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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 black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2008

Open to Public Inspection

A Fo	rthe.	2008 cal	lendar yea	r, or tax year beginniı	ng 10-01-2008	and ending 09-30-2	2009	B 5	J
B Che	ck ıf a	pplicable	Please	C Name of organization CENTER FOR CULTURA	L AND TECHNICAL	INTERCHANGE BETWEEN	I EAST AND WES		dentification number
☐ Add	ress ch	nange	use IRS label or	INC Doing Business As				99-01616 E Telephone	
Nan	ne cha	nge	print or type. See	EAST-WEST CENTER				·	
Initi	al retu	rn	Specific Instruc-			not delivered to street ac	ddress) Room/s	(808) 944	-/111 pts \$ 32,549,803
Ten	mınatıc	on	tions.	1601 EAST-WEST ROAD)			d dross rece	pts # 32,349,003
☐ Ame	ended	return		City or town, state or c HONOLULU, HI 96848	ountry, and ZIP +	4	 		
┌ App	lication	n pending		HONOLOLO, HI 96848					
		Ī	F Nan	ne and address of Prir	ncıpal Officer		H(a) Is	this a group retu	rn for
				.ES MORRISON AS C ABOVE				filiates?	⊤Yes ▽ No
				LULU, HI 96848			н(b) A	re all affiliates inclu	ded?
I Tax	k-exem	npt status	▽ 501(c))(3) ◄ (ınsert no)	4947(a)(1) or \(\bigcup_{\text{\tint{\text{\tint{\text{\text{\text{\tint{\text{\text{\text{\text{\tint{\tint{\tint{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\tint{\text{\tint{\text{\text{\text{\text{\tint{\tint{\tint{\text{\tint{\text{\tint{\text{\text{\text{\tint{\text{\tint{\text{\tint{\text{\tint{\text{\text{\text{\tint{\text{\text{\tinit{\text{\text{\text{\text{\text{\text{\tinit{\text{\tinit}\tinit{\texi}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\text{\text{\texi}\text{\text{\texi}\text{\text{\texitile}}\text{\text{\texitile}}\text{\text{\texitilex{\texi{\texitilex{\texi}\til\text{\texi{\texi{\texi{\texi{\texi{\texi}\texit{\texi	- 527			st See instructions)
υ w	eb sit	e: ► www	EastWest	tCenter org				Group Exemption N	
K Type	e of org	ganization	▽ Corporat	ion trust association	other 🟲		L Year o	of Formation 1975	M State of legal domicile HI
Par	rt I	Sumn	narv						
-6				e organization's missi	on or most sig	nificant activities			
e	_			ations and understand	_		the nations (of A sia and the Pa	cific through
ě				, training, and researc	-				
Ē									
Governance	2	Check th	nis box 🗀	ıf the organizatıon dis	continued its o	perations or dispose	d of more tha	an 25% of its asse	ets
	3	Number	of voting r	nembers of the gover	ning body (Part	VI, line 1a)		. 3	17
20 ගු	4	Number	ofındepen	ident voting members	of the governi	ng body (Part VI, line	1b)	4	15
Activities &	5	Total nu	mber of en	nployees (Part V , line	2a)			5	232
ctiv	6	Total nu	mber of vo	lunteers (estimate if	necessary) .			6	4
₹		_		ted business revenue					229,577
	ь	Net unre	lated busi	ness taxable income	from Form 990	-T, line 34		7b	
								Prior Year	Current Year
au	8			d grants (Part VIII, lii	•			27,723,125	
ıпе	9	_		revenue (Part VIII, lı		2,645,934	2,458,321		
Ravenue	10			ne (Part VIII, column			•	645,464	250,465
_	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9d 12 Total revenue—add lines 8 through 11 (must equal Part						lum a	0	0
	12	12)	evenue—a	ad lines 8 through 11	(must equal Pa	art VIII, column (A),	line	31,014,523	32,549,803
	13	Grants	and simila	ar amounts paid (Part	IX, column (A)	, lınes 1–3)		5,080,756	5,000,539
	14	Benefit	s paid to o	or for members (Part I	X, column (A),	line 4)		0	0
eb.	15		s, other co	ompensation, employe	e benefits (Par	t IX, column (A), line	es 5-	15747.074	16.000.764
<u> </u>		10)				15,747,374	16,900,764		
Expenses	16a			raising fees (Part IX,				0	0
五	ь	•		penses, Part IX, column (D	-				
	17			(Part IX, column (A), I		•	,,	10,749,697	10,177,573
	18			add lines 13-17 (mu	-))	31,577,827	32,078,876
₩ ⁹⁷	19	Revenu	ie iess exp	penses Subtract line	18 from line 12			-563,304	470,927
19 0 19 0 19 0 19 0 19 0 19 0 19 0 19 0							Beg	inning of Year	End of Year
esse Baka	20		-	rt X, line 16)				33,612,988	33,950,778
Net Assets or Fund Balances	21		,	Part X, line 26)				3,317,348	3,204,120
	22			d balances Subtract	line 21 from lir	e 20		30,295,640	30,746,658
Par	t II		ature Blo						
				erjury, I declare that I have correct, and complete Dec					o the best of my knowledge arer has any knowledge
Plea	se	L	.,		manada en propan	(1	2010-04-15	
Sign		Signa	ture of office	er				Date	
Here	•	RICK	Y KUBOTA TI	REASURER					
			or print nam						
		Preparer's	s k			Date	Check if	Preparer's PTI	N (See Gen Inst)
Paid		signature					self- empolyed 🕨	-	
Prepa	rer's	Fırm's naı	me (or yours	5			1 . ,	•	
Use C		ıf self-em		*				EIN >	
								Phone no 🕨	
M 5 1/ 1	he IP	S dissure	e this ratio	rn with the preparer s	hown shours /	See instructions)			
нау [петК	J UISCUS!	อ เมเธ retu	iii wilii liie preparer s	помпароче/ (5	ee mstructions) .			1 162 1 110

Part III Statement of Program Service Accomplishments (See the instructions.)

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PROMOTE BETTER RELATIONS AND UNDERSTANDING BETWEEN THE UNITED STATES AND THE NATIONS OF ASIA AND THE PACIFIC THROUGH COOPERATIVE STUDY, TRAINING, AND RESEARCH

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 ┌ 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		

If "Yes," describe these changes on Schedule O

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts 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 \$ 9,628,515 including grants of \$ 804,621) (Revenue \$ 0

RESEARCH PROGRAM THE RESEARCH PROGRAM PROVIDES RIGOROUS AND CRITICAL ANALYSIS OF KEY REGIONAL ISSUES OF COMMON CONCERN TO THE ASIA PACIFIC REGION AND THE U S WITH A FOCUS ON ANALYSIS THAT WILL BE USEFUL IN INFORMING POLICY DECISIONS IT IS A SOURCE OF REGIONAL EXPERTISE IN SUPPORT OF ALL THE CENTER'S PROGRAMS AND ACTIVITIES THE PROGRAM SHARES ITS EXPERTISE IN MANY DISCIPLINES INCLUDING POLITICS, GOVERNANCE, AND SECURITY, POPULATION AND HEALTH, ENVIRONMENTAL CHANGE, VULNERABILITY, AND GOVERNANCE, AND ECONOMICS AND ENERGY WITH OTHERS IN THE U S AND ASIA PACIFIC REGION THE PROGRAM CONDUCTED TRIAL MONITORING OF THE EXTRAORDINARY CHAMBERS IN THE COURTS OF CAMBODIA (KHMER ROUGE) TRIALS INCLUDING PRODUCING "DUCH ON TRIAL" A COLLABORATIVE PRODUCTION OF THE CENTER'S ASIAN INTERNATIONAL JUSTICE INITIATIVE (AUI) AND KHMER MEKONG FILMS, THAT REACHED UP TO 3 MILLION VIEWERS EACH WEEK, OR 20 PERCENT OF CAMBODIA'S POPULATION THE PROJECT ALSO INVOLVED LEGAL TRAINING FOR TRIAL JUDGES AND PROSECUTION AND DEFENSE ATTORNEYS HAS ENHANCED THE SKILLS OF THE CAMBODIAN BAR AS WELL AS INCREASED THE OVERALL UNDERSTANDING OF THE TIAL PROCESS AND RULE OF LAW BY CAMBODIAN CITIZENS THE PROGRAM DEVELOPED THE ASIAN HIV/AIDS EPIDEMIC MODEL NOW USED INTERNATIONALLY WITH COLLABORATORS THROUGHOUT THE REGION, THE PROGRAM CONTINUES TO MAKE MAJOR CONTRIBUTIONS TO THE UNDERSTANDING OF HIV/AIDS IN ASIA AND THE PACIFIC AND TO THE IMPLEMENTATION OF EFFECTIVE INTERVENTIONS ITS WORK ON LAND COVER AND LAND USE CHANGE (LCLUC) AT MULTIPLE SITES IN MAINLAND SOUTHEAST ASIA HAS INFORMED POLICY MAKERS ACROSS THE REGION AS TO WHAT LCLUC MEANS FOR WATERSHED HYDROLOGY, RAINFALL PATTERNS AND LOCAL CARBON SEQUESTRATION TO DESIGN POLICIES APPROPRIATE FOR BOTH ECONOMIC GROWTH AND ENVIRONMENTAL STABILITY IT ALSO PERFORMED A STUDY EXPLORING THE IMPACT OF AN ASEAN ECONOMIC COMMUNITY THE USAID SPONSORED REPORT, THE IMPACT OF AN ASEAN ECONOMIC COMMUNITY THE USAID SPONSORED REPORT. THE IMPACT OF AN ASEAN ECONOMIC COMMUNITY THE USAID SPONSORED REPORT.

4b (Code) (Expenses \$ 6,662,524 including grants of \$ 3,211,073) (Revenue \$ 0)

EDUCATION PROGRAM THE CENTER OFFERS EDUCATIONAL OPPORTUNITIES FOR FUTURE LEADERS IN THE ASIA PACIFIC REGION AND THE U S IN AN ERA OF INCREASED SOCIAL, ECONOMIC AND TECHNOLOGICAL INTERDEPENDENCE GRADUATE DEGREE SCHOLARSHIPS AND CERTIFICATE PROGRAMS PREPARE STUDENTS AND PROFESSIONALS TO ADDRESS THE CHALLENGES AND COMPLEXITIES OF THE WORLD'S MOST DYNAMIC REGION UNDERGRADUATE DEGREE SCHOLARSHIPS BUILD AND STRENGTHEN THE BASE OF FUTURE LEADERS IN EAST TIMOR AND THE SOUTH PACIFIC IN FY 2009, 540 STUDENTS FROM MULTIPLE COUNTRIES ACROSS THE ASIA PACIFIC REGION AND U S , AS WELL AS CANADA, LATIN AMERICA, CENTRAL ASIA, EUROPE, AFRICA AND THE MIDDLE EAST, TOOK PART IN EWC EDUCATION PROGRAMS THE EDUCATION PROGRAM ALSO PROVIDED PROFESSIONAL DEVELOPMENT PROGRAMS FOR EDUCATORS TO STRENGTHEN THE CAPACITY OF INDIVIDUALS AND INSTITUTIONS TO CULTIVATE IN THEIR STUDENTS AN APPRECIATION AND UNDERSTANDING OF THE HISTORIES, CULTURES, AND CONTEMPORARY ISSUES OF THE ASIA PACIFIC THE PROGRAM ACCOMPLISHMENTS INCLUDE CONTINUED TRAINING OF FUTURE LEADERS IN THE ASIA PACIFIC LEADERSHIP PROGRAM, EDUCATORS AND CONSTITUENTS IN THE ASIAN STUDIES DEVELOPMENT PROGRAM, AND ASIAPACIFICED PROGRAM

4c (Code) (Expenses \$ 5,755,451 including grants of \$ 941,437) (Revenue \$ 0)

SEMINARS AND OUTREACH THE CENTER HAS DEVELOPED THE MOST EXTENSIVE PROGRAM OF TRANS-PACIFIC JOURNALIST AND EDITOR EXCHANGES IN THE REGION, WITH EXCHANGES FOR THE ASIA PACIFIC REGION AS A WHOLE (JEFFERSON FELLOWS), FOR ISLAMIC JOURNALISTS AND AMERICAN JOURNALISTS (THE SENIOR JOURNALIST SEMINAR), HEALTH JOURNALISTS, AND BILATERAL PROGRAMS WITH JAPANESE, KOREAN, AND CHINESE JOURNALISTS THE CENTER ALSO OFFERS SHORT-TERM POLICY SEMINARS WHERE SENIOR AND EMERGING LEADERS, AND BUSINESS PEOPLE FROM A VARIETY OF SECTORS FOCUS ON ISSUES OF REGIONAL CONCERN THE PROGRAM IS DEVELOPED AROUND A THEMATIC FOCUS AND PROVIDES PARTICIPANTS WITH AN OPPORTUNITY TO STRENGTHEN THEIR UNDERSTANDING OF ASIA PACIFIC-US DEVELOPMENTS AND CHALLENGES, BUILD A REGIONAL NETWORK AND TO BECOME LEADERS WITH A MORE INTERNATIONAL PERSPECTIVE EAST-WEST CENTER IN WASHINGTON SUPPORTS THE CENTER'S OVERALL MISSION THROUGH DIRECT WORK WITH US POLICYMAKERS AND OPINION LEADERS IN THE NATION'S CAPITAL IT FACILITATES UNDERSTANDING OF THE US POLICY PROCESS BY ASIA PACIFIC PARTICIPANTS THROUGH DIRECT INTERACTION WITH US POLICYMAKERS AN IMPORTANT CONTRIBUTION HAS BEEN A PROJECT (ASIA MATTERS TO AMERICA) DEMONSTRATING HOW ASIA PACIFIC MATTERS TO US COMMUNITIES BY COLLECTING DATA ON TRADE, EMPLOYMENT, CENSUS AND OTHER DATA AT THE COMMUNITY LEVEL IT IS A "ONE-STOP" HARD-COPY AND WEB SOURCE FOR RELEVANT INFORMATION, DATA AND ANALYSIS ON USAASIA INTERACTIONS, WITH EMPHASIS PLACED ON USER-FRIENDLY TEXT AND VISUAL GRAPHICS

(Code) (Expenses \$ 3,687,219 including grants of \$ 43,408) (Revenue \$ 2,458,321)

OTHER PROGRAMS OTHER PROGRAMS INCLUDES THE PACIFIC ISLANDS DEVELOPMENT PROGRAM (PIDP) AND AUXILIARY ENTERPRISE SERVICES PIDP IS AN ENDURING PARTNERSHIP BETWEEN THE EAST-WEST CENTER AND TWENTY-TWO ISLAND GOVERNMENTS IT IS THE ONLY PROGRAM OF ITS KIND BASED IN THE UNITED STATES, BRINGING TOGETHER HEADS OF GOVERNMENT FROM AN AREA THAT SPANS ONE-THIRD OF THE GLOBE IN ADDITION TO ITS POLICY-RELEVANT RESEARCH FINDINGS, THE PROGRAM PUBLISHES PACIFIC ISLANDS REPORT, A DAILY WEB-BASED AGGLOMERATION OF NEWS STORIES ABOUT THE REGION THAT IS REGULARLY ACCESSED BY OVER 2,000 READERS THE EAST-WEST CENTER IS WIDELY RECOGNIZED WITHIN THE PACIFIC ISLAND REGION AS THE LEADING U S ACADEMIC INSTITUTION WITH ISLAND INTERESTS WORK IN THE KINGDOM OF TONGA HAS DIRECTLY INFLUENCED DEMOCRATIC CONSTITUTIONAL REFORMS AND NEW ELECTORAL PREROGATIVES, TRANSFORMING THAT COUNTRY FROM A QUITE TRADITIONAL MONARCHY TO A FULLY FUNCTIONING DEMOCRACY FACILITATION OF DIALOGUE WITH FUI'S INTERIM MILITARY GOVERNMENT HAS HELPED TO MAINTAIN AN OPEN ENVIRONMENT FOR DISCUSSIONS WITH U S OFFICIALS AUXILIARY ENTERPRISES PROVIDE CONFERENCE FACILITIES AND DORMITORY HOUSING FOR STUDENTS AND CONFERENCE PARTICIPANTS THAT PARTICIPATE IN THE EAST-WEST CENTER'S PROGRAMS

4d Other program services (Describe in Schedule O)

4e

(Expenses \$ 3,687,219 including grants of \$ 43,408) (Revenue \$ 2,458,321)

Total program service expenses \$ 25,733,709 Must equal Part IX, Line 25, column (B).

Part IV	Checklist of	Required	Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 💋	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νo
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D. Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	Yes	
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νο
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section $501(c)(3)$ and $501(c)(4)$ organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I			No
Ь	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
		28a		Νo
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νo
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
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>	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No

Pa	rt V Statements Regarding Other IRS Filings and Tax Complian	се				
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal	1				
	of U.S. Information Returns. Enter -0- if not applicable					
		1a	158			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments	to ven	dors and reportable	4-	V	
3 -	gaming (gambling) winnings to prize winners?	i ·		1c	Yes	
2a	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		232			
ь	If at least one is reported in 2a, did the organization file all required federal employ					
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file the			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more dur return?			3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in So	hedule	0	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a over, a financial account in a foreign country (such as a bank account, securities a account)?	-	•	4a		No
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , <i>Financial Accounts</i> .	Report o	f Foreign Bank and			
5a	Was the organization a party to a prohibited tax shelter transaction at any time du	rıng the	tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibite	d tax sl	nelter transaction?	5b		Νo
c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exem Tax Shelter Transaction?</i>	pt Enti	ty Regarding Prohibited	5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		Νο
b	If "Yes," did the organization include with every solicitation an express statement were not tax deductible?	that su	ch contributions or gifts	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo comore?	ntrıbut	ion of \$75 or	7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services	provide	ed?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal prop	erty for	which it was required to			
	file Form 8282?	, .		7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to probe benefit contract?		niums on a personal	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a per	sonal b	enefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form	8899	as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization required?	file a F	orm 1098-C as	7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds					
	supporting organizations. Did the supporting organization, or a fund maintained by a excess business holdings at any time during the year?	spons	oring organization, have	8		
9	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds					
а				9a		
ь				9b		
10	Section 501(c)(7) organizations. Enter					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations Enter					
	Gross income from members or shareholders	 11a				
b	Gross income from other sources (Do not net amounts due or paid to other source against amounts due or received from them)					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıeu d	of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management
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			Yes	No				
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.							
1a	Enter the number of voting members of the governing body 1a 17							
b	Enter the number of voting members that are independent 15							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νo				
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?							
5	Did the organization become aware during the year of a material diversion of the organization's assets?							
6	Does the organization have members or stockholders?							
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?							
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? \cdot \cdot	7b		No				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	the governing body?	8a	Yes					
ь	each committee with authority to act on behalf of the governing body?	8b	Yes					
9a	Does the organization have local chapters, branches, or affiliates?	9a		o N				
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b						
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10		Νo				
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		Νο				

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed HI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply own website. vanother's website.
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Ricky Kubota 1601 East-West Road Honolulu, HI 968481601 (808) 944-7278

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- * List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

The check this box in the organization and i	(B) Average hours per week	(C) Position (check all that apply)							(E)	(F)
(A) Name and Title		Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

		(C) Position (check all that apply)							(E)	(F) Estimated amount of other compensation from the organization and related organizations
(A) Name and Title	(B) Average hours per week	Reportable compensation from relation or Draction of the period of the p	Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)						
			-							
			-		\vdash					
					\vdash					
			-		\vdash		\vdash			
			+	\vdash	\vdash					
1b Total							-	2,064,647	7 (278,575
2 Total number of individuals (including	those in 1	a) who i	recei	ved	mor	e thai	n \$1	00.000 in reportabl	e	1

Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization►29

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
4	For any individual listed online 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such			
	ındıvıdual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services			
	rendered to the organization? If "Yes," complete Schedule J for such person	5		Νo

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
UNIVERSITY OF HAWAII 2530 DOLE ST SAKAMAKI D200 HONOLULU, HI 96822	RESEARCH, SECURITY, IT AND LIBRARY SERVICES	1,151,741
METROPOLITAN MAINTENANCE INC 1113 ARTESIAN ST HONOLULU, HI 96826	MAINTENANCE SERVICES	893,854
PROGRESSIVE COMMUNICATIONS LLC 1724 COLBURN STREET HONOLULU, HI 96819	INSTALL COMMUNICATION SYSTEM	186,256
WORLD AGROFORESTRY CHIANG MAI UNIVERSITY PO BOX 267 CMU POST OFFICE CHIANG MAI 50200 TH	RESEARCH SERVICES	138,260
ALEXANDRU PREISS DBA KENNEDY AND PREISS DESIGN 2118 KUHIO AVE SUITE 701 HONOLULU, HI 96815	DESIGN & PRODUCTION OF NEWSLETTERS	136,832
Total number of independent contractors (including those in 1) who received more than \$ from the organization	' '	5

Page **9**

Part Stat

				(A) Total Revenue	(B) Related or	(C) Unrelated	(D) Revenue
					Exempt Function Revenue	Business Revenue	Excluded from Tax under IRC 512, 513, or 514
18.6	1a	Federated campaigns 1a	0				
nts int	ь	Membership dues	0				
Contributions, gifts, grants and other similar amounts	с	1b Fundraising events	0				
Tકે, વ્યુ		1c	204 202				
<u>_</u> = <u>=</u>	d	Related organizations1d Government grants (contributions) 1e	24,348,447				
ons sin	e	Government grants (contributions) 1e All other contributions, gifts, grants, and	5,188,267				
흕	f	sımılar amounts not ıncluded above					
	g	1f Noncash contributions included in					
Se		lines 1a-1f \$0					
	h	Total (Add lines 1a-1f)	 •	29,841,017			
			Business Code				
Program Service Revenue	2a	AUXILIARY ENTERPRISES	721,000	2,207,161	0	0	2,207,161
£8.	b	CONFERENCE SERVICES	532,000	229,577	0	229,577	0
93	С	PUBLICATIONS AND OTHER	511,130	21,583	21,583	0	0
erv	d						
8	е						
Ē.	f	All other program service revenue		0	0	0	0
£	g	Total. Add lines 2a-2f					
	3	Investment income (including divid	dends, interest				
		other sımılar amounts)	[250,465	0	0	250,465
	4	Income from investment of tax-exempt be	ond proceeds	0	0	0	0
	5	Royalties	•	0	0	0	0
		(ı) Real	(II) Personal				
	6a	Gross Rents	. ,				
	ь	Less rental expenses					
	с	Rental income 0	0				
	d	or (loss) Net rental income or (loss)					
		(ı) Securities	▶				
	7a	Gross amount (1) Securities	(II) O ther				
		from sales of assets other					
		than inventory Less cost or					
	ь	other basis and sales expenses					
	с	Gain or (loss) 0	0				
	d	Net gain or (loss)					
	8a	Gross income from fundraising	. •				
		events (not including					
<u>Φ</u>		\$ of contributions reported on line					
듄		1c) See Part IV, line 18					
Şe.		Attach Schedule G If total exceeds \$15,000 a					
Other Revenue	ь	Less direct expensesb	0				
Ě	С	Net income or (loss) from fundraisi	ng events				
0	9a	Gross income from gaming	P				
		activities See part IV, line 19					
		Complete Schedule G ıf total exceeds \$15,000					
		, <i>,</i> a					
	ь	Less direct expensesb					
	С	Net income or (loss) from gaming a	activities • -				
	10a	Gross sales of inventory, less returns and allowances	-				
		а					
	ь	Less cost of goods sold b					
	С	Net income or (loss) from sales of					
	11~	Miscellaneous Revenue	Business Code				
	11a b						
	С						
				0	0	0	0
	d	All other revenue	,				
	е	Total. Add lines 11a-11d	· · · \$ 0				
	12	Total Revenue. Add lines 1h, 2g, 3	, 4, 5, 6d, 7d,	32,549,803	21,583	229,577	2,457,626
		8c, 9c, 10c, and 11e	. ▶				

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re				
Do r	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 governments and organizations in the U S See Part IV, line 21	0	0		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	4,624,176	4,624,176		
3	Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	376,363	376,363		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	662,149	0	662,149	0
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	12,987,502	10,397,857	0	203,593
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,681,374	1,286,118	368,918	26,338
9	Other employee benefits	740,633	618,205	111,447	10,981
10	Payroll taxes	829,106	648,247	167,486	13,373
11	Fees for services (non-employees)				
а	Management	0	0	0	0
ь	Legal	15,487	10,252	5,235	0
c	Accounting	46,000	35,213	10,787	0
d	Lobbying	0	0	0	0
e	Professional fundraising See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other	1,909,533	1,700,214	209,319	0
12	Advertising and promotion	0	0	0	0
13	Office expenses	1,792,300	1,270,309	521,987	4
14	Information technology	21,612	11,900	9,712	0
15	Royalties	0	0	0	0
16	Occupancy	0	0	0	0
17	Travel	1,180,121	1,012,662	167,459	0
18	Payments of travel or entertainment expenses for any Federal, state or local public officials	0	0	0	0
19	Conferences, conventions and meetings	201,725	148,382	53,343	0
20	Interest	0	0	0	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	1,122,724	859,445	263,279	0
23	Insurance	244,945	180,570	64,375	0
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	SUBCONTRACTS	1,064,064	1,064,064	0	0
ь	CLEANING & MAINTENANCE SERVICES	940,878	707,168	233,710	0
c	UTILITIES	878,377	370,095	508,282	0
d	REPAIRS & MAINTENANCE	467,785	209,945	257,840	0
e	SECURITY AND OTHER EXPENSES	211,222	128,105	83,117	0
f	All other expenses	80,800	74,419	6,381	0
25	Total functional expenses. Add lines 1 through 24f	32,078,876	25,733,709	6,090,878	254,289
26	Joint Costs. Check if if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X	Balance	Sheet
	Balance	SHEET

						(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing				25,601	1	42,969
	2	Savings and temporary cash investments				2,078,437	2	691,830
	3	Pledges and grants receivable, net		1,384,994	3	1,902,814		
	4	Accounts receivable, net				303,452	4	166,595
	5	Receivables from current and former officers, directors, trustees other related parties Complete Part II of Schedule L			es or	0	5	0
	6	Receivables from other disqualified persons (as defined under sepersons described in section 4958(c)(3)(B) Complete Part II of 3		0	6	0		
	7	Notes and loans receivable, net		0	7	0		
	8	Inventories for sale or use				0	8	0
ø,	9	Prepaid expenses and deferred charges				369,548	9	928,305
ssets	10a					·	_	·
Ass		Land, buildings, and equipment cost basis	10a		28,467,240			
	Ь	Less accumulated depreciation <i>Complete Part VI of</i> Schedule D	10ь		15,545,591	13,054,922	10c	12,921,649
	11	Investments—publicly traded securities	LOD		10,040,001	15,476,872		15,947,642
	12	Investments—other securities See Part IV, line 11 Complete Pa		0	12	10,047,042		
	13	Schedule D Investments—program-related See Part IV, line 11 Complete Part IV of Schedule D .			13			
						0		
	14	Intangible assets				010 102	14	•
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D				919,162	15	1,348,974
	16	Total assets. Add lines 1 through 15 (must equal line 34)				33,612,988	16	33,950,778
	17	Accounts payable and accrued expenses .		1,568,058	17	1,170,429		
	18	Grants payable		0	18	0		
	19	Deferred revenue		553,767	19	599,368		
	20	Tax-exempt bond liabilities				0	20	0
S	21	Escrow account liability Complete Part IV of Schedule D				0	21	0
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Ē		persons Complete Part II of Schedule L				0	22	0
_	23	Secured mortgages and notes payable to unrelated third parties				0	23	0
	24	Unsecured notes and loans payable		0	24	0		
	25	Other liabilities Complete Part X of Schedule D		1,195,523	25	1,434,323		
	26	Total liabilities. Add lines 17 through 25		3,317,348	26	3,204,120		
		Organizations that follow SFAS 117, check here ▶ 🔽 and comp	lete li	nes 27			-	·
\$ ⊕3		through 29, and lines 33 and 34.						
Balance	27	Unrestricted net assets				27,135,474	27	27,239,067
<u>8</u>	28	Temporarily restricted net assets		1,768,094	28	2,102,503		
귤	29	Permanently restricted net assets		1,392,072	29	1,405,088		
r Fund		Organizations that do not follow SFAS 117, check here ► □ and lines 30 through 34.						
S Of	30	Capital stock or trust principal, or current funds			30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31			
200	32	Retained earnings, endowment, accumulated income, or other fu			32			
Net /	33	Total net assets or fund balances				30,295,640	33	30,746,658
ž	34	Total liabilities and net assets/fund balances				33,612,988		33,950,778
Da	-+ VT	Financial Statements and Reporting						

ParitXI	Financial	Statements	and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes" to lines 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?	2c	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes	

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As Filed Data -

DLN: 93493130009360

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

		ne organizat i						Em	ployer ide	nt if icat io	n number	
CENTI INC	ER FOR	CULTURAL AND	O TECHNICAL INTER	RCHANGE BETWEEN EAST AND WE	ST				016160	,		
	rt I	Peason	for Public Cl	harity Status (to be co	mnleted	hy all or	nanizatio		-0161603 Instruct			
				ation because it is (Please					monuce	10113)		
1			•	urches, or association of ch		-	•		Α)(i).			
2	,	•		ion 170(b)(1)(A)(ii). (Attac				-, -(-,(-,	/(-/-			
3	Ė			e hospital service organizati			tion 170(b	o)(1)(A)(i	ii). (Attac	h Schedul	e H)	
4	,	•	•	zation operated in conjunction			-				•	
-			name, city, and	,					_, _(_,(_,	(,(,-		
5	Г	•	, ,,		university	v owned o	r operated	l by a gove	rnmental	unit desc	ribed in	
_	•		on 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	Г			overnment or governmental	unıt descr	ıbed ın Se	ction 170	(b)(1)(A)	(v).			
7	Ţ	•	· -	ally receives a substantial p						n the aene	ral public	
	,			(Complete Par			,			J	,	
8	Г		-	ed in Section 170(b)(1)(A)	•	plete Pari	tII)					
9	Ē		•	ally receives (1) more than		•	-	ontribution	ıs, membe	rship fees	, and gross	
		receipts fro	om activities rel	ated to its exempt functions	—subject	to certair	n exceptio	ns, and (2) no more	than 331/	3% of	
		ıts support	from gross inve	estment income and unrelate	ed busines	s taxable	ıncome (l	ess section	on 511 tax	c) from bu	sinesses	
		acquired by	the organization	on after June 30, 1975 See	Section 5	09(a)(2).	(Complete	e Part III)			
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See Se	ction 509	(a)(4). (Se	e instruc	tions)	
11	Γ	An organiza	atıon organızed	and operated exclusively for	r the bene	fit of, to p	erform the	functions	of, or to o	arry out t	he purposes of	
				orted organizations describe						Section 5	09(a)(3). Check	
		the box tha		type of supporting organization Type II c		•	nes 11e t nally Integ	_	_		III - Other	
_	_	·	• •	rtify that the organization is					d Spa or mor			
е	'	•	-	agers and other than one or			•			•	•	
		section 50		. .		,	-				(,(-,	
f				d a written determination fro	m the IRS	that it is	a Type I,	Type II o	r Type III	supportin	ng organization,	
_		check this		as the organization accepted	d any gift i	or contribi	ution from	any of the			ı	
g		following pe		as the organization accepted	a any gne	or continu		any or the	•			
		(i) a perso	n who directly o	r indirectly controls, either a	alone or to	gether wit	th persons	describe	d ın (ıı)		Yes No	
		and (111) bel	low, the governı	ng body of the the supported	d organiza	tion?				11g	(i)	
		(ii) a family	/ member of a p	erson described in (i) above	?					11g(ii)	
		(iii) a 35%	controlled enti	ty of a person described in (ı) or (ıı) al	oove?				11g(iii)	
h		Provide the	following inforr	nation about the organizatio	ns the org	anızatıon	supports					
							1		T			
		ame of	(ii) EIN	(iii) Type of organization	(iv) I			ou notify		s the	(vii) A mount of	
		oorted nization		(described on lines 1-9 above or IRC section	organız col (i) l		_	inization i) of your		ation in rganized	support?	
	o i gaii			(See Instructions))	your go		supp		in the			
					docur	nent?						
					Yes	No	Yes	No	Yes	No		
								1				

Total

Support Schedule for Organizations Described in IRC 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.)

	(Complete only if you chec	ked the box o	n line 5, 7, or	8 of Part I.)				
Pi	ıblic Support							
Cale	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	35,487,624	36,722,113	28,497,068	27,723,125	2	29,841,017	158,270,947
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0		0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	О	0	0	0		0	0
4	Total. Add line 1-3	35,487,624	36,722,113	28,497,068	27,723,125	2	29,841,017	158,270,947
5	The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column							0
6	(f) Public Support subtract line 5 from line 4							158,270,947
T	otal Support						_	
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4	35,487,624	642,244	28,497,068	27,723,125	2	9,841,017	158,270,947
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	373,496	642,244	823,707	645,464	250,465		2,735,376
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0		0	0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	265,636	200,319	252,648	284,097		251,160	1,253,860
11	Total Support (Add lines 7 through 10)							162,260,183
12	Gross receipts from related activities, etc	(See instruction	s)			12		171,912,930
13	First Five Years. If the Form 990 is for the organization, check this box and stop here	organızatıon's fii	st, second, thire	d, fourth, or fifth	tax year as a 5	01(c)(▶ □
C	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6		ed by line 11 co	lumn (f))		14		97.541 %
15	Public Support Percentage for 2007 Sched	ule A , Part IV - A	, line 26f			15		90.11 %
16a	33 1/3% Test - 2008. If the organization did			nd line 14 is 33	3 1/3% or more.		this box	
b 17a	and stop here. The organization qualifies as 33 1/3% Test - 2007. If the organization did box and stop here. The organization qualifies 10% Facts and Circumstances Test - 2008. more, and if the organization meets the "facts and circumst 10% Facts and Circumstances Test - 2007.	a publicly supp d not check the es as a publicly : If the organization ets and circumst ances" test The	orted organizati box on line 13 o supported organ on did not check ances" test, che e organization qu	on r 16a, and line 1 ization a box on line 1: eck this box and ualifies as a pub	L5 is 33 1/3% o 3, 16a, or 16b a I stop here. Exp licly supported	r more and line lain in organi:	, check thi e 14 is 10° Part IV ho zation	% or ow the ►
18	more, and if the organization meets the "fact the organization meets the "facts and circu Private Foundation. If the organization did instructions	ts and circumst mstances" test	ances" test, che The organizatio	eck this box and in qualifies as a	l stop here. Exp publicly suppoi	laın ın ted org	Part IV ho janization	

Pa	Support Schedule for On (Complete only if you ched				(2)		
	ction A. Public Support		_	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") Gross receipts from admissions,						
2	merchandise sold or services performed,						
	or facilities furnished in any activity that						
	is related to the organization's tax-						
	exempt purpose						
3	Gross receipts from activities that are						
	not an unrelated trade or business under						
	section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
_	organization without charge						
6	Total Add lines 1-5						
7a	A mounts included on lines 1, 2, and 3						
	received from disqualified persons Amounts included on lines 2 and 3						
D	received from other than disqualified						
	persons that exceed the greater of 1% of						
	the total of lines 9, 10c, 11, and 12 for						
	the year or \$5,000						
С	Total of lines 7a and 7b						
8	Public Support (Substract line 7c from						
_	line 6)						
То	tal Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	A mounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after 30 June, 1975		+				
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or loss						
	from the sale of capital assets						
	(Explain in Part IV)						
13	Total Support (Add lines 9, 10c, 11 and						
	12)						
14	First Five Years If the Form 990 is for the	organızatıon's fı	rst, second, thir	d, fourth, or fifth	ntax year as a 5	01(c)(3) organı	zation,
	check this box and stop here						▶ □
	manufaction of Dublic Compact Days						
15	mputation of Public Support Perc Public Support Percentage for 2008 (line		dod by line 12 o	olumn (fl)		T 4= T	
			•	.orumm (1))		15	
16	Public Support Percentage for 2007 Sche	dule A , Part IV -	A, line 27g			16	
		D					
Co	mputation of Investment Income Investment Income Percentage for 2008 (ne 13 column /f	<u> </u>	17	
	-			-	"	17	
ΤQ	Investment Income Percentage from 2007	ocnequie A , Pa	TLIV-A, IINE 2/	H		18	

19a 33 1/3% Tests - 2008. 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 **33 1/3% Tests - 2007.** 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

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

Schedule A (Form 990 or 990-EZ) 2008

▶□

Part IV

Supplemental Information. Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)

Facts and Circumstances Test

PART II, LINE 10 OTHER INCOME INCLUDES CONFERENCE SERVICES, PUBLICATIONS AND MISCELLANEOUS INCOME

Schedule A (Form 990 or 990-EZ) 2008

Software ID: Software Version:

EIN: 99-0161603

Name: CENTER FOR CULTURAL AND TECHNICAL

INTERCHANGE BETWEEN EAST AND WEST

INC

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa											
		(C) Position (check all that apply)							(E)	(F)	
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations	
Mr Puongpun Sananıkone , Chaır	2 00	Х						0	0	0	
Mr Roland Lagareta , Vice Chair	2 00	Х						0	0	0	
Mr Eddie Flores Jr , Director	2 00	Χ						0	0	0	
Ms Miriam Hellreich , Director	2 00	Χ						0	0	0	
Ms Jean E Rolles , Director	2 00	Х						0	0	0	
Mr Theodore Em-Po Liu , Director	2 00	Х						0	0	0	
Ms Lorı Forman , Dırector	2 00	Χ						0	0	0	
Mr Theodore B Lee , Director	2 00	Χ						0	0	0	
Mr S Linn Williams , Director	2 00	Χ						0	0	0	
The Honorable Patrıcıa F Saıkı , Dırector	2 00	Χ						0	0	0	
Dr Mıchael K Young , Dırector	2 00	Χ						0	0	0	
Mr Tarun Das , Director	2 00	Χ						0	0	0	
Mr Daniel R Fung , Director	2 00	Χ						0	0	0	
Dr Il SaKong , Dırector	2 00	Χ						0	0	0	
Mr Tadashı Yamamoto , Dırector	2 00	Χ						0	0	0	
The Honorable Tun Daım Zaınuddın , Dırector	2 00	Х						0	0	0	
The Honorable Linda Lingle , Director	2 00	Χ						0	0	0	
Dr David McClain , Director	2 00	Х						0	0	0	
M R C Greenwood PhD , Director	2 00	Х						0	0	0	
Ms Maura Pally , Director	2 00	Х						0	0	0	
Dr Charles E Morrison , President	40 00			Х				249,526	0	24,630	
Mr Ricky Kubota , Treasurer	40 00			Х				117,825	0	15,825	
Mr Clinton Nonaka , Asst Treasurer	40 00			Х				99,214	0	13,786	
Ms Carleen Gumapac , Secretary	40 00			Х				71,002	0	9,871	
Ms Carol Fox , Program Director	40 00				Χ			168,938	0	22,527	
Dr Nancy Lewis , Program Director	40 00				Χ			164,879	0	22,527	
Mr Raymond Burghardt , Program Dırector	40 00				Х			155,836	0	20,632	
Dr Sitiveni Halapua , Program Director	40 00				Х			155,218	0	20,499	
Dr Terance Bigalke , Program Director	40 00				Χ			152,808	0	20,645	
Dr Alagappa Muthiah , Researcher	40 00					Х		156,869	0	25,890	

Form 990, Part VII - Section Aaa

		(C) Position (check all that apply)				I				(F)	
(A) Name and Title	(B) Average hours per week	or Dr.		Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations		
Dr Robert Retherford , Researcher	40 00					Х		147,325	0	20,499	
Dr Allen Clark , Researcher	40 00					Х		144,969	0	19,973	
Dr Jefferson Fox , Researcher	40 00					Х		141,347	0	18,396	
Mr Ernest Mark Borthwick , Program Director	40 00	·				х		138,891	0	22,875	

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

SCHEDULE D (Form 990)

> ▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

Open to Public Inspection

	me of the organization ITER FOR CULTURAL AND TECHNICAL INTERCHANGE BETWEEN EA	AST AND WEST	Employer identification number
INC		INTERPOLATION OF THE PROPERTY	99-0161603
Pa	organizations Maintaining Donor A organization answered "Yes" to Form 99		inds or Accounts. Complete if the
	organization answered Tes to Form 9.	(a) Donor advised funds	(b) Funds and other accounts
L	Total number at end of year		
2	Aggregate Contributions to (during year)		
3	Aggregate Grants from (during year)		
1	Aggregate value at end of year		
5	Did the organization inform all donors and donor adv funds are the organization's property, subject to the		or advised Yes No
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber impermissible private benefit?		may be
Pa	rt II Conservation Easements. Complete	ıf the organization answered "Yes" to	Form 990, Part IV, line 7.
L 2	Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual	ion or pleasure) Preservation of an Preservation of cei	historically importantly land area rtified historic structure of a conservation easement
	on the last day of the tax year		Held at the End of the Year
а	Total number of conservation easements		2a
ь		-	2b
	Total acreage restricted by conservation easement		
с	Number of conservation easements on a certified h	• •	2c
d	Number of conservation easements included in (c)	acquired after 8/17/06	2d
3	Number of conservation easements modified, transfe the taxable year ►	erred, released, extinguished, or terminate	d by the organization during
1	Number of states where property subject to conserv	ation easement is located ►	
5	Does the organization have a written policy regardin enforcement of the conservation easements it holds		itions, and Yes No
5	Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during the	year ►
7	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the ye	ear ► \$
3	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	tion Yes No
•	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation eases	the footnote to the organization's financial	·
ar	Complete if the organization answered		or Other Similar Assets.
La	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fire	l for public exhibition, education or researc	th in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research in	•
	(i) Revenues included in Form 990, Part VIII, line 1	L	► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of art, hist following amounts required to be reported under SFA		r financial gain, provide the
а	Revenues included in Form 990, Part VIII, line 1		► \$
ь	Assets included in Form 990, Part X		▶ -\$

Par	TITLE Organizations Maintaining Collections of I	<u>Art, His</u>	tori	<u>cal Treasu</u>	ires, or Othe	<u>r Similar Asse</u>	ets (co	ntınued)
3	Using the organization's accession and other records, check items (check all that apply)	any of th	e foll	owing that ar	e a sıgnıfıcant u	se of its collectio	n	
а	Public exhibition	d	Γ	Loan or exc	hange programs			
b	Scholarly research	e	\sqcap	Other				
c	Preservation for future generations							
4	Provide a description of the organization's collections and ex Part XIV	kplaın hov	v they	further the o	organization's ex	empt purpose in		
5	During the year, did the organization solicit or receive donat assets to be sold to raise funds rather than to be maintained						Yes	┌ No
Par	t IV Trust, Escrow and Custodial Arrangemen				nızatıon answ	ered "Yes" to F	orm 9	90,
	Part IV, line 9, or reported an amount on Form	•						
1a	Is the organization an agent, trustee, custodian or other inte included on Form 990, Part X?		for c	ontributions (or other assets r		Yes	☐ No
b	If "Yes," explain why in Part XIV and complete the following	table						
						A mo	unt	
с	Beginning balance				1c			
d	Additions during the year				1d			
е	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on Form 990, Part X,	, line 21?				Γ	Yes	┌ No
	If "Yes," explain the arrangement in Part XIV							
Pa	rt V Endowment Funds. Complete If the organiza (a)Current Yeal		were)Prior `			t IV, line 10. Three Years Back (e	NEOUr V	nare Back
1a	Beginning of year balance		J FTIOI	rear (c)	vo rears back [(u)	Tillee Teals back (e	2) 1 Out 10	cars back
 b	Contributions	0						
c		,016						
d	Grants or scholarships	0						
e	Other expenditures for facilities	0						
	and programs							
f	Administrative expenses	0						
g	End of year balance	·						
2	Provide the estimated percentage of the year end balance he	eld as						
а	Board designated or quasi-endowment 🕨 0 %							
b	Permanent endowment ► 1 00 %							
c	Term endowment ► 0 %							
3a	Are there endowment funds not in the possession of the organization by	inization 1	that a	re held and a	dministered for	the	V	Na.
	(i) unrelated organizations		_			3a(i)	Yes	No No
	(ii) related organizations					3a(ii)		No
ь	If "Yes" to 3a(II), are the related organizations listed as requ					3b	Yes	
4	Describe in Part XIV the intended uses of the organization's	endowme	ent fu	nds				
Par	t VI Investments—Land, Buildings, and Equip	ment. S	ee F	orm 990, P	art X, line 10.			
	Description of investment			Cost or other (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Boo	ok value
1a	Land			0	0			(
b	Buildings			0	0	0		(
c	Leasehold improvements			0	25,348,597	13,426,206	1	1,922,391
d	Equipment			0	2,781,249	2,119,385		661,864
e	Other			0	337,394	0		337,394

12,921,649

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1		
(a) Description of security or cateory (including name of security)	(b) Book value		d of valuation year market value
Financial derivatives and other financial products		Cost of end-of-	year market value
Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Total (column (b) should equal from 550 franch, con (b) mic 12 f			
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value		d of valuation
(a) Beschption of investment type	(B) Book value	Cost or end-of-	year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	15		
Part IX Other Assets. See Form 990, Part X, II (a) Descri			(b) Book value
	ption		
DUE FROM OTHERS			1,346,984
DEPOSITS			1,990
Total. (Column (b) should equal Form 990, Part X, col.(B) line.	15.)		1,348,974
Part X Other Liabilities. See Form 990, Part X			
(a) Description of Liability	(b) A mount		
Federal Income Taxes	0		
ACCRUED VACATION	1,252,315		
DUE TO EAST-WEST CENTER FOUNDATION	171,867		
OTHER LIABILITIES	10,141		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	1,434,323		

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	32,549,803
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	32,078,876
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	470,927
4	Net unrealized gains (losses) on investments	4	-19,910
5	Donated services and use of facilities	5	C
6	Investment expenses	6	C
7	Prior period adjustments	7	C
8	Other (Describe in Part XIV)	8	-25,793
9	Total adjustments (net) Add lines 4 - 8	9	-45,703
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	425,224
Par	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial		32,662,671
_	statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)	20	112,868
e 2	·	2e 3	
3	Subtract line 2e from line 1		32,549,803
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0		
a b	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 0 Other (Describe in Part XIV) 4b 0		
	Add lines 4a and 4b	4c	
с 5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	32,549,803
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses		
1	Total expenses and losses per audited financial statements	1	32,237,447
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		, ,
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	158,571
3	Subtract line 2e from line 1	3	32,078,876
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 0		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	C
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	32,078,876
Par	t XIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
SchD_P05_S00_L04	Schedule D, Part V, Line 4	STRENGTHEN RESEARCH AND EDUCATION CAPABILITIES FOR THE CENTER'S PROGRAMS
SchD_P10_S00_L00	Schedule D, Part X	UNCERTAIN TAX POSITIONS UNDER FIN 48, NOT APPLICABLE
SchD_P11_S00_L08	Schedule D, Part XI, Line 8	CHANGE IN NET INTEREST IN OTHER RELATED 501(C)(3) 132,778 AMORTIZATION OF FACILITY NOT OWNED BY ORGANIZATION -158,571
SchD_P12_S00_L02d	Schedule D, Part XII, Line 2d	CHANGE IN NET INTEREST IN OTHER 501(C)(3) - EAST- WEST CENTER FOUNDATION
SchD_P13_S00_L02d	Schedule D, Part XIII, Line 2d	AMORTIZATION OF FACILITY PROVIDED BY STATE AGENCY AT NO CHARGE AND NOT OWNED BY ORGANIZATION

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493130009360

2008

OMB No 1545-0047

Statement of Activities Outside the United States

Department of the Treasury Internal Revenue Service

SCHEDULE F (Form 990)

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

Open to Public Inspection

	ne of the orga		D TECHNICAL I	· -	Employer ide	entification number		
INC		ULTURALANI	DIECHNICALI	NIERCHANGE	BETWEEN EAST AND WES) I	99-016160	3
P			mation on Ac		ide the United State:	s. Complete	e if the organ	nization answered
1	For grant	makers. Doo e, the grante	es the organiza ees' eligibility fo	ation maintain i or the grants oi	records to substantiate rassistance, and the se	election crite	rıa used to a	ward
2	For grant n United Sta		be in Part IV the	organization's pi	rocedures for monitoring tl	he use of grai	nt funds outsid	le the
3	Activites	er Region (U	se Schedule F-1	(Form 990) ıf ad	ditional space is needed)			
	(a) Re	gıon	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	ıs a progr describe sı	ty listed in (d) am service, pecific type of s) in region	(f) Total expenditures in
Eas	t Asıa and th	e Pacıfic	0	0	Program Services	SEE STATE 4	MENTS 1 TO	1,036,283
	ope (includin enland)	g Iceland and	0	0	Program Services	SEE STATE 4	MENTS 1 TO	135,609
Sou	th Asia		0	0	Program Services	SEE STATE 4	MENTS 1 TO	68,196
Car	th America (i iada and Mex United State	ıco, but not	0	0	Program Services	SEE STATE 4	MENTS 1 TO	20,921
Sou	th A merica	-	0	0	Program Services	SEE STATE 4	MENTS 1 TO	6,036
Sub	-Saharan Afr	rica	0	0	Program Services	SEE STATE 4	MENTS 1 TO	924

Totals .

1,267,969

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
	_							
	_							
	_							
	_							-
	_							_
	_							
	_							
	_							
	_							
	_							
	_							
	_							
	_							

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Use Schedule F-1 (Form 990) if additional space is needed.

	, ,				T		
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
EDUCATIONAL SCHOLARSHIPS AND FELLOWSHIPS AWARDED TO INDIVIDUALS	East Asia and the Pacific	126	283,634		0		
EDUCATIONAL SCHOLARSHIPS AND FELLOWSHIPS AWARDED TO INDIVIDUALS	South Asia	32	44,937		0		
EDUCATIONAL SCHOLARSHIPS AND FELLOWSHIPS AWARDED TO INDIVIDUALS	Russia and the newly independent States	4	17,325	СНЕСК	0		
SCHOLARSHIPS AND	Europe (including Iceland and Greenland)	5	15,148	CHECK	0		
EDUCATIONAL SCHOLARSHIPS AND FELLOWSHIPS AWARDED TO INDIVIDUALS	North America (including Canada and Mexico, but not the United States)	2	12,550	CHECK	0		
EDUCATIONAL SCHOLARSHIPS AND FELLOWSHIPS AWARDED TO INDIVIDUALS	Middle East and North Africa	1	1,906	CHECK	0		
EDUCATIONAL SCHOLARSHIPS AND FELLOWSHIPS AWARDED TO INDIVIDUALS	Central America and the Caribbean	1	633	CHECK	0		
EDUCATIONAL SCHOLARSHIPS AND FELLOWSHIPS AWARDED TO INDIVIDUALS	Sub-Saharan Africa	1	230	CHECK	0		
		·		•		Calcad	COO) 2000

Part IV Supplemental Info		
Complete this part t	o provide the information required ReturnReference	In Part I, line 2, and any other additional information. Explanation
SchF_P01_S00_L02	Schedule F, Part I, Line 2	SCHOLARSHIPS AND FELLOWSHIPS IN THE USA (AND OUTSIDE THE USA) PAID DIRECTLY TO THE INDIVIDUAL IS DISBURSED ON A MONTHLY PAYMENT SCHEDULE MOST BENEFITS INCLUDING HOUSING, TUITION, AND TRANSPORTATION BENEFITS ARE PAID DIRECTLY TO THE VENDOR BY THIS ORGANIZATION MONITORING IS PERFORMED MONTHLY AND BENEFITS TO THE INDIVIDUAL IS CONTINUED BASED UPON SATISFACTORY PERFORMANCE BY THE INDIVIDUAL EDUCATIONAL SCHOLARSHIPS AND FELLOWSHIPS AWARDED TO INDIVIDUALS ARE BASED UPON ACADEMIC OR PROFESSIONAL QUALIFICATIONS WITH SELECTION MADE BY A COMMITTEE INFORMATION FOR APPLICATIONS ARE AVAILABLE ON THE CENTER'S WEBSITE AS WELL AS OUTREACH CENTERS IN ASIA AND THE PACIFIC REGIONS THE COMMITTEE IS COMPOSED OF ORGANIZATION PERSONNEL IN THE AREA OF INTEREST OR STUDY

Software ID: 08000095

Software Version: v1.00

EIN: 99-0161603

Name: CENTER FOR CULTURAL AND TECHNICAL INTERCHANGE BETWEEN EAST AND WEST

INC

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
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efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493130009360 OMB No 1545-0047

2008

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Governments and Individuals in the U.S.

Grants and Other Assistance to Organizations,

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

Open to Public Inspect ion Employer identification number

CENTER FOR CULTURAL AND INC	O TECHNICAL INT	ERCHANGE BETWEEN	I EAST AND WEST			99-0161603	
1 Does the organization m	aintain records to s		t of the grants or assista				
2 Describe in Part IV the o	organization's proc	edures for monitoring th	ne use of grant funds in t	he United States			
Form 990, Part Part IV and Sch	IV, line 21 for ai nedule I-1 if addi	ny recipient that reco tional space is	eived more than \$5,0	00. Check this box	tes. Complete if the of the of the office of	eived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
2 Enter total number of seconganizations					•		
For Paperwork Reduction Act No	tice, see the Instruc	tions for Form 990.		Cat No 50055	P	Sc	hedule I (Form 990) 2008

	,			
rt III	Grants and Other Assistance to Individuals in the United States	. Complete if the organization	answered "Yes" on Fo	orm 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	-		

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
SCHOLARSHIPS AND FELLOWSHIPS GRANTS	943	4,624,176	0		

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Ident if ier	Return Reference	Explanation
SchI_P01_S00_L02	, ,	SCHOLARSHIPS AND FELLOWSHIPS IN THE USA (AND OUTSIDE THE USA) ARE PAID DIRECTLY TO THE INDIVIDUAL PAYMENTS ARE MADE ON A MONTHLY PAYMENT SCHEDULE MOST BENEFITS INCLUDING HOUSING, TUITION, AND TRANSPORTATION BENEFITS ARE PAID DIRECTLY TO THE VENDOR BY THIS ORGANIZATION MONITORING IS PERFORMED MONTHLY AND BENEFITS TO THE INDIVIDUAL IS CONTINUED BASED UPON SATISFACTORY PERFORMANCE BY THE INDIVIDUAL

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Schedule J

Department of the Treasury

Name of the organization

ın Part III

Internal Revenue Service

(Form 990)

As Filed Data -

DLN: 93493130009360

Employer identification number

OMB No 1545-0047

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008 No 1545-0047

Open to Public Inspection

CENTER FOR CULTURAL AND TECHNICAL INTERCHANGE BETWEEN EAST AND WEST 99-0161603 Part I **Questions Regarding Compensation** Νo Yes Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items Housing allowance or residence for personal use First class or charter travel Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain **1**b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Written employment contract Compensation committee Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a Receive a severance payment or change of control payment? Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo 4c Νo Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III 501(c)(3) and 501(c)(4) organizations only must complete lines 5-8. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe

Νo

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & (iii) Other compensation		compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Dr Charles E Morrison	(1) (11)	240,735 0	0	8,791 0	24,630 0	7,002 0	281,158 0	185,111
Dr Nancy Lewis	(1) (11)	144,243 0	0 0	20,636	22,527 0	8,600 0	196,006 0	127,76
Dr Terance Bıgalke	(I) (II)	132,183 0	0 0	20,625	20,645 0	4,410 0	177,863 0	117,090
Dr Sitiveni Halapua	(ı) (ıı)	147,901 0	0 0	7,317 0	20,499 0	3,275 0	178,992 0	(
Mr Raymond Burghardt	(ı) (ıı)	148,468 0	0 0	7,368 0	20,632 0	701 0	177,169 0	(
Ms Carol Fox	(ı) (ıı)	148,302 0	0 0	20,636 0	22,527 0	3,340 0	194,805 0	127,76
Dr Alagappa Muthiah	(1) (11)	136,213 0	0 0	20,656 0	25,890 0	8,039 0	190,798 0	121,966
Dr Robert Retherford	(I) (II)	140,008 0	0 0	7,317 0	20,499 0	8,415 0	176,239 0	120,259
Dr Allen Clark	(ı) (ıı)	137,840 0	0 0	7,129 0	19,973 0	8,399 0	173,341 0	(
Dr Jefferson Fox	(ı) (ıı)	134,781 0	0 0	6,566 0	18,396 0	6,814 0	166,557 0	(
Mr Ernest Mark Borthwick	(ı) (ıı)	130,726 0	0 0	8,165 0	22,875 0	755 0	162,521 0	(
	(ii) (i)							
	(ii)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanation
	Part I, Line 1a	THE CENTER PROVIDES A DISCRETIONARY SPENDING ACCOUNT, HOUSING ALLOWANCE, AND MEMBERSHIP IN THE PACIFIC CLUB TO THE PRESIDENT PREMIUM TRAVEL MAY BE PROVIDED TO THE ORGANIZATION'S EMPLOYEES TRAVEL POLICIES ADHERES TO THE U SEPEDERAL GOVERNMENT TRAVEL POLICIES AND GUIDELINES
-		

Schedule J (Form 990) 2008

Software ID: 08000095

Software Version: v1.00

EIN: 99-0161603

Name: CENTER FOR CULTURAL AND TECHNICAL INTERCHANGE BETWEEN EAST AND WEST

Return to Form

INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		I incentive I		(iii) Other compensation		benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Dr Charles E Morrison	(ı) (ıı)	240,735 0	0	8,791 0	24,630 0	7,002 0	281,158 0	185,111 0
Dr Nancy Lewis	(ı) (ıı)	144,243 0	0 0	20,636 0	22,527 0	8,600 0	196,006 0	127,761 0
Dr Terance Bigalke	(1) (11)	132,183	0	20,625 0	20,645 0	4,410	177,863 0	117,090 0
Dr Sitiveni Halapua	(1) (11)	147,901 0	0 0	7,317 0	20,499 0	3,275 0	178,992 0	0
Mr Raymond Burghardt	(1) (11)		0 0	7,368 0	20,632 0	701 0	177,169 0	0
Ms Carol Fox	(ı) (ıı)	148,302 0	0 0	20,636 0	22,527 0	3,340 0	194,805 0	127,761 0
Dr Alagappa Muthiah	(ı) (ıı)	136,213 0	0 0	20,656 0	25,890 0	8,039 0	190,798 0	121,966 0
Dr Robert Retherford	(1) (11)	140,008 0	0 0	7,317 0	20,499 0	8,415 0	176,239 0	120,259 0
Dr Allen Clark	(1) (11)	137,840 0	0 0	7,129 0	19,973 0	8,399 0	173,341 0	0
Dr Jefferson Fox	(ı) (ıı)	134,781 0	0	6,566 0	18,396 0	6,814 0	166,557 0	0 0
Mr Ernest Mark Borthwick	(I) (II)		0	8,165 0	22,875 0	755 0	162,521 0	0

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No 1545-0047

2008

Open to Public Inspection

Name of the organization CENTER FOR CULTURAL AND TECHNICAL INTERCHANGE BETWEEN EAST AND WEST INC Employer identification number

99-0161603

ldentifier	Return Reference	Explanation
F990_P06_S0A_L07a	Form 990, Part VI, Section A, Line 7a	THE ORGANIZATION WAS ESTABLISHED AS AN EDUCATIONAL NONPROFIT PUBLIC CORPORATION BY ACT 82, SESSIONS LAWS OF HAWAII 1975, BY THE LEGISLATURE OF THE STATE OF HAWAII PURSUANT TO AUTHORIZING LEGISLATION PUBLIC LAW 86-472, CHAPTER VII, ENACTED BY THE UNITED STATES CONGRESS THE LEGISLATION PROVIDED THAT THE BOARD OF GOVERNORS (BOARD) WILL CONSIST OF 18 MEMBERS, 17 VOTING AND 1 NON-VOTING MEMBER IT ALSO PROVIDED THAT THE GOVERNOR OF HAWAII AND THE UNITED STATES SECRETARY OF STATE SHALL BE EX-OFFICIO MEMBERS OF THE BOARD AND THAT THEY EACH MAY APPOINT 5 MEMBERS TO THE BOARD THE REMAINING 5 MEMBERS ARE ELECTED BY THE MEMBERS OF THE BOARD

ldentifier	Return Reference	Explanation
F990_P06_S0A_L10	Form 990, Part VI, Section A, Line 10	ACCOUNTING PREPARES AND REVIEWS THE TAX RETURN AND THE TREASURER PERFORMS A FINAL REVIEW AND SIGNS THE RETURN A PORTAL HAS BEEN ESTABLISHED TO ENABLE ALL BOARD MEMBERS TO REVIEW THE ORGANIZATION'S TAX RETURN PRIOR TO IT BEING FILED WITH THE IRS

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	AN ANNUAL SURVEY IS SENT TO OFFICERS, BOARD MEMBERS, AND KEY EMPLOYEES REQUESTING DISCLOSURE OF INTERESTS WITH THE ORGANIZATION THAT COULD GIVE RISE TO CONFLICTS OF INTERESTS ALL EMPLOYEES ARE PROVIDED A HANDBOOK AND ARE ANNUALLY REMINDED OF THE CONFLICT OF INTEREST POLICY VIA ELECTRONIC MAIL

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	COMPENSATION FOR ALL EMPLOYEES INCLUDING OFFICERS AND KEY AND HIGHLY COMPENSATED EMPLOYEES IS ESTABLISHED BY A UNION BARGAINING AGREEMENT THAT USES THE FEDERAL OFFICE OF PERSONNEL MANAGEMENT CLASSIFICATIONS AND PAY SCALES TO THE EXTENT POSSIBLE THE PRESIDENT'S COMPENSATION USES THE SAME FEDERAL CRITERIA AND IS DETERMINED BY THE BOARD OF GOVERNORS EXECUTIVE COMMITTEE

ldentifier	Return Reference	Explanation
F990_P06_S0C_L19	Form 990, Part VI, Section C, Line 19	THE ITEMS ARE AVAILABLE UPON REQUEST

DLN: 93493130009360

2008

OMB No 1545-0047

Open to Public
Inspection

Related Organizations and Unrelated Partnerships

Department of the Treasury

(Form 990)

SCHEDULE R

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

ternal Revenue Service					
ame of the organization ENTER FOR CULTURAL AND TECHNICAL INTERCHANGE BETWEEN EAST AND WEST				Employer identific	ation number
The Talentification of Dispersed of Entities				99-0161603	
Part I Identification of Disregarded Entities	T	Т		T	
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(B) (C) Primary activity Legal domicile (state or foreign country)		(E) nd-of-year assets	(F) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizat	ions		_	_	
(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
EAST-WEST CENTER FOUNDATION					
1601 EAST-WEST ROAD HONOLULU, HI96848 99-0218752	SUPPORT RELATED 501 (c)(3)	ні	501(c)(3)	9	N/A

(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, investment, unrelated)		(F) Share of total income		(G) Share of end-of- year assets	(H) Disproprtionate allocations?		(I) Code V—UBI amount on Box 20 of K-1	(J) General of managin partner?	
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organization		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

No

No No

No No

No No No No

No

No No

No

No No

r O ther transfer of cash or property from other organization(s)

Part	V	Transactions with Related Organizations		
N	ote. C	Complete line 1 if any entity is listed in Parts II, III or IV		Yes
1 Dur	ing the	e tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a F	Receip	ot of (i) ınterest (ii) annuıtıes (iii) royaltıes (iv) rent from a controlled entıty	1a	
b (Gift, gr	rant, or capital contribution to other organization(s)	1b	
c G	iıft, gr	rant, or capital contribution from other organization(s)	1c	Yes
d L	.oans	or loan guarantees to or for other organization(s)	1d	
e L	.oans	or loan guarantees by other organization(s)	1e	
f S	ale of	f assets to other organization(s)	1f	
g F	urcha	ase of assets from other organization(s)	1g	
h E	xchai	nge of assets	1h	
i L	ease	of facilities, equipment, or other assets to other organization(s)	1i	
j L	ease	of facilities, equipment, or other assets from other organization(s)	1 j	
k F	erforr	mance of services or membership or fundraising solicitations for other organization(s)	Lk	Yes
I P	erform	nance of services or membership or fundraising solicitations by other organization(s)	1I	Yes
m S	harıng	g of facilities, equipment, mailing lists, or other assets	1m	
n S	harın	g of paid employees	1n	
o F	Reimbi	ursement paid to other organization for expenses	10	
p F	Reimbi	ursement paid by other organization for expenses	1р	Yes
q C) ther	transfer of cash or property to other organization(s)	1q	
-			\rightarrow	

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 other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)	EAST-WEST CENTER FOUNDATION	с	304,303
(2)	EAST-WEST CENTER FOUNDATION	k	133,482
(3)	EAST-WEST CENTER FOUNDATION	ı	84,325
(4)	EAST-WEST CENTER FOUNDATION	р	133,482
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership

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) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		(E) Share of end-of-year assets			(G) Code V—UBI amount on Box 20 of K-1	(H) General or managing partner?	
			Yes	No		Yes	No		Yes	No		
			•	•		•		Cabadul	. D / Farms	9907 2008		