Line Item Breakdown - 2026 VACATION PLAN ASSESSMENTS
[Imperial Hawaii Vacation Club ("IHVC" or "Club"), Vacation Plan ("Interval"), Timeshared Condominiums ("Vacation Plan Units")]

Expense Detail			Total	Ohia	Banyan	Palm	Koa	Hala
Real Property Tax	Assessed by the County of Honolulu for Vacation Plan Units and Club Owned Condominium Units	19.8%	1,777,457	199.16	298.98	316.87	325.82	371.01
Reserve Fund	For IHVC Equipment, Furniture & Fixtures	0.0%	0.00	0.00	0.00	0.00	0.00	0.00
General Excise Tax	A Tax in State of Hawaii with a description of " A Privilege Tax Imposed on Business Activity "	0.3%	28,290	3.17	4.76	5.04	5.19	5.91
Operations	The Cost for Club Operations (This includes salaries, benefits, supplies etc.)	6.7%	600,313	67.27	100.98	107.03	110.05	125.31
AOAO Liability	The Liability to the AOAO for all Common Element Expenses	65.9%	5,928,031	664.25	997.15	1,056.83	1,086.66	1,237.42
AOAO Reserve Fund	For Future Capital Replacement	7.4%	665,184	74.54	111.89	118.59	121.93	138.86
2026 Assessment ~ By Unit Type without Discount(s) Applied ~ Pay This Amount				**1,008.39**	**1,513.76**	**1,604.36**	**1,649.65**	**1,878.51**
2026 **Cash Discount** Amount ~ 5.0% For Paying Assessment by Check or Cash by November 30, 2025				50.42	75.69	80.22	82.48	93.93
2026 Assessment - Discounted by 5.0% - Pay This Amount No Later Than November 30, 2025				**957.97**	**1,438.07**	**1,524.14**	**1,567.17**	**1,784.58**
2026 **Cash Discount** Amount ~ 3.0% For Paying Assessment by Check or Cash by January 1, 2026				30.25	45.41	48.13	49.49	56.36
2026 Assessment - Discounted by 3.0% - Pay This Amount No Later Than January 1, 2026				**978.14**	**1,468.35**	**1,556.23**	**1,600.16**	**1,822.15**

The Imperial Hawaii Vacation Club Accounting Department
Phone: (808) 921-7533 Fax: (808) 921-7562
Email: acctg@imperialofwaikiki.com

Cash Discounts are only available for payments made by check, cash or money order and received in the Accounting Department no later than November 30, 2025 for 5% or January 1, 2026 for 3%.

OWNER INFORMATION UPDATE

In our continuing efforts to maintain accurate and up to date information,
we ask that you take a few minutes to provide us with your current information and return this form to The Imperial with your payment.

Recorded Name(s) on Title

Last, First

Last, First

Last, First

Home Ph.

Business Ph.

Cell Ph.

ADDRESS:

Number and Street

City, State (Province)

Zip (Postal Code)

Country

Email Address