



RBF141

☐ Check this box if this is an AMENDED Return

HAWAII TAX I.D. NO. W \_\_\_\_\_ - \_\_\_\_\_

NAME: \_\_\_\_\_

LAST 4 DIGITS OF YOUR FEIN OR SSN: \_\_\_\_\_

☐ Month ☐ Quarter or ☐ Semiannual Period Ending \_\_\_\_ / \_\_\_\_ (MM/YY)

(Do not combine your income for more than one filing period on this return.)

• ATTACH CHECK OR MONEY ORDER HERE •

		COLUMN A Car-Sharing Vehicle Surcharge Tax — Enter the Number of Car-Sharing Vehicle Half-Hours After Dec. 31, 2014	COLUMN B Rental Motor Vehicle Surcharge Tax — Enter the Number of Rental Motor Vehicle Days After June 30, 2012	COLUMN C Tour Vehicle Surcharge Tax — Enter the Number of Tour Vehicles Carrying 8 - 25 Passengers	COLUMN D 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 through 4 of Columns A through D)					5
6	RATES	\$0.25	\$3	\$15	\$65	6
7	TAXES (Multiply line 5 by line 6 of Columns A through D)			00	00	7
8.	<b>TOTAL TAXES DUE.</b> Add line 7, Columns A through D and enter result here. <b>If you did not have any activity for the period, enter "0.00" here.</b>					8
9.	Amounts Assessed During the Period (For Amended Return ONLY)		PENALTY			9
			INTEREST			
10.	<b>TOTAL AMOUNT.</b> Add lines 8 and 9.					10
11.	TOTAL PAYMENTS MADE FOR THE PERIOD. (For Amended Return ONLY)					11
12.	CREDIT TO BE REFUNDED. Line 11 minus line 10 (For Amended Return ONLY)					12
13.	ADDITIONAL TAXES DUE. Line 10 minus line 11 (For Amended Return ONLY)					13
14.	<b>FOR LATE FILING ONLY →</b>		PENALTY			14
			INTEREST			
15.	<b>TOTAL AMOUNT DUE AND PAYABLE.</b> (Original Returns, add lines 10 and 14; Amended Returns, add lines 13 and 14)					15
16.	<b>PLEASE ENTER THE AMOUNT OF YOUR PAYMENT.</b> Attach a check or money order payable to "HAWAII STATE TAX COLLECTOR" in U.S. dollars drawn on any U.S. bank to Form RV-2. Write "RV", the filing period, your Hawaii Tax I.D. No., and your daytime phone number on your check or money order. Mail to: HAWAII DEPARTMENT OF TAXATION, P.O. Box 2430, Honolulu, HI 96804-2430. <b>If you are NOT submitting a payment with this return, enter "0.00" here.</b>					16

**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 Rental Motor Vehicle, Tour Vehicle, and Car-Sharing 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 \_\_\_\_\_

( )  
DAYTIME PHONE NUMBER \_\_\_\_\_