



ANTIGUA & BARBUDA - Inland Revenue Department

**TAXPAYER'S RECEIPT**

Tax Centre:

Document No. :

Due date:

**F14 Unincorporated Business Tax Quarterly Instalment Declaration**

Tax Account No.:

Tax Period:

Assessment Period date:

For Official use

Payment Date:

Amount

DUE

PAID

FOR:

Tax

Penalty

Interest

Total

Revenue Officer for Commissioner

**PART 1 - TAXPAYER AND TAX IDENTIFICATION**

Tax Account No.:

Document No. :

Filing number:

Tax Period:

FOR:

Assessment Period date:

Date Issued :

Due Date:

**PART 2 - TAX DECLARATION AND CALCULATION**

In accordance with Part V, Section 12 of the Unincorporated Business Tax Act 2016 of Antigua and Barbuda, I now submit a Quarterly Return in respect of the preceding Tax Period as indicated above.

A person who fails to pay tax that is due for a tax period, by the due date, is liable to a late payment penalty of 10% of the amount of tax due but not paid (Section 77 of the TAPA 2018) As of November 1, 2018.

Interest will be charged at a rate of 1% per month or part thereof for the period during which the tax remains unpaid (Section 57 of the TAPA 2018) As of November 1, 2018.

A person who fails to file a tax return by the due date, is liable for a late filing penalty equal to the greater of \$500.00 or 5% of the tax payable for the period to which the return relates (Section 72 of the TAPA 2018) As of November 1, 2018.

This form should be submitted to the IRD on or before close of business by the due date.

( 5 )	Number of Owners\Partners	( 5 )	_____
( 10 )	Total Tax Liability for Previous Tax Period	( 10 )	_____
( 15 )	Tax installment rate 3/12 (0.25)	( 15 )	<b>0.250</b>
( 20 )	Tax Installment to be Paid for the remitting period (L10 X L15)	( 20 )	_____
( 25 )	Quarterly Tax Installment approved by the Commissioner	( 25 )	_____
( 30 )	Total Amount Paid On Filing	( 30 )	_____
( 35 )	Balance to be Paid (L25-L30)	( 35 )	_____
( 40 )	Total Unincorporated Business tax paid for the year to date	( 40 )	_____

I certify that the information provided on this return and any documents attached are correct, complete and fully discloses all income of the related tax to the best of my knowledge. **It is a serious offence to submit a false return.**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Please **Print Name**)

Title: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 (If form is completed by someone other than taxpayer)