FORM RV-3 (REV. 1997)

STATE OF HAWAII — DEPARTMENT OF TAXATION

RENTAL MOTOR VEHICLE AND TOUR VEHICLE **SURCHARGE TAX**

ANNUAL RETURN & RECONCILIATION FOR CALENDAR YEAR 19

OR FISCAL YEAR ENDING DAY МО

| DO NOT WRITE IN THIS AREA | 76 |
|---------------------------|-----------|
| | |
| | |

| | NA | ME: | | | | | | | | | |
|----------------------------------|--|--|--|--------|--------|--------------|--|-----|--|-------|----|
| | | | | | | R | .V. I.D. NO. | | | . — . | |
| ſ | | | COLUMN A | | | COLUMN B | | | COLUMN C | | 1 |
| | | | Rental Motor V Surcharge Tax — Number of Rental Mo Days | Enter | the | En | Vehicle Surcharge Iter the Number of To ehicles Carrying 8 - 2 Passengers | our | Tour Vehicle Surcharge Enter the Number of T Vehicles Carrying 26 or Passengers | our | |
| RE | 1 | OAHU DISTRICT | | | | | | | | | 1 |
| RHE | 2 | MAUI DISTRICT | | | | | | | | | 2 |
| RDE | 3 | HAWAII DISTRICT | | | | | | | | | 3 |
| ATTACH CHECK OR MONEY ORDER HERE | 4 | KAUAI DISTRICT | | | | | | | | | 4 |
| R MO | 5 | TOTALS (Add lines 1 thru 4 of columns A, B, and C) | | | | | | | | | 5 |
| Ō | 6 | RATES | \$2 | | | \$15 | | | \$65 | | 6 |
| ECK | 7 | TAXES (Multiply line 5 by line 6 of columns A, B, and C) | | | 00 | | | 00 | | 00 | 7 |
| S S S | 8 | TOTAL TAXES (Add line 7, columns A | | | | 8 | | | | | |
| M | 9 | 9 PENALTY | | | | | | | | | 9 |
| F | 10 | | | | | | | | | | 10 |
| 4 | 11 | | | | | | | | | | 11 |
| | 12 | Total taxes paid on monthly, quarterly, or s | emiannual returns for | the pe | eriod. | 12 | | | | | 12 |
| | 13 | Additional assessments paid for the period | d, if included above. | | | 13 | | | | | 13 |
| | 14 | Penalties \$ Interest \$ | _ paid during the peri | od. | | 14 | | | | | 14 |
| | 15 | TOTAL PAYMENTS MADE (Add lines 12, 13, and 14) | | | | | | | | | 15 |
| | 16 | 6 CREDIT TO BE REFUNDED (Line 15 minus line 11) | | | | | | | | | 16 |
| | IF YOU DO NOT HAVE ANY ACTIVITY, AND THE RESULT IS NO TAX LIABILITY ENTER "0" ON LINES 8 AND 17 . THIS RETURN MUST BE FILED. | | | | | AL TAX 5) | XES DUE (Line 11 mir | nus | | | 17 |
| | | FOR LATE FILING ONL | V | 18a | PENA | ALTY | | | | | |
| | FOR LATE FILING UNLT | | | | INTE | REST | | | | | 18 |
| | 19 | TOTAL AMOUNT NOW DUE AND PA | MOUNT NOW DUE AND PAYABLE (Add lines 17 and 18) | | | | | | | 19 | |

| do | Make check payable to "HAWAII STATE TAX COLLECTOR dollars drawn on any U.S. bank. Write your rental motor vehit tour vehicle registration number and the period of payment or | | 20 | PLEASE ENTER AMOU YOUR PAYMENT | INT OF | | | 20 |
|----|---|---|----|---|----------------|----------------------------|-----------|-----|
| ch | I declare, under the penalties s accordance with the provisions o thereunder. IN THE CASE OF A CORPORATION OR PART | | | ntal Motor Vehicle and T | our Vehicle Su | rcharge Tax Law and the ri | ulės issi | ued |
| | | SIGNATURE | | TITLE | | DATE | | |
| | | —MAILING ADDRESSES— Oahu District Office Maui District Office Kau | | | | | u Offic | _ |
| | | Oahu District Office P. O. Box 2430 Honolulu, HI 96804-243 | Р | laui District Office . O. Box 1427 /ailuku, HI 96793-6427 | | P.O. Box 168 | 7 | _ |

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| RECONCILIATION OF PAYMENT OF TAXES | | | | | | | | |
|--|------------|------------|--------------------------|--|--|--|--|--|
| 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 \$ | | | | | |
| | | | | | | | | |
| 1st SEMIANNUAL PERIOD \$ | | 2nd SEMI | 2nd SEMIANNUAL PERIOD \$ | | | | | |
| | | | | | | | | |
| ANNUA | AL \$ | | | | | | | |
| | , | | | | | | | |