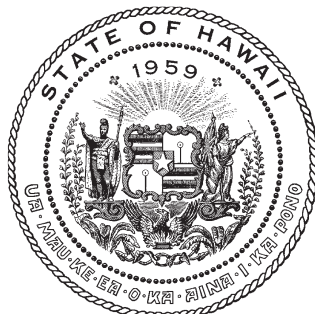


**STATE OF HAWAII  
DEPARTMENT OF TAXATION**



**General Information  
and Scannable Specifications  
for  
Schedule GE (Form G-45/G-49) (Rev. 2023)**

**Contact Information for General Questions**

Hawaii Department of Taxation  
Technical Section  
Attn: Sharlene Tagami, Forms Coordinator  
830 Punchbowl Street, Rm 126  
Honolulu, Hawaii 96813

Telephone: (808) 587-1577  
Fax: (808) 587-1584  
E-mail: [Tax.Technical.Section@hawaii.gov](mailto:Tax.Technical.Section@hawaii.gov)

**Contact Information for Mailing  
Test Packages and Testing Inquiries**

Hawaii Department of Taxation  
Attn: Document Processing — Quality  
Assurance Test Team  
830 Punchbowl Street, Rm 126  
Honolulu, Hawaii 96813

Email: [tax.dp.qa@hawaii.gov](mailto:tax.dp.qa@hawaii.gov)

**Note:** Reproduced forms must meet the requirements as established in this document and our current Forms Reproduction Policy.

**Schedule GE (Form G-45/G-49) (Rev. 2023)**

## General Information and Scannable Specifications

This document provides software vendors with the requirements for reproducing Schedule GE (Form G-45/G-49). Schedule GE (Form G-45/G-49) is designed for electronic scanning that permits faster processing with fewer errors. Software developers who reproduce, develop, or distribute Schedule GE (Form G-45/G-49) must create the form so the variable data (specified fields containing

taxpayer information) are printed in a fixed format that can be read by the Department's IBML scanners.

Substitute scannable forms **MUST** meet the requirements as established in this document and our Forms Reproduction Policy, and be approved prior to release or distribution.

**GENERAL INFORMATION****1. Substitute Form**

- We highly recommend you use the Department's official Schedule GE (Form G-45/G-49) PDF.
- If you do not use the Department's official PDF, the substitute form must match the Department's form in layout and appearance including **bold** and/or *italics* fonts as they appear on the official form.
- Lines of text in a paragraph must break at the same location as the official form.
- All forms and variable data must have a high standard of legibility for printing.
- Photocopies of the scannable form must not be submitted to the Department for processing.
- Substitute scannable forms must be proofread prior to submission.

**2. Paper and Ink**

- The paper size is 8.5 inches by 11 inches, the same size as the Department's original form. The paper weight must be at least 20 pound white bond and the page orientation is portrait.
- Black ink should be used in printing the text on the form and the variable data.

**3. Fonts**

- The form was designed using the following fonts:
  1. Arial
  2. Times New Roman
- The following fonts and sizes should be used for the form number and revision year located at the top left corner of the form:
  1. Schedule GE: 12 pt Arial bold
  2. Form G-45/G-49: 8 pt Arial
  3. REV. 2023: 8 pt Arial
- The following font and size should be used for the form number and revision year located at the bottom right corner of the form:
  1. Schedule GE (REV. 2023): 10 pt Arial bold

**4. Variable Data**

- All variable data fields must utilize 12 pt Courier new font.
- All variable data fields require exact placement.
- Print all alpha characters uppercase.

**5. Variable Data Delimiters**

- Period Ending must be printed with a dash (-) delimiter. For example:

MM-YY

(2 digits for month, followed by a dash (-), followed by 2 digits for the period ending).

- Tax Year Ending must be printed with dash (-) delimiters. For example:

MM-DD-YY

(2 digits for month, followed by a dash (-), followed by 2 digits for the day, followed by a dash (-), followed by 2 digits for the tax year ending)

- Taxpayer's Hawaii Tax I.D. Number must be printed with dash (-) delimiters. For example:

123-456-7890-01

(3 digits, followed by a dash (-), followed by 3 digits, followed by a dash (-), followed by 4 digits, followed by a dash (-), followed by 2 digits)

Note: The Taxpayer's Hawaii Tax I.D. Number begins with "GE."

**6. Dollar Amounts**

999999999999

- Do not use commas as thousand separators.
- Do not use leading dollar signs.
- Amounts are right justified.
- Dollar amounts are rounded to whole dollar amounts. Do not enter a decimal point showing "00" for cents.

**7. Testing and Approval of the Scannable Form**

- A minimum of 5 hardcopy test samples must be provided to ensure proper testing including 1 hardcopy test sample that contains all maximized

fields (one alpha "X" or numeric "9" character space with no leading or trailing spaces).

- Test samples must be originals. Photocopies, fax submissions, etc. will not be accepted.
- Test samples must be populated with unique sample variable data showing different scenarios.

- It will require 1 to 2 weeks, upon receipt by the Department, to verify the accuracy of the submitted sample.
- Approval of the facsimile must be obtained from the Department **prior** to filing.
- Schedule GE (Form G-45/G-49) (Rev. 2023) cannot be filed until 2024.

## SCANNABLE SPECIFICATIONS

### 1. Hawaii Vendor I.D. Number

- Print your 2-digit Hawaii Vendor I.D. Number following the "ID NO" label (see exhibit for exact placement).
  1. Page 1: The 2-digit Hawaii Vendor I.D. Number should begin at column 42, row 64. See exhibit for exact placement.
- The Hawaii Vendor I.D. Number must utilize 12 pt Courier New font.

### 2. Anchors

- Anchors are required on the form. The scanning equipment looks for "L" anchors printed on the form. Exact placement of the anchors are required.
- The vertical and horizontal edges of the "L" anchors must be the same length of 0.3125 inch long and 0.0278 inches thick.
- There are **two** anchors on the form.
  1. The top right "L" anchor should extend from the middle of column 77 to the end of column 80 and should rest at the top of row 4.



2. The bottom left "L" anchor should start at the beginning of column 6, extend through the middle of column 9 and rest on top of row 65.



- The tolerance is 1mm (1/4 of a grid).
- No data or other stray marks are allowed to encroach within the white space in a 0.3125 inch square of the anchor.



### 3. QR Code

- A QR code is specific to the form. The property of the 2D symbology QR code is measured in CM.

- Placement of the QR code is as follows (see exhibit for exact placement):

Page 1: The left bottom corner of the QR code is at the beginning of column 71 and at the bottom of row 6.

- Height of the QR code is 0.5 inch.
- Length of the QR is 0.5 inch.
- Narrow Module Size is set to 0.18.
- Margin is set to 0.18.
- Open space surrounding the QR code should be adhered to.
- DO NOT stretch the QR code image.
- The required QR code for page 1 is SCHGE\_T 2023A 01 VIDXX:

The QR code includes the form number (SCHGE), an underscore, type of form (T), space, 4-digit form year (2023), 1-letter revision indicator (A), space, 2-digit page number (01), and vendor ID number. There are no hyphens.

- The human readable text for the QR code MUST be printed below the QR code at column 68, row 7, utilizing 6 pt Arial font (see exhibits for exact placement).
- Please do not print the outline around the human readable text and QR code. These were only used to show the placement of the human readable text and QR code.
- DO NOT use Windows Metafile Format (wmf). This format causes a very low read rate by the Department's IBML scanners.

### 4. Form Serial Number

- The form serial number MUST be printed at column 11, row 64, utilizing 12 pt Courier New font.
- The required form serial number for page 1 is: SGE1C0S1
- Please note that the sixth digit is the number 0.

**5. Acetate overlays**

- Acetate overlays will assist in the exact data field placement. Verify your form samples with the overlays prior to submitting them for testing. If the samples do not match the overlays within 1/16 inch, do not submit them for approval as they will be rejected.
- Acetate overlays will be mailed to vendors who submitted a Letter of Intent to participate in the Forms Reproduction Program and who will be reproducing

Schedule GE (Form G-45/G-49). If you did not receive the acetate overlays, please contact the Forms Coordinator.

- Although the form was revised for 2023, the placement of the variable data has not changed from revision 2021. To help minimize costs, please use the acetate overlays from revision 2021. If you do not have the acetate overlays from revision 2021, please contact the Forms Coordinator.

General Excise/Use Tax Schedule of Exemptions and Deductions

Place QR Code Here

Human Readable text here

If you are claiming exemptions/deductions on your periodic and annual general excise/use tax return (Forms G-45 and G-49), you MUST complete and attach this form to your tax return.

Name: TAXPAYER NAME XXXXXXXXXXXXXXXXXXXX Period Ending (MM YY) 99-99
Hawaii Tax I.D. No. GE 999-999-9999-99 Tax Year Ending (MM DD YY) 99-99-99

PART I — LIST DETAILS CONCERNING "EXEMPTIONS" AND "DEDUCTIONS" CLAIMED

Note: Most ordinary business expenses are NOT DEDUCTIBLE (e.g., materials, supplies, etc.) on your general excise tax return. If claims are not explained here, exemptions and/or deductions will be disallowed...

Table with 8 columns: ACTIVITY, ED CODE, DISTRICT, AMOUNT, ACTIVITY, ED CODE, DISTRICT, AMOUNT. Contains placeholder data like 99, 999, 9, 999999999999.

Grand Total of Exemptions and Deductions — Transfer to Form G-45, line 37 or Form G-49, line 39. If more space is needed, attach a schedule. Include the total deductions claimed from any attachments in this total. 999999999999

PART II — FEDERALLY PREEMPTED DEDUCTION EXPLANATION

If the amount claimed is exempt due to federal preemption, cite the federal statute (i.e., title and section of the United States Code) and provide an explanation of the exemption. If more space is needed, attach a statement.

PART II - FEDERALLY PREEMPTED DEDUCTION EXPLANATION XXXXXXXXXXXXXXXXXXXXXXXXXXXX
PART II - FEDERALLY PREEMPTED DEDUCTION EXPLANATION XXXXXXXXXXXXXXXXXXXXXXXXXXXX

PART III — SUBCONTRACTOR INFORMATION

If you claimed a subcontractor deduction, complete the required information below. If you have more than three (3) subcontractors, show those accounting for the largest deductions on this page and attach a schedule with the information for the remaining subcontractors.

Table with 3 columns: HAWAII TAX I.D. NO., NAME AND DBA NAME, AMOUNT. Contains placeholder data like GE 999-999-9999-99, PART III - SUBCONTRACTOR INFORMATIONX, 999999999999.

Total Subcontract Deductions Claimed. Include the total deductions claimed from any attachments in this total. 999999999999

PART IV — LESSOR INFORMATION FOR SUBLEASE DEDUCTION

If you claimed a sublease deduction, complete the required information below for each of your LESSORS. If you made deductible payments to more than two lessors, show those that received the largest amounts on this page and attach a statement that includes the information for the other Lessors.

Table with 3 columns: HAWAII TAX I.D. NO., NAME AND DBA NAME, AMOUNT. Contains placeholder data like GE 999-999-9999-99, PART IV - LESSOR INFORMATION FOR SUBLEASE DEDUCTIONX, 999999999999.

PART V — CLASSIFICATION AND INFORMATION FOR DIVISION OF INCOME

If you split your gross income with another licensed taxpayer under §237-18, complete the required information below for the other taxpayers and their share of the income. If you split income with more than three (3) taxpayers, show those with the largest income on this page and attach a list with the information for the other taxpayers. For more information, see the Part V Instructions.

Table with 4 columns: HAWAII TAX I.D. NO., NAME AND DBA NAME, §CODE, AMOUNT. Contains placeholder data like GE 999-999-9999-99, PART V - CLASSIFICATION AND INFO, 999, 999999999999.

Specific Instructions for Part I
Details of Exemptions/Deductions (ED)

Note: Most ordinary business expenses are NOT DEDUCTIBLE (e.g., materials, supplies, etc.) on your general excise tax return.

You must explain your exemptions and deductions by tax District, otherwise they will be disallowed and you will owe more taxes. For each ED code you claim, enter:

- 1. For the "Activity" column, enter the line number from your general excise tax return for the activity. For example, the activity code for Wholesaling is "1," since Wholesaling is reported on line 1; for Contracting it is "10," since Contracting is reported on line 10; for Insurance Commissions it is "18," since Insurance Commissions are reported on line 18; and for Part IV "Kauai" it is "22," since the Kauai County Surcharge is reported on line 22.
2. For the ED Code please see the list of codes below and enter the corresponding ED code. List each ED code only ONCE per Activity and District.
3. Enter the Tax District in which the exemption/deduction is claimed. (Oahu enter "1"; Maui enter "2"; Hawaii enter "3"; Kauai enter "4")
4. Enter your total amount of the exemption/deduction claimed for that Activity, ED Code and District.

Example: Taxpayer A has made a \$2,000 sale of tangible personal property to the Federal Government on Oahu. Taxpayer A enters the following to justify their deduction entered in Column b of the General Excise Tax Return:

Table with columns: ACTIVITY, ED CODE, DISTRICT, AMOUNT, Description (HRS), ED Code. Includes entries for Exported Tangible Personal Property, Affordable Housing, Air Pollution Control Facilities, Aircraft Leasing, Aircraft Service and Maintenance, Bad Debts, Certain Convention, Conference and Trade Show, Common Paymaster Exemption, Contracting Activity in an Enterprise Zone, County Surcharge, Certain Contracts Entered into, Diplomatics and Consular Officials, Disability Provisions, Discounts and Returned Merchandise, Drugs and Prosthetic Devices, Employee Benefit Plans, Enterprise Zones, Exported Intangibles, Exported Services, etc.

\*Additional information is required to claim these exemptions. Complete Parts II, III and/or IV.

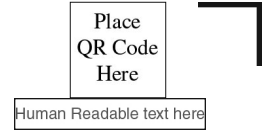
PART V - CLASSIFICATION AND INFORMATION FOR DIVISION OF INCOME

If you split income with a taxpayer shown on page 1 under more than one § Code, total the amounts for the taxpayer, enter "See Attached" in the § Code field, and provide a separate statement listing each taxpayer's Hawaii Tax I.D. No., Name and DBA Name, § Code and amount.

Table with columns: Description (HRS), § Code, Description (HRS), § Code, Description (HRS), § Code. Includes entries for Coin Operated Devices, Insurance Agents and Realtors, Motor Carriers, Producers and Promoters, Tour Packagers/Travel Agents, Tourism Related Services, Noncommissioned Transient Accommodations, etc.



STATE OF HAWAII — DEPARTMENT OF TAXATION  
**General Excise/Use Tax**  
**Schedule of Exemptions and Deductions**



If you are claiming exemptions/deductions on your periodic and annual general excise/use tax return (Forms G-45 and G-49), you **MUST** complete and attach this form to your tax return.

Name: TAXPAYER NAME XXXXXXXXXXXXXXXXXXXX Period Ending (MM YY) 99-99  
Hawaii Tax I.D. No. **GE** 999-999-9999-99 Tax Year Ending (MM DD YY) 99-99-99

**PART I — LIST DETAILS CONCERNING “EXEMPTIONS” AND “DEDUCTIONS” CLAIMED**

**Note:** Most ordinary business expenses are NOT DEDUCTIBLE (e.g., materials, supplies, etc.) on your general excise tax return.

If claims are not explained here, exemptions and/or deductions will be disallowed and proposed assessments prepared against you. If you are claiming a deduction for payments to subcontractors, you must complete both Parts I and III. For subleases, see Form G-72 and complete both Parts I and IV. For wholesale sales of amusements, see Form G-81. If you split your gross income with another licensed taxpayer under §237-18, complete Part V. See page 2 for *Specific Instructions*.

ACTIVITY	ED CODE	DISTRICT	AMOUNT	ACTIVITY	ED CODE	DISTRICT	AMOUNT
99	999	9	999999999999	99	999	9	999999999999
99	999	9	999999999999	99	999	9	999999999999
99	999	9	999999999999	99	999	9	999999999999
99	999	9	999999999999	99	999	9	999999999999

**Grand Total of Exemptions and Deductions** — Transfer to Form G-45, line 37 or Form G-49, line 39. If more space is needed, attach a schedule. Include the total deductions claimed from any attachments in this total. . . . . 999999999999

**PART II — FEDERALLY PREEMPTED DEDUCTION EXPLANATION**

If the amount claimed is exempt due to federal preemption, cite the federal statute (i.e., title and section of the United States Code) and provide an explanation of the exemption. If more space is needed, attach a statement.

PART II - FEDERALLY PREEMPTED DEDUCTION EXPLANATION XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
PART II - FEDERALLY PREEMPTED DEDUCTION EXPLANATION XXXXXXXXXXXXXXXXXXXXXXXXXXXX

**PART III — SUBCONTRACTOR INFORMATION**

If you claimed a subcontractor deduction, complete the required information below. If you have more than three (3) subcontractors, show those accounting for the largest deductions on this page and attach a schedule with the information for the remaining subcontractors.

HAWAII TAX I.D. NO.	NAME AND DBA NAME	AMOUNT
<b>GE</b> 999-999-9999-99	PART III - SUBCONTRACTOR INFORMATIONX	999999999999
<b>GE</b> 999-999-9999-99	PART III - SUBCONTRACTOR INFORMATIONX	999999999999
<b>GE</b> 999-999-9999-99	PART III - SUBCONTRACTOR INFORMATIONX	999999999999

**Total Subcontract Deductions Claimed.** Include the total deductions claimed from any attachments in this total. . . . . 999999999999

**PART IV — LESSOR INFORMATION FOR SUBLEASE DEDUCTION**

If you claimed a sublease deduction, complete the required information below for each of your LESSORS. If you made deductible payments to more than two lessors, show those that received the largest amounts on this page and attach a statement that includes the information for the other Lessors.

HAWAII TAX I.D. NO.	NAME AND DBA NAME
<b>GE</b> 999-999-9999-99	PART IV - LESSOR INFORMATION FOR SUBLEASE DEDUCTIONX
<b>GE</b> 999-999-9999-99	PART IV - LESSOR INFORMATION FOR SUBLEASE DEDUCTIONX

**PART V — CLASSIFICATION AND INFORMATION FOR DIVISION OF INCOME**

If you split your gross income with another licensed taxpayer under §237-18, complete the required information below for the other taxpayers and their share of the income. If you split income with more than three (3) taxpayers, show those with the largest income on this page and attach a list with the information for the other taxpayers. For more information, see the Part V Instructions.

HAWAII TAX I.D. NO.	NAME AND DBA NAME	§CODE	AMOUNT
<b>GE</b> 999-999-9999-99	PART V - CLASSIFICATION AND INFO	999	999999999999
<b>GE</b> 999-999-9999-99	PART V - CLASSIFICATION AND INFO	999	999999999999
<b>GE</b> 999-999-9999-99	PART V - CLASSIFICATION AND INFO	999	999999999999

**Specific Instructions for Part I  
Details of Exemptions/Deductions (ED)**

**Note:** Most ordinary business expenses are NOT DEDUCTIBLE (e.g., materials, supplies, etc.) on your general excise tax return.

You must explain your exemptions and deductions by tax **District**, otherwise they will be **disallowed** and you will owe more taxes. For each ED code you claim, enter:

1. For the "Activity" column, enter the line number from your general excise tax return for the activity. For example, the activity code for Wholesaling is "1," since Wholesaling is reported on line 1; for Contracting it is "10," since Contracting is reported on line 10; for Insurance Commissions it is "18," since Insurance Commissions are reported on line 18; and for Part IV "Kauai" it is "22," since the Kauai County Surcharge is reported on line 22.
2. For the ED Code please see the list of codes below and enter the corresponding ED code. List each ED code only ONCE per Activity and District.
3. Enter the Tax District in which the exemption/deduction is claimed. (Oahu enter "1"; Maui enter "2"; Hawaii enter "3"; Kauai enter "4")
4. Enter your total amount of the exemption/deduction claimed for that Activity, ED Code and District.

*Example:* Taxpayer A has made a \$2,000 sale of tangible personal property to the Federal Government on Oahu. Taxpayer A enters the following to justify their deduction entered in Column b of the General Excise Tax Return:

ACTIVITY	ED CODE	DISTRICT	AMOUNT
8	141	1	0000.00

Description (HRS)	ED Code	Description (HRS)	ED Code	Description (HRS)	ED Code
<b>A</b>		Exported Tangible Personal Property (§237-29.5(1))....	132	<b>R</b>	
Affordable Housing (§§46-15.1, 201H-36, 237-29, 238-3(j), Emergency Proc.) .....		<b>F</b>		Reimbursement of Payroll Costs (§237-24.7(8)) .....	140
Air Pollution Control Facilities (§§237-27.5, 238-3(k)) .....	101	Federal Cost-Plus Contractors (§237-13(3)(C))....	117	<b>S</b>	
Aircraft Leasing (§§237-24.3(11), 238-1) .....	102	Federal Preempted Amount (§§237-22, 238-3(a)).....	118*	Sale of Land in Fee Simple (improved or unimproved) (§237-3(b)) .....	139
Aircraft Service and Maintenance Facility (§§237-24.9, 238-1) .....	103	Food Stamps and WIC (§237-24.3(5)) .....	119	Sale of Goods to Federal Government and Credit Unions (§237-25(a)).....	141
<b>B</b>		Foreign Trade Zone Sales (§212-8) .....	120	Sales Tax Offset (§§237-22(b), 238-3(i)).....	154
Bad Debts (§237-3(b)) .....	104	<b>H</b>		Scientific Contracts (§§237-26, 238-3(j)) .....	142
<b>C</b>		Hawaii Convention Center Operator (§237-24.75(2)).....	121	Service Related to Ship & Aircraft (§237-24.3(3)).....	143
Certain Convention, Conference and Trade Show (§237-16.8) .....	105	Hotel Operator/Suboperator (§237-24.7(1)).....	122	Shipbuilding and Ship Repairs (§237-28.1).....	144
Common Paymaster Exemption (§237-23.5(b)) .....	106	<b>I</b>		Shipping and Handling of Agricultural Commodities (§237-24.3(1)) .....	145
Contracting Activity in an Enterprise Zone (§209E-11) .....	107	Insurance Proceeds Received Because of a Natural Disaster (§237-24.7(5)).....	123	Stock Exchange Transactions (§237-24.5) .....	147
County Surcharge –		Intercompany Charges (§237-23.5(a)).....	124	Subcontract Deduction (§237-13(3)(B)).....	148*
Certain Contracts Entered into		<b>L</b>		Sugar Cane Payments to Independent Producers (§237-24(14)).....	149
Before 6/30/2006 - Oahu (§237-8.6(c)) .....	108	Labor Organizations (§237-24.3(9)).....	125	<b>T</b>	
Before 6/30/2018 - Kauai and Hawaii (§237-8.6(c)) .....	155	Lease/Sublease of Real Property (§237-16.5).....	126*	Taxes Passed On (§§237-24(8), 237-24(9), 237-24(10), 237-24(11), 237-24(12), 237-24.3(7), 237-24.7(3)).....	150
Before 6/30/2023 - Maui (§237-8.6(c)) .....	158	<b>M</b>		Technology Research and Development Grants (§§206M-15, 237-24.7(9)).....	146
Sublease Deduction (§237-8.6(d)(1)) .....	126	Maintenance Fees (§§237-24.3(2), 237-24(16)) .....	127	<b>U</b>	
Wholesale Amusements (§237-8.6(d)(1)).....	152	Mass Transit (§237-24.7(2)) .....	128	Use Tax, Only for (not for GE) —	
<b>D</b>		Merchants' Association Dues (§237-24.3(8)).....	129	Imported for Resale at Wholesale (§§238-2(1), 238-2.3) .....	157
Diplomats and Consular Officials (§§237-24.3(10), 238-1).....	110	<b>N</b>		Imported Services or Contracting to be used Outside of Hawaii (§238-1).....	133
Disability Provisions (§237-24(13)) .....	111	Non-profit Organizations (§237-23) .....	130	Producers (Certain property used (§238-4)).....	138
Discounts and Returned Merchandise (§237-3(b)).....	112	<b>O</b>		<b>W</b>	
Drugs and Prosthetic Devices (§237-24.3(6)) .....	113	Orchard Operator (§237-24.7(4)).....	131	Wholesale Amusements (§237-4(a)(13)).....	152
<b>E</b>		Out of State Sales (§237-29.5(1)) .....	132	Wholesale Transactions (Sales of tangible imported property for further resale at 1/2%) (§237-29.55).....	153
Employee Benefit Plans (§237-24.3(4)) .....	114	Out of State Services (§237-29.53).....	116		
Enterprise Zones (§209E-11) .....	115	<b>P</b>			
Exported Intangibles (§237-29.57) .....	156	Patient-Centered Community Care (§237-24(17)) .....	134		
Exported Services (§237-29.53) .....	116	Petroleum Refining (§237-27) .....	135		
		Potable Water (§237-23(a)(7)) .....	136		
		Professional Employer Organizations (§237-24.75(3)).....	137		

\*Additional information is required to claim these exemptions. Complete Parts II, III and/or IV.

**PART V – CLASSIFICATION AND INFORMATION FOR DIVISION OF INCOME**

If you split income with a taxpayer shown on page 1 under more than one § Code, total the amounts for the taxpayer, enter "See Attached" in the § Code field, and provide a separate statement listing each taxpayer's Hawaii Tax I.D. No., Name and DBA Name, § Code and amount.

Description (HRS)	§ Code	Description (HRS)	§ Code	Description (HRS)	§ Code
Coin Operated Devices (§237-18(a)).....	18A	Motor Carriers (§237-18(h)).....	18H	Tour Packagers/Travel Agents –	
Insurance Agents and Realtors (§237-18(e)) .....	18E	Producers and Promoters (§237-18(b)).....	18B	Tourism Related Services (§237-18(f)).....	18F
				Noncommissioned Transient Accommodations (§237-18(g)).....	18G