

DO NOT WRITE IN THIS AREA **20**



QBF091

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 — TOTAL PERIODIC RETURN					
13. TOTAL TAXES DUE. Add Column (d) of lines 1 through 12 and enter result here. If you did not have any activity for the period, enter "0.00" here.					13
14. Amounts Assessed During the Period (For Amended Return ONLY)					14
15. TOTAL AMOUNT. Add lines 13 and 14.					15
16. TOTAL PAYMENTS MADE FOR THE PERIOD (For Amended Return ONLY).					16
17. CREDIT TO BE REFUNDED. Line 16 minus line 15 (For Amended Return ONLY)					17
18. ADDITIONAL TAXES DUE. Line 15 minus line 16 (For Amended Return ONLY)					18
19. FOR LATE FILING ONLY →					19
20. TOTAL AMOUNT DUE AND PAYABLE (Original Returns, add lines 15 and 19; Amended Returns, add lines 18 and 19).					20
21. PLEASE ENTER THE AMOUNT OF YOUR PAYMENT. Attach a check or money order payable to "HAWAII STATE TAX COLLECTOR" in U.S. dollars 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 www.ehawaii.gov/efile. If you are NOT submitting a payment with this return, please enter "0.00" here.					21
22. GRAND TOTAL OF EXEMPTIONS/DEDUCTIONS CLAIMED from back of form.					22

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 () DAYTIME PHONE NUMBER

Name	Hawaii Tax I.D. Number	Period Ending Date (MM/YY)
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QBF092

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 22, front page.)

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