



## Bureau of Revenue and Taxation

P.O. Box 6069 Koror, Palau 96940  
 Tel: (680) 488-2465/2580/3303 | Fax: (680) 488-3844  
 URL: www.palau.gov.pw/brt

# TAX-004A

### PERSONAL APPLICATION FOR REFUND TYPE OR PRINT AND CHECK APPROPRIATE BOXES

**YEAR:2021**

**NOTICE TO APPLICANT:**

*Fill out form completely. Incomplete applications or applications submitted without required attachments will be returned to applicant. Altered copies of official receipt(s) and/or receipts from organizations not registered or not-in-good-standing at the Bureau of Revenue and Taxation and/or AG's Office, are not acceptable. (Last day to submit 2021 refund application is March 31, 2022. Applications are processed in order received.)*

|   |  |                 |     |                           |
|---|--|-----------------|-----|---------------------------|
| 1   | Applicant Name   |                 | SSN |                           |
| 2   | Contact Information  | Tel. #:         |     | Cell #:                   |
|   |  | Mailing Address |     |                           |
|   |  | E-mail Address  |     |                           |
| 3   | Employer Name  |                 |     |                           |
| 4   | Name of School or Non-Profit Organization of Your Claim <i>(attach list if needed)</i> |                 |     |                           |
|   |  |                 |     |                           |
|   |  |                 |     |                           |
| 5   | Tuition Paid Claim – Child Information <i>(attach list if needed)</i>                  |                 |     |                           |
|   | Full Name <i>(Last, First, M.I.)</i>   |                 | Age | Relationship to Applicant |
|   |  |                 |     |                           |
|   |  |                 |     |                           |
| 6   | Refund Computation   |                 |     |                           |
|   | 1. Wages & Salaries Filed <i>(Must attach W-2 or Last check stub of the year)</i>      |                 |     | \$                        |
|   | 2. Total Taxes Withheld & Paid <i>(Must attach W-2 or Last check stub of the year)</i> |                 |     | \$                        |
|   | 3. Total Tuition Paid <i>(Provide official receipts)</i>                               |                 |     | \$                        |
|   | 4. Total Contributions to Non-Profit Orgs. <i>(Provide official receipts)</i>          |                 |     | \$                        |
|   | 5. Total Tuition and Contributions Paid <i>(Box 3 + Box 4)</i>                         |                 |     | \$                        |
| 6. Amount of Refund Applied <i>(Up to 10% of Box 2)</i> |  |                 | \$  |                           |

**DECLARATION:**

I HEREBY DECLARE UNDER THE PENALTY OF PERJURY, THAT ALL OF THE ABOVE INFORMATION IS TRUE AND CORRECT. I UNDERSTAND THAT PENALTY FOR SUBMITTING FRAUDULENT INFORMATION ON THIS FORM IS IMPRISONMENT OF UP TO 3 YEARS AND FINE OF UP TO \$10,000 IN ADDITION TO ASSESSMENT OF CIVIL PENALTY OF UP TO 50% OF TAX OWED.

|            |           |      |
|------------|-----------|------|
|            |           |      |
| PRINT NAME | SIGNATURE | DATE |

**FOR OFFICIAL USE ONLY**

|                             |              |              |             |
|-----------------------------|--------------|--------------|-------------|
| DATE RECEIVED & VERIFIED BY | PROCESSED BY | CERTIFIED BY | APPROVED BY |
|                             |              |              |             |