RETURN OF EMPLOYERS OF PERSONS EMPLOYED BY THEM

ORIGINAL **NAME AND ADDRESS OF EMPLOYER:** …….. **TIN:**…….. **SHEET No.**

1	2	3	4	5	6	7				8		9	10	
		EMPLOYEE'S PARTICULARS				REMUNERATION			Total (D)	Deductions Allowed		Total Deduction (G)		
**Sequential No.	Employee's TIN	Names and Addresses of Employees *(Name should be inserted Alphabetically- Surname first Christian or first names must be given in full. In the case of married woman, state Mrs.)	Months Employed	State whether wholly (W) or partly (P) employed	In the case of persons: (a) employed during the year, given name & address of previous employer (if any) (b) Leaving during the year, given name & address of new employer- if known	(A) Amount of Salaries, wages, commissions, overtime or other emoluments payable in money for the year ended 31st December 20	(B) Annual value of any residence quarters board and lodging	(C) Other Allowances in kind received by employee	(A) + (B) + (C)	(E) Statutory Deduction	(F) Employee's National Insurance Scheme Contribution	E + F	Income Tax Deducted (H)	For Official Use
					Carried Forward, TOTAL as necessary									

Submit ORIGINAL & DUPLICATE to the Commissioner General Guyana Revenue Authority **Keep TRIPLICATE for your records**

*** The total shown in the column "Income Tax Deducted" must agree with the total tax remitted for the year**

****Sequential Number should be stated also on the ……1A -1 or 7B Slips**

I.R.D.NO.2A(a)