



GOVERNMENT OF THE VIRGIN ISLANDS ANNUAL RETURN OF PAYROLL TAX

This Return must be submitted to the Commissioner of Inland Revenue within thirty (30) days of the end of the year to which it relates. Please mail to :- Commissioner of Inland Revenue, Inland Revenue Department, Road Town, Tortola, British Virgin Islands.

Return for the year 20..._____

Name of business owner/Self-employed person:_____

Name of business:_____

Nature or type of business:_____

Mailing address:_____

Telephone no:_____

Fax no:_____

Number of employees paid during this year including deemed employees_____

Remuneration	Actual Remuneration \$	Notional Remuneration \$	Total Remuneration \$
Salary/Wages (including overtime)			
Leave pay (including severance pay)			
Commissions			
Bonuses (including profit sharing)			
Fees (including fees paid to directors, musicians and entertainers)			
Gratuities (including service charges)			
Benefits:- Accommodation			
Meals			
Travel (other than business)			
Private vehicle usage			
Stock/Stock options			
Employer contributions to non-approved retirement, life, hospital, health or medical insurance scheme			
All other payments, allowances and benefits			
Total Remuneration			
Payroll Tax Due			

I certify that the information on this return is true and correct.

Signature_____

Name (please print)_____

Date_____

RETURN OF REMUNERATION AND PAYROLL TAX P

(1) EMPLOYEE'S NAME	(2) NATURE OF EMPLOYMENT	(3) PERIOD OF EMPLOYMENT		(4) SALARY/WAGE INCLUDING OVERTIME, LEAVE, SERVICE CHARGES, REDUNDANCY AND ANY OTHER CASH PAYMENTS	(a) ACCOMMODATION	
		FROM	TO			

PAYABLE FOR THE YEAR ENDED 31st DECEMBER, 20...

(5) BENEFITS			(6)	(7)	(8)	(9)
(b) VEHICLE	(c) EMPLOYER CONTRIBUTIONS TO NON-APPROVED RETIREMENT OR INSURANCE SCHEMES	(d) OTHER BENEFITS	GROSS AMOUNT OF BENEFITS (Add Columns 5(a) - 5(d))	GROSS REMUNERATION (Add Columns 4 and 6)	PAYROLL TAX PAYABLE	FOR OFFICIAL USE ONLY

NOTES FOR COMPLETION OF THIS FORM

1. This return must be completed by every employer or self-employed person in respect of the Financial year stated. Please complete each section of page 2 and 3 in respect of each of your employees and deemed employees and in respect of yourself if you are self-employed.
2. This return is due within thirty days of the end of the year to which it relates.
3. Please ensure that the tax card, from P.1. or other authorized document, if using your own mechanized system is sent in with the return for each employee named therein.
4. When details of all employees, deemed employees and self-employed persons have been entered on the return please total all of the entries in each column from 4 to 8.
5. Any benefit or allowance paid or given which is not specified in the list of benefits must be recorded as "other benefits."