

**STATE OF HAWAII
DEPARTMENT OF TAXATION**



**FORMS APPROVAL
DEADLINE IS
DECEMBER 31, 2011**

**General Information
and Key From Image Specifications
for
Form N-20 (Rev. 2011)**

Contact Information

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Technical Section
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**Hawaii Software Vendor Website
Address:**

www.hawaii.gov/tax/vendor/vendor.htm

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

FORM N-20 (Rev. 2011)

General Information and Key From Image Specifications

This document provides software vendors with the requirements for reproducing Form N-20. Form N-20 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

- The deadline to submit substitute forms for approval is December 31, 2011.
- 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.

KEY FROM IMAGE (KFI) SPECIFICATIONS

1. Layout

- The form must be an exact replica of the official Form N-20 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 top of page 1 and bottom middle of page 2. Exact placement is not required. For suggested positions, see the attached exhibit.
- See www.hawaii.gov/tax/vendor/vendor.htm for the Hawaii Vendor I.D. Number Listing. If your company is not listed, please contact the Forms Coordinator.

3. Barcode

- A 1-D barcode is specific to the form. The property of the 1-D 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

Page 2:

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 PBT111 for page 1:



PBT111

The required barcode is PBT112 for page 2:



PBT112

The barcode includes the form number code (PB), type of form (T), form year (11), and page number (1) or (2). 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.

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

INCOME TAX RETURN OF INCOME For calendar year 2011

or other tax year beginning _____, 2011 and ending _____, 2011



1/2 inch from the left edge of the form

PBT111

ID NO 12

Placement for Hawaii Vendor ID Number

• PRINT OR TYPE	Name	A Federal Employer I.D. No.
	Address (number and street)	B Business Code No. (from federal Form 1065)
	City or town, State, and Postal/ZIP Code. If foreign address, see Instructions.	C Principal business activity
		D Hawaii Tax I.D. No.

E Check applicable boxes: (1) Initial Return (2) Final Return (3) Change in Address (4) Amended Return (Attach Sch AMD)

FOR LINES 1 - 9, ENTER AMOUNTS FROM COMPARABLE LINES ON FEDERAL FORM 1065

ORDINARY INCOME (LOSS) FROM TRADE OR BUSINESS ACTIVITIES	1 a Merchant card and third-party payments (including amounts reported on Form(s) 1099-K)	1a●		00	
	b Gross receipts or sales not reported on line 1a	1b●		00	
	c Total. Add lines 1a and 1b	1c●		00	
	d Returns and allowances plus any "cash back" included on line 1a	1d●		00	
	e Line 1c minus line 1d	1e●		00	
	2 Cost of goods sold	2●		00	
	3 Gross profit (line 1e minus line 2).	3●		00	
	4 Ordinary income (loss) from other partnerships, estates, and trusts	4		00	
	5 Net farm profit (loss) (attach federal Schedule F).	5		00	
	6 Net gain (loss) from federal Form 4797, Part II, line 17.	6		00	
	7 Other income (loss)	7●		00	
	8 TOTAL income (loss)	8●		00	
	9 TOTAL deductions	9●		00	
	10 Ordinary income (loss) from trade or business activities before Hawaii adjustments (line 8 minus line 9)	10●		00	
	ADD:				
	11 a Deductions allowable for federal tax purposes but not allowable or allowable only in part for Hawaii tax purposes (attach schedule)	11a		00	
b Net gain or (loss) from Schedule D-1, Part II, line 19.	11b●		00		
c The portion of the Hawaii jobs credit claimed applicable to current year new employees	11c		00		
d Other additions (attach schedule)	11d		00		
12 Total of lines 11a, 11b, 11c, and 11d	12		00		
13 Total of lines 10 and 12	13		00		
DEDUCT:					
14 a Net gain or (loss) from federal Form 4797, Part II, line 17 (line 6 above).	14a		00		
b Federal employment credits	14b		00		
c Other deductions (attach schedule)	14c		00		
15 Total of lines 14a, 14b, and 14c.	15		00		
16 Ordinary income (loss) from trade or business activities for Hawaii tax purposes (line 13 minus line 15)	16		00		

Please Sign Here **DECLARATION** 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 Tax Law, Chapter 235, HRS.

Signature of general partner or limited liability company member _____ Date _____

★ May the Hawaii Department of Taxation discuss this return with the preparer shown below? Yes No
(See page 2 of the Instructions) This designation does not replace Form N-848, Power of Attorney

Paid Preparer's Information	Preparer's Signature Print Preparer's Name	Date	Check if self-employed <input type="checkbox"/>	Preparer's Tax I. D. 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



Partnership Name

Federal Employer I.D. No.

PBT112

1/2 inch from the left edge of the form

K

PARTNERS' Pro Rata Share Items

b. Attributable to Hawaii

c. Attributable Everywhere

Main table with columns for Income (Losses), Deductions, Credits, Investment Interest, Other Items, and Analysis. Rows include items like Ordinary income, Charitable contributions, and various tax credits.

Analysis table with columns: (a) Corporate, (b) Individual (i. Active, ii. Passive), (c) Partnership, (d) Exempt organization, (e) Nominee/Other. Rows for General Partners and Limited Partners.

Placement for Hawaii Vendor ID Number

ID NO 12