## STATE OF HAWAII DEPARTMENT OF TAXATION



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

### **Contact Information**

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 <u>Test Packages and Testing Inquiries</u>

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

### FORM N-288C (Rev. 2020)

General Information and Scannable Specifications

This document provides software vendors with the requirements for reproducing Form N-288C. Form N-288C is designed for electronic scanning that permits faster processing with fewer errors. Software developers who reproduce, develop, or distribute Form N-288C 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 Form N-288C 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 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. 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-288C: 18 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-288C (REV. 2020): 10 pt Helvetica bold

#### 4. Variable Data

- All variable data fields must utilize 10 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

• Tax Year Ending must be printed with the 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)

Seller's and Spouse'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 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 must be printed with the 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)

Tax map key number must be printed with dash (-) delimiters. For example:

#### 9-9-9999-999-9999

(1 digit, followed by a dash (-), followed by 1 digit, followed by a dash (-), followed by 1 digit, followed by a dash (-), followed by 3 digits, followed by a dash (-), followed by 3 digits, followed by a dash (-), followed by 4 digits)

#### 6. Dollar Amounts

- Do not use commas as thousand separators.
- Do not use leading dollar signs.
- Amounts are right justified.
- Amounts must be rounded. Dollar and cent signs should not be used when the field is rounded to whole dollars.

#### 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-288C (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.
- Computation worksheet at the bottom of page 2 is considered part of the form and must be submitted along with page 1.

#### 2. Hawaii Vendor I.D. Number

- Print your 2-digit Hawaii Vendor I.D. Number following the "ID NO" label at the following positions:
  - 1. Page 1: The 2-digit Hawaii Vendor I.D. Number should begin at column 44, row 64.

#### 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):
  - 1. Page 1: The left bottom corner of the QR code is at the beginning of column 6 and between rows 9 and 10.
- 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 page 1 is: N288C\_T 2020A 01 VIDXX

The QR code includes the form number (N288C), 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 64, 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-288C. If you did not receive the acetate overlays, please contact the Forms Coordinator.

2	6         8         10         12         14	16 18 20 22	24 26 28	30 32 34	36 38	40 42 4	4 46 48	50 52 5	4 56 58 60	62 64	66 68 70	72 74 70	6 78 80	2 82 3
4	FORM		STATE OF I							S SPACE F	OR DATE F	RECEIVED	D STAMP	4
5	N-288C	APPLICA												5
6	(REV. 2020)	ON DISPO		L PROPE					<b>A</b> \II					6
7	Place													7
8	QR Code Here	F F	or Tax Ye	ar Ending	<b>)</b> 12-1	2-1212								8
10		E: References to						civil union'	" and "civil ur	nion partne	r" respectiv			10
11		file this form											r	11
12		ing payment.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									, , , , , , , , , , , , , , , , , , ,		12
13	Check only ONE b	ox: X Ir	ldividual	x	orporatio	n X	Trust	x	Partnership		Estate			13
14							nust	41						14
15	Name     NAME XXXXX	******		XXXXXXX	Last Nam	e NAME X	xxxxx	XXXXXX	Suffix JR	• Your S	ocial Security N	5-6789		15
16	Spouse's Name					Last Name			Suffix	Spous	e's Social Secu			16
18	SPOUSE NAM	E XXXXXXX	XXXXXXX	XXXXXXX	SPOUS	E LASI	NAME	XXXXX	JR		123-4	5-6789		18
19	Name (Corporation, Page 1)	urtnership, Trust, or E	state)							Fecler	al Employer I.D.	. No.		19
20	BUSINESS NA			XXXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXXX	XXXXXXXX	X		56789		20
21	Trade Name/Doing Bus									Daytime		7000		21
22	DOING BUSII     Mailing Address (numb		ame XXXX	XXXXXXX	(XXXXX	XXXXXX	XXXXX	LXXXXXX	ΧΧΧΧΧΑΑ	<u>x (</u> ]	.23 <b>)</b> 456·	- 1890		22
23	MAILING AD		xxxxxxx	XXXXXXX	xxxxx	xxxxxx	xxxxx>	XXXXXXX	xxxxxxx	xxxx				23 24
24	City or Province			tate			stal/ZIP Code	•		Country				24
26	CITY XXXXX	xxxxxxxx	xxxx xx	K A		12	345			COUNT	RY XXX	XXXXXX		26
27	Description of Hawa	i real property	transaction:	10 10	1010		b. L	ocation and	d general des	scription of	property			27
28	a. Date of trans			12-12-	-1212				on and d			PROPE	IRTY	28
29	c. Tax map key								ON AND D			' PROPE		29
30	d. County where								ON AND D			' PROPE		30
31	Was the property us	, i i i i i i i i i i i i i i i i i i i				1		vaii Tax I.D. 2 - 1 2 - 1 2			456	7890		31 32
33	and indicate the sta	rt date and end	date of the r	ental activit	y: (month	, day, year	)	2 1 2 - 1 2	to (mo	onth, day, y	ear)	12-12-:	± 4	33
34	1. Enter the amou	nt withheld on F	orm N-288A	(Attach a c	opy of Fo	orm N-288	۵				1.			34
35			01111120071				,,,					9999999	999999	35
36	2. Sales price (Att	ach final sales s	tatement)								2 99	999999	99999	36
37														37
38	3. Purchase price	of property (Atta	ach final pure	chase state	ment)	• • • • • • • • • • • • • • • • • • • •	•••••	3	99999999	9999999			-	38
40	4. Improvements (	Attach schedule			. 4	999999	999999	9.9						40
41	5. Selling expense					999999								41
42	6. Other (Attach is					9999999	999999							42
43	7. Total Additions	s Add lines 4	thru 6		•••••••	·····	·····	7	9999999	999999				43
44	8. Depreciation (A				. 8	999999	999999	99					-	44
45	9. Other (Attach lis				. 9	999999	999999						-	45
46	10. Total Subtracti	ons — Add line	s 8 and 9	••••••	•••••••	•••••		10	9999999	999999				46 47
48	11. Adjusted basis	of property (Lin	a 3 plus line	7 minue lin	o 10)						11 00			48
49	IT. Aujusteu basis	or property. (Lin	s o pius inie	7, 1111105 111	e 10)						11 99	9999999	999999	49
50	12. Gain. Line 2 mir	nus line 11 (See	Instructions	for installm	ent sales	)					12 gg	999999	999999	50
51														51
52	13. Enter the tentat	ive tax on the ga	ain (See Inst	ructions)		+				· · · · · · · · · · · · · · · · · · ·	<b>13 •</b> 99	9999999	999999	52
53														53
54 55	14. REFUND of am	ount withheld. L	ine 1 minus	line 13. <b>(Th</b>	is line Ml	JST be fil	led in.) .			·····	<b>14●</b> 99	999999	99999	54 55
56	Ihe	reby declare under p ef, they are true, corr	enalties provided	d by section 23	1-36, HRS, t	hat I have exa	arnined this a	pplication and	accompanying a	iltachments, ai	nd, to the best o	of my knowled	lge and	56
57	Please	an, they are true, con	oor, and complet											57
58	Sign •						TITLE		XXXXXXXX	XXX		L2-12		58
59			Signature					Title (If app	licable)			Date		59
60	Here •						TITLE		XXXXXXXX	xxx _		12-12		60
61 62			Signature					Title (If app	licable)			Date		61 62
62										FO	RM N-28	BC (REV	/. 2020)	62
4 64	Human Readable2text	16 18 20 22	24 26 28	30 32 34	<sup>36</sup> 38 I I	0 <sup>40</sup> NÖ 2	4X <sup>46</sup> 48	50 52 5	4 56 58 60	62 64	66 68 70	72 74 70		82 64
65														65

2 4 3		32 34 36 38 40 42 44 46 48 50 52 54	56         58         60         62         64         66         68         70         72         74         76         78         80	2 82
	(REV. 2020)		PAGE 2	3
4				
5	General Instructions	Specific Instructions	contracts, invoices, receipts, IPS Form 8824 for like-	5
6			kind exchange, depreciation schedule and any other	6
7	Purpose of Form	NOTE: Before you begin to fill in Form N-288C, you should review the notification you received from the	supporting documents. You must also report all other	7
8	Use Form N-288C to apply for a refund of the amount	Department that we received your withholding pay-	Hawaii sourced income and Hawaii tax withholdings, as well as any deductions or credits that you may	8
9	withheld on dispositions by nonresident persons of Hawaii	ment to make sure that the information is correct. If	have.	9
10	real property interests which is in excess of the transferor/ seller's tax liability for the transaction. It is not mandatory	any information is not correct, please return a cor-	Enter the information describing the Hawaii real prop-	10
11	to file Form N-288C. Form N-288C should be filed if the	rected copy of the notification to the Department.	erty transaction. In <b>b</b> , enter the address and description of	
12	Hawaii income tax return (Form N-15, N-20, N-30, N-35,	At the top of Form N-288C, enter the taxable year end-	the property. In c, enter the tax map key number. In d, en-	12
13	or N-40) for the year is not yet available. If available, the	ing of the transferor/seller.	ter the name of the county where the property is located.	13
14	transferor/seller should file the appropriate tax return in- stead of filing Form N-288C. However, if the transferor/	If your mailing address has changed, you must notify	Line 2. Enter the gross sales price. Attach a copy of your	r 14
15	seller's tax year has not ended, the transferor/seller may	the Department of the change by completing Form ITPS COA, Change of Address Form. Failure to do so may de-	final sales statement.	15
16	file Form N-288C. Also, Form N-288C will be rejected if it	lay any important notices or correspondence to you.	Line 3. Enter the purchase price of the property. Attach a	10 16
17	is filed after the due date of the tax return.	Enter the name, address, and identification number (so-	copy of your final purchase statement.	17
	IMPORTANT: If Form N-288C was filed, the trans-	cial security number or federal employer I.D. number), if	Line 4. Cost on improvements of the property, if any. At-	-
18	feror/seller_must_still_file_a_Hawaii_income_tax return (Form N-15, N-20, N-30, N-35, or N-40) af-	any, of the transferer/seller. The name and identification	tach schedule.	18
19	ter the end of the taxable year, report the entire	number entered MUST be the same as the name and identification number entered for the transferor/seller on	Line 5. Selling expense (i.e. commissions, state transfer	
20	income for the year (from other sources as well	Form N-288A, or as corrected on the copy of the notifica-	taxes, etc.).	20
21	as the transaction), and pay any additional tax	tion you returned to the Department. If the transferor/seller	Line 6. Other costs. Attach list and schedule.	21
22	due on the income or request a refund. You must file the same filing status on Forms N-288C and	was issued an individual taxpayer identification number	Line 7, Add lines 4, 5 and 6.	22
23	N-15.	(ITIN) by the IRS, enter the ITIN	Line 8. Depreciation. Attach schedule.	23
24	Who May File an Application	CAUTION: You must provide a valid tax identifica- tion number in order for a tentative refund applica-	Line 9. Other subtractions. Attach list and schedule. Do	24
25		tion to be processed. If you do not have one, you	not include any carrylorward losses, net operating losses,	
26	The transferor/seller may file Form N-288C.	must file a State income tax return (e.g., Form N-15)	suspended passive activity losses or IRC section 121 ex-	
27	Where to Send Form N-288C	in order to obtain a refund, which can be filed only after your taxable year has ended. Attach to Form	clusion. These losses may be claimed on seller's Hawaii income tax return for the year of sale.	27
28	File Form N-288C with the Hawaii Department of Taxa-	N-283C a copy of the escrow closing documents or		28
29	tion (Department). See the front of the form for the mailing	other documents substantiating the amount of State	Line 10. Add lines 8 and 9.	29
30	address.	income tax withheld, schedule of improvements with	Line 12. Line 2 minus line 11. If you are reporting the gain	30
31			under the instalment method, attach a separate sheet showing the principal payments received during the tax-	
32	Tax Rate S	able year and the gross profit percentage. Multiply the		
33	Sched		amount of the principal payments by the gross profit per-	33
34	SINGLE INDIVIDUALS AND MARRIED IND		centage and enter the result on line 12.	34
35	If the taxable income is: Not over \$2,400	The tax shall be: 	Line 13. If you are a C corporation, multiply line 12 by 4%	2.5
36	Over \$2,400 but not over \$4,800	\$34.00 plus 3.20% over \$2,400	<ul> <li>and enter the result on line 13. If you are a person other than a C corporation, you must use the tax rate schedules</li> </ul>	
37	Over \$4,800 but not over \$9,600		to the left to determine the amount to enter on line 13.	37
38	Over \$9,600 but not over \$14,400		NOTE: These tax rates apply to long-term capital	38
39	Over \$14,400 but not over \$19,200		gains. For short-term capital gains, use the tax rates	39
40	Over \$19,200 but not over \$24,000		in the income tax booklets to determine the amount	40
	Over \$24,000		to enter on line 13.	
41	Sched		For partnerships, S corporations, trusts, or estates, the gain on line 4 must be allocated among each partner or	
42	MARRIED INDIVIDUALS FILING JOINT RETUR		member, S corporation shareholder, or beneficiary of the	
43	If the taxable income is: Not over \$4,800	The tax shall be:	trust or estate (member). Calculate the tax liability for each	43
44	Over \$4,800 but not over \$9,600		member. Enter the total tax liability of all members on line	
45	Over \$9,600 but not over \$19,200		13. Attach a schedule showing the name, identification number, and the amount of gain and tax liability allocated	
46	Over \$19,200 but not over \$28,800	\$749.00 plus 6.40% over \$19,200	to each member. Also, show the computation of the tax	40
47	Over \$28,800 but not over \$38,400	\$1,363.00 plus 6.80% over \$28,800	liability for each member.	47
48	Over \$38,400 but not over \$48,000		See federal Publication 523 for more information.	48
49	Over \$48,000		Signature	49
50	Sched		Form N-288C must be signed by an individual, a re-	50
51	HEAD OF HO		sponsible corporate officer, a member or general partner	
52	If the taxable income is: Not over \$3,600	The tax shall be: 1 40% of taxable income	of a partnership, or a trustee, executor, or other fiduciary	52
53	Over \$3,600 but not over \$7,200		of a trust or estate or by an authorized agent with a power	2.1
54	Over \$7,200 but not over \$14,400	\$166.00 plus 5.50% over \$7,200	of attorney. If you file your income tax return as married filing a joint return, your spouse must also sign this form.	1 54
55	Over \$14,400 but not over \$21,600	\$562.00 plus 6.40% over \$14,400	NOTE: Incomplete forms will be returned to the trans-	55
56	Over \$21,600 but not over \$28,800		feror/seller. Please fill out all iterns.	56
57	Over \$28,800 but not over \$36,000			57
58	Over \$36,000			58

MAILING ADDRESS HAWAII DEPARTMENT OF TAXATION P. O. BOX 1530

HONOLULU, HAWAII 96806-1530

FORM	STATE OF HAWAII—DEPARTMENT OF TAXATION
N-288C	APPLICATION FOR TENTATIVE REFUND OF WITHHOLDING
(REV. 2020)	ON DISPOSITIONS BY NONRESIDENT PERSONS OF HAWAII
	REAL PROPERTY INTERESTS

Place
QR Code
Here
L

FORM

### For Tax Year Ending 12-12-1212

#### (NOTE: References to "married" and "spouse" are also references to "in a civil union" and "civil union partner," respectively.)

NOTE: DO NOT file this form unless you have received notification from the Department of Taxation that we have received your withholding payment.

Check only ONE box: X Individu	ual X C	Corporati	ion X	Trus	t	X	Partnership	x	Estate	
Name		Last Nar					Suffix	• Your S	Social Sec	curity Number
NAME XXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXX		NAME .	XXXXX	XXXX	XXXX	JR			8-45-6789
							pouse's Social Security Number			
SPOUSE NAME XXXXXXXXXXX	XXXXXXXXXXX	SPOU	SE LAS	T NAM	ΕΧΣ	XXXX	JR			8-45-6789
Name (Corporation, Partnership, Trust, or Estate)	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		vvvvvv	~~~~~	~~~~		vvvvvvvvv	<ul> <li>Federa</li> </ul>		ver I.D. No.
	BUSINESS NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX									
Trade Name/Doing Business As (DBA) Name or C/O      Dot NIC DUICTNER CO. A.C. NAME, YAYAYAYAYAYAYAYAYAYAYAYAYAYAYAYAYAYAYA										
DOING BUSINESS AS NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX										
MAILING ADDRESS XXXXXXX	******	XXXXX	xxxxxx	xxxxx	XXXX	XXX	*****	XXXX		
City or Province	State			ostal/ZIP Co				Country		
CITY XXXXXXXXXXXXXXXXXXXXXXX	x xx		1	2345				COUNT	rry >	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
Description of Hawaii real property transa				b.	Locat	tion ar	nd general descr	rintion of	nroner	ty.
a. Date of transfer (mm-dd-yyyy)	12-12-	-1212		ы.						OF PROPERTY
<b>c.</b> Tax map key number <u>9 - 9 - 9 - 9 - 99</u>	9-999-9999				LO	CATI	ION AND DE	SCRIP	TION	OF PROPERTY
<b>d.</b> County where property is located		XXXXX	XXXXXX	 [	LO	CATI	ION AND DE	SCRIP	TION	OF PROPERTY
Was the property used at anytime as a re										
and indicate the start date and end date				•	12-1		-			12-12-12
		, , , ,	, <b>,</b> , <b>,</b> , <b>,</b>					· , · · · <b>,</b> , <b>,</b> ,		
1. Enter the amount withheld on Form N-288A. (Attach a copy of Form N-288A)							1•	999999999999999		
2. Sales price (Attach final sales statement)								2	999999999999999	
3. Purchase price of property (Attach fir	3. Purchase price of property (Attach final purchase statement)									
4. Improvements (Attach schedule)		. 4	99999	99999	999					
5. Selling expenses		. 5	99999	99999	999					
6. Other (Attach list and schedule)		. 6	99999	99999	999		1			
7. Total Additions — Add lines 4 thru 6	6					7	999999999	99999		
8. Depreciation (Attach schedule)		. 8	99999	99999	999					
9. Other (Attach list and schedule)			99999	99999	999					
10. Total Subtractions — Add lines 8 ar						10	99999999	99999		
11. Adjusted basis of property. (Line 3 plus line 7, minus line 10) 11 9999999999999999999999999999							999999999999999			
12. Gain. Line 2 minus line 11 (See Instructions for installment sales)							999999999999999			
13. Enter the tentative tax on the gain (See Instructions)						999999999999999				
14. REFUND of amount withheld. Line 1 minus line 13. (This line MUST be filled in.)						14 •	999999999999999			
Please I hereby declare under penalties provided by section 231-36, HRS, that I have examined this application and accompanying attachments, and, to the best of my knowledge and belief, they are true, correct, and complete.										
•				TITL	Е ХУ	XXXX	XXXXXXXXXX	xx	1	2-12-12
Sign •	Bignature						plicable)		¥	Date
Here •				ጥተጥ፣	r v	vvvv		vv	1	2-12-12
	Signature						XXXXXXXXXX plicable)	<u></u>	L	Date

# FORM N-288C INSTRUCTIONS (REV. 2020)

#### **General Instructions**

#### **Purpose of Form**

Use Form N-288C to apply for a refund of the amount withheld on dispositions by nonresident persons of Hawaii real property interests which is in excess of the transferor/ seller's tax liability for the transaction. It is not mandatory to file Form N-288C. Form N-288C should be filed if the Hawaii income tax return (Form N-15, N-20, N-30, N-35, or N-40) for the year is not yet available. If available, the transferor/seller should file the appropriate tax return instead of filing Form N-288C. However, if the transferor/seller shaped file Form N-288C. However, if the transferor/seller should file Form N-288C. However, if the transferor/seller should file Form N-288C. However, if the transferor/seller may file Form N-288C. Also, Form N-288C will be rejected if it is filed after the due date of the tax return.

IMPORTANT: If Form N-288C was filed, the transferor/seller must still file a Hawaii income tax return (Form N-15, N-20, N-30, N-35, or N-40) after the end of the taxable year, report the entire income for the year (from other sources as well as the transaction), and pay any additional tax due on the income or request a refund. You must file the same filing status on Forms N-288C and N-15.

#### Who May File an Application

The transferor/seller may file Form N-288C.

#### Where to Send Form N-288C

File Form N-288C with the Hawaii Department of Taxation (Department). See the front of the form for the mailing address.

#### **Specific Instructions**

**NOTE:** Before you begin to fill in Form N-288C, you should review the notification you received from the Department that we received your withholding payment to make sure that the information is correct. If any information is not correct, please return a corrected copy of the notification to the Department.

At the top of Form N-288C, enter the taxable year ending of the transferor/seller.

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.

Enter the name, address, and identification number (social security number or federal employer I.D. number), if any, of the transferor/seller. The name and identification number entered MUST be the same as the name and identification number entered for the transferor/seller on Form N-288A, or as corrected on the copy of the notification you returned to the Department. If the transferor/seller was issued an individual taxpayer identification number (ITIN) by the IRS, enter the ITIN.

**CAUTION:** You must provide a valid tax identification number in order for a tentative refund application to be processed. If you do not have one, you must file a State income tax return (e.g., Form N-15) in order to obtain a refund, which can be filed only after your taxable year has ended. Attach to Form N-288C a copy of the escrow closing documents or other documents substantiating the amount of State income tax withheld, schedule of improvements with

#### Tax Rate Schedules Schedule I

#### SINGLE INDIVIDUALS AND MARRIED INDIVIDUALS FILING SEPARATE RETURNS If the taxable income is: The tax shall be:

Not over \$2,400	1.40% of taxable income
Over \$2,400 but not over \$4,800	\$34.00 plus 3.20% over \$2,400
Over \$4,800 but not over \$9,600	\$110.00 plus 5.50% over \$4,800
Over \$9,600 but not over \$14,400	\$374.00 plus 6.40% over \$9,600
Over \$14,400 but not over \$19,200	\$682.00 plus 6.80% over \$14,400
Over \$19,200 but not over \$24,000	\$1,008.00 plus 7.20% over \$19,200
Over \$24,000	\$1,354.00 plus 7.25% over \$24,000

#### Schedule II

Schedule II						
MARRIED INDIVIDUALS FILING JOINT RETURNS AND CERTAIN WIDOWS AND WIDOWERS						
If the taxable income is:	The tax shall be:					
Not over \$4,800	1.40% of taxable income					
Over \$4,800 but not over \$9,600						
Over \$9,600 but not over \$19,200						
Over \$19,200 but not over \$28,800	\$749.00 plus 6.40% over \$19,200					
Over \$28,800 but not over \$38,400	\$1,363.00 plus 6.80% over \$28,800					
Over \$38,400 but not over \$48,000						

#### Schedule III HEAD OF HOUSEHOLD

Over \$48,000 ...... \$2,707.00 plus 7.25% over \$48,000

The tax shall be:
1.40% of taxable income
\$50.00 plus 3.20% over \$3,600
\$166.00 plus 5.50% over \$7,200
\$562.00 plus 6.40% over \$14,400
\$1,022.00 plus 6.80% over \$21,600
\$1,512.00 plus 7.20% over \$28,800
\$2,030.00 plus 7.25% over \$36,000

contracts, invoices, receipts, IRS Form 8824 for likekind exchange, depreciation schedule and any other supporting documents. You must also report all other Hawaii sourced income and Hawaii tax withholdings, as well as any deductions or credits that you may have.

Enter the information describing the Hawaii real property transaction. In **b**, enter the address and description of the property. In **c**, enter the tax map key number. In **d**, enter the name of the county where the property is located.

Line 2. Enter the gross sales price. Attach a copy of your final sales statement.

Line 3. Enter the purchase price of the property. Attach a copy of your final purchase statement.

Line 4. Cost on improvements of the property, if any. Attach schedule.

 $\mbox{Line 5. Selling expense (i.e. commissions, state transfer taxes, etc.).}$ 

Line 6. Other costs. Attach list and schedule.

Line 7. Add lines 4, 5 and 6.

Line 8. Depreciation. Attach schedule.

Line 9. Other subtractions. Attach list and schedule. Do not include any carryforward losses, net operating losses, suspended passive activity losses or IRC section 121 exclusion. These losses may be claimed on seller's Hawaii income tax return for the year of sale.

Line 10. Add lines 8 and 9.

Line 12. Line 2 minus line 11. If you are reporting the gain under the installment method, attach a separate sheet showing the principal payments received during the taxable year and the gross profit percentage. Multiply the amount of the principal payments by the gross profit percentage and enter the result on line 12.

Line 13. If you are a C corporation, multiply line 12 by 4% and enter the result on line 13. If you are a person other than a C corporation, you must use the tax rate schedules to the left to determine the amount to enter on line 13.

**NOTE:** These tax rates apply to long-term capital gains. For short-term capital gains, use the tax rates in the income tax booklets to determine the amount to enter on line 13.

For partnerships, S corporations, trusts, or estates, the gain on line 4 must be allocated among each partner or member, S corporation shareholder, or beneficiary of the trust or estate (member). Calculate the tax liability for each member. Enter the total tax liability of all members on line 13. Attach a schedule showing the name, identification number, and the amount of gain and tax liability allocated to each member. Also, show the computation of the tax liability for each member.

See federal Publication 523 for more information.

#### Signature

Form N-288C must be signed by an individual, a responsible corporate officer, a member or general partner of a partnership, or a trustee, executor, or other fiduciary of a trust or estate or by an authorized agent with a power of attorney. If you file your income tax return as married filing a joint return, your spouse must also sign this form.

**NOTE:** Incomplete forms will be returned to the transferor/seller. Please fill out all items.

MAILING ADDRESS HAWAII DEPARTMENT OF TAXATION P. O. BOX 1530 HONOLULU, HAWAII 96806-1530