

STATE OF HAWAII — DEPARTMENT OF TAXATION
**TRANSIENT ACCOMMODATIONS
TAX RETURN**

THIS SPACE FOR DATE RECEIVED STAMP

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QBF151

☐ Check this box if this is an AMENDED Return

HAWAII TAX I.D. NO. W _____ - ____

NAME: _____

LAST 4 DIGITS OF YOUR FEIN OR SSN: _____

☐ Month ☐ Quarter or ☐ Semiannual Period Ending ____ / ____ (MM/YY)

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

• ATTACH CHECK OR MONEY ORDER HERE •

TAXATION DISTRICT	GROSS RENTAL OR GROSS RENTAL PROCEEDS (a)	EXEMPTIONS/DEDUCTIONS (EXPLAIN ON REVERSE SIDE) (b)	TAXABLE PROCEEDS (c)	RATE	TAXES (d)
PART I — For Periods ending BEFORE July 1, 2009					
1 OAHU				.0725	1
2 MAUI, MOLOKAI, LANAI				.0725	2
3 HAWAII				.0725	3
4 KAUAI				.0725	4
PART II — For Periods beginning AFTER June 30, 2009 and ending BEFORE July 1, 2010					
5 OAHU				.0825	5
6 MAUI, MOLOKAI, LANAI				.0825	6
7 HAWAII				.0825	7
8 KAUAI				.0825	8
PART III — For Periods beginning AFTER June 30, 2010					
9 OAHU				.0925	9
10 MAUI, MOLOKAI, LANAI				.0925	10
11 HAWAII				.0925	11
12 KAUAI				.0925	12
PART IV — TIMESHARE OCCUPANCY TAX (To be completed by Plan Managers ONLY)					
13 Enter the total taxes for Timeshare Occupancy from page 2, Part VI, line 36, here					13
PART V — TOTAL PERIODIC RETURN					
14. TOTAL TAXES DUE. Add column (d) of lines 1 through 13 and enter result here. If you did not have any activity for the period, enter "0.00" here.					14
15. Amounts Assessed During the Period (For Amended Return ONLY)	PENALTY				15
	INTEREST				
16. TOTAL AMOUNT. Add lines 14 and 15.					16
17. TOTAL PAYMENTS MADE FOR THE PERIOD (For Amended Return ONLY).					17
18. CREDIT TO BE REFUNDED. Line 17 minus line 16 (For Amended Return ONLY)					18
19. ADDITIONAL TAXES DUE. Line 16 minus line 17 (For Amended Return ONLY)					19
20. FOR LATE FILING ONLY →	PENALTY				20
	INTEREST				
21. TOTAL AMOUNT DUE AND PAYABLE (Original Returns, add lines 16 and 20; Amended Returns, add lines 19 and 20).					21
22. PLEASE ENTER THE AMOUNT OF YOUR PAYMENT. Attach a check or money order payable to "HAWAII STATE TAX COLLECTOR" in U.S. dollars drawn on any U.S. bank to Form TA-1. Write "TA", the filing period, and your Hawaii Tax I.D. No. on your check or money order. Mail to: HAWAII DEPARTMENT OF TAXATION, P. O. Box 2430, HONOLULU, HI 96804-2430 or file and pay electronically at tax.hawaii.gov/eservices/ . If you are NOT submitting a payment with this return, please enter "0.00" here.					22
23. GRAND TOTAL OF EXEMPTIONS/DEDUCTIONS CLAIMED from back of form.					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

TITLE

DATE

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DAYTIME PHONE NUMBER

Name	Hawaii Tax I.D. Number	Period Ending (MM/YY)
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QBF152

PART VI — TIMESHARE OCCUPANCY TAX*(To be completed by Plan Managers ONLY)*

TAXATION DISTRICT	TOTAL FAIR MARKET RENTAL VALUE (a)	RATE (b)	TAXES (c)		
For Periods ending BEFORE January 1, 2016					
24 OAHU		.0725			24
25 MAUI, MOLOKAI, LANAI		.0725			25
26 HAWAII		.0725			26
27 KAUAI		.0725			27
For Periods beginning AFTER December 31, 2015 and ending BEFORE January 1, 2017					
28 OAHU		.0825			28
29 MAUI, MOLOKAI, LANAI		.0825			29
30 HAWAII		.0825			30
31 KAUAI		.0825			31
For Periods beginning AFTER December 31, 2016					
32 OAHU		.0925			32
33 MAUI, MOLOKAI, LANAI		.0925			33
34 HAWAII		.0925			34
35 KAUAI		.0925			35
36	Total Timeshare Occupancy Tax. Add column (c) of lines 24 thru 35. Enter here and on Part IV, line 13				36

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