

**STATE OF HAWAII
DEPARTMENT OF TAXATION**



**General Information
and Key From Image Specifications
for
Form F-1 (Rev. 2015)**

Contact Information

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Address:**

tax.hawaii.gov/vendor/

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

FORM F-1 (Rev. 2015)

General Information and Key From Image Specifications

This document provides software vendors with the requirements for reproducing Form F-1. Form F-1 requires manually keying data from the image or KFI. A 1D barcode must be present on each page of the form.

The form must be an exact replica of the official version of the form with respect to layout, data dots, shading and content.

Substitute KFI 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**

- Photocopies of the form must not be submitted to the Department for processing. This will distort the 1D barcode.

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. Variable Data

- All variable data fields must utilize 10 pt Courier font, and all variable text data must be in uppercase letters. Text labels must not touch variable data.

4. Testing and Approval of the KFI Form

- A review of the form will be done based on processing specifications. It is assumed that there are no spelling errors, incorrect or missing words, missing lines, etc.
- 1 test sample is required to be submitted for testing of the barcodes and must be an original. Photocopies, fax submissions, etc. will not be accepted.
- 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. 2015) cannot be filed until 2016.

KEY FROM IMAGE (KFI) SPECIFICATIONS**1. Layout**

- The form must be an exact replica of the official Form F-1 with respect to layout, data dots, shading, and content.

2. Hawaii Vendor I.D. Number

- Print your 2-digit Hawaii Vendor I.D. Number preceded with "ID NO" label at bottom middle of the form for each page. Exact placement is not required. For suggested alternate positions, see the attached exhibit.
- See our software vendor website for the Hawaii Vendor I.D. Number Listing. If your company is not listed, please contact the Forms Coordinator.

3. Barcode

- A 1D barcode is specific to the form. The property of the 1D symbology barcode uses 3 of 9 (Code 39).
- Placement of the barcode is as follows:
Page 1:
1-1/16 inch from top edge of form and 1/2 inch from left edge of form

Pages 2 through 4:

11/16 inch from top edge of form and 1/2 inch from left edge of form

- Height of the barcode is .5 inch.
- Length of the barcode is approximately 2 inches.
- Density of narrow bar width is set to 20 mils with resolution set to 300 dpi.
- Narrow to Wide Ratio is set to 2.
- A ¼ inch minimum clearance (blank space) must surround the barcode with the exception of the text required to be printed underneath the barcode.
- DO NOT stretch the barcode image.
- The required barcode is VBT151 for page 1:



VBT151

The required barcode is VBT152 for page 2:



VBT152

The required barcode is VBT153 for page 3:



VBT153

The required barcode is VBT154 for page 4:



VBT154

The barcode includes the form number code (VB), type of form (T), form year (15), and page number (1), (2), (3), or (4). There are no hyphens.

- Use of the Department of Taxation's JPEG file of the barcode is preferable. The JPEG files can be found at our software vendor website.
- DO NOT use Windows Metafile Format (wmf). This format causes a very low read rate by the Department's IBML scanners.

DEPARTMENT OF TAXATION
INCOME TAX RETURN

THIS SPACE FOR DATE RECEIVED STAMP

1-1/16 inches from the top edge of the form

1/2 inch from the left edge of the form



BANKS, OTHER FINANCIAL CORPORATIONS, AND SMALL BUSINESS INVESTMENT COMPANIES AS OF JANUARY 1, 2016

(Based on income for calendar year 2015 or fiscal year beginning on _____, 2015 and ending _____, 20____)

VBT151

Return (Attach Sch. AMD) NOL Carryback

Hawaii Tax I.D. Number

W _____ - _____

Federal Employer I.D. No.

PRINT OR TYPE

Name

Main Business Activity

DBA (if any)

Date Business Began in Hawaii

Address (number and street)

Date of Incorporation

City, State, and Postal/ZIP Code

State or Foreign Country of Incorporation

CHECK BOX, IF APPLICABLE:

- First year return
- Final return

- Second year return
- Election to pay via the Installment Payment Method

Placement for Hawaii Vendor ID Number

→ ID NO 12

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 _____ Less: Returns and allowances _____	1			
	2.	Less: Cost of goods sold and/or operations (Attach schedule)	2			
	3.	Gross Profit (line 1 minus line 2)	3			
	4.	Dividends (Schedule C).	4			
	5.	Interest on government obligations	Gross Amount of Interest	5		
			Less: Amortizable Bond Premium	6		
	6.	Other interest	6			
	7.	(a) Rents _____ Plus 7(b) Royalties _____, Sum ▶	7(c)			
	8.	(a) Net capital gains (from federal Schedule D) (See Instructions)	8(a)			
		(b) Ordinary gain or loss (from federal Schedule 4797)	8(b)			
9.	Other income (Attach schedule)	9				
10.	TOTAL INCOME — Add lines 3 through 9. Enter here and on page 2, line 10(a)	10				
TAX	70.	TOTAL TAX from page 3, line 69	70●			
	71.	Total Refundable Credits. Enter the result from page 4, Schedule I, line 3	71●			
	72.	Line 70 minus line 71. If line 72 is zero or less, see Instruction XV	72			
	73.	Total Nonrefundable Credits from Schedule H, line 6	73●			
	74.	Capital Infrastructure Tax Credit (Attach Form N-348)	74●			
	75.	Line 72 minus the sum of lines 73 and 74 (See Instruction XVI)	75			
	76.	Payment with extension (Attach Form N-755)	76●			
	77.	Tax installment payments (See Instruction XIV)	77●			
	78.	Add lines 76 and 77 and enter result	78			
	79.	TAX DUE (Line 75 minus line 78. If line 78 is greater than line 75, skip line 80 and go to line 81)	79●			
	80.	Enter amount paid with this return	80●			
	81.	OVERPAYMENT (If line 78 is larger than line 75) (See Instruction XVIII) enter AMOUNT OVERPAID ▶	81●			
	82.	Enter amount of line 81 you want Credited to 2017 installment payments ▶	82●			
	83.	Amount to be REFUNDED TO YOU (line 81 minus line 82) REFUND ▶	83			
	Amended Return	84.	Amount paid (overpaid) on original return — AMENDED RETURN ONLY (See Instructions. Attach Sch. AMD)	84		
85.		BALANCE DUE (REFUND) with amended return (See Instructions. Attach Sch. AMD)	85			

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 _____ Title _____

Paid Preparer's Information

Preparer's Signature, and Print Preparer's Name _____ Date _____ Check if self-employed Preparer's identification number _____
 Firm's name (or yours if self-employed), address, and Postal/ZIP Code _____ Federal E.I. No. _____ Phone No. _____

11/16 inches from the top edge of the form

Placement for Hawaii Vendor ID Number



VBT152

Name as shown on return

Federal Employer Identification Number

1/2 inch from the left edge of the form

TOTAL INCOME — from page 1, line 10

10(a)		
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DEDUCTIONS

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

11		
12		
13		
14(c)		
15(c)		
16		
17		
18		
19		
20		
21(a)		
21(b)		
22		
23		
24		

STATE ADJUSTMENTS

- ADD:
- 25. Taxable dividends from Schedule C, line 10
 - 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))
(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))
 - 27. Amount of deduction for bad debts taken on line 14(a). (See Instructions IV(b) and VII)
 - 28. Other additions required by law — submit schedule. (See Instruction IV(b))
 - 29. Total of lines 24 through 28

25		
26(a)		
26(b)		
27		
28		
29		

- DEDUCT:
- 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))
 - 32. Other deductions authorized by law — submit schedule. (See Instructions VI(b) and X(b))
 - 33. Total of lines 30 through 32
 - 34. Net income after Hawaii adjustments (line 29 minus line 33)

30		
31		
32		
33		
34		

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
 - 36. Nonbusiness interest (Attach schedule)
 - 37. Royalties from nonbusiness assets (Attach schedule)
 - 38. Net profit from nonbusiness rental property
 - 39. Net gain from nonbusiness assets (Attach schedule)
 - 40. Other adjustments (Attach schedule)
 - 41. Total (lines 35 to 40, inclusive)
 - 42. Balance (line 34 minus line 41)

35		
36		
37		
38		
39		
40		
41		
42		

- ADD:
- 43. Net loss from nonbusiness rental property
 - 44. Net loss from nonbusiness assets (Attach schedule)
 - 45. Total of lines 43 and 44
 - 46. Business income from sources within and without Hawaii (line 42 plus line 45)
 - 47. Allocate _____% (from Schedule P, line 8), as apportionable income attributable to Hawaii and subject to tax. (Multiply line 46 by the %)

43		
44		
45		
46		
47		

11/16 inches from the top edge of the form

Placement for Hawaii Vendor ID Number



VBT153

Name as shown on return

Federal Employer Identification Number

1/2 inch from the left edge of the form

CLASSIFICATION OF APPORTIONABLE BUSINESS INCOME SUBJECT TO TAX

Table with 3 columns: Line number, Description, and Amount. Rows 48-50.

INCOME WHOLLY ATTRIBUTABLE TO HAWAII SUBJECT TO TAX

Table with 3 columns: Line number, Description, and Amount. Rows 51-59.

TAX COMPUTATION

Table with 3 columns: Line number, Description, and Amount. Rows 60-69.

Schedule C INCOME FROM DIVIDENDS (Classified for Hawaii Purposes)

Table with 5 columns: 1. Name of declaring corporation, 2. National Banking Associations, 3. Received from an affiliate, 4. Received by a small business investment co., 5. All other dividends.

Table with 2 columns: Line number, Description, and Amount. Rows 6-10.

11/16 inches from the top edge of the form

Placement for Hawaii Vendor ID Number



VBT154

Name as shown on return Federal Employer Identification Number

1/2 inch from the left edge of the form

E COMPENSATION OF OFFICERS

Table with 6 columns: 1. Name and address of officer, 2. Official title, 3. Time devoted to business, 4. Common, 5. Preferred, 6. Amount of compensation. Includes a total compensation line at the bottom.

Schedule F BAD DEBTS

Table with 8 columns: 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, 6. Gross Amount Added to Allowance, 7. Amount Charged Against Allowance, 8. Balance of Allowance.

Schedule H NONREFUNDABLE CREDITS

Table with 6 columns: 1. Carryover of the Credit for Energy Conservation, 2. Low-income Housing Tax Credit, 3. High Technology Business Investment Tax Credit, 4. Carryover of the Renewable Energy Technologies Income Tax Credit, 5. Renewable Energy Technologies Income Tax Credit for Systems Placed in Service on or after July 1, 2009, 6. Total Nonrefundable Credits.

Schedule I REFUNDABLE CREDITS

Table with 3 columns: 1. Capital Goods Excise Tax Credit, 2. Renewable Energy Technologies Income Tax Credit for Systems Placed in Service on or after July 1, 2009, 3. Total Refundable Credits.

Schedule P COMPUTATION OF APPORTIONMENT FACTORS

Table with 5 columns: Property (use original cost), In Hawaii (Beginning of taxable year, End of taxable year), Total Everywhere (Beginning of taxable year, End of taxable year). Rows include Land, Buildings, Loans, Credit card receivables, Leasehold interests*, Rented Property*, Other Property, Total.

* Enter net annual rent X 8.

Table with 2 columns: A. In Hawaii, B. Everywhere

Table with 8 rows: 1. Property values, 2. Property factor, 3. Total compensation, 4. Payroll factor, 5. Total receipts, 6. Receipts factor, 7. Total of factors, 8. Average of factors.