



BELIZE TAX SERVICE
INCOME TAX RETURN FOR EMPLOYEES
BASIS YEAR: _____



For Official Use Only
 Date: _____
 Signature: _____
BTS203

PART 1 - PERSONAL INFORMATION

A. SOCIAL SECURITY NUMBER (all nine digits)

B. NAME
 Last Name (Print) _____ First Name (Print) _____ Middle Name (Print) _____ Date of Birth _____
 Mr. _____
 Mrs. _____
 Miss _____
 Day | Month | Year

C. ADDRESS
 Present Mailing Address (Print) _____

D. MARITAL STATUS
 As at 31st December last, I was:
 Single Separated Divorced A Widow(er)

Name of Spouse _____ Date of Marriage _____
 Married to: _____ Day | Month | Year
 whose address is: same as mine Yes No
 If 'No' state address: _____
 If you became or ceased to be a resident of Belize last year: give
 Date of Entry _____ Date of Departure _____
 Day | Month | Year | Day | Month | Year

E. EMPLOYMENT
 Type of Work or Position _____
 Name of Present Employer _____

ATTACH COPIES OF TD4 SLIPS MARKED 'FOR EMPLOYEES'

| PART 2 - TAX DECLARATION AND CALCULATION | | | For office use only |
|--|----------------------|-------|---------------------|
| (1) Total Income from Employment (<i>List Overleaf</i>) | <input type="text"/> | (1) | |
| (20) Total Taxable Income | <input type="text"/> | (20) | |
| (30) Personal Relief (<i>See Overleaf</i>) | <input type="text"/> | (30) | |
| (31) Charitable Donations (<i>See Guide</i>) | <input type="text"/> | (31) | |
| (33) Contribution to Sports (<i>See Guide</i>) | <input type="text"/> | (33) | |
| (35) Contributions to Education (<i>See Guide</i>) | <input type="text"/> | (35) | |
| (36) Total Deductions (Line 30 + Line 31 + Line 33 + Line 35) | <input type="text"/> | (36) | |
| (40) Chargeable Income (Line 20 - Line 36) | <input type="text"/> | (40) | |
| (50) Rate of Tax (25%) | <input type="text"/> | (50) | |
| (51) Total Tax Payable (Line 40 x Line 50) | <input type="text"/> | (51) | |
| (55) Standard Tax Deduction | <input type="text"/> | (55) | |
| (60) Income Tax Due (Line 51 - Line 55) | <input type="text"/> | (60) | |
| (70) Tax Deducted at Source | <input type="text"/> | (70) | |
| (72) Tax Paid by Installments | <input type="text"/> | (72) | |
| (80) Total Credits (Line 70 + Line 72) | <input type="text"/> | (80) | |
| (90) Balance Due and Payable/Refund Due (Line 60 - Line 80) | <input type="text"/> | (90) | |
| (100) Line Filing Penalty (Line 90 x 3% per month) | <input type="text"/> | (100) | |
| (101) Interest on Balance Due (Line 90 x 1.5% per month) | <input type="text"/> | (101) | |
| (110) Balance Owing (Line 90 + Line 100 + Line 101) / Refund Due | <input type="text"/> | (110) | |
| Any Balance owing is due not later than 31st March | | | |

PART 3 - CERTIFICATION

I hereby certify that the information given in this return and in any document attached is true, correct and complete in every respect and fully discloses my Income from all sources.

Signature _____ Print Name _____
 Date _____ Telephone _____
 Bank/Credit Union _____ Branch Location _____
 Account Number _____ Email _____

Transit Account No _____ Branch Account No _____
 eg Scotia "61275-0012345" or Belize Bank "635022000123"

Important

IT IS A SERIOUS OFFENSE TO MAKE A FALSE INCOME TAX RETURN
Only one Employee Return is to be filed for the year and must include all your income from all sources

PART 4 - INCOME

| No. | NAME OF EMPLOYER | DISTRICT | NO. OF WEEKS EMPLOYED | EARNINGS <i>(box D on TD4)</i> |
|-----|------------------|--------------|-----------------------|-----------------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| | | TOTAL | | \$0.00 |

LESS THAN \$26,000

PERSONAL RELIEF OF \$25,600

\$26,000.01 - \$27,000

PERSONAL RELIEF OF \$24,600

\$27,000.01 - \$29,000

PERSONAL RELIEF OF \$22,600

\$29,000.01 AND OVER

PERSONAL RELIEF OF \$19,600

RATE OF TAX 25% OF CHARGEABLE INCOME