

**RENTAL MOTOR VEHICLE AND TOUR VEHICLE SURCHARGE TAX
ANNUAL RETURN & RECONCILIATION
FOR CALENDAR YEAR 20 ____ / ____ / ____
OR FISCAL YEAR ENDING ____ / ____ / ____**

MO DAY YR

NAME: _____

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

THIS FORM SHOULD BE USED ONLY AFTER THE ORIGINAL RETURN HAS BEEN FILED AND WITHIN THREE YEARS OF THE DUE DATE OR FILING DATE OF THE ORIGINAL ANNUAL RETURN, WHICHEVER IS LATER.

• ATTACH CHECK OR MONEY ORDER AND FORM VP-1 HERE •

		COLUMN A	COLUMN B	COLUMN C	
		Rental Motor Vehicle Surcharge Tax — Enter the Number of Rental Motor Vehicle Days	Tour Vehicle Surcharge Tax Enter the Number of Tour Vehicles Carrying 8 - 25 Passengers	Tour Vehicle Surcharge Tax Enter the Number of Tour Vehicles Carrying 26 or More Passengers	
1	OAHU DISTRICT				1
2	MAUI DISTRICT				2
3	HAWAII DISTRICT				3
4	KAUAI DISTRICT				4
5	TOTALS (Add lines 1 thru 4 of columns A, B, and C)				5
6	RATES	\$3	\$15	\$65	6
7	TAXES (Multiply line 5 by line 6 of columns A, B, and C)		00		00 7
8	TOTAL TAXES DUE (ADD LINE 7, columns A thru C, AND ENTER HERE)				8
9	PENALTY				9
10	INTEREST				10
11	TOTAL AMOUNT DUE (ADD LINES 8, 9, AND 10; ENTER AMOUNT HERE)				11
12	TOTAL TAXES PAID ON MONTHLY, QUARTERLY, OR SEMIANNUAL RETURNS FOR THE PERIOD.	12			12
13	ADDITIONAL ASSESSMENTS PAID FOR THE PERIOD IF INCLUDED ABOVE	13			13
14	PENALTIES \$ _____ INTEREST \$ _____ PAID DURING THE PERIOD.	14			14
15	TOTAL PAYMENTS MADE (ADD LINES 12, 13, AND 14)	15			15
16	CREDIT TO BE REFUNDED AS SHOWN ON ORIGINAL RETURN	16			16
17	NET PAYMENTS MADE (LINE 15 MINUS LINE 16)				17
18	IF LINE 17 IS LARGER THAN LINE 11, ENTER CREDIT TO BE REFUNDED (LINE 17 MINUS LINE 11)				18
19	IF LINE 11 IS LARGER THAN LINE 17, ENTER TAXES DUE (LINE 11 MINUS LINE 17)				19
FOR LATE FILING ONLY		20a	Penalty _____		20a
		20b	Interest _____		20b
21	TOTAL TAXES NOW DUE AND PAYABLE (ADD LINES 19, 20a AND 20b)				21
22	PLEASE ENTER AMOUNT OF YOUR PAYMENT (PAY IN U.S. DOLLARS ONLY, DRAWN ON ANY U.S. BANK.)				22

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 RV-6. Write "RV", the filing period, and your Hawaii Tax I.D. No. on your check or money order.

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 Rental Motor Vehicle and Tour Vehicle Surcharge Tax Law 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

THIS SPACE IS FOR DATE RECEIVED STAMP

RECONCILIATION OF TAX PAYMENTS

PAYMENT OF TAXES 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 \$ _____
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1st SEMIANNUAL PERIOD \$ _____	2nd SEMIANNUAL PERIOD \$ _____
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ANNUAL \$ _____