

COUNTY OF KAUAI — DEPARTMENT OF FINANCE
TRANSIENT ACCOMMODATIONS TAX
AMENDED TAX PAYMENT VOUCHER FORM



Upon filing of your amended Form TA-1 with DoTAX and the amended return that relates to KTAT, **State Form TA-1, line 4 and/or line 8**, you **MUST** submit Form KTAT-1X and mail the completed form to:

COUNTY OF KAUAI
KAUAI TAT Office ATTN:
KTAT-1X AMENDED
4444 RICE STREET, SUITE A480
LIHUE HI 96766

Do **NOT** submit Form KTAT-1X if the TAT Annual Return & Reconciliation (Form TA-2) has already been filed with DoTAX for the tax year.

If you do not need to amend Form TA-1 but need to request for a Credit to be Refunded, this Form KTAT-1X may be used.

COMPLETING THE VOUCHER

Print the name that is associated with your Hawaii State Tax ID account. Fill in the filing period being amended. Enter the date as MM/DD/YY. Fill in the mailing address associated with your Hawaii State Tax ID account.

Enter your Hawaii State Tax I.D. No. that starts with TA, the 10-digit account number and the 2-digit extension

Line 1. Enter the net rental proceeds from your Amended State Form TA-1, line 4, column c.

Line 2. Enter the total fair market rental value from your Amended State Form TA-1, line 8.

Skip Line 1 and Line 2 if you do not need to file an amended return, Form TA-1 with State DoTAX and the request only applies to KTAT.

Line 3. Enter the amounts of penalty and/or interest assessed for the period that the amended return is filed applicable to KTAT. Breakdown the amount between penalty and interest in the space provided.

Line 4. Add lines 1, 2 and 3. Enter the total here.

Line 5. Enter total amount taxable subject to KTAT from your original Form KTAT-1, "Total Taxes Due" line, if applicable.

Line 6. Enter total KTAT payments made from your original filing period return. **(REMINDER:** Payments are applied first to cover cost incurred by KTAT, then to any interest due, then to penalties, and finally, to taxes).

Line 7. If line 5 is less than line 6, subtract line 5 from line 6, enter the result on line 7. A refund will be issued after verification of the Credit Amount. Please allow 10-15 business days for the KTAT Office to process your Refund request.

FORM KTAT-1X
(2022)

Cut carefully along this line to detach
COUNTY OF KAUAI • DEPARTMENT OF FINANCE
TRANSIENT ACCOMMODATIONS TAX AMENDED TAX
PAYMENT VOUCHER FORM



Name (Please print:) _____ Period Ending: _____

Hawaii State Tax I.D. Number: **TA** - _____

Mailing Address: _____
STREET UNIT TYPE/NO. CITY STATE ZIP CODE COUNTRY

Line 1. Enter the net rental proceeds from your Amended State Form TA-1, line 4, column c	1	<input type="text"/>
Line 2. Enter the total fair market rental value from your Amended State Form TA-1, line 8	2	<input type="text"/>
Line 3. Enter the penalty & interest assessed during the period PENALTY: _____ INTEREST: _____	3	<input type="text"/>
Line 4. Total Amount. Add lines 1, 2, and 3	4	<input type="text"/>
Line 5. Total Amount Taxable Subject to KTAT	5	<input type="text"/>
Line 6. Enter Total KTAT Payments Made for the Period	6	<input type="text"/>
Line 7. CREDIT TO BE REFUNDED. Line 6 minus line 5 and enter total amount	7	<input type="text"/>

Form KTAT-1X AMENDED (2022)

<p>FOR OFFICIAL USE ONLY</p> <p>Director of Finance: _____</p> <p>Authorized signature: _____</p>
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