

Return of Organization Exempt From Income Tax

2005

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

A For the 2005 calendar year, or tax year beginning 07/01, 2005, and ending 06/30/2006

- Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending

C Name of organization: HAWAII ASSOCIATION OF INDEPENDENT SCHOOLS. Address: 1585 KAPIOLANI BOULEVARD, HONOLULU, HI 96814

D Employer identification number: 23-7067376. E Telephone number: (808) 973-1530. F Accounting method: Accrual

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Website: WWW.HAIS.ORG

J Organization type (check only one): X 501(c) ( 3 ) (insert no) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization chooses to file a return be sure to file a complete return. Some states require a complete return.

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? Yes No. H(b) If "Yes," enter number of affiliates. H(c) Are all affiliates included? Yes No. H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No.

I Group Exemption Number. M Check if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF)

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 869,905.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions)

SCANNED MAR 02 2007

Table with 21 rows for Revenue, Expenses, and Net Assets. Revenue total: 869,905. Expenses total: 837,127. Net Assets total: 156,653.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2005)

Handwritten notes: 15-16 and signature

**Part II Statement of Functional Expenses**

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

Do not include 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 \$ <u>60,000</u> noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	60,000.	60,000.	STMT 1	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	85,560.	73,164.	11,157.	1,239.
26	Other salaries and wages	92,611.	79,193.	12,076.	1,342.
27	Pension plan contributions	6,840.	5,849.	892.	99.
28	Other employee benefits				
29	Payroll taxes	10,638.	9,097.	1,387.	154.
30	Professional fundraising fees				
31	Accounting fees	8,264.	4,131.	3,926.	207.
32	Legal fees	6,294.	6,294.		
33	Supplies	19,063.	17,734.	1,262.	67.
34	Telephone	5,233.	3,992.	1,178.	63.
35	Postage and shipping	4,004.	3,055.	902.	47.
36	Occupancy	18,370.	14,015.	4,137.	218.
37	Equipment rental and maintenance	11,851.	9,042.	2,669.	140.
38	Printing and publications				
39	Travel	74,269.	72,050.	2,219.	
40	Conferences, conventions, and meetings	24,387.	24,387.		
41	Interest				
42	Depreciation, depletion, etc (attach schedule)	6,689.	5,103.	1,506.	80.
43	Other expenses not covered above (itemize)				
a	CONTRACTED SERVICES	163,920.	163,920.		
b	ADMINISTRATIVE FEES	8,900.	8,900.		
c	PROFESSIONAL FEES - OTHER	135,354.	135,354.		
d	ADVERTISING	18,772.	18,772.		
e	OTHER EXPENSES	23,526.	20,032.	2,970.	524.
f	INSURANCE	16,731.	12,765.	3,768.	198.
g	BAD DEBT	35,851.	35,851.		
44	<b>Total functional expenses.</b> Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	837,127.	782,700.	50,049.	4,378.

Joint Costs. Check  if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?  Yes  No  
 If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_,  
 (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_

**Part III Statement of Program Service Accomplishments** (See the instructions)

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.

What is the organization's primary exempt purpose? <b>SEE STATEMENT 2</b> All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	<b>Program Service Expenses</b> (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts, but optional for others.)
<b>a</b> MEMBERSHIP SERVICES AND CONFERENCES TO PROMOTE CLOSE COOPERATION BETWEEN INDEPENDENT SCHOOLS OF HAWAII; MAINTAIN, ENCOURAGE, AND SUPPORT HIGH STANDARDS AND SECURE PUBLIC INTEREST IN INDEPENDENT SCHOOLS.  (Grants and allocations \$ 60,000. ) If this amount includes foreign grants, check here <input type="checkbox"/>	439,706.
<b>b</b> HAWAII EDUCATIONAL NETWORKING CONSORTIUM & SCHOOL ACCREDITATION SERVICES  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	225,492.
<b>c</b> A MASTERS DEGREE IN EDUCATION PROGRAM TO PREPARE PROFESSIONALS FOR LEADERSHIP IN SCHOOLS.  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	117,502.
<b>d</b>  (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>e</b> Other program services (attach schedule) (Grants and allocations \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	
<b>f</b> Total of Program Service Expenses (should equal line 44, column (B), Program services), . . . . .	782,700.

**Part IV Balance Sheets** (See the instructions)

**Note:** Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>45</b> Cash - non-interest-bearing	51,888.	<b>45</b>	102,130.
	<b>46</b> Savings and temporary cash investments	103,723.	<b>46</b>	104,269.
	<b>47a</b> Accounts receivable	<b>47a</b> 44,680.		
	<b>b</b> Less allowance for doubtful accounts	<b>47b</b> 20,999.	58,538.	<b>47c</b> 23,681.
	<b>48a</b> Pledges receivable	<b>48a</b>		
	<b>b</b> Less allowance for doubtful accounts	<b>48b</b>		<b>48c</b>
	<b>49</b> Grants receivable			<b>49</b>
	<b>50</b> Receivables from officers, directors, trustees, and key employees (attach schedule)			<b>50</b>
	<b>51a</b> Other notes and loans receivable (attach schedule)	<b>51a</b>		
	<b>b</b> Less allowance for doubtful accounts	<b>51b</b>		<b>51c</b>
	<b>52</b> Inventories for sale or use			<b>52</b>
	<b>53</b> Prepaid expenses and deferred charges	STMT. 3 . . . . . 851.		<b>53</b> 2,293.
	<b>54</b> Investments - securities (attach schedule)	▶ <input type="checkbox"/> Cost <input type="checkbox"/> FMV		<b>54</b>
	<b>55a</b> Investments - land, buildings, and equipment basis	<b>55a</b>		
	<b>b</b> Less accumulated depreciation (attach schedule)	<b>55b</b>		<b>55c</b>
<b>56</b> Investments - other (attach schedule)			<b>56</b>	
<b>57a</b> Land, buildings, and equipment basis	STMT. 4 . . . . . <b>57a</b> 46,096.			
<b>b</b> Less accumulated depreciation (attach schedule)	<b>57b</b> 23,323.	22,762.	<b>57c</b> 22,773.	
<b>58</b> Other assets (describe ▶ STMT 5 )	7,256.	<b>58</b>	3,465.	
<b>59 Total assets</b> (must equal line 74) Add lines 45 through 58	245,018.	<b>59</b>	258,611.	
<b>Liabilities</b>	<b>60</b> Accounts payable and accrued expenses	33,143.	<b>60</b>	101,958.
	<b>61</b> Grants payable		<b>61</b>	
	<b>62</b> Deferred revenue	STMT. 6 . . . . . 88,000.	<b>62</b>	NONE
	<b>63</b> Loans from officers, directors, trustees, and key employees (attach schedule)		<b>63</b>	
	<b>64a</b> Tax-exempt bond liabilities (attach schedule)		<b>64a</b>	
	<b>b</b> Mortgages and other notes payable (attach schedule)		<b>64b</b>	
	<b>65</b> Other liabilities (describe ▶ )		<b>65</b>	
<b>66 Total liabilities.</b> Add lines 60 through 65	121,143.	<b>66</b>	101,958.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
	<b>67</b> Unrestricted	-49,828.	<b>67</b>	5,827.
	<b>68</b> Temporarily restricted	173,703.	<b>68</b>	150,826.
	<b>69</b> Permanently restricted		<b>69</b>	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> and complete lines 70 through 74			
	<b>70</b> Capital stock, trust principal, or current funds		<b>70</b>	
	<b>71</b> Paid-in or capital surplus, or land, building, and equipment fund		<b>71</b>	
	<b>72</b> Retained earnings, endowment, accumulated income, or other funds		<b>72</b>	
<b>73 Total net assets or fund balances</b> (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	123,875.	<b>73</b>	156,653.	
<b>74 Total liabilities and net assets/fund balances.</b> Add lines 66 and 73	245,018.	<b>74</b>	258,611.	



Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 15
75b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)
75c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? Note. Related organizations include section 509(a)(3) supporting organizations SEE STATEMENT 11
75d Does the organization have a written conflict of interest policy?

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column See the instructions)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. Row 1 shows -0- in all columns.

Part VI Other Information (See the instructions)

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
78b If "Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?
80b If "Yes," enter the name of the organization HAWAIIAN EDUCATIONAL COUNCIL and check whether it is [X] exempt or [ ] nonexempt
81a Enter direct and indirect political expenditures (See line 81 instructions)
81b Did the organization file Form 1120-POL for this year?

Part VI Other Information (continued)

Yes No

**82a** Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? **82a** X

**b** If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) **82b**

**83a** 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? **83b** N/A

**84a** Did the organization solicit any contributions or gifts that were not tax deductible? **84a** X

**b** If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? **84b** N/A

**85 501(c)(4), (5), or (6) organizations** **a** Were substantially all dues nondeductible by members? **85a** N/A

**b** Did the organization make only in-house lobbying expenditures of \$2,000 or less? **85b** N/A

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

**d** Section 162(e) lobbying and political expenditures **85d** N/A

**e** 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

**g** Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? **85g** N/A

**h** If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? **85h** N/A

**86 501(c)(7) orgs** Enter **a** Initiation fees and capital contributions included on line 12 **86a** N/A

**b** Gross receipts, included on line 12, for public use of club facilities **86b** N/A

**87 501(c)(12) orgs** Enter **a** Gross income from members or shareholders **87a** N/A

**b** Gross income from other sources (Do not net amounts due or paid to other sources 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, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX **88** X

**89a 501(c)(3) organizations** Enter Amount of tax imposed on the organization during the year under section 4911 **N/A**, section 4912 **N/A**, section 4955 **N/A**

**b 501(c)(3) and 501(c)(4) orgs** Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior 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 **N/A**

**d** Enter Amount of tax on line 89c, above, reimbursed by the organization **N/A**

**90a** List the states with which a copy of this return is filed

**b** Number of employees employed in the pay period that includes March 12, 2005 (See instructions) **90b** 5

**91a** The books are in care of **HI ASSOC. OF INDEP. SCHOOL** Telephone no **(808) 973-1530**  
 Located at **1585 KAPIOLANI BLVD, #1212, HONOLULU, HI**, ZIP + 4 **96814**

**b** At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? **91b** X

If "Yes," enter the name of the foreign country

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts

**c** At any time during the calendar year, did the organization maintain an office outside of the United States? **91c** X

If "Yes," enter the name of the foreign country

**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** N/A

**Part VII Analysis of Income-Producing Activities (See the instructions)**

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a STMT 12					342,545.
b					
c					
d					
e					
f Medicare/Medicaid payments . . . . .					
g Fees and contracts from government agencies . . . . .					
94 Membership dues and assessments . . . . .					298,600.
95 Interest on savings and temporary cash investments . . . . .			14	546.	
96 Dividends and interest from securities . . . . .					
97 Net rental income or (loss) from real estate					
a debt-financed property . . . . .					
b not debt-financed property . . . . .					
98 Net rental income or (loss) from personal property . . . . .					
99 Other investment income . . . . .					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events . . . . .					
102 Gross profit or (loss) from sales of inventory . . . . .					
103 Other revenue a					
b OTHER INCOME			01	1,868.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E)) . . . . .				2,414.	641,145.
105 Total (add line 104, columns (B), (D), and (E)) . . . . .					643,559.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions)**

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	STMT 13

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions)**

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions)**

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Under penalties of perjury, I declare that I have examined this return and belief, it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

**Please Sign Here**

Signature of officer: Robert M. Witt  
Type or print name and title: ROBERT M. WITT, EXEC

**Paid Preparer's Use Only**

Preparer's signature: J. Puller  
Firm's name (or yours if self-employed), address, and ZIP + 4: DETOR & WILLIAMS, C  
700 BISHOP STREET, S  
HONOLULU, HI

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Organization Exempt Under Section 501(c)(3)**

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

**Supplementary Information - (See separate instructions.)**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

**2005**

Name of the organization **HAWAII ASSOCIATION OF INDEPENDENT SCHOOLS** Employer identification number **23-7067376**

**Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**  
(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000 . . ▶		NONE		

**Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services**  
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services . . . . . ▶		NONE

**Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services**  
(List each contractor who performed services other than professional services, whether individuals or firms If there are none, enter "None " See page 2 of the instructions )

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
SEE STATEMENT 14		
Total number of other contractors receiving over \$50,000 for other services . . . . . ▶		NONE

**Part III Statements About Activities (See page 2 of the instructions.)**

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B) . . . . .	X	
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a Sale, exchange, or leasing of property? . . . . .		X
b Lending of money or other extension of credit? . . . . .		X
c Furnishing of goods, services, or facilities? . . . . .	X	
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? . . . . .	X	
e Transfer of any part of its income or assets? . . . . .		X
3a Do you make grants for scholarships, fellowships, student loans, etc? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments) . . . . .	X	
b Do you have a section 403(b) annuity plan for your employees? . . . . .	X	
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)? . . . . .		X
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds? . . . . .		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services? . . . . .		X

**Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)**

The organization is not a private foundation because it is (Please check only ONE applicable box)

- 5  A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6  A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7  A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8  A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9  A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶ \_\_\_\_\_
- 10  An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the **Support Schedule** in Part IV-A)
- 11a  An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 11b  A community trust Section 170(b)(1)(A)(vi) (Also complete the **Support Schedule** in Part IV-A)
- 12  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the **Support Schedule** in Part IV-A)
- 13  An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) Check the box that describes the type of supporting organization ▶  Type 1  Type 2  Type 3

Provide the following information about the supported organizations (See page 6 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above
SEE ATTACHED LIST OF SCHOOLS.	06

- 14  An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting NOT APPLICABLE

Table with columns: Calendar year (or fiscal year beginning in), (a) 2004, (b) 2003, (c) 2002, (d) 2001, (e) Total. Rows 15-25 include items like Gifts, grants, and contributions received; Membership fees received; Gross receipts from admissions; Gross income from interest, dividends; Net income from unrelated business activities; Tax revenues levied; Value of services or facilities furnished; Other income; Total of lines 15 through 22; Line 23 minus line 17; Enter 1% of line 23.

Table for lines 26a-26f. 26a: Organizations described on lines 10 or 11. 26b: Prepare a list for your records to show the name of and amount contributed by each person. 26c: Total support for section 509(a)(1) test. 26d: Add Amounts from column (e) for lines 18, 19, 22, 26b. 26e: Public support (line 26c minus line 26d total). 26f: Public support percentage (line 26e (numerator) divided by line 26c (denominator)).

Table for lines 27a-27h. 27a: Organizations described on line 12: For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." 27b: For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000.

Table for lines 27c-27h. 27c: Add Amounts from column (e) for lines 15, 16, 17, 20, 21. 27d: Add Line 27a total and line 27b total. 27e: Public support (line 27c total minus line 27d total). 27f: Total support for section 509(a)(2) test. 27g: Public support percentage (line 27e (numerator) divided by line 27f (denominator)). 27h: Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)).

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15

**Part V Private School Questionnaire** (See page 7 of the instructions) NOT APPLICABLE  
**(To be completed ONLY by schools that checked the box on line 6 in Part IV)**

	Yes	No
<b>29</b> 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? . . . . .	<b>29</b>	
<b>30</b> 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? . . . . .	<b>30</b>	
<b>31</b> 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? . . . . . If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )	<b>31</b>	
-----		
-----		
<b>32</b> Does the organization maintain the following		
<b>a</b> Records indicating the racial composition of the student body, faculty, and administrative staff? . . . . .	<b>32a</b>	
<b>b</b> Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? . . . . .	<b>32b</b>	
<b>c</b> Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? . . . . .	<b>32c</b>	
<b>d</b> Copies of all material used by the organization or on its behalf to solicit contributions? . . . . .	<b>32d</b>	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )		
-----		
<b>33</b> Does the organization discriminate by race in any way with respect to		
<b>a</b> Students' rights or privileges? . . . . .	<b>33a</b>	
<b>b</b> Admissions policies? . . . . .	<b>33b</b>	
<b>c</b> Employment of faculty or administrative staff? . . . . .	<b>33c</b>	
<b>d</b> Scholarships or other financial assistance? . . . . .	<b>33d</b>	
<b>e</b> Educational policies? . . . . .	<b>33e</b>	
<b>f</b> Use of facilities? . . . . .	<b>33f</b>	
<b>g</b> Athletic programs? . . . . .	<b>33g</b>	
<b>h</b> Other extracurricular activities? . . . . .	<b>33h</b>	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement )		
-----		
-----		
<b>34 a</b> Does the organization receive any financial aid or assistance from a governmental agency? . . . . .	<b>34a</b>	
<b>b</b> Has the organization's right to such aid ever been revoked or suspended? . . . . .	<b>34b</b>	
If you answered "Yes" to either 34a or b, please explain using an attached statement		
<b>35</b> 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 . . . . .	<b>35</b>	

**Part VI-A Lobbying Expenditures by Electing Public Charities** (See page 9 of the instructions)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group      Check **b** if you checked "a" and "limited control" provisions apply

**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
<b>36</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	<b>36</b>		
<b>37</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	<b>37</b>		15,972.
<b>38</b> Total lobbying expenditures (add lines 36 and 37) . . . . .	<b>38</b>		15,972.
<b>39</b> Other exempt purpose expenditures . . . . .	<b>39</b>		821,155.
<b>40</b> Total exempt purpose expenditures (add lines 38 and 39) . . . . .	<b>40</b>		837,127.
<b>41</b> Lobbying nontaxable amount Enter the amount from the following table - If the amount on line 40 is -      The lobbying nontaxable amount is -			
Not over \$500,000 . . . . . 20% of the amount on line 40 . . . . .	}		150,569.
Over \$500,000 but not over \$1,000,000 . . . . . \$100,000 plus 15% of the excess over \$500,000			
Over \$1,000,000 but not over \$1,500,000 . . . . . \$175,000 plus 10% of the excess over \$1,000,000			
Over \$1,500,000 but not over \$17,000,000 . . . . . \$225,000 plus 5% of the excess over \$1,500,000			
Over \$17,000,000 . . . . . \$1,000,000 . . . . .			
<b>42</b> Grassroots nontaxable amount (enter 25% of line 41) . . . . .	<b>42</b>		37,642.
<b>43</b> Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36 . . . . .	<b>43</b>		
<b>44</b> Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38 . . . . .	<b>44</b>		

**Caution:** If there is an amount on either line 43 or line 44, you must file Form 4720

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
<b>45</b> Lobbying nontaxable amount . . . . .	150,569.	122,913.	122,620.		396,102.
<b>46</b> Lobbying ceiling amount (150% of line 45(e)) . . . . .					594,153.
<b>47</b> Total lobbying expenditures	15,972.	20,880.	13,734.		50,586.
<b>48</b> Grassroots nontaxable amount . . . . .	37,642.	30,728.	30,655.		99,025.
<b>49</b> Grassroots ceiling amount (150% of line 48(e)) . . . . .					148,538.
<b>50</b> Grassroots lobbying expenditures . . . . .					

**Part VI-B Lobbying Activity by Nonelecting Public Charities**

NOT APPLICABLE

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
<b>a</b> Volunteers . . . . .			
<b>b</b> Paid staff or management (Include compensation in expenses reported on lines c through h) . . . . .			
<b>c</b> Media advertisements . . . . .			
<b>d</b> Mailings to members, legislators, or the public . . . . .			
<b>e</b> Publications, or published or broadcast statements . . . . .			
<b>f</b> Grants to other organizations for lobbying purposes . . . . .			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body . . . . .			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means . . . . .			
<b>i</b> Total lobbying expenditures (Add lines c through h) . . . . .			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

Table with columns for categories (i)-(vi) and sub-sections (a)-(c), and Yes/No columns. Includes rows for Cash, Other assets, and various transactions.

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
GRANTS PAID			
SEE ATTACHED STATEMENT			60,000.
TOTAL CONTRIBUTIONS PAID			60,000.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE

=====  
PROMOTE COOPERATION BETWEEN INDEPENDENT SCHOOLS IN HAWAII THROUGH  
SEMINARS, CONFERENCES AND PUBLICATIONS. AND, TO MAINTAIN, ENCOURAGE,  
AND SUPPORT HIGH STANDARDS AND STRENGTHEN COOPERATION AND  
UNDERSTANDING BETWEEN INDEPENDENT AND PUBLIC SCHOOLS

FORM 990, PART IV - PREPAID EXPENSES AND DEFERRED CHARGES

=====

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
TOTAL PREPAID EXPENSES	851.	2,293.
TOTALS	851.	2,293.
	=====	=====

LAND, BUILDINGS, EQUIPMENT NOT HELD FOR INVESTMENT

=====

ASSET DESCRIPTION	METHOD/ CLASS	FIXED ASSET DETAIL				ACCUMULATED DEPRECIATION DETAIL			
		BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE	BEGINNING BALANCE	ADDITIONS	DISPOSALS	ENDING BALANCE
OFFICE FF&E		39,396.			39,396.	16,634.	6,689.		23,323.
OFFICE FF&E			6,700.		6,700.				
OFFICE FF&E		10,382.		10,382.		10,382.		10,382.	
TOTALS		49,778.			46,096.	27,016.			23,323.

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE
-----	-----	-----
DUE FROM HEC	7,256.	3,465.
TOTALS	----- 7,256.	----- 3,465.
	=====	=====

FORM 990, PART IV - DEFERRED REVENUE

=====

DESCRIPTION	BEGINNING BOOK VALUE
-----	-----
TOTAL DEFERRED REVENUE	88,000.
TOTALS	----- 88,000. =====

FORM 990, PART IV-A - OTHER REVENUE ON BOOKS BUT NOT ON RETURN

DESCRIPTION

AMOUNT

NET DECREASE IN TEMPORARILY  
RESTRICTED NET ASSETS

22,877.

TOTAL

22,877.

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES  
=====

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
ROBERT WITT 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	EXECUTIVE DIRECTOR FULL-TIME	57,960.	2,898.	NONE
ROBERTA BISHOP 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	SECRETARY/TREASURER PART-TIME	27,600.	863.	NONE
MICHAEL BAKER 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	PRESIDENT PART-TIME	NONE	NONE	NONE
NANCY WHITE 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	VICE PRESIDENT PART-TIME	NONE	NONE	NONE
RODNEY CHAMBERLAIN 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
MICHAEL CHUN 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
VAL IWASHITA	DIRECTOR PART-TIME	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES  
=====

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814				
ROBERT PETERS 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
JOE RICE 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
LOU SALZA 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
JOSEPH SCHMIDT 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
JAMES SCOTT 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
NANCY SHAW 1585 KAPIOLANI BOULEVARD 1212	DIRECTOR PART-TIME	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

=====

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
-----	-----	-----	-----	-----
HONOLULU, HI 96814				
CARL STURGES 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
MARK SUGIMOTO 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
PATSY TOM 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
DANIEL WHITE 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	DIRECTOR PART-TIME	NONE	NONE	NONE
WILL HANCOCK 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	EMERITUS PART-TIME	NONE	NONE	NONE
	GRAND TOTALS	85,560.	3,761.	NONE
		----- =====	----- =====	----- =====

FORM 990, PART V-A COMPENSATION PROVIDED BY RELATED ORGANIZATION

=====

NAME AND ADDRESS -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
HAWAIIAN EDUCATIONAL COUNCIL 99-0142666 ROBERT WITT 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	68,040.	3,402.	NONE
HAWAIIAN EDUCATIONAL COUNCIL 99-0142666 ROBERTA BISHOP 1585 KAPIOLANI BOULEVARD 1212 HONOLULU, HI 96814	32,400.	1,012.	NONE
GRAND TOTALS	----- 100,440. =====	----- 4,414. =====	----- NONE =====

FORM 990, PART VII - PROGRAM SERVICE REVENUE

=====

DESCRIPTION -----	BUSINESS CODE ----	AMOUNT -----	EXCLUSION CODE ----	AMOUNT -----	RELATED OR EXEMPT FUNCTION INCOME -----
TECHNOLOGY GROUP					9,336.
GROUP PURCHASING					200.
CONFERENCES					38,950.
BACKGROUND CHECKS					64,524.
WASC ACCREDITATION					42,777.
OTHER PROGRAMS					40,258.
MASTERS DEGR IN ED					146,500.
		-----		-----	-----
TOTALS		=====		=====	=====
					342,545.

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
-------------	--

- |    |   |
|----|---|
| 93 | PROGRAM SERVICE REVENUE INCLUDES:<br>-CAMPAIGNS TO INCREASE PUBLIC AWARENESS OF INDEPENDENT<br>EDUCATION IN HAWAII;<br>-WORKSHOPS, SEMINARS, CONFERENCES FOR EDUCATORS, ADMINIS-<br>TRATORS AND ASSOCIATES OF INDEPENDENT SCHOOLS TO IMPROVE<br>PERFORMANCE, ENHANCE SCHOOL DIALOG WITHIN AND WITHOUT,<br>AND ENHANCE PUBLIC INTEREST IN INDEPENDENT SCHOOLS. |
| 94 | MEMBER SCHOOLS PAY DUES TO SUPPORT HAWAII ASSOCIATION OF<br>INDEPENDENT SCHOOLS FOR SERVICES TO FURTHER THEIR EXEMPT<br>PURPOSES.   |

SCH. A, PART II-B COMPENSATION OF THE 5 HIGHEST PAID FOR OTHER SERV.

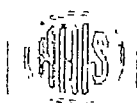
=====

NAME AND ADDRESS -----	TYPE OF SERVICE -----	COMPENSATION -----
Q MARK RESEARCH & POLLING 1001 BISHOP STREET, 19TH FLOOR HONOLULU, HI 96813	SURVEY	60,000.
TOTAL COMPENSATION		----- 60,000. =====

SCHEDULE A, PART III - EXPLANATION FOR LINE 2C

=====

SERVICES PROVIDED TO MEMBER SCHOOLS IN FURTHERANCE OF THIS ORGANIZATION'S EXEMPT PURPOSE. EMPLOYEES OF MEMBER SCHOOLS ARE ON THE BOARD OF DIRECTORS.



HAWAIIAN ASSOCIATION OF INDEPENDENT SCHOOLS

Ala Moana Pacific Center  
1585 Kapiolani Blvd., Suite 1212  
Honolulu, Hawaii 96814-4527

Phone: (808) 973-1540 | Fax: (808) 973-1545 | Email: info@hais.org

State of Hawaii  
Private Schools List

Schools by  
Location

Schools by  
Grade Levels

.....



**Member Schools**

Academy of the Pacific - Oahu

Adventist Malama Elementary School - Oahu

ASSETS School - Oahu

Children's House, The - Oahu

Christian Academy - Oahu

Damien Memorial High School - Oahu

Doris Todd Memorial Christian School - Maui

Haleakala Waldorf School - Maui

Hanahau`oli School - Oahu

Hanalani Schools - Oahu

Hawaii Baptist Academy - Oahu

Hawaiian Mission Academy - Oahu

Hawaiian Mission Elementary and Intermediate School - Oahu

Hawaii Preparatory Academy - Big Island (Hawaii)

Ho`ala School - Oahu

Holy Nativity School - Oahu

Hongwanji Mission School - Oahu

Honolulu Waldorf School - Oahu

Hualalai Academy - Big Island

Iolani School - Oahu

Island School - Kauai

Kahili Adventist School - Kauai

Kamehameha Schools - Oahu, Maui, Big Island

Kohala Mission School - Big Island

Kona Adventist School - Big Island

Kula High and Intermediate/ Kula Elementary at Na Kamalei - Kauai

Lanakila Baptist Schools - Oahu

La Pietra-Hawaii School for Girls - Oahu

Le Jardin Academy - Oahu

Leeward Adventist Mission School - Oahu

Lutheran High School of Hawaii - Oahu

Maryknoll School - Oahu

Maui Adventist School - Maui

Mauna Loa School - Big Island

Mid-Pacific Institute - Oahu

Molokai Mission School - Molokai

Montessori Community School - Oahu

Montessori Hale O Keiki - Maui

Navy Hale Keiki School - Oahu

Our Redeemer Lutheran School - Oahu

Our Savior Lutheran School - Oahu

Parker School - Big Island

Punahou School - Oahu

Sacred Hearts Academy - Oahu

St. Andrew's Priory School - Oahu

Saint Anthony Schools - Maui

Saint Francis School - Oahu

St. Joseph School of Hilo - Big Island

Saint Louis School - Oahu

St. Mark Lutheran School - Oahu

Seabury Hall - Maui

Seventh-Day Adventist Schools in Hawaii  
Oahu, Maui, Big Island, Kauai, Molokai

Trinity Christian School - Oahu

Trinity Lutheran School - Oahu

Windward Adventist School - Oahu

Windward Nazarene Academy - Oahu



Island Pacific Academy - Oahu

Pacific Buddhist Academy - Oahu

Kona Pacific Waldorf School - Big Island

Variety School of Hawaii - Oahu

Waimea Country School - Big Island



**Early Childhood Education**

Central Union Church Preschool and Kindergarten - Oahu

St. Clement's School - Oahu

St. Philomena Early Learning Center - Oahu

St. Timothy's Children's Center - Oahu

Star of the Sea Early Learning Center - Oahu

**Post Secondary Schools**

Chaminade University of Honolulu - Oahu

Hawaii Pacific University - Oahu



Christian Liberty School - Big Island

Clearview Christian Girls School - Maui

E` Makaan School - Big Island

Emmanuel Lutheran School - Maui  
Friendship Christian Schools - Oahu  
Hali Christian School - Big Island  
Hale Aloha Nazarene School - Big Island  
Hawaii Job Corps Center - Oahu  
Hawaii Montessori Schools - Big Island  
Horizons Academy of Maui, Inc. - Maui  
Ka`ahumanu Hou Christian Schools - Maui  
Kailua Christian Academy - Oahu  
Kaimuki Christian School - Oahu  
Kauai Christian Academy - Kauai  
Kawaiaha`o School - Oahu  
Kona Christian Academy - Big Island  
Koolau Baptist Academy - Oahu  
Maili Bible School - Oahu  
Makua Lanı Christian School - Big Island  
Malamalama Waldorf School - Big Island  
Maui Preparatory Academy - Maui  
Messiah Lutheran School - Oahu  
Molokai Christian Academy - Molokai  
Montessori Education Center of Hawaii - Big Island  
Montessori School of Maui, Inc. - Maui  
Playmate Kindergarten & Grade School - Oahu  
Redemption Academy - Oahu  
The Salvation Army - Kula Kokua - Oahu  
Samuel Mac Smith Christian School - Oahu

Soto Academy - Oahu

Sunset Beach Christian School - Oahu

Waolani Judd Nazarene School - Oahu

Word of Life Academy - Oahu

## HAWAII SCHOOLS DIGITAL MEDIA GRANT AWARDEES

Ranking	#	Check Payable to	Check #	Final Award	School
1	22	Moanalua High School	2552	2,000	Moanalua High School
2	62	Aliamanu Middle School	2553	1,500	Aliamanu Middle School
3	11	King Kekaulike High School	2554	2,000	King Kekaulike High School
4	15	Waikele Elementary	2556	1,000	Waikele Elementary
5	10	Kula High and Intermediate	2557	1,500	Kula High & Intermediate
6	17	Farrington High School	2558	2,000	Farrington High School
7	26	Laie Elementary School	2559	1,000	Laie Elementary
8	28	Pearl Ridge Elementary PTG	2560	1,000	Pearl Ridge Elementary
9	16	Ke Kula Ni ihau O Kekaha Learning Center	2613	1,000	Ke Kula Ni ihau O Kekaha Learning Center
10	55	Island School Video Editing Dept.	2562	1,000	Island School
11	25	Suzanne Chun	2563	1,000	Kea'au Elementary
12	19	Kalani High School	2564	1,000	Kalani High School
13	43	Aiea Intermediate Social Studies Dept.	2614	1,000	Aiea Intermediate School
14	18	Maryknoll School	2566	1,500	Maryknoll School
15	9	Calvin T. Nakano	2567	1,000	Ma'ili Elementary School
16	12	Waipahu High School - Marauder Media Arts	2568	1,500	Waipahu High School
17	23	Yannabah Lewis	2569	1,500	Kealakehe High School
18	29	Hakipu'u Learning Center	2570	1,000	Hakipu'u Learning Center
19	24	Waialua Elementary School	2571	1,000	Waialua Elementary School
20	33	Michael Oconnor	2572	1,000	Digital Media Arts Academy
21	20	Hawaii Preparatory Academy Video Program	2573	1,500	Hawaii Preparatory Academy
22	30	Kapunahala Elementary School	2574	1,000	Kapunahala Elementary
23	32	Roberta Hodara	2575	1,000	Seabury Hall
24	53	Horizons Academy of Maui, Inc.	2576	1,000	Horizons Academy of Maui, Inc.
25	47	Wai'alaie School	2577	1,000	Wai'alaie Elementary PCS
26	49	Connie Hand	2578	1,000	Ka'u High & Pahala Elementary School
27	31	Manana Elementary	2579	1,000	Manana Elementary
28	35	Waikiki School	2580	1,000	Waikiki School
29	36	Faith Yokoyama	2581	1,000	Jarrett Middle School
30	38	Honoka'a High School Digital Media Tech Class	2582	1,000	Honoka'a High School
31	48	Waianae Intermediate School	2583	1,000	Waianae Intermediate School
32	41	Hawaii Baptist Academy	2584	1,500	Hawaii Baptist Academy
33	5	Honoka'a High School Video Productions	2585	1,000	Honoka'a High School
34	27	Colette Young-Pohlman	2586	1,000	Mokapu Elementary
35	34	Pearl Harbor Elementary School	2587	1,000	Pearl Harbor Elementary School

## HAWAII SCHOOLS DIGITAL MEDIA GRANT AWARDEES

36	39	Mid-Pacific Institute	2588	1,000	Mid-Pacific institute
37	13	Dayle Okinaga	2589	1,000	Aina Haina Elementary
38	42	UH Foundation Hawaii Telecom 21 Project	2590	1,000	Education Laboratory School
39	44	Punahou School	2615	1,000	Punahou School
40	52	Pieper Toyama	2592	1,000	Pacific Buddhist Academy
41	51	Hawaii Academy of Arts & Science	2594	1,000	Hawaii Academy of Arts & Science PCS
42	1	Betty White	2595	1,000	Sacred Hearts Academy
43	21	Melinda Lyle-Javier	2596	1,000	Montessori School of Maui
44	40	Wahiawa Middle School	2597	1,000	Wahiawa Middle School
45	45	Konawaena High School	2599	1,000	Konawaena High School
46	46	Kahala Elementary Enrichment Program	2600	500	Kahala Elementary
47	50	Waihe'e School	2601	1,000	Waihe'e
48	2	Mauna Loa School	2602	500	Mauna Loa School
49	56	Le Jardin Academy - Middle School	2603	1,000	Le Jardin Academy - Middle School
50	7	Melanie Hermstad	2604	1,000	Hanalei Elementary
51	54	St. John Vianney	2605	1,000	St John Vianney
52	3	Lanakila Baptist High School, Attn: Multimedia	2606	500	Lanakila Baptist School
53	4	Hawaiian Mission Elementary & Intermediate School	2607	1,000	Hawaiian Mission Elem & Inter
54	6	Karen Davidge - Computer PTT	2608	500	Kula Elementary School
56	63	Joel Kawate	2609	500	Kaiaheo Elementary School
57	14	Blaine Tsukayama	2610	500	Waimea Canyon School
61	8	Kapolei High School	2611	500	Kapolei High School

**60,000**

**Hawaii Schools Digital Media (HSDM)  
Grant Application for the 2005-06 School Year**

Please complete the following information regarding your proposed project.

1. School Name: \_\_\_\_\_

2. Project Name: \_\_\_\_\_

3. Name of Applicant/Contact: \_\_\_\_\_

4. Mailing Address: \_\_\_\_\_

\_\_\_\_\_

5. Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

6. I am applying for an award based on the following requirements (check one):

\_\_\_\_\_ \$2,000 for producing video segments totaling 45 minutes of student/school based programming by end of school 2006 (established video program in school).

\_\_\_\_\_ \$1,500 for producing video segments totaling 30 minutes of student/school based programming by end of school 2006 (emerging video program in school).

\_\_\_\_\_ \$1,000 for producing video segments totaling 15 minutes of student/school based programming by end of school 2006 (new video program in school).

7. Describe your HSDM project as you envision it today: \*If additional space is needed, please use separate sheet and attach to application with the item # referenced.

8. This project will likely use the grant funds in the following manner:  
\*If additional space is needed, please use separate sheet and attach to application with the item # referenced.

9. Estimate the number of students impacted by this proposal: \_\_\_\_\_

10. Describe how this will have an impact on school curriculum and student achievement (public schools need to include information on how their project complies with appropriate Hawaii Content and Performance Standards): If additional space is needed, please use separate sheet and attach to application with this item for reference.

11. Is the program you have described (check one):

\_\_\_\_\_ A new program to our school.

\_\_\_\_\_ An enhancement of an existing program.

12. Did your school receive funding from this program during the last school year? (Note: this does not affect your eligibility):  YES  NO

13. Specify the payee for the Grant funding (i.e. who would we make the check out to?): \_\_\_\_\_

By completing and submitting this information I certify that I have discussed this application with school administration and have the support of my school. I also agree to provide the programming specified above and to complete a mid- and final-report in an electronic format and by the timeframes provided by HSDM.

I also understand that all programming that is produced should be submitted to the state K-12 Educational Access provider Teleschool for possible inclusion in the monthly Hawaii Student Digital Media Showcase on Oceanic channel 56.

Applications must be postmarked, emailed or faxed by 5:00 P.M. on September 16, 2005 to:

Cecilia Domingo  
Hawaii Association of Independent Schools (HAIS)  
1585 Kapiolani Blvd, Suite 1212  
Honolulu, Hawaii 96814-4527

Email: [ceciliad@hais.org](mailto:ceciliad@hais.org) ♦ Phone: 808-973-1533 ♦ Fax: 808-973-1545

# Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury  
Internal Revenue Service

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (not automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

**Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868

### Part I Automatic 3-Month Extension of Time - Only submit original (no copies needed)

**Form 990-T corporations** requesting an automatic 6-month extension - check this box and complete Part I only.

All other corporations (including Form 990-C filers) must use Form 7004 to request an extension of time to file income tax returns  
Partnerships, REMICs, and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or 1041

**Electronic Filing (e-file).** Form 8868 can be filed electronically if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for corporate Form 990-T filers) However, you cannot file it electronically if you want the additional (not automatic) 3-month extension, instead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile)

<b>Type or print</b>  <small>File by the due date for filing your return See instructions</small>	Name of Exempt Organization		Employer identification number
	HAWAII ASSOCIATION OF INDEPENDENT SCHOOLS		23-7067376
	Number, street, and room or suite no. If a P.O. box, see instructions		
	1585 KAPIOLANI BOULEVARD	1212	
City, town or post office, state, and ZIP code. For a foreign address, see instructions.			
HONOLULU, HI 96814			

### Check type of return to be filed (file a separate application for each return)

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)               | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T(sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)    | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                            | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ ROBERT WITT

Telephone No ▶ 808 973-1530 FAX No ▶ \_\_\_\_\_

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a **Group Return**, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_ If this is for the **whole** group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension will cover.

**1** I request an automatic 3-month (6-months for a **Form 990-T corporation**) extension of time until 02/15, 2007, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶  calendar year \_\_\_\_\_ or

▶  tax year beginning 07/01, 2005, and ending 06/30, 2006

**2** If this tax year is for less than 12 months, check reason.  Initial return  Final return  Change in accounting period

**3a** If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. \$ \_\_\_\_\_

**b** If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ \_\_\_\_\_

**c Balance Due.** Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. \$ \_\_\_\_\_

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.