



G0007 v1

# Guyana Revenue Authority

## Capital Gains Tax Return

Year of Assessment

Please read all instructions carefully and consult the guidelines provided at the end of this return.

It is a serious offence to make a false Capital Gains Tax Return.

☐ Amendment

Personal Information

<div>*1</div> Taxpayer Identification Number	<div>*3</div> Address <div>Changed? <input type="checkbox"/></div> <div>Line 1</div> <div>Line 2</div> <div>P.O. Box</div> <div>Country</div>
<div>*2</div> Name <div>Changed? <input type="checkbox"/></div> <div></div>	

Summary of Transactions

		Net Gain (\$)			
<div>*4</div> Change ownership of property	<div></div>				
<div>*5</div> Surrender of right in a Property	<div></div>				
<div>*6</div> Transfer of a right in a property	<div></div>				
<div>*7</div> Redemption of Share and Debentures	<div></div>				
<div>*8</div> Dissolution of business/liquidation of company	<div></div>				
<div>*9</div> Amalgamation or merger of businesses/companies	<div></div>				
<div>*10</div> Formation of a company	<div></div>				
<div>*11</div> Sale of household furniture, jewelry and works of art	<div></div>				
<div>*12</div> Commission/Reward in the promotion of a transaction without being part of it	<div></div>				
<div>*13</div> Other	<div></div>				
<div>*14</div> Net Capital Gain	<div></div>				
<div>*15</div> Exemptions	<div></div>				
<div>*16</div> Net Chargeable Capital Gain	<div></div>				
<div>*17</div> Rate of Taxes (percentage)					
<div>*18</div> Total Tax Payable					

Declaration

I, <div></div> <div></div> , certify that the information given, on this return and any attachment, is true & correct.		
<div>First Name</div> <div>Last Name</div>		
Signature	Title	Date
<div></div>	<div></div> <div>(indicate whether proprietor, director, manager, secretary, office holder in club or association duly authorised)</div>	