FORM F-1 (REV. 2022)

## STATE OF HAWAII — DEPARTMENT OF TAXATION

## FRANCHISE TAX RETURN

BANKS, OTHER FINANCIAL CORPORATIONS, AND SMALL BUSINESS INVESTMENT COMPANIES

Place QR Code Here

CALENDAR YEAR 2023 OR FISCAL YEAR BEGINNING IN 2023

(Başed on income for calendar year 2022 or fiscal year beginning on \_\_\_\_\_12-12\_\_\_\_\_, 2022 and ending

Hur	nan Read	table text here $12-12$	) $12$ ) (First year, S	econd vear &	Final re	eturn filers	see Instructions	;)			
								,			
			IRS Adjustment	Hawaii Tax I.					loyer I.D. N	٥.	
X	AME	ENDED Return (Attach Sch. AMD)	NOL Carryback	GE-999	9-99	9-9999			9999		
	Name	•					Main	Busines	s Activity		
P F	NAM	IE XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXX	XXXX	XXXXXX	XXXX AC	TIVI	TY XX	XXXX	XXXX
_	DBA (	(if any)					Date	Busines	s Began in	Hawaii	
S	DBA	XXXXXXXXXXXXXXXXXX	XXXXXXXXXX	XXXXXXX	XXXX	XXXXXX	XXXX 12	-12-	1212		
_	Mailin	g Address (number and street)					Date	of Incor	poration		
Z	MAI	LING ADDRESS XXXXXX	XXXXXXXXXX	XXXXXXX	XXXX	XXXXXX			-1212		
7	City, S	State, and Postal/ZIP Code					State	or Fore	ign Country	of Incor	poration
	CIT	Y STATE ZIP CODE XXX	XXXXXXXXXX	XXXXXXX	XXXX	XXXXXX	XXXX ST	ATE	OF IN	C XX	XXXX
(	CHECK	BOX, IF APPLICABLE:									
	3	<b>X</b> First year return <b>X</b> Seco	nd year return	X Final ret	urn (Bu	siness end	date <u>12-12</u>		20	12 )	
		Election to pay via the installment pay	•	1 11101 101	am (Ba	on occ on a	44.0		, 20 _	/	
		A COPY OF ALL PAGES (		OAL DETLI		LIST ACC		JIC D	ETLIDN		
		If this is a consolidated	return, attach copy	of Hawaii Fo	rms N-	304 and N-	303 for each s	ubsidia	ıry.		
	1.	Gross Receipts <u>99999999</u> .0	0 Less: Return	ns and allowar	ices	99999	9999.00	1	99999	9999	.00
		Less: Cost of goods sold and/or operat						2	99999	9999	.00
		Gross Profit (line 1 minus line 2)	•	•				3	99999		
		Dividends (Schedule C)						4	99999		
ā		- /	Gross Amount				Bond Premium				
INCOME	5.	Interest on government obligations	99999999	9.00		99999	9999.00	5	99999	9999	.00
		Other interest					9999.00	6	99999		
SKOSS		(a) Rents 99999999.00					0 , Sum <b>&gt;</b>	7(c)	99999		
Ž		(a) Net capital gains (from federal Scheo						8(a)	99999		
		(b) Ordinary gain or loss (from federal S						8(b)	99999		
		Other income (Attach schedule)						9	99999		
		TOTAL INCOME — Add lines 3 through						10	99999		
		TOTAL TAX from page 3, line 68						69	99999		
		Total Refundable Credits. Enter the res						70	99999		
		Adjusted Tax Liability (Line 69 minus line 70. If line 71 is zero or less, see Instruction XVI)								9999	
		otal Nonrefundable Credits from Schedule H, line 6							99999		
		Carryover of the Capital Infrastructure To						72 73	99999		
		Line 71 minus the sum of lines 72 and 7	,	•				74	99999		
×		Payment with extension (Attach Form N	•	,			9999100	/	99999	9999	.00
₹		Tax installment payments (See Instruction	,				9999 00	-			
		Add lines 75 and 76 and enter result					9999400	77	99999	0000	100
		TAX DUE (Line 74 minus line 77. If line					RU/	78	99999		
		Enter amount paid with this return	•	•		_	,	79			
		OVERPAYMENT (If line 77 is larger than						80	99999		.00
		•						00	99999	9999	.00
		Enter amount of line 80 you want <b>Credi</b> Amount to be <b>REFUNDED TO YOU</b> (line						02	00000	0000	Ιοο
		Amount paid (overpaid) on original retur						82	99999		,00
Return		BALANCE DUE (REFUND) with amen		,			,	83	99999		00
<u> </u>	04.	I declare, under the penalties set forth in section						<u> </u>			
Ρle	ease	my knowledge and belief, is a true, correct, and									
Sign		Corporations, Chapter 241, HRS.			12_	12-121	2 🔪 Т	ם.דייד	XXXX	XXXX	VVV
He	re	Signature of officer			∠ Date	<u> </u>		itle	2 2222727	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	22222
		<del>                                       </del>				Date		PTIN	I		
Pai		Preparer's Signature, and Print Preparer's Name	RER NAME XX	XXXXXX		12-12	Check if self-employed			ID NO	XX (
Preparer's Informatio		Firm's name (or yours Federal 99 - 0									
		If self-employed),						0-9999999 (999) 999-9999			
		address, and Postal/ZIP Code ADDRESS	S XXXXXXXXX	XXXXXXX	XXX	XXXXX	Phone No. > (	シンン)	222-	シンソソ	

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Name as shown on return	
NAME	
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XΣ

Federal Employer Identification Number 99-999999

10.	(a) TOTAL INCOME — from page 1, line 10	10(a)	99999999,00							
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) 99999999.00 Plus <b>14(b)</b> Rents 9	14(c)	999999999.00							
15.	(a) Taxes (Attach schedule) 999999999999999999999999999999999999	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, and	uity pl	ans (Attach schedule)	21(a)						
	(b) Other employee benefit plans (Attach sci	nedule	)	21(b)						
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 ADJUSTME									
ADD:										
25.	Taxable dividends from Schedule C, line 10		25	999999999.00						
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)	999999999.00					
	(b) Interest on state, territorial, municipal, county, or other bonds or securiti	•								
	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	. ,	•	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					
DEDU										
30.	Entire dividends as reported on page 1, line 4	-								
31.	Bad debt deduction allowed by section 241-4(b)(3), HRS. (See Instruction VII(c))	999999999 00	-							
32.	Other deductions authorized by law—submit schedule. (See Instructions VI(b) and X(b))	22	999999999,00							
33.	Total of lines 30 through 32	33	999999999.00							
34.	Net income after Hawaii adjustments (line 29 minus line 33)	34	JJJJJJJJJJ   UU							
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

DEDU	ІСТ:						
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	9999999999.	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		46	999999999	.00		
47.	Allocate $\underline{0.99999}$ % (from Schedule P, line 8), as apportionable income						
	subject to tax. (Multiply line 46 by the %)		47	999999999	.00		
40. 41. 42. ADD: 43. 44. 45.	Other adjustments (Attach schedule).  Total (lines 35 to 40, inclusive)	43 44 	99999999999999999999999999999999999999	00	42 45 46	999999999999999999999999999999999999999	.00

FORM F-1 (REV. 2022) Page 3

Place QR Code Here  Federal Employer Identification Number 99-9999999

CLASSIFICATION OF APPORTIONABLE BUSINESS INCOME SUBJECT TO TAX 999999999 0.0 48. 999999999 00 49. Enter the portion of the amount on line 47 that is net capital gain. Also, enter on line 60 . . . . . . . . . 49 99999999 0050. 50 INCOME WHOLLY ATTRIBUTABLE TO HAWAII SUBJECT TO TAX 999999999.00 51. Gain (or loss) from sale of real estate and other tangible assets located in Hawaii . . . . 999999999 52. 53. Net profit (or loss) from nonbusiness rental property within Hawaii . . . 999999999 0054. Net gain from sale of nonbusiness assets located in or having tax situs in Hawaii: **54(a)** 999999999.00 (b) Net capital gain attributable to Hawaii. (This amount, if any, also **54(b)** 999999999 should be entered on line 60)............ 0.0 (c) Net gain (or loss) from sale or exchange of property other than **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. 55(a) 999999999 (a) Dividends included on line 35 above (Attach schedule) . . . . . .  $\cap$ 999999999 999999999 (c) All other income from intangibles (Attach schedule) . . . . . . . . . 55(c) 99999999 56. Total income wholly attributable to Hawaii (lines 51 to 55(c)). . . . . . . . . . . . 00 56 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 999999999 00 58 Net operating loss deduction—submit schedule. (See instruction XI) . . . . . . . . . . . . . . . . . 58 999999999 Net income (or loss) for Hawaii tax purposes (line 57 minus line 58) . . . . . . 59 00 59. TAX COMPUTATION 60. Enter the amount of net capital gains as shown on page 1, line 8(a). (If you apportioned your income, 999999999 60 00 Line 59 minus line 60 (If less than zero, enter zero)........ 999999999 00 61. 61 99999999 00 62. 62(a) 999999999 62(b) 00 999999999 00 62(c) 999999999 (d) Using the 7.92% rate, compute tax on all taxable income using amount from line 59 . . . . . . . . . 62(d) 00 999999999 63. 999999999 64 Recapture of Capital Goods Excise Tax Credit from Form N-312, Part II Recapture of Low-Income Housing Tax Credit from Form N-586, Part III 999999999. 0065. 66. Recapture of Capital Infrastructure Tax Credit from Form N-348, Part II. 66 99999999 67. 00 999999999 00 Total tax (Add lines 63 and 67). Enter here and on page 1, line 69 . . . 68 68. Schedule C **INCOME FROM DIVIDENDS (Classified for Hawaii Purposes)** 3. Received from an 4. Received by a small 2. National Banking 1. Name of declaring corporation 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 CORPORATION XXXXX 99999999.00 99999999,00 99999999. 99999999. 99999999 NAME CORPORATION XXXXX 99999999.00 99999999 99999999 00 NAME CORPORATION XXXXX 9999999.00 99999999.00 9999999.00 9999999.00 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) 99999999.00 999999999 . 00 999999999. 10. Total taxable dividends (Add lines 8 and 9). Enter here and on page 2, line 25. . . . . . . . .

Place QR Code Here Human Readable text here Name as shown on return NAME 

Federal Employer Identification Number 99-9999999

0.99999 %

Sch	edule E CC	MPENSATION	OF OF	FICER	RS								
1. Name and address of officer				· · · · · · · · · · · · · · · · · · ·		3. Time devoted to	l stock owned			6. Amount of			
				busine			4. Common			compensation			
NAME AND ADDRESS OF OFFIC TI					XXXXXXX	99999		99999					
NAME				XXXXXXX	99999						999999		
NAME			TIT							9999999.00			
NAME									999999				
NAME											9999999.00		
	compensation of officer		page 2,	line 11)							99	999999	9.00
	•	D DEBTS						11.0		<u> </u>	A A !!		
<b>1.</b> Last Prior	2. Amount of Notes and Accounts	3. Taxable				Debts of tion if No		If Corpo	oration	Carries	An Allov	wance	
and Currer	Receivable	(or Net) Income	4. Sales	on Accou	unt Allow	/ance				ount Ch	narged	8. Baland	e of
Taxabl	e Outstanding at	Reported				arried ooks	Added to Allow	/ance		inst Allowance Allowa			ce
Years	'		0000	200			000000	0.0	000	2000	, ,,	00000	0 00
<u> </u>		999999.00		999.		99.00	999999				00.6	99999	
20		999999.00		999.			999999	$\overline{}$					
20 99		999999.00		999.	_	99.00	999999	-			9.00 999999.0		
20 99	1				00  9999	99.00	999999	.00	999	9999	00.6	99999	9.00
		NREFUNDABL											1 0 0
1.	Carryover of the Cre	0,	,		,					1		999999	
2.	Low-income Housing	•		,						2		999999	
3.	Carryover of the High									3	999	999999	.00
4.	Carryover of the Rer		-		•	•		•					
_	service before July 1									4	999	999999	.00
5.	Renewable Energy 1	-			•			-		-   00000000			
(Attach Form N-342) Check the type of energy s										5 999999999. ( 6 999999999 . (			
6. Total Nonrefundable Credits. Add lines 1 through				er here and or	n page 1, li	ne /2)		>	6	999	1999999	.00	
Schedule   REFUNDABLE CREDITS  1 Control Conde Evoire Tay Credit (Attach Form N 212)								00000	1 00				
2.	<ol> <li>Capital Goods Excise Tax Credit (Attach Form N-312)</li></ol>								1999999	. 00			
۷.	(Attach Form N-342) (No	•			•			-		2	م م ه	999999	
3.	Total Refundable Cre									3		999999	
		MPUTATION O							/		222	733333	, 00
OCI	edule i CC		In Ha		/INIVILIAL 17	ACTORS	<u> </u>	Tota	LEvon	nuboro			
Proper	ty — (use original cost)	Beginning of taxab		awaii Total Everyw  End of taxable year Beginning of taxable year						End of taxable year			
	ty — (use original cost)	999999999			999999.						99999.00		
Land		999999999		999999999.00 999999999.								1	
	gs	999999999			999999.		9999999					99.00	1
Loans _	ard receivables	99999999			999999.		99999999					99.00	1
	old interests*	33333333	, , , ,		999999.		<del>, , , , , , , , , , , , , , , , , , , </del>	<u> </u>		999999999.00			
					999999.							99.00	1
Rented Property* Other Property 99999999000			9.00		999999.		9999999	9 9 N				99.00	1
Other Property 999999999999999999999999999999999999				999999.		9999999					99.00	1	
* Enter net annual rent X 8.				<u> </u>	00   3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i>.</i>	<u> </u>	<u> </u>	<u> </u>	777.00	_	
Enter flot affilial fort A C.			A. In Hawaii B. Everywhere					Per	cent in	Hawaii**	7		
1 Property values (average value of property above)			999999999999999999999999999999999999999					0.0				_	
2 Property factor (line 1, col. A divided by line 1, col. B)											0.	99999 %	6
3 Total compensation					9999999		9999999	199.1	0.0			·	_
4 Payroll factor (line 3, col. A divided by line 3, col. B).								<u> 1</u>		0.	99999 %	6	
5 Total Sales		999999999999999999999999999999999999999							_				
6 Sales factor (line 5, col. A divided by line 5, col. B) .										0.	99999 %	6	
7 Total of factors (add lines 2, 4, and 6)									_			99999 %	
	8 Average of factors (divide line 7 by 3) Enter here and on page 2 line 47												

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