STATE OF HAWAII DEPARTMENT OF TAXATION



General Information and Scannable Specifications for Form N-288A (Rev. 2020)

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

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

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

FORM N-288A (Rev. 2020)

General Information and Scannable Specifications

This document provides software vendors with the requirements for reproducing Form N-288A. Form N-288A is designed for electronic scanning that permits faster processing with fewer errors. Software developers who reproduce, develop, or distribute Form N-288A 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 requirements as established in this document and our current 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 Form N-288A 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 form must not be submitted to the Department for processing.
- Substitute forms must be proofread prior to submission.

2. Paper and Ink

- The paper size is 8.5 inches by 8 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. Helvetica
- 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. FORM: 8 pt Helvetica bold

2. N-288A: 14 pt Helvetica bold

3. REV. 2020: 8 pt Helvetica bold

- The following font and size should be used for the form number located at the bottom right corner of the form:
 - 1. FORM N-288A (REV. 2020): 10 pt Helvetica bold

4. Variable Data

- All variable data fields must utilize 12 pt Courier font.
- All variable data fields require exact placement.
- Print all alpha characters uppercase.
- Use a bold X (X) as a checkbox indicator. See exhibit for exact placement. The use of a checkmark is not acceptable.

5. Variable Data Delimiters

 Seller's and Buyer's Social Security Number must be printed with dash (-) delimiters. For example:

123-45-6789

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

 Seller's and Buyer's Federal Employer Identification Number must be printed with a dash (-) delimiter. For example:

12-1234567

(2 digits, followed by a dash (-), followed by 7 digits).

 Date of transfer or installment payment date must be printed with dash (-) delimiters. For example:

MM-DD-YYYY

(2 digits for month, followed by a dash (-),followed by 2 digits for the day, followed by a dash (-), followed by 4 digits for the year ending)

6. Dollar Amounts

- · Do not use commas as thousand separators.
- Do not use leading dollar signs.
- · Amounts are right justified.

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 tailing 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.
- Form N-288A (Rev. 2020) cannot be filed until 2021.

SCANNABLE SPECIFICATIONS

1. Layout

 Open space around variable data fields should be adhered to as much as possible except for the areas that do not require optical character recognition. Do not place any additional information in these areas.

2. Hawaii Vendor I.D. Number

- Print your 2-digit Hawaii Vendor I.D. Number following the "ID NO" label at the following positions:
 - Page 1: The 2-digit Hawaii Vendor I.D. Number should begin at column 44, row 44.

3. QR Code

- A 2D 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 6 and at the bottom of row 9.
- · Height of the QR code is 0.5 inch.
- Length of the QR code 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 as much as possible.
- · DO NOT stretch the QR code image.
- The required QR code for the first page is: N288A T 2020A 01 VIDXX

The QR code includes the form number (N288A), an underscore, type of form (T), space, 4-digit form year

- (2020), 1-letter revision indicator (A), space, 2-digit page number (01), space, vendor I.D. label (VID), and your 2-digit Hawaii Vendor I.D. Number (XX). There are no hyphens.
- The human readable text for the QR code MUST be printed at the bottom of the page at column 6, row 44, utilizing 6 pt Helvetica font.
- 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 (wmf). This format causes a very low read rate by the Department's IBML scanners.

4. 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 Form N-288A. If you did not receive the acetate overlays, please contact the Forms Coordinator.

| -288A | | | | alendar | IIIIS SPA | CE FOR DATE RECEIVED STAN | 4 |
|-------------------------|--|-----------------------|---|--|----------------------------|--|-----------|
| EV. 2020) | Statement of Dispositions By N | | | Year | | | |
| Place | of Hawaii Real F | | | 2021 | | | |
| R Code Here | Copy A Subm | | |)onartment | | | |
| 11010 | | | e Copy C for Instri | | | | 9 |
| | and Location of Property | | 2. Trans | sferor/Seller's Share | of 3. D | Date of Transfer OR | |
| | (include tax map key numbe ION AND LOCATI | | Amo | unt Realized | (<u>)</u> | Installment Payment Date | |
| | XXXXXXXXXXXXXXX | | ,,,,,,, 1234 | 5678901234 | 5.00 | 99-99-999 | 9 |
| | eller is an: 🗓 Individual or | | artnership | 15. Tr | ansferor/Seller's | Hawaii Income Tax Withheld | |
| Corpora | | | ust or Estate | | | 34567890123456.0 | |
| LASI Corpora | tion 25 corporation | 1 L2S. Ir | ust or Estate | | 12. | 34567890123456.0 | 0 |
| Transferor/Se | eller's Business Name | | | | | 6a. Transferor/Seller's FEIN | |
| [RANSFE] | ROR BUSINESS N | AMEXXX | XXXXXXXXXX | XXXXXXXXX | XXXXXXX | 99-999999 | |
| Transferor/Se | eller's First Name | I м.і. | Last Name | | Suffix | 7a. Transferor/Seller's SSN | |
| | AME XXXXXXXXXXX | | | XXXXXXXX | SUFFIX | 123-45-6789 | |
| | | VITATVY | LUADI IVANILA | | POLLTY | 1123-43-0709 | |
| Transferor/Se | eller's Street Address | | | | | | |
| TRANSFEI | ROR STREET ADD | RESS X | XXXXXXXXXX | XXXXXXXX | XXXXXXX | | |
| City or Provi | nce | State | Postal/ZIP code | Non U.S.A | . Country | | |
| | PROVINCE XXXX | XST | 12345 | | xxxxxx | | |
| III OR | PROVINCE AAAA | AISI | 112345 | COUNTRY | ^^^^ | | |
|). Transferee/E | Buyer's Name | | | | | 11. Transferee/Buyer's FEIN | |
| CRANSFEI | REE NAME XXXXX | XXXXXX | XXXXXXXXXX | xxxxxxxxx | XXXXXXX | 12-3456789 | |
| | | | | | | 1 | |
| 2. Transferee/I | Buyer's Street Address | | | | | 13. Transferee/Buyer's SSN | i i |
| | Buyer's Street Address | DECC V | XXXXXXXXXX | XXXXXXXXX | XXXXXXX | 13. Transferee/Buyer's SSN | |
| TRANSFE | REE STREET ADD | | | | | 13. Transferee/Buyer's SSN 123-45-6789 | |
| TRANSFE | REE STREET ADD | RESS X | XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | XXXXXXXXXX Non U.S.A | | | |
| TRANSFEI | REE STREET ADD | | | Non U.S.A | | | |
| TRANSFEI | REE STREET ADD | State | Postal/ZIP code | Non U.S.A | . Country | | |
| CRANSFEI | REE STREET ADD | State | Postal/ZIP code | Non U.S.A | . Country | | |
| FRANSFEI City or Provi | REE STREET ADD | State | Postal/ZIP code | Non U.S.A | . Country XXXXXXX | 123-45-6789 | |
| TRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF | Non U.S.A COUNTRY RS OR PAYMI | Country XXXXXXX ENTS MAD | 123-45-6789 | |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | 123-45-6789 DE IN 2021 ONLY. | ") |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") 20) |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") 20) |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") 20) |
| TRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") |
| TRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") 20) |
| TRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") |
| TRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | 20) |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") 20) |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | ") |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | 20) |
| CRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | 20) |
| TRANSFEI City or Provi | REE STREET ADD | State ST USED F | Postal/ZIP code 123456 OR TRANSFEF R CHECK OR MONEY | Non U.S.A COUNTRY RS OR PAYMI ORDER TO FORM | Country XXXXXXX ENTS MAD | DE IN 2021 ONLY. to "Hawaii State Tax Collector" | , |

| | | | | | | | | | | | | | | - | | | | | | | | | - | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | - | | | | | |
|---------------|---|----|---|----|----|---|----|---|---|----|---|----|---|---|----|----|-----------|----|---|---|-------------|---|---|----|---|----|----|---|----|----|---|----|--------------|---|----|----|---|----|-------------|---|---|----|----|---|----|----|---|----|----|---|---------|----|-------------|---|---|----|----------------|---|----|
| 2 4 3 | 6 | 8 | | 10 | 12 | | 14 | 1 | 6 | 18 | | 20 | 2 | 2 | 24 | 20 | 5 | 28 | 3 | 0 | 32 | 3 | 4 | 36 | 3 | 38 | 40 | 2 | 12 | 44 | | 46 | 48 | 8 | 50 | 53 | 2 | 54 | 56 | 5 | 8 | 60 | 62 | 2 | 64 | 66 | | 68 | 70 | 7 | 2 | 74 | 76 | 7 | 8 | 80 | 2 82 3 | 2 | 84 |
| 4 | | | | | | | | + | | | | | - | | | | - | | | | | | | | - | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 4 | | |
| 6 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 6 | | |
| 7 | | H | | | | | | + | + | H | | | + | + | | + | H | | + | | | + | + | | + | + | + | | + | + | | | + | | | + | | | | + | - | | + | - | | | | | | | + | | | + | + | | 7 | | |
| 9 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 9 | | |
| 10 | | H | | + | | H | | + | + | H | | | + | + | | + | H | | + | | | + | + | | + | + | | | + | | | | + | H | | + | | | | | + | | | - | | | | | | | | | | + | + | | 10 | | |
| 11 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 11 | | |
| 13 | | - | | | | | | 4 | - | - | | | 4 | - | | | - | | | | | _ | - | | 4 | | | | 4 | | | | | | | | | | | | - | | | | | | | | | | | | | | | | 13 | | |
| 14 15 | | H | | | | | | | t | H | | | + | t | | | t | | + | | | | | | + | + | | | + | | | | | | | | | | | | | | | | | | | | | | | | | + | | | 14 | | |
| 16 | | | | | | | | | + | | | | - | - | | | - | | - | | | - | - | | - | - | | | - | | | | | | | | | | | | | | | | | | | | | | | | | | | | 16 | | |
| 17 18 | | | | | | | | | + | | | | + | | | | | | | | | | | | + | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 17 | | |
| 19 | | | | | | | | | - | - | | | 1 | - | | | - | | | | | | | | 4 | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | 19 | | |
| 20 21 | | | H | + | | | | + | + | + | | + | | + | Н | + | \dagger | | + | | H | + | + | | + | + | + | H | + | | | H | + | | | + | | + | | + | | | + | | H | | H | + | | H | + | | | + | + | | 20 | | |
| 22 | | | | 1 | | | | | 1 | | | | | | | | 1 | | 1 | | | | | | 1 | | | | 1 | | | | | | | | | | | 1 | | П | | | | | | 1 | | | | | | 1 | | | 22 | 2 | |
| 23 24 | | - | H | + | | H | | | + | - | H | | + | + | | - | + | | + | | \parallel | + | + | | | + | + | H | + | | | | + | | | + | | | \parallel | | | | + | | | | H | + | | | + | | \parallel | | + | | 23 | | |
| 25 | | | П | | | П | | 1 | 1 | ļ | | | | 1 | | 1 | 1 | П | 1 | | П | 1 | | П | | | | П | 1 | | | П | | | | 1 | | | | | | П | 1 | | П | | | 1 | | П | | | | | | | 25 | | |
| 26 27 | | H | | + | | H | | + | + | H | | | + | H | | + | H | | + | | H | + | + | | + | + | + | | + | | | | ł | H | | + | | | | | H | H | + | + | | | H | | | | H | | | + | + | | 26 | | |
| 28 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 28 | | |
| 29 30 | | H | | | | H | | + | + | H | | | + | H | | + | H | | + | | H | + | + | | + | + | + | | + | | | | H | H | | + | | | | | + | | + | + | | | H | | | | + | | | + | + | | 30 | | |
| 31 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 31 | | |
| 32 | | | | | | | | | + | | | | | | | | + | | | | | | | | - | | | | | | | | | | | | | | | | | | + | | | | | | | | + | | | | | | 32 | | |
| 33 34 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 33 | | |
| 35 | | H | | + | | H | | + | + | H | | | + | H | | + | H | | + | | | + | + | | + | + | | | + | | | | H | H | | + | | | | + | H | | + | H | | | H | | | | + | | | + | + | | 35 | | |
| 36 37 | | | | | | | | | İ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 36 | 7 | |
| 38 | | | | | | | | + | + | - | | | + | + | | | + | | | | H | | | | + | + | + | | + | | | | | | | | | | | | | | + | | | | H | | | | + | | | - | | | 38 | | |
| 39 40 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 39 | | |
| 41 | | H | | + | | H | | + | + | H | | | + | H | | | H | | + | | | - | + | | + | + | | | + | | | | + | | | + | | | | | + | | | - | | | | | | | | | | + | + | | 41 | | |
| 42 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 42 | | |
| 44 | | | | | | | | | - | - | | | 4 | - | | | + | | | | | | | | 4 | | - | | - | | | | | | | | | | | | | | - | | | | | | | | - | | | | | | 44 | | |
| 45 46 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 46 | | |
| 47 | | ļ. | Н | - | | H | | - | - | | H | H | - | 1 | H | - | F | H | - | | H | - | - | H | 4 | - | | Н | - | | | Ц | 1 | | | | | | H | - | - | H | - | | H | | | 4 | | H | - | | H | | 1 | | 47 | 7 | |
| 48 49 | | | | | | | | | | | | | | İ | | | t | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | 48 | | |
| 50 | | | | - | | H | | Ŧ | F | | H | | Ţ | F | H | _ | F | H | 4 | | H | Ŧ | | H | | Ŧ | | H | Ŧ | | | | F | | | - | | | H | | | H | Ŧ | | | | | 1 | | | F | | H | | | | 5(| 0 | |
| 51 52 | | | Н | | | | | + | | | | | | + | | | t | | + | | | + | | | | | | H | + | | | H | † | | | | | | | | | | | | H | | | † | | H | \perp | | | | | | 51 | | |
| 53 | | F | H | 1 | | H | | - | Ŧ | F | H | | I | F | | 4 | F | H | Ŧ | | H | Ŧ | T | H | 4 | Ŧ | | H | 4 | | H | | F | | | | | H | H | 4 | | H | T | | | | F | 4 | | | F | | H | 4 | I | | 53 | 3 | |
| 54 55 | | | | | | H | | | + | - | | | | + | | | + | | | | H | | + | H | | + | | H | + | | | | + | | | + | | | \parallel | | | | + | | | | | | | | + | | \parallel | | + | | 54 | | |
| 56 | | | П | | | H | | | | | П | | 1 | | П | | F | П | 1 | | П | | | П | 1 | | | П | 1 | | | П | | | | | | | П | 1 | | П | 1 | | П | | | 1 | | П | 1 | | П | | | | 56 | 6 | |
| 57 58 | H | | H | + | | | | + | + | | | + | | + | H | + | \dagger | | + | | H | | + | | + | + | + | H | + | | | H | + | | | | | + | \parallel | + | | | + | | H | | H | + | | H | + | | \parallel | | | | 57 | | |
| 59 | | F | | | | H | | | ļ | L | H | | | ļ | | 1 | ļ | | 1 | | H | 1 | ļ | П | | 1 | | | 1 | | H | | | | | 1 | | | П | | | H | 1 | | H | | | 1 | | | | | П | 1 | | П | 59 | | |
| 60 61 | H | H | H | + | | | | + | + | H | | + | + | + | | + | + | | + | + | H | + | + | | + | + | + | H | + | | H | H | + | + | | + | | + | \parallel | + | + | H | + | + | H | | H | + | | H | + | | \parallel | + | + | | 61 | | |
| 62 | | İ | | | | | | | # | İ | | | | ļ | | | ļ | | | | H | | | П | | # | | | | | | | | | | 1 | | | | 1 | | | 1 | | | | | # | | | | | | 1 | 1 | | 62 | | |
| 63 4 64 | 6 | 8 | | 10 | 12 | H | 14 | 1 | 6 | 18 | | 20 | 2 | 2 | 24 | 20 | 5 | 28 | 3 | 0 | 32 | 3 | 4 | 36 | 3 | 38 | 40 | | 12 | 44 | | 46 | 48 | 8 | 50 | 53 | 2 | 54 | 56 | 5 | 8 | 60 | 62 | 2 | 64 | 66 | | 68 | 70 | 7 | 2 | 74 | 76 | 7 | 8 | 80 | 63 82 64 | 2 | 84 |
| 65 | | | | | | | | | 1 | | | | | İ | | 1 | İ | | | | | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | 1 | | | | | | | 1 | | 65 | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

FORM N-288A (REV. 2020)

10 12

STATE OF HAWAII-DEPARTMENT OF TAXATION Statement of Withholding on Dispositions By Nonresident Persons of Hawaii Real Property Interests

24 26

18 20 22

Calendar Year

THIS SPACE FOR DATE RECEIVED STAMP

Copy B

60 62

Send to Transferor/Seller. This information is being furnished to the State of Hawaii, Department of Taxation. See Instructions on back of this copy.

| Description and Location of Property Transferred (include tax map key number) DESCRIPTION AND LOCATION | N OF | Transferor/Seller's S Amount Realized | | Date of Transfer OR X Installment Payment Date |
|--|-----------------|---|---------------------|---|
| PROPERTY XXXXXXXXXXXXXX | | 123456789012 | 345.00 | 99-99-9999 |
| 4. Transferor/Seller is an: X Individual or RL | T 🗓 Partnership | 5. | Transferor/Seller's | Hawaii Income Tax Withheld |
| Corporation S S corporation | Trust or Estate | 8 | 12 | 234567890123456.00 |
| 6. Transferor/Seller's Business Name | | | | 6a. Transferor/Seller's FEIN |
| TRANSFEROR BUSINESS NAM | 1EXXXXXXXX | XXXXXXXXXXXX | XXXXXXXX | 99-9999999 |
| 7. Transferor/Seller's First Name | M.I. Last Nar | ne | Suffix | 7a. Transferor/Seller's SSN |
| FIRST NAME XXXXXXXXXXXX | MIXX LAST | NAMEXXXXXXXX | X SUFFIX | 123-45-6789 |
| 8. Transferor/Seller's Street Address | | | | |
| TRANSFEROR STREET ADDRE | ESS XXXXXXX | XXXXXXXXXXXX | XXXXXXXXX | |
| 9. City or Province | State Postal/Z | IP code Non U | .S.A. Country | - |
| CITY OR PROVINCE XXXXX | ST 12345 | COUNT | RY XXXXXXX | |
| 10. Transferee/Buyer's Name | | | | |
| TRANSFEREE NAME XXXXXXX | XXXXXXXXXX | XXXXXXXXXXXX | XXXXXXXXX | |
| 12. Transferee/Buyer's Street Address | | | | |
| TRANSFEREE STREET ADDRE | ESS XXXXXXX | XXXXXXXXXXX | XXXXXXXXX | |
| 14. City or Province | State Postal/Z | IP code Nor U | J.S.A. Country | |
| CITY OR PROVINCE | ST 12345 | COUNT | RY XXXXXX | |

THIS FORM IS TO BE USED FOR TRANSFERS OR PAYMENTS MADE IN 2021 ONLY.

FORM N-288A (REV. 2020)

INSTRUCTIONS TO TRANSFEROR/SELLER

Generally, a 7.25% withholding obligation must be withheld by the transferee/buyer when a nonresident person disposes of their Hawaii real property. Even though tax may or may not have been withheld, you are required to file a Form N-15, N-20, N-30, N-35 or N-40 to report the sale or other disposition.

CERTIFICATE TO WAIVE OR ADJUST WITHHOLDING

If there is insufficient funds to pay the withholding required, the transferor/seller may file Form N-288B to apply for a withholding certificate to waive or adjust the withholding. This form is used only for applications based on (1) a claim that the transferor/seller will not realize any gain with respect to the transfer, or (2) a claim that there will be insufficient proceeds to pay the withholding required under section 235-68(b), Hawaii Revised Statutes (HRS), after payment of all costs, including selling expenses and the amount of any mortgage or lien secured by the property. NOTE: Form N-288B should be filed no later than 10 working days prior

10 12 14 16 18 20 22 24 26 28 30 32 34 36 38 40 42

to the date of transfer. Form N-288B will not be approved after the date of transfer has passed. See Form N-288B for more information.

44 46 48 50 52 54 56

The transferor/seller may file for a refund if the real property interest is in excess of the transferor/seller's tax liability on Form N-288C. The nonresident transferor/seller is still required to file a Hawaii income tax return (Forms N-15, N-20, N-30, N-35, or N-40) after the end of the taxable year, report the entire Hawaii source income for the year including the transaction and pay any additional tax due on the income or request a refund. See Form N-288C for more information.

NOTE: Under section 235-111, HRS, any claim for a credit or refund of an overpayment of taxes must be filed within three years from the due date of the return, or within two years from the time the tax was paid, whichever is later.

58 60 62 64

 70 72

22 24 26 28 30 32 34 36 38 40 42 44 46

References to "married" and "spouse" are also references to "in a civil union" and "civil union partner," respectively.

Prepare Form N-288A for each nonresident transferor/seller subject to withholding. If two or more nonresident transferors/sellers jointly transfer a Hawaii real property interest, prepare a separate Form N-288A for each nonresident transferor/seller.

18 20

A separate Form N-288A should also be prepared for both taxpayer and spouse whether or not they will be filing a joint return for the year in which they transferred their Hawaii real property interest. Attach Copy A of Form(s) N-288A and your check or money order to Form N-288.

Joint Transferors/Sellers

10 12

10

12

14

15

19

21

23

27

28

29

30

32

33

34

35

36

37

38

39

40

41

43

45

49

50

51

52

53

54

56

57

58

59

60

61

62

14 16

If one or more nonresident persons and one or more resident persons jointly transfers Hawaii real property interest, first, determine the amount subject to withholding by allocating the amount realized from the transfer among the transferors/sellers based on their capital contribution to the property. For this purpose, a taxpayer and spouse are treated as having contributed 50% each. Second, withhold on the total amount allocated to nonresident transferors/sellers. Third, credit the amount withheld among the nonresident transferors/sellers as they mutually agree. The transferors/sellers must request that the withholding be credited as agreed upon by the 10th day after the date of transfer. If no agreement is reached, credit the withholding by evenly dividing it among the nonresident transferors/sellers.

Line by line instructions

Box 1 — Enter a description of the property including its location and the nature of any substantial improvements, such as an apartment building or warehouse. Include the tax map key.

Box 2 — Enter the amount realized by the transferor/seller whose name appears on this form. If the transferor/seller is reporting the gain under the installment method, enter the principal portion of the total payments for the year. The transferor/seller must provide written notification to the transferee/buyer prior to the transfer date if the transferor/ seller will elect out of the installment method and report the gain in full in the year of sale. If a transferee/buyer does not receive written notification, the transferee/buyer shall assume that the transferor/seller will report the gain under the installment method.

Box 3 — Enter the date of transfer. For payments on an installment sale, enter the payment date of the installment and check the "Installment Payment Date" box.

Box 4 -- Check the applicable box to indicate whether the transferor/ seller is an individual or revocable living trust, a partnership, a corporation, an S corporation, or trust (including an irrevocable trust) or estate. If the transferor/seller is an LLC that files a partnership return, check the box for a partnership. If the transferor/seller is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, check the box for an individual. If the transferor/seller is a revocable living trust, or any other trust in which an individual is treated as the owner of the trust, check the box for an individual or revocable living trust. For all other trusts and estates, check the box for a trust or estate.

Box 5 - Enter the Hawaii income tax withheld by the transferor/seller whose name appears on this form. If there are two or more nonresident transferors/sellers, indicate the respective amounts withheld for each nonresident transferor/seller on a separate Form N-288A. If the amount required to be withheld has been waived or exempted, enter zero (0). If

10 12 14 16 18 20 22 24 26 28 30 32 34 36 38 40 42 44 46 48 50 52 54 56 58 60 62 64 66 68 70 72

the amount required to be withheld has been reduced or waived by the Department of Taxation, attach a copy of the approved Form N-288B. If one or more of the transferors/sellers are exempt from the withholding and you are issuing the exempt transferor/seller Form N-288A, attach a copy of the exempt transferor/seller's Form N-289. If the transferor/ seller is a partnership, an S corporation, or a trust or estate, please attach a schedule showing the name, identification number, and amount of the withholding allocated to each partner or member, S corporation shareholder, or beneficiary of the trust or estate. For trusts and finalyear estates, this schedule does not replace the election that needs to be made on Form N-40T.

66

68 70

72

5

12

13

14

15

16

17

20

21

25

26

27

28

29

30

31

34

35

36

37

38

41

42

43

44

45

50

51

52

53

54

56

57

58

59

60

61

62

65

78

74 76

Box 6 — Enter the transferor/seller's business name.

48 50 52 54 56 58 60 62 64

Box 6a — Enter the transferor/seller's federal employer identification number (FEIN). If the transferor/seller is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, enter the social security number of the individual in box 7a. If the transferor/seller is a revocable living trust, or any other trust in security number of the individual in box 7a. For all other trusts and estates, enter the federal employer identification number of the trust or estate in box 6a.

Box 7 — Enter the transferor/seller's name.

Box 7a -- Enter the transferor/seller's social security number (SSN).

Box 8 — Enter the transferor/seller's street address.

Box 9 -- Enter the transferor/seller's City or Province, State, Postal/ZIP code and Non U.S.A. County (if applicable).

NOTE: If your mailing address has changed, you must notify the Department of the change by completing Form ITPS-COA, Change of Address Form. Failure to do so may delay any important notices or correspondence to you.

Box 10 — Enter the transferee/buyer's name.

Box 11 -- Enter the transferee/buyer's FEIN. If the transferee/buyer is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, enter the social security number of the individual in box 13. If the transferor/seller is a revocable living 40 trust, or any other trust in which an individual is treated as the owner of the trust, enter the social security number of the individual in box 13. For all other trusts and estates, enter the federal employer identification number of the trust or estate in box 11.

Box 12 -- Enter the transferee/buyer's street address.

Box 13 -- Enter the transferee/buyer's social security number (SSN).

Box 14 -- Enter the transferee/buyer's City or Province, State, Postal/ ZIP code and Non U.S.A. County (if applicable).

NOTE: If your mailing address has changed, you must notify the Department of the change by completing Form ITPS-COA, Change of Address Form. Failure to do so may delay any important notices or correspondence to you.

FORM N-288A (REV. 2020)

10 12

18 20

24 26

18 20 22 24 26

STATE OF HAWAII-DEPARTMENT OF TAXATION Statement of Withholding on Dispositions By Nonresident Persons of Hawaii Real Property Interests

> Calendar Year

 58 60 62

THIS SPACE FOR DATE RECEIVED STAMP

Copy C

For Transferee's/Buyer's Records.

| Description and Location of Property Transferred (Include tax map key number) DESCRIPTION AND LOCATIO PROPERTY XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | | Amount | or/Seller's Share of Realized 789012345 | | Date of Transfer OR Installment Payment Date 99-99-9999 |
|---|---------------------------|----------|---|------------------|---|
| 4. Transferor/Seller s an: X Individual or RL X Corporation X S corporation | Partnership Trust or Esta | nte | 5. Tran | | Hawaii Income Tax Withheld 234567890123456.00 |
| 6. Transferor/Seller's Business Name TRANSFEROR BUSINESS NAM | 1EXXXXXXXX | xxxxxxx | (XXXXXXXX | xxxxx | |
| 7. Transferor/Selle's First Name FIRST NAME XXXXXXXXXX | M.I. Last N | | | Suffix SUFFIX | |
| 8. Transferor/Seller's Street Address TRANSFEROR STREET ADDRI | | | | | |
| 9. City or Province | State Postal/ | ZIP code | Non U.S.A. C | Country | |
| CITY OR PROVINCE XXXXX | ST 1234 | 5 | COUNTRY | XXXXXX | |
| 10. Transferee/Buyer's Name | | | | | 11. Transferee/Buyer's FEIN |
| TRANSFEREE NAME XXXXXX | XXXXXXXXX | XXXXXXX | XXXXXXXX | XXXXXXX | 12-3456789 |
| 12. Transferee/Buyer's Street Address | | | | | 13. Transferee/Buyer's SSN |
| TRANSFEREE STREET ADDRE | SS XXXXXX | XXXXXXX | XXXXXXXX | XXXXXX | 123-45-6789 |
| 14. City or Province | State Postal/ | ZIP code | Non U.S.A. C | Country | |
| CITY OR PROVINCE | ST 1234 | 5 | COUNTRY | XXXXXX | |

THIS FORM IS TO BE USED FOR TRANSFERS OR PAYMENTS MADE IN 2021 ONLY.

38 40 42

44 46

48 50 52 54 56

58 60 62

70 72

FORM N-288A (REV. 2020)

22 24 26 28 30 32 34 36 38 40 42 44 46

References to "married" and "spouse" are also references to "in a civil union" and "civil union partner," respectively.

Prepare Form N-288A for each nonresident transferor/seller subject to withholding. If two or more nonresident transferors/sellers jointly transfer a Hawaii real property interest, prepare a separate Form N-288A for each nonresident transferor/seller.

18 20

A separate Form N-288A should also be prepared for both taxpayer and spouse whether or not they will be filing a joint return for the year in which they transferred their Hawaii real property interest. Attach Copy A of Form(s) N-288A and your check or money order to Form N-288.

Joint Transferors/Sellers

10 12

10

12

14

15

19

21

23

27

28

29

30

32

33

34

35

36

37

38

39

40

41

43

45

49

50

51

52

53

54

56

57

58

59

60

61

62

14 16

If one or more nonresident persons and one or more resident persons jointly transfers Hawaii real property interest, first, determine the amount subject to withholding by allocating the amount realized from the transfer among the transferors/sellers based on their capital contribution to the property. For this purpose, a taxpayer and spouse are treated as having contributed 50% each. Second, withhold on the total amount allocated to nonresident transferors/sellers. Third, credit the amount withheld among the nonresident transferors/sellers as they mutually agree. The transferors/sellers must request that the withholding be credited as agreed upon by the 10th day after the date of transfer. If no agreement is reached, credit the withholding by evenly dividing it among the nonresident transferors/sellers.

Line by line instructions

Box 1 — Enter a description of the property including its location and the nature of any substantial improvements, such as an apartment building or warehouse. Include the tax map key.

Box 2 — Enter the amount realized by the transferor/seller whose name appears on this form. If the transferor/seller is reporting the gain under the installment method, enter the principal portion of the total payments for the year. The transferor/seller must provide written notification to the transferee/buyer prior to the transfer date if the transferor/ seller will elect out of the installment method and report the gain in full in the year of sale. If a transferee/buyer does not receive written notification, the transferee/buyer shall assume that the transferor/seller will report the gain under the installment method.

Box 3 — Enter the date of transfer. For payments on an installment sale, enter the payment date of the installment and check the "Installment Payment Date" box.

Box 4 -- Check the applicable box to indicate whether the transferor/ seller is an individual or revocable living trust, a partnership, a corporation, an S corporation, or trust (including an irrevocable trust) or estate. If the transferor/seller is an LLC that files a partnership return, check the box for a partnership. If the transferor/seller is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, check the box for an individual. If the transferor/seller is a revocable living trust, or any other trust in which an individual is treated as the owner of the trust, check the box for an individual or revocable living trust. For all other trusts and estates, check the box for a trust or estate.

Box 5 - Enter the Hawaii income tax withheld by the transferor/seller whose name appears on this form. If there are two or more nonresident transferors/sellers, indicate the respective amounts withheld for each nonresident transferor/seller on a separate Form N-288A. If the amount required to be withheld has been waived or exempted, enter zero (0). If

10 12 14 16 18 20 22 24 26 28 30 32 34 36 38 40 42 44 46 48 50 52 54 56 58 60 62 64 66 68 70 72

the amount required to be withheld has been reduced or waived by the Department of Taxation, attach a copy of the approved Form N-288B. If one or more of the transferors/sellers are exempt from the withholding and you are issuing the exempt transferor/seller Form N-288A, attach a copy of the exempt transferor/seller's Form N-289. If the transferor/ seller is a partnership, an S corporation, or a trust or estate, please attach a schedule showing the name, identification number, and amount of the withholding allocated to each partner or member, S corporation shareholder, or beneficiary of the trust or estate. For trusts and finalyear estates, this schedule does not replace the election that needs to be made on Form N-40T.

66

68 70

72

5

12

13

14

15

16

17

20

21

25

26

27

28

29

30

31

34

35

36

37

38

41

42

43

44

45

50

51

52

53

54

56

57

58

59

60

61

62

65

78

74 76

Box 6 — Enter the transferor/seller's business name.

48 50 52 54 56 58 60 62 64

Box 6a — Enter the transferor/seller's federal employer identification number (FEIN). If the transferor/seller is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, enter the social security number of the individual in box 7a. If the transferor/seller is a revocable living trust, or any other trust in security number of the individual in box 7a. For all other trusts and estates, enter the federal employer identification number of the trust or estate in box 6a.

Box 7 — Enter the transferor/seller's name.

Box 7a -- Enter the transferor/seller's social security number (SSN).

Box 8 — Enter the transferor/seller's street address.

Box 9 -- Enter the transferor/seller's City or Province, State, Postal/ZIP code and Non U.S.A. County (if applicable).

NOTE: If your mailing address has changed, you must notify the Department of the change by completing Form ITPS-COA, Change of Address Form. Failure to do so may delay any important notices or correspondence to you.

Box 10 — Enter the transferee/buyer's name.

Box 11 -- Enter the transferee/buyer's FEIN. If the transferee/buyer is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, enter the social security number of the individual in box 13. If the transferor/seller is a revocable living 40 trust, or any other trust in which an individual is treated as the owner of the trust, enter the social security number of the individual in box 13. For all other trusts and estates, enter the federal employer identification number of the trust or estate in box 11.

Box 12 -- Enter the transferee/buyer's street address.

Box 13 -- Enter the transferee/buyer's social security number (SSN).

Box 14 -- Enter the transferee/buyer's City or Province, State, Postal/ ZIP code and Non U.S.A. County (if applicable).

NOTE: If your mailing address has changed, you must notify the Department of the change by completing Form ITPS-COA, Change of Address Form. Failure to do so may delay any important notices or correspondence to you.

FORM N-288A (REV. 2020)

Place

QR Code

Here

STATE OF HAWAII—DEPARTMENT OF TAXATION
Statement of Withholding on
Dispositions By Nonresident Persons
of Hawaii Real Property Interests

Calendar Year 2021

Copy A — Submit to the State of Hawaii - Department of Taxation. See Copy C for Instructions

| Description and Location of Property Transferred (Include tax map key number) DESCRIPTION AND LOCATION PROPERTY XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | | 2. Transferd Amount 123456 | or/Seller's Realized | | | Date of Transfer OR Installment Payment Date 99-99-999 | | | |
|--|--|--|-------------------------|-------|---------|--|------|-----------------------------|--|
| 4. Transferor/Seller is an: X Individual or RL X Corporation X S corporation | Hawaii Income Tax Withheld 34567890123456.00 | | | | | | | | |
| 6. Transferor/Seller's Business Name TRANSFEROR BUSINESS NAI | XXX | 6a. Transferor/Seller's FEIN 99-999999 | | | | | | | |
| 7. Transferor/Seller's First Name | M.I. | Last Nan | ne | | | Suf | fix | 7a. Transferor/Seller's SSN | |
| FIRST NAME XXXXXXXXXX | | | | | | | | | |
| 8. Transferor/Seller's Street Address TRANSFEROR STREET ADDRI | ESS XX | xxxxx | xxxxxxx | XXXXX | XXX | XXXX | XXXX | | |
| 9. City or Province | State | Postal/ZI | P code | Nor | u.S.A. | . Country | | | |
| CITY OR PROVINCE XXXXX | ST | 12345 | | COUN | ITRY | XXXX | XXXX | | |
| 10. Transferee/Buyer's Name | | | | | | | | 11. Transferee/Buyer's FEIN | |
| TRANSFEREE NAME XXXXXX | XXXXX | XXXXXX | XXXXXXX | XXXXX | XXX | XXXXX | XXXX | 12-3456789 | |
| 12. Transferee/Buyer's Street Address | | | | | | | | 13. Transferee/Buyer's SSN | |
| TRANSFEREE STREET ADDRI | XXXX | 123-45-6789 | | | | | | | |
| 14. City or Province | State | Postal/ZI | IP code | Noi | n U.S.A | . Country | | | |
| CITY OR PROVINCE ST 123456 COUNTRY XXXXX | | | | | | | | | |

THIS FORM IS TO BE USED FOR TRANSFERS OR PAYMENTS MADE IN 2021 ONLY.

ATTACH THIS COPY OF FORM(S) N-288A AND YOUR CHECK OR MONEY ORDER TO FORM N-288 (Payable to "Hawaii State Tax Collector")

| Human Readable text here | ID NO | XX FORM N-288A (REV. 2020) |
|--------------------------|-------|----------------------------|
| | | |

FORM N-288A (REV. 2020)

STATE OF HAWAII—DEPARTMENT OF TAXATION Statement of Withholding on Dispositions By Nonresident Persons of Hawaii Real Property Interests

Calendar Year 2021

THIS SPACE FOR DATE RECEIVED STAMP

Copy B

Send to Transferor/Seller. This information is being furnished to the State of Hawaii, Department of Taxation. See Instructions on back of this copy.

| Description and Location of Property Transferred (Include tax map key number) DESCRIPTION AND LOCATIC PROPERTY XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | XXXXX | 2. Transferd Amount 1234567 | | | Date of Transfer OR This installment Payment Date 99-99-9999 | | | | | | | |
|---|---|-------------------------------------|----------|-------|--|-----------|------|-----------------------------|--|--|--|--|
| 4. Transferor/Seller is an: X Individual or RIX Corporation X S corporation | ▼ Corporation ▼ S corporation ▼ Trust or Estate | | | | | | | | | | | |
| 6. Transferor/Seller's Business Name TRANSFEROR BUSINESS NAI | XXX | 6a. Transferor/Seller's FEIN | | | | | | | | | | |
| 7. Transferor/Seller's First Name | M.I. | Last Nan | ne | | | Suf | ffix | 7a. Transferor/Seller's SSN | | | | |
| FIRST NAME XXXXXXXXXX | MIXX | LAST | NAMEXXXX | XXXXX | XX | SUFI | FIX | 123-45-6789 | | | | |
| 8. Transferor/Seller's Street Address TRANSFEROR STREET ADDRESS XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | | | | | | | | | | | | |
| 9. City or Province CITY OR PROVINCE XXXXX | State ST | Postal/ZI 12345 | P code | | | . Country | | | | | | |
| 10. Transferee/Buyer's Name TRANSFEREE NAME XXXXXX | | | | | | | | | | | | |
| 12. Transferee/Buyer's Street Address TRANSFEREE STREET ADDRESS XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | | | | | | | | | | | | |
| 14. City or Province CITY OR PROVINCE | | | | | | | | | | | | |

THIS FORM IS TO BE USED FOR TRANSFERS OR PAYMENTS MADE IN 2021 ONLY.

FORM N-288A (REV. 2020)

INSTRUCTIONS TO TRANSFEROR/SELLER

Generally, a 7.25% withholding obligation must be withheld by the transferee/buyer when a nonresident person disposes of their Hawaii real property. Even though tax may or may not have been withheld, you are required to file a Form N-15, N-20, N-30, N-35 or N-40 to report the sale or other disposition.

CERTIFICATE TO WAIVE OR ADJUST WITHHOLDING

If there is insufficient funds to pay the withholding required, the transferor/seller may file Form N-288B to apply for a withholding certificate to waive or adjust the withholding. This form is used only for applications based on (1) a claim that the transferor/seller will not realize any gain with respect to the transfer, or (2) a claim that there will be insufficient proceeds to pay the withholding required under section 235-68(b), Hawaii Revised Statutes (HRS), after payment of all costs, including selling expenses and the amount of any mortgage or lien secured by the property. **NOTE:** Form N-288B should be filed no later than 10 working days prior to the date of transfer. Form N-288B will not be approved after the date of transfer has passed. See Form N-288B for more information.

REFUND

The transferor/seller may file for a refund if the real property interest is in excess of the transferor/seller's tax liability on Form N-288C. The nonresident transferor/seller is still required to file a Hawaii income tax return (Forms N-15, N-20, N-30, N-35, or N-40) after the end of the taxable year, report the entire Hawaii source income for the year including the transaction and pay any additional tax due on the income or request a refund. See Form N-288C for more information.

NOTE: Under section 235-111, HRS, any claim for a credit or refund of an overpayment of taxes must be filed within three years from the due date of the return, or within two years from the time the tax was paid, whichever is later.

References to "married" and "spouse" are also references to "in a civil union" and "civil union partner," respectively.

Prepare Form N-288A for each nonresident transferor/seller subject to withholding. If two or more nonresident transferors/sellers jointly transfer a Hawaii real property interest, prepare a separate Form N-288A for each nonresident transferor/seller.

A separate Form N-288A should also be prepared for both taxpayer and spouse whether or not they will be filing a joint return for the year in which they transferred their Hawaii real property interest. Attach Copy A of Form(s) N-288A and your check or money order to Form N-288.

Joint Transferors/Sellers

If one or more nonresident persons and one or more resident persons jointly transfers Hawaii real property interest, first, determine the amount subject to withholding by allocating the amount realized from the transfer among the transferors/sellers based on their capital contribution to the property. For this purpose, a taxpayer and spouse are treated as having contributed 50% each. Second, withhold on the total amount allocated to nonresident transferors/sellers. Third, credit the amount withheld among the nonresident transferors/sellers as they mutually agree. The transferors/sellers must request that the withholding be credited as agreed upon by the 10th day after the date of transfer. If no agreement is reached, credit the withholding by evenly dividing it among the nonresident transferors/sellers.

Line by line instructions

Box 1 — Enter a description of the property including its location and the nature of any substantial improvements, such as an apartment building or warehouse. Include the tax map key.

Box 2 — Enter the amount realized by the transferor/seller whose name appears on this form. If the transferor/seller is reporting the gain under the installment method, enter the principal portion of the total payments for the year. The transferor/seller must provide written notification to the transferee/buyer prior to the transfer date if the transferor/seller will elect out of the installment method and report the gain in full in the year of sale. If a transferee/buyer does not receive written notification, the transferee/buyer shall assume that the transferor/seller will report the gain under the installment method.

Box 3 — Enter the date of transfer. For payments on an installment sale, enter the payment date of the installment and check the "Installment Payment Date" box.

Box 4 — Check the applicable box to indicate whether the transferor/seller is an individual or revocable living trust, a partnership, a corporation, an S corporation, or trust (including an irrevocable trust) or estate. If the transferor/seller is an LLC that files a partnership return, check the box for a partnership. If the transferor/seller is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, check the box for an individual. If the transferor/seller is a revocable living trust, or any other trust in which an individual is treated as the owner of the trust, check the box for an individual or revocable living trust. For all other trusts and estates, check the box for a trust or estate.

Box 5 — Enter the Hawaii income tax withheld by the transferor/seller whose name appears on this form. If there are two or more nonresident transferors/sellers, indicate the respective amounts withheld for each nonresident transferor/seller on a separate Form N-288A. If the amount required to be withheld has been waived or exempted, enter zero (0). If

the amount required to be withheld has been reduced or waived by the Department of Taxation, attach a copy of the approved Form N-288B. If one or more of the transferors/sellers are exempt from the withholding and you are issuing the exempt transferor/seller Form N-288A, attach a copy of the exempt transferor/seller's Form N-289. If the transferor/seller is a partnership, an S corporation, or a trust or estate, please attach a schedule showing the name, identification number, and amount of the withholding allocated to each partner or member, S corporation shareholder, or beneficiary of the trust or estate. For trusts and final-year estates, this schedule does not replace the election that needs to be made on Form N-40T.

Box 6 — Enter the transferor/seller's business name.

Box 6a — Enter the transferor/seller's federal employer identification number (FEIN). If the transferor/seller is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, enter the social security number of the individual in box 7a. If the transferor/seller is a revocable living trust, or any other trust in which an individual is treated as the owner of the trust, enter the social security number of the individual in box 7a. For all other trusts and estates, enter the federal employer identification number of the trust or estate in box 6a.

Box 7 — Enter the transferor/seller's name.

Box 7a — Enter the transferor/seller's social security number (SSN).

Box 8 — Enter the transferor/seller's street address.

Box 9 — Enter the transferor/seller's City or Province, State, Postal/ZIP code and Non U.S.A. County (if applicable).

NOTE: If your mailing address has changed, you must notify the Department of the change by completing Form ITPS-COA, Change of Address Form. Failure to do so may delay any important notices or correspondence to you.

Box 10 — Enter the transferee/buyer's name.

Box 11 — Enter the transferee/buyer's FEIN. If the transferee/buyer is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, enter the social security number of the individual in box 13. If the transferor/seller is a revocable living trust, or any other trust in which an individual is treated as the owner of the trust, enter the social security number of the individual in box 13. For all other trusts and estates, enter the federal employer identification number of the trust or estate in box 11.

Box 12 — Enter the transferee/buyer's street address.

Box 13 — Enter the transferee/buyer's social security number (SSN).

Box 14 — Enter the transferee/buyer's City or Province, State, Postal/ZIP code and Non U.S.A. County (if applicable).

NOTE: If your mailing address has changed, you must notify the Department of the change by completing Form ITPS-COA, Change of Address Form. Failure to do so may delay any important notices or correspondence to you.

FORM **N-288A** (REV. 2020)

STATE OF HAWAII—DEPARTMENT OF TAXATION Statement of Withholding on Dispositions By Nonresident Persons of Hawaii Real Property Interests

Calendar Year 2021

THIS SPACE FOR DATE RECEIVED STAMP

Copy C

For Transferee's/Buyer's Records.

| Description and Location of Property Transferred (Include tax map key number) DESCRIPTION AND LOCATIO PROPERTY XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | XXXXX | 2. Transferd Amount 123456 | Realized | | Date of Transfer OR Installment Payment Date 99-99-9999 | | | | | |
|---|--|----------------------------------|----------|-------|---|-----------|------|-----------------------------|--|--|
| 4. Transferor/Seller is an: X Individual or RL | 4. Transferor/Seller is an: X Individual or RLT X Partnership 5. Transferor/Seller | | | | | | | | | |
| Corporation S corporation | | 1234567890123456.00 | | | | | | | | |
| 6. Transferor/Seller's Business Name | | | | | | | | | | |
| TRANSFEROR BUSINESS NAM | ΊΕΧΧΧΣ | XXXXXX | XXXXXXX | XXXXX | XXXX | XXXXX | XXX | | | |
| 7. Transferor/Seller's First Name | M.I. | Last Nan | ne | | | Suf | fix | | | |
| FIRST NAME XXXXXXXXXX | MIXX | LAST | NAMEXXX | XXXXX | XX | SUF | FIX | | | |
| 8. Transferor/Seller's Street Address | | | | | | | | | | |
| TRANSFEROR STREET ADDRE | ESS XX | XXXXXX | XXXXXXX | XXXXX | XXX | XXXX | XXXX | | | |
| 9. City or Province | State | Postal/ZI | P code | Nor | on U.S.A. Country | | | | | |
| CITY OR PROVINCE XXXXX | ST | 12345 | | COUN | ITRY | XXXX | XXXX | | | |
| 10. Transferee/Buyer's Name | | • | | | | | | 11. Transferee/Buyer's FEIN | | |
| TRANSFEREE NAME XXXXXXX | XXXXX | XXXXXX | XXXXXXX | XXXXX | XXX | XXXX | XXXX | 12-3456789 | | |
| 12. Transferee/Buyer's Street Address | | | | | | | | 13. Transferee/Buyer's SSN | | |
| TRANSFEREE STREET ADDRE | XXXX | 123-45-6789 | | | | | | | | |
| 14. City or Province | State | Postal/Z | IP code | Noi | n U.S.A | . Country | , | | | |
| CITY OR PROVINCE ST 12345 COUNTRY X | | | | | | | XXXX | | | |

THIS FORM IS TO BE USED FOR TRANSFERS OR PAYMENTS MADE IN 2021 ONLY.

FORM N-288A (REV. 2020)

References to "married" and "spouse" are also references to "in a civil union" and "civil union partner," respectively.

Prepare Form N-288A for each nonresident transferor/seller subject to withholding. If two or more nonresident transferors/sellers jointly transfer a Hawaii real property interest, prepare a separate Form N-288A for each nonresident transferor/seller.

A separate Form N-288A should also be prepared for both taxpayer and spouse whether or not they will be filing a joint return for the year in which they transferred their Hawaii real property interest. Attach Copy A of Form(s) N-288A and your check or money order to Form N-288.

Joint Transferors/Sellers

If one or more nonresident persons and one or more resident persons jointly transfers Hawaii real property interest, first, determine the amount subject to withholding by allocating the amount realized from the transfer among the transferors/sellers based on their capital contribution to the property. For this purpose, a taxpayer and spouse are treated as having contributed 50% each. Second, withhold on the total amount allocated to nonresident transferors/sellers. Third, credit the amount withheld among the nonresident transferors/sellers as they mutually agree. The transferors/sellers must request that the withholding be credited as agreed upon by the 10th day after the date of transfer. If no agreement is reached, credit the withholding by evenly dividing it among the nonresident transferors/sellers.

Line by line instructions

Box 1 — Enter a description of the property including its location and the nature of any substantial improvements, such as an apartment building or warehouse. Include the tax map key.

Box 2 — Enter the amount realized by the transferor/seller whose name appears on this form. If the transferor/seller is reporting the gain under the installment method, enter the principal portion of the total payments for the year. The transferor/seller must provide written notification to the transferee/buyer prior to the transfer date if the transferor/seller will elect out of the installment method and report the gain in full in the year of sale. If a transferee/buyer does not receive written notification, the transferee/buyer shall assume that the transferor/seller will report the gain under the installment method.

Box 3 — Enter the date of transfer. For payments on an installment sale, enter the payment date of the installment and check the "Installment Payment Date" box.

Box 4 — Check the applicable box to indicate whether the transferor/seller is an individual or revocable living trust, a partnership, a corporation, an S corporation, or trust (including an irrevocable trust) or estate. If the transferor/seller is an LLC that files a partnership return, check the box for a partnership. If the transferor/seller is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, check the box for an individual. If the transferor/seller is a revocable living trust, or any other trust in which an individual is treated as the owner of the trust, check the box for an individual or revocable living trust. For all other trusts and estates, check the box for a trust or estate.

Box 5 — Enter the Hawaii income tax withheld by the transferor/seller whose name appears on this form. If there are two or more nonresident transferors/sellers, indicate the respective amounts withheld for each nonresident transferor/seller on a separate Form N-288A. If the amount required to be withheld has been waived or exempted, enter zero (0). If

the amount required to be withheld has been reduced or waived by the Department of Taxation, attach a copy of the approved Form N-288B. If one or more of the transferors/sellers are exempt from the withholding and you are issuing the exempt transferor/seller Form N-288A, attach a copy of the exempt transferor/seller's Form N-289. If the transferor/seller is a partnership, an S corporation, or a trust or estate, please attach a schedule showing the name, identification number, and amount of the withholding allocated to each partner or member, S corporation shareholder, or beneficiary of the trust or estate. For trusts and final-year estates, this schedule does not replace the election that needs to be made on Form N-40T.

Box 6 — Enter the transferor/seller's business name.

Box 6a — Enter the transferor/seller's federal employer identification number (FEIN). If the transferor/seller is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, enter the social security number of the individual in box 7a. If the transferor/seller is a revocable living trust, or any other trust in which an individual is treated as the owner of the trust, enter the social security number of the individual in box 7a. For all other trusts and estates, enter the federal employer identification number of the trust or estate in box 6a.

Box 7 — Enter the transferor/seller's name.

Box 7a — Enter the transferor/seller's social security number (SSN).

Box 8 — Enter the transferor/seller's street address.

Box 9 — Enter the transferor/seller's City or Province, State, Postal/ZIP code and Non U.S.A. County (if applicable).

NOTE: If your mailing address has changed, you must notify the Department of the change by completing Form ITPS-COA, Change of Address Form. Failure to do so may delay any important notices or correspondence to you.

Box 10 — Enter the transferee/buyer's name.

Box 11 — Enter the transferee/buyer's FEIN. If the transferee/buyer is a single member LLC that has not elected to be taxed as a corporation, and the only member is an individual, enter the social security number of the individual in box 13. If the transferor/seller is a revocable living trust, or any other trust in which an individual is treated as the owner of the trust, enter the social security number of the individual in box 13. For all other trusts and estates, enter the federal employer identification number of the trust or estate in box 11.

Box 12 — Enter the transferee/buyer's street address.

Box 13 — Enter the transferee/buyer's social security number (SSN).

Box 14 — Enter the transferee/buyer's City or Province, State, Postal/ZIP code and Non U.S.A. County (if applicable).

NOTE: If your mailing address has changed, you must notify the Department of the change by completing Form ITPS-COA, Change of Address Form. Failure to do so may delay any important notices or correspondence to you.