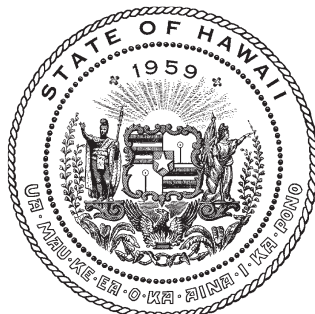


**STATE OF HAWAII
DEPARTMENT OF TAXATION**



**General Information
and Scannable Specifications
for
Form F-1 (Rev. 2022)**

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 F-1 (Rev. 2022)

General Information and Scannable Specifications

This document provides software vendors with the requirements for reproducing Form F-1. Form F-1 is designed for electronic scanning that permits faster processing with fewer errors. Software developers who reproduce, develop, or distribute Form F-1 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. A 2D QR code must be present on each page of the form.

Substitute scannable forms **MUST** meet the 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 F-1 PDF.
- If you do not use the Department's official PDF, the substitute form must match the Department's form in layout and appearance including **bold** and/or *italics* fonts as they appear on the official form.
- Lines of text in a paragraph must break at the same location as the official form.
- All forms and variable data must have a high standard of legibility for printing.
- Photocopies of the scannable form must not be submitted to the Department for processing.
- Substitute scannable forms must be proofread prior to submission.

2. Paper and Ink

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

3. Fonts

- The form was designed using the following font:
 1. Arial
- The following fonts and sizes should be used for the form number and revision year located at the top left corner on page 1 of the form:
 1. FORM: 8 pt Arial bold
 2. F-1: 18 pt Arial bold
 3. REV. 2022: 8 pt Arial
- The following font and size should be used for the form number and revision year located at the top left corner on pages 2 through 4 of the form:
 1. FORM F-1 (REV. 2022): 8 pt Arial bold

- The following font and size should be used for the form number located at the bottom right corner of the form:

1. FORM F-1 (REV. 2022): 10 pt Arial bold

4. Variable Data

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

5. Variable Data Delimiters

- Other tax year beginning and ending must be printed with dash (-) delimiters. For example:
MM-DD
(2 digits for month, followed by a dash (-), followed by 2 digits for day).
- Dates must be printed with dash (-) delimiters. For example:
MM-DD-YYYY
(2 digits for month, followed by a dash (-), followed by 2 digits for day, followed by a dash (-), followed by 4 digits for year).
- Taxpayer's Hawaii Tax I.D. Number must be printed with dash (-) delimiters. For example:
GE-123-456-7890-01
(GE, followed by a dash (-), followed by 3 digits, followed by a dash (-), followed by 3 digits, followed by a dash (-), followed by 4 digits, followed by a dash (-), followed by 2 digits)
Note: The Taxpayer's Hawaii Tax I.D. Number begins with "GE."
- Taxpayer'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).

6. Dollar Amounts 999999999

- 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 trailing spaces).

- Test samples must be originals. Photocopies, fax submissions, etc. will not be accepted.
- Test samples must be populated with unique sample variable data showing different scenarios.
- It will require 1 to 2 weeks, upon receipt by the Department, to verify the accuracy of the submitted sample.
- Approval of the facsimile must be obtained from the Department **prior** to filing.
- Form F-1 (Rev. 2022) cannot be filed until 2023.

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 position:
 1. Pages 1 - 4: The 2-digit Hawaii Vendor I.D. Number should begin at column 42, row 64.
- The Hawaii Vendor I.D. Number must utilize 12 pt Courier New font.

3. QR Code

- A QR code is specific to the form. The property of the 2D symbology QR code is measured in CM.
- Placement of the QR code is as follows (see exhibit for exact placement):
 1. Page 1: The left bottom corner of the QR code is between columns 7 and 8 and at the bottom of row 9.
 2. Pages 2 - 4: The left bottom corner of the QR code is at the beginning of column 6 and at the bottom of row 7.
- 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:
F1_T 2022A 01 VIDXX

The required QR code for page 2 is:
F1_T 2022A 02 VIDXX

The required QR code for page 3 is:
F1_T 2022A 03 VIDXX

The required QR code for page 4 is:
F1_T 2022A 04 VIDXX

The QR code includes the form number (F1), an underscore, type of form (T), space, 4-digit form year (2022), 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 below the QR code utilizing 6 pt Arial font. Placement of the human readable text is as follows (see exhibits for exact placement):
 1. Page 1: Column 6, row 10
 2. Pages 2 – 4: Column 6, row 8
- Please do not print the outline around the human readable text and QR code. The outline is used to show the placement of the human readable text and QR code.
- DO NOT use Windows Metafile Format (wmf). This format causes a very low read rate by the Department's IBML scanners.

4. Form Serial Number

- The form serial number **MUST** be printed at column 6, row 64, utilizing 12 pt Courier New font.
- The required form serial number for page 1 is:
FRN1E3T4

The required form serial number for page 2 is:
FRN2E3T4

The required form serial number for page 3 is:
FRN3E3T4

The required form serial number for page 4 is:
FRN4E3T4

5. Acetate Overlays

- Acetate overlays will assist in the exact data field placement. Verify your form samples with the overlays prior to submitting them for testing. If the samples do

not match the overlays within 1/16 inch, do not submit them for approval as they will be rejected.

- Acetate overlays will be mailed to vendors who submitted a Letter of Intent to participate in the Forms Reproduction Program and who will be reproducing Form F-1. If you did not receive the acetate overlays, please contact the Forms Coordinator.

F-1 (REV. 2022)

FRANCHISE TAX RETURN BANKS, OTHER FINANCIAL CORPORATIONS, AND SMALL BUSINESS INVESTMENT COMPANIES

CALENDAR YEAR 2023 OR FISCAL YEAR BEGINNING IN 2023

Place QR Code Here

(Based on income for calendar year 2022 or fiscal year beginning on 12-12, 2022 and ending 12-12, 2012)

Human Readable text here

Form fields for Name, DBA, Mailing Address, Hawaii Tax I.D. Number, Federal Employer I.D. No., and Main Business Activity.

CHECK BOX, IF APPLICABLE:

- First year return, Second year return, Final return, Election to pay via the installment payment method

A COPY OF ALL PAGES OF YOUR FEDERAL RETURN MUST ACCOMPANY THIS RETURN.

If this is a consolidated return, attach copy of Hawaii Forms N-304 and N-303 for each subsidiary.

Table with columns for Gross Income (lines 1-10) and Tax (lines 69-84), including sub-columns for Interest and Amortizable Bond Premium.

Please Sign Here: Signature of officer, Date, Title

Paid Preparer's Information: Preparer's Signature, Date, Check if self-employed, PTIN, Firm's name, address, Federal E.I. No., Phone No.

Place QR Code Here

Name as shown on return NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Federal Employer Identification Number 99-9999999

Human Readable text here

Table with 3 columns: Line number, Description, and Amount. Includes lines 10-24 for Deductions and line 24 for Net income before Hawaii adjustments.

STATE ADJUSTMENTS

Table with 3 columns: Line number, Description, and Amount. Includes lines 25-29 for State Adjustments.

DEDUCT:

Table with 3 columns: Line number, Description, and Amount. Includes lines 30-34 for Deductions.

Note: If you do not need to apportion your income, skip lines 35 through 56, enter the amount on line 34 on line 57, and continue with line 58. Otherwise, continue with line 35.

ADJUSTMENTS TO ARRIVE AT APPORTIONABLE BUSINESS INCOME SUBJECT TO TAX

DEDUCT:

Table with 3 columns: Line number, Description, and Amount. Includes lines 35-42 for Adjustments to arrive at apportionable business income subject to tax.

ADD:

Table with 3 columns: Line number, Description, and Amount. Includes lines 43-47 for Adjustments to arrive at apportionable business income subject to tax.

Place QR Code Here

Human Readable text here

Name as shown on return	Federal Employer Identification Number
NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXX	99-9999999

CLASSIFICATION OF APPORTIONABLE BUSINESS INCOME SUBJECT TO TAX

48. Enter the portion of the amount on line 47 that is ordinary income	48	999999999	.00
49. Enter the portion of the amount on line 47 that is net capital gain. Also, enter on line 60	49	999999999	.00
50. Total (lines 48 and 49). This total must be equal to the amount on line 47.	50	999999999	.00

INCOME WHOLLY ATTRIBUTABLE TO HAWAII SUBJECT TO TAX

51. Gain (or loss) from sale of real estate and other tangible assets located in Hawaii	51	999999999	.00
52. Royalties from property located in Hawaii	52	999999999	.00
53. Net profit (or loss) from nonbusiness rental property within Hawaii	53	999999999	.00
54. Net gain from sale of nonbusiness assets located in or having tax situs in Hawaii:			
(a) Net short-term capital gain	54(a)	999999999	.00
(b) Net capital gain attributable to Hawaii. (This amount, if any, also should be entered on line 60)	54(b)	999999999	.00
(c) Net gain (or loss) from sale or exchange of property other than capital assets	54(c)	999999999	.00
55. Income from intangible personal property. Include entire income (or loss) of intangibles which, because of domicile of the corporation or business situs of intangibles, are located in Hawaii. Add back Hawaii allocated, nonbusiness income and dividends.			
(a) Dividends included on line 35 above (Attach schedule)	55(a)	999999999	.00
(b) Interest	55(b)	999999999	.00
(c) All other income from intangibles (Attach schedule)	55(c)	999999999	.00
56. Total income wholly attributable to Hawaii (lines 51 to 55(c)).	56	999999999	.00
57. Total of lines 47 and 56 (or the amount from line 34 if you did not need to apportion your income)	57	999999999	.00
58. Net operating loss deduction—submit schedule. (See instruction XI)	58	999999999	.00
59. Net income (or loss) for Hawaii tax purposes (line 57 minus line 58)	59	999999999	.00

TAX COMPUTATION

60. Enter the amount of net capital gains as shown on page 1, line 8(a). (If you apportioned your income, enter the amounts from lines 49 and 54(b), if any, instead)	60	999999999	.00
61. Line 59 minus line 60 (If less than zero, enter zero)	61	999999999	.00
62. (a) Tax on capital gain — 4% of amount on line 60.	62(a)	999999999	.00
(b) Tax on net income — 7.92% of amount on line 61	62(b)	999999999	.00
(c) Total of lines 62(a) and 62(b)	62(c)	999999999	.00
(d) Using the 7.92% rate, compute tax on all taxable income using amount from line 59	62(d)	999999999	.00
63. Total tax (enter lesser of line 62(c) or 62(d))	63	999999999	.00
64. Recapture of Capital Goods Excise Tax Credit from Form N-312, Part II	64	999999999	.00
65. Recapture of Low-Income Housing Tax Credit from Form N-586, Part III	65	999999999	.00
66. Recapture of Capital Infrastructure Tax Credit from Form N-348, Part II	66	999999999	.00
67. Total recapture of tax credits (Add lines 64, 65, and 66)	67	999999999	.00
68. Total tax (Add lines 63 and 67). Enter here and on page 1, line 69	68	999999999	.00

Schedule C INCOME FROM DIVIDENDS (Classified for Hawaii Purposes)

1. Name of declaring corporation	2. National Banking Associations	3. Received from an affiliate (including foreign) as IRC section 243(b) qualifying dividend	4. Received by a small business investment co. operating under Small Business Investment Act	5. All other dividends
NAME OF CORPORATION XXXXX	999999999.00	999999999.00	999999999.00	999999999.00
NAME OF CORPORATION XXXXX	999999999.00	999999999.00	999999999.00	999999999.00
NAME OF CORPORATION XXXXX	999999999.00	999999999.00	999999999.00	999999999.00
6. Total dividends (Add amounts in columns 2, 3, 4, and 5). Enter here and on page 1, line 4				999999999.00
7. Dividends qualifying for the 70% dividends received deduction (Total of amounts in column 5)				999999999.00
8. Multiply line 7 by .30 (30%)				999999999.00
9. Taxable mutual funds dividends				999999999.00
10. Total taxable dividends (Add lines 8 and 9). Enter here and on page 2, line 25.				999999999.00

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

Human Readable text here

Schedule E COMPENSATION OF OFFICERS

1. Name and address of officer	2. Official title	3. Time devoted to business	Percent of corporation stock owned		6. Amount of compensation
			4. Common	5. Preferred	
NAME AND ADDRESS OF OFFIC	TITLE XXXXXXXX	99999	99999	99999	999999999.00
NAME AND ADDRESS OF OFFIC	TITLE XXXXXXXX	99999	99999	99999	999999999.00
NAME AND ADDRESS OF OFFIC	TITLE XXXXXXXX	99999	99999	99999	999999999.00
NAME AND ADDRESS OF OFFIC	TITLE XXXXXXXX	99999	99999	99999	999999999.00
NAME AND ADDRESS OF OFFIC	TITLE XXXXXXXX	99999	99999	99999	999999999.00
Total compensation of officers (Enter here and on page 2, line 11)					999999999.00

Schedule F BAD DEBTS

1. Last 3 Prior and Current Taxable Years	2. Amount of Notes and Accounts Receivable Outstanding at End of Year	3. Taxable (or Net) Income Reported	4. Sales on Account	5. Bad Debts of Corporation if No Allowance Is Carried on Books	If Corporation Carries An Allowance		
					6. Gross Amount Added to Allowance	7. Amount Charged Against Allowance	8. Balance of Allowance
20 99	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00
20 99	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00
20 99	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00
20 99	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00

Schedule H NONREFUNDABLE CREDITS

1. Carryover of the Credit for Energy Conservation (Attach Form N-323)	1	999999999.00
2. Low-income Housing Tax Credit (Attach Form N-586)	2	999999999.00
3. Carryover of the High Technology Business Investment Tax Credit (Attach Form N-323)	3	999999999.00
4. Carryover of the Renewable Energy Technologies Income Tax Credit (for systems installed and placed in service before July 1, 2009) (Attach Form N-323)	4	999999999.00
5. Renewable Energy Technologies Income Tax Credit for Systems Placed in Service on or after July 1, 2009 (Attach Form N-342) Check the type of energy system: <input checked="" type="checkbox"/> Solar <input checked="" type="checkbox"/> Wind	5	999999999.00
6. Total Nonrefundable Credits. Add lines 1 through 5. (Enter here and on page 1, line 72)	6	999999999.00

Schedule I REFUNDABLE CREDITS

1. Capital Goods Excise Tax Credit (Attach Form N-312)	1	999999999.00
2. Renewable Energy Technologies Income Tax Credit for Systems Placed in Service on or after July 1, 2009 (Attach Form N-342) (Note: The refundable credit applies only to solar energy systems and not to wind powered energy systems)	2	999999999.00
3. Total Refundable Credits. Add lines 1 and 2. (Enter here and on page 1, line 70)	3	999999999.00

Schedule P COMPUTATION OF APPORTIONMENT FACTORS

Property -- (use original cost)	In Hawaii		Total Everywhere	
	Beginning of taxable year	End of taxable year	Beginning of taxable year	End of taxable year
Land	999999999.00	999999999.00	999999999.00	999999999.00
Buildings	999999999.00	999999999.00	999999999.00	999999999.00
Loans	999999999.00	999999999.00	999999999.00	999999999.00
Credit card receivables	999999999.00	999999999.00	999999999.00	999999999.00
Leasehold interests*		999999999.00		999999999.00
Rented Property*		999999999.00		999999999.00
Other Property	999999999.00	999999999.00	999999999.00	999999999.00
Total	999999999.00	999999999.00	999999999.00	999999999.00

* Enter net annual rent X 8.

	A. In Hawaii	B. Everywhere	Percent in Hawaii**
1 Property values (average value of property above)	999999999.00	999999999.00	
2 Property factor (line 1, col. A divided by line 1, col. B)			0.99999 %
3 Total compensation	999999999.00	999999999.00	
4 Payroll factor (line 3, col. A divided by line 3, col. B)			0.99999 %
5 Total Sales	999999999.00	999999999.00	
6 Sales factor (line 5, col. A divided by line 5, col. B)			0.99999 %
7 Total of factors (add lines 2, 4, and 6)			0.99999 %
8 Average of factors (divide line 7 by 3). Enter here and on page 2, line 47			0.99999 %

** Compute all percentages to 5 decimal places (.00000%).

FRANCHISE TAX RETURN
BANKS, OTHER FINANCIAL CORPORATIONS, AND
SMALL BUSINESS INVESTMENT COMPANIES

CALENDAR YEAR **2023** OR FISCAL YEAR BEGINNING IN **2023**

Place
QR Code
Here

(Based on income for calendar year 2022 or fiscal year beginning on 12-12, 2022 and ending

Human Readable text here 12-12, 20 12) (First year, Second year, & Final return filers, see Instructions)

<input checked="" type="checkbox"/> AMENDED Return (Attach Sch. AMD)	<input checked="" type="checkbox"/> IRS Adjustment	Hawaii Tax I.D. Number GE-999-999-9999-99	Federal Employer I.D. No. 99-9999999
<input checked="" type="checkbox"/> NOL Carryback			
Name NAME XX	Main Business Activity ACTIVITY XXXXXXXXXXXXX		
DBA (if any) DBA XX	Date Business Began in Hawaii 12-12-1212		
Mailing Address (number and street) MAILING ADDRESS XX	Date of Incorporation 12-12-1212		
City, State, and Postal/ZIP Code CITY STATE ZIP CODE XX	State or Foreign Country of Incorporation STATE OF INC XXXXXX		

CHECK BOX, IF APPLICABLE:

- First year return Second year return Final return (Business end date 12-12, 20 12)
 Election to pay via the installment payment method

A COPY OF ALL PAGES OF YOUR FEDERAL RETURN MUST ACCOMPANY THIS RETURN.

If this is a consolidated return, attach copy of Hawaii Forms N-304 and N-303 for each subsidiary.

GROSS INCOME	1. Gross Receipts <u>999999999.00</u> Less: Returns and allowances <u>999999999.00</u>	1	999999999.00	
	2. Less: Cost of goods sold and/or operations (Attach schedule)	2	999999999.00	
	3. Gross Profit (line 1 minus line 2)	3	999999999.00	
	4. Dividends (Schedule C)	4	999999999.00	
	5. Interest on government obligations	Gross Amount of Interest	5	999999999.00
		Less: Amortizable Bond Premium		
	6. Other interest	6	999999999.00	
	7. (a) Rents <u>999999999.00</u> Plus 7(b) Royalties <u>999999999.00</u> , Sum	7(c)	999999999.00	
	8. (a) Net capital gains (from federal Schedule D) (See Instructions)	8(a)	999999999.00	
	(b) Ordinary gain or loss (from federal Schedule 4797)	8(b)	999999999.00	
9. Other income (Attach schedule)	9	999999999.00		
10. TOTAL INCOME — Add lines 3 through 9. Enter here and on page 2, line 10(a)	10	999999999.00		
69. TOTAL TAX from page 3, line 68	69	999999999.00		
70. Total Refundable Credits. Enter the result from page 4, Schedule I, line 3	70	999999999.00		
71. Adjusted Tax Liability (Line 69 minus line 70. If line 71 is zero or less, see Instruction XVI)	71	999999999.00		
72. Total Nonrefundable Credits from Schedule H, line 6	72	999999999.00		
73. Carryover of the Capital Infrastructure Tax Credit (Attach Form N-348)	73	999999999.00		
74. Line 71 minus the sum of lines 72 and 73 (See Instructions XVII)	74	999999999.00		
75. Payment with extension (Attach Form N-755)	75	999999999.00		
76. Tax installment payments (See Instruction XV)	76	999999999.00		
77. Add lines 75 and 76 and enter result	77	999999999.00		
78. TAX DUE (Line 74 minus line 77. If line 77 is greater than line 74, skip line 79 and go to line 80)	78	999999999.00		
79. Enter amount paid with this return	79	999999999.00		
80. OVERPAYMENT (If line 77 is larger than line 74) (See Instruction XIX) enter AMOUNT OVERPAID	80	999999999.00		
81. Enter amount of line 80 you want Credited to 2024 installment payments	81	999999999.00		
82. Amount to be REFUNDED TO YOU (line 80 minus line 81) REFUND	82	999999999.00		
83. Amount paid (overpaid) on original return—AMENDED RETURN ONLY (See Instructions. Attach Sch. AMD)	83	999999999.00		
84. BALANCE DUE (REFUND) with amended return (See Instructions. Attach Sch. AMD)	84	999999999.00		

Please Sign Here

I declare, under the penalties set forth in section 231-36, HRS, that this return (including any accompanying schedules or statements) has been examined by me and, to the best of my knowledge and belief, is a true, correct, and complete return, made in good faith, for the taxable year stated, pursuant to the Hawaii Income Taxation of Banks and Other Financial Corporations, Chapter 241, HRS.

Signature of officer: _____ Date: 12-12-1212 Title: TITLE XXXXXXXXXXXXX

Paid Preparer's Information

Preparer's Signature, and Print Preparer's Name: PREPARER NAME XXXXXXXX Date: 12-12-12 Check if self-employed: PTIN: PREP ID NO XX

Firm's name (or yours if self-employed), address, and Postal/ZIP Code: FIRM NAME XXXXXXXXXXXXXXXXXXXXXXXX Federal E.I. No.: 99-9999999 Phone No.: (999) 999-9999

Place QR Code Here	Name as shown on return NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXX	Federal Employer Identification Number 99-9999999
Human Readable text here		

10. (a) TOTAL INCOME — from page 1, line 10	10(a)	999999999	.00
DEDUCTIONS			
11. Compensation of officers (Schedule E)	11	999999999	.00
12. Salaries and wages (not deducted elsewhere)	12	999999999	.00
13. Repairs (Do not include cost of improvements or capital expenditures)	13	999999999	.00
14. (a) Bad debts (Schedule F) <u>999999999 .00</u> Plus 14(b) Rents <u>999999999 .00</u> , Sum ▶	14(c)	999999999	.00
15. (a) Taxes (Attach schedule) <u>999999999 .00</u> Plus 15(b) Interest <u>999999999 .00</u> , Sum ▶	15(c)	999999999	.00
16. Contributions or gifts paid (Attach schedule)	16	999999999	.00
17. Amortization (Attach schedule)	17	999999999	.00
18. Depletion	18	999999999	.00
19. Depreciation (from federal Form 4562)	19	999999999	.00
20. Advertising	20	999999999	.00
21. Amounts contributed under: (a) Pension, profit-sharing, stock bonus, annuity plans (Attach schedule)	21(a)	999999999	.00
(b) Other employee benefit plans (Attach schedule)	21(b)	999999999	.00
22. Other deductions (Attach schedule)	22	999999999	.00
23. TOTAL DEDUCTIONS — Add lines 11 through 22	23	999999999	.00
24. Net income before Hawaii adjustments (line 10(a) minus line 23)	24	999999999	.00

STATE ADJUSTMENTS

ADD:			
25. Taxable dividends from Schedule C, line 10		999999999	.00
26. (a) Interest on obligations of the United States or its possessions or on securities issued under an Act of Congress. (See instruction VI(a)(1))	26(a)	999999999	.00
(b) Interest on state, territorial, municipal, county, or other bonds or securities, including Hawaiian issues, not included on line 6. (See instruction VI(a)(2))	26(b)	999999999	.00
27. Amount of deduction for bad debts taken on line 14(a). (See Instructions IV(b) and VII)	27	999999999	.00
28. Other additions required by law — submit schedule. (See Instruction IV(b))	28	999999999	.00
29. Total of lines 24 through 28	29	999999999	.00

DEDUCT:			
30. Entire dividends as reported on page 1, line 4	30	999999999	.00
31. Bad debt deduction allowed by section 241-4(b)(3), HRS. (See Instruction VII(c))	31	999999999	.00
32. Other deductions authorized by law—submit schedule. (See Instructions VI(b) and X(b))	32	999999999	.00
33. Total of lines 30 through 32	33	999999999	.00
34. Net income after Hawaii adjustments (line 29 minus line 33)	34	999999999	.00

Note: If you do not need to apportion your income, skip lines 35 through 56, enter the amount on line 34 on line 57, and continue with line 58. Otherwise, continue with line 35.

ADJUSTMENTS TO ARRIVE AT APPORTIONABLE BUSINESS INCOME SUBJECT TO TAX

DEDUCT:			
35. Nonbusiness dividends included on page 1, line 4, and included on line 24 above	35	999999999	.00
36. Nonbusiness interest (Attach schedule)	36	999999999	.00
37. Royalties from nonbusiness assets (Attach schedule)	37	999999999	.00
38. Net profit from nonbusiness rental property	38	999999999	.00
39. Net gain from nonbusiness assets (Attach schedule)	39	999999999	.00
40. Other adjustments (Attach schedule)	40	999999999	.00
41. Total (lines 35 to 40, inclusive)	41	999999999	.00
42. Balance (line 34 minus line 41)	42	999999999	.00
ADD:			
43. Net loss from nonbusiness rental property	43	999999999	.00
44. Net loss from nonbusiness assets (Attach schedule)	44	999999999	.00
45. Total of lines 43 and 44	45	999999999	.00
46. Business income from sources within and without Hawaii (line 42 plus line 45)	46	999999999	.00
47. Allocate <u>0.99999%</u> (from Schedule P, line 8), as apportionable income attributable to Hawaii and subject to tax. (Multiply line 46 by the %)	47	999999999	.00

Place QR Code Here	Name as shown on return NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXX	Federal Employer Identification Number 99-9999999
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CLASSIFICATION OF APPORTIONABLE BUSINESS INCOME SUBJECT TO TAX

48. Enter the portion of the amount on line 47 that is ordinary income	48	999999999	.00
49. Enter the portion of the amount on line 47 that is net capital gain. Also, enter on line 60	49	999999999	.00
50. Total (lines 48 and 49). This total must be equal to the amount on line 47.	50	999999999	.00

INCOME WHOLLY ATTRIBUTABLE TO HAWAII SUBJECT TO TAX

51. Gain (or loss) from sale of real estate and other tangible assets located in Hawaii	51	999999999	.00
52. Royalties from property located in Hawaii	52	999999999	.00
53. Net profit (or loss) from nonbusiness rental property within Hawaii	53	999999999	.00
54. Net gain from sale of nonbusiness assets located in or having tax situs in Hawaii:			
(a) Net short-term capital gain	54(a)	999999999	.00
(b) Net capital gain attributable to Hawaii. (This amount, if any, also should be entered on line 60)	54(b)	999999999	.00
(c) Net gain (or loss) from sale or exchange of property other than capital assets	54(c)	999999999	.00
55. Income from intangible personal property. Include entire income (or loss) of intangibles which, because of domicile of the corporation or business situs of intangibles, are located in Hawaii. Add back Hawaii allocated, nonbusiness income and dividends.			
(a) Dividends included on line 35 above (Attach schedule)	55(a)	999999999	.00
(b) Interest	55(b)	999999999	.00
(c) All other income from intangibles (Attach schedule)	55(c)	999999999	.00
56. Total income wholly attributable to Hawaii (lines 51 to 55(c)).	56	999999999	.00
57. Total of lines 47 and 56 (or the amount from line 34 if you did not need to apportion your income)	57	999999999	.00
58. Net operating loss deduction—submit schedule. (See instruction XI)	58	999999999	.00
59. Net income (or loss) for Hawaii tax purposes (line 57 minus line 58)	59	999999999	.00

TAX COMPUTATION

60. Enter the amount of net capital gains as shown on page 1, line 8(a). (If you apportioned your income, enter the amounts from lines 49 and 54(b), if any, instead)	60	999999999	.00
61. Line 59 minus line 60 (If less than zero, enter zero)	61	999999999	.00
62. (a) Tax on capital gain — 4% of amount on line 60.	62(a)	999999999	.00
(b) Tax on net income — 7.92% of amount on line 61	62(b)	999999999	.00
(c) Total of lines 62(a) and 62(b)	62(c)	999999999	.00
(d) Using the 7.92% rate, compute tax on all taxable income using amount from line 59	62(d)	999999999	.00
63. Total tax (enter lesser of line 62(c) or 62(d))	63	999999999	.00
64. Recapture of Capital Goods Excise Tax Credit from Form N-312, Part II	64	999999999	.00
65. Recapture of Low-Income Housing Tax Credit from Form N-586, Part III	65	999999999	.00
66. Recapture of Capital Infrastructure Tax Credit from Form N-348, Part II .	66	999999999	.00
67. Total recapture of tax credits (Add lines 64, 65, and 66)	67	999999999	.00
68. Total tax (Add lines 63 and 67). Enter here and on page 1, line 69	68	999999999	.00

Schedule C INCOME FROM DIVIDENDS (Classified for Hawaii Purposes)

1. Name of declaring corporation	2. National Banking Associations	3. Received from an affiliate (including foreign) as IRC section 243(b) qualifying dividend	4. Received by a small business investment co. operating under Small Business Investment Act	5. All other dividends
NAME OF CORPORATION XXXXX	999999999.00	999999999.00	999999999.00	999999999.00
NAME OF CORPORATION XXXXX	999999999.00	999999999.00	999999999.00	999999999.00
NAME OF CORPORATION XXXXX	999999999.00	999999999.00	999999999.00	999999999.00
6. Total dividends (Add amounts in columns 2, 3, 4, and 5). Enter here and on page 1, line 4	999999999.00			
7. Dividends qualifying for the 70% dividends received deduction (Total of amounts in column 5)	999999999.00			
8. Multiply line 7 by .30 (30%).	999999999.00			
9. Taxable mutual funds dividends	999999999.00			
10. Total taxable dividends (Add lines 8 and 9). Enter here and on page 2, line 25.	999999999.00			

Place QR Code Here	Name as shown on return NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXX	Federal Employer Identification Number 99-9999999
Human Readable text here		

Schedule E COMPENSATION OF OFFICERS					
1. Name and address of officer	2. Official title	3. Time devoted to business	Percent of corporation stock owned		6. Amount of compensation
			4. Common	5. Preferred	
NAME AND ADDRESS OF OFFIC	TITLE XXXXXXXX	99999	99999	99999	999999999.00
NAME AND ADDRESS OF OFFIC	TITLE XXXXXXXX	99999	99999	99999	999999999.00
NAME AND ADDRESS OF OFFIC	TITLE XXXXXXXX	99999	99999	99999	999999999.00
NAME AND ADDRESS OF OFFIC	TITLE XXXXXXXX	99999	99999	99999	999999999.00
NAME AND ADDRESS OF OFFIC	TITLE XXXXXXXX	99999	99999	99999	999999999.00
Total compensation of officers (Enter here and on page 2, line 11)					999999999.00

Schedule F BAD DEBTS							
1. Last 3 Prior and Current Taxable Years	2. Amount of Notes and Accounts Receivable Outstanding at End of Year	3. Taxable (or Net) Income Reported	4. Sales on Account	5. Bad Debts of Corporation if No Allowance Is Carried on Books	If Corporation Carries An Allowance		
					6. Gross Amount Added to Allowance	7. Amount Charged Against Allowance	8. Balance of Allowance
20 99	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00
20 99	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00
20 99	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00
20 99	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00	999999.00

Schedule H NONREFUNDABLE CREDITS		
1. Carryover of the Credit for Energy Conservation (Attach Form N-323)	1	999999999.00
2. Low-income Housing Tax Credit (Attach Form N-586)	2	999999999.00
3. Carryover of the High Technology Business Investment Tax Credit (Attach Form N-323)	3	999999999.00
4. Carryover of the Renewable Energy Technologies Income Tax Credit (for systems installed and placed in service before July 1, 2009) (Attach Form N-323)	4	999999999.00
5. Renewable Energy Technologies Income Tax Credit for Systems Placed in Service on or after July 1, 2009 (Attach Form N-342) Check the type of energy system: <input checked="" type="checkbox"/> Solar <input checked="" type="checkbox"/> Wind	5	999999999.00
6. Total Nonrefundable Credits. Add lines 1 through 5. (Enter here and on page 1, line 72)	6	999999999.00

Schedule I REFUNDABLE CREDITS		
1. Capital Goods Excise Tax Credit (Attach Form N-312)	1	999999999.00
2. Renewable Energy Technologies Income Tax Credit for Systems Placed in Service on or after July 1, 2009 (Attach Form N-342) (Note: The refundable credit applies only to solar energy systems and not to wind powered energy systems)	2	999999999.00
3. Total Refundable Credits. Add lines 1 and 2. (Enter here and on page 1, line 70)	3	999999999.00

Schedule P COMPUTATION OF APPORTIONMENT FACTORS				
Property — (use original cost)	In Hawaii		Total Everywhere	
	Beginning of taxable year	End of taxable year	Beginning of taxable year	End of taxable year
Land	999999999.00	999999999.00	999999999.00	999999999.00
Buildings	999999999.00	999999999.00	999999999.00	999999999.00
Loans	999999999.00	999999999.00	999999999.00	999999999.00
Credit card receivables	999999999.00	999999999.00	999999999.00	999999999.00
Leasehold interests*		999999999.00		999999999.00
Rented Property*		999999999.00		999999999.00
Other Property	999999999.00	999999999.00	999999999.00	999999999.00
Total	999999999.00	999999999.00	999999999.00	999999999.00

* Enter net annual rent X 8.

	A. In Hawaii	B. Everywhere	Percent in Hawaii**
1 Property values (average value of property above)	999999999.00	999999999.00	
2 Property factor (line 1, col. A divided by line 1, col. B)			0.99999 %
3 Total compensation	999999999.00	999999999.00	
4 Payroll factor (line 3, col. A divided by line 3, col. B)			0.99999 %
5 Total Sales	999999999.00	999999999.00	
6 Sales factor (line 5, col. A divided by line 5, col. B)			0.99999 %
7 Total of factors (add lines 2, 4, and 6)			0.99999 %
8 Average of factors (divide line 7 by 3). Enter here and on page 2, line 47			0.99999 %

** Compute all percentages to 5 decimal places (.00000%).