

Form **990**

Department of the Treasury  
Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**  
Open to Public Inspection

**A** For the **2022** calendar year, or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

- B Check if applicable:
- Address change
- Name change
- Initial return
- Final return/terminated
- Amended return
- Application pending

<b>C</b> Name of organization <b>ASSISTANCE DOGS OF HAWAII</b>		<b>D</b> Employer identification number <b>99-0353694</b>
Doing business as		<b>E</b> Telephone number <b>808-298-0167</b>
Number and street (or P.O. box if mail is not delivered to street address) <b>P.O. BOX 1803</b>		<b>G</b> Gross receipts \$ <b>1,383,283</b>
Room/suite	City or town, state or province, country, and ZIP or foreign postal code <b>MAKAWAO HI 96768</b>	

<b>F</b> Name and address of principal officer: <b>WILLIAM MAURER, PE</b> <b>P.O. BOX 1803</b> <b>MAKAWAO HI 96768</b>	<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No

If "No," attach a list. See instructions

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) (insert no.)  4947(a)(1) or  527

**J** Website: **WWW.ASSISTANCEDOGSHAWAII.ORG** **H(c)** Group exemption number

**K** Form of organization:  Corporation  Trust  Association  Other **L** Year of formation: **2001** **M** State of legal domicile: **HI**

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>SEE SCHEDULE O</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	<b>5</b>	
	<b>4</b>	<b>4</b>	
	<b>5</b>	<b>11</b>	
	<b>6</b>	<b>50</b>	
	<b>7a</b>	<b>0</b>	
<b>7b</b>	<b>0</b>		
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	Prior Year <b>961,385</b>	Current Year <b>1,226,664</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>2,525</b>	<b>500</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>100,301</b>	<b>24,899</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>4,607</b>	<b>9,647</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>1,068,818</b>	<b>1,261,710</b>
	<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)			<b>0</b>
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		<b>406,696</b>	<b>379,776</b>
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)			<b>0</b>
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>47,120</b>			
<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		<b>556,608</b>	<b>576,279</b>
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>963,304</b>	<b>956,055</b>	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>105,514</b>	<b>305,655</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	Beginning of Current Year <b>5,312,201</b>	End of Year <b>5,390,641</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>45,428</b>	<b>23,200</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>5,266,773</b>	<b>5,367,441</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer <b>MAUREEN MAURER</b>	Date
	Type or print name and title <b>EXECUTIVE DIRECTOR</b>	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name <b>ROBERT S. KAWAHARA</b>	Preparer's signature <b>ROBERT S. KAWAHARA</b>	Date <b>11/21/23</b>	Check <input type="checkbox"/> if self-employed	PTIN <b>P00643383</b>	
	Firm's name <b>KAWAHARA + HU LLP</b>	Firm's EIN <b>84-4041433</b>				
	Firm's address <b>77 HOOKELE ST FL 3 KAHULUI, HI 96732</b>	Phone no. <b>808-244-5531</b>				

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

[ ] Yes [X] No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

[ ] Yes [X] No

If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 783,738 including grants of \$ ) (Revenue \$ 500 )

PLACED SERVICE DOGS WITH PEOPLE WITH PHYSICAL DISABILITIES, HOSPITAL FACILITY DOGS AND COURTHOUSE DOGS. CONDUCTED THERAPY DOG PROGRAM FOR LOCAL HOSPITALS AND NURSING HOMES, A PROGRAM FOR VETERANS, THE READ PROGRAM FOR CHILDREN AND THE WORKPLACE READINESS PROGRAM FOR HIGH SCHOOL STUDENTS WITH SPECIAL NEEDS. CONDUCTED A CAMP FOR CHILDREN WITH DISABILITIES.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

N/A

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

N/A

4d Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 783,738

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	<b>Section 501(c)(3) organizations.</b> 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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		X
c	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X

**Part IV Checklist of Required Schedules (continued)**

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> 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>		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	X	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	X	

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

Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

1a	13
1b	0

<b>Part V Statements Regarding Other IRS Filings and Tax Compliance</b> (continued)		Yes	No		
<b>2a</b>	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	<b>2a</b>	<b>11</b>		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	<b>2b</b>		<b>X</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>			<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	<b>3b</b>			
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>4a</b>			<b>X</b>
<b>b</b>	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>			<b>X</b>
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>			<b>X</b>
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>			
<b>6a</b>	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?	<b>6a</b>			<b>X</b>
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>			
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>				
<b>a</b>	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?	<b>7a</b>			
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>			
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>			
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>			
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>			
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>			
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>			
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>			
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>				
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>			
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:				
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>			
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>			
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:				
<b>a</b>	Gross income from members or shareholders	<b>11a</b>			
<b>b</b>	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>			
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>			
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>			
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>			
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	<b>13b</b>			
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>			<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>			
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>			<b>X</b>
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>			<b>X</b>
<b>17</b>	<b>Section 501(c)(21) organizations.</b> Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	<b>17</b>			

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 on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 5 columns: Question, 1a, 5, 1b, 4, Yes, No. Rows include questions about voting members, family relationships, management delegation, and document retention.

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

Table with 5 columns: Question, Yes, No. Rows include questions about local chapters, conflict of interest policies, whistleblower policies, and document retention.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed HI
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection.
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records

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

Check if Schedule O contains a response or note to any line in this Part VII

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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. See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MAUREEN MAURER ..... EXECUTIVE DIRECTOR	40.00 ..... 0.00	X		X				90,086	0	0
(2) WILLIAM MAURER, ..... PRESIDENT	PE 40.00 ..... 0.00	X		X				64,499	0	0
(3) JAN APO ..... VICE PRESIDENT	0.00 ..... 0.00	X		X				0	0	0
(4) SARAH BREDHOFF ..... TREASURER	0.00 ..... 0.00	X		X				0	0	0
(5) STEVE SIADEK ..... SECRETARY	0.00 ..... 0.00	X		X				0	0	0
(6) .....										
(7) .....										
(8) .....										
(9) .....										
(10) .....										
(11) .....										





**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>	<b>62,380</b>				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	<b>1,164,284</b>				
	<b>g</b> Noncash contributions included in lines 1a-1f	<b>1g</b>	\$				
	<b>h Total.</b> Add lines 1a-1f			<b>1,226,664</b>			
	<b>Program Service Revenue</b>	<b>2a</b> PROGRAM SERVICE REVENUE	Business Code	<b>500</b>	<b>500</b>		
<b>b</b>							
<b>c</b>							
<b>d</b>							
<b>e</b>							
<b>f</b> All other program service revenue							
<b>g Total.</b> Add lines 2a-2f				<b>500</b>			
<b>Other Revenue</b>		<b>3</b> Investment income (including dividends, interest, and other similar amounts)		<b>24,899</b>			<b>24,899</b>
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6a</b> Gross rents	<b>6a</b>	(i) Real				
			(ii) Personal				
	<b>b</b> Less: rental expenses	<b>6b</b>					
	<b>c</b> Rental inc. or (loss)	<b>6c</b>					
	<b>d</b> Net rental income or (loss)						
	<b>7a</b> Gross amount from sales of assets other than inventory	<b>7a</b>	(i) Securities				
			(ii) Other				
	<b>b</b> Less: cost or other basis and sales exps.	<b>7b</b>					
	<b>c</b> Gain or (loss)	<b>7c</b>					
<b>d</b> Net gain or (loss)							
<b>8a</b> Gross income from fundraising events (not including \$ 62,380 of contributions reported on line 1c). See Part IV, line 18	<b>8a</b>		<b>129,935</b>				
		<b>8b</b>	<b>121,573</b>				
<b>c</b> Net income or (loss) from fundraising events			<b>8,362</b>			<b>8,362</b>	
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>9a</b>						
		<b>9b</b>					
<b>c</b> Net income or (loss) from gaming activities							
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>10a</b>		<b>1,285</b>				
		<b>10b</b>					
<b>c</b> Net income or (loss) from sales of inventory			<b>1,285</b>			<b>1,285</b>	
<b>Miscellaneous Revenue</b>	<b>11a</b>	Business Code					
	<b>b</b>						
	<b>c</b>						
	<b>d</b> All other revenue						
	<b>e Total.</b> Add lines 11a-11d						
<b>12 Total revenue.</b> See instructions			<b>1,261,710</b>	<b>500</b>	<b>0</b>	<b>34,546</b>	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	154,585	123,667	15,459	15,459
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 Other salaries and wages	160,363	128,291	16,036	16,036
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	39,193	31,355	3,919	3,919
10 Payroll taxes	25,635	20,507	2,564	2,564
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	25,924	5,185	19,443	1,296
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	57,543	54,342	2,401	800
12 Advertising and promotion	34,084	20,451	10,225	3,408
13 Office expenses	20,913	16,731	2,091	2,091
14 Information technology				
15 Royalties				
16 Occupancy	30,972	27,875	3,097	
17 Travel	61,191	61,191		
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	158,571	134,786	23,785	
23 Insurance	19,371	17,434	1,937	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>SUPPLIES</b>	91,783	78,016	13,767	
b <b>MAINTENANCE &amp; REPAIRS</b>	34,692	34,692		
c <b>PROPERTY TAXES</b>	14,596	11,677	2,919	
d <b>INVESTMENT FEES</b>	10,000	5,000	5,000	
e All other expenses	16,639	12,538	2,554	1,547
25 Total functional expenses. Add lines 1 through 24e	956,055	783,738	125,197	47,120
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	1	Cash—non-interest-bearing	634,262	1	1,041,248
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	41,568	9	29,096
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	4,135,486		
	10b	Less: accumulated depreciation	1,131,576	10c	3,003,910
	11	Investments—publicly traded securities	1,501,868	11	1,311,779
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	4,736	14	4,608
	15	Other assets. See Part IV, line 11	60	15	
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 33)	5,312,201	16	5,390,641	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	45,428	17	23,200
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	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	<b>Total liabilities.</b> Add lines 17 through 25	45,428	26	23,200
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>				
	27	Net assets without donor restrictions	5,266,773	27	5,367,441
	28	Net assets with donor restrictions		28	
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	<b>Total net assets or fund balances</b>	5,266,773	32	5,367,441
33	<b>Total liabilities and net assets/fund balances</b>	5,312,201	33	5,390,641	

**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	<b>1,261,710</b>
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	<b>956,055</b>
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	<b>305,655</b>
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	<b>5,266,773</b>
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	<b>-204,987</b>
<b>6</b>	Donated services and use of facilities	<b>6</b>	
<b>7</b>	Investment expenses	<b>7</b>	
<b>8</b>	Prior period adjustments	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	<b>5,367,441</b>

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<b>X</b>
<b>b</b> Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<b>X</b>	
<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	<b>X</b>	
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<b>X</b>
<b>b</b> If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		

## Federal Statements

**Statement 1 - Form 4562, Line 26 - Property Used More Than 50% in a Qualified Business**

	Property Type	Date	Business %	Cost	Depr Basis	Period	Method	Deduction	Section 179
WHEELCHAIR VAN (AMS VANS, INC.)		5/26/15	100.00	\$ 33,266	\$ 33,266	5.0	S/L-	\$ 1,975	\$
2006 FORD ESCAPE		7/31/06	100.00	26,468	26,468	5.0	S/L-		
ADNW - 2016 FORD ESCAPE		7/25/18	100.00	21,324		5.0	200DBHY		
TOTAL				<u>\$ 81,058</u>	<u>\$ 59,734</u>			<u>\$ 1,975</u>	<u>\$ 0</u>

**SCHEDULE A**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

**Attach to Form 990 or Form 990-EZ.**

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open to Public Inspection**

Name of the organization

**ASSISTANCE DOGS OF HAWAII**

Employer identification number

**99-0353694**

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

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: .....
- 10  An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations .....
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	874,490	864,254	1,047,394	961,385	1,226,664	4,974,187
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 <b>Total.</b> Add lines 1 through 3	874,490	864,254	1,047,394	961,385	1,226,664	4,974,187
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)						573,006
6 <b>Public support.</b> Subtract line 5 from line 4						4,401,181

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	874,490	864,254	1,047,394	961,385	1,226,664	4,974,187
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	32,739	34,460	22,371	101,563	24,899	216,032
9 Net income from unrelated business activities, whether or not the business is regularly carried on		2,224	44,314	3,607	8,647	58,792
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 <b>Total support.</b> Add lines 7 through 10						5,249,011

12 Gross receipts from related activities, etc. (see instructions) **12** 10,775

13 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2022 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	83.85 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	<b>15</b>	80.07 %

16a **33 1/3% support test—2022.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b **33 1/3% support test—2021.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a **10%-facts-and-circumstances test—2022.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

b **10%-facts-and-circumstances test—2021.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

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

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2021 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2021 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests—2022.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2021.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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



**Part IV Supporting Organizations**

(Complete only if you checked a box on line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** *(continued)*

		Yes	No
<b>11</b>	Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b>	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
<b>b</b>	A family member of a person described on line 11a above?		
<b>c</b>	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		

**Section B. Type I Supporting Organizations**

		Yes	No
<b>1</b>	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b>	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

**Section C. Type II Supporting Organizations**

		Yes	No
<b>1</b>	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

**Section D. All Type III Supporting Organizations**

		Yes	No
<b>1</b>	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b>	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b>	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b>	<i>Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).</i>		
<b>a</b>	<input type="checkbox"/> The organization satisfied the Activities Test. <i>Complete line 2 below.</i>		
<b>b</b>	<input type="checkbox"/> The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		
<b>c</b>	<input type="checkbox"/> The organization supported a governmental entity. <i>Describe in Part VI how you supported a governmental entity (see instructions).</i>		
<b>2</b>	Activities Test. <i>Answer lines 2a and 2b below.</i>		
<b>a</b>	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
<b>b</b>	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b>	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>		
<b>a</b>	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
<b>b</b>	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

7  Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**

Section D – Distributions	Current Year
<b>1</b> Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b> Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b> Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b> Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b> Qualified set-aside amounts (prior IRS approval required—provide details in Part VI)	<b>5</b>
<b>6</b> Other distributions (describe in Part VI). See instructions.	<b>6</b>
<b>7 Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b> Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	<b>8</b>
<b>9</b> Distributable amount for 2022 from Section C, line 6	<b>9</b>
<b>10</b> Line 8 amount divided by line 9 amount	<b>10</b>

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
<b>1</b> Distributable amount for 2022 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2022 (reasonable cause required—explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2022			
<b>a</b> From 2017 .....			
<b>b</b> From 2018 .....			
<b>c</b> From 2019 .....			
<b>d</b> From 2020 .....			
<b>e</b> From 2021 .....			
<b>f Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2022 distributable amount			
<b>i</b> Carryover from 2017 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2022 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2022 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
<b>6</b> Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
<b>7 Excess distributions carryover to 2023.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2018 .....			
<b>b</b> Excess from 2019 .....			
<b>c</b> Excess from 2020 .....			
<b>d</b> Excess from 2021 .....			
<b>e</b> Excess from 2022 .....			

**Part VI** **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**PART II, LINE 10 - OTHER INCOME DETAIL**

<b>OTHER INCOME</b>	<b>\$</b>	<b>0</b>
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

Employer identification number

ASSISTANCE DOGS OF HAWAII

99-0353694

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 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 conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB 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. 1b If the organization elected, as permitted under FASB 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) Revenue included on Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other .....
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                       | Amount |
|---------------------------------------|--------|
| c Beginning balance .....             | 1c     |
| d Additions during the year .....     | 1d     |
| e Distributions during the year ..... | 1e     |
| f Ending balance .....                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance .....					
b Contributions .....					
c Net investment earnings, gains, and losses .....					
d Grants or scholarships .....					
e Other expenditures for facilities and programs .....					
f Administrative expenses .....					
g End of year balance .....					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment .....
  - b Permanent endowment .....
  - c Term endowment .....
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |                                   | Yes    | No |
|-----------------------------------|--------|----|
| (i) Unrelated organizations ..... | 3a(i)  |    |
| (ii) Related organizations .....  | 3a(ii) |    |
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land .....		840,027		840,027
b Buildings .....		2,526,486	606,123	1,920,363
c Leasehold improvements .....				
d Equipment .....		58,113	36,779	21,334
e Other .....		710,860	488,674	222,186
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				<b>3,003,910</b>

Part VII Investments – Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

Table with 3 columns: (a) Description of security or category, (b) Book value, (c) Method of valuation. Rows include (1) Financial derivatives, (2) Closely held equity interests, (3) Other (A-H), and Total.

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

Table with 3 columns: (a) Description of investment, (b) Book value, (c) Method of valuation. Rows (1) through (9) and Total.

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

Table with 2 columns: (a) Description, (b) Book value. Rows (1) through (9) and Total.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

Table with 2 columns: (a) Description of liability, (b) Book value. Row 1 includes (1) Federal income taxes, and rows (2) through (9) and Total.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII



Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 1,261,710.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 956,055.

Part XIII Supplemental Information.

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

Series of horizontal dotted lines for providing supplemental information.



**SCHEDULE G  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

OMB No. 1545-0047

**2022**

Open to Public Inspection

Employer identification number

**99-0353694**

**ASSISTANCE DOGS OF HAWAII**

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

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

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

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

**b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

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

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

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.....

.....

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		<u>VALENTINES BENE</u> (event type)	<u>ADNW FALL EVENT</u> (event type)	<u>1</u> (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	158,317	19,743	14,255	192,315
	2	Less: Contributions	62,012	368		62,380
	3	Gross income (line 1 minus line 2)	96,305	19,375	14,255	129,935
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	85,103	36,470		121,573
	10	Direct expense summary. Add lines 4 through 9 in column (d)				
11	Net income summary. Subtract line 10 from line 3, column (d)					8,362

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
Direct Expenses	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_  
 a Is the organization licensed to conduct gaming activities in each of these states?  Yes  No

b If "No," explain: \_\_\_\_\_  
 \_\_\_\_\_

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

b If "Yes," explain: \_\_\_\_\_  
 \_\_\_\_\_



**SCHEDULE O  
(Form 990)**

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 Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

Name of the organization

**ASSISTANCE DOGS OF HAWAII**

Employer identification number

**99-0353694**

**FORM 990 - ORGANIZATION'S MISSION**

ASSISTANCE DOGS OF HAWAII PROVIDES MUTUALLY BENEFICIAL, QUALITY PARTNERSHIPS BETWEEN DOGS AND PEOPLE THROUGH WHICH THEIR HIGHEST POTENTIAL CAN BE ACHIEVED. ASSISTANCE DOGS OF HAWAII OFFERS PEOPLE WITH DISABILITIES INCREASED INDEPENDENCE THROUGH THE UNIQUE SKILLS OF DOGS THAT ARE CARED FOR AND TRAINED BY DEDICATED INSTRUCTORS AND VOLUNTEERS.

**FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENTS**

N/A

**FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS**

**WILLIAM MAURER**

**MAUREEN MAURER**

**PRESIDENT**

**EXEC DIR**

**HUSBAND/WIFE**

**FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990**

THE BOARD OF DIRECTORS WILL REVIEW THE FORM 990 AFTER THE FILING IS COMPLETED.

**FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY**

THE ORGANIZATION REGULARLY EVALUATES WHETHER ANY CONFLICTS OF INTERESTS EXIST. IF A CONFLICT ARISES, THE EXECUTIVE DIRECTOR AND THE BOARD OF DIRECTORS WILL EVALUATE THE SITUATION FOR FURTHER CONSIDERATION.

**FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL**

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

Schedule O (Form 990) 2022

Name of the organization

Employer identification number

ASSISTANCE DOGS OF HAWAII

99-0353694

ANNUAL REVIEW OF EXECUTIVE DIRECTOR BY THE BOARD OF DIRECTORS. OTHER  
EMPLOYEES REVIEWED ANNUALLY BY THE EXECUTIVE DIRECTOR.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

ANNUAL REVIEW OF EXECUTIVE DIRECTOR BY THE BOARD OF DIRECTORS. OTHER  
EMPLOYEES REVIEWED ANNUALLY BY THE EXECUTIVE DIRECTOR.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION

THE ORGANIZATION'S GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC  
UPON REQUEST.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2022**

**Open to Public  
Inspection**

Employer identification number

**99-0353694**

**ASSISTANCE DOGS OF HAWAII**

**Part I Identification of Disregarded Entities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) ASSISTANCE DOGS NORTHWEST LLC P.O. BOX 10484 99-0353694 BAINBRIDGE ISLAND WA 98110	ASST DOGS	WA			N/A
(2)					
(3)					
(4)					
(5)					

**Part II Identification of Related Tax-Exempt Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)							
(2)							
(3)							
(4)							
(5)							



**Part III Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) .....												
(2) .....												
(3) .....												
(4) .....												

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) .....									
(2) .....									
(3) .....									
(4) .....									

**Part V Transactions With Related Organizations.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

	Yes	No
<b>1a</b>		
<b>1b</b>		
<b>1c</b>		
<b>1d</b>		
<b>1e</b>		
<b>1f</b>		
<b>1g</b>		
<b>1h</b>		
<b>1i</b>		
<b>1j</b>		
<b>1k</b>		
<b>1l</b>		
<b>1m</b>		
<b>1n</b>		
<b>1o</b>		
<b>1p</b>		
<b>1q</b>		
<b>1r</b>		
<b>1s</b>		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

**Part VI Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) .....													
(2) .....													
(3) .....													
(4) .....													
(5) .....													
(6) .....													
(7) .....													
(8) .....													
(9) .....													
(10) .....													
(11) .....													

**Part VII**

**Supplemental Information.**

Provide additional information for responses to questions on Schedule R. See instructions.

Dotted lines for supplemental information.

Form **4562**

Department of the Treasury  
Internal Revenue Service

Name(s) shown on return

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

Attach to your tax return.

Go to [www.irs.gov/Form4562](http://www.irs.gov/Form4562) for instructions and the latest information.

OMB No. 1545-0172

**2022**

Attachment Sequence No. **179**

Identifying number

**99-0353694**

**ASSISTANCE DOGS OF HAWAII**

Business or activity to which this form relates

**INDIRECT DEPRECIATION**

**Part I Election To Expense Certain Property Under Section 179**

**Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	<b>1,080,000</b>
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	<b>2,700,000</b>
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the <b>smaller</b> of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2021 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12	13	

**Note:** Don't use Part II or Part III below for listed property. Instead, use Part V.

**Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	<b>147,585</b>

**Part III MACRS Depreciation (Don't include listed property. See instructions.)**

**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2022	17	<b>0</b>
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

**Section B—Assets Placed in Service During 2022 Tax Year Using the General Depreciation System**

(a) Classification 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
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System**

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	30-year		30 yrs.	MM	S/L	
d	40-year		40 yrs.	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property. Enter amount from line 28	21	<b>1,975</b>
22	<b>Total.</b> 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	22	<b>149,560</b>
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2022)

**Part V Listed Property** (Include automobiles, certain other vehicles, certain aircraft, 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.)

<b>24a</b> Do you have evidence to support the business/investment use claimed?				<input checked="" type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>	<b>24b</b> If "Yes," is the evidence written?			<input checked="" type="checkbox"/> <b>Yes</b>	<input type="checkbox"/> <b>No</b>
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost		
<b>25</b> 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								<b>25</b>		
<b>26</b> Property used more than 50% in a qualified business use:										
<b>SEE STATEMENT 1</b>										
		%	<b>81,058</b>	<b>59,734</b>			<b>1,975</b>			
		%								
<b>27</b> Property used 50% or less in a qualified business use:										
		%				S/L-				
		%				S/L-				
<b>28</b> Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1								<b>28</b>	<b>1,975</b>	
<b>29</b> Add amounts in column (i), line 26. Enter here and on line 7, page 1									<b>29</b>	

**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) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<b>30</b> Total business/investment miles driven during the year ( <b>don't</b> include commuting miles)												
<b>31</b> Total commuting miles driven during the year												
<b>32</b> Total other personal (noncommuting) miles driven												
<b>33</b> Total miles driven during the year. Add lines 30 through 32												
<b>34</b> Was the vehicle available for personal use during off-duty hours?												
<b>35</b> Was the vehicle used primarily by a more than 5% owner or related person?												
<b>36</b> 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 aren't more than 5% owners or related persons. See instructions.

<b>37</b> Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		<b>Yes</b>	<b>No</b>
<b>38</b> 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			<b>X</b>
<b>39</b> Do you treat all use of vehicles by employees as personal use?			<b>X</b>
<b>40</b> 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?			<b>X</b>
<b>41</b> Do you meet the requirements concerning qualified automobile demonstration use? See instructions			<b>X</b>

**Note:** If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

**Part 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
<b>42</b> Amortization of costs that begins during your 2022 tax year (see instructions):					
<b>43</b> Amortization of costs that began before your 2022 tax year					<b>43</b>
					<b>128</b>
<b>44</b> <b>Total.</b> Add amounts in column (f). See the instructions for where to report					<b>44</b>
					<b>128</b>

**Federal Asset Report**

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current	
<b>Other Depreciation:</b>										
9	Office Furn.: Cabinets	2/15/02	1,538			1,538	7 MO S/L	1,538	0	
25	Fencing	2/09/05	4,566			4,566	5 MO S/L	4,566	0	
30	Fencing	2/02/06	6,000			6,000	5 MO S/L	6,000	0	
31	Fencing	6/14/06	4,000			4,000	5 MO S/L	4,000	0	
36	Dog: Zeus	6/25/07	1,000			1,000	7 MO S/L	1,000	0	
37	Dog: Zooley	6/25/07	1,000			1,000	7 MO S/L	1,000	0	
39	GE Refrigerator (Hamai)	6/23/07	1,603			1,603	7 MO S/L	1,603	0	
40	GE Range (Hamai)	6/23/07	926			926	7 MO S/L	926	0	
43	Fireplace (Fireplace & Home Center)	7/20/07	2,560			2,560	7 MO S/L	2,560	0	
44	Office Furniture (Potterybarn)	11/07/07	2,425			2,425	7 MO S/L	2,425	0	
45	Beds (Beds Warehouse & Furnitureland-ma)	11/29/07	1,091			1,091	5 MO S/L	1,091	0	
46	Sofa Sleeper (Affordable Furniture & Desig)	12/03/07	1,041			1,041	5 MO S/L	1,041	0	
47	Land TMK (2)2307034	8/14/07	502,340			502,340	0 -- Land	0	0	
51	Building-Training Center	12/31/07	607,270			607,270	40 MO S/L	212,545	15,181	
53	Log Desks (Jordan Dehlbom)	12/17/07	2,200			2,200	7 MO S/L	2,200	0	
59	Fencing (Home Depot x2 + labor)	7/06/07	1,818			1,818	5 MO S/L	1,818	0	
60	Fencing (David's Fencing)	12/19/07	5,616			5,616	5 MO S/L	5,616	0	
61	Land Clearing	8/14/07	128,551			128,551	0 -- Land	0	0	
62	Land Engineer	8/14/07	3,756			3,756	0 -- Land	0	0	
66	Dog: Bo	2/11/08	1,493			1,493	7 MO S/L	1,493	0	
67	Dog: Bella	2/11/08	1,493			1,493	7 MO S/L	1,493	0	
69	Dog: Emma	6/25/08	1,354			1,354	7 MO S/L	1,354	0	
75	Yamaha 670 Generator (Stephanie Wiesel)	3/01/08	550			550	5 MO S/L	550	0	
76	Water Heater (Allens Plumbing)	4/29/08	802			802	5 MO S/L	802	0	
77	Fencing-guest room ext gate (Jordan Dehlbom)	2/12/08	780			780	5 MO S/L	780	0	
78	Benches (Lowe's)	1/31/08	312			312	7 MO S/L	312	0	
79	Stage (Jeff Roland)	10/13/08	630			630	7 MO S/L	630	0	
80	Folding Chairs (80) (Costco)	10/14/08	1,416			1,416	5 MO S/L	1,416	0	
81	Audio Video Equip (Sound Investment Ent)	7/26/08	3,660			3,660	5 MO S/L	3,660	0	
83	Septic System (Eco Products Maui)	1/02/08	1,926			1,926	15 MO S/L	1,798	128	
84	Plumbing (Waiialae Plumbing)	3/07/08	5,041			5,041	7 MO S/L	5,041	0	
85	Trim/Finish (Handyman Repair)	12/22/08	556			556	7 MO S/L	556	0	
86	Electric (Menehune Electric)	2/28/08	5,875			5,875	7 MO S/L	5,875	0	
87	Trim/Finish (Jordan Dehlbom)	5/27/08	675			675	7 MO S/L	675	0	
88	Pavers (Maui Sandblasting)	5/05/08	1,664			1,664	15 MO S/L	1,516	111	
89	Driveway (Cremer Construction)	9/15/08	5,079			5,079	15 MO S/L	4,515	338	
90	Contractor's Insurance (3D Bldrs)	3/07/08	16,000			16,000	5 MO S/L	16,000	0	
91	Landscaping (Misc)	12/31/08	12,926			12,926	15 MO S/L	11,203	862	
92	Large Armoire (Karen Bliss)	3/01/08	700			700	5 MO S/L	700	0	
95	Desk (Karen Bliss-donated)	3/01/08	200			200	5 MO S/L	200	0	
96	TV (Karen Bliss-donated)	3/01/08	200			200	5 MO S/L	200	0	
97	Flooring	4/21/09	1,184			1,184	7 MO S/L	1,184	0	
102	Dog: Kai (Donated by Sandy From)	12/21/09	2,000			2,000	7 MO S/L	2,000	0	
103	Landscaping (Misc-2009)	6/18/09	42,657			42,657	15 MO S/L	35,548	2,843	
108	Dog:Murphy	8/02/10	2,661			2,661	7 MO S/L	2,661	0	
117	Agility Yard-Fencing (Misc Vendors)	6/04/10	3,891			3,891	15 MO S/L	3,005	259	
118	Agility Yard-Site Work (Wendy Peterson)	8/21/10	4,030			4,030	15 MO S/L	3,045	269	
119	Dining Room Set (Pier One)	7/05/11	499			499	5 MO S/L	499	0	
120	Couch (Costco)	7/13/11	833			833	5 MO S/L	833	0	
121	Console Table (Indolotus Imports)	5/26/11	286			286	5 MO S/L	286	0	
122	TV (Costco)	12/30/11	1,012			1,012	5 MO S/L	1,012	0	
123	Honolulu Office	11/28/11	112,964			112,964	40 MO S/L	28,476	2,824	
124	Honolulu Office Improve 2011 (various ven)	6/15/12	2,549			2,549	15 MO S/L	1,629	170	
126	Dog: Riggins	1/21/11	3,443			3,443	7 MO S/L	3,443	0	
127	Dog: Riley	1/21/11	3,443			3,443	7 MO S/L	3,443	0	
128	Dog: Trooper	5/06/11	4,619			4,619	7 MO S/L	4,619	0	
130	Dog: Winston	7/13/11	4,695			4,695	7 MO S/L	4,695	0	
131	Dog: Yoda	8/25/11	5,357			5,357	7 MO S/L	5,357	0	
132	Dog: Yogi	8/25/11	5,357			5,357	7 MO S/L	5,357	0	
136	Shed (Costco)	3/29/12	885			885	7 MO S/L	885	0	
137	Bed Frame, Base & Mattress (Ikea)	8/05/12	611			611	5 MO S/L	611	0	
138	Bed Frame & Mattress (Americ 1 of 2)	6/15/12	624			624	5 MO S/L	624	0	
	Sold/Scrapped: 12/31/22									
139	Samsung TV (Costco)	6/15/12	702			702	5 MO S/L	702	0	
140	Couches (Ahura Design)	6/15/12	2,030			2,030	5 MO S/L	2,030	0	
141	Dining Table & Chairs (Ahura Design)	6/15/12	1,167			1,167	5 MO S/L	1,167	0	
142	Chairs (4) (Inspiration)	6/15/12	834			834	5 MO S/L	834	0	
143	Coffee Table (Inspiration)	6/15/12	732			732	5 MO S/L	732	0	

## Federal Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
144	Agility Yard Expansion (Misc Vendors)	10/01/12	3,262			3,262	15 MO S/L	2,012	217
145	Honolulu Office Improve 2012 (various ven	6/15/12	17,178			17,178	15 MO S/L	10,975	1,145
146	Bed Frame & Mattress (Americ 2 of 2	6/15/12	624			624	5 MO S/L	624	0
	Sold/Scrapped: 12/31/22								
147	Building - Caretaker's Cottage	7/01/13	142,082			142,082	40 MO S/L	30,192	3,552
148	Driveway	4/25/13	13,749			13,749	15 MO S/L	7,944	916
149	Tracking & Window Treatment (Island Attit	4/02/13	1,041			1,041	5 MO S/L	1,041	0
150	Dishwasher (Sears)	1/26/13	593			593	5 MO S/L	593	0
151	Macbook Air (Apple)	2/28/13	2,059			2,059	5 MO S/L	2,059	0
152	File Cabinets (2) 3dr; (2) 2dr (Pottery Barn)	2/23/13	1,241			1,241	7 MO S/L	1,241	0
155	Dog: Captain	4/16/13	3,176			3,176	7 MO S/L	3,176	0
158	Dog: Faith	8/05/13	3,413			3,413	7 MO S/L	3,413	0
159	Dog: Hope	8/05/13	3,413			3,413	7 MO S/L	3,413	0
160	Dog: Jake	10/25/13	2,500			2,500	7 MO S/L	2,500	0
161	Dog: Lani	10/25/13	2,500			2,500	7 MO S/L	2,500	0
164	Air Conditioner (Home Depot)	4/18/13	624			624	5 MO S/L	624	0
165	Air Conditioner (Home Depot)	4/24/13	624			624	5 MO S/L	624	0
166	Air Conditioner (Home Depot)	5/08/13	624			624	5 MO S/L	624	0
167	Range (Sears)	1/26/13	1,767			1,767	5 MO S/L	1,767	0
168	Refrigerator (Sears)	1/26/13	1,108			1,108	5 MO S/L	1,108	0
169	Chatham Porch Bench (Pottery Barn)	7/16/13	329			329	5 MO S/L	329	0
170	Dog: Abe (In-House Bred-Riley)	3/30/12	0			0	0 HY	0	0
172	Dog: Angel (In-House Bred-Riley)	3/30/12	0			0	0 HY	0	0
173	Dog: Arnold (In-House Bred-Riley)	3/30/12	0			0	0 HY	0	0
174	Dog: Astro (In-House Bred-Riley)	3/30/12	0			0	0 HY	0	0
176	Ipad (Macnet)	4/26/13	623			623	5 MO S/L	623	0
178	Apple iMac 21.5" Desktop (Amazon)	9/28/13	1,317			1,317	5 MO S/L	1,317	0
179	Apple iMac 21.5" Desktop (Amazon)	9/28/13	1,317			1,317	5 MO S/L	1,317	0
180	Dog: Ipo	1/17/14	3,216			3,216	7 MO S/L	3,216	0
181	Dog: Inca	1/17/14	3,216			3,216	7 MO S/L	3,216	0
182	Dog: Marshal	3/10/14	3,711			3,711	7 MO S/L	3,711	0
183	Dog: Maggie	3/10/14	3,711			3,711	7 MO S/L	3,711	0
184	Dog: Nani	3/25/14	3,678			3,678	7 MO S/L	3,678	0
185	Dog: Nelson	3/25/14	3,678			3,678	7 MO S/L	3,678	0
186	Dog: Ollie	10/29/14	2,752			2,752	7 MO S/L	2,752	0
190	Dresser (The Nest)	3/14/14	563			563	5 MO S/L	563	0
191	Storage Units/Counters Office (HomeDep/L	7/21/14	1,625			1,625	5 MO S/L	1,625	0
192	Shed (built)	7/31/14	2,782			2,782	10 MO S/L	2,063	279
193	Water Tank Cover (Eco Products Maui)	7/26/14	980			980	10 MO S/L	727	98
194	Countertops-Mo's office (Maui Countertops	10/17/14	635			635	5 MO S/L	635	0
195	Workshop (various)	12/19/14	9,443			9,443	10 MO S/L	6,610	944
196	Golf Cart (Rich Landry)	5/18/15	3,300			3,300	7 MO S/L	3,104	196
197	Dryer (Lowes)	6/12/15	690			690	5 MO S/L	690	0
198	Washer & Dryer (Sears)	6/14/15	1,089			1,089	5 MO S/L	1,089	0
199	Wheelchair Accessible Trails	7/15/15	43,655			43,655	15 MO S/L	18,917	2,911
202	Dog: Ranger	1/26/15	3,330			3,330	7 MO S/L	3,290	40
203	Dog: Roxy	1/26/15	3,330			3,330	7 MO S/L	3,290	40
206	Dining Set (Costco)	3/08/15	1,771			1,771	5 MO S/L	1,771	0
207	Dog: Shae (In-House)	6/07/15	0			0	0 HY	0	0
208	Dog: Skipper (In-House)	6/07/15	0			0	0 HY	0	0
209	Dog: Shadow (In-House)	6/07/15	0			0	0 HY	0	0
210	Dog: Sadie T. (In-House)	6/12/15	0			0	0 HY	0	0
211	Dog: Soldier T. (In-House)	6/12/15	0			0	0 HY	0	0
214	Dog: Walker (In-House)	2/11/16	0			0	0 HY	0	0
215	Dog: Wesley (In-House)	2/11/16	0			0	0 HY	0	0
216	Dog: Wilson (In-House)	2/11/16	0			0	0 HY	0	0
217	Dog: Winnie (In-House)	2/11/16	0			0	0 HY	0	0
218	Dog: Annie	4/05/16	3,660			3,660	7 MO S/L	2,971	523
219	Dog: Ava	4/05/16	3,322			3,322	7 MO S/L	2,729	475
221	Dog: Cassie	8/05/16	3,555			3,555	7 MO S/L	2,739	508
223	Dog: Davis (Donated by CCI)	11/01/16	3,000			3,000	7 MO S/L	2,214	429
224	Patio Furniture (Home Depot)	5/07/16	684			684	5 MO S/L	684	0
225	Honolulu Office LH Fee Purchase	1/22/16	132,978			132,978	40 MO S/L	19,670	3,324
226	Computer (Mac Made Easy Maui)	11/23/16	2,500			2,500	5 MO S/L	2,500	0
227	Courtyard ADH Improvements	2/27/17	4,072			4,072	15 MO S/L	1,312	272
228	ADNW - Furniture	11/15/17	16,679			16,679	7 MO S/L	9,928	2,382
229	ADNW Office - Building	7/10/17	647,364			647,364	40 MO S/L	72,828	16,185
230	ADNW Office - Land	7/10/17	205,380			205,380	0 -- Land	0	0
231	ADNW Office Improvements	12/31/17	44,544			44,544	15 MO S/L	14,848	2,970
232	Dog: Jewel	5/16/17	3,715			3,715	7 MO S/L	2,432	531
233	Dogs: Jasper	5/16/17	3,715			3,715	7 MO S/L	2,432	531



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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
235	Dogs: Kula	8/14/17	4,959			4,959	7 MO S/L	3,129	709
236	Dogs: Lance	9/01/17	5,004			5,004	7 MO S/L	3,097	715
237	Dogs: Lexie	9/01/17	5,004			5,004	7 MO S/L	3,097	715
238	Dogs: Mac	12/12/17	2,724			2,724	7 MO S/L	1,589	389
239	Dogs: Maggie (2017)	12/12/17	2,724			2,724	7 MO S/L	1,589	389
241	Magicard ID Card Printer	2/01/18	936			936	7 MO S/L	524	133
242	2018 ADNW Office Improvements	12/31/18	87,414			87,414	15 MO S/L	16,909	5,828
244	2018 Dogs (Grouped)	12/31/18	33,929			33,929	7 MO S/L	14,541	4,847
245	Dog: Olive (Donated)	6/27/18	3,000			3,000	7 MO S/L	1,500	429
246	Dogs: Ruby (Donated)	8/22/18	3,000			3,000	7 MO S/L	1,429	428
247	Dogs: Brittany (Donated)	11/16/18	10,000			10,000	7 MO S/L	4,405	1,428
248	Dogs: Willow (Donated)	12/18/18	3,000			3,000	7 MO S/L	1,286	428
249	Dogs: Watson (Donated)	12/18/18	3,000			3,000	7 MO S/L	1,286	428
250	2019 Dogs (Grouped)	1/15/19	41,662			41,662	7 MO S/L	17,855	5,952
251	Wheelchair Accessible Trails	5/10/19	17,055			17,055	15 MO S/L	3,032	1,137
252	Furniture and Appliances	7/09/19	15,295			15,295	5 MO S/L	7,648	3,059
253	2019 ADNW Improvements	10/31/19	249,657			249,657	15 MO S/L	36,381	16,644
254	Furniture and Appliances	12/31/19	17,182			17,182	5 MO S/L	6,873	3,436
255	Portland Office	2/26/19	312,000			312,000	40 MO S/L	22,100	7,800
256	2019 Furnitures	12/31/19	8,954			8,954	5 MO S/L	3,582	1,790
258	Dog: Tori (Donated)	4/12/19	20,000			20,000	7 MO S/L	7,857	2,857
259	Dog: Nash (Donated)	9/18/19	20,000			20,000	7 MO S/L	6,429	2,857
260	Air Conditioner	7/03/20	13,021			13,021	10 MO S/L	1,953	1,302
261	Solar Panels	12/08/20	61,675			52,424	20 MO S/L	2,840	2,621
262	Fencing	3/03/20	9,844			9,844	10 MO S/L	1,805	984
263	Tree House	12/07/20	15,173			15,173	15 MO S/L	1,096	1,011
264	Computer - Helping PawS	5/28/20	1,500			1,500	5 MO S/L	475	300
265	Computer	11/13/20	1,100			1,100	5 MO S/L	257	220
266	Computer - Apple	12/07/20	1,301			1,301	5 MO S/L	282	260
267	2017 Honda	6/26/20	16,000			16,000	5 MO S/L	4,800	3,200
268	2017 Honda	6/24/20	18,100			18,100	5 MO S/L	5,430	3,620
269	2020 ADNW Building Improvements	12/31/20	42,350			42,350	15 MO S/L	2,823	2,824
270	Crate & Barrel	11/17/20	3,124			3,124	7 MO S/L	483	447
271	Wheelchairs	8/19/20	2,330			2,330	15 MO S/L	207	155
272	Wheelchairs	8/25/20	2,179			2,179	15 MO S/L	194	145
274	Custom Fees	12/31/19	830			830	7 MO S/L	237	119
275	A&L Customs	12/20/21	180			180	7 MO S/L	0	26
276	Career Dogs Australia	6/23/21	3,651			3,651	7 MO S/L	261	521
277	Career Dogs Australia	9/07/21	5,388			5,388	7 MO S/L	257	769
278	Career Dogs Australia	12/31/21	2,994			2,994	7 MO S/L	0	428
279	Dogtrainers Pet Trns (Bear, Betty & Gem)	7/21/21	3,294			3,294	7 MO S/L	196	471
280	Departure Pets (Monty & Maile)	12/02/21	365			365	7 MO S/L	4	52
281	Departure Pets (Monty & Maile)	12/08/21	870			870	7 MO S/L	10	125
282	Departure Pets (Monty & Maile)	12/13/21	3,207			3,207	7 MO S/L	38	458
283	Career Dogs Australia (Monty & Maile)	11/03/21	260			260	7 MO S/L	6	37
285	Artificial Grass	1/19/21	7,070			7,070	15 MO S/L	432	471
286	Office Furniture	3/19/21	196			196	2 MO S/L	74	98
287	Apple.com	3/19/21	2,603			2,603	5 MO S/L	390	521
288	Island Honda	7/30/21	119			119	5 MO S/L	10	24
289	Accura Maui	9/09/21	26			26	5 MO S/L	2	5
290	Mobility Scooters	10/07/21	678			678	10 MO S/L	17	68
291	Mobility Scooters	10/08/21	678			678	10 MO S/L	17	68
292	2021 ADNW Improvements	6/09/21	5,537			5,537	15 MO S/L	215	369
293	Furniture	10/22/21	7			7	1 MO S/L	1	6
294	Furniture	3/05/21	86			86	3 MO S/L	24	29
295	Furniture	11/29/21	1,902			1,902	5 MO S/L	32	380
297	Career Dogs Australia	1/13/22	4,901			4,901	7 MO S/L	0	700
298	Custom Fees	12/31/22	4,438			4,438	7 MO S/L	0	0
299	Career Dogs Australia	10/03/22	12,101			12,101	7 MO S/L	0	432
300	Career Dogs Australia	11/14/22	2,768			2,768	7 MO S/L	0	66
301	Career Dogs Australia	12/01/22	4,585			4,585	7 MO S/L	0	55
302	Career Dogs Australia	12/21/22	2,772			2,772	7 MO S/L	0	0
303	Lifestyle Furniture	3/14/22	2,083			2,083	5 MO S/L	0	347
	<b>Total Other Depreciation</b>		<u>4,056,970</u>			<u>4,047,719</u>		<u>902,020</u>	<u>147,585</u>
	<b>Total ACRS and Other Depreciation</b>		<u>4,056,970</u>			<u>4,047,719</u>		<u>902,020</u>	<u>147,585</u>

Listed Property:

**Federal Asset Report**

FYE: 12/31/2022

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
200	Wheelchair Van (AMS Vans, Inc.)	5/26/15	33,266			33,266	5 MO S/L	20,310	1,975
29	2006 Ford Escape	7/31/06	26,468			26,468	5 MO S/L	26,468	0
240	ADNW - 2016 Ford Escape	7/25/18	21,324		X	0	5 HY 200DB	21,324	0
			<u>81,058</u>			<u>59,734</u>		<u>68,102</u>	<u>1,975</u>
<b><u>Amortization:</u></b>									
257	Portland OFFICE- Closing Cost	2/26/19	5,108			5,108	40 MO Amort	372	128
			<u>5,108</u>			<u>5,108</u>		<u>372</u>	<u>128</u>
<b>Grand Totals</b>			4,143,136			4,112,561		970,494	149,688
<b>Less: Dispositions and Transfers</b>			1,248			1,248		1,248	0
<b>Less: Start-up/Org Expense</b>			0			0		0	0
<b>Net Grand Totals</b>			<u>4,141,888</u>			<u>4,111,313</u>		<u>969,246</u>	<u>149,688</u>

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Basis for Depr	Per Conv	Meth	Prior	Current
<b>Other Depreciation:</b>										
9	Office Furn.: Cabinets	2/15/02	0				0	0	HY	0
25	Fencing	2/09/05	0				0	0	HY	0
30	Fencing	2/02/06	0				0	0	HY	0
31	Fencing	6/14/06	0				0	0	HY	0
36	Dog: Zeus	6/25/07	0				0	0	HY	0
37	Dog: Zooey	6/25/07	0				0	0	HY	0
39	GE Refrigerator (Hamai)	6/23/07	0				0	0	HY	0
40	GE Range (Hamai)	6/23/07	0				0	0	HY	0
43	Fireplace (Fireplace & Home Center)	7/20/07	0				0	0	HY	0
44	Office Furniture (Potterybarn)	11/07/07	0				0	0	HY	0
45	Beds (Beds Warehouse & Furnitureland-ma)	11/29/07	0				0	0	HY	0
46	Sofa Sleeper (Affordable Furniture & Desig)	12/03/07	0				0	0	HY	0
47	Land TMK (2)2307034	8/14/07	0				0	0	HY	0
51	Building-Training Center	12/31/07	0				0	0	HY	0
53	Log Desks (Jordan Dehlbom)	12/17/07	0				0	0	HY	0
59	Fencing (Home Depot x2 + labor)	7/06/07	0				0	0	HY	0
60	Fencing (David's Fencing)	12/19/07	0				0	0	HY	0
61	Land Clearing	8/14/07	0				0	0	HY	0
62	Land Engineer	8/14/07	0				0	0	HY	0
66	Dog: Bo	2/11/08	0				0	0	HY	0
67	Dog: Bella	2/11/08	0				0	0	HY	0
69	Dog: Emma	6/25/08	0				0	0	HY	0
75	Yamaha 670 Generator (Stephanie Wiesel)	3/01/08	0				0	0	HY	0
76	Water Heater (Allens Plumbing)	4/29/08	0				0	0	HY	0
77	Fencing-guest room ext gate (Jordan Dehlbom)	2/12/08	0				0	0	HY	0
78	Benches (Lowe's)	1/31/08	0				0	0	HY	0
79	Stage (Jeff Roland)	10/13/08	0				0	0	HY	0
80	Folding Chairs (80) (Costco)	10/14/08	0				0	0	HY	0
81	Audio Video Equip (Sound Investment Entc)	7/26/08	0				0	0	HY	0
83	Septic System (Eco Products Maui)	1/02/08	0				0	0	HY	0
84	Plumbing (Waialae Plumbing)	3/07/08	0				0	0	HY	0
85	Trim/Finish (Handyman Repair)	12/22/08	0				0	0	HY	0
86	Electric (Menehune Electric)	2/28/08	0				0	0	HY	0
87	Trim/Finish (Jordan Dehlbom)	5/27/08	0				0	0	HY	0
88	Pavers (Maui Sandblasting)	5/05/08	0				0	0	HY	0
89	Driveway (Cremer Construction)	9/15/08	0				0	0	HY	0
90	Contractor's Insurance (3D Bldrs)	3/07/08	0				0	0	HY	0
91	Landscaping (Misc)	12/31/08	0				0	0	HY	0
92	Large Armoire (Karen Bliss)	3/01/08	0				0	0	HY	0
95	Desk (Karen Bliss-donated)	3/01/08	0				0	0	HY	0
96	TV (Karen Bliss-donated)	3/01/08	0				0	0	HY	0
97	Flooring	4/21/09	0				0	0	HY	0
102	Dog: Kai (Donated by Sandy From)	12/21/09	0				0	0	HY	0
103	Landscaping (Misc-2009)	6/18/09	0				0	0	HY	0
108	Dog:Murphy	8/02/10	0				0	0	HY	0
117	Agility Yard-Fencing (Misc Vendors)	6/04/10	0				0	0	HY	0
118	Agility Yard-Site Work (Wendy Peterson)	8/21/10	0				0	0	HY	0
119	Dining Room Set (Pier One)	7/05/11	0				0	0	HY	0
120	Couch (Costco)	7/13/11	0				0	0	HY	0
121	Console Table (Indolotus Imports)	5/26/11	0				0	0	HY	0
122	TV (Costco)	12/30/11	0				0	0	HY	0
123	Honolulu Office	11/28/11	0				0	0	HY	0
124	Honolulu Office Improve 2011 (various ven	6/15/12	0				0	0	HY	0
126	Dog: Riggins	1/21/11	0				0	0	HY	0
127	Dog: Riley	1/21/11	0				0	0	HY	0
128	Dog: Trooper	5/06/11	0				0	0	HY	0
130	Dog: Winston	7/13/11	0				0	0	HY	0
131	Dog: Yoda	8/25/11	0				0	0	HY	0
132	Dog: Yogi	8/25/11	0				0	0	HY	0
136	Shed (Costco)	3/29/12	0				0	0	HY	0
137	Bed Frame, Base & Mattress (Ikea)	8/05/12	0				0	0	HY	0
138	Bed Frame & Mattress (Americ 1 of 2 Sold/Scrapped: 12/31/22)	6/15/12	0				0	0	HY	0
139	Samsung TV (Costco)	6/15/12	0				0	0	HY	0
140	Couches (Ahura Design)	6/15/12	0				0	0	HY	0
141	Dining Table & Chairs (Ahura Design)	6/15/12	0				0	0	HY	0
142	Chairs (4) (Inspiration)	6/15/12	0				0	0	HY	0
143	Coffee Table (Inspiration)	6/15/12	0				0	0	HY	0

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Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
144	Agility Yard Expansion (Misc Vendors)	10/01/12	0			0	0	HY	0	0
145	Honolulu Office Improve 2012 (various ven	6/15/12	0			0	0	HY	0	0
146	Bed Frame & Mattress (Americ 2 of 2	6/15/12	0			0	0	HY	0	0
	Sold/Scrapped: 12/31/22									
147	Building - Caretaker's Cottage	7/01/13	0			0	0	HY	0	0
148	Driveway	4/25/13	0			0	0	HY	0	0
149	Tracking & Window Treatment (Island Attit	4/02/13	0			0	0	HY	0	0
150	Dishwasher (Sears)	1/26/13	0			0	0	HY	0	0
151	Macbook Air (Apple)	2/28/13	0			0	0	HY	0	0
152	File Cabinets (2) 3dr; (2) 2dr (Pottery Barn)	2/23/13	0			0	0	HY	0	0
155	Dog: Captain	4/16/13	0			0	0	HY	0	0
158	Dog: Faith	8/05/13	0			0	0	HY	0	0
159	Dog: Hope	8/05/13	0			0	0	HY	0	0
160	Dog: Jake	10/25/13	0			0	0	HY	0	0
161	Dog: Lani	10/25/13	0			0	0	HY	0	0
164	Air Conditioner (Home Depot)	4/18/13	0			0	0	HY	0	0
165	Air Conditioner (Home Depot)	4/24/13	0			0	0	HY	0	0
166	Air Conditioner (Home Depot)	5/08/13	0			0	0	HY	0	0
167	Range (Sears)	1/26/13	0			0	0	HY	0	0
168	Refrigerator (Sears)	1/26/13	0			0	0	HY	0	0
169	Chatham Porch Bench (Pottery Barn)	7/16/13	0			0	0	HY	0	0
170	Dog: Abe (In-House Bred-Riley)	3/30/12	0			0	0	HY	0	0
172	Dog: Angel (In-House Bred-Riley)	3/30/12	0			0	0	HY	0	0
173	Dog: Arnold (In-House Bred-Riley)	3/30/12	0			0	0	HY	0	0
174	Dog: Astro (In-House Bred-Riley)	3/30/12	0			0	0	HY	0	0
176	Ipad (Macnet)	4/26/13	0			0	0	HY	0	0
178	Apple iMac 21.5" Desktop (Amazon)	9/28/13	0			0	0	HY	0	0
179	Apple iMac 21.5" Desktop (Amazon)	9/28/13	0			0	0	HY	0	0
180	Dog: Ipo	1/17/14	0			0	0	HY	0	0
181	Dog: Inca	1/17/14	0			0	0	HY	0	0
182	Dog: Marshal	3/10/14	0			0	0	HY	0	0
183	Dog: Maggie	3/10/14	0			0	0	HY	0	0
184	Dog: Nani	3/25/14	0			0	0	HY	0	0
185	Dog: Nelson	3/25/14	0			0	0	HY	0	0
186	Dog: Ollie	10/29/14	0			0	0	HY	0	0
190	Dresser (The Nest)	3/14/14	0			0	0	HY	0	0
191	Storage Units/Counters Office (HomeDep/L	7/21/14	0			0	0	HY	0	0
192	Shed (built)	7/31/14	0			0	0	HY	0	0
193	Water Tank Cover (Eco Products Maui)	7/26/14	0			0	0	HY	0	0
194	Countertops-Mo's office (Maui Countertops)	10/17/14	0			0	0	HY	0	0
195	Workshop (various)	12/19/14	0			0	0	HY	0	0
196	Golf Cart (Rich Landry)	5/18/15	0			0	0	HY	0	0
197	Dryer (Lowe's)	6/12/15	0			0	0	HY	0	0
198	Washer & Dryer (Sears)	6/14/15	0			0	0	HY	0	0
199	Wheelchair Accessible Trails	7/15/15	0			0	0	HY	0	0
202	Dog: Ranger	1/26/15	0			0	0	HY	0	0
203	Dog: Roxy	1/26/15	0			0	0	HY	0	0
206	Dining Set (Costco)	3/08/15	0			0	0	HY	0	0
207	Dog: Shae (In-House)	6/07/15	0			0	0	HY	0	0
208	Dog: Skipper (In-House)	6/07/15	0			0	0	HY	0	0
209	Dog: Shadow (In-House)	6/07/15	0			0	0	HY	0	0
210	Dog: Sadie T. (In-House)	6/12/15	0			0	0	HY	0	0
211	Dog: Soldier T. (In-House)	6/12/15	0			0	0	HY	0	0
214	Dog: Walker (In-House)	2/11/16	0			0	0	HY	0	0
215	Dog: Wesley (In-House)	2/11/16	0			0	0	HY	0	0
216	Dog: Wilson (In-House)	2/11/16	0			0	0	HY	0	0
217	Dog: Winnie (In-House)	2/11/16	0			0	0	HY	0	0
218	Dog: Annie	4/05/16	0			0	0	HY	0	0
219	Dog: Ava	4/05/16	0			0	0	HY	0	0
221	Dog: Cassie	8/05/16	0			0	0	HY	0	0
223	Dog: Davis (Donated by CCI)	11/01/16	0			0	0	HY	0	0
224	Patio Furniture (Home Depot)	5/07/16	0			0	0	HY	0	0
225	Honolulu Office LH Fee Purchase	1/22/16	0			0	0	HY	0	0
226	Computer (Mac Made Easy Maui)	11/23/16	0			0	0	HY	0	0
227	Courtyard ADH Improvements	2/27/17	0			0	0	HY	0	0
228	ADNW - Furniture	11/15/17	0			0	0	HY	0	0
229	ADNW Office - Building	7/10/17	0			0	0	HY	0	0
230	ADNW Office - Land	7/10/17	0			0	0	HY	0	0
231	ADNW Office Improvements	12/31/17	0			0	0	HY	0	0
232	Dog: Jewel	5/16/17	0			0	0	HY	0	0
233	Dogs: Jasper	5/16/17	0			0	0	HY	0	0

**AMT Asset Report**

**Form 990, Page 1**

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
235	Dogs: Kula	8/14/17	0				0	0	HY	0	0
236	Dogs: Lance	9/01/17	0				0	0	HY	0	0
237	Dogs: Lexie	9/01/17	0				0	0	HY	0	0
238	Dogs: Mac	12/12/17	0				0	0	HY	0	0
239	Dogs: Maggie (2017)	12/12/17	0				0	0	HY	0	0
241	Magicard ID Card Printer	2/01/18	0				0	0	HY	0	0
242	2018 ADNW Office Improvements	12/31/18	0				0	0	HY	0	0
244	2018 Dogs (Grouped)	12/31/18	0				0	0	HY	0	0
245	Dog: Olive (Donated)	6/27/18	0				0	0	HY	0	0
246	Dogs: Ruby (Donated)	8/22/18	0				0	0	HY	0	0
247	Dogs: Brittany (Donated)	11/16/18	0				0	0	HY	0	0
248	Dogs: Willow (Donated)	12/18/18	0				0	0	HY	0	0
249	Dogs: Watson (Donated)	12/18/18	0				0	0	HY	0	0
250	2019 Dogs (Grouped)	1/15/19	0				0	0	HY	0	0
251	Wheelchair Accessible Trails	5/10/19	0				0	0	HY	0	0
252	Furniture and Appliances	7/09/19	0				0	0	HY	0	0
253	2019 ADNW Improvements	10/31/19	0				0	0	HY	0	0
254	Furniture and Appliances	12/31/19	0				0	0	HY	0	0
255	Portland Office	2/26/19	0				0	0	HY	0	0
256	2019 Furnitures	12/31/19	0				0	0	HY	0	0
258	Dog: Tori (Donated)	4/12/19	0				0	0	HY	0	0
259	Dog: Nash (Donated)	9/18/19	0				0	0	HY	0	0
260	Air Conditioner	7/03/20	0				0	0	HY	0	0
261	Solar Panels	12/08/20	0				0	0	HY	0	0
262	Fencing	3/03/20	0				0	0	HY	0	0
263	Tree House	12/07/20	0				0	0	HY	0	0
264	Computer - Helping PawS	5/28/20	0				0	0	HY	0	0
265	Computer	11/13/20	0				0	0	HY	0	0
266	Computer - Apple	12/07/20	0				0	0	HY	0	0
267	2017 Honda	6/26/20	0				0	0	HY	0	0
268	2017 Honda	6/24/20	0				0	0	HY	0	0
269	2020 ADNW Building Improvements	12/31/20	0				0	0	HY	0	0
270	Crate & Barrel	11/17/20	0				0	0	HY	0	0
271	Wheelchairs	8/19/20	0				0	0	HY	0	0
272	Wheelchairs	8/25/20	0				0	0	HY	0	0
274	Custom Fees	12/31/19	0				0	0	HY	0	0
275	A&L Customs	12/20/21	0				0	0	HY	0	0
276	Career Dogs Australia	6/23/21	0				0	0	HY	0	0
277	Career Dogs Australia	9/07/21	0				0	0	HY	0	0
278	Career Dogs Australia	12/31/21	0				0	0	HY	0	0
279	Dogtrainers Pet Trns (Bear, Betty & Gem)	7/21/21	0				0	0	HY	0	0
280	Departure Pets (Monty & Maile)	12/02/21	0				0	0	HY	0	0
281	Departure Pets (Monty & Maile)	12/08/21	0				0	0	HY	0	0
282	Departure Pets (Monty & Maile)	12/13/21	0				0	0	HY	0	0
283	Career Dogs Australia (Monty & Maile)	11/03/21	0				0	0	HY	0	0
285	Artificial Grass	1/19/21	0				0	0	HY	0	0
286	Office Furniture	3/19/21	0				0	0	HY	0	0
287	Apple.com	3/19/21	0				0	0	HY	0	0
288	Island Honda	7/30/21	0				0	0	HY	0	0
289	Accura Maui	9/09/21	0				0	0	HY	0	0
290	Mobility Scooters	10/07/21	0				0	0	HY	0	0
291	Mobility Scooters	10/08/21	0				0	0	HY	0	0
292	2021 ADNW Improvements	6/09/21	0				0	0	HY	0	0
293	Furniture	10/22/21	0				0	0	HY	0	0
294	Furniture	3/05/21	0				0	0	HY	0	0
295	Furniture	11/29/21	0				0	0	HY	0	0
297	Career Dogs Australia	1/13/22	0				0	0	HY	0	0
298	Custom Fees	12/31/22	0				0	0	HY	0	0
299	Career Dogs Australia	10/03/22	0				0	0	HY	0	0
300	Career Dogs Australia	11/14/22	0				0	0	HY	0	0
301	Career Dogs Australia	12/01/22	0				0	0	HY	0	0
302	Career Dogs Australia	12/21/22	0				0	0	HY	0	0
303	Lifestyle Furniture	3/14/22	0				0	0	HY	0	0
	<b>Total Other Depreciation</b>		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>
	<b>Total ACRS and Other Depreciation</b>		<u>0</u>				<u>0</u>			<u>0</u>	<u>0</u>

**Listed Property:**

# AMT Asset Report

## Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
200	Wheelchair Van (AMS Vans, Inc.)	5/26/15	0			0	0 HY	0	0
29	2006 Ford Escape	7/31/06	0			0	0 HY	0	0
240	ADNW - 2016 Ford Escape	7/25/18	0			0	0 HY	0	0
			<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	<b>Grand Totals</b>		0			0		0	0
	<b>Less: Dispositions and Transfers</b>		0			0		0	0
	<b>Net Grand Totals</b>		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>

**Bonus Depreciation Report**

**Form 990, Page 1**

<u>Asset</u>	<u>Property Description</u>	<u>Date In Service</u>	<u>Tax Cost</u>	<u>Bus Pct</u>	<u>Tax Sec 179 Exp</u>	<u>Current Bonus</u>	<u>Prior Bonus</u>	<u>Tax - Basis for Depr</u>
240	ADNW - 2016 Ford Escape	7/25/18	21,324	100	0	0	21,324	0
<b>Grand Total</b>			<u>21,324</u>		<u>0</u>	<u>0</u>	<u>21,324</u>	<u>0</u>

# Depreciation Adjustment Report

## All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
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There are no assets that meet the criteria of this report



Asset	Description	Date In Service	Cost	Tax	AMT
<b>Other Depreciation:</b>					
9	Office Furn.: Cabinets	2/15/02	1,538	0	0
25	Fencing	2/09/05	4,566	0	0
30	Fencing	2/02/06	6,000	0	0
31	Fencing	6/14/06	4,000	0	0
36	Dog: Zeus	6/25/07	1,000	0	0
37	Dog: Zooney	6/25/07	1,000	0	0
39	GE Refrigerator (Hamai)	6/23/07	1,603	0	0
40	GE Range (Hamai)	6/23/07	926	0	0
43	Fireplace (Fireplace & Home Center)	7/20/07	2,560	0	0
44	Office Furniture (Potterybarn)	11/07/07	2,425	0	0
45	Beds (Beds Warehouse & Furnitureland-mattres)	11/29/07	1,091	0	0
46	Sofa Sleeper (Affordable Furniture & Design)	12/03/07	1,041	0	0
47	Land TMK (2)2307034	8/14/07	502,340	0	0
51	Building-Training Center	12/31/07	607,270	15,182	0
53	Log Desks (Jordan Dehlbom)	12/17/07	2,200	0	0
59	Fencing (Home Depot x2 + labor)	7/06/07	1,818	0	0
60	Fencing (David's Fencing)	12/19/07	5,616	0	0
61	Land Clearing	8/14/07	128,551	0	0
62	Land Engineer	8/14/07	3,756	0	0
66	Dog: Bo	2/11/08	1,493	0	0
67	Dog: Bella	2/11/08	1,493	0	0
69	Dog: Emma	6/25/08	1,354	0	0
75	Yamaha 670 Generator (Stephanie Wiesel)	3/01/08	550	0	0
76	Water Heater (Allens Plumbing)	4/29/08	802	0	0
77	Fencing-guest room ext gate (Jordan Dehlbohm)	2/12/08	780	0	0
78	Benches (Lowe's)	1/31/08	312	0	0
79	Stage (Jeff Roland)	10/13/08	630	0	0
80	Folding Chairs (80) (Costco)	10/14/08	1,416	0	0
81	Audio Video Equip (Sound Investment Enterpris	7/26/08	3,660	0	0
83	Septic System (Eco Products Maui)	1/02/08	1,926	0	0
84	Plumbing (Waialae Plumbing)	3/07/08	5,041	0	0
85	Trim/Finish (Handyman Repair)	12/22/08	556	0	0
86	Electric (Menehune Electric)	2/28/08	5,875	0	0
87	Trim/Finish (Jordan Dehlbom)	5/27/08	675	0	0
88	Pavers (Maui Sandblasting)	5/05/08	1,664	37	0
89	Driveway (Cremer Construction)	9/15/08	5,079	226	0
90	Contractor's Insurance (3D Bldrs)	3/07/08	16,000	0	0
91	Landscaping (Misc)	12/31/08	12,926	861	0
92	Large Armoire (Karen Bliss)	3/01/08	700	0	0
95	Desk (Karen Bliss-donated)	3/01/08	200	0	0
96	TV (Karen Bliss-donated)	3/01/08	200	0	0
97	Flooring	4/21/09	1,184	0	0
102	Dog: Kai (Donated by Sandy From)	12/21/09	2,000	0	0
103	Landscaping (Misc-2009)	6/18/09	42,657	2,844	0
108	Dog:Murphy	8/02/10	2,661	0	0
117	Agility Yard-Fencing (Misc Vendors)	6/04/10	3,891	260	0
118	Agility Yard-Site Work (Wendy Peterson)	8/21/10	4,030	268	0
119	Dining Room Set (Pier One)	7/05/11	499	0	0
120	Couch (Costco)	7/13/11	833	0	0
121	Console Table (Indolotus Imports)	5/26/11	286	0	0
122	TV (Costco)	12/30/11	1,012	0	0
123	Honolulu Office	11/28/11	112,964	2,824	0
124	Honolulu Office Improve 2011 (various vendor)	6/15/12	2,549	169	0
126	Dog: Riggins	1/21/11	3,443	0	0
127	Dog: Riley	1/21/11	3,443	0	0
128	Dog: Trooper	5/06/11	4,619	0	0
130	Dog: Winston	7/13/11	4,695	0	0
131	Dog: Yoda	8/25/11	5,357	0	0
132	Dog: Yogi	8/25/11	5,357	0	0
136	Shed (Costco)	3/29/12	885	0	0
137	Bed Frame, Base & Mattress (Ikea)	8/05/12	611	0	0
139	Samsung TV (Costco)	6/15/12	702	0	0
140	Couches (Ahura Design)	6/15/12	2,030	0	0
141	Dining Table & Chairs (Ahura Design)	6/15/12	1,167	0	0
142	Chairs (4) (Inspiration)	6/15/12	834	0	0
143	Coffee Table (Inspiration)	6/15/12	732	0	0
144	Agility Yard Expansion (Misc Vendors)	10/01/12	3,262	218	0

Asset	Description	Date In Service	Cost	Tax	AMT
145	Honolulu Office Improve 2012 (various vendor)	6/15/12	17,178	1,145	0
147	Building - Caretaker's Cottage	7/01/13	142,082	3,553	0
148	Driveway	4/25/13	13,749	917	0
149	Tracking & Window Treatment (Island Attitude)	4/02/13	1,041	0	0
150	Dishwasher (Sears)	1/26/13	593	0	0
151	Macbook Air (Apple)	2/28/13	2,059	0	0
152	File Cabinets (2) 3dr; (2) 2dr (Pottery Barn)	2/23/13	1,241	0	0
155	Dog: Captain	4/16/13	3,176	0	0
158	Dog: Faith	8/05/13	3,413	0	0
159	Dog: Hope	8/05/13	3,413	0	0
160	Dog: Jake	10/25/13	2,500	0	0
161	Dog: Lani	10/25/13	2,500	0	0
164	Air Conditioner (Home Depot)	4/18/13	624	0	0
165	Air Conditioner (Home Depot)	4/24/13	624	0	0
166	Air Conditioner (Home Depot)	5/08/13	624	0	0
167	Range (Sears)	1/26/13	1,767	0	0
168	Refrigerator (Sears)	1/26/13	1,108	0	0
169	Chatham Porch Bench (Pottery Barn)	7/16/13	329	0	0
170	Dog: Abe (In-House Bred-Riley)	3/30/12	0	0	0
172	Dog: Angel (In-House Bred-Riley)	3/30/12	0	0	0
173	Dog: Arnold (In-House Bred-Riley)	3/30/12	0	0	0
174	Dog: Astro (In-House Bred-Riley)	3/30/12	0	0	0
176	Ipad (Macnet)	4/26/13	623	0	0
178	Apple iMac 21.5" Desktop (Amazon)	9/28/13	1,317	0	0
179	Apple iMac 21.5" Desktop (Amazon)	9/28/13	1,317	0	0
180	Dog: Ipo	1/17/14	3,216	0	0
181	Dog: Inca	1/17/14	3,216	0	0
182	Dog: Marshal	3/10/14	3,711	0	0
183	Dog: Maggie	3/10/14	3,711	0	0
184	Dog: Nani	3/25/14	3,678	0	0
185	Dog: Nelson	3/25/14	3,678	0	0
186	Dog: Ollie	10/29/14	2,752	0	0
190	Dresser (The Nest)	3/14/14	563	0	0
191	Storage Units/Counters Office (HomeDep/Lowe's)	7/21/14	1,625	0	0
192	Shed (built)	7/31/14	2,782	278	0
193	Water Tank Cover (Eco Products Maui)	7/26/14	980	98	0
194	Countertops-Mo's office (Maui Countertops)	10/17/14	635	0	0
195	Workshop (various)	12/19/14	9,443	944	0
196	Golf Cart (Rich Landry)	5/18/15	3,300	0	0
197	Dryer (Lowe's)	6/12/15	690	0	0
198	Washer & Dryer (Sears)	6/14/15	1,089	0	0
199	Wheelchair Accessible Trails	7/15/15	43,655	2,910	0
202	Dog: Ranger	1/26/15	3,330	0	0
203	Dog: Roxy	1/26/15	3,330	0	0
206	Dining Set (Costco)	3/08/15	1,771	0	0
207	Dog: Shae (In-House)	6/07/15	0	0	0
208	Dog: Skipper (In-House)	6/07/15	0	0	0
209	Dog: Shadow (In-House)	6/07/15	0	0	0
210	Dog: Sadie T. (In-House)	6/12/15	0	0	0
211	Dog: Soldier T. (In-House)	6/12/15	0	0	0
214	Dog: Walker (In-House)	2/11/16	0	0	0
215	Dog: Wesley (In-House)	2/11/16	0	0	0
216	Dog: Wilson (In-House)	2/11/16	0	0	0
217	Dog: Winnie (In-House)	2/11/16	0	0	0
218	Dog: Annie	4/05/16	3,660	166	0
219	Dog: Ava	4/05/16	3,322	118	0
221	Dog: Cassie	8/05/16	3,555	308	0
223	Dog: Davis (Donated by CCI)	11/01/16	3,000	357	0
224	Patio Furniture (Home Depot)	5/07/16	684	0	0
225	Honolulu Office LH Fee Purchase	1/22/16	132,978	3,325	0
226	Computer (Mac Made Easy Maui)	11/23/16	2,500	0	0
227	Courtyard ADH Improvements	2/27/17	4,072	271	0
228	ADNW - Furniture	11/15/17	16,679	2,383	0
229	ADNW Office - Building	7/10/17	647,364	16,184	0
230	ADNW Office - Land	7/10/17	205,380	0	0
231	ADNW Office Improvements	12/31/17	44,544	2,969	0
232	Dog: Jewel	5/16/17	3,715	531	0
233	Dogs: Jasper	5/16/17	3,715	531	0
235	Dogs: Kula	8/14/17	4,959	708	0
236	Dogs: Lance	9/01/17	5,004	715	0
237	Dogs: Lexie	9/01/17	5,004	715	0

Asset	Description	Date In Service	Cost	Tax	AMT
238	Dogs: Mac	12/12/17	2,724	389	0
239	Dogs: Maggie (2017)	12/12/17	2,724	389	0
241	Magicard ID Card Printer	2/01/18	936	134	0
242	2018 ADNW Office Improvements	12/31/18	87,414	5,827	0
244	2018 Dogs (Grouped)	12/31/18	33,929	4,847	0
245	Dog: Olive (Donated)	6/27/18	3,000	428	0
246	Dogs: Ruby (Donated)	8/22/18	3,000	429	0
247	Dogs: Brittany (Donated)	11/16/18	10,000	1,429	0
248	Dogs: Willow (Donated)	12/18/18	3,000	429	0
249	Dogs: Watson (Donated)	12/18/18	3,000	429	0
250	2019 Dogs (Grouped)	1/15/19	41,662	5,951	0
251	Wheelchair Accessible Trails	5/10/19	17,055	1,137	0
252	Furniture and Appliances	7/09/19	15,295	3,059	0
253	2019 ADNW Improvements	10/31/19	249,657	16,644	0
254	Furniture and Appliances	12/31/19	17,182	3,436	0
255	Portland Office	2/26/19	312,000	7,800	0
256	2019 Furnitures	12/31/19	8,954	1,791	0
258	Dog: Tori (Donated)	4/12/19	20,000	2,857	0
259	Dog: Nash (Donated)	9/18/19	20,000	2,857	0
260	Air Conditioner	7/03/20	13,021	1,302	0
261	Solar Panels	12/08/20	61,675	2,621	0
262	Fencing	3/03/20	9,844	984	0
263	Tree House	12/07/20	15,173	1,012	0
264	Computer - Helping PawS	5/28/20	1,500	300	0
265	Computer	11/13/20	1,100	220	0
266	Computer - Apple	12/07/20	1,301	260	0
267	2017 Honda	6/26/20	16,000	3,200	0
268	2017 Honda	6/24/20	18,100	3,620	0
269	2020 ADNW Building Improvements	12/31/20	42,350	2,823	0
270	Crate & Barrel	11/17/20	3,124	446	0
271	Wheelchairs	8/19/20	2,330	156	0
272	Wheelchairs	8/25/20	2,179	145	0
274	Custom Fees	12/31/19	830	118	0
275	A&L Customs	12/20/21	180	25	0
276	Career Dogs Australia	6/23/21	3,651	522	0
277	Career Dogs Australia	9/07/21	5,388	770	0
278	Career Dogs Australia	12/31/21	2,994	427	0
279	Dogtrainers Pet Trns (Bear, Betty & Gem)	7/21/21	3,294	470	0
280	Departure Pets (Monty & Maile)	12/02/21	365	53	0
281	Departure Pets (Monty & Maile)	12/08/21	870	124	0
282	Departure Pets (Monty & Maile)	12/13/21	3,207	458	0
283	Career Dogs Australia (Monty & Maile)	11/03/21	260	37	0
285	Artificial Grass	1/19/21	7,070	472	0
286	Office Furniture	3/19/21	196	24	0
287	Apple.com	3/19/21	2,603	521	0
288	Island Honda	7/30/21	119	23	0
289	Accura Maui	9/09/21	26	5	0
290	Mobility Scooters	10/07/21	678	68	0
291	Mobility Scooters	10/08/21	678	68	0
292	2021 ADNW Improvements	6/09/21	5,537	370	0
293	Furniture	10/22/21	7	0	0
294	Furniture	3/05/21	86	28	0
295	Furniture	11/29/21	1,902	380	0
297	Career Dogs Australia	1/13/22	4,901	700	0
298	Custom Fees	12/31/22	4,438	634	0
299	Career Dogs Australia	10/03/22	12,101	1,729	0
300	Career Dogs Australia	11/14/22	2,768	395	0
301	Career Dogs Australia	12/01/22	4,585	655	0
302	Career Dogs Australia	12/21/22	2,772	396	0
303	Lifestyle Furniture	3/14/22	2,083	417	0
	<b>Total Other Depreciation</b>		<u>4,055,722</u>	<u>149,255</u>	<u>0</u>
	<b>Total ACRS and Other Depreciation</b>		<u>4,055,722</u>	<u>149,255</u>	<u>0</u>

**Listed Property:**

200	Wheelchair Van (AMS Vans, Inc.)	5/26/15	33,266	1,975	0
29	2006 Ford Escape	7/31/06	26,468	0	0

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
240	ADNW - 2016 Ford Escape	7/25/18	21,324	0	0
			<u>81,058</u>	<u>1,975</u>	<u>0</u>
<b><u>Amortization:</u></b>					
257	Portland OFFICE- Closing Cost	2/26/19	5,108	128	0
			<u>5,108</u>	<u>128</u>	<u>0</u>
<b>Grand Totals</b>			<u>4,141,888</u>	<u>151,358</u>	<u>0</u>

<b>SCHEDULE G</b> <b>(Form 990 or 990-EZ)</b>	<b>Fundraising Other Events</b>	<b>2022</b>
For calendar year 2022, or tax year beginning _____, and ending _____		

Name **ASSISTANCE DOGS OF HAWAII** Employer Identification Number **99-0353694**

		(a) Other event	(b) Other event	(c) Other event	(d) Total other events (add col. (a) through col. (c))
		<u><b>CHARITY WALK -</b></u> <small>(event type)</small>	_____	_____	
Revenue	<b>1</b> Gross receipts	<b>14,255</b>			<b>14,255</b>
	<b>2</b> Less: Charitable contributions				
	<b>3</b> Gross income (line 1 minus line 2)	<b>14,255</b>			<b>14,255</b>
Direct Expenses	<b>4</b> Cash prizes				
	<b>5</b> Noncash prizes				
	<b>6</b> Rent/facility costs				
	<b>7</b> Food/beverages				
	<b>8</b> Entertainment				
	<b>9</b> Other expenses				

Form <b>990</b>	<b>Two Year Comparison Report</b>	<b>2021 &amp; 2022</b>
For calendar year 2022, or tax year beginning _____, ending _____		

Name

Taxpayer Identification Number

**ASSISTANCE DOGS OF HAWAII****99-0353694**

		2021	2022	Differences
<b>Revenue</b>	1. Contributions, gifts, grants .....	899,698	1,226,664	326,966
	2. Membership dues and assessments .....			
	3. Government contributions and grants .....	61,687		-61,687
	4. Program service revenue .....	2,525	500	-2,025
	5. Investment income .....	101,563	24,899	-76,664
	6. Proceeds from tax exempt bonds .....			
	7. Net gain or (loss) from sale of assets other than inventory .....	-1,262		1,262
	8. Net income or (loss) from fundraising events .....	117	8,362	8,245
	9. Net income or (loss) from gaming .....			
	10. Net gain or (loss) on sales of inventory .....	4,490	1,285	-3,205
	11. Other revenue .....			
	<b>12. Total revenue.</b> Add lines 1 through 11	<b>1,068,818</b>	<b>1,261,710</b>	<b>192,892</b>
<b>Expenses</b>	13. Grants and similar amounts paid .....			
	14. Benefits paid to or for members .....			
	15. Compensation of officers, directors, trustees, etc. ....	147,082	154,585	7,503
	16. Salaries, other compensation, and employee benefits .....	259,614	225,191	-34,423
	17. Professional fundraising fees .....			
	18. Other professional fees .....	118,263	83,467	-34,796
	19. Occupancy, rent, utilities, and maintenance .....	33,954	30,972	-2,982
	20. Depreciation and Depletion .....	151,219	158,571	7,352
	21. Other expenses .....	253,172	303,269	50,097
	<b>22. Total expenses.</b> Add lines 13 through 21	<b>963,304</b>	<b>956,055</b>	<b>-7,249</b>
	<b>23. Excess or (Deficit).</b> Subtract line 22 from line 12	<b>105,514</b>	<b>305,655</b>	<b>200,141</b>
<b>Other Information</b>	24. Total exempt revenue .....	1,068,818	1,261,710	192,892
	25. Total unrelated revenue .....			
	26. Total excludable revenue .....	107,433	35,046	-72,387
	27. Total assets .....	5,312,201	5,390,641	78,440
	28. Total liabilities .....	45,428	23,200	-22,228
	29. Retained earnings .....	5,266,773	5,367,441	100,668
	30. Number of voting members of governing body .....	5	5	
	31. Number of independent voting members of governing body .....	4	4	
	32. Number of employees .....	12	11	
33. Number of volunteers .....	150	50		

Form <b>990</b>	<b>Tax Return History</b>	<b>2022</b>
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Name <b>ASSISTANCE DOGS OF HAWAII</b>	Employer Identification Number <b>99-0353694</b>
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	2018	2019	2020	2021	2022	2023
Contributions, gifts, grants .....	874,490	864,254	1,047,394	961,385	1,226,664	
Membership dues .....						
Program service revenue .....	3,125	2,625	2,000	2,525	500	
Capital gain or loss .....	-2,364		-1,650	-1,262		
Investment income .....	32,739	34,460	22,371	101,563	24,899	
Fundraising revenue (income/loss) .....	-11,016	1,100	44,155	117	8,362	
Gaming revenue (income/loss) .....						
Other revenue .....	2,724	2,124	1,159	4,490	1,285	
<b>Total revenue</b> .....	<b>899,698</b>	<b>904,563</b>	<b>1,115,429</b>	<b>1,068,818</b>	<b>1,261,710</b>	
Grants and similar amounts paid .....						
Benefits paid to or for members .....						
Compensation of officers, etc. ....		140,875	119,000	147,082	154,585	
Other compensation .....	291,580	189,196	228,103	259,614	225,191	
Professional fees .....	116,564	109,210	133,568	118,263	83,467	
Occupancy costs .....	27,926	30,048	32,505	33,954	30,972	
Depreciation and depletion .....	101,780	117	148,560	151,219	158,571	
Other expenses .....	216,833	245,873	208,483	253,172	303,269	
<b>Total expenses</b> .....	<b>754,683</b>	<b>715,319</b>	<b>870,219</b>	<b>963,304</b>	<b>956,055</b>	
<b>Excess or (Deficit)</b> .....	<b>145,015</b>	<b>189,244</b>	<b>245,210</b>	<b>105,514</b>	<b>305,655</b>	
<b>Total exempt revenue</b> .....	<b>899,698</b>	<b>904,563</b>	<b>1,115,429</b>	<b>1,068,818</b>	<b>1,261,710</b>	
Total unrelated revenue .....						
Total excludable revenue .....	25,208	40,309	68,035	107,433	35,046	
Total Assets .....	4,634,263	4,940,778	5,254,182	5,312,201	5,390,641	
Total Liabilities .....	21,691	45,902	92,923	45,428	23,200	
Net Fund Balances .....	4,612,572	4,894,876	5,161,259	5,266,773	5,367,441	

**Federal Statements**

**Taxable Dividends from Securities**

Description	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
	\$ 24,899		14			
TOTAL	\$ 24,899					



## Federal Statements

**Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)**

Description	Total Expenses	Program Service	Management & General	Fund Raising
VETERINARIAN	\$ 41,534	\$ 41,534	\$	\$
OUTSIDE SERVICES	16,009	12,808	2,401	800
TOTAL	\$ 57,543	\$ 54,342	\$ 2,401	\$ 800

**Form 990, Part IX, Line 24e - All Other Expenses**

Description	Total Expenses	Program Service	Management & General	Fund Raising
DUES AND SUBSCRIPTIONS	\$ 9,857	\$ 8,871	\$ 986	\$
BANK CHARGES	5,387	2,693	1,347	1,347
TRAINING	532	532		
MISCELLANEOUS	484	242	121	121
PROFESSIONAL DEVELOPMENT	333	200	100	33
GET	46			46
TOTAL	\$ 16,639	\$ 12,538	\$ 2,554	\$ 1,547

## Federal Statements

Schedule A, Part II, Line 1(e)

Description	Amount
CONTRIBUTIONS	\$ 95,127
BAINBRIDGE COMMUNITY FOUNDATION	
CASH CONTRIBUTION	12,000
BENDON FAMILY FOUNDATION	
CASH CONTRIBUTION	5,000
BERGLUND, ANDERS	
CASH CONTRIBUTION	5,000
BLAINE FAMILY FUND	
CASH CONTRIBUTION	30,000
BREDHOFF, SARAH	
CASH CONTRIBUTION	5,140
BRUNO, GEORGE	
CASH CONTRIBUTION	15,000
CALDWELL, ROBERT & LINDA CHARITABLE	
CASH CONTRIBUTION	5,000
CHARLYNE MCKAIN	
CASH CONTRIBUTION	5,000
CLAUDIA GOODFELLOW	
CASH CONTRIBUTION	30,000
COOK, JERRY & GRETCHEN	
CASH CONTRIBUTION	10,400
COOKE FOUNDATION LIMITED	
CASH CONTRIBUTION	10,000
CRAIG, DANIEL & KELLY	
CASH CONTRIBUTION	5,000
DAVID DILL	
CASH CONTRIBUTION	5,000
DAVISCOURT, JEFF	
CASH CONTRIBUTION	5,000
DORR, SID & MERV CHARITABLE FUND	
CASH CONTRIBUTION	6,000
DOWLING, EVERETT & MEILEE WONG	
CASH CONTRIBUTION	17,000
EBERSOL, DICK AND SUSAN	
CASH CONTRIBUTION	43,070
ELLIOTT, PATRICK	
CASH CONTRIBUTION	6,000
ENGESSER, ANTHONY & THEA	

## Federal Statements

Schedule A, Part II, Line 1(e) (continued)

## Description

## Amount

CASH CONTRIBUTION	\$ 11,910
FRED BALDWIN FOUNDATION	
CASH CONTRIBUTION	10,000
GARMAR FOUNDATION	
CASH CONTRIBUTION	50,000
GARTNER, MICHAEL & BARBARA	
CASH CONTRIBUTION	60,000
GOODFELLOW BROS. INC.	
CASH CONTRIBUTION	5,000
GOODFELLOW, STEVE & TAMAR	
CASH CONTRIBUTION	5,000
HAWAII COMMUNITY FOUNDATION	
CASH CONTRIBUTION	31,370
GLORIA KOSASA GAINSLEY FUND	
CASH CONTRIBUTION	5,000
HAWAII HOTEL INDUSTRY FOUNDATION	
CASH CONTRIBUTION	30,049
HOGAN, GARY & NADINE	
CASH CONTRIBUTION	10,000
IOLANI SCHOOL	
CASH CONTRIBUTION	5,000
JACKSON FAMILY FOUNDATION	
CASH CONTRIBUTION	10,000
JACOBI FAMILY FOUNDATION	
CASH CONTRIBUTION	80,000
JAMES LIKES	
CASH CONTRIBUTION	5,000
JEFF GREEN	
CASH CONTRIBUTION	5,000
JEFF LIBBY	
CASH CONTRIBUTION	11,235
JOHN, RUS & EILEEN	
CASH CONTRIBUTION	30,350
JOSEPH LACKO	
CASH CONTRIBUTION	8,835
KAREN JOHNSON	
CASH CONTRIBUTION	11,400
KOCOUREK, WAYNE & NAN	

## Federal Statements

Schedule A, Part II, Line 1(e) (continued)

Description	Amount
CASH CONTRIBUTION KOSASA FOUNDATION	\$ 50,000
CASH CONTRIBUTION KOZAI, MORRIS & RENE	20,000
CASH CONTRIBUTION LAKESIDE INDUSTRIES INC	5,000
CASH CONTRIBUTION LEE, SHARON	20,000
CASH CONTRIBUTION LESLIE ANN YOKOUCHI	10,000
CASH CONTRIBUTION LESLIE-ANN YOKOUCHI FOUNDATION FUND	10,000
CASH CONTRIBUTION LLOYD & GLORIA LUKENS TRUST	15,550
CASH CONTRIBUTION LOUIS AND JOLENE COLE FOUNDATION	71,634
CASH CONTRIBUTION MACGILL 1969 TRUST	5,000
CASH CONTRIBUTION MCCOY, CRAIG & KATE	5,000
CASH CONTRIBUTION MOSLE, BARBARA & KAHAWAII, JOHN	29,768
CASH CONTRIBUTION NANCY WARSINSKE	5,000
CASH CONTRIBUTION NIETHAMMER, MICHAEL	12,000
CASH CONTRIBUTION ONE CALL FOR ALL	31,000
CASH CONTRIBUTION PAUL ROBINSON & KARIN KNIGHT CLAT	17,946
CASH CONTRIBUTION PRITT, MELANIE	21,000
CASH CONTRIBUTION REAP FOUNDATION	58,750
CASH CONTRIBUTION ROTARY CLUB OF BAINBRIDGE ISLAND	5,000
CASH CONTRIBUTION SCHAEFER, CAROLYN & GRAY, JACK	5,000

## Federal Statements

Schedule A, Part II, Line 1(e) (continued)

Description	Amount
CASH CONTRIBUTION SHIRAI, CHRIS & LINDA	\$ 5,000
CASH CONTRIBUTION THE OAK FOUNDATION	5,000
CASH CONTRIBUTION WAYNE & NAN KOCOUREK FOUNDATION	5,000
CASH CONTRIBUTION VALENTINES BENEFIT EVENT	51,750
CASH CONTRIBUTION ADNW FALL EVENT	62,012
CASH CONTRIBUTION	368
TOTAL	<u>\$ 1,226,664</u>

**Schedule A, Part II, Line 5 - Excess Gifts**

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
	\$ <u>677,986</u>	\$ <u>573,006</u>
TOTAL	\$ <u><u>677,986</u></u>	\$ <u><u>573,006</u></u>

**Federal Statements**

**Schedule A, Part II, Line 8(e)**

Description	Amount
	\$ 24,899
TOTAL	\$ <u>24,899</u>

**Schedule A, Part II, Line 9(e)**

Description	Amount
VALENTINES BENEFIT EVENT	\$ 11,202
COOKBOOK/CALENDAR SALES	1,285
CHARITY WALK - MAUI	14,255
ADNW FALL EVENT	-17,095
LESS: DEDUCTIONS	<u>-1,000</u>
TOTAL	\$ <u>8,647</u>

**Schedule A, Part II, Line 12 - Current year**

Description	Amount
PROGRAM SERVICE REVENUE	\$ 500
TOTAL	\$ <u>500</u>

**Valentines Benefit Event****Other Direct Fundraising or Gaming Expenses**

<u>Description</u>	<u>Amount</u>
SUPPLIES	\$ 8,091
BANK AND MERCHANT FEES	16,027
PROFESSIONAL FEES	<u>60,985</u>
TOTAL	<u>\$ 85,103</u>



**ADNW FALL EVENT****Other Direct Fundraising or Gaming Expenses**

<u>Description</u>	<u>Amount</u>
ADVERTISING	\$ 84
BANK AND MERCHANT FEES	5,037
SUPPLIES	27,279
OUTSIDE SERVICE	3,650
GIFT	420
TOTAL	<u>\$ 36,470</u>