



STATE OF HAWAII
Public Utilities Commission
465 South King St., Room 103
HONOLULU, HAWAII 96813
PHONE: (808) 586-2020 FAX: (808) 586-2066
E-MAIL: Hawaii.PUC@hawaii.gov
WEBSITE: <https://puc.hawaii.gov>

STATE OF HAWAII
PUBLIC UTILITIES COMMISSION
ANNUAL REPORT OF
RESELLERS AND VARIOUS TELECOMMUNICATIONS SERVICES

STATE EXACT NAME OF CARRIER

FOR YEAR ENDED DECEMBER 31, _____

NOTICE: Under Section 6-80-91 and 6-80-92, Hawaii Administrative Rules (HAR), an annual report is to be filed and is due no later than March 31 to cover the preceding calendar year's operations.

Mailing Address:

Hawaii Public Utilities Commission
465 South King Street
Kekuanaoa Building, Room 103
Honolulu, Hawaii 96813

Under Section 6-80-91(d), HAR, a copy of this annual report is also required to be filed with the Consumer Advocate.

Mailing Address:

Division of Consumer Advocacy
335 Merchant Street, Room 326
Honolulu, Hawaii 96813

ORGANIZATION AND CONTROL OF CARRIER

Note: If more space is required, attach schedule.

1. State full and exact name and Hawaii address of carrier.

Name: _____

Db, if any: _____

Business Address: _____

City: _____ State: ____ Zip: _____ Phone: _____

Insert an "X" if above address is within last 12 months ()

2. Mailing Address if different from above.

Address: _____

City: _____ State: _____ Zip: _____

Insert an "X" if above address is within last 12 months ()

- 2a. **Annual Financial Reports** (AFR) are available on our web site. Thus, if you need additional copies of this report, please go to: <http://puc.hawaii.gov>

- 2b. Email Address: _____

3. Effective Date of Hawaii Certification _____

4. State types of telecommunication services carrier is authorized to provide:

5. Island(s) in which telecommunications services are offered:

6. Have you filed a current tariff schedule with this office?

Insert an "X" : Yes () No ()

7. List companies controlled by carrier; also, address:

8. List persons or companies controlling carrier; also, address:

9. Insert an "X" next to type of entity and answer the applicable questions.

() Proprietorship:

Date of Formation: _____

Name of Proprietor: _____

() Partnership:

Date of Formation: _____

| Partners Name | Address | % Owned |
|---------------|---------|---------|
|---------------|---------|---------|

() Corporation () Subchapter S

Date of Incorporation: _____

Incorporated under the laws of: _____

**EXHIBIT A
CONTINUED**

| Directors Name | Address | Date Term Expires |
|----------------|---------|-------------------|
|----------------|---------|-------------------|

| Officers Name | Address | Date Appointed |
|---------------|---------|----------------|
|---------------|---------|----------------|

10. Location of carrier's records if different from business address:

11. External accountant:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

12. Preparer of this report:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

13. Insert an "X" as to whether books are kept on a calendar year () or fiscal year basis (). If fiscal year basis, state the period:_____. Note that this annual report must be filed on a calendar year basis.

CERTIFICATION

I certify that I am an officer, or duly authorized representative to file this annual report; that I have knowledge to the matters contained herein; that I have examined the foregoing report; that I believe to the best of my knowledge and information, all statements of fact contained in this annual report are complete and true.

CARRIER NAME: _____

CERTIFIER:

PRINTED NAME: _____

TITLE: _____

SIGNATURE: _____

DATE: _____

BALANCE SHEET
 As of December 31, _____

| | CURRENT YEAR | PRIOR YEAR |
|---|--------------|------------|
| ASSETS: | | |
| Regulated Plant Assets (Exh B-1): | | |
| Telecom PIS - Net | | |
| Telecom Plant Under Construction | | |
| Property Held For Future Use | | |
| Intangible Assets | | |
| Total Regulated Plant Assets | | |
| Current Assets: | | |
| Cash | | |
| Special Cash Deposits | | |
| Advances | | |
| Temporary Investments | | |
| Telecommunications A/R | | |
| Telecom A/C Recv Allowance | | |
| Other A/C Recv - Net | | |
| Notes Receivable - Net | | |
| Interest & Dividends Recv | | |
| Inventories | | |
| Prepayments | | |
| Other Current Assets (Exh B-2) | | |
| Total Current Assets | | |
| Noncurrent Assets: | | |
| Investments - Affiliated Companies | | |
| Other Investments | | |
| Deferred Tax Regulatory Asset | | |
| Other Deferred Charges (Exh B-2) | | |
| Other Jurisdictional Assets - Net | | |
| Total Noncurrent Assets | | |
| Total Net Nonregulated Assets | | |
| TOTAL ASSETS | | |
| Total Assets Must Equal Total Liabilities & Equity | | |

BALANCE SHEET
 As of December 31, _____

| | CURRENT YEAR | PRIOR YEAR |
|---|--------------|------------|
| LIABILITIES & EQUITY: | | |
| LIABILITIES: | | |
| Current: | | |
| Accounts Payable | | |
| Notes Payable | | |
| Customers Deposits | | |
| Long Term Debt - current due | | |
| Accrued Income Taxes | | |
| Accrued Other Taxes | | |
| Current Deferred Income Tax | | |
| Accrued Liabilities | | |
| Other Current Liabilities (Exh B-2) | | |
| Total Current Liabilities | | |
| Long Term Debt: | | |
| Funded Debt | | |
| Premium & Discount | | |
| Advances from Affiliates | | |
| Other Long Term Debt (Exh B-2) | | |
| Total Long Term Debt | | |
| Other Liabilities & Deferred Credits: | | |
| Other Long Term Liabilities (Exh B-2) | | |
| Unamortized Investment Tax Credits | | |
| Deferred Income Taxes - Noncurrent | | |
| Other Deferred Credits (Exh B-2) | | |
| Other Jurisd. Liab. & Deferred Credit | | |
| Total Other Liab. & Deferred Credit | | |
| (Enter data from Exhibit B-3 / Equity Section) | | |
| EQUITY | | |
| Total Corporation Equity | | |
| Total Partnership Equity | | |
| Total Proprietorship Equity | | |
| TOTAL LIABILITIES & EQUITY | | |
| Total Liabilities & Equity Must Equal Total Assets | | |

Reseller & Various Telecommunication Services
 Company: _____

EXHIBIT B-1
 PAGE 1 OF 2

SUPPORTING SCHEDULE TO BALANCE SHEET
 As of December 31, _____

| DESCRIPTION | TOTAL AT BEGINNING OF YEAR | ADDITIONS | RETIRALS | ADJUSTMENTS DEBIT/CREDIT | BALANCE AT CLOSE OF YEAR |
|----------------------------------|----------------------------|-----------|----------|--------------------------|--------------------------|
| REGULATED PLANT ASSETS: | | | | | |
| General Support Plant | | | | | |
| Switching Equipment | | | | | |
| Terminal Equipment | | | | | |
| Cable & Transport Systems | | | | | |
| Other (Specify) | | | | | |
| Total Telecom PIS | | | | | |
| | | | | | |
| Telecom Plant Under Construction | | | | | |
| Property Held for Future Use | | | | | |
| Intangible Assets | | | | | |
| Total Regulated Plant | | | | | |
| | | | | | |

NOTE: FOR PURPOSES OF THIS REPORT, AMOUNTS SHALL BE RECORDED AT ORIGINAL COST.

Reseller & Various Telecommunication Services
 Company: _____

EXHIBIT B-1
 PAGE 2 OF 2

SUPPORTING SCHEDULE TO BALANCE SHEET
 As of December 31, _____

| DESCRIPTION | TOTAL AT BEGINNING OF YEAR | DEPRECIATION ADDITIONS | RETIRALS | ADJUSTMENTS DEBIT/CREDIT | BALANCE AT CLOSE OF YEAR |
|-----------------------------------|----------------------------|------------------------|----------|--------------------------|--------------------------|
| DEPRECIATION/AMORTIZATION: | | | | | |
| General Support Plant | | | | | |
| Switching Equipment | | | | | |
| Terminal Equipment | | | | | |
| Cable & Transport Systems | | | | | |
| Other (Specify) | | | | | |
| Total Depr. - Telecom PIS | | | | | |
| | | | | | |
| Intangible Assets | | | | | |
| Total Depr./Amortz. | | | | | |
| | | | | | |

NOTE: FOR PURPOSES OF THIS REPORT, DEPRECIATION SHALL BE RECORDED AT A RATABLE BASIS.

Reseller & Various Telecommunication Services
 Company: _____

EXHIBIT B-2

**SUPPORTING SCHEDULE TO
 BALANCE SHEET
 As of December 31, _____**

| SPECIFY AND LIST BELOW: | CURRENT YEAR | PRIOR YEAR |
|--|--------------|------------|
| Other Current Assets: | | |
| | | |
| | | |
| | | |
| Total Other Current Assets | | |
| Other Deferred Charges: | | |
| | | |
| | | |
| | | |
| Total Other Deferred Charges | | |
| Other Long Term Debt: | | |
| | | |
| | | |
| Total Other Long Term Debt | | |
| Other Current Liabilities: | | |
| | | |
| | | |
| Total Other Current Liabilities | | |
| Other Long Term Liabilities: | | |
| | | |
| | | |
| Total Other Long Term Liabilities | | |
| Other Deferred Credits: | | |
| | | |
| | | |
| Total Other Deferred Credits | | |

**SUPPORTING SCHEDULE TO
 BALANCE SHEET
 As of December 31, _____**

| | CURRENT YEAR | | PRIOR YEAR |
|------------------------------------|-------------------------|--|-----------------------|
| CORPORATION EQUITY: | | | |
| Common Stock Issued | | | |
| Preferred Stock Issued | | | |
| Additional Paid In Capital | | | |
| Capital Stock Expense | | | |
| Other Credits/Debits | | | |
| Retained Earnings - Appropriated | | | |
| Retained Earnings - Unappropriated | | | |
| Total Corporation Equity | | | |

Note: Transfer entries to Exhibit B / Equity Section

| | CURRENT YEAR | | PRIOR YEAR |
|--|-------------------------|--|-----------------------|
| PARTNERSHIP AND SOLE PROPRIETOR EQUITY: | | | |
| Balance at Start of Year | | | |
| Additional Investments During Year | | | |
| Withdrawals | | | |
| Adjustments During Year | | | |
| Profit (Loss) For The Year | | | |
| Balance at Close of Year | | | |

Note: Transfer entries to Exhibit B / Equity Section

Reseller & Various Telecommunication Services
 Company: _____

EXHIBIT C

**INCOME STATEMENT - INTRASTATE OPERATIONS
 FOR PERIOD ENDED DECEMBER 31, _____**

| | CURRENT YEAR | PRIOR YEAR |
|--|---------------------|-------------------|
| INTRASTATE REVENUES: | | |
| Local Network: | | |
| Basic service | | |
| Public telephone | | |
| Private line | | |
| Shared tenant service | | |
| Other local exchange (Exh C-1) | | |
| Total Local Network Revenues | | |
| Interisland Long Distance (ILD) Network: | | |
| Private line | | |
| Measured telephone service | | |
| Wide are telephone service | | |
| Other ILD service (Exh C-1) | | |
| Total ILD Network Revenues | | |
| Network Access Revenues (Exh C-1) | | |
| Miscellaneous Revenues (Exh C-1) | | |
| Less: Uncollectibles (Exh C-1) | | |
| TOTAL INTRASTATE REVENUES | | |
| INTRASTATE EXPENSES: | | |
| Access interconnection expenses | | |
| Plant operation | | |
| Customer service | | |
| Selling and Marketing | | |
| Administrative and General | | |
| Depreciation and Amortization | | |
| Fees/Taxes Other Than Income Taxes | | |
| Income Taxes | | |
| Other intrastate expenses (Exh C-1) | | |
| TOTAL INTRASTATE EXPENSES | | |
| | | |
| NET INCOME (LOSS) - INTRASTATE OPER. | | |
| NET INCOME (LOSS) - OTHER OPER. (Exh C-1) | | |
| NET INCOME (LOSS) - TOTAL COMPANY | | |

Reseller & Various Telecommunication Services
 Company: _____

EXHIBIT C-1

**SUPPORTING SCHEDULE TO
 INCOME STATEMENT - INTRASTATE OPERATIONS
 FOR PERIOD ENDED DECEMBER 31, _____**

| SPECIFY AND LIST BELOW: | CURRENT YEAR | PRIOR YEAR |
|--|-----------------|---------------|
| Other Local Exchange Revenues: | | |
| | | |
| | | |
| | | |
| Total Other Local Exchange Revenues | | |
| Other ILD Service Revenues: | | |
| | | |
| | | |
| | | |
| Total Other ILD Service Revenues | | |
| Network Access Revenues: | | |
| | | |
| | | |
| Total Network Access Revenues | | |
| Miscellaneous Revenues: | | |
| | | |
| | | |
| Total Miscellaneous Revenues | | |
| Uncollectibles: | | |
| Telecommunication | | |
| Other than Telecommunication | | |
| Total Uncollectibles | | |
| | | |

**SUPPORTING SCHEDULE TO
 INCOME STATEMENT - INTRASTATE OPERATIONS
 FOR PERIOD ENDED DECEMBER 31, _____**

| SPECIFY AND LIST BELOW: | CURRENT YEAR | PRIOR YEAR |
|--|-----------------|---------------|
| Other Intrastate Expenses: | | |
| | | |
| | | |
| | | |
| | | |
| Total Other Intrastate Expenses | | |
| Net Income (Loss) From Other Operations: | | |
| | | |
| | | |
| Total Net Income (Loss) From Other Operations | | |

Reseller & Various Telecommunication Services

EXHIBIT D

Company: _____

**STATISTICAL DATA - INTRASTATE OPERATIONS
FOR PERIOD ENDED DECEMBER 31, _____**

| | CURRENT YEAR | PRIOR YEAR |
|--|---------------------|-------------------|
| NUMBER OF CUSTOMERS: | | |
| Local Network Service: | | |
| Basic service | | |
| Public telephone | | |
| Shared tenant service | | |
| Other local exchange (Specify): | | |
| | | |
| | | |
| Total Number of Customers | | |
| NUMBER OF CALLS: | | |
| Interisland Long Distance (ILD) Network Services: | | |
| Private line | | |
| Measured telephone service | | |
| Wide area telephone service | | |
| Other ILD service (Specify): | | |
| | | |
| | | |
| Total Number of Calls | | |