



ID NO 01

**TRANSIENT ACCOMMODATIONS
TAX RETURN**
For periods beginning AFTER December 31, 2017

TA1_I 2022A 01 VID01

Place an "X" in this box ONLY if this is an AMENDED return

PERIOD ENDING

(MM YY)

HAWAII TAX I.D. NO. TA

NAME: _____

Last 4 digits of your FEIN or SSN

PART I — TRANSIENT ACCOMMODATIONS TAX	DISTRICT	Column a GROSS RENTAL OR GROSS RENTAL PROCEEDS	Column b EXEMPTIONS/DEDUCTIONS (Explain on Reverse Side)	Column c TAXABLE PROCEEDS (Column a minus Column b)	
	1.	OAHU	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	MAUI, MOLOKAI, LANAI	<input type="text"/>	<input type="text"/>	<input type="text"/>	2
3.	HAWAII	<input type="text"/>	<input type="text"/>	<input type="text"/>	3
4.	KAUAI	<input type="text"/>	<input type="text"/>	<input type="text"/>	4
					TOTAL FAIR MARKET RENTAL VALUE
PART II — TIMESHARE OCCUPANCY TAX	5.	OAHU DISTRICT	5.	<input type="text"/>	
	6.	MAUI, MOLOKAI, LANAI DISTRICT	6.	<input type="text"/>	
	7.	HAWAII DISTRICT	7.	<input type="text"/>	
	8.	KAUAI DISTRICT	8.	<input type="text"/>	
PART III — TAX COMPUTATION	9.	TOTAL AMOUNT TAXABLE. Add Column c of lines 1 through 4 and lines 5 through 8. Enter result here (but not less than zero).	9.	<input type="text"/>	
	10.	Tax Rate	10.	x0.1025	
	11.	TOTAL TAXES DUE. Multiply line 9 by line 10 and enter the result here. If you did not have any activity for the period, enter "0.00" here	11.	<input type="text"/>	

PART IV — ADJUSTMENTS	12.	Amounts Assessed During the Period... (For Amended Return ONLY)	PENALTY <input type="text"/>	INTEREST <input type="text"/>	12.	<input type="text"/>
	13.	TOTAL AMOUNT. Add lines 11 and 12. (For Amended Return ONLY)	13.	<input type="text"/>		
	14.	TOTAL PAYMENTS MADE FOR THE PERIOD (For Amended Return ONLY)	14.	<input type="text"/>		
	15.	CREDIT TO BE REFUNDED. Line 14 minus line 13 (For Amended Return ONLY)	15.	<input type="text"/>		
	16.	ADDITIONAL TAXES DUE. Line 13 minus line 14 (For Amended Return ONLY)	16.	<input type="text"/>		

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 tax period stated, pursuant to the Transient Accommodations Tax Laws, and the rules issued thereunder.

IN THE CASE OF A CORPORATION OR PARTNERSHIP, THIS RETURN MUST BE SIGNED BY AN OFFICER, PARTNER OR MEMBER, OR DULY AUTHORIZED AGENT.

SIGNATURE	TITLE	DATE	DAYTIME PHONE NUMBER
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• ATTACH CHECK OR MONEY ORDER HERE •

