BK 8.00% ~ 08/09/2010	08/11/97	100.00	200,000.00	100.00	200,000.00	0.00
	MATURED 130,000	US T-Bill YTM 5.489% due 08/28/97	08/28/97	97.78	127,111.02	97.78	127,111.02	0.00
.,							 	А
	SALES 250	JC PENNEY INC	11/06/97 12/19/97	49.71 46.50	12,427.09 6.76	60.06 48.98	15,014.49 7.12	2,587.41 0.36
1	0	RAYTHEON CO CL 'A' RAYTHEON CO CL 'A'	12/19/97 12/19/97	47.02 44.77	7.37 4.77	48.98 48.98	7.67 5.22	0.31 ' 0.45
	0 0 0	RAYTHEON CO CL 'A' RAYTHEON CO CL 'A'	12/19/97	46.51 47.98	2.33 6.01	48.98 48.98	2.46 6.14	0.12 0.13
	U	RATTREON CO CE A	12/13/3/	47.20			^	-
FIX	KED INCOME MATURITIES				0 305,206.13	100.00	300,000.00	5,206.13-
1	300,000	U.S. TREASURY NOTE 6.00% - 12/31/1997	12/31/97	101.74	0 305,206.13	200.00		
,	SALES				•		40.000.22	440.42-
	1,500 1,000	DELUXE CORPORATION MOBIL CORP	02/02/98 02/27/98	33.55 39.76	50,328.75 39,755.00	33.26 71.73	49,888.33 71,731.35	31,976.35
•								
 	MATURITIES	U.S. TREASURY NOTE	01/31/98	102.94	o 308,817.50 °	100.00	300,000.00	8,817.50~
j	***,1**	5.625% - 01/31/1998					1	
	· -						. !	•
	SALES 358 537	PHILIP MORRIS COS PHILIP MORRIS COS	04/07/98 04/07/98	16.65 25.63	5,962.94 13,771.88	38.89 38.89	13,929.49 20,894.23	7,966.55 7,122.35
	179 125	PHILIP MORRIS COS PHILIP MORRIS COS	04/07/98 04/07/98	16.42 30.83	2,940.60 3,865.67	38.89 38.89	6,964.74 4,875.32	4,024.15 1,009.65
	900 1,450 (1	PHILIP MORRIS COS	04/07/98 04/07/98	39.49 44.68	35,539.70 64,785.00 €	38.89 38.89	34,997.84 56,385.40+	541.86- 8,399.60-
	112 163	CHEVRON CORP	06/19/98 06/19/98 06/19/98	67.80 66.12 67.10	7,561.87 10,771.62 15,136.28	82.21 82.21 82.21	9,169.31 13,393.38 18,544.68	1,607.44 2,621.76 3,408.40
	226 174	CHEVRON CORP LINCOLN NATIONAL	06/19/98 06/19/98	53.11 66.41	9,252.63 1,532.60	87.86 87.86	15,307.83 2,027.53	6,055.20 494.93
	23 103 400	LINCOLN NATIONAL LINCOLN NATIONAL MANPOWER INC.	06/19/98 06/19/98	70.11 38.57	7,200.22 15,428.75	87.86 28.80	9,022.50 11,520.86	1,822.28 3,907.89
	259 61	MINNESOTA MINING CO. MINNESOTA MINING CO.	06/19/98 06/19/98	62.54 72.84	16,213.56 4,437.55	83.04 83.04	21,529.58 5,059.45	5,316.02 621.91
	13 52	MINNESOTA MINING CO. MINNESOTA MINING CO.	06/19/98 06/19/98	86.45 91.52	1,120.65 4,745.42	83.04 83.04	1,076.48 4,305.92	44.17- 439.50-
	500 1,477 123	SBC COMMUNICATIONS WESTCOAST ENERGY INC WESTCOAST ENERGY INC	06/19/98 06/19/98 06/19/98	28,98 18,47 19,64	14,491.53 27,279.23 2,417 69	38.84 22.39 22.39	19,420.60 33,064.66 2,755.39	4,929.07 5,785.43 337.70
	TOTAL SALES				264,455.38	··.	1	
							·	
-								1
	SALES	,						V
	75,000	TENN VALLEY AUTH. 6.875% - 08/01/2002	04/03/98	103.51	o 77,628.75 o 100,128.75	102.46 100.00	76,845.00	783.75- 128.75-
	100,000	FED. HOME LOAN BANK 6.50% - 04/11/2011	04/13/98	104.13		200.00		· · · · · · · · · · · · · · · · · · ·
o /10 ·				cost adj	1,628,569.34 justment 9,407.77	-	1,750,623,35	122.0540) <u> </u>
		Jotal		127	1,637,976,71	•	1,750,623.35	117,646,64
							•	_

KAMEHAMEHA ACTIVITIES ASSOCIATION Scholarship Awards 7/1/97 - 6/30/98

Fund#	Fund Name	Date	Check#	Payee	Amount
300 Sp	ecial Trust Funds	09/02/97 04/17/98 04/28/98 04/29/98 04/29/98 04/29/98 05/05/98 05/12/98	1201 A 1205 C 1206 J. 1226 N 1227 A 1228 H 1238 J.	Au . Gauen . Byrd . Matsuda	500.00 300.00 100.00 100.00 300.00 300.00 300.00 140.00 2,340.00
304 Tui	rney-Gillett Music Fund	09/02/97	1137 T.	. Chun	1,000.00
305 St∈	ephen Desha Memorial Fund	09/02/97	1097 A	. Akamu	1,000.00
306 Da	isy Bell Memorial Fund	04/28/98	1207 K	. Kenney	300,00
307 KS	BE Living Trustees Fund	09/02/97	1121 B 1122 P	Bassett . Bohannan . Kekuna l. Taum l. Vidal	2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 10,000.00
308 Fra	ank/Ruth Midkiff Fund	08/25/97 09/02/97 09/02/97 09/02/97	1127 A 1128 W	. Anderson . Akamu /. Igawa Silva . Kaneshiro	1,250.00 1,250.00 1,250.00 1,250.00 5,000.00
310 F.	Stillwell Fund	04/28/98	1221 M	l. Aipa	200.00
311 Th	eodore Richards Fund	09/02/97 09/02/97 09/02/97 09/02/97	1134 L 1135 J.	. Briones . Caalddeira . Galmiche . Los Banos	1,250.00 1,250.00 1,250.00 1,250.00 5,000.00
313 Th	eodore A. Vierra Fund	09/02/97 09/02/97		. Kelly . Kilbey	1,000.00 1,000.00 2,000.00
316 Pa	uline Frederick Fund	04/29/98	1229 S	. Valdez	300.00
318 Do	rothy Martin Fund	09/02/97	1126 D	. Springer	700.00
321 Ed	win P. Murray Fund	04/28/98	1214 K	. Dang	400.00
324 Alla	an A. Bailey Fund	09/02/97 09/02/97		lohi Aea inau Young	1,500.00 1,500.00 3,000.00 statement

KAMEHAMEHA ACTIVITIES ASSOCIATION Scholarship Awards 7/1/97 - 6/30/98

Fund#	Fund Name	Date	Check#	Payee	Amount
				• • • • • • • • • • • • • • • • • • •	
328	Herbert Keppler Fund	09/02/97	1119 A.	Los Banos	900.00
330	Winona Beamer Music Fund	04/28/98	1217 D.	. Palikiko . Kamakahi Alverio	200.00 200.00 200.00 200.00 200.00 1,000.00
338	Douglas Chung Memorial Fund	07/24/97 09/02/97 10/23/97	1142 W	/. Kahi Villa /. C. Pieper . K. Grace	500.00 1,000.00 <u>500.00</u> 2,000.00
341	Helen Desha Beamer Fund	07/28/98	1225 A.	Napoleon	200.00
343	Emmalani Searfoss Fund	04/20/98 06/03/98	1203 R. 1296 M	. Smith . K. Crabbe	400.00 <u>500.00</u> 900.00
345	Mary Atherton Fund	09/02/97 09/02/97		Marti Kini Punohu	1,200.00 <u>1,200.00</u> 2,400.00
348	Na Ho'okama A Pauahi Fund	08/20/97 10/07/97		Kahele Kaneshiro	1,500.00 <u>1,250.00</u> 2,750.00
354	KGMB Communications Fund	04/28/98 04/28/98	1209 R. 1210 S.	. Nagano . Rios	300.00 200.00 500.00
355	Ka 'Olelo Hawaii Fund	05/05/98	1236 A.	Lorenzo	250.00
356	Sarah Nakoa Fund	10/01/97 10/01/97		T. Kikiloi K. Akamine	500.00 <u>500.00</u> 1,000.00
358	Zillah Young Memorial Fund	04/28/98	1220 K.	Kitashima	600.00
361	KS Class of 1960	09/02/97	1095 K.	. Nishikawa	1,000.00
365	Richard Lyman Jr. Memorial Fund	09/02/97 05/26/98		Pacarro . Tagalicod	1,200.00 <u>500.00</u> 1,700.00
367	KS Social Studies Faculty Fund	04/28/98	1213 K.	Nichols	200.00
369	Christine Alicata Memorial Fund	04/28/98	1208 T.	Lum Ho	300.00 Statement 1 page 2 of

KAMEHAMEHA ACTIVITIES ASSOCIATION Scholarship Awards 7/1/97 - 6/30/98

Fund#	 Fund Name	Date	Check#	Payee	Amount
370	Hoopaa Mau Fund	09/02/97 09/02/97 09/02/97 09/02/97 04/29/98 04/29/98 04/29/98	1114 B. 1115 J. 1116 B. 1230 P. 1231 R.	Hashimoto Ramos Ordenstein	500.00 500.00 500.00 500.00 1,000.00 500.00 500.00 4,500.00
371	De Witt Wallace Fund	09/02/97 09/02/97 09/02/97 09/02/97 09/02/97 09/02/97 09/02/97 09/02/97 09/02/97 09/02/97 09/02/97 09/02/97	1102 J. 1103 R. 1104 K. 1105 R. 1106 W. 1107 I. 1108 K. 1109 C. 1110 M. 1111 K.	Ibarra Kualaau Moniz Alegado M. Chang Kaallstrom Pieper Chun Lim Schreiber Soares Kaluhiwa	1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00 1,250.00
374	Russ Martin Language Arts Award	03/30/98	1198 N.	Chun	25.00
375	Parrent Faculty Fellowship Fund	09/08/97 09/12/97 01/22/98 01/28/98 02/18/98 02/26/98 03/05/98 05/12/98 05/26/98 06/03/98	1146 A. 1188 K. 1189 R. 1192 C. 1193 S. 1194 S. 1243 Pa 1269 G.	Kwan K. Maakanani Hoe N.i Pai	10,000.00 5,589.36 617.20 693.05 1,500.00 1,086.00 1,067.70 725.00 5,020.00 2,109.00 28,407.31
376	Parrent Distinguished Scholar	01/05/98 01/05/98 05/26/98 05/26/98 05/26/98 05/26/98 05/28/98	1185 KS 1267 L. 1268 D. 1271 S.	L. Montgomery M. Gon III	4,500.00 155.80 592.20 783.00 2,620.00 2,620.00 2,620.00 13,891.00

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KAMEHAMEHA ACTIVITIES ASSOCIATION Scholarship Awards 7/1/97 - 6/30/98

Fund # Fund Name	Date	Check# Payee	Amount
379 KS Class of 1970	09/02/97	1096 A. Maunakea	1,000.00
380 KS Class of 1957	09/02/97 09/02/97	1093 T. Shiroma 1094 C. Tomas	500.00 <u>500.00</u> 1,000.00
381 Blossom Mossman Nary Fund	09/02/97	1130 P. Suganuma	500.00
382 Barry J. Rubin Memorial Fund	12/09/97 12/09/97 04/13/98 04/20/98 05/04/98	1180 C. Pakele 1181 American School 1200 L. Finai 1204 C. Pakele 1235 L. Finai	580.00 244.00 62.50 65.25 62.50 1,014.25
383 KHON TV-2 Fund	04/28/98 04/28/98 04/28/98	1211 L. J. Strunk 1212 C. M. Puha 1224 V. DeMercer	100.00 100.00 <u>100.00</u> 300.00
385 Lena Kauumau Machado Fund	04/28/98	1222 K. Mossman	500.00
386 James Ferrigno Memorial Fund	d 03/17/98	1196 D. Parker	1,500.00
388 Uilani Stender Fund	02/10/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98 05/27/98	1191 Assets School 1275 S. Aoina 1276 C. Baaybayan 1277 M. Blaich 1278 E. H. Dancil 1279 M. A. Dancil 1280 N. Hokoana 1281 C. Kaaihili 1282 J. J. Kaupu 1283 R. Keahiolalo 1284 K. Kuna 1285 L. Matsumoto 1286 R. Nihipali 1287 L. Rich 1288 M. Silva 1289 N. Suzuki 1290 D. Ulima 1291 S. Vaioleti	22,800.00 3,000.00 1,500.00 1,200.00 1,000.00 1,000.00 1,200.00 1,500.00 1,200.00 1,500.00 1,500.00 1,500.00 1,500.00 1,500.00 1,500.00 1,500.00 1,500.00 1,500.00 1,500.00
391 Ka 'Eleu Award	09/29/07	1117 K. Kualaau	1,000.00
392 Neville Colburn Fund	04/17/98	1202 R. Yuen	200.00
394 KS Female Athlete Fund	09/12/97	1145 M. Lum	500.00 Autemen

Aatement 10 page 4 of 5

KAMEHAMEHA ACTIVITIES ASSOCIATION Scholarship Awards 7/1/97 - 6/30/98

Fund#	Fund Name	Date	Check#	Payee	Amount
	Fund Name	07/24/97 07/31/97 09/12/97 11/12/97	1085 1086 1144 1153 1154 1155 1156 1157 1158 1159 1160 1178 1161 1162 1163 1164 1165 1166 1167 1168 1169 1170 1171 1172 1173 1174 1175 1176 1177 1179 1245 1248 1273 1274	KS Concert Glee Camp E. Adams S. Y. Tyau K. Anduha V. Chong S. Dalire L. Forsythe G. Ishibashi L. Kalima S. Napoleon R. Patane D. Akuna V. Amby C. Canublda J. Chock J. Chun A. Chung J. Clevenger B. Kaeo A. Keawe S. Kikiloi P. Lew M. Mann K. A. Miller R. Morita S. Pa A. Sitch S. Tabon K. Wilson C. Tyau L. Ching D. Ahuna A. Kagawa Kamehameha Schools P. Oda	150.00 125.00 100.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 1,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 2,000.00 1,000.00 1,000.00 1,000.00 2,000.00 2,000.00 2,000.00 2,000.00 500.00 500.00 500.00
		05/26/98	1273 1274 1293	Kamehameha Schools	500.00
	,	06/01/98 06/01/98 06/15/98 06/19/98	1295 1298	D. Oride H. N. Wai Bank of Hawaii H. Crabbe	500.00 500.00 508.00 500.00 51,483.00
					1

Total 219,060.56

Kamehameha Activities Association FEIN: 51-0190227 ATTACHMENT TO PART III, FORM 990

From its inception until its recent changes made to its operating purpose in June of 1998, the purpose and activities of the organization was to provide scholarships and grants to those who have graduated or are students of the kamehameha schools for educational purposes. Over the years, the organization has granted annual educational scholarship from the contributions that the organization received from many sources that had resulted over 60 restricted endowed scholarships.

Effective June 12, 1998, the organization has adopted its Restated Articles of Incorporation to change its operating purpose and activities to be solely for the benefit of, to perform part of the function of, and to carry out the purposes of, Kamehameha Schools Bernice Pauahi Bishop Estate (KSBE). In addition, the organization is to be operated, supervised or controlled by KSBE for IRC Section 501(c)(3) charitable purposes. Further, the organization will continue in the future its past activities of helping to finance the exclusively charitable operations of KSBE.

(Rev. June 1998)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File Certain Excise, Income, Information, and Other Returns

OMB No. 1545-0148

Employer Identification number

▶ File a separate application for each return.

sase type or print. File the original and on copy by the due date for filing your return. See instructions.

51-0190227 KAMFHAMEHA ACTIVITIES ASSOCIATION

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original and		
opy by the late for filing	n	
our return.	See C/O 1132 BISHOP ST., SUITE 1000	
nstructions.		
	HONOLULU, HI 96813	····
Note: Cor	rporate income tax return filers must use Form 7004 to request an extension of time to file. Partnerships, F	EMICs, and trusts
mu-	st use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041.	
1 I requ	uest an extension of time until MAY 15 , 1999 , to file (check only one):	
	orm 706-GS(D) Form 990-T (sec. 401(a) or 408(a) trust) Form 1120-ND (sec. 4951 taxes)	Form 8612
F∈	orm 706-GS(T) Form 990-T (trust other than above) Form 3520-A	Form 8613
X F	orm 990 or 990-EZ Form 1041 (estate) (see instructions) Form 4720	Form 8725
F∈	orm 990-BL	Form 8804
F	orm 990-PF	Form 8831
If the	organization does not have an office or place of business in the United States, check this box	
2a For c	calendar year, or other tax year beginning JULY 1, 1997 _ and ending JUNE_3	<u>J 1998</u> .
b If this	s tax year is for less than 12 months, check reason: 🔲 Initial return 🔝 Final return 🔟 Change in ac	counting period
2 Hee	on extension of time to file been previously granted for this tax year?	.IXI Yes No
A State	e in detail why you need the extension It will not be possible to file the return before its due date	because we
ha	ve not obtained all the necessary information to complete the return. An additional exten	sion of time
to	file is therefore respectfully requested.	
	form is for Form 706-GS(D), 706-GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612,	
8613.	8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. See instructions	
h If thi	s form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and	
estin	nated tax payments made. Include any prior year overpayment allowed as a credit	
c Bala	unce due. Subtract line 5b from line 5a. Include your payment with this form, or deposit with FTD	
COUR	on if required. See instructions	
correct, and o	lies of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge complete; and that I am authorized to prepare this form.	
Signatur		2/10/99
FILE ORI	GINAL AND ONE COPY. The IRS will show below whether or not your application is approved and will return the	e copy.
Notice to	Applicant — To Be Completed by the IRS	
	HAVE approved your application. Please attach this form to your return.	
		the data shows
belo	HAVE NOT approved your application. However, we have granted a 10-day grade period from the later of wor the due date of your return (including any prior extensions). This grade period is considered to be a vector of the wise required to be made on a timely return. Please attach this form to your return.	alid extension of
☐ We l	HAVE NOT approved your application. After considering the reasons stated in item 4, we cannot grant you nsion of time to file. We are not granting the 10-day grace period.	ır request for an
[□ We	cannot consider your application because it was filed after the due date of the return for which an extension	n was requested.
	er:	
	yl	
		eral abblication
	By: Ej	Date PPHOVED
	Elliotte.	
I San and a san and	a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should	libe sent 1333
ii you want	a copy of this form to be returned to an address other than that shown above, please either the address to fill the copy should be a copy of this form to be returned to an address other than that shown above, please either the address to fill the copy should be a copy of this form to be returned to an address other than that shown above, please either the address to fill the copy of this form to be returned to an address other than that shown above, please either the address to fill the copy of this form to be returned to an address other than that shown above, please either the address to fill the copy of the	
	To all	SALES DECKER
Please	Number, street, and room or suite no. (or P.O. box no. if mail is not delivered to street address)	CENTER
Type	Number, street, and room of suite no. (of P.O. box no. If mail is not delivered to street address)	د سه د ۹ ډیبر کړ
or		, , , , , , , , , , , , , , , , , , ,
	City, town, or post office, state, and ZIP code. For a foreign address, see instructions.	3

Form 2758 (Rev. 6-98)

For Paperwork Reduction Act Notice, see back of form.

(Rev. June 1998)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File Certain Excise, Income, Information, and Other Returns

OMB No. 1545-0148

▶ File a separate application for each return.

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instructions.

KAMEHAMEHA ACTIVITIES ASSOCIATION

Employer Identification number 51-0190227

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c/o 1132 BISHOP ST., SUITE 1000	
ty, town or post office, state, and ZIP code. For a foreign address, see instructions.	1
HONOLULU HI 96813	1

our retu		c/o 1132 l	BISHOP ST., <u>SU</u>	ITE 1000			
nstructio		City, town or post of	fice, state, and ZIP code. F	or a foreign address, se	e instructions.		1
		HONOLU	LU, HI 96813				
vote: (Corporate	income tax retu	rn filers must use Fo	rm 7004 to reques	at an extension of tim	e to file. Partnerships,	, REMICs, and trusts
1	must use i	Form 8736 to re	quest an extension	of time to file Form	1065, 1066, or 1041		
1 Ir	equest an	extension of tim	ne until FEB. 15	<u>, 99</u>	, to file (check	only one):	
	Form 706		Form 990-T (sec. 4	101(a) or 408(a) trust)		ND (sec. 4951 taxes)	Form 8612
	Form 706	-GS(T)	Form 990-T (trust	other than above)	Form 3520		Form 8613
X	Form 990	or 990-EZ	Form 1041 (estate)	(see instructions)	Form 4720		Form 8725
	Form 990	-BL	Form 1041-A		Form 5227		Form 8804
	Form 990	-PF	Form 1042		Form 6069		Form 8831
lf	the organ	ization does not	have an office or pl	ace of business in	the United States, ch	eck this box and ending JUNE	30 1998
2a Fo	or calenda	r year	_ , or other tax year	beginning JULY			·
b If	this tax ye	ear is for less the	an 12 months, check	∢reason: ∐ Init	iai return 🔝 Finai i	eturn 🔲 Change in	YeX N
3 H	as an exte	ension of time to	file been previously	granted for this ta	x year? No to file the retur	n before its due da	ate because we
4 St	tate in det	all why you need	the extension It w	irmation to con	nlete the return	An extension of ti	me to
_	nave no	optained all t	ne necessary in	offication to con	ipiete tre return.	All extension of the	1110 10
			ctfully requested.	000 DE 000 T 4041 /	notate) 10/2 1120 ND	4720 6060 8612	
5a If	this form is	for Form 706-GS(E)), 706-GS(T), 990-BL,	990-PF, 990-1, 1041 (6 ny nonrefundable credi	estate), 1042, 1120-ND, 4	\$_	
86	513, 8/25, 8 Maio famo	804, or 8831, enter	THE TERRITOR T 4044 (or	ty none undable credi	4, enter any refunda	ble credits and	
11 Ct	miot sinte t betemite	is for Form 990-	.PP, 990-1, 1041 (es ide Include anv pric	r vear overbavmer	nt allowed as a credit	\$	j.
ri D	alance di	ex paymonts ma re. Subtract line	5b from line 5a. Inc	lude vour pavment	with this form, or de	posit with FTD	
CC	oupon if re	eguired. See inst	ructions		<u></u>		\$
			S	ignature and Ve	rification		
Under pe	nalties of pe	rjury, I declare that I h	ave examined this form, I	ncluding accompanying s	schedules and statements,	and to the best of my knowle	edge and belief, it is true,
correct, a	ind complete	; and that I am author	ized to prepare this form.				
		' ' ' ' '	1				4444000
Signature	• / / ///	nhen W	da	Title▶ CPA		Date	
FILE C	KIGINAK	AND ONE/COP	Y. The IRS will show	below whether or no	t your application is a	oproved and will return	the copy.
Notice	e to App	licant — (Tø Be	e Completed by t	ne IRS			
- /		~	pplication. Please at		our return.		
[_] \v	Ve HAVE	MOT approved v	our application. How	vever we have ara	nted a 10-day grade	period from the later	of the date shown
b	elow or th	e due date of vo	our application, riov our return (including	any prior extensior	ns). This grade period	is considered to be	a valid extension of
ti	me for ele	ections otherwise	required to be made	le on a timely retur	n. Please attach this	form to your return.	i
[] \A	Ve HAVE	NOT approved v	our application. Afte	er considering the r	easons stated in iten	n 4, we cannot grant y	our request for an
e' E	xtension o	of time to file. W	e are not granting th	ie 10-day grace pe	riod.		, , , , , , , , , , , , , , , , , , ,
[] \A	Vo cannot	consider your a	nnlication because i	t was filed after the	e due date of the retu	rn for which an exten	sion was requested.
		Consider your a	ppiication because i	()/40 104 4:101 4:11			•
	Other:					EXTENSION	FIRPROVED
		DiI		Ву:			Date
		Director				، ب دیده	7 1
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Prin		own, or post office, st	ate, and ZIP code. For a fo	reign address, see instru	ctions.		
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			l l 6 6				From 2758 (Rev 6-98)