

STATE OF HAWAII—DEPARTMENT OF TAXATION  
**PUBLIC SERVICE COMPANY TAX RETURN**

DO NOT WRITE OR STAPLE IN THIS SPACE

For calendar year 2008

or other tax year beginning \_\_\_\_\_, 2008 and ending \_\_\_\_\_, 20\_\_\_\_

TYPE OR PRINT	Name	Office Audit _____ Field Audit _____
	DBA or C/O	Hawaii Tax I.D. No. _____
	Number and Street	Federal Employer I.D. No. _____
	City, State, and ZIP Code	Amount paid with this return \$ _____
Year of Operation: Check if <input type="checkbox"/> 1st year <input type="checkbox"/> 2nd year <input type="checkbox"/> Final <input type="checkbox"/> Amended		<b>TOTAL TAX</b> (from page 2; <u>Do Not</u> enter TAX DUE amount) \$ _____

**SECTION I - COMPUTATION OF ADJUSTED GROSS INCOME**

**GROSS INCOME FROM PRECEDING TAXABLE YEAR BEGINNING IN 2007**

<b>1</b>	Gross Income from Public Utility Business (describe fully from what sources received)				
<b>a</b>	(1) Passenger Fares for Transportation Between Points on a Scheduled Route By Land....	<b>1a(1)</b>			
	(2) Worthless Accounts Charged Off for Net Income Tax Purposes (see Instructions) .....	<b>1a(2)</b>			
	(3) Adjusted Gross Income (line 1a(1) minus line 1a(2)) .....			<b>1a(3)</b>	
<b>b</b>	(1) Sales of Products or Services to Another Public Utility for Resale to the Consumer.....	<b>1b(1)</b>			
	(2) Worthless Accounts Charged Off for Net Income Tax Purposes (see Instructions) .....	<b>1b(2)</b>			
	(3) Adjusted Gross Income (line 1b(1) minus line 1b(2)) .....			<b>1b(3)</b>	
<b>c</b>	(1) Sales of Telecommunication Services to a Person Defined in Section 237-13(6)(D), HRS, for Resale to the Consumer .....	<b>1c(1)</b>			
	(2) Worthless Accounts Charged Off for Net Income Tax Purposes (see Instructions) .....	<b>1c(2)</b>			
	(3) Adjusted Gross Income (line 1c(1) minus line 1c(2)).....			<b>1c(3)</b>	
<b>d</b>	(1) _____	<b>1d(1)</b>			
	(2) Deduction and Exemption From Gross Income (see Instructions).....	<b>1d(2)</b>			
	(3) Adjusted Gross Income (line 1d(1) minus line 1d(2)) .....			<b>1d(3)</b>	
<b>2</b>	Equipment Rentals Received (attach schedule and describe fully) .....			<b>2</b>	
<b>3</b>	Joint Facility Rentals Received .....			<b>3</b>	
<b>4</b>	Non-Operating Income from Public Utility Business (attach schedule and describe fully) .....			<b>4</b>	
<b>5</b>	<b>TOTAL ADJUSTED GROSS INCOME</b> (add lines 1 through 4) .....			<b>5</b>	

**DECLARATION**

I declare, under the penalties set forth in section 231-36, HRS, that this return (including any accompanying schedules or statements) has been examined by me and, to the best of my knowledge and belief is a true, correct, and complete return, made in good faith, for the taxable year stated, pursuant to the Public Service Company Tax Law, Chapter 239, HRS.

**Please Sign Here**

Signature of officer \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

**Paid Preparer's Information**

Preparer's Signature and Print Preparer's Name	Date	Check if self-employed <input type="checkbox"/>	Preparer's identification number
Firm's name (or yours if self-employed), address, and Zip code		Federal E.I. No. _____	Phone No. _____

**SECTION II — COMPUTATION OF TAX** (Line references are to lines on page 1.) **Note: Enter TOTAL TAX amount on page 1.**

**PART I. — FOR PUBLIC UTILITIES TAXED UNDER SECTION 239-5 (a), (b) and (c), HRS.**

**Note: A Public Utility taxed under section 239-5(a), HRS, must also attach to this return year-end balance sheets, income statements, and an analysis of retained earnings for the utility and non-utility portions of the business.**

A	Line 5 less lines 1a(3), 1b(3), and 1c(3)		x 4.0% (fixed rate)	TAX AMOUNT	A		
B	Line 1a(3)		x 5.35% (fixed rate)	TAX AMOUNT	B		
C	Line 1b(3)		x .5 % (fixed rate)	TAX AMOUNT	C		
D	Line 1c(3)		x .5 %	TAX AMOUNT	D		
<b>E</b>	<b>TOTAL TAX</b> (add lines A, B, C, and D)				<b>E</b>		
F	Nonrefundable Tax Credit - Credit for Lifeline Telephone Service Subsidy (see Instructions) ...	F					
G	Nonrefundable Tax Credit - Ko Olina Resort and Marina Attractions and Educational Facilities Tax Credit (attach Form N-336) .....	G					
H	Total Nonrefundable Tax Credits (add lines F and G) .....	H					
I	Balance (line E minus line H, but not less than zero) .....	I					
J	Payment with Extension (attach Form N-755) (see Instructions) .....	J					
K	Tax Installment Payments (see Instructions) .....	K					
L	Total Payments (add lines J and K) .....	L					
M	TAX DUE (if line I is larger than L), enter AMOUNT OWED. (if line I exceeds \$100,000, see Instructions, When Is the Tax Payable) .....	M					
N	OVERPAYMENT (if line L is larger than line I), enter AMOUNT OVERPAID .....	N					

**PART II. — FOR PUBLIC UTILITIES TAXED ONLY UNDER SECTION 239-5(b), HRS.**

<b>A</b>	<b>TOTAL TAX</b> (line 1a(3) .....		x 5.35% (fixed rate))		<b>A</b>		
B	Nonrefundable Tax Credit - Ko Olina Resort and Marina Attractions and Educational Facilities Tax Credit (attach Form N-336) ..	B			B		
C	Balance (line A minus line B, but not less than zero) .....	C			C		
D	Payment with Extension (attach Form N-755) (see Instructions) .....	D					
E	Tax Installment Payments (see Instructions) .....	E					
F	Total Payments (add lines D and E) .....	F					
G	TAX DUE (if line C is larger than line F), enter AMOUNT OWED. (if line C exceeds \$100,000, see Instructions, When Is the Tax Payable)	G					
H	OVERPAYMENT (if line F is larger than line C), enter AMOUNT OVERPAID .....	H					

**PART III. — FOR PUBLIC UTILITIES TAXED ONLY UNDER SECTION 239-5(c), HRS.**

A	Line 1b(3) .....		x .5 % (fixed rate)	TAX AMOUNT	A		
B	Line 1c(3) .....		x .5 %	TAX AMOUNT	B		
<b>C</b>	<b>TOTAL TAX</b> (add lines A and B) .....				<b>C</b>		
D	Nonrefundable Tax Credit - Ko Olina Resort and Marina Attractions and Educational Facilities Tax Credit (attach Form N-336) ..	D			D		
E	Balance (line C minus line D, but not less than zero) .....	E					
F	Payment with Extension (attach Form N-755) (see Instructions) .....	F					
G	Tax Installment Payments (see Instructions) .....	G					
H	Total Payments (add lines F and G) .....	H					
I	TAX DUE (if line E is larger than line H), enter AMOUNT OWED. (if line E exceeds \$100,000, see Instructions, When Is the Tax Payable)	I					
J	OVERPAYMENT (if line H is larger than line E), enter AMOUNT OVERPAID .....	J					