THIS	SPACE	FOR	DATE	RECEIVED	STAMP
11110	OLYCE	101	DAIL	ILCCLIVEL	



NAME:

## STATE OF HAWAII — DEPARTMENT OF TAXATION TRANSIENT ACCOMMODATIONS

TAX RETURN



Check this box if this is an AMENDED Return

LAST 4 DIGITS OF YOUR FEIN OR SSN:		
LAST 4 DIGITIS OF TOOTTI LIN OT 55N	 	_

## □ Month □ Quarter or □ Semiannual Period Ending \_\_\_/\_\_(MM/YY)

(Do not combine your income for more than one filing period on this return.)

•		TAXATION DISTRICT	GROSS RENTAL OR GROSS RENTAL PROCE (a)		EXEMPTIONS/DE (EXPLAIN ON REV (b)		TAXABLE PROCE	EDS	RATE	TAXES (d)	
HERE				т I —		ending E	BEFORE July 1,	2009	•		
뀌	1	OAHU							.0725		1
	2	MAUI, MOLOKAI, LANAI							.0725		2
Ö	3	HAWAII							.0725		3
ORDER	4	KAUAI							.0725		4
		PART	II — For Periods	begiı	nning AFTER	June 30,	2009 and endin	ig BEF	FORE	July 1, 2010	
MONEY	5	OAHU							.0825		5
NO NO	6	MAUI, MOLOKAI, LANAI							.0825		6
	7	HAWAII							.0825		7
OR	8	KAUAI							.0825		8
CHECK			PART	<u>    —</u>	For Periods b	peginning	AFTER June 3	<u>0, 201</u>	0		
Ψ	9	OAHU							.0925		 9
	-	MAUI, MOLOKAI, LANAI							.0925		 10
H		HAWAII							.0925		11
IA	12	KAUAI							.0925		12
ATTACH			PART IV — TIME						•	s ONLY)	
•	13	Enter the total taxes for	or Timeshare Occupan								13
					-	-	DIC RETURN		1		
	14.	TOTAL TAXES DI				enter result	here. If you did not	have a	ny		
		activity for the period									14
	15.	Amounts Assessed Du (For Amended Return	uring the Period			PENALTY NTEREST					15
	16	TOTAL AMOUNT	UNET)		<u> </u>						 16
		TOTAL PAYMENTS M									17
		CREDIT TO BE REFU									 18
		ADDITIONAL TAXES					/				 19
						PENALTY					
	20.	FOR LATE F	FILING ONLY			NTEREST					20
	21.	TOTAL AMOUNT DUI		ainal R	eturns, add lines	16 and 20 <sup>.</sup>					
		Amended Returns, ad									21
	22.	PLEASE ENTER THE									
		"HAWAII STATE TAX O period, and your Hawa									
		P. O. Box 2430, HONC	LULU, HI 96804-243	0 or file	e and pay electror	nically at <b>tax</b>					
		are NOT submitting a	a payment with this r	eturn,	please enter "0.0	00" here.					22
	23.	GRAND TOTAL C	F EXEMPTIONS	/DED	UCTIONS CL	AIMED fr	om back of form	<b>1.</b>			23

**DECLARATION:** I declare, under the penalties set forth in section 231-36, HRS, that this is a true and correct return, prepared in accordance with the provisions of the Transient Accommodations Tax Law, Chapter 237D, HRS and the rules issued thereunder. A CORPORATION OR PARTNERSHIP TAX RETURN MUST BE SIGNED BY AN OFFICER, PARTNER OR MEMBER, OR DULY AUTHORIZED AGENT OF SUCH ENTITY.

SIGNATURE

FORM TA-1 (REV. 2014)								PA	GE 2
Name	Hawaii Tax I.D. Num	nber			Period Ending (MM/YY)				
				be completed by Plan					
			XATION STRICT	TOTAL FAIR MARKE RENTAL VALUE (a)	- RATE (b)	TAXES			
	24	OAHL	J			.0725			24
QBF142	25	MAUI,	MOLOKAI, LANAI			.0725			25
	26	HAWA	All			.0725			26
	27	KAUA	I			.0725			27
	28			cy Tax. Add Column (c) c Part IV, line 13					28

## PART VII — EXEMPTIONS AND/OR DEDUCTIONS

## LIST DETAILS CONCERNING "EXEMPTIONS" AND/OR "DEDUCTIONS" CLAIMED.

Amounts claimed as an exemption or deduction must be explained; otherwise, the amounts claimed will be disallowed and proposed assessments prepared against you. If any of these exemptions or deductions are claimed in Column (b) on the front page, you must itemize them in the spaces provided below. Refer to the SCHEDULE OF TRANSIENT ACCOMMODATIONS TAX EXCLUSIONS, EXEMPTIONS, AND DEDUCTIONS in Form TA-1 Instructions for further information about exemptions and deductions.

AMOUNT		OAHU

AMOUNT		MAUI, MOLOKAI, LANAI

AMOUNT	HAWAII

AMOUNT	KAUAI
AMOUNT	
	GRAND TOTAL EXEMPTIONS and/or DEDUCTIONS (Enter here and on line 23, front page.)

(NOTE: If additional space is needed, please attach schedule.)