

Return of Private Foundation

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

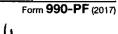
OMB No 1545-0052

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

		- do to www.iiis.govii_oriiisoori i is	i ilistractions and t	110 1010.	or milorinaen	J+1.	
For o	calen	dar year 2017 or tax year beginning JANUA	RY 1 , 2017	, and	ending	DECEMBER 31	, 20 17
Nam	e of fou	undation			A Employe	r identification numbe	r
		OOK AND MUSIC FESTIVAL				30-0261277	
Num	ber and	d street (or P O box number if mail is not delivered to street address)	Room	/suite	B Telephon	e number (see instructi	ons)
47-2	31 KA	AMAKOI RD				808-239-8451	l
City	or towr	n, state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pendi	ng, check here ▶
KAN	IEOHE	E, HI 96744			,		_
			of a former public	charity	D 1. Foreign	n organizations, check l	nere . ▶
		Final return Amended r	•	•			_
		Address change Name char	nge			n organizations meeting here and attach compu	
H	Check	type of organization. Section 501(c)(3) exempt p	rivate foundation	n3	E If private	foundation status was	terminated under
		in 4947(a)(1) nonexempt charitable trust 🔲 Other tax			section 5	07(b)(1)(A), check here	▶_
IF	air m	narket value of all assets at J Accounting method	: 🔽 Cash 🗌 Ad	ccrual	E If the four	ndation is in a 60-monti	n tormination
е	end of	f year (from Part II, col (c),				ction 507(b)(1)(B), check	
li	ne 16	5) ► \$ 1,441. (Part I, column (d) must be	on cash basis)				
Pa	rt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		investment icome	(c) Adjusted net income	for charitable purposes
		the amounts ir column (a) (see instructions).)	books			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(cash basis only)
\neg	1	Contributions, gifts, grants, etc , received (attach schedule)	187,166.				
	2	Check ► ☐ if the foundation is not required to attach Sch B			-		1
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					·
	5a	Gross rents					,
1	b	Net rental income or (loss)		G			
a	6a	Net gain or (loss) from sale of assets not on line 10				b	D
Revenue	b	Gross sales price for all assets on line 6a					
Š	7	Capital gain net income (from Part IV, line 2)					
8	8	Net short-term capital gain					
Ì	9			3			,
İ	10a	Income modifications Gross sales less returns and allowances			•		
	b	Less: Cost of goods sold/5					
l	С	Gross profit or (loss) (attạch) schedule) 13					
1	11	Other income (attach schedule)	14,957.			14,957.	STMT 1
	12	Total. Add lines 1 through 11.	202,123.			14,957.	
	13	Compensation of officers, directors, trustees, etc.	0		0	· · · · · · · · · · · · · · · · · · ·	C
es	14	Other employee salaries and wages					
ř	15	Pension plans, employee benefits					
Expenses	16a	Legal fees (attach schedule)					
	b	Accounting fees (attach schedule) STMT 2	3,839.		0	0	0
Operating and Administrative	c	Other professional fees (attach schedule) .STMT 3	167,804.		0	0	167,804
aş	17	Interest	,				- · • • •
St	18	Taxes (attach schedule) (see instructions) . STMT 4.	62.		0	62.	
<u> </u>	19	Depreciation (attach schedule) and depletion				3=-	
盲	20	Occupancy					
Ĭ	21	Travel, conferences, and meetings					
립	22	Printing and publications	7,811.		0	0	7,811
(D)	23	Other expenses (attach schedule) STMT 5	45,266.			122.	45,144
اڃَ	24	Total operating and administrative expenses.	15,250.	-			,-
ā		Add lines 10 through 23	224,782			184.	220,759
B	25	Contributions, gifts, grants paid	0.	-		.54.	0
0	26	Total expenses and disbursements. Add lines 24 and 25	224,782.			184.	220,759
\dashv	27	Subtract line 26 from line 12:	224,702.			.54.	220,133
	a.	Excess of revenue over expenses and disbursements	<22,659>				
Ì	b	Net investment income (if negative, enter -0-) .	-22,000	 			
	Č	Adjusted net income (if negative enter -0-)		Α,		14 773	

For Paperwork Reduction Act Notice, see instructions.







Da	rt II	Balance Sheets Attached schedules and amounts in the description column should be for and of year amounts only (See instructions)	Beginning of year	End o	f year
ې	1 11	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash-non-interest-bearing	2,230.	1,441.	
	2	Savings and temporary cash investments			
l	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions) .			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
şts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ä	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments corporate stock (attach schedule)			
	С	Investments – corporate bonds (attach schedule) .			
	11	Investments-land, buildings, and equipment basis ▶		n .	" 0
		Less accumulated depreciation (attach schedule) ▶			. <u></u>
	12	Investments mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶	<u> </u>		
	15	Other assets (describe ►			·
	16	Total assets (to be completed by all filers-see the			1 4.11
		ınstructions. Also, see page 1, item l)	2,230.	1,441.	1,491
	17	Accounts payable and accrued expenses			, ,
Ś	18	Grants payable			- 0
Ë	19	Deferred revenue			٥
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			•
ja.	21	Mortgages and other notes payable (attach schedule)			;
_	22	Other liabilities (describe ►)			0
	23	Total liabilities (add lines 17 through 22)	0.	0.	c
Balances		Foundations that follow SFAS 117, check here . ▶ ☐ and complete lines 24 through 26, and lines 30 and 31.			o t
ğ	24	Unrestricted			
ā	25	Temporarily restricted			,
73	26	Permanently restricted			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	<u>_</u>		
şţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
Ä	30	Total net assets or fund balances (see instructions)	2,230.	1,441.	
ē	31	Total liabilities and net assets/fund balances (see			
_		instructions)			
	rt III	Analysis of Changes in Net Assets or Fund Balances			
1		al net assets or fund balances at beginning of year-Part II, colu		t agree with	
		-of-year figure reported on prior year's return)		1	2,230.
2		er amount from Part I, line 27a		2	<22,659>
3	Oth	er increases not included in line 2 (itemize) ▶		3	0.
4		I lines 1, 2, and 3		4	1,441.
5	Dec	creases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—		5	
	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lir	ne 30 <u>6</u>	1,441.

Part I	V Capital Gains and	d Losses for Tax on Investm	ent Income				
•	(a) List and describe the kii	nd(s) of property sold (for example, real es ise, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation		acquired day, yr)	(d) Date sold (mo , day, yr)
1a							
<u>b</u>							
<u>C</u>							
<u>d</u>	<u></u>						
<u>e</u>		(A December allowed	(=) Coat or	a other bears		(h) Ca	(loss)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			n or (loss) f) minus (g))
<u>a</u> _							
<u>b</u>							· · · · · · · · · · · · · · · · · · ·
<u> </u>			-				
<u>d</u>			•				
е_	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69		A) Gains (Co	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (i) I (j), if any		o! (k), but no	t less than -0-) or rom col (h))
a		43 01 12/01/00	070, 00,				
b							
С							
d					-		
е			<u> </u>				
2	Capital gain net income o	or inot canital local (also enter in Pa , enter -0- ın Pa		2		
3		in or (loss) as defined in sections					
	If gain, also enter in Part	t I, line 8, column (c) See instru	ctions. If (loss)), enter -0- ın)			
		<u> </u>			3		
Part		der Section 4940(e) for Redurations subject to the					
	tion 4940(d)(2) applies, leav he foundation liable for the	ve this part blank. section 4942 tax on the distribu	table amount o	f any year in the l	base pe	rıod?	☐ Yes ☐ No
If "Yes		qualify under section 4940(e). Do					
1		ount in each column for each ye	ar, see the instr	uctions before m	akıng ar	ny entries.	4.0
Calc	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distribution	s Net value o	(c) of noncharitable-use a	ssets		(d) tribution ratio divided by col. (c))
	2016	158	3,736.		1,604.		80.00
	2015	146	5,970.		1,650.		89.00
	2014		2,469.		2,033.		75.00
	2013		7,682.		2,037.		82.32
	2012	173	2,197.		4,219.		30.50
2	Total of line 1, column (d					2	357.
3		o for the 5-year base period-div					
	the number of years the	foundation has been in existence	if less than 5 y	ears	· -	3	71.36
4	Enter the net value of no	ncharitable-use assets for 2017 t	from Part X, line	5	-	4	1,808.
5	Multiply line 4 by line 3				.	5	129,019.
6	Enter 1% of net investme	ent income (1% of Part I, line 27t	o)		.	6	0.
7	Add lines 5 and 6					7	129,019.
8	Enter qualifying distributi	ions from Part XII, line 4				8	220,759.

Part V	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instr	uctio	ns)
	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		0.	
	here ▶ ☐ and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.	
3	Add lines 1 and 2		0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		0.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		0.	
6	Credits/Payments:			
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a		_	
b	Exempt foreign organizations—tax withheld at source 6b		O	
C	Tax paid with application for extension of time to file (Form 8868) . 6c	0		
d	Backup withholding erroneously withheld 6d 6d	5		
7	Total credits and payments. Add lines 6a through 6d		0.	
8	Enter any penalty for underpayment of estimated tax. Check here _ ıf Form 2220 is attached 8		0.	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid . 10			ļ
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11			
	VII-A Statements Regarding Activities		TV	T
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	
	participate or intervene in any political campaign?	1a	┼	/
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		/
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materiais			
	published or distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	/
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$,	ľ	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$		<u> </u>	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	 	1
3	If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	-	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	†	1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		1
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		V
	If "Yes," attach the statement required by General Instruction T.		İ	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		-	لــــا
_	conflict with the state law remain in the governing instrument?	6	┼	_
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	—	_
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			
6	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
Ь	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	 	├
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		+	
J	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"		-	'
	complete Part XIV	9		1
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		/

Par	VII-A Statements Regarding Activities (continued)			
•		L	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		/
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		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ► HAWAII BOOK AND MUSIC FESTIVAL.COM			
14		3-703	-1608	
	Located at ► 1925 MAKIKI STREET APT 9 ZIP+4 ►	9682	22	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year		•	▶ [
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?. See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	16	L	ļ
	the foreign country ►			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Ь		Щ.
- u	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Γ	Yes	No
1a	During the year, did the foundation (either directly or indirectly):		100	· · ·
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	 (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .			
	the benefit or use of a disqualified person)?		o	
b	termination of government service, if terminating within 90 days.)	0	٠	
D	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here		٠	
С	were not corrected before the first day of the tax year beginning in 2017?	1c		
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)):	10		Y
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017?	,		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20, 20			
Ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20 , 20 , 20 , 20	,	0	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
4 =	foundation had excess business holdings in 2017.)	3b		
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		V
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		1

Part	: VII-B	Statements Regarding Activities	for W	Vhich Form	4720	May Be R	equire	d (conti	nued)	-		
_		the year, did the foundation pay or incur a					<u> </u>				Yes	No
		rry on propaganda, or otherwise attempt to uence the outcome of any specific public						☐ Yes	☑ No			
	dire	ectly or indirectly, any voter registration dr	ıve?					Yes Yes	☑ No	,		
	(4) Pro	ovide a grant to an individual for travel, stu ovide a grant to an organization other than						Yes	☑ No			
	(5) Pro	ction 4945(d)(4)(A)? See instructions ovide for any purpose other than religious,	charit		ic, litera				☑ No	·		
	•	rposes, or for the prevention of cruelty to							☑ No		0	
b		answer is "Yes" to 5a(1)-(5), did any of the tions section 53 4945 or in a current notice							ribed in 	<i>₀</i> 5b		
		zations relying on a current notice regardi							▶ [
С	becau	answer is "Yes" to question 5a(4), does t se it maintained expenditure responsibility	for the	grant?					□ No	,]	v	
		," attach the statement required by Regula										
6a		e foundation, during the year, receive any	tunds,	•	•	, to pay pre	emiums	_				
	•	ersonal benefit contract?		-41				∐ Yes	_ ☑ No	<u> </u>		
b	If "Yes	e foundation, during the year, pay premiun " to 6b, f.le Form 8870.		•	•	•		t contract	:? . _	6b		V
		time during the tax year, was the foundation						∐ Yes				
		," did the foundation receive any proceeds								7b		
Par	t VIII	Information About Officers, Direct and Contractors	tors,	irustees, r	ounga	uon wana	agers,	підпіу і	alo E	піріоу	ees,	
	l ist al	I officers, directors, trustees, and found	ation i	managers ar	nd their	compens	ation S	See instri	ıctions			
<u></u>	2.00			e, and average		mpensation		Contribution				
		(a) Name and address		rs per week led to position	(lf r	not paid, nter -0-)		oyee benefit erred compe		(e) Expe	allowan	
SEE S	STATEM	ENT 6				0.			0.			0
							-		·			
2	Comp	ensation of five highest-paid employee	es (oth	er than tho	se incl	uded on li	ne 1—	see instr	uction	s). If n	one, o	ente
	(a) Name	and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	week 🖢	(c) Comper	nsation	(d) Contribution (d) Co	benefit deferred	(e) Expe	nse acc allowan	
							-			_		
										_		
					<u>.</u>							
Total	number	of other employees paid over \$50,000 .		<u> </u>		<u> </u>			. •			
		C. C Cimpley Coo pale over 400,000 .	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u> </u>					

	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
		-
Tota	I number of others receiving over \$50,000 for professional services	
Par	t IX-A Summary of Direct Charitable Activities	
	it the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
	SEE STATEMENT 7	ļ.
2		
3		
4		
Pai	t IX-B Summary of Program-Related Investments (see instructions)	
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NIA	ı
2		
Al	other program-related investments. See instructions	
3		
T	1 Add lines 1 through 2	
1012	I. Add lines 1 through 3	

Form 990-PF (2017)

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign found	dations,
,	see instructions.)	•	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	1,836
C	Fair market value of all other assets (see instructions)	1c _	
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,836
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	28
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,808
6	Minimum investment return. Enter 5% of line 5	6	90.
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	oundatio	ins
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	90
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	90
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable-amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	_line-1	7	90.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
' a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	220,759.
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	'	
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.	- -	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8; and Part XIII, line 4	4	220,759.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	- -	
•	Enter 1% of Part I, line 27b. See instructions	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	220.759.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years		

Page 9

Part .	Undistributed income (see instruction	oris)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
2	Undistributed income, if any, as of the end of 2017.		0	· /	,
а	Enter amount for 2016 only				· · · · · · · · · · · · · · · · · · ·
b	Total for prior years 20,20,20	0		/	
3	Excess distributions carryover, if any, to 2017:	*	,	/	
а	From 2012			/	ļ
b	From 2013 167,682.		1		2
С	From 2014		1		
d	From 2015 146,970.		-	^	
е	From 2016		° /		
f	Total of lines 3a through e	797,947.	,		
4	Qualifying distributions for 2017 from Part XII,	,	,		
-	line 4: ▶ \$	A -	د	6	
а	Applied to 2016, but not more than line 2a .	,	,		,
	Applied to 2010, but not more than line 2a. Applied to undistributed income of prior years		/		
J	(Election required—see instructions)		/		
_	Treated as distributions out of corpus (Election	Ó.	 		
С	reated as distributions out of corpus (Election required—see instructions)	/0.	0.		O
	,				
d	Applied to 2017 distributable amount				
е	Remaining amount distributed out of corpus	220,759.			
5	Excess distributions carryover applied to 2017	<u> </u>			,,
	(If an amount appears in column (d), the same	•			
	amount must be shown in column (a).)	,			, and the second
6	Enter the net total of each column as	, i			
	indicated below:) 	0		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract	1	0.	ı	•
	line 4b from line 2b	/ <u>-</u>			
С	Enter the amount of prior years' undistributed /				,
	income for which a notice of deficiency has		,		
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		0.	. ر	
d	Subtract line 6c from line 6b. Taxable				
	amount—see instructions		0.	U	ه ه
e	Undistributed income for 2016. Subtract line				\$
•	4a from line 2a. Taxable amount—see	,			
	instructions		i e		
f	Undistributed income for 2017. Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2018			:	0.
7	Amounts treated as distributions out of corpus				-
′	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)) }		
^		0.			<u> </u>
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	_			
_	, .	0.		ļ	
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	<u> </u>			c
10	Analysis of line 9:/			,	0
a	Excess from 2013 167,682.				
b	Excess from 2014 152,367.	,			
C	Excess from 2015				
d	Excess from 2016				
е	Excess from 2017 220,759.			<u> </u>	` _
					Form 990-PF (2017)

Part	XIV Private Operating Foundation	tions (see instru	ctions and Part	VII-A, question 9))	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective for				L	
b	Check box to indicate whether the four		operating foundat		ection 🗌 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
	each year listed			 		
b	Qualifying distributions from Part XII,				 	
J	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test - enter.					1
	(1) Value of all assets					
	(2) Value of assets qualifying under					,
þ	section 4942(j)(3)(B)(i)					
С	Part X, line 6 for each year listed . "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		İ			
	(4) Gross investment income					
Part				ne foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-		ns.)			_
1	Information Regarding Foundation					
а	List any managers of the foundation of before the close of any tax year (but o					by the foundation
b	List any managers of the foundation	who own 10% or	more of the stoc	k of a corporation	n (or an equally la	arge portion of the
	ownership of a partnership or other en	ntity) of which the	foundation has a 1	10% or greater into	erest.	
2	Information Regarding Contribution	Grant Gift Loa	n Scholarshin e	te Programs:		
-	Check here ▶ ☐ if the foundation unsolicited requests for funds. If the focomplete items 2a, b, c, and d. See in	only makes controundation makes	ributions to presel	lected charitable		
a	The name, address, and telephone nu	mber or email add	dress of the person	n to whom applica	tions should be a	ddressed:
b	The form in which applications should	be submitted and	d information and i	materials they sho	uld include:	
С	Any submission deadlines:					
d	Any restrictions or limitations on aw factors	vards, such as b	y geographical ar	eas, charitable fie	elds, kinds of ins	stitutions, or other

Part XV Supplementary Information (continued)

3	Grants and Contributions Paid During	ne year or Approve	ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution	1
a	Paid during the year	or substantial contributor	recipient		
	Total			> 3a	
b	Approved for future payment				

nter	r gross amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by secti	on 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	Program service revenue	ļ				
	a b	<u> </u>				
	c					
	d			 		
	е			 		
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments					1,011.
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:					- x , x 3577 12
	a Debt-financed property					
	b Not debt-financed property			 		<u> </u>
	Net rental income or (loss) from personal property			 		
	Other investment income Gain or (loss) from sales of assets other than inventory	 		 		
9	Net income or (loss) from special events	 - 				
	Gross profit or (loss) from sales of inventory					
• •	b MERCHANDISING					1,370.
	c BOOTH FEES					12,576.
	d					
	е					
12	Subtotal. Add columns (b), (d), and (e)		0.		0.	14,957.
13	Total. Add line 12, columns (b), (d), and (e)				13	
13 See	worksheet in line 13 instructions to verify calculation	ns.)			13	
13 See Par	worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the	ns.) Accomplishm	ent of Exemp			
13 See Par Line	worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt p	Accomplishment income is reported urposes (other than	ent of Exemp rted in column by providing fun			nportantly to the
13 See Par Line	worksheet in line 13 instructions to verify calculation to the Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt potential. EVENT PROMOTES ART, MUSIC AND LITERATION.	Accomplishm In income is repourposes (other than	ent of Exemp rted in column by providing fun			nportantly to the trions)
13 See Par Line	worksheet in line 13 instructions to verify calculation to XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt p	Accomplishm In income is repourposes (other than	ent of Exemp rted in column by providing fun			nportantly to the trions)
13 See Par Line	worksheet in line 13 instructions to verify calculation to the Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt potential. EVENT PROMOTES ART, MUSIC AND LITERATION.	Accomplishm In income is repourposes (other than	ent of Exemp rted in column by providing fun			nportantly to the trions)
13 See Par Line	worksheet in line 13 instructions to verify calculation to the Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt potential. EVENT PROMOTES ART, MUSIC AND LITERATION.	Accomplishm In income is repourposes (other than	ent of Exemp rted in column by providing fun			nportantly to the tions)
13 See Par Line	worksheet in line 13 instructions to verify calculation to the Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt potential. EVENT PROMOTES ART, MUSIC AND LITERATION.	Accomplishm In income is repourposes (other than	ent of Exemp rted in column by providing fun			mportantly to the
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13 See Par Line	worksheet in line 13 instructions to verify calculation to the Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt potential. EVENT PROMOTES ART, MUSIC AND LITERATION.	Accomplishm In income is repourposes (other than	ent of Exemp rted in column by providing fun			mportantly to the
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13 See Par Line	worksheet in line 13 instructions to verify calculation to the Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exempt potential. EVENT PROMOTES ART, MUSIC AND LITERATION.	Accomplishm In income is repourposes (other than	ent of Exemp rted in column by providing fun			mportantly to the
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	Information Organization	•	Transfers to	and Transact	ions and R	telationsh	nips With	Nonchar	itable	Exe	mp
	e organization o	directly or indir		any of the follow						Yes	No
	ction 501(c) (c izations?	ther than see	ction 501(c)(3)	organizations)	or in secti	on 527, r	relating to	political			
_		porting founda	ition to a nonch	arıtable exempt	organization	of:				-	ĺ
(1) Ca									1a(1)		V
• •	ther assets .								1a(2)		_
	transactions										l
	ales of assets to								1b(1)		
				npt organization		• • • •			1b(2)		
	ental of facilities	• •				• • •			1b(3)		
		_							1b(4)		~
	ans or loan gua								1b(5)		
			-	draising solicitation					1b(6)		ϫ
				assets, or paid elete the following					1c		
) Line no (I	b) Amount involved	(c) Name o	of noncharitable exe	empt organization	(d) Descr	ription of trans	sfers, transacti	ons, and sha	ring arra	ngeme	∍nts
											
		<u> </u>									
		<u> </u>									
		 									
		 									
				- 							
											
		 									
		 									
		 			+						
2a Is the	foundation dir	ectly or indired	ctly affiliated w	ith, or related to	, one or mo	re tax-exe	mpt organi	zations			
descr	ibed in section (501(c) (other th	nan section 501	(c)(3)) or in section	on 527? .			[Yes		No
b If "Ye	s," complete the	e following sch	iedule							_	
	(a) Name of organ	nization		(b) Type of organizat	ion		(c) Descript	ion of relation	ıshıp		
											_
											_
											_
				i, including accompanyi				of my knowled	lge and b	elief, it	is t

4	Signature of officer or trustee	Date Title	AL 51	See instructions Ves No
Paid Prepare	Print/Type preparer's name Deborah Michaels		Date C C S C S C	Check of relf-employed 1708256
Preparer Use Only		S' BOOKKEEPING SERVICE	Firm's E	IN ►
03 C	Firm's address ► 1925 MAK	IKI STREET HONOLULU, HI 96822	Phone n	503-703-1608
_			<u> </u>	Form 990-PF (2017)

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

HAWAII BOOK AND MUSIC FESTIVAL

Schedule of Contributors

OMB No 1545-0047

► Attach to Form 990, Form 990-EZ, or Form 990-PF

► Go to www irs gov/Form990 for the latest information

2017

Employer identification number

30-0261277

Organiz	zation type (check or	ne)·
Filers o	of [.]	Section:
Form 99	90 or 990-EZ	☐ 501(c)() (enter number) organization
		☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation
		☐ 527 political organization
Form 99	90-PF	√ 501(c)(3) exempt private foundation
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
		☐ 501(c)(3) taxable private foundation
	only a section 501(c)(7	covered by the General Rule or a Special Rule 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
Genera	al Rule	
Ø		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.
Specia	l Rules	
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line d that received from any one contributor, during the year, total contributions of the greater of (1) f the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
	contributor, during t	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
	contributor, during to contributions totaled during the year for a General Rule applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one he year, contributions exclusively for religious, charitable, etc., purposes, but no such dimore than \$1,000. If this box is checked, enter here the total contributions that were received an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the est to this organization because it received nonexclusively religious, charitable, etc., contributions here during the year.
Caution	n An organization that	t 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)

Employer identification number 30-0261277

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed

Part I	Contributors (see instructions) Use duplicate copies of P	art I if additional space is in	eeded
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	GRANT IN AID - CITY & COUNTY OF HONOLULU 550 S KING ST, SUITE 102 HONOLULU, HL 96813	\$ <u>55,200</u>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2_	BANK OF HAWAII P O BOX 2900 HONOLULU, HI 96812	\$ <u>50,000</u>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3_	HAWAII MEDICAL SERVICE ASSOCIATION P.O. BOX 3799 HONOLULU, HI 96812	\$ <u>25,000</u>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4_	HAWAII TOURISMAUTHORITY _1801 KALAKAUA AVE	\$20,000	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_	KAMEHAMEHA SCHOOLS 567 S KING ST HONOLULU, HI 69813	\$ <u>10,000</u>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_		\$ <u>10,000</u>	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

HAWAII BOOK AND MUSIC FESTIVAL 30-0261277 Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Part I (c) (d) (a) Name, address, and ZIP + 4 Total contributions Type of contribution No. Person OFFICE OF HAWAIIAN AFFAIRS <u>6</u> Payroll Noncash 560 N NIMITZ HWY, SUITE 200 (Complete Part II for HONOLULU, HI 96817 noncash contributions) (a) (c) (d) No Name, address, and ZIP + 4 Total contributions Type of contribution Person 7. ALWAYS HAVE A DREAM FOUNDATION Payroll Noncash 125 RAILROAD AVE (Complete Part II for noncash contributions) DANVILLE_CA 94526 (b) (c) (d) (a) Total contributions Name, address, and ZIP + 4 No Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 Total contributions Type of contribution Nο Person Payroll Noncash (Complete Part II for noncash contributions) (c) (d) (b) (a) Total contributions Name, address, and ZIP + 4 Type of contribution No. Person Payroll Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c) Type of contribution Total contributions Name, address, and ZIP + 4 No. Person Payroll Noncash (Complete Part II for noncash contributions)

Parf II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

<u> </u>		•	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
6_		\$	
		*	
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
7_		\$5,000	
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
		Ψ	
(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
		\$	
		<u> </u>	

Employer identification number

HAWAII BOOK AND MUSIC FESTIVAL Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or

30-0261277

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

	(10) that total more than \$1,000 for the the following line entry. For organizations contributions of \$1,000 or less for the ye	s completing Pa	rt III, enter the total	of exclusively religious, charitable, etc.,	
	Use duplicate copies of Part III if addition	al space is need	ded		
(a) No from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held	
	· · · · · · · · · · · · · · · · · · ·	(e) Trans	sfer of gift	<u> </u>	
	Transferee's name, address, and ZI	P + 4	Relation	nship 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) Trans	sfer of gift		
		• •	_		
-	Transferee's name, address, and ZI	P + 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	
İ		(e) Trans	sfer of gift		
1	Transferee's name, address, and ZI	IP + 4	Relation	nship 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) Trans	sfer of gift		
	Transferee's name, address, and ZI	IP + 4	Relation	nship of transferor to transferee	
Ì					

FORM 990-PF		OTHER INCOME	STATEMENT	1
•		443	(0)	40)
		(A)	(B)	(C)
DESCRIPTION		REVENUE	NET INVEST-	ADJUSTED
		PER BOOKS	MENT INCOME	<u>NET INCOME</u>
CONCESSIONS & MERCHANDISING		1,370	0	1,370
BOOTH FEES		12,576	0	12,576
MEMBERSHIP DUES & ASSESSMENTS		1,011	0	1,011
TOTAL TO FORM 990-F, PART I, LN 11		14,957	<u>Q</u>	14,957
FORM 990-PF		ACCOUNTING FEES	STATEMENT	2
	(A)	(B)	(C)	(D)
DESCR <u>IPT</u> ION	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE
	PER BOOKS	MENT INCOME	NET INCOME	PURPOSES
ACCOUNTING	3,839	0	0	0
TO FORM 990-F, PAGE I, LN 16B	3,839	<u>o</u>	<u>0</u>	<u>0</u>
				_
FORM 990-PF	OTHER PROFESS	SIONAL FEES	STATEMENT	3
	(A)	(B)	(C)	(D)
DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE
	PER BOOKS	MENT INCOME	NET INCOME	PURPOSES
EVENT COORDINATION	83,756	0	0	83,756
TALENT	16,199	0	0	16,199
TALENT-TRAVEL & MEALS	10,038	0	0	10,038
MARKETING	2,464	0	0	2,464
PROFESSIONAL FEES OTHER	55,347	<u>0</u>	<u>0</u>	55,347
TO FORM 990-F, PAGE I, LN 16c	167,804	0	0	167,804

FORM 990-PF	TAXES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
GENERAL EXCISE TAX		62	0	62	<u>0</u>
TO FORM 990-F, PAGE I, LN 18		62	0	62	0

FORM 990-PF	ORM 990-PF OTHER EXPENSES		STATEMENT	5
	·			- ···
	(A)	(B)	(C)	(D)
DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE
	PER BOOKS	MENT INCOME	NET INCOME	<u>PURPOSES</u>
WEBSITE PRODUCTION	7,481	0	0	7,481
BANK CHARGE	122	0	0	
EQUIPMENT LEASING	25,945	0	0	25,945
INSURANCE	5,446	0	0	5,446
SECURITY	2,837	0	0	2,837
LICENSES AND PERMITS	150	0	0	150
OFFICE SUPPLIES	1,220	0	0	1,220
SUBSCRIPTIONS	600	0	0	600
MISCELLANOUS	1,409	0	0	1,409
POSTAGE AND DELIVERY	56	<u>0</u>	<u>0</u>	56
TO FORM 990-F, PAGE I, LN 23	45,266	0	0	45,144

FORM 990 -PF

PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATIONS MANAGERS

STATEMENT 6

	TITLE	COMPENSATION	EMPLOYEE BEN PLAN	EXPENSE
NAME AND ADDRESS	AVRG HRS/WK			
DAWN AMANO-IGE 415 S. BERETANIA ST. HONOLULU, HI 96813	CO-HONORARY CHAIRMAN 0.00	0	0	0
DAVID DELUCA 3565 HARDING AVENUE HONOLULU, HI 96816	CHAIRMAN 5.00	0	0	0
JOEL COSSEBOOM 2840 KOLOWALU ST HONOLULU, HI 96822	TREASURER 2.00	0	0	0
LYNNE WAIHEE 126 QUEEN STREET, SUITE 303 KANEOHE, HI 96744	SECRETARY 1.00	0	o	0
RICHARD TILLOTSON 1927 PROSPECT STREET SUITE202 HONOLULU, HI 96822	DIRECTOR 1.00	0	0	0
MOMI AKIMSEU 130 MERCHANT STREET HONOLULU, HI 69813	DIRECTOR 1.00	0	0	0
STACEY A. ALDRICH 44 MERCHANT STREET HONOLULU, HI 96813	DIRECTOR 1.00	0	0	0
MARK A. BLACKBURN 4106 BLACK POINT ROAD HONOLULU, HI 96816	DIRECTOR 1.00	0	0	0
CHUCK BOLLER 1164 BISHOP STREET, SUITE 124 HONOLULU, HI 69813	DIRECTOR 1.00	0	o	0

FORM `990 -PF `	PART VIII - LIST OF OFFICER TRUSTEFS AND FOUNDAT		ST	ATEMENT 6
RON COX 567 S. KING STREET	DIRECTOR 1.00	0	0	0
HONOLULU, HI 96813 SUZANNE SKJOLD	DIRECTOR			
245 N. KUKUI ST. SUITE 202 KANEOHE, HI 96744	1.00	o	0	0
MICHAEL TITTERTON 738 KAHEKA STREET HONOLULU, HI 96814	DIRECTOR 1.00	0	0	0
ELIZABETH VALENTIN, MPH PO BOX 23212	DIRECTOR 1.00	0	0	0
HONOLULU, HI 96823				
JOE BOCK 36 N. HOTEL ST. SUITE A HONOLULU, HI 96817	DIRECTOR 1.00			
TOTALS INCLUDED ON 990 -PF, PAG	E 6, PART VIII	0	0	0

FORM 990-PF	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT 7

ACTIVITY ONE

THE HAWAII BOOK AND MUSIC FESTIVAL, MAY 4-5, 2017. THIS 2-DAY FREE-ADMISSION NONPROFIT EVENT COMPRISED 8 VENUES FEATURING 130 SEPARATE EVENTS, AND OF 550 PARTICIPANTS, WITH PRESENTATIONS, READINGS, PERFORMANCES, DEMONSTRATIONS, SIGNINGS, AND CHILDREN'S ACTIVITIES. IT WAS ESTIMATED THAT 25,000 PEOPLE ATTENDED THE FESTIVAL.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

220,759