

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

DO NOT WRITE IN THIS AREA

22

NAME: _____

MONTH OF _____, _____
(Do not combine your income for more than one month, if filing monthly.)

QUARTER OF _____, _____

HAWAII TAX I.D. NO. W _____ - _____
LAST 4 DIGITS OF YOUR FEIN OR SSN _____

SEMIANNUAL PERIOD OF _____, _____
(Do not combine your income for more than one semiannual period, if filing semiannually.)

DO NOT USE THIS FORM AFTER THE ANNUAL RETURN AND RECONCILIATION HAS BEEN FILED.

DISTRICT	a GROSS RENTAL OR GROSS RENTAL PROCEEDS	b EXEMPTIONS/DEDUCTIONS (EXPLAIN ON REVERSE SIDE)	c TAXABLE PROCEEDS	RATE	d TAXES
1 TAXATION DISTRICT 1 (OAHU)				.0725	1
2 TAXATION DISTRICT 2 (MAUI, MOLOKAI, LANAI)				.0725	2
3 TAXATION DISTRICT 3 (HAWAII)				.0725	3
4 TAXATION DISTRICT 4 (KAUAI)				.0725	4
5 TOTAL TAX DUE (ADD LINES 1 thru 4 of column d, AND ENTER HERE)					5
6 PENALTY					6
7 INTEREST					7
8 TOTAL AMOUNT DUE (ADD LINES 5, 6, and 7; ENTER AMOUNT HERE.)					8
9 TOTAL TAX PAID FOR THE PERIOD		9			9
10 ADDITIONAL ASSESSMENTS PAID FOR THE PERIOD, IF INCLUDED ABOVE		10			10
11 PENALTIES \$ _____ INTEREST \$ _____ PAID DURING THE PERIOD		11			11
12 TOTAL PAYMENTS MADE (ADD LINES 9, 10, AND 11)					12
13 IF LINE 12 IS LARGER THAN LINE 8, ENTER CREDIT TO BE REFUNDED (LINE 12 MINUS LINE 8)					13
14 IF LINE 8 IS LARGER THAN LINE 12, ENTER TAXES DUE (LINE 8 MINUS LINE 12)					14
		15a	Penalty _____		15a
		15b	Interest _____		15b
16 TOTAL TAXES NOW DUE AND PAYABLE (ADD LINES 14, 15a AND 15b)					16
17 PLEASE ENTER AMOUNT OF YOUR PAYMENT. Attach your check or money order payable to "HAWAII STATE TAX COLLECTOR" in U.S. dollars drawn on any U.S. bank AND Form VP-1 to Form TA-11. Write "TA", the filing period, your Hawaii Tax I.D. No. on your check or money order.					17
18 GRAND TOTAL EXEMPTIONS/DEDUCTIONS FROM BACK OF FORM		18			

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.

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

—MAILING ADDRESS—

HAWAII DEPARTMENT OF TAXATION
P.O. BOX 2430
HONOLULU, HI 96804-2430

