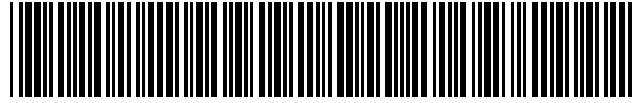




**INDIVIDUAL INCOME TAX RETURN FOR 2012**

Approved by the Board of Inland Revenue under Section 76 of the  
Income Tax Act, Chap. 75:01 and the Finance Act, No. 14 of 1987.



V2 -12400ITRP01

**REGISTRATION INFORMATION CHANGE**

- NAME CHANGE  
 ADDRESS CHANGE

**2012**  
**FORM 400 ITR**

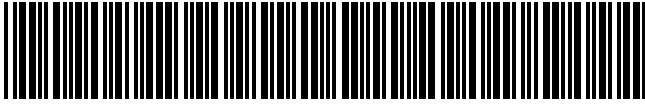
**IDENTIFICATION SECTION**

PLEASE PRINT IN BLOCK LETTERS NAME AND ADDRESS IF DIFFERENT FROM ABOVE. USE BLACK INK ONLY

LAST NAME	<input type="text"/>		BIR File No.	<input type="text"/>
FIRST NAME	MIDDLE NAME	<input type="text"/>		
PRESENT ADDRESS (STREET NO. AND NAME)		Spouse's BIR File No.		
<input type="text"/>		<input type="text"/>		
CITY OR TOWN		COUNTRY	PIN No. (Electronic Birth Certificate No.)	
<input type="text"/>		<input type="text"/>	<input type="text"/>	
MAILING ADDRESS IF DIFFERENT FROM ABOVE (STREET NO. AND NAME)		VAT Registration No.		
<input type="text"/>		<input type="text"/>		
CITY OR TOWN		COUNTRY	NIS No.	
<input type="text"/>		<input type="text"/>	<input type="text"/>	
OCCUPATION OR PROFESSION		Driver's Permit No.		
<input type="text"/>		<input type="text"/>		
E-MAIL ADDRESS		National Identification No.		
<input type="text"/>		<input type="text"/>		
TELEPHONE CONTACT (HOME/OFFICE)	MOBILE	Date of Birth (DD MM YYYY)		
<input type="text"/>	<input type="text"/>	<input type="text"/>		
TRADE NAME (IF ANY) SELF EMPLOYED ONLY	TYPE OF BUSINESS	Please tick the appropriate box		
<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Resident <input type="checkbox"/> Male <input type="checkbox"/> Non-Resident <input type="checkbox"/> Female <input type="checkbox"/> Self-employed		
ADDRESS OF BUSINESS (STREET NO. AND NAME)				
<input type="text"/>				
CITY OR TOWN		COUNTRY		
<input type="text"/>		<input type="text"/>		

**TAX COMPUTATION SECTION**

INCOME		To Nearest Dollar, Omit Cents/Commas	
1	Income from Employment (Government and Non-Government) as per TD4 enclosed	1	<input type="text"/>
2	Retirement Severance Benefit (See Instructions 13 and 20)	2	<input type="text"/>
3	Pensions from sources within/outside T&T	3	<input type="text"/>
4	<b>TOTAL EMOLUMENT INCOME</b> (SUM OF LINES 1 TO 3)	4	<input type="text"/>
5	<b>Less Travelling Expenses</b> (See Instruction 12)	5	<input type="text"/>
6	<b>NET EMPLOYMENT INCOME</b> (LINE 4 MINUS LINE 5)	6	<input type="text"/>
7	Gross Amount Received on Cancellation of Approved Deferred Annuity/Pension Plan - See Instruction 15	7	<input type="text"/>
8	Employer's contribution to Approved Deferred Annuity/Pension Plan (Taxable Benefit) Section 134(6)	8	<input type="text"/>
9	<b>Net Income from Other Sources</b> (Page 6, Schedule E)	9	<input type="text"/>
10	<b>TOTAL INCOME</b> (SUM of LINES 6 to 9)	10	<input type="text"/>



V2-12400ITRP02

2012

BIR Number

[Empty box for BIR Number]

DEDUCTIONS

To Nearest Dollar, Omit Cents/Commas

Table with 4 columns: Line number, Description, Line number, and Amount. Rows include Tertiary Education Expenses, First-Time Acquisition of House, Covenanted Donations, TOTAL NET INCOME, Deduct Personal Allowance, ASSESSABLE INCOME, Approved Pension Plan, Contributions to Widows' and Orphans' Fund, National Insurance Payments, SUM OF LINES 17 TO 19, Employer's NIS Contributions, Approved Capital Expenditure, Alimony/Maintenance Payment, TOTAL DEDUCTIONS, CHARGEABLE INCOME, TAX ON CHARGEABLE INCOME, Total Tax Credits and Double Taxation Relief, Income Tax Liability, Business Levy Liability, and conditional entries for Line 28 and 29.

PREPAYMENTS

Table with 4 columns: Line number, Description, Line number, and Amount. Rows include Total Income Tax Quarterly Installments Paid, Total Business Levy Quarterly Installments Paid, Tax Deducted on Interest/Dividend Income, Tax Deducted Re: Cancellation of Approved Deferred Annuity/Pension Plan, INCOME TAX DEDUCTED (PAYE) PER TD4 CERTIFICATE/S ENCLOSED, TOTAL PREPAYMENTS, and conditional entries for Line 30 and 31.

GENERAL DECLARATION

IT IS AN OFFENCE PUNISHABLE BY FINE OR IMPRISONMENT TO MAKE A FALSE RETURN
PLEASE SIGN GENERAL DECLARATION

I, ..... declare that in all statements contained herein and in any statement of accounts sent herewith I have to the best of my judgement and belief, given a full and true Return, and particulars of the whole of the Income from every source whatsoever required to be returned under the provisions of the Income Tax Act, Chap. 75:01 and the Finance Act, No. 14 of 1987.

Given under my hand this ..... day of ....., 2013.

.....
Signature of Taxpayer, or Authorized Agent

FOR OFFICIAL USE ONLY

Place Date Received Stamp Here



V2 -12400ITRP03

2012

BIR Number

SCHEDULE A
EMPLOYER'S CONTRIBUTION TO APPROVED FUND OR CONTRACT [Section 134(6) OF THE INCOME TAX ACT]
(See Instruction No. 16)

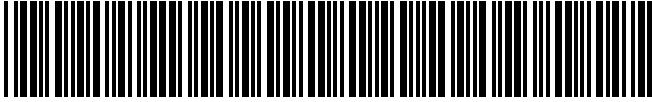
COMPUTATION TO DETERMINE WHETHER BENEFIT IS TAXABLE

To Nearest Dollar, Omit Cents/Commas

Table with 11 rows for Schedule A computation. Columns include description, amount, and taxability. Rows include Total Emolument Income, Employer's Contributions, Net Income, Total Income, Deductions (Tertiary Education, Pension, Insurance, House, Donation), Subtotal, Deductible Allowance, Chargeable Income, 1/3 Chargeable Income, Contributions, and Taxable Benefit.

SCHEDULE B
ALIMONY OR MAINTENANCE PAYMENTS
(Attach Copy of Court Order/Deed of Separation and Proof of Payment)
(See Instruction No. 17)

Form for Schedule B with sections: Name of Spouse, Deed of Separation Court Order or Decree, Address of Spouse, BIR No. of Spouse, and If Spouse is a Non-Resident enter below WITHHOLDING TAX INFORMATION. Includes fields for First Name, Last Name, Date, Registered No., Country of Origin, Date Paid, Receipt No., Tax Paid, and Maintenance or Alimony Paid.



BIR Number

**SCHEDULE C  
TAX CREDITS**  
(See Instruction No. 18)

**VENTURE CAPITAL TAX CREDIT**

(a)

Venture Capital Company in which investment held (1)	Amount of Investment (2) \$	Highest Marginal Rate of Tax in year (3) %	Venture Capital Credit (2) x (3) (4) \$	Credit Brought Forward (5) \$	Credit Claimed (6) \$	Credit to be Carried Forward (4) + (5) - (6) (7) \$
Enter total of Column (6) in Summary of Tax Credits, Line (a)						

**CNG KIT AND CYLINDER TAX CREDIT**

(b)

Motor Vehicle Registration No. (1)	Date of Purchase and Installation of CNG Kit and Cylinder (2)	Total Cost of CNG Kit and Cylinder (3) \$	Tax Credit - 25% of Total Cost Col. (3) x 25% (4) \$	Tax Credit Claimed Limited to a Maximum of (\$10,000) (5) \$
Enter total of Column (5) in Summary of Tax Credits, Line (b)				

**SOLAR WATER HEATING EQUIPMENT TAX CREDIT**

(c)

Residential Address of Property (1)	Date of Purchase of Solar Water Heating Equipment (2)	Total Cost of Solar Water Heating Equipment (3) \$	Tax Credit - 25% of Total Cost Col. (3) x 25% (4) \$	Tax Credit Claimed Limited to a Maximum of (\$10,000) (5) \$
Enter total of Column (5) in Summary of Tax Credits, Line (c)				

**SUMMARY OF TAX CREDITS**

To Nearest Dollar, Omit Cents/Commas

(a) Venture Capital Tax Credit	...	...	...	...	...	...	...	...	...	<input type="text"/>
(b) CNG Kit and Cylinder Tax Credit	...	...	...	...	...	...	...	...	...	<input type="text"/>
(c) Solar Water Heating Equipment Tax Credit	...	...	...	...	...	...	...	...	...	<input type="text"/>
Total of Tax Credits, Lines (a) to (c), Enter Total on Page 2, Line 27	...	...	...	...	...	...	...	...	...	<input type="text"/>



BIR Number

SCHEDULE D
HEALTH SURCHARGE COMPUTATION
(See Instruction No. 19)

1. TO BE COMPLETED BY EMPLOYEES AND OTHER INDIVIDUALS WITH EMOLUMENT INCOME

To Nearest Dollar, Omit Cents/Commas

(1) Total emoluments (Page 1, Line 4 plus Line 8) ... .. \$ [ ]

(2) Health Surcharge Liability (Rate x No. of weeks)

Table with 3 columns: Rate per week (1), No. of weeks (2), Liability (3). Rows for (a) Income more than \$469.99 per month or \$109.00 per week and (b) Income equal to or less than \$469.99 per month or \$109.00 per week.

(a) Income more than \$469.99 per month or \$109.00 per week

(b) Income equal to or less than \$469.99 per month or \$109.00 per week

(c) Total liability [Col. 3(a) + 3(b)]

(3) Health Surcharge Deducted per T.D.4 Certificate attached ... .. \$ [ ]

(4) Total Quarterly Installments Paid (Page 11, Schedule R) ... .. \$ [ ]

(5) Total Payments (Line 3 plus Line 4) ... .. \$ [ ]

(6) If Line 2(c) is greater than Line 5 - Balance of Health Surcharge payable ... .. \$ [ ]

(7) If Line 2(c) is less than Line 5 - Overpayment ... .. \$ [ ]

2. TO BE COMPLETED BY INDIVIDUALS WITH INCOME OTHER THAN EMOLUMENT INCOME

To Nearest Dollar, Omit Cents/Commas

(1) Total Income (Page 1, Line 10) ... .. \$ [ ]

(2) Health Surcharge Rate—Tick Appropriate Box

(a) (Income more than \$469.99 per month) ... [ ] \$8.25 per week

(b) (Income equal to or less than \$469.99 per month) ... [ ] \$4.80 per week

(3) Health Surcharge Liability [Line 2(a) or (b) x 52 weeks] ... .. \$ [ ]

(4) Total Quarterly Installments Paid (Page 11, Schedule R) ... .. \$ [ ]

(5) If Line 3 is greater than Line 4 - Balance of Health Surcharge payable ... .. \$ [ ]

(6) If Line 3 is less than Line 4 - Overpayment ... .. \$ [ ]

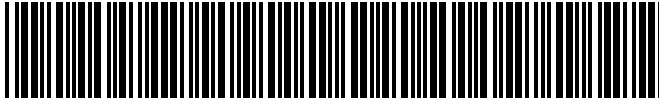


BIR Number

SCHEDULE E
INCOME FROM OTHER SOURCES
(See Instruction No. 20)

To Nearest Dollar, Omit Cents/Commas

Table with 3 columns: Sources of Income Other than Salary or Wages (1), Gross Receipts \$ (2), and Net Profit/Gain or Loss (Lines 1-12) Net Profit or Gain Only (Lines 13-20) \$ (3). Rows include categories like Short-term Capital Gain, Farming, Professional Services, and Tax Exempt income.



V2 -12400ITRP07

2012

BIR Number

[Redacted box]

SCHEDULE F

SHORT-TERM CAPITAL GAINS/LOSSES—Assets Disposed of within 12 months of acquisition (See Instruction No. 20)

To Nearest Dollar, Omit Cents/Commas

Table with 6 columns: Description of Asset, Date Acquired, Date of Disposal, Cost Plus Allowable Expenses, Disposal Proceeds, Gain/Loss

NET GAIN OR (LOSS)

Enter Gain or Loss on Page 6, Schedule E, Line 1

[Redacted box]

SCHEDULE G

STATEMENT OF LOSSES (See Instruction Nos. 20 and 36)

To Nearest Dollar, Omit Cents/Commas

Table with 5 columns: Source of Income, Unrelieved Loss b/f, Loss if any in Current Year, Loss set off in Current Year, Unrelieved Loss c/f

SCHEDULE H

COMPUTATION OF NET INCOME (See Instruction Nos. 20 and 37)

To Nearest Dollar, Omit Cents/Commas

Table with 2 columns: Description of item, Amount

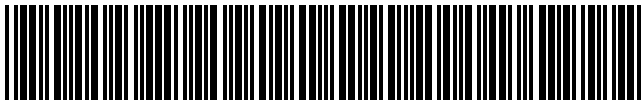
SCHEDULE I

STATEMENT OF FOREIGN INCOME IN TRINIDAD AND TOBAGO CURRENCY (See Instruction No. 20)

To Nearest Dollar, Omit Cents/Commas

Table with 6 columns: Name of Company or Person from whom Income is received, Type of Income, Gross Income before deduction of Tax in Foreign Country, Tax paid in Foreign Country, Rate of Tax Paid in Foreign Country, Double Tax Relief

Enter Total of Column (3) on Page 6, Schedule E, Line 16
Enter Total of Column (6) on Page 2, Line 27



V2-12400ITRP08

2012

BIR Number

[Redacted box]

SCHEDULE J
APPROVED COMMERCIAL FARMING
PROFIT (LOSS) ACCUMULATED DURING TAX EXEMPT PERIOD

(See Instruction No. 20)

To Nearest Dollar, Omit Cents/Commas

Table with 5 columns: (1) Date Approved, (2) Period of Exemption, (3) Profit (Loss) b/f, (4) Profit (Loss) Current Year, (5) Profit (Loss) c/f

On expiration of exempt period carry forward the Net Loss (if any) to Page 6, Schedule E, Line 4

SCHEDULE K
PAYMENTS MADE IN RESPECT OF RENTS

(See Instruction No. 34)

To Nearest Dollar, Omit Cents/Commas

Form for Schedule K with fields: Name of Payee, Resident Status (Y/N), Amount Paid, Last Name, Address of Rental Property, Withholding Taxes Paid, Address of Payee, Street, City/Town

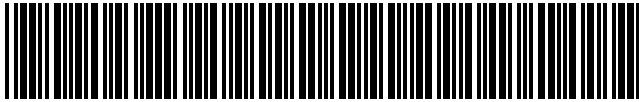
SCHEDULE L
DETAILS OF PROMOTIONAL EXPENSES INCURRED

(See Instruction No. 30)

To Nearest Dollar, Omit Cents/Commas

Table with 2 columns: CATEGORY OF EXPENSES, AMOUNT EXPENDED \$





V2-12400ITRP09

2012

BIR Number [ ]

SCHEDULE M
EXPENDITURE ON CONSTRUCTION OR SETTING UP OF
CHILD CARE OR HOMEWORK FACILITY
(See Instruction No. 31)

To Nearest Dollar, Omit Cents/Commas

Table with 5 columns: Location of Facility (1), Completion Date (2), Expenditure Incurred (3), Deduction Claimed (not exceeding \$500,000 each) (4), Expenditure over \$500,000 Col. (3) - (4) (5)

Enter Total of Column (4) up to a maximum amount of \$3,000,000 on Page 10, Schedule P, Line 24.
Enter Total of Column (5) in Schedule N, Line 4 in the appropriate class.

SCHEDULE N
INITIAL AND WEAR AND TEAR ALLOWANCE
(See Instruction No. 32)

To Nearest Dollar, Omit Cents/Commas

Table with 8 columns: (1) Description, CLASS A (2), CLASS B (3), CLASS C (4), CLASS D (5), OTHER CLASS (6), TOTAL ALLOWANCES (7)

SUMMARY OF ALLOWANCES

To Nearest Dollar, Omit Cents/Commas

Summary of Allowances table with rows (a) through (f) and input boxes for values.

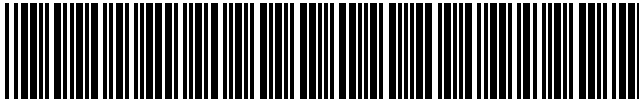
SCHEDULE O
BALANCING ALLOWANCES AND CHARGES
(See Instruction No. 33)

To Nearest Dollar, Omit Cents/Commas

Table with 5 columns: (1) Class, (2) Written Down Value Prior to Disposal, (3) Disposal Proceeds, (4) Balancing Charge, (5) Balancing Allowance

\*Balancing Allowance is granted only when there are no assets remaining in the Class.

Enter Total Balancing Charge on Page 10, Schedule P, Line 8.
Enter Total Balancing Allowance on Page 10, Schedule P, Line 27.



V2-12400ITRP10

2012

BIR Number

SCHEDULE P
PROFIT AND LOSS
COMPUTATION OF NET PROFIT OR LOSS
(See Instruction No. 27)

To Nearest Dollar, Omit Cents/Commas

Table with 31 rows for Income and Deductions, including items like Gross Receipts, Cost of Sales, Investment Income, and NET TOTAL INCOME. Includes input boxes for values and a final box for NET PROFITS.



V2-12400ITRP11

2012

BIR Number

**SCHEDULE Q**  
**BALANCE SHEET**  
 (See Instruction No. 35)

BALANCE SHEET AS AT .....

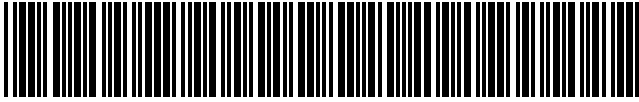
To Nearest Dollar, Omit Cents/Commas

	End of Accounting Period		Beginning of Accounting Period	
	(a) Amount	(b) Total	(a) Amount	(b) Total
<b>ASSETS</b>				
1. Cash in hand and in bank ... ..	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Accounts receivable and prepayments	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Less:</i> Allowance for Bad Debt ...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Inventories ... ..	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Loans Receivable ... ..	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Other Current Assets ... ..	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Investments - ( <i>Submit Schedule</i> ) ...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7. Assets subject to depreciation ...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<i>Less:</i> Accumulated depreciation ...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8. Other Assets ( <i>Submit Schedule</i> ) ...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9. <b>TOTAL ASSETS</b> ... ..	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>LIABILITIES AND CAPITAL</b>				
10. Accounts payable and accruals ...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11. Bank Overdraft ... ..	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12. Current portion of long-term debt ...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13. Other Current Liabilities... ..	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
14. Long-term debt ... ..	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15. Other Liabilities—( <i>Submit Schedule</i> ) ...	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
16. Capital Accounts ... ..	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
17. Profit and Loss Balance ... ..	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18. <b>TOTAL LIABILITIES AND CAPITAL</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE R**  
**INCOME TAX/BUSINESS LEVY/HEALTH SURCHARGE QUARTERLY INSTALLMENTS PAID - 2012**  
 (See Instruction No. 28)

To Nearest Dollar, Omit Cents/Commas

INCOME TAX (1)			BUSINESS LEVY (2)		HEALTH SURCHARGE (3)	
Quarters	Date Paid	Amount \$	Date Paid	Amount \$	Date Paid	Amount \$
Jan.–Mar.						
April–June						
July–Sept.						
Oct.–Dec.						
Other payments in respect of 2012 liability						
TOTAL (Enter amount on Page 2, Line 32)			TOTAL (Enter amount on Page 2, Line 33)		TOTAL (Enter amount on Page 5, Schedule D, Line 4, Section 1 or 2 as applicable)	



BIR Number

**SCHEDULE S**  
**COMPUTATION OF INTEREST DUE ON UNDERPAYMENT OF INCOME TAX/QUARTERLY INSTALLMENTS**  
(See Instruction No. 8)

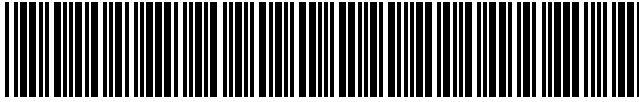
To Nearest Dollar, Omit Cents/Commas

Chargeable Income: (a) Income Year 2012 \$   
(b) Income Year 2011 \$

Calculation of Interest where (a) exceeds (b):

(1) Tax Liability for 2012 (Page 2, Line 28)	...	...	...	...	...	...	...	...	...	...	\$	<input type="text"/>
(2) Tax Liability for 2011	...	...	...	...	...	...	...	...	...	...	\$	<input type="text"/>
(3) Increase in Tax Liability (Line 1 minus Line 2)	...	...	...	...	...	...	...	...	...	...	\$	<input type="text"/>
(4) Enter 80% of increase...	...	...	...	...	...	...	...	...	...	...	\$	<input type="text"/>
(5) Total installments payable (Line 2 plus Line 4)	...	...	...	...	...	...	...	...	...	...	\$	<input type="text"/>
(6) Total installments paid [Page 11, Schedule R, Column (1)]	...	...	...	...	...	...	...	...	...	...	\$	<input type="text"/>
(7) Underpayment (Line 5 minus Line 6)	...	...	...	...	...	...	...	...	...	...	\$	<input type="text"/>
(8) *Interest on underpayment	...	...	...	...	...	...	...	...	...	...	\$	<input type="text"/>

\*NOTE: Interest must be calculated at 20 % per annum from 1st January, 2013 to 30th April, 2013 or date of payment whichever is the earlier.



V2 -12400ITRP13

2012

BIR Number

SCHEDULE T
STATEMENT OF BUSINESS LEVY LIABILITY AND COMPUTATION OF
INTEREST ON SHORT PAYMENTS

(See Instruction No. 39)

Date of Commencement of Business (dd mm yyyy)

To Nearest Dollar, Omit Cents/Commas

Table with 4 columns: Quarters (1), Actual Gross Sales/Receipts for 2012 (2), Business Levy Liability [0.2% of Column (2)] (3), Tax Offset [Limited to amount in Column (3)] (4). Rows include Jan. to Mar., April to June, July to Sept., Oct. to Dec., and TOTAL.

Table with 6 columns: Quarters, Business Levy Paid (5), Compute 90% of Column (3) (6), \*Compute 10% of Col (3) for the previous quarter (7), Minimum Payment Due Columns (6) + (7) (8), Short Payments Column (8) minus Columns (4) + (5) (9). Rows include Jan. to Mar., April to June, July to Sept., Oct. to Dec., and TOTAL.

NOTE: Interest must be calculated at 20 % per annum from the date following the end of the quarter when the Business Levy Liability became due to 30th April, 2013 or to the date of payment whichever is the earlier.

\* For the 2nd, 3rd and 4th quarters, compute 10% of Column (3) of the previous quarter and insert it in this column. For example: compute 10% of the 1st quarter (January to March) and insert the amount in this column against the 2nd quarter (April to June).

Name of Taxpayer .....

B.I.R. Number .....

ATTACH ALL DOCUMENTS TO THIS PAGE

CHECKLIST OF ATTACHMENTS (IF APPLICABLE)

WHERE COPIES ARE REQUESTED PLEASE RETAIN ORIGINAL DOCUMENTS FOR AT LEAST SIX (6) YEARS

- Original stamped and initialed T.D.4 forms from employers and/or Pensions Department. If the full period of 52 weeks is not covered by the T.D.4 form(s), attach a statement giving reasons for the unaccounted period.
- Statement in respect of allowable travelling expenses claimed supported by a letter from your employer certifying that you are required to travel in the course of your official duties. Where a dispensation has been granted attach a copy of the BIR's approval.
- Attach Proof of Payment of Covenanted Donations (Copy of Official Receipt from Approved Charity).
- Attach original documents from insurance companies/financial institutions in respect of cancellation of Deferred Annuity/Savings Plan.
- Tertiary education expenses—attach a detailed statement of expenses incurred together with copies of a letter of acceptance/registration from the institution, evidence of remittance of funds example receipts, bank drafts or cancelled cheques. [See Instruction No. 21].
- First Time Acquisition of Home (with effect from January 1, 2011). Original Statement from Financial Institution/Affidavit confirming First Time Acquisition and date property was acquired. Completion certificate if property was constructed. Lands and Buildings Taxes Receipt.
- Copy of Court Order/Deed of Separation showing Alimony and/or Maintenance payable. Attach proof of payment. Where payments are made in accordance with a Magistrate's Court Order for common-law relationship, attach a sworn Affidavit.
- Original Certificates/statements for Deferred Annuity/Tax Savings Plans showing premiums paid and stating that the Plan was approved by the Board of Inland Revenue.
- Copies of receipts of National Insurance payments made on behalf of domestic workers.
- Conversion to guest house—approval from the Minister with the responsibility for Tourism, detailed statement of expenditure and Completion Certificate.
- Original certificate of all interest/dividend received and tax deducted therefrom.
- Venture Capital Company Tax Credit Certificate.
- Attach Copy of Receipt of purchase and installation cost of CNG Kit and Cylinder and Certified Copy of ownership of vehicle.
- Attach Copy of Receipt of purchase of Solar Water Heating Equipment.
- Certificate of Pensions received from abroad—Certificate of Assessment.
- For each source of income shown on Schedule E, Page 5, attach statement showing gross income, gross profit, expenses or deductions and net income. Attach a copy of partnership accounts if you are a partner. Also attach relevant certificates in respect of exempt income.

HAVE YOU SIGNED THE FORM?  
GO BACK TO PAGE 2—GENERAL DECLARATION