



## 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-004**

**BUSINESS APPLICATION FOR REFUND**  
 TYPE OR PRINT AND CHECK APPROPRIATE BOXES

**YEAR:2023**

**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 2023 refund application is March 31, 2024. Applications are processed in order received.)*

1	Applicant Name				
2	Business ID #				
3	Contact Information	Contact Person Name			
		Tel. #:		Cell #:	
		Mailing Address			
		E-mail Address			
4	Type of Ownership:	<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other			
5	Name of Non-Profit Organization of Your Claim <i>(attach list if needed)</i>				
6	Refund Computation				
	1. Total Gross Revenue Filed (Tax Year: Jan to Dec) 1 <sup>st</sup> ~ 4 <sup>th</sup> QRTs 2023			\$	
	2. Total Revenue Tax Paid (Tax Year: Jan to Dec) 1 <sup>st</sup> ~ 4 <sup>th</sup> QRTs 2023			\$	
	3. Total Contributions to Non-Profit Orgs. <i>(Provide official receipts)</i>			\$	
	4. Amount of Refund Applied <i>(Up to 10% of Box 2)</i>			\$	
<b>DECLARATION:</b>					
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 _____	
STATUS (CHECK APPROPRIATE BOX): <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partner <input type="checkbox"/> Director <input type="checkbox"/> Duly Authorized Person					

FOR OFFICIAL USE ONLY			
DATE RECEIVED & VERIFIED BY	PROCESSED BY	CERTIFIED BY	APPROVED BY