

PARTNERSHIP RETURN OF INCOME 2024

For calendar year 2024

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or other tax year beginning 12-12, 2024

and ending 12-12, 2012

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Partnership Name, Federal Employer I.D. No., Business Code No., Mailing Address, Principal business activity, Hawaii Tax I.D. No.

E Check applicable boxes: (1) X Initial Return (2) X Final Return (3) X Amended Return (Attach Sch AMD) (4) X IRS Adjustment (5) X Electing PTE (Attach Sch PTE)

FOR LINES 1 - 9, ENTER AMOUNTS FROM COMPARABLE LINES ON FEDERAL FORM 1065

ATTACH CHECK OR MONEY ORDER HERE

Table with columns for Ordinary Income (Loss) from Trade or Business Activities and amounts for lines 1a through 16.

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 a true, correct, and complete return, made in good faith, for the taxable year stated, pursuant to the Hawaii Income Tax Law, Chapter 235, HRS. Declaration of preparer (other than general partner or limited liability company member manager) is based on all information of which preparer has any knowledge.

Preparer's Signature, Date, Check if self-employed, PTIN, Firm's name, Federal E.I. No., Address and Postal/ZIP Code, Phone no.

Place QR Code Here	Partnership Name PARTNERSHIP NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXX *****	Federal Employer I.D. No. 99-9999999
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TAX & PAYMENTS	17 a	Pass-Through entity tax (attach Schedule PTE) (see Instructions)	17a	9999999999	
	b	Interest due under look-back method.	17b	9999999999	
	c	Add lines 17a and 17b	17c		9999999999
	18	Nonresident withholding distributed to nonresident partners (attach Schedule NP) (see Instructions)	18		9999999999
	19	Add lines 17c and 18	19		9999999999
	20 a	2024 estimated tax payments from N-201Vs <u>654566</u> and N-288As <u>654564</u>	20a	9999999999	
	b	Payments with extension	20b	9999999999	
	c	Add lines 20a and 20b	20c		9999999999
	21	OVERPAYMENT (If line 20c is larger than line 19), enter AMOUNT OVERPAID	21		9999999999
	22	Enter amount of line 21 you want Credited to 2025 estimated tax ▶22a \$ <u>999999999</u> Refunded ▶	22b		9999999999
23	TAX DUE (If line 19 is larger than line 20c) enter the amount due	23		9999999999	
24	AMOUNT OF PAYMENT (see Instructions)	24		9999999999	
AMENDED RETURN	25	Amount paid (overpaid) on original return — AMENDED RETURN ONLY	25		9999999999
	26	BALANCE DUE (REFUND) with amended return (See Instructions)	26		9999999999

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Partnership Name
PARTNERSHIP NAME
XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Federal Employer I.D. No.
99-9999999

Schedule K		PARTNERS' Pro Rata Share Items		b. Attributable to Hawaii		c. Attributable Everywhere	
Income (Losses)	1	Ordinary income (loss) from trade or business activities (page 1, line 16)		9999999999999999	1	9999999999999999	
	2	Net income (loss) from rental real estate activities (attach federal Form 8825)		9999999999999999	2	9999999999999999	
	3 a	Gross income (loss) 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	Guaranteed Payments to Partners		9999999999999999	4	9999999999999999	
	5	Interest income		9999999999999999	5	9999999999999999	
	6	Ordinary dividends		9999999999999999	6	9999999999999999	
	7	Royalty income		9999999999999999	7	9999999999999999	
	8	Net short-term capital gain (loss) (Schedule D (Form N-20))		9999999999999999	8	9999999999999999	
	9	Net long-term capital gain (loss) (Schedule D (Form N-20))		9999999999999999	9	9999999999999999	
10	Net gain (loss) under IRC section 1231 (attach Schedule D-1)		9999999999999999	10	9999999999999999		
11	Other income (loss) (attach schedule)		9999999999999999	11	9999999999999999		
Deductions	12	Charitable contributions (attach schedule)		9999999999999999	12	9999999999999999	
	13	IRC section 179 expense deduction (attach federal Form 4562)		9999999999999999	13	9999999999999999	
	14	Deductions related to portfolio income (loss) (attach schedule)		9999999999999999	14	9999999999999999	
	15	Other deductions (attach schedule)		9999999999999999	15	9999999999999999	
Credits	16	Total cost of qualifying property for the Capital Goods Excise Tax Credit (attach Form N-312)		9999999999999999	16		
	17	Fuel Tax Credit for Commercial Fishers (attach Form N-163)		9999999999999999	17		
	18	Amounts needed to claim the Enterprise Zone Tax Credit (attach Form N-756)	See N-756A		18		
	19	Hawaii Low-Income Housing Tax Credit (attach Form N-586)		9999999999999999	19		
	20	Credit for Employment of Vocational Rehabilitation Referrals (attach Form N-884)		9999999999999999	20		
	21	Motion Picture, Digital Media, and Film Production Income Tax Credit (attach Form N-340)		9999999999999999	21		
	22	Credit for School Repair and Maintenance (attach Form N-330)		9999999999999999	22		
	23	Renewable Energy Technologies Income Tax Credit (attach Form N-342)		9999999999999999	23		
	24	Important Agricultural Land Qualified Agricultural Cost Tax Credit (attach Form N-344)		9999999999999999	24		
	25	Tax Credit for Research Activities (attach Form N-346)		9999999999999999	25		
	26	Historic Preservation Income Tax Credit (attach Form N-325)		9999999999999999	26		
	27	Renewable Fuels Production Tax Credit for Years After 12/31/21 (attach Form N-360)		9999999999999999	27		
	28	Pass-Through Entity Tax Credit (attach Schedule PTE)		9999999999999999	28		
29	Credit for income tax withheld on Form N-288A (net of refunds)		9999999999999999	29			
30	Total Hawaii income tax withheld on Schedule NP		9999999999999999	30			
Investment Interest	31 a	Interest expense on investment debts		9999999999999999	31a	9999999999999999	
	b (1)	Investment income included on lines 5, 6, and 7, Schedule K		9999999999999999	31b(1)	9999999999999999	
	(2)	Investment expenses included on line 14, Schedule K		9999999999999999	31b(2)	9999999999999999	
Other Items	32	Attach schedule for other items and amounts not reported above (e.g., credit recapture amounts) See Instructions. Check box if schedules attached <input checked="" type="checkbox"/>		9999999999999999	32		
Analysis	33 a	Income (loss). Combine lines 1 through 11 in column c. From the result, minus the sum of lines 12 through 15 and 31a in column c			33a	9999999999999999	
	b	Analysis by type of partner:	(a) Corporate	(b) Individual i. Active ii. Passive	(c) Partnership	(d) Exempt organization	(e) Nominee/Other
			1. General Partners	9999999999	9999999999 9999999999	9999999999	9999999999
2. Limited Partners	9999999999	9999999999 9999999999	9999999999	9999999999	9999999999		