

STATE OF HAWAII — DEPARTMENT OF TAXATION
**TRANSIENT ACCOMMODATIONS TAX
ANNUAL RETURN & RECONCILIATION**

DO NOT WRITE IN THIS AREA 26



Tax Year Ending
____ / ____ / ____
(MM/DD/YY)

Check this box if this is an AMENDED Return

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

NAME: _____

LAST 4 DIGITS OF YOUR FEIN OR SSN: _____

• 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 ANNUAL RETURN AND RECONCILIATION					
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 year, enter "0.00" here					13
14. Amounts Assessed during the year					14
15. TOTAL AMOUNT. Add lines 13 and 14.					15
16. TOTAL TAXES PAID ON MONTHLY, QUARTERLY, OR SEMIANNUAL RETURNS FOR THE PERIOD (and the Annual Return if this is an Amended Return). PART VII ON PAGE 2 MUST BE COMPLETED.					16
17. Additional assessments paid for the tax year, if included on line 13.					17
18. PENALTIES \$ _____ INTEREST \$ _____ Paid					18
19. TOTAL PAYMENTS MADE FOR THE TAX YEAR (Add lines 16 thru 18)					19
20. CREDIT CLAIMED ON ORIGINAL ANNUAL RETURN (For Amended Return ONLY)					20
21. NET PAYMENTS MADE. Line 19 minus line 20					21
22. CREDIT TO BE REFUNDED. Line 21 minus line 15					22
23. ADDITIONAL TAXES DUE. Line 15 minus line 21					23
24. FOR LATE FILING ONLY →					24
25. TOTAL AMOUNT DUE AND PAYABLE (Add lines 23 and 24)					25
26. 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-2. 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.					26
27. GRAND TOTAL OF EXEMPTIONS/DEDUCTIONS CLAIMED from back of form.					27

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	Tax Year Ending (MM/DD/YY)
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PART V — EXEMPTIONS AND/OR DEDUCTIONS



QCF092

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-2 Instructions for further information about exemptions and deductions. (NOTE: If additional space is needed, please attach schedule.)

AMOUNT		OAHU

AMOUNT		MAUI, MOLOKAI, LANAI

AMOUNT		HAWAII

AMOUNT		KAUAI

AMOUNT		GRAND TOTAL EXEMPTIONS and/or DEDUCTIONS (Enter here and on line 27, front page.)

PART VI — RECONCILIATION OF GROSS RENTAL OR GROSS RENTAL PROCEEDS

AMOUNT		
		1. Gross rental or gross rental proceeds (Total of Column (a), lines 1 through 12, from front page.) (Note: Does NOT include general excise taxes visibly passed on or transient accommodations taxes visibly passed on.)
		2. Total general excise taxes visibly passed on.
		3. Add lines 1 and 2. This amount is your gross proceeds from furnishing transient accommodations that are reportable on line 13, Column c of your General Excise/Use Tax Annual Return & Reconciliation (Form G-49).

PART VII — RECONCILIATION OF PAYMENT OF TRANSIENT ACCOMMODATIONS TAXES

ENTER TAXES PAID BY MONTHS IF MONTHLY RETURNS WERE FILED, QUARTERS IF QUARTERLY RETURNS WERE FILED, OR SEMIANNUAL PERIODS IF SEMIANNUAL RETURNS WERE FILED. ALSO, ENTER THE PAYMENT MADE WITH THE ANNUAL RETURN, IF APPLICABLE

JAN \$ _____	APR \$ _____	JUL \$ _____	OCT \$ _____
FEB \$ _____	MAY \$ _____	AUG \$ _____	NOV \$ _____
MAR \$ _____	JUN \$ _____	SEP \$ _____	DEC \$ _____
1st QTR \$ _____	2nd QTR \$ _____	3rd QTR \$ _____	4th QTR \$ _____
1st SEMIANNUAL PERIOD \$ _____		2nd SEMIANNUAL PERIOD \$ _____	
ANNUAL \$ _____			