STATE OF HAWAII DEPARTMENT OF TAXATION



General Information and Scannable Specifications for Form F-1 (Rev. 2019)

Contact Information for General Questions

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

FORM F-1 (Rev. 2019)

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. Helvetica
- 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 Helvetica bold
 - 2. F-1: 18 pt Helvetica bold
 - 3. Rev. 2019: 8 pt Helvetica
- The following font and size should be used for the form number and revision year located at the top left corner on pages 2 though 4 of the form:
 - 1. Form F-1 (Rev. 2019): 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 F-1 (Rev. 2019): 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. 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).

Page 3

Dollar Amounts

99999999

- 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 F-1 (Rev. 2019) cannot be filed until 2020.

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 through 4: The 2-digit Hawaii Vendor I.D. Number should begin at column 45, row 65.

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 at the beginning of column 6 and at the bottom of row 10.
 - 2. Pages 2 through 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 2019A 01 VIDXX:

The required QR code for page 2 is: F1_T 2019A 02 VIDXX

The required QR code for page 3 is: F1_T 2019A 03 VIDXX

The required QR code for page 4 is: F1_T 2019A 04 VIDXX

The QR code includes the form number (F1), an underscore, type of form (T), space, 4-digit form year (2019), 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 page 1 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 Format (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 F-1. If you did not receive the acetate overlays, please contact the Forms Coordinator.

	10 12 14 16 18 20 22 24 26 28 30 32 34 36 38 40 42 44 46 -1 (REV. 2019)					0 82 2 3
Place	Name as shown on return			1 1 1 1	er Identification Number	5
QR Code				99999	999	6
Here						7
	AAAAAAAAAAAA	121.21.21	17			- 8
						9
10.	(a) TOTAL INCOME — from page 1, line 10			10(a)	00.000000000000000000000000000000000000	10
	DEDUCTIONS					11
11.	Compensation of officers (Schedule E)				9999999999.00	12
12.	Salaries and wages (not deducted elsewhere)				9999999999.00	13
13.	Repairs (Do not include cost of improvements or capital expenditures)				9999999999.00	14
14.	(a) Bad debts (Schedule F) 9999999999 00 Plus 14(b) Rents 99				99999999999.00	15
15.	(a) Taxes (Attach schedule) 999999999999 . 00 Plus 15(b) Interest 9	999	999999.00,Sum ➤		99999999999.00	16
16.	Contributions or gifts paid (Attach schedule)				999999999999999999999999999999999999999	17
17.	Amortization (Attach schedule)				99999999999.00	18
18. 19.	Depletion				99999999999.00	20
20.	Depreciation (from federal Form 4562) Advertising				99999999999.00	20
21.	Amounts contributed under: (a) Pension, profit-sharing, stock bonus, annu	uitv ol	ns (Attach schedule)		9999999999.00	22
41	(b) Other employee benefit plans (Attach sch	r '			99999999999.00	23
22.	Other deductions (Attach schedule)	Jau			99999999999.00	24
23.	TOTAL DEDUCTIONS — Add lines 11 through 22				99999999999.00	25
24.	Net income before Hawaii adjustments (line 10(a) minus line 23)			24	9999999999.00	26
	STATE ADJUSTMEN	ITS				27
ADD:						28
25.	Taxable dividends from Schedule C, line 10			25	9999999999.00	29
26.	(a) Interest on obligations of the United States or its possessions or on secu	ırities	issued under an			30
	Act of Congress. (See instruction VI(a)(1))			26(a)	9999999999.00	31
	(b) Interest on state, territorial, municipal, county, or other bonds or securities	es, inc	uding Hawaiian issues,			32
	not included on line 6. (See instruction VI(a)(2))			<u> </u>	9999999999.00	33
27.	Amount of deduction for bad debts taken on line 14(a). (See Instructions IV	'	d VII)		9999999999.00	34
28.	Other additions required by law — submit schedule. (See Instruction IV(b))				999999999999999	35
29.	Total of lines 24 through 28			29	9999999999.00	36
DEDI		00				37
30.	Entire dividends as reported on page 1, line 4	30 31	999999999999.00	+		38
31. 32.	Bad debt deduction allowed by section 241-4(b)(3), HRS. (See Instruction VII(c)) Other deductions authorized by law — submit schedule. (See Instructions VI(b) and X(b))	32	99999999999.00	+		40
33.	Total of lines 30 through 32	32	19999999999.100	33	199999999999.00	41
34.	Net income after Hawaii adjustments (line 29 minus line 33)			34	9999999999999999	42
04.	Note: If you do not need to apportion your income, skip lines 35 through	ah 56	enter the amount on	L 0-	100	43
	line 34 on line 57, and continue with line 58. Otherwise, continue					44
						45
	ADJUSTMENTS TO ARRIVE AT APPORTIONABLE BU	JSINE	SS INCOME SUBJECT T	OTAX		46
DE:DI	uct:					47
35.	Nonbusiness dividends included on page 1, line 4, and included					48
	on line 24 above	35	9999999999.00			49
36.	Nonbusiness interest (Attach schedule)	36	9999999999.00			50
37.	Royalties from nonbusiness assets (Attach schedule)	37	9999999999.00			51
38.	Net profit from nonbusiness rental property	38	9999999999.00	4		52
39.	Net gain from nonbusiness assets (Attach schedule)	39	9999999999.00	4		53
40.	Other adjustments (Attach schedule)	40	99999999999.00	+	, , , , , , , , , , , , , , , , , , , 	54
41.	Total (lines 35 to 40, inclusive)				9999999999999999	55
42.	Balance (line 34 minus line 41)			42	00	56
ADD:						57
43.	Net loss from nonbusiness rental property	43	9999999999.00	+		58
44.	Net loss from nonbusiness assets (Attach schedule)	44	9999999999.00	AF		59
45. 46.	Total of lines 43 and 44	15)		45	9999999999.00	60
40.		1 1 1	able to Hawaii and	40	UU	62
17						02
47.	Allocate 0 . 9 9 9 9 9 % (from Schedule P line 8), as apportionable income a subject to tax. (Multiply line 46 by the %)	ittibu	able to Hawaii and	47	99999999999.00	63

Place		Name as shown on return		Federal E	mploy	er Identification	Number
Place R Code		NAME			9999		
Here		XXXXXXXXXXXXXXXXX	XXXXXXXXXXX	XXX			
		XXXXXXXXXXXXXXXX	XXXXXX				
40		ATION OF APPORTIONABLE BUS	SINESS INCOME SU	JEJECT TO TAX	40	9999999999	99.00
48. 49.	Enter the portion of the amount on li		optor on line CO		48	9999999999	
	Enter the portion of the amount on li			• • • • • • • • • • • • • • • • • • • •		9999999999	
50.	Total (lines 48 and 49). This total mu			TOTAY	50	19999999999	99.00
E-4		OME: WHOLLY ATTRIBUTABLE TO			1		
51. 52.	Gain (or loss) from sale of real estate and ot Royalties from property located in Ha		51 999999	<u> </u>			
53.	Net profit (or loss) from nonbusiness		53 999999				
54.	Net gain from sale of nonbusiness a		33 999999	99999.00			
54.	stus in Hawaii:	335t3 Jocated III of Having tax					
	(a) Net short-term capital gain		54(a) 999999	99999.00			
	(b) Net capital gain attributable to Ha		U (()	33333.00			
	should be entered on line 60)		54(b) 999999	99999.00			
	(c) Net gain (or loss) from sale or ex	change of property other than	9,44,55555	2223300			
	capital assets		54(c) 999999	99999.00			
55.	Income from intangible personal pro	perty. Include entire income					
	(or loss) of intangibles which, because	1 1					
	or business situs of intangibles, are I	1					
	Hawaii allocated, nonbusiness incon	ne and dividends.					
	(a) Dividends included on line 35 abo	ove (Attach schedule)	55(a) 999999	99999.00			
	(b) Interest		55(b) 999999	99999.00			
	(c) All other income from intangibles	(Attach schedule)	55(c) 999999	99999.00			
56.	Total income wholly attributable to H	awaii (lines 51 to 55(c))			56	999999999	9.00
57.	Total of lines 47 and 56 (or the amou	unt from line 34 if you did not need t	o apportion your inco	ome)	57	999999999	9.00
58.	Net operating loss deduction—subm	nit schedule. (See instruction XI)			58●	999999999	9.00
59.	Net income (or loss) for Hawaii tax p	urposes (line 57 minus line 58)			59	9999999999	9.00
		TAX COMPUTA					
60.	Enter the amount of net capital gains	s as shown on page 1, line 8(a). (If	you apportioned you	rincome,			
	enter the amounts from lines 49 and					9999999999	
61.	Line 59 minus line 60 (If less than z					9999999999	
62.	(a) Tax on capital gain — 4% of amo					9999999999	2.00
	(b) Tax on net income — 7.92% of a	mount on line 61			H	9999999999	
	(c) Total of lines 62(a) and 62(b)	 - - - - - - - - - - - - - - - - - - -				9999999999	
00	(d) Using the 7.92% rate, compute to		unt from line 59		H	9999999999	
63. 64.	Total tax (enter lesser of line 62(c) or Recapture of Capital Goods Excise	` ' '	64 999999		63	9999999999	9.00
65.	Recapture of Low-Income Housing T						
66.	Recapture of Capital Infrastructure T						
67.	Total recapture of tax credits (Add lin		00 1999999	99999.100	67	99999999	99.00
68.	Total tax (Add lines 63 and 67). Enter				68	99999999	
		/ DIVIDENDS (Classified fo	r Hawaii Purnos			, 33333333	7551.00
			B. Received from an	4. Received by a	small		
	1. Name of declaring corporation	2. National Banking affili	iate (including foreign)	business investme	ent co.	5. All other div	/idends
		Associations as	s IRC section 243(b) qualifying dividend	operating under S Business Investme			
ΔME.	OF CORPORATION XXXXXXX					99999999	99 00
	OF CORPORATION XXXXXXX					999999999	
	OF CORPORATION XXXXXXX					999999999	
				7777777	<i>J</i> . <i>O O</i>	99999999	
0. 10	tal dividends (Add amounts in column					999999999	
7 D:	vidends qualifying for the 70% dividen					999999999	
	ultiply line 7 by .30 (30%)					999999999	
8. Mu	المام ما المام المائي المام ال						77.00
9. Ta	xable mutual funds dividends	0)	0-				
9. Ta	xable mutual funds dividends tal taxable dividends (Add lines 8 and	9). Enter here and on page 2, line	25			999999999	

5 Place	2 64 66 68 70 72 74 76 Page 80 82 3 4 81 Employer Identification Number 5 6 6 7	
S Flace	5	
6 Here XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	9-9999999 6 7	
	7	
		+
9 - -	8	+
Schedule E COMPENSATION OF OFFICERS	10	†
3. Time Percent of corporation		T
1. Name and address of officer 2. Official title devoted to business 4. Common 5. Prefer		
NAME AND ADDRESS OF OFFICERXXXX TITLE XXXXXXXXX 999999 999999 99999		
NAME AND ADDRESS OF OFFICERXXXX TITLE XXXXXXXXX 999999 999999 9999		_
15 NAME AND ADDRESS OF OFFICERXXXX TITLE XXXXXXXXX 999999 99999 9999		
16 NAME AND ADDRESS OF OFFICERXXXX TITLE XXXXXXXXX 999999 99999 9999 17 NAME AND ADDRESS OF OFFICERXXXX TITLE XXXXXXXXX 999999 99999 99999		
NAME AND ADDRESS OF OFFICERXXXX TITTLE XXXXXXXXX 9999991 999999 18999 1899 189	99 999999999999999.00 ₁₇	
19 Schedule F BAD DEBTS	19	
20 1. Last 3 2. Amount of Notes 5. Bad Depts of If Corpora	tion Carries An Allowance 20	
and Accounts (or Net) 4 Salas on Account Allowance	Amount Charged 8. Balance of	
22 Taxable Outstanding at Reported Is Carried Added to Allowance A	Amount Charged 8. Balance of gainst Allowance Allowance 22	_
23 Years End of Year On Books On Books	23	+
	9999999.00 99999999.00 $_{24}$ 9999999.00 $_{00}$	+
	9999999.00 99999999.00 $_{25}$	\pm
	9999999.00 99999999.00 27	
28 Schedule H NONREFUNDABLE CREDITS	28	T
29 1. Carryover of the Credit for Energy Conservation (Attach Form N-323)	10 9999999999 . 00 29	
2. Low-income Housing Tax Credit (Attach Form N-586)	20 999999999999 00 30	
3. Carryover of the High Technology Business Investment Tax Credit (Attach Form N-323)	. 3• 9999999999.00 31	_
4. Carryover of the Renewable Energy Technologies Income Tax Credit (for systems installed and placed in	32	_
service before July 1, 2009) (Attach Form N-323)	4 9999999999.00 33	+
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: Solar Wind	50 9999999999.00 35	+
	6 999999999 00 36	
37 Schedule I REFUNDABLE CREDITS	37	
38 1. Capital Goods Excise Tax Credit (Attach Form N-312)	10 999999999999999999999999999999999999	
2. Renewable Energy Technologies Income Tax Credit for Systems Placed in Service on or after July 1, 200		
(Attach Form N-342) (Note: The refundable credit applies only to solar energy systems and not to wind powered energy systems 3. Total Refundable Credits. Add lines 1 and 2. (Enter here and on page 1, line 70)		
3. Iodal Retundable Credits. Add lines I and 2. (Enter here and on page I, line 70)	1 3 1 9 9 9 9 9 9 9 9 9 9	
	verywhere 43	
44 Property — (use original cost) Beginning of taxable year End of taxable year Beginning of taxable year	End of taxable year 44	
45 Land 999999999999999999999999999999999999	999999999 00 45	
46 Buildings 999999999999999999999999999999999999	9999999999.00 46	
47 Loans 99999999999 00 99999999 00 999999999 00	999999999999999999999999999999999999999	
48 Credit card receivables 9999999999 00 999999999 00 9999999999	999999999999999999999999999999999999999	
49 Leasehold interests* 9999999999.00 9999999999.00	1 222222222	
50 Rented Property* 999999999999999999999999999999999999	999999999999999999999999999999999999999	
Total 9999999999900 999999999900 9999999999	99999999999952	
* Enter net annual rent X 8.	53	
A. In Hawaii B. Everywhere	Percent in Hawaii** 54	
1 Property values (average value of property above) 999999999999999999999999999999999999		
Property factor (line 1, col. A divided by line 1, col. B)	0.99999% 56 T	
57 3 Total compensation 999999999999999999999999999999999999	0.99999% 58	
58 4 Payroll factor (line 3, col. A divided by line 3, col. B)		
60 6 Sales factor (line 5, col. A divided by line 5, col. B)	0.99999 % 60	I
61 7 Total of factors (add lines 2, 4, and 6)	0.9999 % 61	_
8 Average of factors (divide line 7 by 3). Enter here and on page 2, line 47	0.99999% 62	
63 ** Compute all percentages to 5 decimal places (500000%), 36 38 40 42 44 46 48 50 52 54 56 58 60 6 Human Readable text here	2 64 66 68 70 72 74 76 78 80 82 64 64	8
64 Human Readable text here 65 LD NO XX	FORM F-1 (REV. 2019) 64	

FORM F-1 (REV. 2019)

STATE OF HAWAII — DEPARTMENT OF TAXATION

FRANCHISE TAX RETURN

BANKS, OTHER FINANCIAL CORPORATIONS, AND SMALL BUSINESS INVESTMENT COMPANIES

Place QR Code Here

CALENDAR YEAR 2020 OR FISCAL YEAR BEGINNING IN 2020 (Based on income for calendar year 2019 or fiscal year beginning on _______, 2019 and ending

		12-12, 20) <u>99</u>) (First year, S	econd year, &	Final return filers,	see Instruction	ns)			
		īX	IRS Adjustment	Hawaii Tax I.	D Number	Fed	deral Emp	loyer I.D. No	L).	
X	AME		NOL Carryback		-999-9999- <u></u>		9999	•		
	Name	TABLE HETATTI (Attach Sch. AMD)	L IIOL Carryback	GE 222	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			ss Activity		
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TYPE	DBA (if	: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		^^^^	\^^^			Y XXXXX ss Began in		XXXX
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OR		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXX	<u>XXXXXXXXXXX</u>		2 - 12 - 1 e of Inco			
느	_	,						•		
PRINT		JING ADDRESS XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	<u>(XXXXXXXXXXXX</u>	XXXXXXXX	XXXXXXXXXXX		2-12-1	212 eign Country		
Ф	-	tate, and Postal/ZIP Code								
		STATE ZIP CODE XXXXXXX	XXXXXXXXXXXX	XXXXXXXX	<u> </u>	XXXXX SI	'ATE O	F INC X	XXXXX	.XXXX
(BOX, IF APPLICABLE:		_						
	X	•	Second year return yment method	X	Final return (Busin	ess end date	12-12	1	, 20 _	12_)
		A COPY OF ALL PAG	SES OF VOLID EED	EDAL DETLID		NADA NIV TLIIC	DETLID	.I		
		If this is a consolidated								
							Subsidio	aıy.		
	1. (Gross Receipts <u>99999999999.0</u>	0Less: Returr	ns and allowan	ces 9999999	9999.00	1	999999	99999	.00
	2 . L	Less: Cost of goods sold and/or operat	ions (Attach schedule	e)			2	999999	99999	.00
	3. (Gross Profit (line 1 minus line 2)					3	999999	99999	.00
믣	4. [Dividends (Schedule C)					4	999999	99999	.00
ō		,	Gross Amount		Less: Amortizable					
2	5. I	nterest on government obligations	99999999	99.00	9999999	9999.00	5	999999	99999	.00
S	6. (Other interest				99999.00	6	999999		1
GROSS INCOME					99999999.00		- 7(c)	999999		1
E.									99999.	
		(b) Ordinary gain or loss (from federal S						999999		+
		Other income (Attach schedule)	,				` ,	999999		1
		TOTAL INCOME — Add lines 3 through						999999		+
		TOTAL TAX from page 3, line 68					_	9999999		
		Total Refundable Credits. Enter the res						9999999		
		ine 69 minus line 70. If line 71 is zero						9999999		
		Total Nonrefundable Credits from Sched						9999999		
		Capital Infrastructure Tax Credit (Attach	•					9999999		
		ine 71 minus the sum of lines 72 and 7	,					999999		
ΑX		Payment with extension (Attach Form N					/-			-100
₹		Tax installment payments (See Instructi					\dashv			
		Add lines 75 and 76 and enter result	OII XIV)		76• 9999999	99999,00	77		00000	Too
		TAX DUE (Line 74 minus line 77. If line	77 is greater than lin		70 and go to line	90)	78•	999999		.00
		,	•	•	•	,		999999		
		Enter amount paid with this return					79•	999999		
		OVERPAYMENT (If line 77 is larger than	, ,	•			▶ 80●	999999	<u>99999</u>	.00
		Enter amount of line 80 you want Credi					- 00	I		T
요_		Amount to be REFUNDED TO YOU (line Amount paid (overpaid) on original retuin					_	999999		
Return				•		•	83	999999		
Ž.	04.	BALANCE DUE (REFUND) with amen	•		•			999999		
Sig	ease gn	my knowledge and belief, is a true, correct, and Corporations, Chapter 241, HRS.					come Taxati		d Other Fina	ancial
Here Signature of officer Date T111							-	777777777 7		
_					Date	Charlett	1	Preparer's ident	ification nur	nber
Pai		Preparer's Signature, and Print Preparer's Name PREPARE	ER NAME XXXXX	XXXXXXX	12/12/12	Check if self-employed		PREP ID		
	parer's ormation		E XXXXXXXXXXX		XXXXXXXXXX	Federal ➤ 99-				
		if self-employed), address, and Postal/ZIP Code ADDRESS				Phone No. >		999-99	99	
Hur	man Reada	able text here		D NO XX		. Hono No. F		ORM F-1		2019
			11	$\sim 100 \text{ VV}$			•	J	· · · - · ·	,

FORM F-1 (REV. 2019) Page 2

Place QR Code Here

DEDUCT.

Name as shown on return NAME xxxxxxxxxxxxxxxxxxxxxxxxxxxx

Federal Employer Identification Number 99-9999999

10.	(a) TOTAL INCOME — from page 1, line 10				10(a)	99999999999	.00
	DEDUCTIONS						
11.	Compensation of officers (Schedule E)				11	9999999999	.00
12.	Salaries and wages (not deducted elsewhere)				12	9999999999	.00
13.	Repairs (Do not include cost of improvements or capital expenditures)				13	9999999999	.00
14.	(a) Bad debts (Schedule F) 9999999999.00 Plus 14(b) Rents 9	9999	999999.00 ,	Sum ➤	14(c)	99999999999	.00
15.	(a) Taxes (Attach schedule) 999999999999999999999999999999999999	9999	9999999.00,	Sum ➤	15(c)	9999999999	.00
16.	Contributions or gifts paid (Attach schedule)				16	9999999999	.00
17.	Amortization (Attach schedule)				17	9999999999	.00
18.	Depletion				18	9999999999	.00
19.	Depreciation (from federal Form 4562)				19	9999999999	.00
20.	Advertising					99999999999	
21.	Amounts contributed under: (a) Pension, profit-sharing, stock bonus, and	nuity pl	ans (Attach schedu	le)	$\overline{}$	99999999999	
	(b) Other employee benefit plans (Attach so	hedule)		$\overline{}$	99999999999	
22.	Other deductions (Attach schedule)					99999999999	_
23.	TOTAL DEDUCTIONS — Add lines 11 through 22			99999999999			
24.	Net income before Hawaii adjustments (line 10(a) minus line 23)				24	99999999999	.00
	STATE ADJUSTME	NTS					
ADD:							
25.	Taxable dividends from Schedule C, line 10				25	9999999999	.00
26.	(a) Interest on obligations of the United States or its possessions or on sec						
	Act of Congress. (See instruction VI(a)(1))				26(a)	9999999999	.00
	(b) Interest on state, territorial, municipal, county, or other bonds or securit	ies, inc	luding Hawaiian iss	ues,			
	not included on line 6. (See instruction VI(a)(2))				26(b)	9999999999	.00
27.	Amount of deduction for bad debts taken on line 14(a). (See Instructions I					99999999999	
28.	Other additions required by law — submit schedule. (See Instruction IV(b)	,				99999999999	$\overline{}$
29.	Total of lines 24 through 28	<u></u>	<u> </u>		29	99999999999	.00
DEDI	JCT:						
30.	Entire dividends as reported on page 1, line 4		99999999999				
31.	Bad debt deduction allowed by section 241-4(b)(3), HRS. (See Instruction VII(c))	-	99999999999				
32.	Other deductions authorized by law — submit schedule. (See Instructions VI(b) and X(b))		99999999999		<u> </u>	г	
33.	Total of lines 30 through 32					99999999999	+
34.	Net income after Hawaii adjustments (line 29 minus line 33)				34	99999999999	.00
	Note: If you do not need to apportion your income, skip lines 35 through	_		on			
	line 34 on line 57, and continue with line 58. Otherwise, continu	ie with	line 35.				

ADJUSTMENTS TO ARRIVE AT APPORTIONABLE BUSINESS INCOME SUBJECT TO TAX

DED	JCI:						
35.	Nonbusiness dividends included on page 1, line 4, and included				ı		
	on line 24 above	35	99999999999.	00	ı		
36.	Nonbusiness interest (Attach schedule)	36	99999999999.	00	ı		
37.	Royalties from nonbusiness assets (Attach schedule)	37	99999999999.	00	ı		
38.	Net profit from nonbusiness rental property	38	99999999999.	00	ı		
39.	Net gain from nonbusiness assets (Attach schedule)	39	99999999999.	00	ı		
40.	Other adjustments (Attach schedule)	40	99999999999.	00			
41.	Total (lines 35 to 40, inclusive)				41	9999999999.00	_
42.	Balance (line 34 minus line 41)				42	9999999999.00	_
ADD	4						_
43.	Net loss from nonbusiness rental property	43	99999999999.	00	ı		
44.	Net loss from nonbusiness assets (Attach schedule)	44	99999999999.	00			
45.	Total of lines 43 and 44				45	9999999999.00	_
46.	Business income from sources within and without Hawaii (line 42 plus line	45) .		[46	9999999999.00	_
47.	Allocate 0.99999% (from Schedule P, line 8), as apportionable income	attribu	table to Hawaii and				_
	subject to tax. (Multiply line 46 by the %)				47	9999999999.00	_
							_

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Place OR Code Here

Federal Employer Identification Number Name as shown on return NAME. 99-999999

CLASSIFICATION OF APPORTIONABLE BUSINESS INCOME SUBJECT TO TAX 9999999999 იი 48. 49. 9999999999 0.0 Enter the portion of the amount on line 47 that is net capital gain. Also, enter on line 60 49 50. 9999999999 0.0 INCOME WHOLLY ATTRIBUTABLE TO HAWAII SUBJECT TO TAX 51. Gain (or loss) from sale of real estate and other tangible assets located in Hawaii . . . 9999999999.00 52. 9999999999 53. Net profit (or loss) from nonbusiness rental property within Hawaii . . . 9999999999 00 54. Net gain from sale of nonbusiness assets located in or having tax situs in Hawaii: **54(a)** 99999999999.00 (b) Net capital gain attributable to Hawaii. (This amount, if any, also .00 (c) Net gain (or loss) from sale or exchange of property other than **54(c)** 99999999999.00 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)** 9999999999 . 00 **55(b)** 9999999999 (c) All other income from intangibles (Attach schedule) 56. Total income wholly attributable to Hawaii (lines 51 to 55(c)). 9999999999 57. Total of lines 47 and 56 (or the amount from line 34 if you did not need to apportion your income) 999999999 \cap 58 Net operating loss deduction—submit schedule. (See instruction XI) 58● 9999999999 00 Net income (or loss) for Hawaii tax purposes (line 57 minus line 58). 59. 9999999999 n n TAX COMPUTATION 60. Enter the amount of net capital gains as shown on page 1, line 8(a). (If you apportioned your income, 60 9999999999 าก 61. 61 9999999999 nη 62. 62(a) 9999999999 n n 62(b) 9999999999 00 62(c) 9999999999 00 (d) Using the 7.92% rate, compute tax on all taxable income using amount from line 59 **62(d)** 9999999999 00 63. 9999999999 n n 64 Recapture of Capital Goods Excise Tax Credit from Form N-312, Part II 9999999999 Recapture of Low-Income Housing Tax Credit from Form N-586, Part III 65. 65 99999999999 lo o 66. Recapture of Capital Infrastructure Tax Credit from Form N-348, Part IV 66 99999999999 67. 9999999999 00 Total tax (Add lines 63 and 67). Enter here and on page 1, line 69 . . 9999999999 00 Schedule C **INCOME FROM DIVIDENDS (Classified for Hawaii Purposes)** 3. Received from an 4. Received by a small 1. Name of declaring corporation 2. National Banking affiliate (including foreign) business investment co. 5. All other dividends Associations as IRC section 243(b) operating under Small qualifying dividend **Business Investment Act** NAME OF CORPORATION XXXXXXXXXX 999999999.00 999999999.00 9999999999. 9999999999.00 NAME CORPORATION XXXXXXXXXX 999999999.00 9<u>999999999</u> . NAME OF CORPORATION XXXXXXXXXX 999999999.00 999999999.00 9999999999.00 999999999.00 6. Total dividends (Add amounts in columns 2, 3, 4, and 5). Enter here and on page 1, line 4. 9999999999.00 7. Dividends qualifying for the 70% dividends received deduction (Total of amounts in column 5) 9999999999.00 9999999999.00

10. Total taxable dividends (Add lines 8 and 9). Enter here and on page 2, line 25.

9999999999.00

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Place QR Code Here

Name as shown on return	Federal Employer Identification Number
NAME	99-999999
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	

Sche	dule E CO	OMPENSATION O	OF OFFICE	RS							
Name and address of officer			2. Of	ficial title	3. Time devoted to	Percent of o	corporation owned			Amount of	
					business	1 4 0	5. Preferred	compensation			
		OF OFFICERXXXX		XXXXXXXX	99999		999999	999999999999999999999999999999999999999		99999999	9.00
NAME A	AND ADDRESS C	F OFFICERXXX	X TITLE 2	XXXXXXXX	99999		999999	_	99999	99999999	9.00
		OF OFFICERXXXX		XXXXXXXX	99999		999999		99999	99999999	9.00
NAME A	AND ADDRESS C	F OFFICERXXX	X TITLE 2	XXXXXXXX	99999	9 999999	999999	9 99	99999	99999999	9.00
		F OFFICERXXXX		XXXXXXXX				9 99	99999	99999999	9.00
		s (Enter here and on	page 2, line 11)				. 99	99999	99999999	9.00
Schedule F BAD DEBTS											
1. Last 3 Prior	2. Amount of Notes	3. Taxable			Debts of		If Corporatio	n Carrie	s An Allo	wance	
and Current Taxable Years	and Accounts Receivable Outstanding at End of Year	(or Not)	4. Sales on Acce	ount Allow Is Ca	tion if No vance arried looks	6. Gross Amo Added to Allow		mount Cainst Allo		8. Balance Allowand	
20 <u>99</u>	99999999.00	99999999.00	99999999	.00 99999	999.00	99999999	.00 99	99999	9.00	9999999	9.00
20 <u>99</u>	99999999.00	99999999.00	99999999	.00 99999	999.00	99999999	.00 99	99999	9.00	9999999	9.00
20 <u>99</u>	99999999.00	99999999.00	99999999	.00 99999	999.00	99999999	.00 99	99999	9.00	9999999	9.00
20 99	99999999.00	99999999.00	9999999	.00 99999	999.00	99999999	.00 999	99999	9.00	9999999	9.00
20 99 99999999.00 99999999.00 99999999.00 99999999.00 999999999.00 999999999.00 999999999.00 Schedule H NONREFUNDABLE CREDITS											
1.	Carryover of the Cre	dit for Energy Conser	vation (Attach	Form N-323).				1•	9999	9999999.	00
2.	Low-income Housing	g Tax Credit (Attach F	orm N-586)					2●	9999	9999999.	00
3.	Carryover of the Hig	h Technology Busines	s Investment 7	ax Credit (Atta	ch Form N	-323)		3●	9999	9999999.	00
4.	Carryover of the Rer	newable Energy Techr	nologies Incom	e Tax Credit (fo	r systems	installed and p	laced in				
	service before July 1	, 2009) (Attach Form	N-323)					4●	9999	9999999.	00
5.	Renewable Energy 7	Technologies Income	Tax Credit for S	Systems Placed	I in Service	e on or after Ju	ly 1, 2009				
	(Attach Form N-342)	Check the type of er	nergy system:	Solar X	Wind .			5●	9999	9999999.	00
6.	Total Nonrefundable	Credits. Add lines 1	through 5. (En	ter here and or	n page 1, li	ine 72)	>	6	9999	9999999.	00
Sche		FUNDABLE CRI									
1.	Capital Goods Excis	e Tax Credit (Attach F	orm N-312).					1•	9999	9999999.	00
2.	Renewable Energy 1	Technologies Income	Tax Credit for S	Systems Placed	I in Service	e on or after Ju	ly 1, 2009				
(Attach Form N-342) (Note: The refundable credit applies only to solar energy systems and not to wind powered energy systems)									00		
3.		edits. Add lines 1 and	12. (Enter here	e and on page	1, line 70)		≻	3	9999	9999999.	00
Sche	dule P CC	MPUTATION OF	APPORTI	ONMENT FA	CTORS	3					
			In Hawaii				Total Eve	rywhere)		
Property	— (use original cost)	Beginning of taxable	year E	nd of taxable ye	ar E	Beginning of tax	able year	En	d of taxa	able year]
					a		~ ~ ~ I				I

COMPORATION OF AFFORTIONMENT FACTORS							
	In Ha	awaii	Total Everywhere				
Property — (use original cost)	Beginning of taxable year	Beginning of taxable year End of taxable year		End of taxable year			
Land	9999999999.00	9999999999.00	9999999999.00	9999999999.00			
Buildings	9999999999.00	9999999999.00	9999999999.00	9999999999.00			
Loans	9999999999.00	9999999999.00	9999999999.00	9999999999.00			
Credit card receivables	9999999999.00	9999999999.00	9999999999.00	9999999999.00			
Leasehold interests*		9999999999.00		9999999999.00			
Rented Property*		9999999999.00		9999999999.00			
Other Property	9999999999.00	9999999999.00	9999999999.00	9999999999.00			
Total	9999999999.00	9999999999.00	9999999999.00	9999999999.00			

* Ente	er net annual rent X 8.			
		A. In Hawaii	B. Everywhere	Percent in Hawaii**
1	Property values (average value of property above)	99999999999.00	99999999999.00	
2	Property factor (line 1, col. A divided by line 1, col. B)			0.99999 %
3	Total compensation	99999999999.00	99999999999.00	
4	Payroll factor (line 3, col. A divided by line 3, col. B) .			0.99999 %
5	Total Sales	99999999999.00	99999999999.00	
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 an	d on page 2, line 47		0.99999 %