

FORM  
**N-755**  
(REV. 2013)

STATE OF HAWAII — DEPARTMENT OF TAXATION

**APPLICATION FOR AUTOMATIC EXTENSION OF TIME  
TO FILE HAWAII FRANCHISE TAX RETURN (FORM F-1)  
OR PUBLIC SERVICE COMPANY TAX RETURN (FORM U-6)**

Type or Print	Name	<input type="checkbox"/> Extension REJECTED. (See below for reasons.)
	DBA (if any)	Federal Employer Identification Number
	Address (number and street)	Hawaii Tax I.D. No.
	City, State, and Postal/ZIP Code	

**Check type of return to be filed:** ☐ Form F-1 ☐ Form U-6  
(Check here ☐ if you do not have an office or place of business in Hawaii)

- 1** (a) I request an automatic 6-month extension of time to file the franchise or public service company tax return of the entity named above for:  
**calendar year 20** \_\_\_\_\_, **or tax year ending** \_\_\_\_\_, **20** \_\_\_\_\_
- (b) If this tax year is for less than 12 months, check reason:  
☐ Initial return ☐ Final return ☐ Change in accounting period approved ☐ Consolidated return to be filed  
☐ Amended Return ☐ First Year ☐ Second Year ☐ Third Year
- 2** Does this application also cover subsidiaries to be included in a consolidated return? ..... ☐ Yes ☐ No  
If "Yes," attach a list showing the name, address, and Federal Employer Identification Number of each member of the affiliated group of domestic entities.

**3** Total tax liability for the taxable year (You may estimate this amount).....

**NOTE:** You must enter an amount on line 3. If you do not expect to owe tax, enter zero (0) and skip lines 4a, 4b, and 4c.

**4** Are you making the election to pay the tax in:

**4a.** 4 equal installments?..... ☐ Yes ☐ No

**4b.** 12 equal installments (applicable to those whose total tax liability exceeds \$100,000)?..... ☐ Yes ☐ No

**4c.** If line 4a is checked "Yes" — enter 1/4 of line 3 on line 4c.

If line 4b is checked "Yes" — enter 1/12 of line 3 on line 4c.

If "No" is checked for line 4a and 4b — enter the amount of line 3 on line 4c.....

3

4c

Pay amount on line 4c in full. Attach check or money order for full amount payable to "**Hawaii State Tax Collector.**" Write your **Federal Employer Identification Number, the taxable year, and Form N-755** on it. Pay in U.S. dollars. Do not send cash.

Installment Payments. — If you are making installment payments instead of paying the tax in full, use the "Franchise Tax or Public Service Company Tax Installment Payment Voucher" (Form FP-1) to report and pay the remaining amount(s) due.

**REASONS FOR REJECTION OF EXTENSION**

- ☐ 1. The request was not in this office or mailed on or before the date prescribed by law for filing this return.  
☐ 2. Separate requests are required for each type of tax and for each taxpayer involved.  
☐ 3. The tax return was not filed within the time specified by the automatic extension.

## INSTRUCTIONS

**1. Purpose.** — Use this form to ask for an automatic 6-month extension of time to file Form F-1 or Form U-6.

Do not request an automatic extension if you are under a court order to file your return by the regular due date.

The extension will be granted if you complete this form properly, file it on time, pay with it the amount of tax shown on line 4c and meet the conditions indicated in item 7 of the Instructions.

In no case shall the extension be granted for a period of more than six months beyond the due date of the return.

**2. Where to Get Tax Forms.** — Hawaii tax forms, instructions, and schedules may be obtained at any taxation district office or from the Department's website at [tax.hawaii.gov](http://tax.hawaii.gov), or you may contact a customer service representative at:

808-587-4242  
1-800-222-3229 (Toll-Free)

**3. When to File.** — File this application on or before the original due date of the entity's income tax return. If the due date falls on a Saturday, Sunday, or legal holiday file by the next regular workday.

You may file the applicable tax return any time before the 6-month period ends.

**4. Where to File.** — Submit this form to:

HAWAII DEPARTMENT OF TAXATION  
P. O. Box 1530  
Honolulu, Hawaii 96806-1530

**5. How to Fill Out This Form.** — Fill in the spaces with the entity's name, address, Federal Employer Identification Number, and Hawaii Tax I.D. No., if any. Below that indicate the applicable tax form to which the extension relates.

**6. How to Claim Credit for Payment Made With This Form.** — Show the amount paid (line 4c) with this form on the applicable tax return.

**7. Granting of Extension.** — An automatic extension of time for filing a return shall be allowed only upon the following two conditions:

(1) On or before the due date of the return prescribed by the statute, there shall have been paid, through a payment accompanying the application for the extension, an amount equal to the tax payable for the year.

If you are electing to pay the tax in four equal installments, then one-fourth (1/4) of the tax due must accompany this form. If your total tax liability exceeds \$100,000, your tax payments must be made in 12 equal installments beginning with the 10th day of the first month following the close of the taxable year. One-twelfth (1/12) of the tax due instead must accompany this form. If a payment accompanies the application for the extension, the amount of this payment shall be shown on line 4c.

(2) Within the time specified by the automatic extension, the return shall be filed, accompanied by payment of the remaining tax liability.

*If the above conditions are not met, the delinquent penalty and interest will be charged on the tax as if no extension had been granted, i.e., the computation of delinquent penalty and interest will relate back to the due date prescribed by the statute.*

**8. Penalties.** — You may be assessed one or both of the following penalties.

**Late Filing of Return.** — The penalty for failure to file a return on time is assessed on the tax due at a rate of 5% per month, or part of a month, up to a maximum of 25%. If you file and pay a return late, attach a full explanation with the return.

**Failure to Pay After Filing Timely Return.** — The penalty for failure to pay the tax after filing a timely return is 20% of the tax unpaid within 60 days of the prescribed due date. The 60-day period is calculated beginning with the prescribed due date even if the prescribed due date falls on a Saturday, Sunday, or legal holiday.

These penalties are in addition to any interest charged on underpayment or nonpayment of tax.

**9. Interest.** — Interest at the rate of 2/3 of 1% per month, or part of a month, shall be assessed on unpaid taxes and penalties beginning with the first calendar day after the date prescribed for

payment, whether or not that first calendar day falls on a Saturday, Sunday, or legal holiday.

**10. Consolidated Returns.** — If a consolidated return is to be filed, the parent corporation may request an automatic extension for its subsidiaries. In such case, the name, address, and Federal Employer Identification Number of each member of the affiliated group for which the extension is desired must be listed under item 2 on a separate sheet. The filing of this form by a parent corporation is not considered as an exercise of the privilege of making a consolidated return.

**11. Termination of Extension.** — The Director of Taxation may terminate the automatic extension at any time by mailing a notice of termination to the entity or to the person who requested the extension for the entity. The notice will be mailed at least 10 days prior to the termination date designated in the notice.

## SPECIFIC INSTRUCTIONS

We have provided specific instructions for most of the lines on the form. Those lines that do not appear in the Instructions are self-explanatory.

**Line 3.** — Enter the amount of tax you expect to owe for the taxable year.

**Line 4c.** — Enter one-fourth (1/4) of the amount shown in line 3 on line 4c if you have elected to pay the tax due in four equal installments. Section 239-7, HRS, allows the payment of the public service company tax to be made in four equal installments on April 20, June 20, September 20, and December 20. Section 241-5, HRS, allows the payment of the franchise tax due in four equal installments. The first installment shall be paid on or before the twentieth day of the fourth month following the close of the fiscal year (April 20 for calendar year taxpayers). This form has incorporated the payment of the first quarterly installment or the 5th monthly installment for certain taxpayers whose total tax liability exceeds \$100,000 of this tax payable for the taxable year. An extension of time to file your tax return will not extend the time to pay your tax. Therefore, you must pay the amount of tax shown on line 4c in full with this form.