99-9999999

Phone no. ➤ (123) 456-7890

E.I. No.

(REV. 2023)

S CORPORATION INCOME TAX RETURN

	Place QR Code	
	Here	
1		

Preparer's

Information

Firm's name (or

yours if self-employed)

Address and Postal/ZIP Code

12-12 or other tax year beginning 2023

(-	Code ere	and ending $12-12$, 20 , 12					
Нι	ımaı	n Readable	ext here X AMENDED Return (Attach Sch AMD)					
г	_	Name	·	Federal Employer I.	D. No			

Ę	바	Dba or C/C				code shown on federal Form 1120S)		
]}		DBA (R CARE OF XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	999999)	,		
5	5 -	Mailing Add	ress (number and street)	Hawaii Tax I.D. No.				
TANT OF TANK	I	MAIL	NG ADDRESS XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	GE-999	GE-999-999-999-99			
ין'	计	City or tow	State, and Postal/ZIP Code. If foreign address, see Instructions.	Enter the number of	Enter the number of Schedules NS attached to this return			
		CITY	OR TOWN STATE ZIP CODE XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	attached to this return	1	99999999		
_	Ch	ock ann	cable boxes: (1) X Initial Return (2) X Final Return (3) X	S Floation Tormin	actio	n or Povocation		
	(-	4) X N	ame Change (5) X IRS Adjustment (6) X Electing PTE (Attach Sch PTE)	(7) X Upper-T	ier P	TE (Attach Sch PTE-U)		
	ls t	he corpo	ation electing to be an S corporation beginning with this tax year?			X Yes X No		
	Ηον	w many	nonths in 2023 was this corporation in operation? 99 Was this corporation in o	peration at the end	of 2	2023? X Yes X No		
			ION: Include only trade or business income and expenses on lines 1a through 20.			more information.		
		1 a	Gross receipts or sales (see Instructions)	999999999				
2			Returns and allowances					
ַן בַּ	╝		Line 1a minus line 1b		10			
1	5		t of goods sold (Schedule A, line 8)		2	0000000000		
	2		ss profit (line 1c minus line 2)		3	000000000		
; -	7		gain or (loss) from Schedule D-1, Part II, line 19 (attach Schedule D-1)		4			
3			er income (see Instructions) (attach schedule)		5	0000000000		
-	╀		FOTAL income (loss) — Add lines 3 through 5 and enter here		7			
2			npensation of officers		8	000000000		
5			airs and maintenance		9			
5	1		debts (see Instructions)		10	0000000000		
		11 Re	·		1			
و ا	- 1		es and licenses (attach schedule)		12	000000000		
	2 1		rest		1:	99999999999		
5	5 2	14 De	reciation from federal Form 4562 not claimed elsewhere on return (see Instructions)		14	99999999999		
01401701010	3 1	15 De	letion (Do not deduct oil and gas depletion. See Instructions.)		1	99999999999		
1	뷥	16 Ad	ertising		10	_		
	1	1 7 Per	sion, profit-sharing, etc. plans		17			
	1		oloyee benefit programs		18			
	1	19 Oth	er deductions (attach schedule)		19			
	2	20	FOTAL deductions — Add lines 7 through 19 and enter here		20			
′	12		nary income (loss) from trade or business activities — line 6 minus line 20 (To Sch. K, lin		2			
DECLARATION: I declare, under the penalties set forth in section 231-36, HRS, that this return (including any accompanying schedules or statement by me and, to the best of my knowledge and belief, is true, correct, and complete, made in good faith, for the taxable year stated, pursuant to the Hawaii Incomplete, HRS. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. 12-12-12 NAME AND TI								
2.	20		12-12-12	NAME	AN	ID TITLE XXXX		
U	ומ	>	Signature of officer Date		name and title of officer			
Signature of officer May the Hawaii Department of Taxation discuss this return with the preparer shown below? (See page 3 of the Instructions) This designation does not replace Form N-848, Power of Attorney.								
r			Preparer's Signature Date	a		PTIN		
			DDDDDDDD NAME VVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVVV	Check if	\mathbf{v}	▶PREP ID NO X		
- 1 F	Paid	ŀ	Print Preparer's Name PREPARERS NAME XXXXXXXX IZ-IZ-I	self-employed	Δ	LIVEL IN NO V		

FIRMS NAME AND ADDRESS XXXXXXXXX

FIRMS NAME AND ADDRESS

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Federal Employer Identification Number
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Hum	an Rea	dable text here							
	22	a Excess net passive income tax (attach schedule(s))							
		b Tax from Schedule D (Form N-35), line 21	1						
		c Number of N-4's attached 99999 Taxes withheld on attached N-4's 22c 9999999999999999999999999999999999							
		d LIFO recapture tax							
		e Interest due under look-back method							
က		f Pass-through entity tax (attach Schedule PTE) (see instructions) 22f 999999999999999999999999999999999							
z		g Add lines 22a, 22b, 22c, 22d, 22e, and 22f	22g	99999999999					
Ĭ	23	a 2022 overpayment credited to 2023							
PAYMENTS		b 2023 estimated tax payments from N-201Vs 999999 and N-288As 99999 23b 99999999999							
∞ఠ		c Payments with extension							
TAX		d Add lines 23a, 23b, and 23c	23d	99999999999					
F	24	Estimated tax penalty. (see Instructions) Check if Form N-220 is attached	24	99999999999					
	25	OVERPAYMENT (If line 23d is larger than the total of lines 22g and 24), enter AMOUNT OVERPAID	25	9999999999					
	26	Enter amount of line 25 you want Credited to 2024 estimated tax > 26a \$_99999999 Refunded >	26b	99999999999					
	27	TAX DUE (If the total of lines 22g and 24 is larger than line 23d) enter the amount due	27	9999999999					
_	28	AMOUNT OF PAYMENT (see Instructions)	28	99999999999					
$z \supseteq $	29	Amount paid (overpaid) on original return — AMENDED RETURN ONLY	29	99999999999					
_	30	BALANCE DUE (REFUND) with amended return (See Instructions)	30	99999999999					
•		dule A Cost of Goods Sold (See Instructions for Schedule A)		99999999999					
	1	Inventory at beginning of year	2	99999999999					
	2	Cost of labor	3	99999999999					
	3 4	Additional IRC section 263A costs (see federal Instructions and attach a schedule)	4	99999999999					
	5	Other costs (attach schedule)	5	99999999999					
	6	Total—Add lines 1 through 5	6	99999999999					
	7	Inventory at end of year.	7	99999999999					
	8	Cost of goods sold—Line 6 minus line 7. (Enter here and on page 1, line 2)	8	99999999999					
	9								
	•	(i) X Cost as described in Treasury Regulations section 1.471-3.							
		(ii) X Lavan of and a manifest or density of in Transport Density of 474 A (and Instructions)							
		(iii) X Other (specify method used and attach explanation) ➤ METHOD USED XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	XXXX	XXXXXXXXXXXX					
		b Check if there was a writedown of subnormal goods as described in Treasury Regulations section 1.471-2(c)		X					
		c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach federal Form	970) .	X					
		d If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of	ı	1					
		closing inventory computed under LIFO	9d	9999999999					
		e Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the corporation	n?	X Yes X No					
		f Was there any change in determining quantities, cost or valuations between opening and closing inventory?		X Yes X No					
		If "Yes," attach explanation.							
S	che	dule B Other Information							
	1	Check method of accounting: a X Cash b X Accrual c X Other (specify) ▶ OTHER XXXX		XXX_					
	2	a Date of incorporation $12-12-1212$ b Date business began in Hawaii $12-12-1$		010					
		c Under laws of LAWS OF XXXXXXXX d Date of federal election as an S corporation $12-1$							
	3	Refer to the listing of Business Activity Codes at the end of the federal Instructions for Form 1120S and state you Business Activity > BUSINESS ACTIVITY XX ; Product or service > PRODUCT OR S	ır princ E.RW	ipal: LCE					
	4	Did the corporation at the end of the tax year own, directly or indirectly, 50% or more of the voting stock of a domestic							
		corporation? (For rules of attribution, see IRC section 267(c).) If "Yes" attach a schedule showing: (a) name, add		V Van X Na					
	F	and employer identification number (b) percentage owned, and (c) if 100% owned, was QSSS election made?		A Yes A NO					
	5	Enter the number of shareholders in the corporation at the end of the tax year who are: residents of Hawaii 9999999999999999999999999999999999							
	6	Did the corporation derive income from sources outside Hawaii which is not includable in the Hawaii return?		X Vac X Na					
	7	If the corporation: (1) was a C corporation before it elected to be an S corporation or the corporation acquired at							
	•	determined by reference to its basis (or the basis of any other property) in the hands of a C corporation, and (2)							
		(defined by IRC section 1374(d)(1)) in excess of the net recognized built-in gain from prior years, enter the net u by net recognized built-in gain from prior years $\dots \dots \dots$		-					

Place QR Code Here

Name as shown on return

NAME XXXXXXXXXXXXXXXXXXXXXXXXXXXX

Federal Employer Identification Number

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	Sch	edule K Shareholders' Pro Rata Share Items	b. Attributable to Hawaii		c. Attributable Elsewhere
	1	Ordinary income (loss) from trade or business activities (page 1, line 21)	99999999999	1	99999999999
	2	Net income (loss) from rental real estate activities (attach federal Form 8825)	99999999999	2	99999999999
	3 a	Gross income from other rental activities	99999999999	3a	99999999999
ŝ	b	Expenses from other rental activities (attach schedule)	99999999999	3b	99999999999
Income (Losses)	c	Net income (loss) from other rental activities. Line 3a minus line 3b	99999999999	3c	99999999999
ĕ	4	Interest income	99999999999	4	99999999999
) e	5	Ordinary dividends	99999999999	5	99999999999
티	6	Royalty income	99999999999	6	99999999999
ŭ	7	Net short-term capital gain (loss) (Schedule D (Form N-35))	99999999999	7	99999999999
_	8	Net long-term capital gain (loss) (Schedule D (Form N-35))	99999999999	8	99999999999
	9	Net gain (loss) under IRC section 1231 (attach Schedule D-1)	99999999999	9	99999999999
	10	Other income (loss) (attach schedule)	99999999999	10	99999999999
ေ	11	Charitable contributions (attach schedule)	999999999999	11	999999999999
Deductions	12	IRC section 179 expense deduction (attach federal Form 4562)	99999999999	12	999999999999
Jnc	13	Deductions related to portfolio income (loss) (attach schedule)	99999999999	13	999999999999
Dec	14	Other deductions (attach schedule)	99999999999	14	99999999999
Ŧ	15 a	Interest expense on investment debts paid or accrued in 2023	999999999999	15a	99999999999
Investment Interest	b	(1) Investment income included on lines 4, 5, and 6, above	99999999999	15b(1)	999999999999
Inve		(2) Investment expenses included on line 13, above	99999999999	15b(2)	999999999999
\neg	16 a	Fuel Tax Credit for Commercial Fishers (attach Form N-163)	999999999999	16a	
	ı	Total cost of property qualifying for the Capital Goods	333333333333		
		Excise Tax Credit (See Instructions)	999999999999	16b	
	l c	Amounts needed to claim the Enterprise Zone Tax Credit (attach Form N-756).	See N-756A	16c	
	ı	Hawaii Low-Income Housing Tax Credit (attach Form N-586)	99999999999	16d	
		Credit for Employment of Vocational Rehabilitation Referrals (attach Form N-884)	99999999999	16e	
		Motion Picture, Digital Media, and Film Production			
		Income Tax Credit (attach Form N-340)	999999999999	16f	
S	ا	Credit for School Repair and Maintenance (attach Form N-330)	99999999999	16g	
dit	_	Renewable Energy Technologies Income Tax Credit (attach Form N-342)	999999999999	16h	
Credits		Important Agricultural Land Qualified Agricultural Cost Tax Credit (attach Form N-344)	999999999999	16i	
	li	Tax Credit for Research Activities (attach Form N-346)	999999999999	16j	
	ĺk	Historic Preservation Income Tax Credit (attach Form N-325)	99999999999	16k	
		Renewable Fuels Production Tax Credit for Years After 12/31/21 (attach Form N-360)	99999999999	161	
		n Pass-Through Entity Tax Credit (attach Schedule PTE and/or PTE-U)	999999999999	16m	
	ı	Hawaii income tax withheld on Forms N-288A (See Instructions)	999999999999	16n	
	ı	Total Hawaii income tax withheld on Forms N-4	999999999999	160	
		Net income tax paid by the S corporation to states which do not recognize the			
		corporation's "S" status. Identify state(s)		16p	99999999999
\dashv	(Att	ach a separate schedule if more space is needed for any item.)			
	17	Total property distributions (including cash) other than dividend distributions			
	''	reported on line 22, below. Date of Distribution12-12-1212	999999999999	17	99999999999
	18	Tax exempt interest income	999999999999	18	999999999999
Other Items	19	Other tax exempt income.	999999999999	19	999999999999
	20	Non-deductible expenses	999999999999	20	999999999999
. Ite	21	Other items and amounts not included on lines 1 through 20, above, that are	777799999999		
her	١	required to be reported separately to shareholders (attach schedule)	999999999999	21	99999999999
5	22	Total dividend distributions paid from accumulated earnings and profits	999999999999	22	999999999999
	23	Income (loss) — Combine lines 1 through 10. From the result, subtract the sum	<u> </u>		<i> </i>
	ا_ر	of lines 11 through 15a	00000000000	23	99999999999
	24	Corporate adjustments to income attributable to Hawaii (attach schedule)	999999999999	24	
	25	Interest penalty on early withdrawal of savings	<u> </u>	25	000000000000
		interest penalty on early withdrawal or saviligs			999999999999
				FO	RM N-35 (REV. 2023)

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

Federal Employer Identification Number

NAME

99-9999999

Schedules L, M-1, and M-2 Attach a copy of page 4 of federal Form 1120S to this return. Attach Sch. M-3, if applicable. List of Shareholders (Attach a separate sheet if more space is needed)

Name and Address	SSN or FEIN	No. of shares owned at all times during the year	State of Residence	Year Sch. NS filed, if any (Indicate if revoked)	Amount of Payment on Form N-4 attached
1 NAME AND ADDRESS XXXXX					
NAME AND ADDRESS XXXXX	99999999999	99999999	STATE XXX	99999999	999999999
NAME AND ADDRESS XXXXX 2 NAME AND ADDRESS XXXXX					
NAME AND ADDRESS XXXXX					
NAME AND ADDRESS XXXXX	99999999999	99999999	STATE XXX	999999999	999999999
3 NAME AND ADDRESS XXXXX					
NAME AND ADDRESS XXXXX	99999999999	99999999	STATE XXX	99999999	999999999
NAME AND ADDRESS XXXXX			DIAIE VVV		

Schedule O Apportionment of Income (See Attributable to Hawaii in the Instructions.)

999999999999 Ordinary income (loss) from trade or business activities (From page 1, line 21)....... 1 999.99999 2 999999999999

Business income apportioned to Hawaii (line 1 multiplied by line 2) (To Schedule K, line 1, col. b) 999999999999 Business income apportioned elsewhere (line 1 minus line 3). (To Schedule K, line 1, col. c).

Are the totals of columns b and c, Schedule K, lines 2 through 6, and the amounts shown on Schedule P, column B, the same as those X Yes X reported in returns or reports to other states under the Uniform Division of Income for Tax Purposes Act? .

Schedule P Computation of Apportionment Factors (See Attributable to Hawaii in the Instructions.)

	In Hawaii		Total Everywhere		
Property — (use original cost)	Beginning of taxable year	End of taxable year	Beginning of taxable year	End of taxable year	
Land	999999999999	999999999999	999999999999	999999999999	
Buildings	999999999999	999999999999	999999999999	999999999999	
Inventories	999999999999	999999999999	999999999999	999999999999	
Leasehold interests*		999999999999		999999999999	
Rented Property*		999999999999		999999999999	
Other Property	999999999999	999999999999	999999999999	999999999999	
Total	999999999999	999999999999	999999999999	9999999999999	

* Enter net annual rent X 8.

	Compute all percentages to 5 decimal places (0.00000%)	A. In Hawaii	B. Everywhere	
1	Property values (average value of property above)	99999999999	99999999999	
2	Property factor (line 1, col. A divided by line 1, col. B)		999.9	9999 %
3	Total compensation	99999999999	99999999999	
4	Payroll factor (line 3, col. A divided by line 3, col. B)		999.9	9999 %
5	Total sales	99999999999	99999999999	70
6	Sales factor (line 5, col. A divided by line 5, col. B)		999.9	9999 %
7	Total of factors (add lines 2, 4, and 6)		000 01	9999 %
8	Average of factors (see instructions) (To Schedule O, line 2)			9999 %

Designation of Tax Matters Person (See Instructions.)

Enter below the shareholder designated as the tax matters person (TMP) for the tax year of this return, if one has been designated:

Name of designated TMP

NAME OF DESIGNATED TMP XXXXXXXXXXXXXXX

Identifying number of TMP 99999999999999

Address of designated TMP ADDRESS OF