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# Form 990

**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)

(except black lung benefit trust or private foundation)

OMB No 1545-0047

2012
Open'to Public

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements Inspection 2012, and ending , 2013 For the 2012 calendar year, or tax year beginning Jul 1 D Employer Identification Number Name of organization Friends of the Library of Hawaii Check if applicable 99-6003670 Address change Number and street (or P O box if mail is not delivered to street addr) Room/suite E Telephone number Name change (808) 536-4174 Initial return 690 Pohukaina Street State ZIP code + 4 City, town or country Terminated 96813-5116 **G** Gross receipts \$ 1,391,946 Amended return Honolulu ΗI H(a) Is this a group return for affiliates? F Name and address of principal officer Yes Application pending H(b) Are all affiliates included? If 'No,' attach a list (see instructions) Yes HI 96813 Roberta Cestare 690 Pohukaina Street Honolulu 527 X 501(c)(3) 4947(a)(1) or Tax-exempt status 501(c) ( ) ◀ (insert no ) H(c) Group exemption number Website: ► N/A X Corporation Association Other P L Year of Formation 1973 M State of legal domicile Form of organization Part I Summary Briefly describe the organization's mission or most significant activities. Assist in maintaining free public libraries in Hawaii and supporting the libraries by securing materials not budgeted, awarding continuing education and scholarship grants and encourage and accept donations Check this box If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line b) 4 <u>16</u> Total number of individuals employed in calendar year 2012 (Part V. line. 5 11 က Total number of volunteers (estimate if necessary) 6 700 2 3 2014 Ō. 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a ō<u>.</u> b Net unrelated business taxable income from Form 990-T, line 34 7b Prior Year **Current Year 427,**785 Contributions and grants (Part VIII, line 1h) 505,162. 18,607. 9 Program service revenue (Part VIII, line 2g) 18,518. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 113,611 10 100,648. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) -48,104.-41,909.11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 511,810. 582,508. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 278,350 118,406. Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 191,892 209,712. 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ▶ 41,251. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 210,882 169,462 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 681,124. 497,580. Revenue less expenses Subtract line 18 from line 12 84,928 -169,314End of Year **Beginning of Current Year**  $5,411,\overline{473}$ . Total assets (Part X, line 16) 5,453,144. Total liabilities (Part X, line 26) 1,909,909. 700,045. 21 Net assets or fund balances Subtract line 21 from line 20 3,501,564 3,753,099. Signature Block Part II Under penalties of perjury.+toclare 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 prepayer (other than officer) is based on all information of which preparer has any knowledge Sign Here Roberta Cestare Type or print name and title Print/Type preparer's name Check self-employed P00031680 Steven T. Fujita **Paid** McEnerney Shimabukuro Preparer kazaki **Use Only** 1100 Ward Ave, 720 Firm's EIN ▶ 99-0316220 Firm's address Suite (808) 523-0462 ΗI 96814-1617 Honolulu May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

TEEA0101 05/09/13

Form 990 (2012)

BAA For Paperwork Reduction Act Notice, see the separate instructions.

	990 (2012) Friends of the Library of Hawaii	99-6	<u>003670</u>	Page 2
Ran	Till Statement of Program Service Accomplishments			
•	Check if Schedule O contains a response to any question in this Part III			
1	Briefly describe the organization's mission			
	Assist in maintaining free public libraries in Hawaii and suppor	ting		
	See Form 990, Page 2, Part III, Line 1 (continued)			
2	Did the organization undertake any significant program services during the year which were not listed on the	ne prior	~-	
	Form 990 or 990-EZ?	·	П	es 🕅 No
	If 'Yes.' describe these new services on Schedule O			ш
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	ces?		res 🕅 No
•	If 'Yes,' describe these changes on Schedule O		□.	K 1.10
4	Describe the organization's program service accomplishments for each of its three largest program service	ac ac mo	ascured h	/ Avnancac
4	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amo	ount of gr	ants and	allocations to
	others, the total expenses, and revenue, if any, for each program service reported.	J		
4 a	(Code ) (Expenses \$ 325,661. including grants of \$ 118,406.) (R	evenue	\$	523,769.)
	The Friends of the Library of Hawaii exists to promote and support			
	Legislature provides funding for the basic needs of libraries, k			
	private support is essential for special needs, growth, and			
	expansion. Impossible to guantify those benefits.			
		~ _	~	
	·			
4 b	(Code ) (Expenses \$ including grants of \$ ) (R	evenue	\$	)
			-	
40	(Code ) (Expenses \$ including grants of \$ ) (R	evenue	ŝ	
			`	
				. – – – – – .
	~			
				. <b></b>
		<b></b>		<b></b>
4	Other program services (Describe in Schedule O )			<del></del>
	(Expenses \$ including grants of \$ ) (Revenue \$			`
Λ.	Total program service expenses ► 325, 661.	<del>_</del> _		
BAA	70tai program service expenses > 323,001.			Form <b>990</b> (2012)
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			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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
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		Х
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		Х
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		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		Х
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	Х	
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	٠,	ا معدد	
а	Did the organization report an amount for land, buildings and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
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	11 b		Х
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	11 c		Х
	I 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	11 d		
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
	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	11 f		х
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		х
	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 and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
t	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	14Ь		х
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		х
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		х
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		х
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	х	
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		х
20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
t	of Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		<u> </u>

Form 990 (2012) Friends of the Library of Hawaii

Part IV | Checklist of Required Schedules (continued)

•		[ ]	res	NO
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	Х	
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	х	
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? <i>If 'Yes,' complete Schedule J</i>	23		х
24 a	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, and 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		х
t	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?	<b>24</b> c		
c	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		х
t	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		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
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
	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		<u>X</u>
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
Ć	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
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		Х
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		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
ŀ	b If 'Yes' to line 35a, 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		Х
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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197  Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	990 (	(2012)

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			<u> </u>
<u>.                                    </u>	Check if Schedule O contains a response to any question in this Part V			
		_	Yes	No
1 a	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 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2 a	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  2 a 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a		X
b	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3 b		
4 a	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)?	4 a		Х
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			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
c	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	5 c		
6 a	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 as charitable contributions?	6 a		х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).	- 00		
	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?	7 a	х	
	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	_ <u>/a</u> 7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file			-
٠	Form 8282?	7с		х
c	If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
ç	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
ł	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h		
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		Х
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9 a		X_
t	Did the organization make a distribution to a donor, donor advisor, or related person?	9Ь		Х
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12			ĺ
ŀ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter			
ā	Gross income from members or shareholders		! 	ł
t	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12 a	Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	]	
t	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		l I	
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?	13 a		
	Note. See the instructions for additional information the organization must report on Schedule O		ĺ	
ŧ	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		1	
(	Enter the amount of reserves on hand		<u> </u>	
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	X
t	olf 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b	\	

99-6003670 Form 990 (2012) Friends of the Library of Hawaii 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 Section A. Governing Body and Management

		J	res	MO					
1:	a 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								
1	<b>b</b> Enter the number of voting members included in line 1a, above, who are independent 1b 16								
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		х					
4	Did the organization make any significant changes to its governing documents			ļ					
	since the prior Form 990 was filed?	4		Х					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х					
6	Did the organization have members or stockholders?	6	Х						
7 :	7 a 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?								
١	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b	Х						
8	the following			_					
	a The governing body?	8a	Х	<u> </u>					
l	<b>b</b> Each committee with authority to act on behalf of the governing body?	8ь	Х	ļ					
	Is there any officer, director or 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		х					
<u>iec</u>	ction B. Policies (This Section B requests information about policies not required by the Internal Rev	<u>enue</u>	_						
			Yes	No					
	a Did the organization have local chapters, branches, or affiliates?	10 a	X	<u> </u>					
	<b>b</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?	10 b	х	Х					
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990									
	a 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	х_	<u> </u>					
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	12 c	х						
	Did the organization have a written whistleblower policy?	13		Х					
14	Did the organization have a written document retention and destruction policy?	14	Х						
	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	15 a	Х	<u> </u>					
	b Other officers of key employees of the organization	15 ь		<u> </u>					
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)								
16	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		х					
	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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b							
Sec	ction C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed Hawaii								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available. Indicate how you make these available. Check all that apply	ılable	for pu	ıblıc					
	Own website X Another's website Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements availathe public during the tax year	ble to							

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Roberta Cestare 690 Pohukaina St. Honolulu HI 96813-5116 (808) 536-4174

# 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

- 1 a 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	n nor any r	elated	org	anız	atio	n com	pen	sated any current office	cer, director, or trustee	•
	(C)									
(A) Name and Title	(B) Average hours per week (list	one box	ess p d a d:	ersor	more than is both an r/trustee)		(D) Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	any hours for related organiza- tions below dotted (Irne)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099 MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) ALLENE SUEMORI	1.00									
PRESIDENT				Х				0.	0.	0.
(2) MARLENE BOOTH	1.00									
VICE-PRESIDENT				Х				0.	0.	0.
(3) KEITH ODA	1.00							-		
SECRETARY		_		Х				0.	0.	0.
(4) TABITHA KAM	1.00									
TREASURER				Х				0.	0.	0.
(5) WANDA ADAMS	1.00	)		]	1					
DIRECTOR	<u></u>	Х						0.	0.	0.
(6) JANE DICKSON	1.00	1								
DIRECTOR	J	Х	L					0.	0.	0.
(7) LISA FURUTA	1.00	Ì								
DIRECTOR	<u></u>	Х						0.	0.	0.
(8) WARREN HAMAMOTO	1.00	l	(	l	l		}			
DIRECTOR	<u> </u>	Х						0.	0.	0.
(9) LYNNAE LEE	1.00									
DIRECTOR	<u> </u>	X	Ĺ					0.	0.	0.
(10) SUSAN LI	1.00									
DIRECTOR	<u> </u>	Х	<u> </u>				L	0.	0.	0.
(11) FRAN MORITA	1.00						1			
DIRECTOR	<u> </u>	Х					L.,	0.	0.	0.
(12) IRIS H OSAKI	1.00		1	1	l	}	1	}		
DIRECTOR	<u> </u>	Х						0.	0.	0.
(13) CAROL SCHAAFSMA	1.00	Į			1					
DIRECTOR		Х					L	0.	0.	0.
(14) KALANI SLOAT	1.00				1					
DIRECTOR	<u> </u>	Χ					<u> </u>	0.	0.	0.

	4	Х							
5	for services rendered to the organization? If 'Yes,' complete Schedule J for such person								
Sec	ction 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	s tax year							
	(A) Name and business address  (B) Description of services	(C) Compens	ation						
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								

	n <b>990</b> (2012) Friends of the Library of F	Hawaii		99-6003670	Page
Par	t VIII Statement of Revenue				
	Check if Schedule O contains a response to any que	estion in this Part VIII  (A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	to Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lns la-lf to Total. Add lines la-lf  2a Copy machines b Pay phones c Affiliates d Annual meeting e  1b 20,14 79,08 1c 79,08 1d 405,93 1e  Business Code 900099 900099 900099	39. 70. 505,162.	17,438. 244. 175. 750.	0. 0. 0.	0. 0. 0.
PROGR	f All other program service revenue g Total. Add lines 2a-2f	▶ 18,607.			
	3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Persona 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)	<b>•</b>	72,761.	0.	0.
OTHER REVENUE	7 a 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)  8 a Gross income from fundraising events (not including \$ 79,083. of contributions reported on line 1c)  See Part IV, line 18  b Less direct expenses  c Net income or (loss) from fundraising events  9 a Gross income from gaming activities  See Part IV, line 19  b Less direct expenses  c Net income or (loss) from gaming activities  See Part IV, line 19  b Less direct expenses  c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns	20,615.	27,887.	0.	20,615
	and allowances  a 271,3  b Less cost of goods sold  c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Cod	<u>51.</u> ► -62,981.	-62,981.	0.	0
	11a Other income 900099	457.	457.	0.	0.

d All other revenue e Total. Add lines 11a-11d

<u>45</u>7

582,508.

56,731

0.

Part IX | Statement of Functional Expenses

	n 501(c)(3) and 501(c)(4) organizations must on the Check if Schedule O contains a re		in this Part IX		j 1
Do no: 7b, 8b	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
a	Grants and other assistance to governments and organizations in the United States See			general expenses	САВСТВСВ
	Part IV, line 21 Grants and other assistance to individuals in	107,687.	107,687.		
2 t	ne United States See Part IV, line 22	10,719.	10,719.		
0	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors, rustees, and key employees	_56,563.	36,766.	14,141.	5,656.
6 C	Compensation not included above, to isqualified persons (as defined under ection 4958(f)(1)) and persons described a section 4958(c)(3)(B)		30,700.	11/111.	
7 (	Other salaries and wages	108,592.	60,070.	35,816.	12,706.
Ο (	Pension plan accruals and contributions include section 401(k) and section 403(b) imployer contributions)	21,904.	13,067.	6,495.	2,342.
9 (	Other employee benefits	6,054.	2,724.	2,119.	1,211.
10 F	Payroll taxes	_16,599.	9,734.	5,019.	1,846.
11 F	ees for services (non-employees)				
a N	flanagement				
b∟	egal				
C A	Accounting	32,488.	19,049.	9,827.	3,612.
	obbying				
e P	rofessional fundraising services See Part IV, line 17				
	nvestment management fees	19,945.	0.	19,945.	0.
	other (If line 11g amt exceeds 10% of line 25, col- mn (A) amt, list line 11g expenses on Sch O)				
	Advertising and promotion	361.	0.	361.	0.
13 (	Office expenses				
14	nformation technology				
15 F	Royalties				
16 (	Occupancy	30,327.	17,782.	9,173.	3,372.
<b>17</b> 7	ravel				
e	Payments of travel or entertainment expenses for any federal, state, or local bublic officials				
19 (	Conferences, conventions, and meetings	542.	0.	542.	0.
<b>20</b>	nterest	545.	0.	545.	0.
<b>21</b> F	Payments to affiliates	5,324.	5,324.	0.	0.
22 [	Depreciation, depletion, and amortization	7,490.	4,392.	2,266.	832.
	nsurance	8,741.	5,125.	2,644.	972.
() ()	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.)				
	Membership	114.	0.	114.	0.
	Supplies	1,994.	1,169.	603.	222.
	Utilities	6,731.	3,947.	2,036.	748.
-	In-kind donations	1,260.	0.	1,260.	0.
e A	All other expenses	53,600.	33,429.	12,439.	7,732.
25 1	Total functional expenses. Add lines 1 through 24e	497,580.	330,984.	125,345.	41,251.
t J	he organization reported in column (B) oint costs from a combined educational campaign and fundraising solicitation check here				
5	SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) (B) End of year Beginning of year 1 279,467. Cash - non-interest-bearing 527.880 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net 4,078 22,500. Loans and other receivables from current and former officers, directors trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other 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) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 8 27.320 9.605. 9 Prepaid expenses and deferred charges 937 123 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a b Less: accumulated depreciation 10 b 62.191 10 c 19,373 12,311. Investments - publicly traded securities 11 4,508,625 4,871,138. Investments - other securities See Part IV, line 11 12 12 Investments - program-related See Part IV, line 11 13 13 Intangible assets 14 14 15 Other assets See Part IV, line 11 15 317,260 250,000. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 5,411,473 <u>5,453,144.</u> Accounts payable and accrued expenses 17 17 236,427 91,453 18 Grants payable 18 Deferred revenue 19 19 31,000 61,766. Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 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 1,546,826. 1,642,482 26 Total liabilities. Add lines 17 through 25 1,909,909 1,700,045. Organizations that follow SFAS 117 (ASC 958), check here ► 🔣 and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 2,694,837 27 2,902,184. Temporarily restricted net assets 302,563 28 346,751 Permanently restricted net assets 29 504,164. 504,164 R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32

BAA

33

Total net assets or fund balances

Total liabilities and net assets/fund balances

5,453,144. Form **990** (2012)

3,753,099.

33

34

564

473

3,501,

411.

-orr	n 990 (2012) Friends of the Library of Hawall	9-6003676	<u> </u>	_ Pa	ge 12			
Pa	rt XI Reconciliation of Net Assets							
	Check if Schedule O contains a response to any question in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1,	_5	82,5	08.			
2	Total expenses (must equal Part IX, column (A), line 25)	2	_4	97,5	80.			
3	Revenue less expenses Subtract line 2 from line 1	3		84,9				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))							
5	Net unrealized gains (losses) on investments	5		01,5				
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9						
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))							
Pa	rt XII Financial Statements and Reporting			53,0				
	Check if Schedule O contains a response to any question in this Part XII							
	Silon was read a software strain and strain			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							
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	]	X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both	ved on a						
	Separate basis Consolidated basis Both consolidated and separate basis				•			
	b Were the organization's financial statements audited by an independent accountant?		2b		X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate						
	Separate basis Consolidated basis Both consolidated and separate basis							
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight o review, or compilation of its financial statements and selection of an independent accountant?	f the audit,	2 c					
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O							
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Audit Act and OMB Circular A-133?	e Sıngle	3 a		x			
	<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired audit	3 b					

BAA

Form 990 (2012)

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

Department of the Treasury Internal Revenue Service

Total

**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

Open to Public

Inspection

Name o	of the	orgar	nization									-	Employer	Identificat	tion number		
Fri	The state of the s											99-60	99-6003670				
Part	<u>: I</u>	Re	ason for Pເ	ıblic	Charity S	tatus	(All organiz	ations	must c	comple	te this	part.)	See II	nstruct	ions.		
The o	rga	nızatı	ion is not a pri	vate f	foundation be	cause	it is (For lines	1 throug	gh 11, ch	neck onl	y one bo	ox)					
1			•				ation of church			section	170(b)(1	)(A)(i).					
2		(					<b>ii).</b> (Attach Sch		•								
3	_	1	•		•		e organization o										
4	L.	J		•	anization ope	rated i	in conjunction v	with a ho	spital de	escribed	ın secti	on 170(	<b>Ь</b> Х1ХАХ	(iii) Ente	er the hosp	tal's	
_			ie, city, and st	_													
5	Ļ	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)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).															
6	_												, ,				
7	K	ın se	ection 170(b)(1	ΙχΑχ	<b>vi).</b> (Comple	te Part					ernment	ai unit d	or trom t	ne genei	rai public d	escrib	ea
8	┝	•	-				<b>I(b)(1)(A)(vi).</b> (6 re than 33-1/3%				tions m	ambarak	un food	and arose	rogointe fre	m aatı	vitios
9	<u></u>	relat unre	ed to its exemn	t func taxabl	ctions — subje	ect to co	ertain exception on 511 tax) from	s and (2	no mor	e than 3	3.1/3% c	of its sur	nort from	n aross ii	ovestment i	ncome	bns e
10	L		•	~	•		clusively to tes	•		-			•				
11	An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 — Non-functionally integrated																
е		¹ othe	thecking this b than foundat ion 509(a)(2)	ox, I d	certify that th nanagers and	e orga other	nization is not than one or mo	controlle ore public	d directly	y or indi orted or	rectly by ganization	one or	r more d cribed in	squalifie section	ed persons 509(a)(1)	or	
f		If th	, , , ,	recei	ved a writter	deter	mination from t	he IRS ti	hat is a	Type I,	Type II o	r Type	III suppo	rtıng org	anization,		
g		Sinc	e August 17, 2	2006,	has the orga	nızatıc	on accepted any	y gift or	contribu	tion fror	n any of	the foll	lowing po	ersons?		<b>X</b>	T
		(i)					ntrols, either al		ogether v	with per	sons de:	scribed	ın (ıı) an	ıd (III)	11 g (i)	Yes	No
		(ii)	A family mei	nber	of a person of	lescrib	ed in (i) above	?							11 g (ii)		
		(iii)	A 35% contr	olled	entity of a pe	rson d	lescribed in (i)	or (II) ab	ove?						11 g (in)		┢
h							supported org								119(11)	l	Ц
		(i) Na	ame of supported organization		(ii) EIN		(iii) Type of orga (described on li above or IRC s (see instruct	nes 1 9 section	(iv) Is organiza column (i) your good docur	ation in ) listed in verning	(v) Did yo the organi column (i) supp	zation in of your	(vi) le organiza colun organize U S	ation เก าก <b>(i)</b> d in the	(vii) Amour suļ	t of moi port	netary
									Yes	No	Yes	No	Yes	No			
								•									
<u>(A)</u>				-					<del> </del>								
(B)												1					
(C)									<u> </u>			<del> </del>	<u> </u>			···-	
<u>(D)</u>						_											
(E)																	

# 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.)

Sec	tion A. Public Support						
Cale: begi:	ndar year (or fiscal year nning in) ►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')	320,346.	281,443.	393,442.	427,785.	505,162.	1,928,178.
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	36,000.	36,000.	36,000.	36,000.	36,000.	180,000.
4	Total. Add lines 1 through 3	356,346.	317,443.	429,442.	463,785.	541,162.	2,108,178.
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)				·		33,114.
6	Public support. Subtract line 5 from line 4						2,075,064.
Sec	tion B. Total Support		·				
	ndar year (or fiscal year nning in) ►	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
7	Amounts from line 4	356,346.	317,443.	429,442.	463,785.	541,162.	2,108,178.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	94,033.	60,175.	77,108.	67,313.	72,761.	371,390.
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)	164,841.	73,772.	<b>~</b> 5,182.	-48,505.	-42,366.	142,560.
11	Total support. Add lines 7 through 10						2,622,128.
12	Gross receipts from related activi	ties, etc (see instr	uctions)			12	104,218.
13	First five years. If the Form 990 organization, check this box and		tion's first, second	, third, fourth, or t	fifth tax year as a	section 501(c)(3)	▶ []
Sec	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 20			11, column (f))		14	<u>79.14%</u>
15	Public support percentage from 2	2011 Schedule A, F	Part II, line 14			15	<u>69.92</u> %
16 a	a 33-1/3% support test — 2012. If and stop here. The organization				the line 14 is 33-	1/3% or more, ch	eck this box
Ł	33-1/3% support test — 2011. If the and stop here. The organization	he organization did qualifies as a publ	d not check a box licly supported org	on line 13 or 16a, anization	, and line 15 is 33	-1/3% or more, ch	neck this box
17 a	10%-facts-and-circumstances te or more, and if the organization r the organization meets the 'facts	neets the 'facts-ar	nď-circumstances'	test, check this be	ox and stop here.	Explain in Part IV	/ how
	10%-facts-and-circumstances te or more, and if the organization r organization meets the 'facts-and	meets the 'facts-ar I-circumstances' te	nd-circumstances' est. The organizati	test, check this bi on qualifies as a	ox and <b>stop here.</b> publicly supported	Explain in Part IV Lorganization	/ how the ▶ □
18	Private foundation. If the organiz	ation did not chec	k a box on line 13	, 16a, 16b, 17a, c	or 1/b, check this	box and see instr	uctions

٠.

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)

Sec	tion A. Public Support	., ,		<u>-</u>			
Calen	dar year (or fiscal yr beginning in)	(a) 2008	<b>(b)</b> 2009	(c) 2010	(d) 2011	<b>(e)</b> 2012	(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						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the						
	organization without charge				<u> </u>		
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	a 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					ļ	
c	: Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)	•					
Sec	tion B. Total Support				<u> </u>		
Calen	dar year (or fiscal yr beginning in) 🟲	(a) 2008	<b>(b)</b> 2009	<b>(c)</b> 2010	<b>(d)</b> 2011	<b>(e)</b> 2012	(f) Total
9	Amounts from line 6						
	dross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources of Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b  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)						
	Total support. (Add Ins 9, 10c, 11, and 12)						
14	First five years. If the Form 990 organization, check this box and	s for the organiza stop here		l, third, fourth, or	fifth tax year as a	section 501(c)(3)	▶ □
	tion C. Computation of Pu						
15	Public support percentage for 20	12 (line 8, column	n (f) divided by line	13, column (f))		15	96
16	Public support percentage from 2	2011 Schedule A,	Part III, line 15			16	96
Sec	tion D. Computation of Inv			<del></del>			<del></del>
17	Investment income percentage for				mn (f))	17	8
18	Investment income percentage fr	•		=		18	8
	a 33-1/3% support tests — 2012. If is not more than 33-1/3%, check	the organization	did not check the t	oox on line 14, ai	nd line 15 is more s a publicly suppoi	than 33-1/3%, and	<u> </u>
t	33-1/3% support tests — 2011. If line 18 is not more than 33-1/3%	the organization	did not check a bo	x on line 14 or lii	ne 19a, and line 16	s is more than 33-	1/3%, and ≥
20	Private foundation. If the organiz		•	-		•	- □

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).
ther Income Part II, Line 10
escription: Net income (loss) from fundraising
008: 163008.
009: 80172.
<u>010: 18364.</u>
011: 24373.
012: 20615.
escription: Net income (loss) from sale of books
008: 1833.
009: -6400.
010: -23546.
011: -72878.
012: -62981.
·
~

Schedule A (Form 990 or 990-EZ) 2012 Friends of the Library of Hawaii 99-6003670

Page 4

## SCHEDULE D (Form 990)

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 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

:Open to Public Inspection Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

Friends of the Library of Hawaii 99-6003670 Rartil 文 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 Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year 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 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? Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 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 2 a 2 b **b** Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2 c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 24 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ►\$ 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)? lYes In Part XIII, 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 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 XIII, 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

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 Maintai	ining Conections	OI AIL, HISTOR	icai i i casures, o	Julei Jilliai ASS	era (contint	ieu)
'3 Using the organization's acquisition items (check all that apply)	on, accession, and oth	ner records, check	any of the following	that are a significant use	of its collection	n
a Public exhibition		<b>d</b> Loan or	exchange programs			
<b>b</b> Scholarly research		e Other				
c Preservation for future genera	ations					
4 Provide a description of the organ Part XIII	uzation's collections a	nd explain how th	ey further the organi	zation's exempt purpose	ın	
5 During the year, did the organizat to be sold to raise funds rather the	an to be maintained a	s part of the orga	nization's collection?		Yes	No
Part*IV Escrowand Custodial A reported an amount or			ganızatıon answei	ed 'Yes' to Form 990, ———————	Part IV, line	:9, or 
1 a Is the organization an agent, trust on Form 990, Part X?	tee, custodian, or othe	er intermediary for	contributions or other	er assets not included	Yes	No
<b>b</b> If 'Yes,' explain the arrangement in	in Part XIII and compl	ete the following t	table	•	<u> </u>	_
, ,	·	J			Amount	
c Beginning balance				1 c		
d Additions during the year				1 d		
e Distributions during the year				1 e		
f Ending balance				1 f		
2 a Did the organization include an ar	mount on Form 990, F	Part X, line 21?			Yes	No
<b>b</b> If 'Yes,' explain the arrangement	in Part XIII Check hei	re if the explantion	n has been provided	n Part XIII	_ [	
<del></del>						
Part:V Endowment Funds. C		ganization ans				
	(a) Current	(b) Prior year	(c) Two years	(d) Three years	(e) Four yea	
1 a Beginning of year balance	3,082,112.	3,120,48	6. 2,608,43	36. 2,354,728.	2,785	<u>,978.</u>
<b>b</b> Contributions						
c Net investment earnings, gains, and losses	241,360.	-11,47	4. 538,55	280,708.	-400	,125.
d Grants or scholarships	119,350.	26,90			+	,125.
e Other expenditures for facilities and programs	67,299.					
f Administrative expenses	-	<del></del> -				
g End of year balance	3,136,823.	3,082,11	2. 3,120,48	6. 2,608,436.	2,354	,728.
2 Provide the estimated percentage	of the current year e	nd balance (line 1	g, column (a)) held a	is		
a Board designated or quasi-endow	ment ► _ 73	.00%				
<b>b</b> Permanent endowment ►	16.00 %					
c Temporarily restricted endowmen	t •11.0	<u>0</u> %				
The percentages in lines 2a, 2b, a	and 2c should equal 1	00%				
3 a Are there endowment funds not in	n the possession of th	e organization tha	it are held and admin	istered for the		
organization by.	•	. <b>3</b>			Yes	No
(i) unrelated organizations					3a(i)	X
(ii) related organizations					3a(ii)	X
<b>b</b> If 'Yes' to 3a(II), are the related o	~	•			3b	<u></u>
4 Describe in Part XIII the intended						
Part VI Land, Buildings, and					<del> </del>	·
Description of property		t or other basis evestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	alue
1 a Land	<u> </u>			1		
<b>b</b> Buildings	<u> </u>		·	<u> </u>		
c Leasehold improvements						
<b>d</b> Equipment	<u></u>		74,502.	62,191.	12	,311.
e Other				<u> </u>		
Total. Add lines 1a through 1e (Column	n (d) must equal Forn	n 990, Part X, colu	ımn (B), line 10(c).)	▶		,311.
BAA				Sched	ule D (Form 9	90) 2012

Schedule <b>D</b> (Form 990) 2012 Friends of the Libr	ary of Hawaii	99-600	3670 Page 3
Part VII Investments - Other Securities. See F	orm 990, Part X, I	ine 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation end-of-year market	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			<del></del>
(F)			
(G)			
(H)			
(1)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)	000 Dord V 1	12	
Part VIII Investments - Program Related. See F		(c) Method of valuation.	Coot or
(a) Description of investment type	(b) Book value	end-of-year market	
(1)			
(2)			
(3)		<del></del>	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)		···	
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)			<del></del>
Part IX Other Assets. See Form 990, Part X, In		···	455
(a) Desc	<del></del>		(b) Book value
(1) Bank of HI - Certificate of Deposi	t (permanently	/ restricted)	250,000.
(2) Advances (3)			0.
(4)			
(5)	<del></del>		
(6)	<del></del>		
(7)		<del></del>	<del></del>
(8)	-		
(9)			
(10)			<del></del>
Total. (Column (b) must equal Form 990, Part X, column (B),	line 15 )	<b>-</b>	250,000.
Part X Other Liabilities. See Form 990, Part X			
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2) Agency obligations	1,539,888	3.	
(3) Capital lease obligations	6,93	3 <u>.</u>	
(4)			
(5)			
(6)	<del></del>	_	
(7)		_	
(8)		_	
(9)		_	
(10)		_	
(11)		_	
	1,546,82		<u> </u>
2. FIN 48 (ASC 740) Footnote In Part XIII, provide the text of the footnote to	ne organization's financial s	ialements that reports the organization's hability	ioi uncertain tax positions

Schedule <b>D</b> (Form 990) 2012 Friends of the Library of Hawaii 99	9-6003670 Page
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn
.1 Total revenue, gains, and other support per audited financial statements	1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	
a Net unrealized gains on investments	_
b Donated services and use of facilities 2b	_}
c Recoveries of prior year grants	
d Other (Describe in Part XIII )	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
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	_
b Other (Describe in Part XIII )	_
c Add lines 4a and 4b	4 c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5
Part XII   Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return
1 Total expenses and losses per audited financial statements	1
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 2 b	]
c Other losses 2c	
d Other (Describe in Part XIII.)	
e Add lines 2a through 2d	2 e
3 Subtract line 2e from line 1	3
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	_
b Other (Describe in Part XIII )	-] - ]
c Add lines 4a and 4b	4 c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  Part XIII Supplemental Information	3
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, I line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any	lines 1b and 2b, Part V, additional information
and 1, 1 art 7, mile 2, 1 art 71, miles 2a and 16, and 1 art 711, miles 2a and 16. 7100 complete and part to provide any	
Pt V Line 4 1- Provides scholarships for Hawaii residents	
	1
pursuing a Masters of Library Science degree at the	University
a.E. Marra del	
of Hawaii.	
2- Provides funds for administrative and operating	0700000
2- Provides lunds for administrative and operating	expenses
and/or Organization's objectives	
and/or organization's objectives	
3- Provides funds for literacy training	
or the Oranziation's principal purpose.	
BAA	Schedule <b>D</b> (Form 990) 2012

Schedule D (Form 990) 2012 Friends of the Library of Hawaii	<u>99-60</u> 03670	Page 5
Schedule D (Form 990) 2012 Friends of the Library of Hawaii PartXIII: Supplemental Information (continued)		
•		
*		~
	~	

# SCHEDULE G (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

r Gaming Activities 2012

Department of the Treasury Internal Revenue Service 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.

Openator Rublic

OMB No 1545-0047

lame of the organization						Employer identific	ation number
Friends of the Library of	f Hawaii					99-600367	0
Partila Fundraising Activities. Compl Form 990-EZ filers are not req		nization an ete this pa	swered 'Ye	es' to Form 990, Part IV	/, line 17	7	
1 Indicate whether the organization ra							
a Mail solicitations			е	Solicitation of non-	governm	nent grants	
b Internet and email solicitations			f	Solicitation of gove	rnment	grants	
c Phone solicitations			g	H		-	
d  In-person solicitations			9	L.J oposiar ranarassing	, 010.110		
2 a Did the organization have a written employees listed in Form 990, Part b If 'Yes,' list the ten highest paid ind							
compensated at least \$5,000 by the	organization						
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(III) Did have custod of contr	fundraiser ly or control ibutions?	(iv) Gross receipts from activity	(or r	nount paid to retained by) siser listed in olumn <b>(i)</b>	(vi) Amount paid to (or retained by) organization
		Yes	No	=			
1							
2							
3							
4							
5							
6							
7		,					
8							
9							
10							
	L .=		<b>.</b>				
List all states in which the organization or licensing	ition is register	ed or licen	sed to soli	cit contributions or has	been no	otified it is exem	pt from registration
		<b></b>					<b>_</b>
	<b></b>				_ <b></b> .	<b> \</b>	
			<del>_</del> _				

Sched	ule <b>G</b> (Form 990 or 990-EZ) 2012 Friends	of the Librar	ry of Hawaii	99-60	03670 Page <b>2</b>
Part	Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts growth.	event contributions	nswered 'Yes' to Fo s and gross income	orm 990, Part IV, III e on Form 990-EZ,	ne 18, or reported lines 1 and 6b.
R		(a) Event #1  Golf Tournament (event type)	(b) Event #2	(c) Other events	(d) Total events (add column (a) through column (c))

			(a) Event #1 Golf Tournament	<b>(b)</b> Event #2	(c) Other events	(d) Total events (add column (a) through column (c))
R			(event type)	(event type)	(total number)	unough column (c)
REVENUE	1	Gross receipts	188,631.			188,631.
E	2	Less Charitable contributions	79,083.	· · · · · · · · · · · · · · · · · · ·		79,083.
	3	Gross income (line 1 minus line 2)	109,548.			109,548.
	4	Cash prizes				
n	5	Noncash prizes	16,177.			16,177.
DIRECT	6	Rent/facility costs				
	7	Food and beverages	19,287.			19,287.
X P	8	Entertainment				
EXPENSES	9	Other direct expenses	53,469.			53,469.
S	10	Direct expense summary Add lines 4 thro	ough 9 in column (d)		•	88,933.
	11	Net income summary Combine line 3, co	lumn (d), and line 10		<b>•</b>	20,615.
Par	t III	Gaming. Complete if the organiza	ition answered 'Ye:	s' to Form 990, Par	t IV, line 19, or rep	orted more than
	r	\$15,000 on Form 990-EZ, line 6a.				
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
Ü E	1	Gross revenue				
=	2	Cash prizes				
DIRE NSES	3	Non-cash prizes				
C S T E S	4	Rent/facility costs				
	5	Other direct expenses		_		
	6	Volunteer labor	Yes %	Yes %	Yes %	
	7	Direct expense summary Add lines 2 thro	ough 5 in column (d)		•	
	8	Net gaming income summary Combine In	nes 1, column (d) and I	ine 7	-	
	a Is ti	er the state(s) in which the organization op ne organization licensed to operate gaming lo,' explain	activities in each of the	ese states?		Yes No
		e any of the organization's gaming license	s revoked, suspended o	_	tax year?	Yes No

SCHE	edule G (Form 990 of 990-EZ) 2012 Friends of the Library of Hawaii 99-	0003	670	raye s
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 administer charitable gaming?	to	Yes	No
13	Indicate the percentage of gaming activity operated in	1		
		13 a		용
t	An outside facility	13Ь		8
14	Enter the name and address of the person who prepares the organization's gaming/special events books and reco	ords		
	Name •			
	Address •	. – – –		
t	a Does the organization have a contact with a third party from whom the organization receives gaming revenue?  If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the of gaming revenue retained by the third party \$   If 'Yes,' enter name and address of the third party	amouni	Yes	No
	Name •			
	Address •	. – – -		
16	Gaming manager information:			
	Name •	·		
	Gaming manager compensation * \$			
	Description of services provided	- <b>-</b> -		
	Director/officer Employee Independent contractor			
17	•			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain to state gaming license?		Yes	No
•	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spen organization's own exempt activities during the tax year \$	t in the	:	
Pa	אלאל Supplemental Information. Complete this part to provide the explanations required be columns (ווו) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applical this part to provide any additional information (see instructions).	y Par ole. A	t I, line 2 Iso comp	2b, olete
			<del>-</del>	
				<del></del>
		——		
	<del></del>		<del></del>	
				_

# SCHEDULE 1 (Form 990)

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.

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0	)
2	

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

99-6003670

**Employer identification number** 

**≗** □

X Yes

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? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Friends of the Library of Hawaii
Parl | General Information on Grants and Assistance

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. 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) Hawaii State Library Syst	99-0277716	State Library	52,983.				Sch I, p.2
EV Syst.	99-0277716	State Library	28,750.			:	Sch I, p 2
ry <u>Syst.</u>	99-0277716	State Library	6,300.				Sch I, p 2
						i	
(5)							
(6)							
Ω							
(8)							
2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations listed in the line 1 table	) and government one line	suoii	listed in the line 1 table			<b>A A</b>	1

Schedule I (Form 990) (2012)

TEEA3901 11/30/12

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

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. 99-6003670 Friends of the Library of Hawaii

Schedule I (Form 990) (2012)

Part III

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other N/A N/A <u>- Librarians receiving discretionary funds are required to annually submit</u> . Various grants provided to the libraries for the support of activities. Method of valuation (book, FMV, appraisal, other) \_Support\_for\_various\_reading\_programs\_provided\_by\_the\_library\_system. <u>-Grant and scholarships applications are reviewed by a committee</u> \_accounting,\_supporting\_its\_use\_of\_the\_funds\_for\_its\_library. N/A 0. N/A € --and submitted\_to\_the board\_of\_directors\_for\_approval. (d) Amount of non-cash assistance 000'6 1,718 (c) Amount of cash grant \_\_Matching\_funds\_for\_USDA\_grant\_\_ (b) Number of recipients additional information (a) Type of grant or assistance College Scholarships Continuing Education Pt\_I\_Line\_2\_ Pt\_I\_Line\_2\_ Pt\_I\_Line\_2\_ Part III Part III Part IV 0 2 m 4 9

Schedule I (Form 990) (2012)

BAA

# SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Noncash Contributions**

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545 0047

Open To Public Inspection

Employer identification number

Friends of the Library of Hawaii 199-6003670								
Pa								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	<b>(d)</b> od of d contrib	etermını	ng nounts
1	Art — Works of art			ļ.,	<u> </u>			
2	Art — Historical treasures							
3	Art - Fractional interests							
4	Books and publications	Х		274,570.	Retai]	sa.	les	
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution — Historic structures							
14	Qualified conservation contribution — Other							
15	Real estate – Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							•
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts			1		•		
23	Scientific specimens							
24	Archeological artifacts		. <u>-</u> .					
25	Other • ()		=					
26	Other • ()							
27	Other ► (						•	
28	Other► (							
29	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Dones			ons for which the	29			
							Yes	No
20.	During the year, did the organization receive by co	antribution an	w proporty reported in	Part Lines 1,28 that it	must			
301	hold for at least three years from the date of the in purposes for the entire holding period?	nitial contribu	ition, and which is not	required to be used for	exempt	30 a		Х
ı	If 'Yes,' describe the arrangement in Part II							
31	Does the organization have a gift acceptance police	cy that requir	es the review of any n	on-standard contribution	ıs?	31		Х
32	Does the organization hire or use third parties or r noncash contributions?	elated organ	izations to solicit, prod	cess, or sell		32 a	х	
ı	If 'Yes,' describe in Part II							
33	If the organization did not report an amount in coli	umn (c) for a	type of property for w	hich column (a) is checl	ked,			
	describe in Part II							

Schedule M (Form 990) 2012 Friends of the Library of Hawaii	99-6003670	Page 2
Rartill   Supplemental Information. Complete this part to provide the information required be and whether the organization is reporting in Part I, column (b), the number of cont received, or a combination of both. Also complete this part for any additional in	y Part I, lines 30b, 32t ributions, the number nformation.	o, and 33, r of items
Pt I Line 32b Organization has an arrangement with Amazon.com	to list	. <b></b>
their book donation. Upon the sale of the book	s, Amazon.com	
will take a commission from the sale.		
` 		. <del></del>
		. – – – – .
	. <b></b>	
	·	
	· <del></del>	

# SCHEQULE 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

Open to Public Inspection

Name of the organization		Employer identification number
Friends of the Libr	cary of Hawaii	99-6003670
Pt_VI, Line_11bT	he final Form 990 is submitted to the organizati	on's Executive Director
a	nd/or Treasurer for review and approval before	filing with the IRS.
Pt_VI, Line_12cT	he board members are asked to sign a form, disclosing	ng conflicts of interest.
Pt_VI, Line 15a E	xecutive director's compensation is reviewed as	nd
a	pproved by the board of directors.	
Pt_VI,_Line_15bT	here are no other key employees of the organiza	ation.
Pt_VI,_Line_19F	inancial statements are available upon request	:
Pt_VI,_Line_60	rganization consists of members.	
Pt_VI, Line_7a0	rganization holds annual meetings to elect off:	icers
a	nd directors by the members.	
Pt_VI,_Line_7bD	ecisions are presented to the members at the an	nnual
<u>m</u>	eeting for their review and comment.	
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# Form **4562**

# **Depreciation and Amortization** (Including Information on Listed Property)

► Attach to your tax return. ► See separate instructions.

OMB No 1545 0172

2012

Name(s) shown on return

Department of the Treasury Internal Revenue Service (99)

Attachment Sequence No 179

Identifying number

Friend	ds of the Libra	ry of Hawa:	ii				99-	6003670
	•							
Part I	990 / Form 990E		Property Under Sec	tion 179				
ranti	Note: If you have an	v listed property.	complete Part V before	non 179 ou complete Pai	rt I			
1 Max	umum amount (see inst						1	_
_	•	•	ervice (see instructions)				2	
_			reduction in limitation (	see instructions)			3	
_		· · ·	ne 2 If zero or less, ent				4	
	lar limitation for tax yea arately, see instructions		from line 1 If zero or les	s, enter -0- If m	arried filing		5	
6		Description of property	·	(b) Cost (business	use only) (	C) Elected cost	<del></del>	
			·					
	-							
7 List	ed property Enter the a	mount from line 2	9		7			
			dd amounts in column (c)	, lines 6 and 7			8	
	itative deduction Enter						9	
	•		3 of your 2011 Form 456				10	
			r of business income (no	•	•	instrs)	11	
			and 10, but do not enter dd lines 9 and 10, less li		13		12	<del></del>
			property Instead, use Pa					
Part II			ce and Other Depre		t include listed	property )	(See in	structions )
								structions )
14 Spe	ecial depreciation allowa year (see instructions)	ince for qualified p	property (other than lister	property) place	a in service au	ring the	14	
	perty subject to section	168(f)(1) election					15	<del></del>
	er depreciation (including						16	7,490
Part III			nclude listed property ) (S	See instructions )	· · · · · · · · · · · · · · · · · · ·		<u>'                                     </u>	<u></u>
L			Sectio					
17 MA	CRS deductions for asse	ets placed in servi	ce in tax years beginning	before 2012			17	·
18 If ye ass	ou are electing to group et accounts, check here	any assets placed	d in service during the ta	x year into one c	or more genera	1 ▶ □		
			in Service During 2012 T				ystem	
Cla	(a) essification of property	(b) Month and year placed in service	(C) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method		(g) Depreciation deduction
<b>19 a</b> 3-y	ear property			·				
	ear property							
c 7-y	ear property	1						
	year property							
e 15-	year property							<del></del>
	year property	]			1			
<b>g</b> 25-	year property	l		25 yrs		S/L		
h Res	sidential rental			27.5 yrs	MM	S/L		
pro	perty			27.5 yrs	MM	S/L		
i Nor	residential real			39 yrs	MM	S/L		
pro	perty				MM	S/L		
		Assets Placed in	Service During 2012 Ta	x Year Using the	Alternative D	epreciation	Systen	n
<b>20 a</b> Cla						S/L		
<b>b</b> 12.		<u> </u>		12 yrs		S/L		
c 40-		l		40 yrs	MM	S/L		
Part IV	Summary (See in	structions )						

23 For assets shown above and placed in service during the current year, enter

Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions

7,490.

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Form **4562** (2012) 99-6003670 Page 2 Friends of the Library of Hawaii Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable Section A - Depreciation and Other Information (Caution: See the Instructions for limits for passenger automobiles.) 24 a Do you have evidence to support the business/investment use claimed? No 24b If 'Yes,' is the evidence written? No Yes Yes (d) (a) (e) (f) (g) (h) (i) (c) Type of property Elected Cost or Basis for depreciation Method/ Depreciation Recovery Date placed Rusiness. nvestment deduction section 179 (list vehicles first) other basis (business/investment Convention in service percentage use only) cost Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 Property used more than 50% in a qualified business use Property used 50% or less in a qualified business use 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1 Section B - Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other 'more than 5% owner,' or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) Vehicle 1 (b) (c) Vehicle 3 (d) **(e)** Vehicle 5 (f) Vehicle 6 Total business/investment miles driven Vehicle 2 Vehicle 4 during the year (do not include commuting miles) Total commuting miles driven during the year Total other personal (noncommuting) miles driven Total miles driven during the year. Add 33 lines 30 through 32 Yes No Yes Nο Yes No Yes No Yes No Yes No Was the vehicle available for personal use during off-duty hours? Was the vehicle used primarily by a more than 5% owner or related person Is another vehicle available for personal use? Section C — Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) Yes No Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners Do you treat all use of vehicles by employees as personal use? Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.) **Note:** If your answer to 37, 38, 39, 40, or 41 is 'Yes,' do not complete Section B for the covered vehicles

Par	t VI Amortization					
	(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42	Amortization of costs that begins during you	ur 2012 tax year (see	instructions)			
43	Amortization of costs that began before you	ur 2012 tax year			43	
44	Total. Add amounts in column (f) See the	instructions for where	to report		44	

Schedule O (Form 990), Supplemental Information to Form 990

# Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

the libraries by securing materials not budgeted, awarding continuing education and scholarship grants and encourage and accept donations

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Volunteer appreciation	1,416.	0.	1,416.	0.
General excise tax	16,545.	11,615.	0.	4,930.
Postage	1,286.	754.	389.	143.
Repairs & Maintenance	3,196.	1,874.	967.	355.
Printing & Publications	3,919.	2,298.	1,185.	436.
Other professional fees	13,716.	8,042.	4,149.	1,525.
Library of the Year	7,037.	7,037.	0.	0.
Dues & Subscriptions	480.	282.	145.	53.
Board and Trustee meetings	1,667.	0.	1,667.	0.
Transportation	2,605.	1,527.	788.	290.
Miscellaneous	1,733.		1,733.	