



FORM N-13 (Rev. 2012)

STATE OF HAWAII DEPARTMENT OF TAXATION

Individual Income Tax Return RESIDENT 2012

JDF121

(FOR USE BY TAXPAYERS WHO HAVE LESS THAN \$100,000 TAXABLE INCOME, DO NOT ITEMIZE DEDUCTIONS, AND DO NOT CLAIM ADJUSTMENTS TO INCOME)

AMENDED Return First Time Filer Address or Name Change

Empty boxes for additional information

Personal information section including name, address, and social security numbers.

HAWAII ELECTION CAMPAIGN FUND section with Yes/No options.

FILING STATUS section with options for Single, Married, Head of household, etc.

EXEMPTIONS section including dependents and total exemptions claimed.

INCOME section with a table for wages, interest, dividends, and taxable income.

• ATTACH CHECK OR MONEY ORDER AND FORM N-200V HERE • ATTACH COPY B OF FORM HW-2 HERE •

USE STATE LABEL OTHERWISE PRINT OR TYPE

FILING STATUS

EXEMPTIONS

INCOME

Continue on other side

Continue on other side



Name(s) as shown on return

Social Security Number(s)

JDF122

<b>PART I Interest Income</b> If you received more than \$1,500 in interest, list the names of the payers and the amounts of interest on the lines below. See page 11 of the Instructions for what interest to report.	<b>PART II Ordinary Dividends</b> If you received more than \$1,500 in ordinary dividends, list the names of the payers and the amounts of the dividends on the lines below. See page 11 of the Instructions for a definition of ordinary dividends.
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Name of Payer	Amount	Name of Payer	Amount
1		1	
<b>2 Total interest income.</b> Enter here and on Form N-13, line 8 (Whole dollars only) .....		<b>2 Total ordinary dividends.</b> Enter here and on Form N-13, line 9 (Whole dollars only) .....	
<b>00</b>		<b>00</b>	

<b>TAX PAYMENTS AND CREDITS</b>	<b>16</b> Tax from Tax Table ..... <b>Tax</b> ▶	<b>16●</b>	<b>00</b>
	<b>17</b> Refundable Renewable Energy Technologies Income Tax Credit (attach Form N-342) Check type of energy system: ● <input type="checkbox"/> Solar ● <input type="checkbox"/> Wind.....	<b>17●</b>	<b>00</b>
	<b>18</b> Refundable Food/Excise Tax Credit (attach Schedule X) <b>DHS, etc. exemptions</b> ● _____ <b>Federal AGI</b> ● _____	<b>18●</b>	<b>00</b>
	<b>19</b> Credit for Low-Income Household Renters (attach Schedule X) .....	<b>19●</b>	<b>00</b>
	<b>20</b> Credit for Child and Dependent Care Expenses (attach Schedule X) .....	<b>20●</b>	<b>00</b>
	<b>21</b> Credit for Child Passenger Restraint System(s) (attach a copy of the invoice).....	<b>21●</b>	<b>00</b>
	<b>22</b> Add lines 17 through 21 .....	<b>Total Refundable Credits</b> ▶	
	<b>23</b> Line 16 minus line 22. If line 23 is zero or less, see Instructions. ....	<b>22●</b>	<b>00</b>
		<b>23●</b>	<b>00</b>
	<b>24</b> Carryover of the Nonrefundable Renewable Energy Technologies Income Tax Credit (For Systems Installed and Placed in Service Before July 1, 2009) (attach Form N-323) .....	<b>24●</b>	<b>00</b>
<b>25</b> Nonrefundable Renewable Energy Technologies Income Tax Credit (attach Form N-342) Check type of energy system: ● <input type="checkbox"/> Solar ● <input type="checkbox"/> Wind .....	<b>25●</b>	<b>00</b>	
<b>26</b> Add lines 24 and 25 .....	<b>Total Nonrefundable Credits</b> ▶		
<b>27</b> Line 23 minus line 26 .....	<b>26●</b>	<b>00</b>	
	<b>27●</b>	<b>00</b>	
<b>28</b> Total Hawaii income tax withheld (attach W-2s) (see page 14 of the Instructions for other attachments) ..	<b>28●</b>	<b>00</b>	
<b>29</b> Amount paid with extension.....	<b>29●</b>	<b>00</b>	
<b>30</b> Add lines 28 and 29 .....	<b>Total Payments</b> ▶		
	<b>30●</b>	<b>00</b>	

<b>REFUND OR AMOUNT YOU OWE</b>	<b>31</b> If line 30 is larger than line 27, enter the amount <b>OVERPAID</b> (line 30 minus line 27) (see page 14 of the Instructions) .....	<b>31●</b>	<b>00</b>
	<b>32 Contributions to</b> (See page 14 of the Instructions):..... Yourself Spouse		
	<b>32a</b> Hawaii Schools Repairs and Maintenance Fund ..... ● <input type="checkbox"/> \$2 ● <input type="checkbox"/> \$2		
	<b>32b</b> Hawaii Public Libraries Fund..... ● <input type="checkbox"/> \$2 ● <input type="checkbox"/> \$2		
	<b>32c</b> Domestic and Sexual Violence / Child Abuse and Neglect Funds . ● <input type="checkbox"/> \$5 ● <input type="checkbox"/> \$5		
	<b>33</b> Add the amounts of the checked boxes on lines 32a through 32c and enter the total here .....	<b>33●</b>	<b>00</b>
<b>34a</b> Line 31 minus line 33. This is the amount to be <b>REFUNDED TO YOU</b> . If filing late, see page 15 of Instructions ..... ● <input type="checkbox"/> Check here if this refund will ultimately be deposited to a foreign (non-U.S.) bank. Do not complete lines 34 b, c, or d. <b>b</b> Routing number ● _____ <b>c</b> Type: ● <input type="checkbox"/> Checking ● <input type="checkbox"/> Savings <b>d</b> Account number ● _____	<b>34a●</b>	<b>00</b>	
<b>35</b> If line 27 is larger than line 30, enter the <b>AMOUNT YOU OWE</b> (line 27 minus line 30). Send Form N-200V with your payment. Make check or money order payable to the "Hawaii State Tax Collector" .....	<b>35●</b>	<b>00</b>	
<b>36</b> Estimated tax penalty. (See page 15 of Instructions) Do not include on line 31 or 35. Check box if Form N-210 is attached ▶ ● <input type="checkbox"/> .....	<b>36●</b>	<b>00</b>	

<b>AMENDED RETURN</b>	<b>37 AMENDED RETURN ONLY</b> – Amount paid (overpaid) on original return. (See Instructions) (Attach Sch. AMD) ...	<b>37</b>	<b>00</b>
	<b>38 AMENDED RETURN ONLY</b> – Balance due (refund) with amended return. (See Instructions) (Attach Sch. AMD) .	<b>38</b>	<b>00</b>

**DESIGNEE** If designating another person to discuss this return with the Hawaii Department of Taxation, complete the following. This is not a full power of attorney. See page 16 of the Instructions.

Designee's name ▶ \_\_\_\_\_ Phone no. ▶ \_\_\_\_\_ Identification number ▶ \_\_\_\_\_

**DECLARATION** — I declare, under the penalties set forth in section 231-36, HRS, that this return (including 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.

<b>PLEASE SIGN HERE</b>	Your signature _____ Date _____		Spouse's signature (if filing jointly, BOTH must sign) _____ Date _____	
	Paid Preparer's Information		Preparer's identification number	
	Preparer's Signature and date Print Preparer's Name		● <input type="checkbox"/> Check if self-employed ▶ <input type="checkbox"/>	
	Firm's name (or yours if self-employed), Address, and ZIP Code		Federal E.I. No. ▶ _____ Phone No. ▶ _____	