



Government of the Republic of Trinidad & Tobago  
 Ministry of Finance  
 Inland Revenue Division

I.T. Form No. 76 (Supplementary)

INCOME YEAR: \_\_\_\_\_

NAME OF DIRECTOR OR EMPLOYEE: \_\_\_\_\_  Director  Employee

To Nearest Dollar  
 /Omit Cents  
 \$

Expenses, Payments made and Benefits, etc., provided by Employer.

1. Motor vehicles or equipment owned or leased by employer and available for private use:  
 Motor Vehicle Registration No./Equipment \_\_\_\_\_  
 Value of benefit in kind \_\_\_\_\_
  2. Entertainment \_\_\_\_\_
  3. Living accommodation provided:
    - a) Address and nature of accommodation \_\_\_\_\_
    - b) Is the property owned by the employer?  Yes  No  
 If YES, state the fair rental value \_\_\_\_\_
    - c) If the property is rented by the employer  
 State rent paid and landlord information as follows \_\_\_\_\_  
 Name \_\_\_\_\_  
 Address \_\_\_\_\_
    - d) Annual value of the use of furniture supplied by employer \_\_\_\_\_
    - e) Any other expenses borne by the employer such as, wages of domestic staff, telephone service and utilities \_\_\_\_\_  
 Total [b) to e)] \_\_\_\_\_
    - f) **Less amount reimbursed by the director/employee** \_\_\_\_\_  
 Enter Net Total \_\_\_\_\_
  4. Club Subscriptions \_\_\_\_\_
  5. Private Medical, Dental, etc., treatment \_\_\_\_\_
  6. Education of director's or employee's family \_\_\_\_\_
  7. Goods and Services supplied free or below market value, unless supplied under discount facilities equally available to employees generally.  
 (Enter the market value or the cost to the employer, whichever is higher, less the sum paid by the director or employee). \_\_\_\_\_
  8. Work carried out at the director's or employee's own house or on his property or assets.  
 (Enter cost to employer). \_\_\_\_\_
  9. Contributions by employer under Income Tax Act, section 134(6) **Plans/Contracts not approved by the Board of Inland Revenue.** \_\_\_\_\_
  10. Loans:
    - a) Interest on Loan(s) granted at rates below the repo rate of the Central Bank  
**(Enter difference between the rate granted and the repo rate).** \_\_\_\_\_
    - b) Outstanding Loan(s) written off by employer \_\_\_\_\_
    - Total [a) + b)] \_\_\_\_\_
  11. Any other expense or benefit not included above \_\_\_\_\_
- Total [Sum of 1 To 11]** (Enter amount in Box 5 of the TD4 Supplementary Form) \_\_\_\_\_

I declare that all the particulars required are fully and truly stated according to the best of my knowledge and belief.

Name of Employer/Company: \_\_\_\_\_ Signature: \_\_\_\_\_

Address of Employer/Company: \_\_\_\_\_ Date: \_\_\_\_\_