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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning , 2011, and ending , 20

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending

C Name of organization: ALOHA UNITED WAY, INC.

Doing Business As:

Number and street (or P O box if mail is not delivered to street address): P.O. BOX 1096

Room/suite:

City or town, state or country, and ZIP + 4: HONOLULU, HI 96808

D Employer identification number: 99-0073494

E Telephone number: (808) 536-1951

G Gross receipts $ 15,800,348.

F Name and address of principal officer: KIM HAGI
SAME AS C ABOVE ,

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.AUW.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1938 **M** State of legal domicile: HI

Part I Summary

1 Briefly describe the organization's mission or most significant activities
ALOHA UNITED WAY'S PURPOSE IS TO IMPROVE LIVES, MOTIVATE PEOPLE TO HELP OTHERS, INCREASE RESOURCES TO MEET NEEDS, AND INSPIRE COLLECTIVE SOLUTIONS TO COMMUNITY PROBLEMS.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	30.
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	30.
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	47.
6	Total number of volunteers (estimate if necessary)	6	3,000.
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	14,979,944.	14,483,287.
9	Program service revenue (Part VIII, line 2g)	0	0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	246,474.	349,211.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	56,439.	-27,775.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,282,857.	14,804,723.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	12,853,053.	12,685,352.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	2,191,363.	2,238,703.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,558,385.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,162,611.	1,655,679.
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	16,207,027.	16,579,734.
19	Revenue less expenses Subtract line 18 from line 12	-924,170.	-1,775,011.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	27,159,680.	26,520,618.
21	Total liabilities (Part X, line 26)	4,848,779.	5,223,582.
22	Net assets or fund balances Subtract line 21 from line 20	22,310,901.	21,297,036.

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Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

▶ Signature of officer: Kim Hagi — Date: 11/14/12

▶ KIM HAGI PRESIDENT & CPO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: ROBERTA A STRAUGHN	Preparer's signature: Roberta A Straughn	Date: NOV 13 2012	Check ☐ if self-employed — PTIN: P00652847
Firm's name ▶ DELOITTE TAX LLP			Firm's EIN ▶ 86-1065772
Firm's address ▶ 1132 BISHOP STREET, SUITE 1200 HONOLULU, HI 96813-2870			Phone no 808-543-0700

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2011)

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Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response to any question in this Part III X

1 Briefly describe the organization's mission

ALOHA UNITED WAY'S PURPOSE IS TO IMPROVE LIVES, MOTIVATE PEOPLE TO HELP OTHERS, INCREASE RESOURCES TO MEET NEEDS, AND INSPIRE COLLECTIVE SOLUTIONS TO COMMUNITY PROBLEMS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code _____) (Expenses $ 6,768,845. including grants of $ 6,314,522.) (Revenue $ 8,433,893.)

ATTACHMENT 1

4b (Code _____) (Expenses $ 6,370,830. including grants of $ 6,370,830.) (Revenue $ 6,370,830.)

COMBINED FEDERAL CAMPAIGN:
AUW, AS THE PRINCIPAL COMBINED FUND ORGANIZATION FOR THE HAWAII PACIFIC COMBINED FEDERAL CAMPAIGN, ORGANIZES THE CAMPAIGN AND DISBURSES FUNDS TO AGENCIES THAT QUALIFY UNDER FEDERAL REGULATIONS.

4c (Code _____) (Expenses $ 386,900. including grants of $ _____) (Revenue $ _____)

211 PROGRAM:
211 IS A PUBLIC SERVICE OF ALOHA UNITED WAY. 211 IS A FREE INFORMATION AND REFERRAL SERVICE THAT LINKS PEOPLE ON ALL ISLANDS WITH ACCESS TO OVER 4,000 COMMUNITY RESOURCES. IT PROVIDES INFORMATION ON A BROAD RANGE OF HEALTH AND HUMAN SERVICES FOR THE WHOLE COMMUNITY INCLUDING JOB PLACEMENT, CHILD CARE, AND SUMMER CAMP INFORMATION, AS WELL AS BASIC FOOD, SHELTER, CRISIS AND OTHER NEEDS. 211 IS ALSO THE NUMBER TO CALL WHEN PEOPLE WANT TO DONATE GOODS OR VOLUNTEER IN THE COMMUNITY.

4d Other program services (Describe in Schedule O) ATTACHMENT 2

(Expenses $ 66,722. including grants of $ _____) (Revenue $ _____)

4e Total program service expenses ▶ 13,593,297.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at $100,000 or more? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		X
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V . . . . . ☐

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 15			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return . 2a 47			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b		
4a	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)?	4a		X
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	**Organizations that may receive deductible contributions under section 170(c).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . .	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . .	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	X	
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	**Section 501(c)(7) organizations.** Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 . . . . . 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	**Section 501(c)(12) organizations.** Enter			
a	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
c	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	14b		

Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions.*

Check if Schedule O contains a response to any question in this Part VI X

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	1a 30		
b	Enter the number of voting members included in line 1a, above, who are independent	1b 30		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ HI,

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

[X] Own website [X] Another's website [X] Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ STACIE-LYNN PERREIRA 200 N. VINEYARD HONOLULU, HI 96817 808-543-2219

Part VII **Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII . . . . . ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ALAN POLLACK DIRECTOR	1.00	X						0	0	0
(2) BERNARD NUNIES DIRECTOR/VICE-CHAIR	1.00	X						0	0	0
(3) BETSY LUM DIRECTOR	1.00	X						0	0	0
(4) BILL LOOSE DIRECTOR	1.00	X						0	0	0
(5) BLENN FUJIMOTO DIRECTOR	1.00	X						0	0	0
(6) CHERYL KA'UHANE LUPENUI DIRECTOR	1.00	X						0	0	0
(7) CHRIS SBARBARO DIRECTOR	1.00	X						0	0	0
(8) DAMIEN KIM DIRECTOR	1.00	X						0	0	0
(9) DAVID KIRKEBY DIRECTOR/TREASURER	1.00	X		X				0	0	0
(10) DAVID TUMILOWICZ DIRECTOR	1.00	X						0	0	0
(11) DENNIS TANIMOTO DIRECTOR	1.00	X						0	0	0
(12) DONN TAKAKI DIRECTOR/VICE-CHAIR	1.00	X		X				0	0	0
(13) DONNA DOMINGO DIRECTOR	1.00	X						0	0	0
(14) JENNIFER THOMPSON DIRECTOR/SECRETARY	1.00	X		X				0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
15) JOAN DANIELEY DIRECTOR	1.00	X						0	0	0
16) JOAN LEE HUSTED DIRECTOR	1.00	X						0	0	0
17) JODI ENDO CHAI DIRECTOR	1.00	X						0	0	0
18) KATHY KAWAGUCHI DIRECTOR	1.00	X						0	0	0
19) KRISTEEN HANSELMAN DIRECTOR	1.00	X						0	0	0
20) LIANN EBESUGAWA DIRECTOR	1.00	X						0	0	0
21) LINDA JOHNSRUD DIRECTOR	1.00	X						0	0	0
22) MICHELE SAITO DIRECTOR	1.00	X						0	0	0
23) RANDY PERREIRA DIRECTOR	1.00	X						0	0	0
24) ROB HALE DIRECTOR/CHAIR	1.00	X		X				0	0	0
25) SCOTT WO DIRECTOR	1.00	X						0	0	0
1b Sub-total ▶								0	0	0
c Total from continuation sheets to Part VII, Section A ▶								411,904.	0	104,475.
d Total (add lines 1b and 1c) ▶								411,904.	0	104,475.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 1

		Yes	No
3	Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
26) SHARON AMANO DIRECTOR	1.00	X						0	0	0
27) SON-JAI PAIK DIRECTOR	1.00	X						0	0	0
28) TONY SAGUIBO DIRECTOR	1.00	X						0	0	0
29) VIC ANGOCO DIRECTOR	1.00	X						0	0	0
30) WARREN WEE DIRECTOR	1.00	X						0	0	0
31) JOANN C. LUMSDEN VP OF FINANCE/CFO - PART YEAR	40.00			X				102,288.	0	26,026.
32) JODY SHIROMA VP-MKTG & COMM/COO - PART YEAR	40.00			X				90,997.	0	30,724.
33) NORMAN BAKER VP-COMM IMPACT/COO - PART YEAR	40.00			X				85,432.	0	22,797.
34) KIM HAGI PRESIDENT & CPO - PART YEAR	40.00			X				86,044.	0	12,616.
35) SUSAN A. DOYLE PRESIDENT & CPO - PART YEAR	40.00			X				47,143.	0	12,312.
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 1

		Yes	No
3	Did the organization list any **former** officer, director, or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	23,324.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	14,459,963.				
	g Noncash contributions included in lines 1a-1f: $ 805.						
	h Total. Add lines 1a-1f			14,483,287.			
Program Service Revenue		Business Code					
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			0			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			349,211.			317,796.
	4 Income from investment of tax-exempt bond proceeds			0			
	5 Royalties			0			
		(i) Real	(ii) Personal				
	6a Gross rents	802,405.					
	b Less rental expenses	963,509.					
	c Rental income or (loss)	-161,104.					
	d Net rental income or (loss)			-161,104.			-161,104.
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory						
	b Less cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)			0			
	8a Gross income from fundraising events (not including $ 23,324. of contributions reported on line 1c) See Part IV, line 18	a	ATCH 3 46,886.				
	b Less direct expenses	b	32,116.				
	c Net income or (loss) from fundraising events		ATCH 4	14,770.			14,770.
	9a Gross income from gaming activities See Part IV, line 19	a					
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities			0			
	10a Gross sales of inventory, less returns and allowances	a					
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory			0			
	Miscellaneous Revenue		Business Code				
	11a ADMINISTRATIVE REIMBURSEMENTS			104,887.	104,887.		
	b OTHER INCOME & REIMB OF PROGRAM EXPENSES			13,672.	13,672.		
	c						
	d All other revenue						
	e Total. Add lines 11a-11d			118,559.			
	12 Total revenue. See instructions			14,804,723.	118,559.		171,462.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Check if Schedule O contains a response to any question in this Part IX . . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21	12,685,352.	12,685,352.		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	496,947.	119,655.	227,338.	149,954.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	991,644.	238,769.	453,646.	299,229.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	164,018.	17,691.	89,750.	56,577.
9 Other employee benefits	412,344.	128,476.	164,768.	119,100.
10 Payroll taxes	173,750.	37,748.	81,362.	54,640.
11 Fees for services (non-employees)				
a Management	0			
b Legal	22,618.		22,618.	
c Accounting	57,424.		57,424.	
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other	495,649.	109,135.	161,479.	225,035.
12 Advertising and promotion	0			
13 Office expenses	0			
14 Information technology	0			
15 Royalties	0			
16 Occupancy	0			
17 Travel	28,653.	2,613.	6,280.	19,760.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	65,419.	18,000.	10,088.	37,331.
20 Interest	0			
21 Payments to affiliates	118,041.	35,226.	38,538.	44,277.
22 Depreciation, depletion, and amortization	132,538.	36,724.	52,208.	43,606.
23 Insurance	0			
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a PRINTING & PUBLICATIONS	510,748.	6,788.	5,799.	498,161.
b DUES TO UNITED WAY STATEWIDE	91,181.	91,181.		
c POSTAGE & SHIPPING	40,605.	28,930.	2,681.	8,994.
d DIRECT FUNDRAISING EXPENSES	-32,116.			-32,116.
e All other expenses	124,919.	37,009.	54,073.	33,837.
25 **Total functional expenses.** Add lines 1 through 24e	16,579,734.	13,593,297.	1,428,052.	1,558,385.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)	0			

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	10,996,430.	1	11,025,670.
	2	Savings and temporary cash investments	4,880,379.	2	4,903,383.
	3	Pledges and grants receivable, net	4,609,232.	3	4,150,764.
	4	Accounts receivable, net	482,805.	4	526,918.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	125,140.	9	64,616.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 9,594,862.			
	b	Less accumulated depreciation — 10b: 7,371,426.	2,471,495.	10c	2,223,436.
	11	Investments - publicly traded securities	2,017,611.	11	2,143,283.
	12	Investments - other securities See Part IV, line 11	0	12	0
	13	Investments - program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	1,576,588.	15	1,482,548.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	27,159,680.	16	26,520,618.
Liabilities	17	Accounts payable and accrued expenses	411,853.	17	778,227.
	18	Grants payable	2,974,083.	18	2,775,103.
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	1,462,843.	25	1,670,252.
	26	**Total liabilities.** Add lines 17 through 25	4,848,779.	26	5,223,582.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	14,209,131.	27	13,899,201.
	28	Temporarily restricted net assets	5,256,494.	28	4,603,243.
	29	Permanently restricted net assets	2,845,276.	29	2,794,592.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	22,310,901.	33	21,297,036.
	34	Total liabilities and net assets/fund balances	27,159,680.	34	26,520,618.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI X

1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,804,723.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,579,734.
3	Revenue less expenses Subtract line 2 from line 1	3	-1,775,011.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	22,310,901.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	761,146.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	21,297,036.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	X	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization	Employer identification number
ALOHA UNITED WAY, INC.	99-0073494

Part I Reason for Public Charity Status (All organizations must complete this part) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 [X] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 [ ] 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 exempt 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).** (Complete Part III)

10 [ ] An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a [ ] Type I b [ ] Type II c [ ] Type III - Functionally integrated d [ ] Type III - Other

e [ ] By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . [ ]

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	
(ii)	A family member of a person described in (i) above?	11g(ii)	
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	17,859,663.	15,920,668.	15,209,103.	14,979,944.	14,483,287.	78,452,665.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	17,859,663.	15,920,668.	15,209,103.	14,979,944.	14,483,287.	78,452,665.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						78,452,665.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4	17,859,663.	15,920,668.	15,209,103.	14,979,944.	14,483,287.	78,452,665.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,510,507.	1,340,859.	1,404,402.	1,027,448.	848,481.	6,131,697.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) ATCH. 1	217,443.	189,946.	204,523.	215,662.	118,559.	946,133.
11 **Total support** Add lines 7 through 10						85,530,495.
12 Gross receipts from related activities, etc (see instructions)					12	261,814.

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	91.72%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	91.38%

16a **33 1/3% support test - 2011.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support test - 2010.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test - 2011.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test - 2010.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II
If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2010 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2011** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2010** Schedule A, Part III, line 17	18	%

19a **331/3% support tests - 2011.** If the organization did not check the box on line 14, and line 15 is more than 331/3%, and line 17 is not more than 331/3%, check this box and **stop here** The organization qualifies as a publicly supported organization ▶ ☐

b **331/3% support tests - 2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 331/3%, and line 18 is not more than 331/3%, check this box and **stop here** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions)

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2007	2008	2009	2010	2011	TOTAL
OTHER INCOME	217,443.	189,946.	204,523.	215,662.	118,559.	946,133.
TOTALS	217,443.	189,946.	204,523.	215,662.	118,559.	946,133.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.
▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of organization	Employer identification number
ALOHA UNITED WAY, INC.	99-0073494

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
2 Political expenditures . . . . . ▶ $
3 Volunteer hours . . . . . .

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955. . . . . ▶ $
2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . ▶ $
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . . ☐ Yes ☐ No
4a Was a correction made? . . . . . ☐ Yes ☐ No
b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ $
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ $
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b . . . . . ▶ $
4 Did the filing organization file **Form 1120-POL** for this year? . . . . . ☐ Yes ☐ No
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)	1,314.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)	1,314.	
d Other exempt purpose expenditures	13,591,983.	
e Total exempt purpose expenditures (add lines 1c and 1d)	13,593,297.	
f Lobbying nontaxable amount Enter the amount from the following table in both columns	829,665.	
g Grassroots nontaxable amount (enter 25% of line 1f)	207,416.	
h Subtract line 1g from line 1a If zero or less, enter -0-	0	0
i Subtract line 1f from line 1c If zero or less, enter -0-	0	0

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e
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

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount			836,531.	829,665.	1,666,196.
b Lobbying ceiling amount (150% of line 2a, column (e))					2,499,294.
c Total lobbying expenditures			2,232.	1,314.	3,546.
d Grassroots nontaxable amount			209,133.	207,416.	416,549.
e Grassroots ceiling amount (150% of line 2d, column (e))					624,824.
f Grassroots lobbying expenditures			2,232.	1,314.	3,546.

Part II-B **Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	(a) Yes	(a) No	(b) Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total Add lines 1c through 1i			
2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	0
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5, Part II-A, and Part II-B, line 1. Also, complete this part for any additional information

Part IV Supplemental Information *(continued)*

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
ALOHA UNITED WAY, INC.

Employer identification number
99-0073494

Part I **Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II **Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Tax Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____
(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____
b Assets included in Form 990, Part X ▶ $

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a ☐ Public exhibition
- b ☐ Scholarly research
- c ☐ Preservation for future generations
- d ☐ Loan or exchange programs
- e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,718,407.	1,713,407.	1,713,317.	1,713,317.	
b Contributions		5,000.	90.		
c Net investment earnings, gains, and losses	10,596.	9,000.	56,609.	81,645.	
d Grants or scholarships					
e Other expenditures for facilities and programs	10,596.	9,000.	56,609.	81,645.	
f Administrative expenses					
g End of year balance	1,718,407.	1,718,407.	1,713,407.	1,713,317.	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

- a Board designated or quasi-endowment ▶ _____ %
- b Permanent endowment ▶ 100.0000 %
- c Temporarily restricted endowment ▶ _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)	X	
(ii) related organizations	3a(ii)		X
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		191,000.		191,000.
b Buildings		8,994,170.	7,101,266.	1,892,904.
c Leasehold improvements				
d Equipment		409,692.	270,160.	139,532.
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				2,223,436.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments - Program Related. See Form 990, Part X, line 13

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1) UNEMPLOYMENT TRUST FUNDS	8,216.
(2) BENEFICIAL INTEREST IN TRUSTS	888,444.
(3) OTHER ASSETS	155,286.
(4) THIRD PARTY HOLDINGS	430,602.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	1,482,548.

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ANNUITIES PAYABLE	65,628.
(3) PENSION LIABILITY	1,604,624.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	1,670,252.

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	14,804,723.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	16,579,734.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-1,775,011.
4	Net unrealized gains (losses) on investments	4	-306,135.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	1,067,281.
9	Total adjustments (net) Add lines 4 through 8	9	761,146.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	-1,013,865.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	6,335,515.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-163,599.		
e	Add lines **2a** through **2d**			2e	-163,599.
3	Subtract line **2e** from line **1**			3	6,499,114.
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	8,305,609.		
c	Add lines **4a** and **4b**			4c	8,305,609.
5	Total revenue Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12)*			5	14,804,723.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	7,135,192.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c	161,104.		
d	Other (Describe in Part XIV)	2d	32,116.		
e	Add lines **2a** through **2d**			2e	193,220.
3	Subtract line **2e** from line **1**			3	6,941,972.
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	9,637,762.		
c	Add lines **4a** and **4b**			4c	9,637,762.
5	Total expenses Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18)*			5	16,579,734.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

SEE PAGE 5

Part XIV Supplemental Information *(continued)*

PART V, LINE 4

ENDOWED FUNDS HAVE THE PRINCIPAL AMOUNTS SET UP IN PERPETUITY WITH INCOME FROM THESE FUNDS AVAILABLE FOR UNRESTRICTED OPERATIONAL COSTS.

PART X, LINE 2

ALOHA UNITED WAY EVALUATES UNCERTAIN TAX POSITIONS UTILIZING A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN. AT DECEMBER 31, 2011 AND 2010, MANAGEMENT BELIEVES THERE WERE NO SIGNIFICANT UNCERTAIN TAX POSITIONS AND THERE WERE NO PENDING FEDERAL OR STATE INCOME TAX AUDITS. THE FEDERAL STATUTE OF LIMITATIONS REMAINS OPEN FOR ALOHA UNITED WAY FOR THE YEARS ENDED DECEMBER 31, 2008 THROUGH 2011.

Part XIV Supplemental Information *(continued)*

PART XI, LINE 8

ADJUSTMENT FOR DONOR DESIGNATIONS	$ 1,332,153
CHANGE IN VALUE OF BENEFICIAL	
INTEREST IN CHARITABLE TRUST	$ <50,684>
PENSION ADJUSTMENT	$ <214,188>

PART XII, LINES 2D

DIRECT FUNDRAISING EXPENSES	$ 32,116
BENEFICIAL INTEREST IN TRUSTS	$ <50,684>
NET BUILDING EXPENSE	$ 161,104
UNREALIZED LOSSES ON INVESTMENT	$ <306,135>

PART XII, LINES 4B

COMBINED FEDERAL CAMPAIGN	$ 6,370,830
DONOR DESIGNATIONS	$ 1,934,779

PART XIII, LINES 2D

DIRECT FUNDRAISING EXPENSES	$ 32,116

PART XIII, LINES 4B

COMBINED FEDERAL CAMPAIGN	$ 6,370,830
DONOR DESIGNATIONS	$ 3,266,932

SCHEDULE G
(Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
ALOHA UNITED WAY, INC.

Employer identification number
99-0073494

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total ▶							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than $5,000

		(a) Event #1 GOLF TOURNAMENT (event type)	(b) Event #2 COOKBOOK SALE (event type)	(c) Other Events 2. (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	39,574.	12,770.	17,866.	70,210.
	2 Less Charitable contributions	23,324.			23,324.
	3 Gross income (line 1 minus line 2)	16,250.	12,770.	17,866.	46,886.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes			1,234.	1,234.
	6 Rent/facility costs	5,130.		2,131.	7,261.
	7 Food and beverages	4,457.		2,466.	6,923.
	8 Entertainment				
	9 Other direct expenses	3,162.	9,667.	3,869.	16,698.
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(32,116.)
	11 Net income summary Combine line 3, column (d), and line 10 ▶				14,770.

Part III **Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				( )
	8 Net gaming income summary Combine line 1, column d, and line 7 ▶				

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11 Does the organization operate gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility . . . . . 13a %

b An outside facility . . . . . 13b %

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address of the third party

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ $ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
ALOHA UNITED WAY, INC.

Employer identification number
99-0073494

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000 Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed . . . . . ▶ [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SEE ATTACHMENT 5		501(C)(3)	12,685,352.		N/A	N/A	GENERAL OP GRANT
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 705.

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1						
2						
3						
4						
5						
6						
7						

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information

PART I, LINE 2

IN GENERAL AUW'S GRANT FUNDS ARE UNRESTRICTED. AGENCIES MUST PREQUALIFY TO BE CONSIDERED FOR ALLOCATIONS. ONE OF THE PREREQUISITES IS REPORTING ON PROGRAM RESULTS. AGENCIES MUST PROVIDE THOSE REPORTS OR THEY MAY BE EXCLUDED FROM FUTURE ALLOCATIONS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
ALOHA UNITED WAY, INC.

Employer identification number
99-0073494

FORM 990, PART VI, LINE 15

COMPENSATION FOR THE CHIEF PROFESSIONAL OFFICER (PRESIDENT) IS DETERMINED BY AN EXECUTIVE COMPENSATION COMMITTEE APPOINTED AND HEADED BY THE CHAIRMAN OF THE BOARD. WORK PERFORMANCE IS EVALUATED BASED ON A WORK PLAN WITH GOALS. SALARY IS RECOMMENDED BY THIS COMMITTEE AND MUST BE APPROVED BY THE BOARD/EXECUTIVE COMMITTEE. THE AMOUNT OF COMPENSATION IS INFLUENCED BY INFORMATION GATHERED OF STUDIES OF LIKE SALARIES OF OTHER NON-PROFITS AND SIMILAR-SIZED UNITED WAYS, AS WELL THE AMOUNT OF FUNDS AVAILABLE IN THE BUDGET. COMPENSATION OF THE CFO AND COO IS INFLUENCED BY WORK PERFORMANCE (BASED ON A WORK PLAN AND GOALS), A SALARY STRUCTURE DETERMINED BY THE VOLUNTEER STAFF DEVELOPMENT COMMITTEE, AND THE AMOUNT OF FUNDS AVAILABLE IN THE BUDGET.

FORM 990, PART VI, LINE 19

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VI, LINE 11

THE ORGANIZATION HAS ESTABLISHED THE FOLLOWING PROCEDURES FOR THE REVIEW OF THE FORM 990: MANAGEMENT WILL REVIEW AND DISCUSS THE FORM 990 WITH THE FINANCE COMMITTEE, WHO THEN APPROVES THE RETURN ON BEHALF OF THE BOARD. THE FORM 990 IS THEN POSTED TO THE ORGANIZATION'S WEBSITE.

FORM 990, PART XI - RECONCILIATION OF NET ASSETS

ADJUSTMENT FOR DONOR DESIGNATIONS $ 1,332,153

Name of the organization: ALOHA UNITED WAY, INC.

Employer identification number: 99-0073494

CHANGE IN VALUE OF BENEFICIAL INTEREST IN CHARITABLE TRUST	$ <50,684>
PENSION ADJUSTMENT	$ <214,188>
UNREALIZED LOSS ON INVESTMENTS	$ <306,134>
	$ 761,147

ATTACHMENT 1

FORM 990, PART III - PROGRAM SERVICE, LINE 4A

ALOHA UNITED WAY - GENERAL:

USING ITS EXPERIENCE IN BUILDING RELATIONSHIPS AND COALITIONS TO MEET COMMUNITY NEEDS, AUW WORKS WITH NONPROFIT ORGANIZATIONS TO CREATE COLLECTIVE SOLUTIONS ON A SCALE THAT CANNOT BE ACHIEVED BY A SINGLE INDIVIDUAL OR ORGANIZATION. THIS IS ACCOMPLISHED THROUGH A COMMUNITY-WIDE FUNDRAISING CAMPAIGN AND AN INVESTMENT PROCESS THAT FOCUSES THE FUNDS RAISED ON OUR COMMUNITY'S MOST SERIOUS PROBLEMS.

FUNDS RAISED GO TOWARD TWO KEY PURPOSES. FIRST, ALMOST 300 COMMUNITY NONPROFITS RECEIVE DIRECT DESIGNATIONS OF FUNDS. THIS FUNDING IS USED BY THE AGENCIES TO PROVIDE SERVICES THAT TOUCH THE LIVES OF OVER 800,000 RESIDENTS. SECOND, AUW'S VOLUNTEER-LED IMPACT COUNCILS REVIEW AND FUND COMMUNITY BASED PROGRAMS IN THE EDUCATION, POVERTY PREVENTION AND SAFETY NET AREAS. THESE INVESTMENTS ADDRESS THE EMERGENCY AND CRISIS NEEDS OF THE COMMUNITY AND CREATE LONG-TERM IMPROVEMENTS IN COMMUNITY CONDITIONS.

Name of the organization: ALOHA UNITED WAY, INC.

Employer identification number: 99-0073494

ATTACHMENT 2

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES

DESCRIPTION	GRANTS	EXPENSES	REVENUE
THE WEINBERG FELLOWS PROGRAM:		66,722.	
A LEADERSHIP DEVELOPMENT PROGRAM FOR NOT FOR PROFIT EXECUTIVE DIRECTORS WHOSE AGENCIES SERVE THE DISADVANTAGED.			
TOTALS		66,722.	

ATTACHMENT 3

FORM 990, PART VIII - EXCLUDED CONTRIBUTIONS

DESCRIPTION	AMOUNT
LABOR GOLF TOURNAMENT	23,324.
TOTAL	23,324.

ATTACHMENT 4

FORM 990, PART VIII - FUNDRAISING EVENTS

DESCRIPTION	GROSS INCOME	DIRECT EXPENSES	NET INCOME
LABOR GOLF TOURNAMENT	16,250.	12,749.	3,501.
HGEA COOKBOOK SALE	12,770.	9,668.	3,102.
HGEA PLATE LUNCH SALE	6,443.	2,756.	3,687.
KICKBALL TOURNAMENT	11,423.	6,943.	4,480.
TOTALS	46,886.	32,116.	14,770.

Aloha United Way, Inc.
Grants & Other Assistance to Organizations, Governments, & Individuals in the U S.
Year Ended December 31, 2011
Schedule I, Part II

Name of Organization or Government	Address	EIN	IRC Section if Applicable	Amount of Cash Grant	Amount of Non-Cash Grant	Method of Valuation (Book, FMV, Appraisal, Other)	Description of Noncash assistance	Purpose of Grant or Assistance
Adult Friends for Youth	3375 Koapaka St Hon HI 96819	99-0254581	501(C) (3)	3,930	-	N/A	N/A	General Operating Grant
Affordable Housing & Homeless Alliance	46-217 Kahuhipa St Spc #3 Kaneohe HI 96744-3901	99-0269311	501(C) (3)	18,863	-	N/A	N/A	General Operating Grant
Alliance for Drama Education	2165-H 10th Ave Hon HI 96816	99-0208609	501(C) (3)	5,398	-	N/A	N/A	General Operating Grant
Aloha Special Technology Access Center	710 Green St Hon HI 96813-2119	99-0341948	501(C) (3)	1,282	-	N/A	N/A	General Operating Grant
Boy Scouts of America, Aloha Council	42 Puiwa Rd Hon HI 96817	99-0073482	501(C) (3)	43,324	-	N/A	N/A	General Operating Grant
Alzheimer's Association	1050 Ala Moana Blvd Suite 2610 Hon HI 96814	99-0212360	501(C) (3)	58,712	-	N/A	N/A	General Operating Grant
American Cancer Society, Hawaii Pacific Division	2370 Nuuanu Ave Hon HI 96817	99-0073489	501(C) (3)	187,474	-	N/A	N/A	General Operating Grant
American Civil Liberties Union of Hawaii Foundation ("ACLU")	PO Box 3410 Hon HI 96801	99-0192064	501(C) (3)	3,001	-	N/A	N/A	General Operating Grant
American Diabetes Association – Hawaii	875 Waimanu St Suite #601 Hon HI 96813	13-1623888	501(C) (3)	9,230	-	N/A	N/A	General Operating Grant
American Heart Association	677 Ala Moana Blvd , Suite 600 Hon HI 96813	13-5613797	501(C) (3)	49,336	-	N/A	N/A	General Operating Grant
American Lung Association of Hawaii	650 Iwilei Rd #208 Hon HI 96817	93-0386887	501(C) (3)	2,706	-	N/A	N/A	General Operating Grant
American Red Cross	4155 Diamond Hd Rd Hon HI 96816	99-0073477	501(C) (3)	261,131	-	N/A	N/A	General Operating Grant
Assistive Technology Resource	414 Kuili St Suite 104 Hon HI 96817	94-3267103	501(C) (3)	9,019	-	N/A	N/A	General Operating Grant
Association for Retarded Citizens of Hawaii	3989 Diamond Head Rd Hon HI 96816	99-0089327	501(C) (3)	11,954	-	N/A	N/A	General Operating Grant
ASSETS School	1 Ohana Nui Way Hon HI 96818	99-6001152	501(C) (3)	81,141	-	N/A	N/A	General Operating Grant
Big Brothers/Big Sisters of Honolulu	418 Kuwili St Hon HI 96817	99-0109970	501(C) (3)	59,699	-	N/A	N/A	General Operating Grant
Boys' & Girls' Club – Kauai Branch	P O Box 143 Lihue HI 96766	99-6005407	501(C) (3)	1,000	-	N/A	N/A	General Operating Grant
Boys' & Girls' Clubs of Honolulu	1524 Kalakaua Ave #202 Hon HI 96826	99-6005407	501(C) (3)	55,437	-	N/A	N/A	General Operating Grant
Catholic Charities	1822 Keeaumoku St Hon HI 96822	99-0073547	501(C) (3)	331,131	-	N/A	N/A	General Operating Grant
Child and Family Service	91-1841 Fort Weaver Rd Ewa Beach HI 96706	99-0073483	501(C) (3)	183,369	-	N/A	N/A	General Operating Grant
Child and Family Services - Kauai	2970 Kele St , 2nd Flr Lihue HI 96766	99-0073483	501(C) (3)	1,000	-	N/A	N/A	General Operating Grant
Children's Alliance of Hawaii	200 N Vineyard Blvd , Suite 410	99-0257743	501(C) (3)	1,979	-	N/A	N/A	General Operating Grant
Coalition for a Tobacco Free Hawaii	320 Ward Ave #212 Hon HI 96814	68-0637054	501(C) (3)	2,161	-	N/A	N/A	General Operating Grant
Coalition for a Drug-Free Hawaii	1130 N Nimitz Hwy Hon HI 96817	99-0255126	501(C) (3)	105,973	-	N/A	N/A	General Operating Grant
Common Grace	PO Box 31116 Hon HI 96820	30-0110074	501(C) (3)	4,034	-	N/A	N/A	General Operating Grant
Community Assistance Center	200 N Vineyard Blvd Suite 330 Hon HI 96817	99-0093057	501(C) (3)	5,291	-	N/A	N/A	General Operating Grant
Community Helping Schools	871 Kainui Drive Kailua HI 96734-2025	870732748	501(C) (3)	1,126	-	N/A	N/A	General Operating Grant
Consumer Credit Counseling Service of Hawaii	1164 Bishop St Suite 1614 Hon HI 96813	99-0141636	501(C) (3)	5,946	-	N/A	N/A	General Operating Grant
Counseling & Spiritual Care Center	1020 S Beretania St Hon HI 96814	99-0250073	501(C) (3)	3,019	-	N/A	N/A	General Operating Grant
Central Oahu Youth Services Association	66-528 Haleiwa Rd Haleiwa HI 96712	99-0198948	501(C) (3)	6,361	-	N/A	N/A	General Operating Grant
Damien Memorial School	1401 Houghtailing St Hon HI 96817	99-0108341	501(C) (3)	4,839	-	N/A	N/A	General Operating Grant
Domestic Violence Action Center	PO Box 3198 Hon HI 96801	99-0290389	501(C) (3)	46,508	-	N/A	N/A	General Operating Grant
Easter Seals Society of Hawaii	710 Green St Hon HI 96813	99-0075235	501(C) (3)	13,844	-	N/A	N/A	General Operating Grant
Epilepsy Foundation of Hawaii	1240 Ala Moana Blvd Suite 225 Hon HI 96814	23-7216782	501(C) (3)	4,393	-	N/A	N/A	General Operating Grant
Executive Women International Assistance Program	515 South 700 East 2A Salt Lake City, UT 84012	87-0570469	501(C) (3)	1,279	-	N/A	N/A	General Operating Grant
Eye of the Pacific Guide Dogs and Mobility Services	747 Amana St Hon HI 96814	99-0103779	501(C) (3)	27,778	-	N/A	N/A	General Operating Grant
Family Promise of Hawaii	69 North Kainalu Dr Kailua HI 96734	20-2645489	501(C) (3)	196,634	-	N/A	N/A	General Operating Grant
Foster Family Programs Hawaii aka Family Programs Hawaii	250 Vineyard St Hon HI 96813	99-0280498	501(C) (3)	31,382	-	N/A	N/A	General Operating Grant
Friendly Isle United Way	P O Box 1046 Kaunakakai HI 96748	23-7426312	501(C) (3)	13,376	-	N/A	N/A	General Operating Grant
Friends of Cancer Research Center of Hawaii	1236 Lauhala St Hon HI 96813	99-0207313	501(C) (3)	2,639	-	N/A	N/A	General Operating Grant
Friends of the Library	690 Pohkaina St Hon HI 96813	99-6003670	501(C) (3)	2,055	-	N/A	N/A	General Operating Grant
Girl Scout Council of the Pacific	420 Wylie St Hon HI 96817	99-0073488	501(C) (3)	57,074	-	N/A	N/A	General Operating Grant
Good Beginnings Network	33 S King St Suite 200 Hon HI 96813	94-3257650	501(C) (3)	5,268	-	N/A	N/A	General Operating Grant
Goodwill Industries of Honolulu	2610 Kilihau St Hon HI 96819	99-6001264	501(C) (3)	35,320	-	N/A	N/A	General Operating Grant
Gregory House Programs	200 N Vineyard Blvd Suite A310 Hon HI 96817	99-0265111	501(C) (3)	5,720	-	N/A	N/A	General Operating Grant
H U G S	3636 Kilauea Ave Hon HI 96816	99-0213594	501(C) (3)	34,507	-	N/A	N/A	General Operating Grant
Hale Kipa, Inc	615 Piikoi St Hon HI 96814	23-7061499	501(C) (3)	110,679	-	N/A	N/A	General Operating Grant
Hawaii Alliance for Community Based Economic Development	677 Ala Moana Blvd Suite 702 Hon HI 96813	99-0308587	501(C) (3)	15,408	-	N/A	N/A	General Operating Grant
Hawaii Children Cancer Foundation	1814 Liliha St Hon Hi 96817	99-0299937	501(C) (3)	3,688	-	N/A	N/A	General Operating Grant
Hawaii 4-H Foundation	3050 Maile Way 213 Gilmore Hall Hon HI 96822	23-7043787	501(C) (3)	6,070	-	N/A	N/A	General Operating Grant
Hawaii Family Forum	6301 Pali Hwy Kaneohe, HI 96744	94-3271901	501(C) (3)	7,263	-	N/A	N/A	General Operating Grant
Hawaii Fido	59-790 Kamehameha Hwy Haleiwa HI 96712	99-0353345	501(C) (3)	3,145	-	N/A	N/A	General Operating Grant
Hawaii Foodbank	2611-A Kilihau St Hon HI 96819	99-0220699	501(C) (3)	339,469	-	N/A	N/A	General Operating Grant
Hawaii Home Ownership Center	1259 Aala St Suite 201 Hon HI 96817	68-0544935	501(C) (3)	8,437	-	N/A	N/A	General Operating Grant
Hawaii International Child	1168 Waimanu St Hon HI 96814	99-0164045	501(C) (3)	6,789	-	N/A	N/A	General Operating Grant
Hawaii Island United Way	P O Box 745 Hilo HI 96721	99-6012257	501(C) (3)	29,076	-	N/A	N/A	General Operating Grant

Aloha United Way, Inc
Grants & Other Assistance to Organizations, Governments, & Individuals in the U S
Year Ended December 31, 2011
Schedule I, Part II

Name of Organization or Government	Address	EIN	IRC Section if Applicable	Amount of Cash Grant	Amount of Non-Cash Grant	Method of Valuation (Book, FMV, Appraisal, Other)	Description of Noncash assistance	Purpose of Grant or Assistance
Hawaii Kids At Work	1041-E Nuuanu Ave Hon HI 96817	99-0286255	501(C) (3)	5,560	-	N/A	N/A	General Operating Grant
Hawaii Literacy	200N Vineyard Blvd Hon HI 96817	23-7198698	501(C) (3)	20 862	-	N/A	N/A	General Operating Grant
Hawaii Meals on Wheels	P O Box 61194 Hon HI 96839	99-0198132	501(C) (3)	158,772	-	N/A	N/A	General Operating Grant
Hawaii Meth Project	999 Bishop Street 24th Flr Hon HI 96813	26-1965567	501(C) (3)	10,440	-	N/A	N/A	General Operating Grant
Hawaii Mother's Milk	1319 Punahou St Bingham Wing Hon HI 96826	99-0161419	501(C) (3)	15,837	-	N/A	N/A	General Operating Grant
Hawaii Nature Center	2131 Makiki Heights Dr Hon HI 96822	99-0208246	501(C) (3)	13,334	-	N/A	N/A	General Operating Grant
Hawaii Right to Life Education	81 S Hotel St Suite 200-B Hon HI 96813	52-1559792	501(C) (3)	1,869	-	N/A	N/A	General Operating Grant
Hawaii Special Olympics	P O Box 3295 Honolulu HI 96801	23-7173957	501(C) (3)	11,323	-	N/A	N/A	General Operating Grant
Hawaii Women's Legal Foundation	P O Box 2576 Hon HI 96803	99-0217537	501(C) (3)	1,126	-	N/A	N/A	General Operating Grant
Hawaii Youth Opera Chorus	P O Box 22304 Hon HI 96823	99-0142646	501(C) (3)	7,244	-	N/A	N/A	General Operating Grant
Hawaii Youth Services Network	677 Ala Moana Blvd , Suite 702 Hon HI 96813-5416	99-0204777	501(C) (3)	1,634	-	N/A	N/A	General Operating Grant
Hawaiian Humane Society	2700 Waialae Ave Hon HI 96826	99-0073490	501(C) (3)	59,324	-	N/A	N/A	General Operating Grant
Hawaii Centers for Independent Living	414 Kuwili Hon HI 96817	99-0209054	501(C) (3)	8,005	-	N/A	N/A	General Operating Grant
Helping Hands Hawaii	2100 N Nimitz Hwy Hon HI 96819	23-7365077	501(C) (3)	81,809	-	N/A	N/A	General Operating Grant
Hina Mauka	45-845 Po'okela St Kaneohe HI 96744	99-0173356	501(C) (3)	62,757	-	N/A	N/A	General Operating Grant
Armed Services YMCA	1057 North Road Hon HI 96818	99-0075037	501(C) (3)	34,946	-	N/A	N/A	General Operating Grant
Honolulu Academy of Arts	900 S Beretania St Hon HI 96814-1495	99-0079713	501(C) (3)	3,933	-	N/A	N/A	General Operating Grant
Honolulu Community Action Program	33 S King St Suite 300 Hon HI 96813	99-0140622	501(C) (3)	9,430	-	N/A	N/A	General Operating Grant
Honolulu Habitat for Humanity	1136 Union Mall Suite 510 Hon HI 96813	99-0261871	501(C) (3)	6,588	-	N/A	N/A	General Operating Grant
Honolulu Police Community Foundation	6650 Hawaii Kai Drive Suite 250 Hon HI 96825	94-3274384	501(C) (3)	16,071	-	N/A	N/A	General Operating Grant
Honolulu Theatre for Youth	1149 Bethel St Suite 700 Hon HI 96813	99-0107563	501(C) (3)	3,401	-	N/A	N/A	General Operating Grant
Hospice Hawaii	860 Iwilei Rd Honolulu HI 96817	99-0203930	501(C) (3)	164,099	-	N/A	N/A	General Operating Grant
Hospice of Hilo	1011 Waianuenue Ave Hilo HI 96720	99-0218512	501(C) (3)	50,396	-	N/A	N/A	General Operating Grant
Institute for Human Services, Inc	546 Kaaahi St Hon HI 96817	99-0199107	501(C) (3)	251,628	-	N/A	N/A	General Operating Grant
Jewish Community Services	2550 Pali Hwy Hon HI 96817	99-0334439	501(C) (3)	3,226	-	N/A	N/A	General Operating Grant
Junior Achievement of Hawaii	2909 Waialae Ave Suite 10 Hon HI 96826	99-0088861	501(C) (3)	3,111	-	N/A	N/A	General Operating Grant
Juvenile Diabetes Research Foundation International	1019 Waimanu St Suite 214 Hon HI 96814	23-1907729	501(C) (3)	3,612	-	N/A	N/A	General Operating Grant
Kama'aina Kids aka Kama'aina Care, Inc	156 C Hamakua Dr Kailua HI 96734	99-0261935	501(C) (3)	10,129	-	N/A	N/A	General Operating Grant
Kapi'olani Health Foundation	55 Merchant St 24th Flr, Hon HI 96813	99-0246364	501(C) (3)	9,467	-	N/A	N/A	General Operating Grant
Kauai United Way	P O Box Lihue HI 96766	99-0146288	501(C) (3)	9,165	-	N/A	N/A	General Operating Grant
Kindergarten and Children's Aid Association	2707 South King St Hon HI 96826	99-0075242	501(C) (3)	38,833	-	N/A	N/A	General Operating Grant
Kokua Kalihi Valley Comprehensive Family Services	2239 North School St Hon HI 96819	99-0149797	501(C) (3)	25,000	-	N/A	N/A	General Operating Grant
Key Project	47-200 Waihee Rd Kaneohe HI 96744	99-0118209	501(C) (3)	43,334	-	N/A	N/A	General Operating Grant
Kalihi-Palama Health Clinic	915 North King St Hon HI 96817	99-0161221	501(C) (3)	6,924	-	N/A	N/A	General Operating Grant
Ku Aloha Ola Mau	1130 N Nimitz Hwy No C302 Hon HI 96817	99-0165675	501(C) (3)	51,702	-	N/A	N/A	General Operating Grant
Kuakini Foundation	347 N Kuakini St Hon HI 96817	99-0225067	501(C) (3)	8,173	-	N/A	N/A	General Operating Grant
Lanakila Pacific aka Lanakila Rehabilitation Center	1809 Bachelot St Hon HI 96817	99-0103922	501(C) (3)	78,774	-	N/A	N/A	General Operating Grant
Learning Disabilities Association of Hawaii	245 N Kukui St Suite 205 Hon HI 96817	99-0119223	501(C) (3)	510,402	-	N/A	N/A	General Operating Grant
Leahi-Maluhia Foundation	1027 Hala Dr Hon HI 96817	44-0933985	501(C) (3)	4,375	-	N/A	N/A	General Operating Grant
Legal Aid Society of Hawaii	924 Bethel St Hon HI 96813	99-0076020	501(C) (3)	145,580	-	N/A	N/A	General Operating Grant
Life Foundation dba AIDS Foundation of Hawaii	677 Ala Moana Blvd Hon HI 96813	99-0230542	501(C) (3)	21,552	-	N/A	N/A	General Operating Grant
Make a Wish Foundation	P O Box 1877 Hon HI 96805	99-0220777	501(C) (3)	7,246	-	N/A	N/A	General Operating Grant
March of Dimes	1451 South King Hon HI 96814	13-1846366	501(C) (3)	2,556	-	N/A	N/A	General Operating Grant
Maui United Way	270 Hookahi St 301 Wailuku HI 96793	99-0086524	501(C) (3)	18,598	-	N/A	N/A	General Operating Grant
Mediation Center of the Pacific	245 N Kukui St Suite 206 Hon HI 96817	99-0192700	501(C) (3)	8,153	-	N/A	N/A	General Operating Grant
Mental Health Amenca of Hawaii	1124 Fort Street Mall Hon HI 96813	99-0076458	501(C) (3)	6,790	-	N/A	N/A	General Operating Grant
Mental Help Kokua	1221 Kapiolani Blvd Hon HI 96814	99-0154505	501(C) (3)	17,550	-	N/A	N/A	General Operating Grant
Moiliili Community Center	2535 South King St Hon HI 96826	99-0073515	501(C) (3)	25,203	-	N/A	N/A	General Operating Grant
Montesson Community School	1239 Nehoa St Hon HI 96822	99-0150503	501(C) (3)	1,356	-	N/A	N/A	General Operating Grant
Mothers Against Drunk Driving	745 Fort St Suite 303 Hon HI 96813	94-2707273	501(C) (3)	4,416	-	N/A	N/A	General Operating Grant
Multiple Sclerosis Society (National Multiple Sclerosis)	418 Kuwili St #105 Hon HI 96817	01-0735156	501(C) (3)	2,619	-	N/A	N/A	General Operating Grant
NAMI Hawaii	770 Kapiolani Blvd #613 Hon HI 96813	99-0272540	501(C) (3)	2,657	-	N/A	N/A	General Operating Grant
National Kidney Foundation of Hawaii	1314 South King St #304 Hon HI 96814	99-0266733	501(C) (3)	24,025	-	N/A	N/A	General Operating Grant
Native Hawaiian Legal Corporation	1164 Bishop ST Suite 1205 Hon HI 96813-2817	99-0161861	501(C) (3)	1,195	-	N/A	N/A	General Operating Grant
Legacy of Life	405 N Kuakini St , Ste 810 Hon HI 96817	99-0257883	501(C) (3)	13,203	-	N/A	N/A	General Operating Grant
Outreach for Gneving Youth Alliance	P O Box 11260 Hon HI 96828	99-0353665	501(C) (3)	1,094	-	N/A	N/A	General Operating Grant

Aloha United Way, Inc
Grants & Other Assistance to Organizations, Governments, & Individuals in the U S
Year Ended December 31, 2011
Schedule I, Part II

Name of Organization or Government	Address	EIN	IRC Section if Applicable	Amount of Cash Grant	Amount of Non-Cash Grant	Method of Valuation (Book, FMV, Appraisal, Other)	Description of Noncash assistance	Purpose of Grant or Assistance
Pacific Gateway Center	810 North King St Hon HI 96817	99-0236204	501(C) (3)	25,490	-	N/A	N/A	General Operating Grant
Pacific Health Ministry	1245 Young St Hon HI 96814	99-0281185	501(C) (3)	1,024	-	N/A	N/A	General Operating Grant
Pacific Renal Care Foundation	2226 Liliha St Suite 226 Hon HI 96817	20-4243308	501(C) (3)	1,394	-	N/A	N/A	General Operating Grant
Palama Settlement	810 N Vineyard Blvd Hon HI 96817	99-0074140	501(C) (3)	109,626	-	N/A	N/A	General Operating Grant
Palolo Chinese Home	2459 10th Ave Hon HI 96816	99-0073521	501(C) (3)	43,550	-	N/A	N/A	General Operating Grant
Papakolea Community Development	2150 Tantalus Dr Hon HI 96813	91-2074211	501(C) (3)	1,485	-	N/A	N/A	General Operating Grant
Parents & Children Together	1485 Linapuni St #105 Hon HI 96819	99-0119678	501(C) (3)	244,154	-	N/A	N/A	General Operating Grant
PBS Hawaii - Hiki No	P O Box 11599 Hon HI 96828	99-0334518	501(C) (3)	11,530	-	N/A	N/A	General Operating Grant
PARENTS	45-955 Kamehameha Hwy #403 Kaneohe HI 96744	99-0167293	501(C) (3)	6,748	-	N/A	N/A	General Operating Grant
Pearl City Community Youth	PO Box 114 Pearl City HI 96782	99-0331107	501(C) (3)	1,730	-	N/A	N/A	General Operating Grant
People Attentive to Children ("PATCH")	650 Iwilei Rd Box 205 Hon HI 96817	99-0167464	501(C) (3)	22,983	-	N/A	N/A	General Operating Grant
Planned Parenthood of Hawaii	1350 So King St Honolulu Hon HI 96814	99-6012377	501(C) (3)	45,834	-	N/A	N/A	General Operating Grant
Po'Ailani	970 North Kalaheo Ave Suite A-102 Kailua HI 96734	99-0185750	501(C) (3)	5,405	-	N/A	N/A	General Operating Grant
Prevent Child Abuse Hawaii	1575 South Beretania St #206 Hon HI 96826	99-0223044	501(C) (3)	22,338	-	N/A	N/A	General Operating Grant
Project Dana (Moiliili Hongwanji Mission)	902 University Ave Hon HI 96826	99-0143990	501(C) (3)	30,688	-	N/A	N/A	General Operating Grant
Read Aloud America	1314 South King St Suite G4 Hon HI 96814	99-0323798	501(C) (3)	10,817	-	N/A	N/A	General Operating Grant
Read to Me International	1833 Kalakaua Ave Suite 301 Hon HI 96815	99-0327529	501(C) (3)	1,850	-	N/A	N/A	General Operating Grant
Rehabilitation Hospital of the Pacific	226 No Kuakini St Hon HI 96817	51-0160156	501(C) (3)	30,001	-	N/A	N/A	General Operating Grant
Responsive Caregivers of Hawaii	98-1247 Kaahumanu St Suite 219B Aiea HI 96701-5310	99-0166146	501(C) (3)	1,055	-	N/A	N/A	General Operating Grant
River of Life Mission	P O Box 37939 Hon HI 96837	99-0253651	501(C) (3)	8,991	-	N/A	N/A	General Operating Grant
Salvation Army	2950 Manoa Rd Hon HI 96822	99-1156347	501(C) (3)	322,586	-	N/A	N/A	General Operating Grant
Seagull Schools, Inc	1300 Kailua Rd Kailua HI 96734	99-0155163	501(C) (3)	7,201	-	N/A	N/A	General Operating Grant
Special Education Center of Oahu	708 Palekaua St Hon HI 96816	99-0141008	501(C) (3)	11,135	-	N/A	N/A	General Operating Grant
St Francis Healthcare Foundation HI	2228 Liliha St Suite 205 Hon HI 96817	99-0240060	501(C) (3)	1,280	-	N/A	N/A	General Operating Grant
St Francis Hospice, Maunce J Sullivan Family Hospice Center	2228 Liliha St , Ste 205, Honolulu, HI 96817	99-0325194	501(C) (3)	16,363	-	N/A	N/A	General Operating Grant
St Francis Hospice, The Sister Maureen Keleher Center	2228 Liliha St , Ste 205, Honolulu, HI 96817	99-0325194	501(C) (3)	13,113	-	N/A	N/A	General Operating Grant
Straub Foundation	55 Merchant St Suite 2600 Hon HI 96813	99-0109350	501(C) (3)	5,405	-	N/A	N/A	General Operating Grant
Susannah Wesley Community Center	1117 Kaili St Hon HI 96819	99-0073528	501(C) (3)	14,273	-	N/A	N/A	General Operating Grant
Teach for America, Inc	500 Ala Moana Blvd , Suite 3-400 Hon HI 96813	13-3541913	501(C) (3)	56,263	-	N/A	N/A	General Operating Grant
The Children's Center	2651 Pali Hwy Hon HI 96817	51-0140982	501(C) (3)	2,808	-	N/A	N/A	General Operating Grant
The Early School	2510 Bingham St Honolulu HI 96826	99-0155064	501(C) (3)	4,366	-	N/A	N/A	General Operating Grant
The Ronald McDonald House	P O Box 61777 Hon HI 96839	99-0222124	501(C) (3)	8,774	-	N/A	N/A	General Operating Grant
Trinity Christian School	875 Auloa Rd Kailua HI 96734	99-0207568	501(C) (3)	1,618	-	N/A	N/A	General Operating Grant
United States Veterans Initiative – Hawaii	85-638 Farrington Hwy Waianae HI 96792	95-4382752	501(C) (3)	29,846	-	N/A	N/A	General Operating Grant
UH Foundation – Cancer Research Center of Hawaii	2444 Dole St Bachman Hall, Hon HI 96822	99-0085260	501(C) (3)	3,561	-	N/A	N/A	General Operating Grant
United Cerebral Palsy Association of Hawaii	414 Kuwili St Hon HI 96817	99-0092154	501(C) (3)	9,867	-	N/A	N/A	General Operating Grant
United Service Organization ("USO") of Hawaii	4825 Bougainville Dr #210 Hon HI 96819	13-1610451	501(C) (3)	5,736	-	N/A	N/A	General Operating Grant
Variety School	710 Palekaua St Hon HI 96816	99-0105604	501(C) (3)	9,805	-	N/A	N/A	General Operating Grant
Visitor Aloha Society of Hawaii	2250 Kalakaua Ave Suite 403-3 Hon HI 96815	99-0332535	501(C) (3)	2,433	-	N/A	N/A	General Operating Grant
Volunteer Legal Services Hawaii	545 Queen St Suite Hon HI 96813	99-0207024	501(C) (3)	1,810	-	N/A	N/A	General Operating Grant
Waianae Coast Comprehensive Health Center	86-260 Farrington Hwy Waianae HI 96792	99-0148164	501(C) (3)	48,739	-	N/A	N/A	General Operating Grant
Waikiki Community Center	310 Paoakalani Ave Hon HI 96815	99-0179392	501(C) (3)	24,787	-	N/A	N/A	General Operating Grant
Waikiki Health Center	277 Ohua Ave Hon HI 96815	99-0159253	501(C) (3)	29,835	-	N/A	N/A	General Operating Grant
Waimanalo Health Center	41-1347 Kalanianaole Hwy Waimanalo HI 96795	99-0273205	501(C) (3)	68,796	-	N/A	N/A	General Operating Grant
Young Men's Christian Association of Honolulu	1441 Pali Hwy Hon HI 96813	99-0073533	501(C) (3)	87,563	-	N/A	N/A	General Operating Grant
Youth for Christ Hawaii	2639 S King St Suite D207 Hon HI 96826	99-6001292	501(C) (3)	2,962	-	N/A	N/A	General Operating Grant
Youth Service Hawaii	PO Box 61007 Hon HI 96839	31-1655138	501(C) (3)	8,315	-	N/A	N/A	General Operating Grant
Young Women's Christian Association of Oahu	1040 Richards St Hon HI 96813	99-0073534	501(C) (3)	43,037	-	N/A	N/A	General Operating Grant
Other			501(C) (3)	33,477	-	N/A	N/A	General Operating Grant
Subtotal				6,139,522				
United Way Statewide Association of Hawaii	200 North Vineyard Blvd , Suite 700, Honolulu, HI 96817	99-0286056	501(C) (3)	175,000				
Combined Federal Campaign				6,370,830				
				12,685,352				

ATTACHMENT

Description of Property

DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus %	179 exp reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Method	Conv	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
LAND	VARIOUS	191,000.	100 000												
BLDG & IMPROVEMENT	VARIOUS	8,994,170	100 000			8,994,170	6,784,925	7,101,266	SL						316,341
FURNITURE & EQUIP	VARIOUS	409,692	100 000			409,692	239,050	270,160	SL						31,110
Less Retired Assets															
Subtotals		9,594,862				9,403,862	7,023,975	7,371,426							347,451
Listed Property					LESS RENTAL DEPRECIATION REPORTED ON PART VIII, LINE 6B										<214,913>
Less Retired Assets															
Subtotals															
TOTALS		9,594,862				9,403,862	7,023,975	7,371,426							132,538

AMORTIZATION

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending Accumulated amortization	Code	Life	Current-year amortization
TOTALS							

*Assets Retired

JSA
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ATTACHMENT 6