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Department of the Treasury Internal Revenue Service

SCANNED JAN 0 2 2013

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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

	. Ji ule Zi		iluar year, or tax year beginning		711, and en	unig		, 20 12					
В	Check if applicable C Name of organization Foundation of Rotary Club of Honolulu							D Employer identification number					
	Address ch	Address change Doing Business As							99-0179742				
	Name chan							E Telephone number					
	Initial return	1						808-922-5526					
$\bar{\Box}$	Terminated		City or town, state or country, and ZI										
Ħ.	Amended r		Honolulu, Hawaii 96815				G Gross re	eceipts \$	214,283				
$\overline{\Box}$	Application			Philip Wright, President	2012	H(a) is		for affiliates? 🔲 Ye					
_	, .ppouto	ponding	2255 Kuhio Avenue, Honolulu, H	• •		L.		ncluded? Ye					
	Tax-exemp	t etatue	501(c)(3) 501(c) () ◀ (insert no) ☐ 4947(a)(1	1) or 527			a list (see instructi					
<u>:</u>	Website:		ministrator@honolulurotary.com) 1 (moert no) = 1947 (a)(1	1701 - 321		roup exemption	·	•				
<u>к</u>			✓ Corporation ☐ Trust ☐ Associat	ion ☐ Other ▶	L Year of form			of legal domicile	HI				
12		Summ		ion	L Tear Crion	nation to	W Otate	Or regul dominent					
			escribe the organization's missi	on or most significant activ	ities The	Foundation	of the Poter	ry Club of Hone	olulu				
	1	_	_	_									
9		(FRCH) is funded primarily by its members, who are also the members of the Rotary Club of Honolulu (RCH). FRCH holds investments and other assets and disburses the funds for community projects determined by RCH.											
Га	"		ents and other assets and disburs	ses the fullus for community	projects de	termined by	, KOII.						
ē	2 -	book th	nis box ▶☐ If the organization o	discontinued its operations	or dispose	d of more t	han 25% of	ite not accote					
ő						a or more t	. 3						
∞ 5	1		of voting members of the gover			ь)	4	 					
ties			of independent voting members			D)			9				
Activities & Governance			mber of individuals employed in		, line Za)		. 5	-	0				
Ä			mber of volunteers (estimate if r	• •			. 6		120				
			related business revenue from F				. 7a		0				
	b N	let unre	elated business taxable income		<u></u>		. 7b	0	0				
				(h). RECE	111/00	Pric	or Year	Current \					
Revenue	1		tions and grants (Part VIII, line	161,261		154,748							
			service revenue (Part VIII, line	J, 1201				ļ					
ě			ent income (Part VIII, column (A)		9. 20.	၂ဠ/	18,863	<u> </u>	17,355				
_			venue (Part VIII, column (A), line			/P/	639		34,841				
	12 T	otal rev	renue-add lines 8 through 11 (m	iust equal Part VIII column I	A), line 12)	(g)	180,763		206,944				
	13 G	arants a	and similar amounts paid (Part I)	(, column (A), times 1-8	117	*/	80,725		70,722				
			paid to or for members (Part IX		101.	I							
es	15 S		other compensation, employee b		lines 5-10)	~							
Š	16a P		onal fundraising fees (Part IX, co			_							
Expenses	b T		ndraising expenses (Part IX, colu										
Ш	111		rpenses (Part IX, column (A), line				5,193		7,502				
	18 T	otal ex	penses. Add lines 13-17 (must	equal Part IX, column (A), lir	ne 25) .		85,918	_	78,224				
_	19 F	Revenue	e less expenses. Subtract line 1	8 from line 12	<u></u>		94,845		128,720				
5 8	g					Beginning o	of Current Year	End of Y	/ear				
ssets or	ਊ 20 T	otal as	sets (Part X, line 16)				874,167		984,900				
Net As	21 T	otal lial	bilities (Part X, line 26)				13,468		404				
_		let asse	ets or fund balances. Subtract li	ne 21 from line 20			860,699		984,496				
P	art II	Signa	ture Block										
			ury, I declare that I have examined this r					ny knowledge ar	nd belief, it is				
tru	ue, correct, a	and comp	olete Declaration of preparer (other than	officer) is based on all information	of which prep	arer has any k	nowledge						
		N G	Philips (Usight m	D			11/2	8/2012	1				
Si	gn	Sig	Presedent of Found	-			Date '	/					
He	ere	\ 1	Presedent of found	lation.									
		Typ	pe or print name and title 0										
P	aid	Print/T	ype preparer's name	Preparer's signature		Date	Check	PTIN					
							self-em						
	reparer se Only	Firm's	name ►	· · · · · · · · · · · · · · · · · · ·			Firm's EIN ▶	•					
U:	se Only		address ▶				Phone no						
Ma	ay the IRS		ss this return with the preparer s	shown above? (see instruct	ions)			<u> Y</u>	es 🗌 No				
_	•		uction Act Notice, see the separa			t No 11282Y			990 (2011)				

Part	V Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	_
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		1
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? <i>If "Yes," complete Schedule C, Part II</i>	4		1
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		1
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	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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		1
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		1
С	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		1
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		1
e f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 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.	11e		√
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i> Schedule D, Parts XI, XII, and XIII	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		14a	1	1
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	1	
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	1	
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		1
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		1
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		1
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		1
20 a	- and the state of	20a	 	 ▼
_	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	_	

Part I	Checklist of Required Schedules (continued)			
04	Dubble and the second of the s		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	✓	
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		1
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		~
24a	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	_	√
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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? <i>If "Yes," complete Schedule L, Part I</i>	24d 25a		√
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		✓
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		1
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		✓
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
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		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
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? <i>If "Yes," complete Schedule R, Part I</i>	33		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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	35a 35b		✓
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		
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		1
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	1	

Part	V Statements Regarding Other IRS Filings and Tax Compliance	Page
	Check if Schedule O contains a response to any question in this Part V	г
		Yes No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	0
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	
_	reportable gaming (gambling) winnings to prize winners?	1c
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	the same
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	0
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions).	
b	Did the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3a ✓ 3b
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	
	account)?	4a ✓
b	If "Yes," enter the name of the foreign country: ▶	The sale of the Six
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Control of the same
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a ✓
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b ✓
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 ✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	
-	gifts were not tax deductible?	6b
7 a	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	
u	and services provided to the payor?	W-25/21 18/2
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	
_	required to file Form 8282?	7c /
d	If "Yes," indicate the number of Forms 8282 filed during the year	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f ✓
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
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 b	Did the organization make any taxable distributions under section 4966?	9a
10	Section 501(c)(7) organizations. Enter:	9b
а	Initiation fees and capital contributions included on Part VIII, line 12	
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:	
а	Gross income from members or shareholders	
b	Gross income from other sources (Do not net amounts due or paid to other sources	
	against amounts due or received from them.)	
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	4.6
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	MAN AND AND AND AND AND AND AND AND AND A

Is the organization licensed to issue qualified health plans in more than one state?

the organization is licensed to issue qualified health plans

Enter the amount of reserves on hand

С

Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which

Did the organization receive any payments for indoor tanning services during the tax year? **b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

13b

13c

Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
	Check if Schedule O contains a response to any question in this Part VI	<u></u>	<u>· · · · </u>	<u> </u>	. V
Section	on A. Governing Body and Management			V	
4		ا هم	9	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	1a	9		
	if the governing body delegated broad authority to an executive committee or similar				1
	committee, explain in Schedule O.				1
b	Enter the number of voting members included in line 1a, above, who are independent .	1b	9		
2	Did any officer, director, trustee, or key employee have a family relationship or a business				!
	any other officer, director, trustee, or key employee?		2		✓
3	Did the organization delegate control over management duties customarily performed by or	under the direct	;t		
	supervision of officers, directors, or trustees, or key employees to a management company or other	er person? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		✓
6	Did the organization have members or stockholders?		6	1	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to		- 1		
	one or more members of the governing body?		7a	✓	
þ	Are any governance decisions of the organization reserved to (or subject to approva			✓	
_	stockholders, or persons other than the governing body?		7b		
8	Did the organization contemporaneously document the meetings held or written actions ur the year by the following:	idertaken durin	9		
_			90		
a	The governing body?		8a 8b	-	_
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cann				
•	the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		ື່ 9		1
Secti	on B. Policies (This Section B requests information about policies not required by the			ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		1
ь	If "Yes," did the organization have written policies and procedures governing the activities of		3,		
	affiliates, and branches to ensure their operations are consistent with the organization's exen	npt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	=	11a	✓	
ь	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	-	<u> </u>
ь	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			/	<u> </u>
С	Did the organization regularly and consistently monitor and enforce compliance with the	policy? <i>If "Yes,</i>		,	1
40	describe in Schedule O how this was done		12c	✓	<u> </u>
13	Did the organization have a written whistleblower policy?		14		-
14 15	Did the process for determining compensation of the following persons include a review	and approval b		V	
.0	independent persons, comparability data, and contemporaneous substantiation of the deliberation		, E		
а	The organization's CEO, Executive Director, or top management official		15a		
b	Other officers or key employees of the organization		15b		<u> </u>
•	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 sim	ılar arrangemer	nt		
	with a taxable entity during the year?		16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps				
	organization's exempt status with respect to such arrangements?		16b	L	Ь
	ion C. Disclosure				
17 10	List the states with which a copy of this Form 990 is required to be filed ► Hawaii Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, a	and 900.T /900	tion 501	(0)(3)-	- Colin
18	available for public inspection. Indicate how you made these available. Check all that apply.	anu 330-1 (380	ו טכ ווטוו	(6)(3)8	oriiy)
	Own website Another's website Upon request	···			
19	Describe in Schedule O whether (and if so, how), the organization made its governing doc and financial statements available to the public during the tax year.				oolicy,
20	State the name, physical address, and telephone number of the person who possesses the bears and the person who	ooks and recor	ds of the	е	
	Organization. Caitlyn Hunter 2255 Kubio Avenue Suite 718 Honolulu HI 96815				

1	Page	7

Form	aan	つつれ	11

Part VII	Compensation of Officers,	Directors,	Trustees,	Key Employees,	Highest Compens	ated Employees, an
	Independent Contractors					

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	d orga	anız			ompe	nsa	ted any curren	t officer, director	, or trustee.
				((•					
(A)	(B)	(do n	(do not chec			than o	an one	(D)	(E)	(F)
Name and Title	Average hours per week	box, office	unles er and	s pe dad	rson irect	is both or/trust	an tee)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Wright, Philip	_									_
President	Approx 5	✓		✓	_			0	0	0
(2) Jacobs, Selby				١,				_		
Treasurer	Approx 2	/		✓			ļ	0	0	0
(3) Nordwall,Sarah	1	,		١,				_		_
Secretary	Approx 2	1		✓	_		-	0	0	0
(4) Kaneshige, Melvın				ł				_		
Trustee	Approx 1	/	 	<u> </u>			<u> </u>	0	0	0
(5) Lockwood, John Trustee	Approx 1	/						0	0	0
(6) Mullally, Nina	''									
Trustee	Approx 1	1						0	0	0
(7) Seymour Geoffry										
Trustee	Approx 1	✓						0	0	0
(8) Tsukamaki, Ron										
Trustee	Approx 1	✓						0	0	0
(9) Wo, Robert Jr										
Trustee	Approx 1	1			<u> </u>			0	0	0
(10)										
(11)	-									
(12)	-									
(13)								<u> </u>		
(14)										

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
-	(C)											
	(A)	(B)	(do n		Pos		than c	nna	(D)	(E)		(F)
	Name and title	Average (do not check more than one box, unless person is both an							Reportable	Reportable		tımated
		hours per					or/trust		compensation	compensation fro		nount of
		week (describe	악등	Ins	얔	Κe	ᆲ	ਨੂ	from the	related organizations		other pensation
		hours for	dire	1	Officer	y er	phes	Former	organization	(W-2/1099-MISC		om the
		related organizations	cto.	9	Ì Ì	nplc	/e c	"	(W-2/1099-MISC)			anization d related
		in Schedule	Individual trustee or director	Institutional trustee		Key employee	ğ				l l	inizations
		O)	tee	uste		"	ensa					
				ř			Highest compensated employee					
(15)												
(16)												
(17)												
(18)												
(19)		_			_							
(20)												
(21)											 	
(22)											· - · - ·	
						_	ļ			<u> </u>		
(23)	-					_					<u> </u>	
(24)												
(25)												
1b	Sub-total			•					0		0	0
C	Total from continuation sheets to Part	VII, Section	n A					▶				
d	Total (add lines 1b and 1c)							▶	0		0	0
2	Total number of individuals (including bureportable compensation from the organization)	t not limited	d to th				above	e) w	ho received m	ore than \$100	000 of	
												Yes No
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete</i>											
4	For any individual listed on line 1a, is the	sum of re	portal	ble	con	npe	nsatio	n a	ind other comp	pensation from	the	
•	organization and related organizations											
	individual	_									. 4	1
5	Did any person listed on line 1a receive of for services rendered to the organization											√
Section	on B. Independent Contractors								•			
1		compensat	ed inc	dep	end	ent	contr	act	ors that receive	ed more than S	3100.000	of
	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 add	Iress		_					(B) Description of s	services	(C Compe	
2	Total number of independent contractor							o th	nose listed ab	ove) who		
	received more than \$100,000 of compen	sation from	the o	rgai	niza	tion			0			

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
इ इ	1a	Federated campaigns 1a			·		
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					
اع ق	C	Fundraising events 1c	2,790	İ			
T A	d	Related organizations 1d		ŀ			
2 5				Ì			
Sir	e f	Government grants (contributions) 1e					
粪힐	•	All other contributions, gifts, grants, and similar amounts not included above		ļ			
[[[]			151,958		į		
E E	g	Noncash contributions included in lines 1a-1f \$	0				
	h	Total. Add lines 1a-1f	▶	154,748			
Program Service Revenue		Bus	iness Code				
Ş	2a						
2	b						
ا ق	С						
ě	d					_	
Ë	е						
gra	f	All other program service revenue .					
<u>유</u>	g	Total. Add lines 2a–2f	•	_			
	3	Investment income (including dividends	interest.				
		and other similar amounts)		17,355			17,355
	4	Income from investment of tax-exempt bond p		,,,,,,			17,000
	5	·					
	٦	Royalties) Personal		-		-
			71 0/30/14/				
	6a	Gross rents		į.	1		
	b	Less. rental expenses			1		
'	C	Rental income or (loss)					<u> </u>
	_d	Net rental income or (loss)	. ▶				<u> </u>
	7a	areas arrivant nem saise or	(II) Other	1	1		
		assets other than inventory	40,000	İ			
	b	Less. cost or other basis					
	1	and sales expenses .	4,534	ļ			
	С	Gain or (loss) .	35,466				
	d	Net gain or (loss)	•	35,466	35,466		
4				-			
evenue	8a	Gross income from fundraising			,		
₹		events (not including \$					
æ		of contributions reported on line 1c).					
<u></u>	1	See Part IV, line 18 a					
Other	Ь	Less: direct expenses b					
O	С	Net income or (loss) from fundraising even	its . ▶	:	·		
		Gross income from gaming activities.					
		See Part IV, line 19 a					
	ь	Less: direct expenses b					•
	C	Net income or (loss) from gaming activities	s >			· -·	
	_	Gross sales of inventory, less					
	100	returns and allowances a	2,180				,
	h	<u></u>					
	b	Less: cost of goods sold b Net income or (loss) from sales of inventor	2,805	(005)	(005)		
	<u> </u>			(625)	(625)		
	-	iviiscenarieous nevertue Bu	siness Code	<u> </u>			
	11a						
	b				_		
	С						
	d	All other revenue					
	е	Total. Add lines 11a-11d					
	12	Total revenue. See instructions	▶	206,944	34,841		17,355

Form 990 (2011) Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respon	se to any question	in this Part IX		
	t include amounts reported on lines 6b, 7b, o, 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	32,889	32,889		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	37,833	37,833		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)			•	
9	Other employee benefits			_	
10	Payroll taxes	"			
11	Fees for services (non-employees): Management				
a b	Legal				
C	Accounting	1,257		1,257	
d	Lobbying	.,,201		.,	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	6,120		6,120	
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				
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.)				
а	Eveico tavos	126		126	
b	Excise (axes)		-		
c					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	78,224	70,722	7,502	
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)				

P	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	43,283	1	17,158
	2	Savings and temporary cash investments	40,412	2_	90,973
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	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			Section 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 and 1 an
ets	_	employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
⋖	8	Inventories for sale or use	2,587	8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
		· · · · · · · · · · · · · · · · · · ·		10-	
	b	Less: accumulated depreciation	787,885	10c	076 760
	11 12	Investments—publicly traded securities	/8/,883	11	876,769
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	874,167	16	984,900
	17	Accounts payable and accrued expenses	13,468	17	404
	18	Grants payable	10,100	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
တ္	22	Payables to current and former officers, directors, trustees, key			*
Liabilities		employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	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		25	
	26	Total liabilities. Add lines 17 through 25	13,468	26	404
		Organizations that follow SFAS 117, check here ► ✓ and complete			
ë		lines 27 through 29, and lines 33 and 34.			1, 1, i
an	27	Unrestricted net assets	72,814	27	107,297
Ba	28	Temporarily restricted net assets		28	430
2	29	Permanently restricted net assets	787,885	29	876,769
Œ		Organizations that do not follow SFAS 117, check here ▶ □ and			4.5
Net Assets or Fund Balances		complete lines 30 through 34.		•	, , , ,
ets	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
χA	32	Retained earnings, endowment, accumulated income, or other funds.	000 000	32	004 400
ž	33	Total net assets or fund balances	860,699	33	984,496
	34	Total liabilities and net assets/fund balances	874,167	34	984,900

Part	Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI	<u> </u>	<u> </u>		√
1	Total revenue (must equal Part VIII, column (A), line 12)	1			6,944
2	Total expenses (must equal Part IX, column (A), line 25)	2		7	8,224
3	Revenue less expenses. Subtract line 2 from line 1	3		12	8,720
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		86	0,699
5	Other changes in net assets or fund balances (explain in Schedule O)	5		(4	,923)
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		98	4,496
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," ex Schedule O.	plaın i	n		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		1
b	Were the organization's financial statements audited by an independent accountant?		. 2b	1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or of the audit, review, or compilation of its financial statements and selection of an independent account.	_		1	
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	plaın ı	n	1	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the yellissued on a separate basis, consolidated basis, or both:	ar wer	e		
	☑ 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 i	in		
	the Single Audit Act and OMB Circular A-133?		. за		1
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo	ergo th	ie 🗀	1	Ė
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	-	3b		
			For	m 990	(2011

SCHEDULE A `(Form 990 or 990-EZ)

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.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

	of the organization		-					Employer id	lentification		
	dation of the Rotar								99-017		
Par			rity Status (All orga						nstructio	ns.	
The c 1 2 3 4	 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 										
5	hospital's name, city, and state: Man 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 7	3										
8 9	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)										
10 11	An organization purposes of o 509(a)(3). Che	on organized an ne or more pub ck the box that o	operated exclusively d operated exclusive dicity supported organ describes the type of	ely for th nizations supportir	ne benefit described ng organiz	t of, to of the sect tation an	perform f ion 509(a d comple	the funct a)(1) or se	ions of, onection 509	9(a)(2). S gh 11h.	ee section
е	other than fou or section 509	ndation manage (a)(2).	that the organization ers and other than one	is not co e or more	e publicly	lirectly or support	r indirectl ed organ	zations o	or more of described	ın sectio	ed persons on 509(a)(1)
f	organization, o	check this box .								e III sup	pporting
g	following pers		he organization accep	pteu any	giit or co	ontributio	m irom a	iny or the	;		
	(i) A person v	who directly or i	ndirectly controls, eithody of the supported o		-		-	describe	d in (ii) an	nd 11g(i)	Yes No
			on described in (i) abo	_						11g(ii	+ + -
	(iii) A 35% cor	ntrolled entity of	a person described in	ı (ı) or (ii)	above? .		•			11g(iii	
h			on about the support			Г				6.273.4	
(1)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	ın col (i) lı	organization sted in your document?	the orga	ou notify nization in of your port?	(vi) Is the organization in col (i) organized in the US?		(vii) Amount of support	
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	No	Yes	No	Yes	No		
(A)											
(B)								_			
(C)									-		
(D)											
(E)											

Schedul	e A (Form 990 or 990-EZ) 2011						Page 2
Part	Support Schedule for Organization (Complete only if you checked the Part III. If the organization fails to	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
Secti	on A. Public Support				•		
	dar 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	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						
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.		<u> </u>	1	<u> </u>		
	on B. Total Support		4) 2000	4) 2000	(0.0040	1 1 2011	(0 T
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 8	Amounts from line 4						
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.)						
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for the	ne organizatio			 n, or fifth tax y	12 ear as a section	on 501(c)(3)
	organization, check this box and stop he			<u></u>	<u> </u>		> 🗀
	on C. Computation of Public Support			1.4 1 25.	-	T äa I	
14 15 16a	Public support percentage for 2011 (line Public support percentage from 2010 Sci 331/3% support test—2011. If the organi box and stop here. The organization qua	hedule A, Part zation did not	II, line 14 . check the box	on line 13, an	 d line 14 is 33		
b	331/3% support test—2010. If the organ check this box and stop here. The organ					9 15 is 33 ¹ /3%	
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part IV how the organization meets the "torganization".	ets the "facts- facts-and-circ	-and-circumsta	ances" test, ch st. The organiz	eck this box ai ation qualifies	nd stop here.	Explain in
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organiza Explain in Part IV how the organization in supported organization	tion meets the neets the "fact	e "facts-and-d s-and-circums	ircumstances" stances" test.	test, check tl The organization	nis box and ston qualifies as	top here.
18	Private foundation. If the organization d	ıd not check a	box on line 13	3, 16a, 16b, 17	a, or 17b, chec	k this box and	see

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 tes	sts listed belo	w, please co	mplete Part I	l.)	
Section	on A. Public Support				· · · · · · · · · · · · · · · · · · ·		
Calen	dar 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		(2) 2000	(0) 2000	(4) 2010	(0) 20 11	
	received. (Do not include any "unusual grants.")	109,346	95,335	80,836	161,261	151,958	598,736
2	Gross receipts from admissions, merchandise	100,010		00,000	101,201	131,330	
	sold or services performed or facilities						
	furnished in any activity that is related to the	6 6 2 7	205	405	4 500	4.0-0	
•	organization's tax-exempt purpose	6,937	635	165	1,560	4,970	14,267
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	116,283	95,970	81,001	162,821	156,928	613,003
7a	Amounts included on lines 1, 2, and 3			·			
	received from disqualified persons .	5,080	10,100	7,929	16.886	12,460	52,446
b	Amounts included on lines 2 and 3		14,144	.,,,,	,,,,,		
	received from other than disqualified					ļ.	
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year	19,050	18,000	20,000	50.405	42 100	450.050
_		24,130			58,405	43,198	158,653
8	Add lines 7a and 7b	24,130	28,100	27,929	75,291	55,658	211,099
0	line 6.)						
Casti							401,904
	on B. Total Support	() 2007	0.0000				
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	116,283	95,970	81,001	162,821	156,928	613,003
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
_	royalties and income from similar sources .	32,320	14,936	9,180	18,863	11,235	86,534
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b	32,320	14,936	9,180	18,863	11,235	86,534
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		l			İ	
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	148,603	110,906	90,181	181.684	168,163	699,537
14	First five years. If the Form 990 is for the	ne organization					
	organization, check this box and stop he	-			-		
Secti	on C. Computation of Public Suppor						<u></u>
15	Public support percentage for 2011 (line 8			3. column (fl)		15	57.45 %
16	Public support percentage from 2010 Sch		•			16	57.83 %
	on D. Computation of Investment In			<u> </u>	· · · ·	1	70
17	Investment income percentage for 2011 (v line 13. colun	nn (fl)	17	12 %
18	Investment income percentage from 2010		• • • • • • • • • • • • • • • • • • • •	•		18	12 %
19a	331/3% support tests—2011. If the organ						
.54	17 is not more than 331/3%, check this box						
b	331/3% support tests—2010. If the organiz		-	•		-	
D	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di						
20	to organization of	- not officer a		, , , , , , , , , , , , , , , , , , , ,	THE PORT OF THE PORT	and Journal at	7.10110 P

Schedule A (F	Form 990 or 990-EZ) 2011 F	Page 4
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).	
Schedule /	A - Part III - Section A 1(e) - Excluded from "contributions" is \$35,466 being the net proceeds from the sale of a painting (receiv	/ed
as a beque	est from a non-member in 2006) because the transaction is considered "unusual."	·
		

SCHEDULE D · (Form 990)

Supplemental Financial Statements

OMB No 1545-0047 2011

Department of the Treasury Internal Revenue Service Name of the organization

► 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.

Open to Public Inspection Employer identification number

Found	ation of the Rotary Club of Honolulu		99-0179742
Par		r Advised Funds or Other Similar Fu	unds or Accounts. Complete if the
	organization answered "Yes" to Fo		
		(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		
_	funds are the organization's property, subject	-	
6	Did the organization inform all grantees, do		
	only for charitable purposes and not for the conferring impermissible private benefit? .	e benefit of the donor or donor advisor, of	
Dor		lete if the organization answered "Yes	
Pari 1	Purpose(s) of conservation easements held		to ronn 990, rait iv, inte 7.
•	Preservation of land for public use (e.g.,		of an historically important land area
	Protection of natural habitat	· ·	of a certified historic structure
	Preservation of open space		of a continua finatoria structura
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contribu	ition in the form of a conservation
	easement on the last day of the tax year.	·	
			Held at the End of the Tax Year
а	Total number of conservation easements .		2a
b	Total acreage restricted by conservation eas	sements	2b
С	Number of conservation easements on a cer	tified historic structure included in (a)	2c
d	Number of conservation easements include		ot on a
	historic structure listed in the National Regis		
3	Number of conservation easements modified	d, transferred, released, extinguished, or to	erminated by the organization during the
	tax year ▶		
4	Number of states where property subject to Does the organization have a written pol		nanoation bandling of
5	violations, and enforcement of the conserva		
6	Staff and volunteer hours devoted to monitor		
Ū	b	wing, inapodung, and officioning contact value	on outsome daming the year
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	sements during the year
	▶\$, ,	
8	Does each conservation easement reported		
			
9	In Part XIV, describe how the organization re	eports conservation easements in its rever	nue and expense statement, and
	balance sheet, and include, if applicable, the		financial statements that describes the
	organization's accounting for conservation of		an Ohlan Cimilian Appada
Par		ections of Art, Historical Treasures,	
	If the organization elected, as permitted un	vered "Yes" to Form 990, Part IV, line	
18	works of art, historical treasures, or other		
	public service, provide, in Part XIV, the text		
b	If the organization elected, as permitted u		
	works of art, historical treasures, or other	similar assets held for public exhibition.	education, or research in furtherance of
	public service, provide the following amount		
	(i) Revenues included in Form 990, Part VIII		▶ \$
	(ii) Assets included in Form 990, Part X .		. ▶ \$
2	If the organization received or held works	of art, historical treasures, or other simi	lar assets for financial gain, provide the
	following amounts required to be reported u		
а	Revenues included in Form 990, Part VIII, lir	ne 1	▶ \$
b	Assets included in Form 990, Part X		\$

Part						
3	Using the organization's acquisition, collection items (check all that apply):		her records, chec	k any of the follow	wing that are a sig	nificant use of its
а	☐ Public exhibition		d 🗌 Loan	or exchange prog	rams	
b	Scholarly research					
С	☐ Preservation for future generations	5				
4	Provide a description of the organizat	tion's collections a	and explain how ti	hey further the org	ganization's exemp	pt purpose in Part
	XIV.					
5	During the year, did the organization					
	assets to be sold to raise funds rather					
Part	IV Escrow and Custodial Arra			anizatıon answe	red "Yes" to For	m 990, Part IV,
_	line 9, or reported an amoun					
1a						
	included on Form 990, Part X?					
b	If "Yes," explain the arrangement in Pa	art XIV and comple	ete the following to	able:		
						ount
C	Beginning balance					
đ	Additions during the year			·	-	
e	Distributions during the year .				- + -	
f	Ending balance					□ Vee □ Ne
2a	Did the organization include an amount "Yes," explain the arrangement in Page 1981.		art X, IIIIe 21? .			☐ Yes ☐ No
Par			ation answered	"Ves" to Form 9	190 Part IV line	10
r car	Endowment and Comple	(a) Current year	(b) Prior year	(c) Two years back		
1a	Beginning of year balance	787, 885	649,411			
b	Contributions	89,454	62,063	26,997		
c	Net investment earnings, gains, and	55,151	02,000	20,007		
	losses	5,752	85,449	54,260	(117,105)	
d	Grants or scholarships	0	0	0		
e	Other expenditures for facilities and			-		
	programs	6,322	9,038	o	0	
f	Administrative expenses					· · · · · · · · · ·
g	End of year balance	876,769	787,885	649,411	568.154	
2	Provide the estimated percentage of t	he current year en	d balance (line 1g	, column (a)) held	as:	
а	Board designated or quasi-endowment	nt ▶	4 %			
b	Permanent endowment ▶	96 %				
C	Temporarily restricted endowment ▶	0 %				
_	The percentages in lines 2a, 2b, and 2					
3a	Are there endowment funds not in the	e possession of th	ie organization the	at are held and ac	lministered for the	
	organization by:					Yes No
	(i) unrelated organizations					3a(i) ✓
	(ii) related organizations			· · · · · · ·		3a(ii) ✓
ь 4	If "Yes" to 3a(II), are the related organ Describe in Part XIV the intended use:					3b
Par						
rai	Description of property	(a) Cost or ot			Accumulated	(d) Book value
	Description of property	(investm			lepreciation	(a) Dook Value
1a	Land					
b	Buildings	-				
С	Leasehold improvements	•				
d	Equipment					
e	Other	·			_ : +	
Total.	Add lines 1a through 1e. (Column (d) r	nust equal Form 9	90, Part X, columr	n (B), line 10(c).)	<u> ▶ </u>	

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) Financia	al derivatives		
	-held equity interests		
(3) Other		L.	
(A)			
(B) (C)			
(D)			
(E)			
\ (F)			
(G)			
(H)			
(I)		<u> </u>	
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 12)	71.17	
Part VIII		d. 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)			
	n (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX		art X, line 15.	-
		a) Description	(b) Book value
(1)			
(2)			
(2) (3)			
(2) (3) (4)			
(2) (3) (4) (5)			
(2) (3) (4) (5) (6)			
(2) (3) (4) (5) (6) (7)			
(2) (3) (4) (5) (6) (7) (8)			
(2) (3) (4) (5) (6) (7) (8) (9)			
(2) (3) (4) (5) (6) (7) (8) (9) (10)	lumn (b) must equal Form 990, Part X, c	col. (B) line 15.)	
(2) (3) (4) (5) (6) (7) (8) (9) (10)	lumn (b) must equal Form 990, Part X, o		
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co.			
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co.) Part X 1. (1) Federa	Other Liabilities. See Form 990	, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co.) Part X 1. (1) Federa (2)	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co. Part X 1. (1) Federa (2) (3)	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co. Part X 1. (1) Federa (2) (3) (4)	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co. Part X 1. (1) Federa (2) (3) (4) (5)	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co. Part X 1. (1) Federa (2) (3) (4) (5) (6)	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co) Part X 1. (1) Federa (2) (3) (4) (5) (6) (7)	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co) Part X 1. (1) Federa (2) (3) (4) (5) (6) (7) (8)	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co) Part X 1. (1) Federa (2) (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co. Part X 1. (1) Federa (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Co. Part X 1. (1) Federa (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	Other Liabilities. See Form 990 (a) Description of liability	, Part X, line 25. (b) Book value	

Schedu	le D (Form 990) 2011		Page 4
Par	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial State	ements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	206,944
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	78,224
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	128,720
4	Net unrealized gains (losses) on investments	4	(4,922)
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	(4,258)
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	119,540
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue	er Retur	<u>n</u>
1	Total revenue, gains, and other support per audited financial statements	1	198,707
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	a to accept the co	
а		922)	
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV.)	x 30	
е	Add lines 2a through 2d		1.00
3	Subtract line 2e from line 1	. 3	203,629
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b		,315	
C	Add lines 4a and 4b		3,315
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		206,944
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	. 1	79,167
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1877 J.C.	
a	Donated services and use of facilities		
þ	Prior year adjustments		
C	Other losses		
d	· · · · · · · · · · · · · · · · · · ·	943	
e	Add lines 2a through 2d	 	
3	Subtract line 2e from line 1	. 3	943
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 Other (Describe in Part XIV.)	- 11 1	
b		40	
C	Add lines 4a and 4b	. 4c	78,224
Post	XIV Supplemental Information	·] 3	70,224
		4: Dort IV	lines 1h and 2h:
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 7, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also of		
	dditional information.	ompiete ti	riis part to provide
uny u			
Part 1	(I - line 8 -		
Adius	stments from modified accrual basis to cash basis (audit is on a cash basis)		\$4,258
	······································		
Part 2	(II - line 4b		
Recla	ssification of investment expenses (investment expenses deducted from investment income in audit)		\$6,120
Recla	ssification of cost of sales (cost of sales deducted from sales revenue in Form 990)		(2,805)
	Total		\$3,315

chedule D (Form 990) 2011		Page 5
Part XIV Supplemental Information (continued)		
Part XIII - line 4d		
Reclassification of investment expenses (investment expenses deducted from investment income in audit)	(\$6,120)	
Reclassification of cost of sales (cost of sales deducted from sales revenue in Form 990)	2,805	
Adjustments from modified accrual basis to cash basis (audit is on a cash basis)	4,258	
Total	\$943	
	·	
		

SCHEDULE F · (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Foundation of the Rotary Club of Honolulu

Employer identification number 99-0179742

Par	General Information Form 990, Part IV, line		es Outside t	the United States. Com	plete if the organization ans	swered "Yes" to
1	For grantmakers. Does the assistance, the grantees' eli grants or assistance?	organization gibility for the	grants or as	sistance, and the selection		
2	For grantmakers. Describe assistance outside the Unite		he organizatı	on's procedures for moni	toring the use of its gran	ts and other
3	Activities per Region. (The fo	illowing Part I	line 3 table o	can be duplicated if additio	nal space is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	East Asia and Pacific	0	0	Program services	Building a school	26,000
(2)	East Asia and Pacific	0	0	Grant making	School furniture	3,733
(3)	East Asia and Pacific	0	0	Program services	Orphanage equipment	4,490
(4)	East Asia and Pacific	0	0	Grant making	Tsunami relief	610
(5)	Sub-Saharan Africa	0	0	Grant making	Mosquito nets	2,000
(6)	South Asia	0	0	Grant making	Water project	1,000
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a b						

c Totals (add lines 3a and 3b)

37,833

Page 2

Schedule F (Form 990) 2011

Part II		and Other A line 15, for an an be duplice	Grants and Other Assistance to Organiza Part IV, line 15, for any recipient who receive Part II can be duplicated if additional space	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answere Part IV, line 15, for any recipient who 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.	ss Outside the L 5,000. Check thi	Jnited States. Cons box if no one reci	iplete if the organ pient received mo	Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who 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.	is" to Form 990,
-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region		(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)
£			E Asia & Pacific	Build a school	26,000	26,000 Bank draft	\$20,000	\$20,000 Donated labor	Est. value
8									į
<u>ල</u>									
£									
(2)									
9									
E									
8									
6									
(<u>1</u> 0									
Ξ									
(12)									
(13)									
(14)									
(15)									:
(16)									
84	Enter total nu by the IRS, or	mber of recipie for which the	ent organizations list grantee or counsel h	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	ognized as charitie: 501(c)(3) equivaler	s by the foreign coun	try, recognized as ta	ax-exempt	0
6	Enter total nu	mber of other (Enter total number of other organizations or entities	rties				▲	-

Schedule F (Form 990) 2011

. Page 3

Schedule F (Form 990) 2011

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Part III

Schedule F (Form 990) 2011 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance (10) 14 Ξ Ê (12) 133 (15) (16) (17) (18) 3 ල **£** 3 9 8 <u>6</u>

Scriedi	Lile F (Form 990) 2011	Page 4
Part	IV Foreign Forms	_
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	✓ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	√ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	√ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	 ✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	√ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	☑ No

	_	_	
Par	t۷	1	-

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Schedule F - Part I - line 2 - The Foundation of the Rotary Club of Honolulu monitors expenditures for grants and programs by at least one,
but in most cases more than one, of the following -
(1) Obtaining and reviewing documentation supporting all expenditures
(2) Ensuring that funds are controlled locally by a Rotary Club in the area
(3) Ensuring that funds are controlled locally by an organization in the area that is known by members of the Rotary Club of Honolulu to
be honest and reliable
(4) Choosing collaborating organizations that have a flawless record for ethical operations
Schedule F - Part II - line 1(1) - Materials and assistance for the building of a three-room school in Atuyan, Leyte, Philippines. Funds were
transferred through the Cebu YMCA, a collaborating organization. In addition, 25 Rotarians and friends visited the construction site and
provided hands-on assistance (with an estimated value of \$20,000).

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

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

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

▶ Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

%□ (h) Purpose of grant or assistance Alt. educ/street kids Employer identification number Alt. educ/drop outs Peace video cotest 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. 99-0719742 ✓ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes' Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance . Project materials Project materials Project materials (f) Method of valuation (book, FMV, appraisal, other) . 3,460 Expend. value 6,322 Expend. value 2,760 Expend. value Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. . (e) Amount of non-cash assistance . Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 5,000 5,500 (d) Amount of cash grant Part II can be duplicated if additional space is needed Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance 501(c)(3) 501(c)(3) 501(c)(3) 99-0073528 99-0179392 99-0275429 EIN EIN Foundation of the Rotary Club of Honolulu 1 (a) Name and address of organization 1122 Mapunapuna St, Honolulu HI 310 Pookalani Ave, Honolulu, HI (3) Olelo Community Television (2) Susannah Wesley Com. Ctr. 1117 Kalihi St, Honolulu HI or government (1) WCC - YO! House Name of the organization Part I Part II 6 **3** 3 9 8 6 Ξ 2 <u>®</u>

Schedule I (Form 990) (2011)

Cat No 50055P

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (F	Schedule I (Form 990) (2011)					Page 2
Part III	Grants and Other Assistance to Individual Part III can be duplicated if additional space	viduals in the U	Inited States. Com	plete if the organiz	ation answered "Yes" to	s in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. 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
-						
8						
ო						
4						
ເນ						
9						
7						
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	this part to pro	vide the information	n required in Part I,	line 2, and any other ado	itional information.
Part 1 - Lir	Part 1 - Line 2 - Grants and assistance to organizations in the US	the US are general	ly in connection with	projects determined by	the Rotary Club of Honolulu	are generally in connection with projects determined by the Rotary Club of Honolulu (RCH.) Accordingly, members of
ACH are	KCH are neavily involved in the projects and regularly monitor the related expenditures.	nitor the related ex	penditures.			
Part II - Par	Part II - Part 1(1) - The primary project at Waikıki Community Center - YO! House is the provision of a hot meal to the street kids in Waikiki once a month. In addition, \$5,000 was given	ıty Center - YO! Ho	use is the provision of	f a hot meal to the stre	et kids ın Waikiki once a mon	h. In addition, \$5,000 was given
to WCC to	to WCC to provide alternative schooling for the kids to achieve GED status.	hieve GED status.				
Part II - Pa	Part II - Part 1(2) - The primary project at Sussanah Wesley Community Center is providing assistance to SWCC's program to provide alternative learning to drop-outs from the formal	y Community Cente	er is providing assista	nce to SWCC's prograi	n to provide afternative fearn	ng to drop-outs from the formal
education system.	system.					
Part II - Pai	Part II. Part 1(3). The primary project with Olelo Community Television is the production of a children's video competition on peacemaking. Olelo receives \$5,000 to produce the	ity Television is th	e production of a chilc	Iren's video competitio	n on peacemaking. Olelo rec	ives \$5,000 to produce the

Schedule I (Form 990) (2011)

competition and distribute the product. In addition, RCH has an annual program to recognize the "Peacemaker of the Year."

SCHEDULE O ·(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

Name of the organization

Foundation of the Rotary Club of Honolulu

Employer identification number 99-0179742

Form 990 - Part III - line 4(d) - Other program services of \$28,002 cover 18 community service programs or projects, both
domestic and international.
Form 990 - Part VI - line 6 - The Foundation of the Rotary Club of Honolulu is a corporate entity with members.
Form 990 - Part VI - line 7(a) - Three new members of the Board of Trustees (the governing body) are elected annually by the membership
in general meeting to replace three trustees rotating off the Board.
· · · · · · · · · · · · · · · · · · ·
Form 990 - Part VI - line 7(b) - The membership has the ability to replace the Board of Trustees and, accordingly, has the ability to change
governance decisions by the Board
Form 990 - Part VI - line 8(b) - Foundation of the Rotary Club of Honolulu (FRCH) has no committees that have the ability to act on behalf
of the Board of Trustees.
Form 990 - Part VI - line 11(b) - When the Form 990 and related schedules have been completed, electronic copies are sent to the members
of the Board of Trustees. At the next meeting of the Board, the Form is discussed and changes are considered. The Board then approves
the filing of the Form.
Form 990 - Part VI - line 12(c) - Annually, each member of the Board of Trustees. is required to affirm, in writing, the lack of conflicts
of interest or potential conflicts of interest. Any reported conflicts are discussed by the Board and appropriate action is determined
and implemented
Form 990 - Part VI - line 19 - No documents are made available to the public.
Form 990 - Part VIII - line 7d - Net gain on sale of artwork received in 2006 as a bequest from a non-member.

Form 990 - Part XII - line 1 - Modified accrual method used because pledges received are only recorded when the related funds are received. Form 990 - Part XII - line 1 - Modified accrual method used because pledges received are only recorded when the related funds are received. Form 990 - Part XII - line 2b - The organization's "cash basis" financial statements are audited by an independent accountant. Form 990 - Part XII - line 2c - The Finance Committee (an advisory committee to the Board of Trustees) is responsible for the oversight of	Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Form 990 - Part XII - line 1 - Modified accrual method used because pledges received are only recorded when the related funds are received. Form 990 - Part XII - line 2b - The organization's "cash basis" financial statements are audited by an independent accountant. Form 990 - Part XII - line 2c - The Finance Committee (an advisory committee to the Board of Trustees) is responsible for the oversight of	Name of the organization Foundation of the Rotary Club of Honolulu	
Form 990 - Part XII - line 2b - The organization's "cash basis" financial statements are audited by an independent accountant. Form 990 - Part XII - line 2c - The Finance Committee (an advisory committee to the Board of Trustees) is responsible for the oversight of	Form 990 - Part XI - line 5 - Unrealized loss on investments \$4,923	
Form 990 - Part XII - line 2c - The Finance Committee (an advisory committee to the Board of Trustees) is responsible for the oversight of	Form 990 - Part XII - line 1 - Modified accrual method used because pledges received are on	y recorded when the related funds are received.
	Form 990 - Part XII - line 2b - The organization's "cash basis" financial statements are audite	d by an independent accountant.
the audit of the financial statements and the preparation of the Form 990.	Form 990 - Part XII - line 2c - The Finance Committee (an advisory committee to the Board o	Trustees) is responsible for the oversight of
	the audit of the financial statements and the preparation of the Form 990.	
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.Form **8868**

(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No 1545-1709

• If you	are t	filing for an Automatic 3-Month Extension, filing for an Additional (Not Automatic) 3-M oplete Part II unless you have already been g	onth Exten	sion, complete only P	art II (on page 2 of t	his f	orm).	
a corpo 8868 to Return	onic for ation of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract of the contract	filing (e-file). You can electronically file Form on required to file Form 990-T), or an addition uest an extension of time to file any of the Transfers Associated With Certain Persona). For more details on the electronic filing of the	n 8868 if yo nal (not auto forms listed il Benefit C	u need a 3-month auto omatic) 3-month extens d in Part I or Part II wit Contracts, which must	matic extension of to ion of time. You can h the exception of the be sent to the IRS	me i elec Form	to file (ctronic n 8870 paper	(6 months for cally file Form), Information format (see
A corp Part I o	orati inly	Automatic 3-Month Extension of Time on required to file Form 990-T and reque	sting an a	utomatic 6-month ext	ension—check this			▶ 🗆
		rporations (including 1120-C filers), partnersh ne tax returns.	nips, REMIC		Form 7004 to requenter filer's identifying			
		Name of exempt organization or other filer, see i	nstructions.		Employer identific			
Type o	r	Foundation of the Rotary Club of Honolulu			1 ' '		79742	,
-		Number, street, and room or suite no. If a P O b	ox. see instr	uctions	Social security nu	mbei	(SSN)	
	File by the due date for 2255 Kuhio Avenue, Suite 718							
City, town or post office, state, and ZIP code. For a foreign address, see instructions Honolulu, HI 96815								
Enter ti	he Re	eturn code for the return that this application	is for (file a	<u> </u>	r each return) .			. 0 1
Applic Is For		n	Return Code	Application Is For				Return Code
Form	Form 990 01 Form 990-T (corporation) 07							
Form	Form 990-BL 02 Form 1041-A 08							08
Form	Form 990-EZ 01 Form 4720 09							09
Form	Form 990-PF 04 Form 5227 10							
Form	990-	T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form	990-	T (trust other than above)	06	Form 8870				12
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	If the □ C If the	e tax year entered in line 1 is for less than 12 change in accounting period is application is for Form 990-BL, 990-PF, 99	months, ch		eturn		, 2	0 12 .
		refundable credits. See instructions.				3a	\$	0
	estır	is application is for Form 990-PF, 990-T, mated tax payments made. Include any prior	year overpa	ayment allowed as a cre	edit	3b	\$	0
С		ance due. Subtract line 3b from line 3a. Inclu PS (Electronic Federal Tax Payment System).				3c_	\$	
Caution	n. If v	ou are going to make an electronic fund withdrawa	I with this Fo	orm 8868, see Form 8453-	EO and Form 8879-EO	for r	avmen	nt instructions.

Form 8868	(Rev 1-2012)			Page 2				
• If you a	re filing for an Additional (Not Automatic)	3-Month Exte	nsion, complete only Part II and check th	ns box . ▶ □				
	lly complete Part II if you have already beer							
If you a	re filing for an Automatic 3-Month Extens	ion, complete	only Part I (on page 1)					
Part II			of Time. Only file the original (no copi	es needed).				
				g number, see instructions				
Type or	Name of exempt organization or other filer,	see instructions	Employer identif	fication number (EIN) or				
print								
File by the	Number, street, and room or suite no. If a P	O box, see instr	ructions Social security n	umber (SSN)				
due date for								
filing your return See	City, town or post office, state, and ZIP cod	le For a foreign a	iddress, see instructions					
instructions								
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Enter the	Return code for the return that this applica	tion is for (file a	separate application for each return)					
Applicat	ion	Return	Application	Return				
Is For		Code	Is For	Code				
Form 990)	01						
Form 990)-BL	02	Form 1041-A	08				
Form 990)-EZ	01	Form 4720	09				
Form 990)-PF	04	Form 5227	10				
Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069								
Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12								
	not complete Part II if you were not alread	y granted an au	nomatic 3-month extension on a previous					
• The book	ks are in the care of ▶							
Telephor	ks are in the care of ► ne No. ►	FAX N	No ▶					
If the org	anization does not have an office or place	of business in t	he United States, check this box	▶ 🗆				
If this is f	or a Group Return, enter the organization's	four digit Grou		If this is				
			of the group, check this box	and attach a				
ist with the	e names and EINs of all members the exter	ision is for						
4 I re	quest an additional 3-month extension of ti	me until	, 20					
5 For	calendar year, or other tax year beg	inning	, 20 , and ending	, 20				
6 If th								
Change in accounting period								
7 Sta	te in detail why you need the extension							
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	is application is for Form 990-BL, 990-PF,	990-T, 4720, o						
nonrefundable credits. See instructions.								
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	mated tax payments made. Include any	orior year over		<del></del>				
	ount paid previously with Form 8868.			3b  \$				
	nce due. Subtract line 8b from line 8a Includ		with this form, if required, by using EFTPS					
(Elec	tronic Federal Tax Payment System) See inst	ructions.		3c \$				
	/ Signature and Verifi	cation must	be completed for Part II only.					
nder penali	ties of perjury, I declare that I have examined	this form, include	ding accompanying schedules and statements	s, and to the best of my				
nowledge a	nd belie, it is true, correct, and complete, and th	nat I am authorize	d to prepare this form	$ \uparrow  $ $ \uparrow $				
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gnature ▶	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )	Title ▶	Man - Jones commer, and Date	Form <b>8868</b> (Rev. 1-2012)				
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