



Taxpayer Declaration

F48 - Pay As You Earn Annual Declaration

Doc No. _____ for IRD use

PART 1 – TAXPAYER IDENTIFICATION

Name _____ Tax Account No. _____

Address _____ Telephone _____

_____ Email _____

PART 2 TAX DECLARATION AND CALCULATION

Tax Period - Year _____ Beginning Month _____ Ending Month _____

In accordance with Part IV, Section 15 & 17 of The Personal Income Tax Act of Antigua and Barbuda, I now make payment of the tax withheld from the employment income paid to my employees during the tax period indicated above.

(10)	Total number of employees	<input type="text"/>	(10)
(15)	Total employment income paid	<input type="text"/>	(15)
(20)	Total allowances and benefits paid	<input type="text"/>	(20)
(25)	Total emoluments paid (line15+line20)	<input type="text"/>	(25)
(30)	Total income tax withheld	<input type="text"/>	(30)
(35)	Total income tax remitted	<input type="text"/>	(35)
(40)	Amount of tax owing (line30-line35)	<input type="text"/>	(40)

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

Signature _____

Date _____

Print Name _____

Contact Phone No. _____

Title _____