

S CORPORATION INCOME TAX RETURN

2020

For calendar year

Place
QR Code
Here

or other tax year beginning • 12-12, 2020

and ending • 12-12, 2012

☒ **AMENDED Return (Attach Sch AMD)**

• PRINT OR TYPE •	Name NAMEXX	Federal Employer I.D. No. 99-999999
	Dba or C/O DBA OR CARE OFXX	Business Activity Code (Use code shown on federal Form 1120S) 999999
	Mailing Address (number and street) MAILING ADDRESSXX	Hawaii Tax I.D. No. GE-999-999-9999-99
	City or town, State, and Postal/ZIP Code. If foreign address, see Instructions. CITY OR TOWN STATE ZIP CODEXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Enter the number of Schedules NS attached to this return • 9999999999

Is the corporation electing to be an S corporation beginning with this tax year? ☒ Yes ☒ No

Check if: (1) ☒ Initial Return (2) ☒ Final Return (3) ☒ S Election Termination or Revocation (4) ☒ Name Change (5) ☒ IRS Adjustment

How many months in 2020 was this corporation in operation? 99 Was this corporation in operation at the end of 2020? ☒ Yes ☒ No

CAUTION: Include only trade or business income and expenses on lines 1a through 20. See Instructions for more information.

INCOME	1 a Gross receipts or sales (see Instructions).	1a•	999999999999	
	b Returns and allowances.	1b•	999999999999	
	c Line 1a minus line 1b	1c•	999999999999	
	2 Cost of goods sold (Schedule A, line 8)	2•	999999999999	
	3 Gross profit (line 1c minus line 2).	3•	999999999999	
	4 Net gain or (loss) from Schedule D-1, Part II, line 19 (attach Schedule D-1).	4•	999999999999	
5 Other income (see Instructions) (attach schedule)	5•	999999999999		
6 TOTAL income (loss) — Add lines 3 through 5 and enter here.. . . .	6•	999999999999		
DEDUCTIONS	7 Compensation of officers	7	999999999999	
	8 Salaries and wages (less employment credit)	8	999999999999	
	9 Repairs and maintenance	9	999999999999	
	10 Bad debts (see Instructions)	10	999999999999	
	11 Rents	11	999999999999	
	12 Taxes and licenses (attach schedule).	12	999999999999	
	13 Interest	13	999999999999	
	14 Depreciation from federal Form 4562 not claimed elsewhere on return (see Instructions)	14	999999999999	
	15 Depletion (Do not deduct oil and gas depletion. See Instructions.)	15	999999999999	
	16 Advertising	16	999999999999	
	17 Pension, profit-sharing, etc. plans	17	999999999999	
	18 Employee benefit programs.	18	999999999999	
	19 Other deductions (attach schedule)	19	999999999999	
	20 TOTAL deductions — Add lines 7 through 19 and enter here.	20•	999999999999	
	21 Ordinary income (loss) from trade or business activities — line 6 minus line 20 (To Sch. K, line 1)	21•	999999999999	

DECLARATION: I declare, under the penalties set forth in section 231-36, HRS, that this return (including any accompanying schedules or statements) has been examined by me and, to the best of my knowledge and belief, is true, correct, and complete, made in good faith, for the taxable year stated, pursuant to the Hawaii Income Tax Law, Chapter 235, HRS. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date 12-12-12 NAME AND TITLEXXXXXXXXXX
Type or print name and title of officer

★ May the Hawaii Department of Taxation discuss this return with the preparer shown below? ☒ Yes ☒ No
(See page 3 of the Instructions) This designation does not replace Form N-848, Power of Attorney.

Paid Preparer's Information	Preparer's Signature _____	Date 12-12-12	Check if self-employed ☒	Preparer's identification no. • PREP ID NOXX
	Print Preparer's Name PREPARERS NAMEXXXXXXXXXXXX			
	Firm's name (or yours if self-employed) _____ Address and Postal/ZIP Code _____	FEDERAL E.I. No. 99-9999999 Phone no. (123) 456-7890		

Place QR Code Here	Name as shown on return	Federal Employer Identification Number
	NAMEXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX	99-9999999

TAX & PAYMENTS	22	a	Excess net passive income tax (attach schedule(s))	22a●	999999999999	
		b	Tax from Schedule D (Form N-35), line 21	22b●	999999999999	
		c	Number of N-4's attached ● 999999 Taxes withheld on attached N-4's	22c●	999999999999	
		d	LIFO recapture tax	22d●	999999999999	
		e	Interest due under look-back method	22e●	999999999999	
		f	Add lines 22a, 22b, 22c, 22d, and 22e	22f●	999999999999	
	23	a	2019 overpayment allowed as a credit	23a●	999999999999	
		b	2020 estimated tax payments from N-201Vs 99999999 and N-288A 99999999	23b●	999999999999	
		c	Payments with extension	23c●	999999999999	
		d	Add lines 23a, 23b, and 23c	23d●	999999999999	
	24	Estimated tax penalty. (see Instructions) Check if Form N-220 is attached	24●	999999999999		
	25	OVERPAYMENT (If line 23d is larger than the total of lines 22f and 24), enter AMOUNT OVERPAID.	25●	999999999999		
	26	Enter amount of line 25 you want Credited to 2021 estimated tax > 26a \$● 999999999999 Refunded>	26b●	999999999999		
	27	TAX DUE (If the total of lines 22f and 24 is larger than line 23d) enter the amount due	27●	999999999999		
	28	AMOUNT OF PAYMENT (see Instructions)	28●	999999999999		
AMENDED RETURN	29	Amount paid (overpaid) on original return — AMENDED RETURN ONLY.	29	999999999999		
	30	BALANCE DUE (REFUND) with amended return (See Instructions)	30	999999999999		

Schedule A Cost of Goods Sold (See Instructions for Schedule A)

1	Inventory at beginning of year	1	999999999999
2	Purchases	2	999999999999
3	Cost of labor	3	999999999999
4	Additional IRC section 263A costs (see federal Instructions and attach a schedule)	4	999999999999
5	Other costs (attach schedule)	5	999999999999
6	Total—Add lines 1 through 5	6	999999999999
7	Inventory at end of year.	7	999999999999
8	Cost of goods sold—Line 6 minus line 7. (Enter here and on page 1, line 2)	8	999999999999
9	a Check all methods used for valuing closing inventory:		
	(i) ☒ Cost as described in Treasury Regulations section 1.471-3.		
	(ii) ☒ Lower of cost or market as described in Treasury Regulations section 1.471-4 (see Instructions)		
	(iii) ☒ Other (specify method used and attach explanation) > METHOD USEDXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
	b Check if there was a writedown of subnormal goods as described in Treasury Regulations section 1.471-2(c)		
	c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach federal Form 970)		
	d If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO		
		9d	9999999999
	e Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the corporation?		
		☒ Yes	☒ No
	f Was there any change in determining quantities, cost or valuations between opening and closing inventory?		
		☒ Yes	☒ No
	If "Yes," attach explanation.		

Schedule B Other Information

1	Check method of accounting: a ☒ Cash b ☒ Accrual c ☒ Other (specify) > OTHERXXXXXXXXXXXX
2	a Date of incorporation 12-12-1212 b Date business began in Hawaii 12-12-1212
	c Under laws of LAWS OFXXXXXXXXXXXX d Date of federal election as an S corporation 12-12-1212
3	Refer to the listing of Business Activity Codes at the end of the federal Instructions for Form 1120S and state your principal: Business Activity > BUSINESS ACTIVITYXXXXXXXX ; Product or service > PRODUCT OR SERVICEXXX
4	Did the corporation at the end of the tax year own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see IRC section 267(c).) If "Yes" attach a schedule showing: (a) name, address and employer identification number (b) percentage owned, and (c) if 100% owned, was QSSS election made? ☒ Yes ☒ No
5	Enter the number of shareholders in the corporation at the end of the tax year who are: residents of Hawaii 999999999999 nonresidents of Hawaii 999999999999
6	Did the corporation derive income from sources outside Hawaii which is not includable in the Hawaii return? ☒ Yes ☒ No
7	If the corporation: (1) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to its basis (or the basis of any other property) in the hands of a C corporation, and (2) has net unrealized built-in gain (defined by IRC section 1374(d)(1)) in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years. \$ 999999999999

Place
QR Code
Here

Name as shown on return

NAMEXXXXXXXXXXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Federal Employer Identification Number

99-9999999

Schedule K		Shareholders' Pro Rata Share Items	b. Attributable to Hawaii	c. Attributable Elsewhere	
Income (Losses)	1	Ordinary income (loss) from trade or business activities (page 1, line 21)	9999999999999999	1	9999999999999999
	2	Net income (loss) from rental real estate activities (attach federal Form 8825) . .	9999999999999999	2	9999999999999999
	3 a	Gross income from other rental activities	9999999999999999	3a	9999999999999999
	b	Expenses from other rental activities (attach schedule)	9999999999999999	3b	9999999999999999
	c	Net income (loss) from other rental activities. Line 3a minus line 3b.	9999999999999999	3c	9999999999999999
	4	Interest income	9999999999999999	4	9999999999999999
	5	Ordinary dividends	9999999999999999	5	9999999999999999
	6	Royalty income	9999999999999999	6	9999999999999999
	7	Net short-term capital gain (loss) (Schedule D (Form N-35))	9999999999999999	7	9999999999999999
	8	Net long-term capital gain (loss) (Schedule D (Form N-35))	9999999999999999	8	9999999999999999
Deductions	9	Net gain (loss) under IRC section 1231 (attach Schedule D-1)	9999999999999999	9	9999999999999999
	10	Other income (loss) (attach schedule)	9999999999999999	10	9999999999999999
	11	Charitable contributions (attach schedule)	9999999999999999	11	9999999999999999
	12	IRC section 179 expense deduction (attach federal Form 4562).	9999999999999999	12	9999999999999999
Investment Interest	13	Deductions related to portfolio income (loss) (attach schedule)	9999999999999999	13	9999999999999999
	14	Other deductions (attach schedule)	9999999999999999	14	9999999999999999
	15 a	Interest expense on investment debts paid or accrued in 2020	9999999999999999	15a	9999999999999999
Credits	b (1)	Investment income included on lines 4, 5, and 6, above	9999999999999999	15b(1)	9999999999999999
	(2)	Investment expenses included on line 13, above.	9999999999999999	15b(2)	9999999999999999
	16 a	Fuel Tax Credit for Commercial Fishers (attach Form N-163)	9999999999999999	16a	
	b	Total cost of property qualifying for the Capital Goods Excise Tax Credit (See Instructions)	9999999999999999	16b	
	c	Amounts needed to claim the Enterprise Zone Tax Credit (attach Form N-756) . .	See Instructions	16c	
	d	Hawaii Low-Income Housing Tax Credit (attach Form N-586)	9999999999999999	16d	
	e	Credit for Employment of Vocational Rehabilitation Referrals (attach Form N-884) . .	9999999999999999	16e	
	f	Motion Picture, Digital Media, and Film Production Income Tax Credit (attach Form N-340)	9999999999999999	16f	
	g	Credit for School Repair and Maintenance (attach Form N-330).	9999999999999999	16g	
	h	Renewable Energy Technologies Income Tax Credit (attach Form N-342).	9999999999999999	16h	
	i	Important Agricultural Land Qualified Agricultural Cost Tax Credit (attach Form N-344)	9999999999999999	16i	
	j	Tax Credit for Research Activities (attach Form N-346)	9999999999999999	16j	
	k	Capital Infrastructure Tax Credit (attach Form N-348)	9999999999999999	16k	
	l	Cesspool Upgrade, Conversion or Connection Income Tax Credit (attach Form N-350)	9999999999999999	16l	
	m	Renewable Fuels Production Tax Credit (attach Form N-352)	9999999999999999	16m	
	n	Organic Foods Production Tax Credit (attach Form N-354)	9999999999999999	16n	
	o	Historic Preservation Income Tax Credit (attach Form N-325)	9999999999999999	16o	
	p	Hawaii income tax withheld on Forms N-288A (See Instructions)	9999999999999999	16p	
	q	Total Hawaii income tax withheld on Forms N-4	9999999999999999	16q	
	r	Net income tax paid by the S corporation to states which do not recognize the corporation's "S" status. Identify state(s).		16r	9999999999999999
Other Items	(Attach a separate schedule if more space is needed for any item.)				
	17	Total property distributions (including cash) other than dividend distributions reported on line 22, below. Date of Distribution 12-12-1212	9999999999999999	17	9999999999999999
	18	Tax exempt interest income	9999999999999999	18	9999999999999999
	19	Other tax exempt income.	9999999999999999	19	9999999999999999
	20	Non-deductible expenses	9999999999999999	20	9999999999999999
	21	Other items and amounts not included on lines 1 through 20, above, that are required to be reported separately to shareholders (attach schedule)	9999999999999999	21	9999999999999999
	22	Total dividend distributions paid from accumulated earnings and profits.	9999999999999999	22	9999999999999999
	23	Income (loss) — Combine lines 1 through 10. From the result, subtract the sum of lines 11 through 15a.	9999999999999999	23	9999999999999999
	24	Corporate adjustments to income attributable to Hawaii (attach schedule)	9999999999999999	24	
25	Interest penalty on early withdrawal of savings		25	9999999999999999	

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	NAMEXXXXXXXXXXXXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXXX	99-9999999

Schedules L, M-1, and M-2

Attach a copy of page 4 of federal Form 1120S to this return. Attach Sch. M-3, if applicable.

Schedule N

List of Shareholders (Attach a separate sheet if more space is needed)

Name and Address	SSN or FEIN	No. of shares owned at all times during the year	State of Residence	Year Sch. NS filed, if any (Indicate if revoked)	Amount of Payment on Form N-4 attached
1 NAME AND ADDRESSXXXXXXXXXX NAME AND ADDRESSXXXXXXXXXX NAME AND ADDRESSXXXXXXXXXX	9999999999	9999999999	STATEXXXXX	9999	9999999999
2 NAME AND ADDRESSXXXXXXXXXX NAME AND ADDRESSXXXXXXXXXX NAME AND ADDRESSXXXXXXXXXX	9999999999	9999999999	STATEXXXXX	9999	9999999999
3 NAME AND ADDRESSXXXXXXXXXX NAME AND ADDRESSXXXXXXXXXX NAME AND ADDRESSXXXXXXXXXX	9999999999	9999999999	STATEXXXXX	9999	9999999999

Schedule O

Apportionment of Income (See Attributable to Hawaii in the Instructions.)

1 Ordinary income (loss) from trade or business activities (From page 1, line 21)	9999999999999999
2 Apportionment factor (from Schedule P, line 8)	9999999 %
3 Business income apportioned to Hawaii (line 1 multiplied by line 2) (To Schedule K, line 1, col. b)	9999999999999999
4 Business income apportioned elsewhere (line 1 minus line 3). (To Schedule K, line 1, col. c)	9999999999999999
5 Are the totals of columns b and c, Schedule K, lines 2 through 6, and the amounts shown on Schedule P, column B, the same as those reported in returns or reports to other states under the Uniform Division of Income for Tax Purposes Act?	☒ Yes ☒ No
If "No," please explain EXPLANATIONXX	

Schedule P

Computation of Apportionment Factors (See Attributable to Hawaii in the Instructions.)

Property — (use original cost)	In Hawaii		Total Everywhere	
	Beginning of taxable year	End of taxable year	Beginning of taxable year	End of taxable year
Land	9999999999999999	9999999999999999	9999999999999999	9999999999999999
Buildings	9999999999999999	9999999999999999	9999999999999999	9999999999999999
Inventories	9999999999999999	9999999999999999	9999999999999999	9999999999999999
Leasehold interests*		9999999999999999		9999999999999999
Rented Property*		9999999999999999		9999999999999999
Other Property	9999999999999999	9999999999999999	9999999999999999	9999999999999999
Total	9999999999999999	9999999999999999	9999999999999999	9999999999999999

* Enter net annual rent X 8.

Compute all percentages to 5 decimal places (0.00000%)

	A. In Hawaii	B. Everywhere
1 Property values (average value of property above)	9999999999999999	9999999999999999
2 Property factor (line 1, col. A divided by line 1, col. B)		999.99999%
3 Total compensation.	9999999999999999	9999999999999999
4 Payroll factor (line 3, col. A divided by line 3, col. B)		999.99999%
5 Total sales	9999999999999999	9999999999999999
6 Sales factor (line 5, col. A divided by line 5, col. B)		999.99999%
7 Total of factors (add lines 2, 4, and 6)		999.99999%
8 Average of factors (see instructions) (To Schedule O, line 2)		999.99999%

Designation of Tax Matters Person (See Instructions.)

Enter below the shareholder designated as the tax matters person (TMP) for the tax year of this return, if one has been designated:

Name of designated TMP	NAME OF DESIGNATED TMPXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Identifying number of TMP	9999999999999999
Address of designated TMP	ADDRESS OF TMPXX ADDRESS OF TMPXX		