

N-3

(REV. 2018)

DECLARATION OF ESTIMATED INCOME TAX FOR CORPORATIONS AND S CORPORATIONS

INTERNET FILING — Form N-3 can be filed and payment made electronically through the State's Internet portal. For more information, go to: tax.hawaii.gov/eservices/

GENERAL INSTRUCTIONS**1. PURPOSE OF DECLARATION**

This declaration provides a basis for currently paying the income tax of corporations, S corporations, and organizations required to file Form N-70NP, Exempt Organization Business Income Tax Return. Subsequent references in these instructions to "corporations" shall include "organizations required to file Form N-70NP" unless otherwise indicated. Every corporation must file a declaration of estimated tax unless excused from doing so under section 235-97(a)(5) or 235-97(a)(6), Hawaii Revised Statutes (HRS). In addition to the declaration, a corporation must file an annual income tax return after the close of its taxable year. At that time, the balance of tax due on the year's taxable income over the amount paid as estimated tax, if any, must be paid with the tax return. Trusts required to file Form N-70NP should refer to the Instructions for Form N-70NP for an Estimated Tax Computation Schedule and tax rates.

2. CORPORATIONS WHICH MUST MAKE A DECLARATION

A declaration of estimated tax must be made by every corporation or S corporation unless excused from filing under section 235-97(a)(5) or 235-97(a)(6), HRS. Section 235-97(a)(5), HRS, provides that if the Director of Taxation is satisfied that less than 15% of a foreign corporation's business for the taxable year will be attributable to the State, the foreign corporation may be excused from filing a declaration of estimated tax. Application for exemption from filing a declaration of estimated tax may be made in letter form, two copies being submitted, one of which will be returned granting or denying the request, as the case may be. The exemption, if granted, is conditional upon the circumstances remaining substantially the same. If, due to a change in circumstances, business attributable to the State has increased to an extent that it is greater than the 15% requirement, the exemption previously granted automatically terminates and the foreign corporation will be required to file a declaration of estimated tax. The filing date of the declaration would be on or before the next installment date. Section 235-97(a)(6), HRS, provides that a declaration of estimated tax and the payment of estimated tax are not required if the tax liability for the taxable year will be less than \$500.

3. WHEN AND WHERE TO FILE DECLARATION

The payment vouchers that the corporation or S corporation files serve as its declaration of estimated income tax. A quarterly declaration of estimated tax for a corporation or S corporation on a calendar year basis must be filed on or before April 20, June 20, September 20, and on or before January 20 following the close of the calendar year. If the corporation is on a fiscal year basis, a declaration must be filed on or before the 20th day of the 4th, 6th, and 9th months of the fiscal year, and on or before the 20th day of the 1st month following the close of the fiscal year. If any due date falls on a Saturday, Sunday, or legal State holiday, the due date is the next regular business day. The declaration must be filed with the Hawaii Department of Taxation, P.O. Box 1530, Honolulu, HI 96806-1530.

4. AMENDED DECLARATIONS

In making a declaration, the corporation or S corporation must take into account the then existing facts and circumstances as well as those reasonably anticipated relating to prospective gross income and allowable deductions for the taxable year. An amended or revised declaration may be made in any case where the corporation or S corporation estimates that its gross income and deductions will materially change the estimated tax reported on the previous declaration. See PART III.

If an amended declaration of estimated tax is necessary, the amended declaration may be computed and filed with the next estimated tax installment payable. The remaining installment(s) of estimated tax payable shall be proportionately increased or decreased, as the case may be, to reflect the amended declaration of estimated tax.

5. AMOUNT TO BE PAID AND TIME FOR PAYMENT

A corporation or S corporation on a calendar year basis must pay the first installment, 1/4 of the estimated tax due, on or before April 20, the second installment on or before June 20, the third installment on or before September 20, and the fourth installment on or before January 20 of the year following the close of the calendar year. A corporation on a fiscal year basis must pay the first installment on or before the 20th day of the 4th month of the fiscal year, the second installment on or before the 20th day of the 6th month of the fiscal year, the third installment on or before the 20th day of the 9th month of the fiscal year, and the fourth installment on or before the 20th day of the 1st month following the close of the fiscal year. A check or money order in payment of the tax should be made to the "Hawaii State Tax Collector." The check is to be drawn on a U.S. bank in U.S. dollars. **Do not send cash.** Write the corporation's or S corporation's Federal Employer I.D. Number (FEIN), the year for which payment is made, and "Form N-3" on your check or money order.

6. PENALTY

In the case of any underpayment of estimated tax, there shall be added to the tax, an amount determined at the rate of 2/3 of 1% per month or part of a month, on the amount of tax underpaid for the period as provided under section 235-97(f), HRS. Willful failure to make a required declaration of estimated tax is an offense punishable as provided by section 231-35, HRS.

1. Enter the amount of Federal taxable income expected for this tax year	
ADJUSTMENTS TO ARRIVE AT ESTIMATED TAXABLE INCOME FOR HAWAII TAX PURPOSES	
ADD:	
2. Amount of capital gains and losses for HAWAII tax purposes:	
(a) Net short-term gain	
(b) Net long-term capital gain	
(c) Net gain (or loss) from sale or exchange of property other than capital assets	
3. Deduction allowable for federal tax purposes but not allowable or allowable only in part for Hawaii tax purposes - itemize below:	
(a)	
(b)	
(c)	
4. Other adjustments	
5. Total of items 1 to 4 inclusive	
DEDUCT:	
6. Dividends from national banks	
7. 70% of dividends (other than national bank dividends)	
8. Interest on obligations of the United States	
9. Excess of income from sources outside Hawaii received by a foreign or domestic corporation over deductions attributable to or connected with such income	
10. Amount of net capital gains and losses as reported on FEDERAL return (this eliminates the Federal capital gain — see line 2 above for Hawaii)	
11. Amortization of casualty losses where election is made to amortize for HAWAII purposes under section 235-7(f), HRS	
12. Net operating loss deduction	
13. Other deductions or adjustments	
14. Total of items 6 to 13 inclusive	
15. ESTIMATED TAXABLE INCOME OR LOSS FOR HAWAII TAX PURPOSES (Line 5 minus line 14)	

PART II. TAX COMPUTATION WORKSHEET FOR CALENDAR YEAR OR FISCAL YEAR BEGINNING IN THE CURRENT CALENDAR YEAR

1. Enter the amount of taxable income for Hawaii tax purposes expected in this tax year (from line 15, PART I)	
2. Enter the amount of net long-term capital gain over net short-term capital loss as shown on line 2(b). (If line 2(b) exceeds line 15, enter an amount equal to that shown on line 15. However, if line 15 shows a loss, enter zero.)	
3. Line 1 minus line 2	
4. a. Tax on capital gain — 4% of the amount shown on line 2	
b. Tax on all other taxable income if amount on line 3 is:	
(1) Not over \$25,000 — enter 4.4% of line 3	
(2) Over \$25,000 but not over \$100,000 — Enter 5.4% of line 3	
Subtract \$250 and enter the difference	(250)
(3) Over \$100,000 — Enter 6.4% of line 3	
Subtract \$1,250 and enter difference	(1,250)
c. Recapture of capital goods excise tax credit, low-income housing tax credit, important agricultural land qualified agricultural cost tax credit, or capital infrastructure tax credit	
5. Total estimated tax liability (Add lines 4a, 4b, and 4c)	
6. Less: Tax credits	
7. Total estimated tax due (line 5 minus line 6)	
8. All or part of overpayment from prior year tax return credited to estimated tax and payments to date	
9. Unpaid balance of estimated tax (line 7 minus line 8)	
10. Amount of first installment . Enter this amount also on payment voucher 1	
11. All or part of overpayment from prior year tax return credited to estimated tax and payments through the first installment .	
12. Unpaid balance of estimated tax (line 7 minus line 11)	
13. Amount of second installment . Enter this amount also on payment voucher 2	
14. All or part of overpayment from prior year tax return credited to estimated tax and payments through the second installment	
15. Unpaid balance of estimated tax (line 7 minus line 14)	
16. Amount of third installment . Enter this amount also on payment voucher 3	
17. All of overpayment from prior year tax return credited to estimated tax and payments through the third installment	
18. Unpaid balance of estimated tax (line 7 minus line 17)	
19. Amount of fourth installment . Enter this amount also on payment voucher 4	

PART III. Amended Computation		PART IV. Record of Estimated Tax Payments				
(Used if your estimated tax substantially changes after you file your first payment voucher.)		Voucher Number	Date	Amount Paid	Prior year overpayment credit applied to installment	Total amount paid and credited from the 1st day of the taxable year through the installment date shown. Add (b) and (c)
			(a)	(b)	(c)	(d)
1. Amended estimated tax						
2. Less:						
(a) Amount of last year's overpayment elected for credit to current year's estimated tax and applied to date		1				
(b) Estimated tax payments to date.....		2				
(c) Total of lines 2(a) and 2(b)		3				
3. Unpaid balance (line 1 minus line 2(c))						
4. Amount to be paid (line 3 divided by number of remaining installments). Enter here and on payment voucher		4				
		Total.....	➤			

MAILING ADDRESS

Hawaii Department of Taxation
 P.O. Box 1530
 Honolulu, Hawaii 96806-1530
 (830 Punchbowl Street)

✂ — — — — — CUT HERE — — — — — ✂
 Form (Rev. 2018) STATE OF HAWAII — DEPARTMENT OF TAXATION DO NOT WRITE OR STAPLE IN THIS SPACE

N-3

CORPORATION ESTIMATED INCOME TAX

Voucher No. 1

**THIS VOUCHER IS DUE ON OR BEFORE THE 20th DAY
 OF THE 4th MONTH OF THE TAXABLE YEAR.**

DO NOT SUBMIT A PHOTOCOPY OF THIS FORM

Place
 QR Code
 Here

Name NAME OF TAXPAYER'S CORPORATION ABC1234567 <small>Db a or C/O</small> DOING BUSINESS AS TAXPAYER'S CORPORATION <small>Mailing Address</small> 12-3456 ADDRESS STREET LANE BLVDX A123456 <small>City, town, or post office State Postal/ZIP Code Country For office use only</small> CITY TOWN PL HI 12345 USAXXXXX	Federal Employer Identification Number (FEIN) 12 - 3456789 Calendar or Fiscal Year Ending (MM DD YY) 12 - 12 - 12 Amount of Payment 123456789.00
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MAIL THIS VOUCHER WITH CHECK OR MONEY ORDER PAYABLE TO "HAWAII STATE TAX COLLECTOR." Write your FEIN, the year for which payment is made, and "Form N-3" on your check or money order.

Human Readable text here

ID NO XX

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CORPORATION ESTIMATED INCOME TAX

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Voucher No. 2

THIS VOUCHER IS DUE ON OR BEFORE THE 20th DAY
OF THE 6th MONTH OF THE TAXABLE YEAR.

DO NOT SUBMIT A PHOTOCOPY OF THIS FORM

Place
QR Code
Here

Name

NAME OF TAXPAYER'S CORPORATION ABC1234567

Db a or C/O

DOING BUSINESS AS TAXPAYER'S CORPORATION

Mailing Address

Suite Number

12-3456 ADDRESS STREET LANE BLVDX A123456

City, town, or post office

State

Postal/ZIP Code

Country

For office use only

CITY TOWN PL HI 12345 USAXXXXX

Federal Employer Identification Number (FEIN)

12 - 3456789

Calendar or Fiscal Year Ending (MM DD YY)

12 - 12 - 12

Amount of Payment

123456789.00

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CORPORATION ESTIMATED INCOME TAX

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Voucher No. 3

THIS VOUCHER IS DUE ON OR BEFORE THE 20th DAY
OF THE 9th MONTH OF THE TAXABLE YEAR.

DO NOT SUBMIT A PHOTOCOPY OF THIS FORM

Place
QR Code
Here

Name

NAME OF TAXPAYER'S CORPORATION ABC1234567

Db a or C/O

DOING BUSINESS AS TAXPAYER'S CORPORATION

Mailing Address

Suite Number

12-3456 ADDRESS STREET LANE BLVDX A123456

City, town, or post office

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Amount of Payment

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DO NOT WRITE OR STAPLE IN THIS SPACE

Voucher No. 4

THIS VOUCHER IS DUE ON OR BEFORE THE 20th DAY
OF THE 1st MONTH FOLLOWING THE TAXABLE YEAR.

DO NOT SUBMIT A PHOTOCOPY OF THIS FORM

Place
QR Code
Here

Name

NAME OF TAXPAYER'S CORPORATION ABC1234567
Dba or C/O

Federal Employer Identification Number (FEIN)

DOING BUSINESS AS TAXPAYER'S CORPORATION
Mailing Address Suite Number

12 - 3456789

12-3456 ADDRESS STREET LANE BLVDX A123456
City, town, or post office State Postal/ZIP Code Country For office use only

Calendar or Fiscal Year Ending (MM DD YY)

CITY TOWN PL HI 12345 USAXXXXX

12 - 12 - 12

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