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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2013

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except private foundations) ▶ Do not enter Social Security numbers on this form as it may be made public.

Open to Public

		ue Service	► Information about Form 990 and its instructions is at www.	rs.gov/form9	90	Inspection
<u>A</u>	For the	2013 cale	ndar year, or tax year beginning , 2013, and end	ling		, 20
В	Check if	applicable:	C Name of organization Hawaii Business Roundtable		D Employe	or identification number
	Address	change	Doing Business As			99-0236405
	Name ch	nange	Number and street (or P.O. box if mail is not delivered to street address) Room/	surte	E Telephor	e number
	Initial ret	um	1003 Bishop Street	2630		808-532-2244
	Terminat	ted	City or town, state or province, country, and ZIP or foreign postal code	77		
	Amende	d return	Honolulu, HI 96813		G Gross re	ceipts \$ 337055
	Applicati	ion pending	F Name and address of principal officer:	Hial is this a	group return for s	ubordinates? Yes V No
			Gary K. Kai, 1003 Bishop St., Ste. 2630, Honolulu, HI 96813.		• .	included? Yes No
1	Tax-exe	mot status:	☐ 501(c)(3) ☐ 501(c) (6) 4 (insert no) ☐ 4947(a)(1) or ☐ 527			list. (see instructions)
J	Website		v.hibusinessroundtable.org	H(c) Grou	p exemption	number ▶
_	~		✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form			of legal domicile: HI
	art I	Summ				
	1		scribe the organization's mission or most significant activities: To p	romote the ov	erali econo	mic vitality and social
•	•	health of I				
3	1	ricalui Oi I	nawau.			
Activities & Governance	2	Check th	is box ▶ ☐ if the organization discontinued its operations or dispose	of more the	n 25% of	its net assets.
Š	3		F 11		1 - 1	
<u>ح</u>	4		of independent voting members of the governing body (Part VI, line 1			
8	5			0,	5	
夏	-		nber of individuals employed in calendar year 2013 (Part V, line 2a)		6	
5	6		nber of volunteers (estimate if necessary)		 	
⋖	7a		elated business revenue from Part VIII, column (C), line 12		. 7a	,,
	b	Net unrei	ated business taxable income from Form 990-T, line 34	Prior	. 7b	Current Year
	_			Prior		
9	8	•	tions and grants (Part VIII, line 1h)		365,144	337,000
ē	9	_	service revenue (Part VIII, line 2g)			
Revenue	10		nt income (Part VIII, column (A) Llines 3, 4, and 7d)			55
_	11		renue (Part VIII, column (A), times 5, 6d, 8c, 9c, 10c, and 11e)			
>	12		enue—add lines 8 through 11 (must equal Part VIII, çòlumn (A), line 12)		365,144	337,055
•	13	Grants ar	nd similar amounts pa@[Part IXI columb (A) lines 153)			
_	14	Benefits	paid to or for members (Part IX, column (A), line 4)			
ြိ တွ	15	Salaries,	other compensation, employee benefits (Part-IX, column (A), lines 5-10)		189,061	189,452
Expenses	16a	Professio	onal fundraising fees (Part-IX, column (A), line 11e)			
9 5	b	Total fund	draising expenses (Part IX, column (D), line 25) ▶			
3 @	17	Other exp	penses (Part IX, column (A), lines 11a-11d, 11f-24e)		150,859	149,331
	18		penses. Add lines 13-17 (must equal Part IX, column (A), line 25)		339,920	338,783
	19	•	less expenses. Subtract line 18 from line 12		25,224	(1,728)
× 2	+			Beginning of (End of Year
t Assets or	20	Total ass	ets (Part X, line 16)		165,881	164,153
A Ba	21		ilities (Part X, line 26)		- 100/001	
菱	22		ts or fund balances. Subtract line 21 from line 20		165,881	164,153
	art II		ture Block		100,001	104/100
		, , ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	ry, I declare that I have examined this return, including accompanying schedules and str	atements and to	the best of n	ny knowledge and belief it is
tru	e, correc	t, and compl	ete. Declaration of preparer (other than officer) is based on all information of which preparer	rer has any kno	wledge.	, momorgo en o omon, mo
_			the de-		, , , , , , , , , , , , , , , , , , , 	
Sig	าก	Sign	ature of officer		Date	
He	_	1	GARY K. KAI (EXECUTIVE DIRECT	oR')	7/	15/14
•••		Tyme	or print name and title	<u> </u>		-/-/
			pe preparer's name Preparer's signature	Date		PTIN
Pa	iid		to broken a remino	-a.o		_
	epare				self-emp	picyed
Uş	e On			Fi	rm's EIN ▶	
<u> </u>			ddress >	P	none no.	
_			s this return with the preparer shown above? (see instructions)		<u></u>	· · · Yes · No
For	Papen	work Redu	ction Act Notice, see the separate instructions. Ca	. No. 11282Y		Form 990 (2013)

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Form 99	90 (2013) Page 2
Part	
1	Check if Schedule O contains a response or note to any line in this Part III
	······································
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured be expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$including grants of \$) (Revenue \$)
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4=	
4c	(Code:) (Expenses \$including grants of \$) (Revenue \$)

4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ▶

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	ŀ	ļ	
	complete Schedule A	1		<u>√</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	√	
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		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	ì	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
-	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	1		,
	Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
-	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D. Part I	6		✓
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
-	complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a			
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or	i		
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	*		
	VII, VIII, IX, or X as applicable.		KE K	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			C. (California)
_	complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	•	✓
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
þ	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X .	11f		✓_
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			1
	Schedule D, Parts XI and XII	12a		
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			1
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a		14a		✓_
b				
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		/
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			,
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	<u> </u>	✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	ļ	✓_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
46	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			,
00	If "Yes," complete Schedule G, Part III	19	L	1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓_
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		<u> </u>

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Part i	V Checklist of Required Schedules (continued)			
_	•		Yes	No_
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		✓
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		- -
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		<u> </u>
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 lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
	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		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
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	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	•	
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29		<u> </u>
30	conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	000		
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
90	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			_
30	Part VI	37		-
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	20	1	
	10. Hotel All 10.11 000 more are required to complete contouring of 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	38	- 600	(2013)

Part	V Statements Regarding Other IRS Filings and Tax Compliance	
	Check if Schedule O contains a response or note to any line in this Part V	· · · · · · · · · · · · · · · · · · ·
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	Yes No
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	
0-	reportable gaming (gambling) winnings to prize winners?	1c
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 2 2 2	
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a ✓
b	If "Yes," has It filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a ✓
b	If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a ✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b ✓ 5c ✓
с 6а	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c ✓
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a
	gifts were not tax deductible?	6b
7	Organizations that may receive deductible contributions under section 170(c).	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a
c	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b 7c
d	If "Yes," indicate the number of Forms 8282 filed during the year	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e
f g	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8
9	Sponsoring organizations maintaining donor advised funds.	
a b	Did the organization make any taxable distributions under section 4966?	9a 9b
10	Section 501(c)(7) organizations. Enter:	
а	Initiation fees and capital contributions included on Part VIII, line 12	
ь	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	
a b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	128
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a
b	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which	
	the organization is licensed to issue qualified health plans	
C	Enter the amount of reserves on hand	
14a h	Did the organization receive any payments for indoor tanning services during the tax year?	14a ✓ 14b
	11 163, That it filed a Forth F25 to report those payments file two, provide an explanation in Schedule O.	Form 990 (2013)

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

financial statements available to the public during the tax year.

organization: ► Gary Kai, 1003 Bishop St., #2630, Honolulu, HI 96813; (808) 532-2244

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Form	200	(2012)	

Page '

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

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

☐ Check this box if neither the organization n	or any relate	d org	aniz		on c	ompe	nsa	ited any currer	nt officer, directo	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	box,	unies er an	Pos heck	sition mon	e than o	n an tee)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	hours for related organizations below dotted line)	ndividua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	trom the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Allen Uyeda Chair	.5	1		/				o	o	o
(2) Gary Kai	40									
Executive Director		1		1	İ	1	İ	125,000	0	7,887
(3) Steven Ai	.1									
Director		1						l 0	o	0
(4) Bruce Anderson	.1									· · · · · · · · · · · · · · · · · · ·
Director		1						l	o	0
(5) Geoffrey Bannister Director	.1	1						0	0	0
(6) David Carey	.1	 	-	 	├		├─	<u>~</u>		<u>v</u>
Director	 	1		İ			ł	o	o	0
(7) David Charles	.1	<u> </u>	-	-	†		-	· · · · · ·	-	<u>v</u>
Director		1						o	o	0
(8) Thomas Conant	.1									<u></u>
Director		1						o	o	0
(9) Matthew Cox	.1			_						
Director		✓						o	o	0
(10) Richard Dahl	.1			-	_					<u> </u>
Director		✓						0	o	0
(11) John Dean	.1									
Director		✓						o	a	0
(12) John DeLong	.1					-		<u>y</u>		<u>v</u>
Director		✓						o	o	0
(13) Greg Dickhens	.1						_			· · · · · · · · · · · · · · · · · · ·
Director	·	1						o	o	0
(14) Mitch D'Olier	.1				М		\vdash			<u> </u>
Director	1	 						o	o	0

Part VII Section A. Officers, Directors, Trus	tees, Key E	mploy	/ees	, ar	nd H	lighes	t C	ompensated E	mployees (co	ntinue	d)
(A) Name and title	(B) Average hours per week (list any	box, office	ot ch unles er and	s pe	more rson irect	than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation for	om	(F) Estimated amount of other
	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	C)	compensation from the organization and related organizations
(15) Mark Dunkerley	.1										
Director (46)	-	1	-	_	_		 	0		-0	0
(16) Dennis Francis Director	<u>1</u>	1	<u> </u>					a		0	o
(17) Mark Fukunaga	.1	 	T	 				 		1	-
Director	1	1	L					0		0	C
(18) Mike Gold	.1							_			_
Director (10) D. F. College (10)		 	┼-		-		\vdash			0	<u>.</u>
(19) Robert Harrison Director		1		l		ļ	1			0	(
(20) Jason Higa	1.1	† <u> </u>	+-	-	1	 	Г	† · · · · · · · · · · · · · · · · · · ·			
Director		1	_	_	_	<u> </u>	<u> </u>			0	
(21) Peter Ho	1	-	ŀ	1	1	ļ		١ .		0	
Director (22) Clare Home	.1	+	╁╌	├	╁┈	 	-		<u>'</u>		
(22) Glenn Hong Director		1		1					,	0	
(23) Chason Ishii	.1	1		T							
Director		1	<u> </u>		<u> </u>	ļ	ļ		<u> </u>	_0	
(24) Chad Karasaki	.1	-	1		"						
Director	 	1	╁┈	╁┈	╬	╁	╁		?	0	
(25) Jeffrey Kissel Director	<u>1</u>	- /		1	Ì	1		1 .	, l	o	
1b Sub-total			٠.	٠.	'		▶				
c Total from continuation sheets to Pard Total (add lines 1b and 1c)	· · · ·		•	·	· ·	 <u></u>	▶				
2 Total number of individuals (including b reportable compensation from the organ			hos	e lis	sted	abov	e) v	who received n	nore than \$10	0,000	
3 Did the organization list any former employee on line 1a? If "Yes," complete	officer, dire	ctor, J for s	or t	rus ind	tee, divic	key lual	em	ployee, or hig	hest compen	sated	Yes No
4 For any individual listed on line 1a, is to organization and related organization	he sum of res s greater t	eporta han \$	able	ÇQI	mpe 0?	ensati <i>If "Ye</i>	9S, "	complete \$0	pensation fro hedule J for	m the such	
 individual	or accrue	comp	ensa olete	ation	n fro	om an	y u	nrelated organ such person	zation or indi	vidual 	
Section B. Independent Contractors											
 Complete this table for your five highes compensation from the organization. R year. 	st compensa leport comp	ated in ensat	nder tion	oen for	den the	t cont calen	rac dar	tors that receivers year ending w	ved more than ith or within t	\$100 ne org	0,000 of anization's tax
(A) Name and business a	address							(B) Description of	services		(C) Compensation
							\top				
							#				
							+				
2 Total number of independent contract received more than \$100,000 of compe							to	those listed a	bove) who		

Part VII	Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd F	lighes	st C	ompensated E	mployees (cor	ntinue	d)
	(A) Name and title	(B) Average hours per week (list any	box, office	unles	Pos leck is pe	rson	than of the thick the thic	an	(D) Reportable compensation	(E) Reportable compensation from	om	(F) Estimated amount of
	(45) con the Mahamahi		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the crganization (W-2/1099-MISC)	related organizations (W-2/1099-MIS(C)	other compensation from the organization and related organizations
(15) (26) Be	rt Kobayashi	.1										
Director			1		ļ			_	0		0	0
	n Kuriyama	1	1		l				}	}	0	O
Director	ye Kurren	.1	<u> </u>	-			 	-	1		4	
Directo		<u>::</u>	1		{	ł	{		0		0	0
(18) (29) Co Directo	nstance Lau	.1	1						0		0	0
	net Liang	.1			_			_				
Directo	<u> </u>		1		L.	1_	ļ	_			<u> </u>	0
	ke Warren	1	1	}			ļ					a
Director	MacNaughton	.1		-	-	├~		 	0	 	<u> </u>	
Directo		::	1		Į		ļ		0		o	
(22) (33) Dee Jay Mailer Director		.1	1						0		0	
(23) (34) Sa	rah Morihara	.1						Į –				-
Directo	······································		1	 	├	-	}	├-	ļ <u>0</u>	 	-0	
	chael Pietsch	1	1	1		Į			0		0	Q
Directo (25) (36) Ka	thryn Raethel	.1	 	├	 	╁		┢╌	<u>-</u>	 	-	<u>-</u>
Directo		<u> </u>	1		İ				0)	0	
c Tot	o-total			•				> > >		\ 	0	<i>E</i>
2 Tota	al (add lines 1b and 1c)	t not limited				ted	abov	e) w	/ho received m	ore than \$100	,000	of
3 Did	the organization list any former of ployee on line 1a? If "Yes," complete	ficer, direc Schedule J	tor, o	or ti	rust ind	ee, livid	key o	em;	oloyee, or high	nest compens	ated	Yes No 3 ✓
4 For org	any individual listed on line 1a, is the anization and related organizations widual	sum of re	porta	ble	con	npe	nsatio	วก 8	and other com	pensation from	n the such	4
	any person listed on line 1a receive of services rendered to the organization									zation or indiv		5
	Independent Contractors					•						~!
	mplete this table for your five highest npensation from the organization. Rep r.											
	Iress							(B) Description of :	services	((C) compensation	
			-,-									
	al number of independent contractor							o ti	nose listed ab	ove) who		

f

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd F	lighes	st C	ompensated E	mployees (co	ntinu	ed)
	(A) Name and title	(B) Average hours per week (list any	(do n box, o	ot ch unles	Pos leck is pe d a d	ition more rson rect	than o	one an	(D) Reportable compensation from	(E) Reportable compensation frelated		(F) Estimated amount of other
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		compensation from the organization and related organizations
(15) (3) Mark Richards	.1							· · · · · · · · · · · · · · · · · · ·			
	ector		/	<u> </u>	<u> </u>		<u> </u>	_	0		0	0
	Richard Rosenblum	1	/			ļ	<u> </u>					_
	ector 9) Rocco Sansone	.1		┢		├─	 	├	0	<u> </u>	_0	0
	ector	 	1		1				0		0	a
(18) (4)) Harry Saunders rector	.1	1		-						0	0
) Charles Sted	.1				T-			<u> </u>		寸	
	ector		1		<u> </u>	L		_	0		0	0
	2) Marc Tilker	1				ļ						_
	ector 3) Arthur Ushijima	.1	1	╁		╁─		├─	0		-9	0
	rector	 	1			}			٥		٥	0
	1) Keith Vieira	.1		T			-	1	† <u>-</u>	,		· · · · · · · · ·
Di	rector		1	<u> </u>			ļ		0		0	0
	5) Richard Wacker	1			l			1				
	rector		/	├	├	ļ	 	-	ļo	 	0	0
	B) Roger Wall rector	<u>:1</u>	/	-			1		0		0	0
	7) Jon Wallenstorm	.1	Ť	T		\vdash	 -	十	 			<u>_</u>
	rector	† <i>:</i>	1				1		0		0	0
1b	Sub-total			•	•			>			0	
C	Total from continuation sheets to Part			-	-	-						
<u>d</u>	Total (add lines 1b and 1c)	<u> </u>		<u>.</u>	•	<u>. </u>	• • •	<u> </u>	1	1		
2	Total number of individuals (including bu reportable compensation from the organ	t not limited ization ► 1	d to th	nose	e lis	ted	abov	e) w	vho received m	ore than \$10	0,000) of
	Toportubic componential in the organ	Zation 1										Yes No
3	Did the organization list any former or employee on line 1a? If "Yes," complete	fficer, direc	tor, o	or ti	rust ina	ee, livid	key (ual	emį	ployee, or high	nest compen	sated	
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of regreater th	porta an \$	ble 150	,000	npe	nsatio	on a	and other com complete Sci	pensation fro hedule J for	m the	
5	Did any person listed on line 1a receive of for services rendered to the organization									zation or indi	vidua	4 V
Section	on B. Independent Contractors				-	.,50					····	
1	Complete this table for your five highest compensation from the organization. Re year.											
	(A) Name and business add	dress	•					T	(B) Description of	services		(C) Compensation
								Ι.	• • • • • • • • • • • • • • • • • • • •			
							-	\pm				
								F				
2	Total number of independent contract received more than \$100,000 of compen							o t	hose listed at	oove) who		

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	, ar	nd H	ighes	t C	ompensated E	mployees (con	tinued)	
	(A) Name and title	(B) Average hours per	(do n	ot ch	Pos leck s pe	ition more	than o	ne an	(D) Reportable compensation	(E) Reportable compensation from		(F) Estimated amount of
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	(i) O	other impensation from the frantization and related ganizations
(15) (4)	3) William Wilson	.1			_			_		 	 	
Di	ector		1						0		0	0
) Robert Wo	1			1							
	rector		✓		 			├-	0	 	0	0
	0) Eric Yeaman rector	<u>1</u>	1						0		0	0
(18) (5	l) Russell Young rector	.1							0		0	0
	2) Sean Hehir	.1									1	
Di	rector		<u> </u>	ļ.,	_	_	L.,	_				
(20)		<u> </u>									ł	
(21)												
(22)		ļ										
(23)			-									,
(24)												
(25)		<u> </u>	 	T	T	十		T		· · · · · · · · · · · · · · · · · · ·		
			<u>L</u> _	<u> </u>		<u>L</u>	<u> </u>	L		<u> </u>		
1b	Sub-total		٠	•	•	•		•	125,000		0	7,887
C	Total from continuation sheets to Part										0	7.007
d	Total (add lines 1b and 1c)	t not limite	d to t	hos	e lis	ted	abov	e) v	vho received n			7,887
3	Did the organization list any former o	fficer, dire	ctor,					em	ployee, or hig	hest compens	ated	Yes No
4	employee on line 1a? If "Yes," complete For any individual listed on line 1a, is the organization and related organizations	e sum of re	porta	able	cor	mpe	nsatio	on a es,"	and other com complete Sc	pensation from hedule J for	· n the such	3 🗸
5	individual	or accrue c	 compe	ensa	atior	n fro	 m an	y ui		 Ization or indiv	idual 🖁	4 /
	for services rendered to the organization									<u> </u>	·	5 🗸
<u>Secti</u>	on B. Independent Contractors Complete this table for your five highest	COMPARS	ted in	der	2000	dent	cont	rac	tors that receiv	ed more than	\$100.00	0 of
•	compensation from the organization. Re year.											
	(A) Name and business ad	dress							(B) Description of	services	Com	(C) pensation
					-			Ŧ				
							··	1				
		· · · · ·			-			+				
2	Total number of independent contract received more than \$100,000 of comper							to 1	those listed a	bove) who		

Part	VIII	Statement of Reve						
		Check if Schedule O	contains a re	sponse or note t				· · · · · · · · · · · · · · · · · · ·
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512-514
Grants	1a	Federated campaigns	<u>1</u> :	9	5. F. W. C.			
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .	<u>11</u>					
An An	C	Fundraising events .						
ia Gi	d	Related organizations						
Sir.	e	Government grants (con All other contributions, gi		9			, . 2	
충	•	and similar amounts not inc		f 34,000				
語る	g	Noncash contributions includ	<u> </u>					
	h	Total. Add lines 1a-1			337,000			
				Business Code			POTENCIA DE	
Ke I	2a				3. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.			
æ	ь							
.8	С							
Š	d							
텵	e				ļ	ļ		
Program Service Revenue	l f	All other program sen			ļ		Chilesto College	
	3 3	Total. Add lines 2a-2 investment income	fincluding div	idends interest.	337,000	The same of the sa		
	•	and other similar amo			55			55
	4	Income from investment	t of tax-exempt	bond proceeds ▶				,
	5	Royalties	_,	<u> ▶</u>				
			(i) Real	(ii) Personal				
	6a	Gross rents .						
	b	Less: rental expenses		-				
	d	Rental income or (loss) Net rental income or (
	7a	Gross amount from sales of	(i) Securities	(ii) Other		NEWSCHIEF COURSE		
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses .						
	C	Gain or (loss)					Michael Control	
	d	Net gain or (loss) .		. <u> </u>				
evenue	8a	Gross income from fuevents (not including \$	undraising					
Other Re		of contributions reported See Part IV, line 18 .	ed on line 1c).	a				
ā	b	Less: direct expenses		b				
	C	Net income or (loss) f			NE AND A HEAVENING PROPERTY OF THE PARTY.			
	9a	Gross income from ga See Part IV, line 19 .	aming activities	·_		WEST DES	Free.	
	Ь	Less: direct expenses		b		F. Websites		100
	C	Net income or (loss) f						
	10a	Gross sales of in					W. 78	
		returns and allowance		а		4 2 3		Take a Paragraph
	ь	Less: cost of goods s		b				
	င	Net income or (loss) f						
		Miscellaneous P	Revenue	Business Code				
	11a					ļ <u>.</u>		
	b			-	ļ	ļ	ļ	<u> </u>
	6	All other revenue		-	ļ	 	 	
	d	All other revenue . Total. Add lines 11a-			 			
	12	Total revenue. See in			207.055		THE PROPERTY OF THE PARTY OF TH	American Marian Carlos Marian Carlos

Form 990 (2013) Page 10 Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Fundraising Do not include amounts reported on lines 6b, 7b, (B) Program service (C) Management and 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . Grants and other assistance to governments. organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 132,887 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 40,213 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits 2,765 Payroll taxes 10 13,587 Fees for services (non-employees): Management **b** Legal 785 **d** Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . 2,104 Advertising and promotion 12 13 Office expenses 9,734 14 Information technology 288 15 Royalties 16 18,221 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 30,056 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 23 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Funded Projects 81,221 Gifts/Donations 431 Program Expenses 3,846 All other expenses

338,783

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

· · ·

P	art X	Balance Sheet			
	_	Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	165,881	2	164,153
	3	Pledges and grants receivable, net		3	
æ	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	24 35 T G		
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
}	12	Investments-other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	165,881	16	164,153
	17	Accounts payable and accrued expenses		17	
	18	Grants payable	-	18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disgualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	
— sex		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
ä	27	Unrestricted net assets	165,881	27	164,153
Ba	28	Temporarily restricted net assets		28	
Þ	29	Permanently restricted net assets		29	
or Fur		Organizations that do not follow SFAS 117 (ASC 958), check here $ ightharpoonup$ and complete lines 30 through 34.			
ş	30	Capital stock or trust principal, or current funds		30	
Net Assets or Fund Balances	31	Paid-In or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds .		32	
	33	Total net assets or fund balances	165,881	33	164,153
	34_	Total liabilities and net assets/fund balances	165,881	34	164,153
					Form 990 (2013)

Form 99	90 (2013)			Pa	ge 12
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>	<u>.</u> .	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		33	7,055
2	Total expenses (must equal Part IX, column (A), line 25)	2		33	8,783
3	Revenue less expenses. Subtract line 2 from line 1	3		(1	,728)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		16	5,881
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		16	4,153
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>		
			or and the last	Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other		7.5		
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olain in	100		
_	Schedule Q.		2a		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2 3 5 5 FG	√
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis		2b		
D	Were the organization's financial statements audited by an independent accountant?				
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	on a			
	·			1,5	
c					
C	of the audit, review, or compilation of its financial statements and selection of an independent accountant?				
	If the organization changed either its oversight process or selection process during the tax year, ex		2c	No. of Long	View in
	Schedule O.	piani in			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	777	75 m 1923	
	the Single Audit Act and OMB Circular A-133?		3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rao the			
-	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		зь		
				990	(2013)

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SCHEDULE O (Form 990 or 990-EZ)

19.24-6

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization	Employer identification number
Hawaii Business Roundtable	99-0236405
Part VI Section B 11b	
Provide Bir show the Form 888 and since	
Executive Director reviews the Form 990 and signs.	
Part VI Section B 15a	***************************************
Compensation for organization's Executive Director is determined by the	board members.
Part VI Section C 19	
The governing documents and financial statements are available upon re	equest at the organization's office.
•••••••••••••••••••••••••••••••••••••••	

