## TD Form AU - I

## SAINT LUCIA INLAND REVENUE DEPARTMENT: INCOME TAX EMPLOYEE DECLARATION APPLICATION FORM (TAX CODE)

Complete and file with the Inland Revenue Department:

- a. When called upon to do so by the Comptroller;
- b. Within 7 days of change in the allowances and deductions claimed;
- c. When you commence new employment.

## SHOULD YOU HOLD MORE THAN ONE FORM OF EMPLOYMENT, INFORM THE COMPTROLLER

 La	Last NameN										
First Name(s)											
Home Address											
Pla	Place of Employment										
		CLAIM FOR PERSONAL ALLOWANCES									
1.	For	<b>Self</b> Enter 25,00	00								
2.	For	Spouse unemployed and wholly maintained by me Enter 1,50	0								
3.	Chi	Child Allowance:									
	a.	For each child of myself or spouse whom I maintained including stepchild, adopted child or child born out of wedlock under 10 years Enter 1,0	000								
	b.	For each child born during the income year; irrespective of age was an invalid child Enter 1,00	00								
	c.	Education Allowance:									
		For each child who has attained the age of ten years or was a student child either in St. Lucia or elsewhere in connection with education/training Enter 2,00	00								
	d.	Higher Education Allowance:									
		For a child or relative irrespective of age who was a University student whether in St. Lucia or elsewhere.									
		Proof of maintenance and attendance at University is required Enter 5,000									
4.	4. Allowance for Dependent Relative Enter 350										
5.	5. Allowance for Housekeeper:										
		For my relative whom I maintain and resides with me for the purpose of caring for my children. This allowance may be claimed by an individual who is a widower or widow, or is unmarried, divorced or separated Enter 200									
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6. Life Insurance:	1/ (2) 11 1								
a. Premiums paid on the life of Self, Spor insurance companies is limited to the le									
i. Premiums Paid	ower or.								
ii. 10% of assessable income									
iii. \$8000									
b. In the case of premiums paid to insurar	<u> </u>								
business in St. Lucia the deduction sha									
50% of premiums paid or is limited to:									
7. Mortgage Interest: Max. \$30,000 (combine									
* * *	d by Self and applied for the acquisition o a dwelling house located in St. Lucia which								
	ether with family, or occupied rent free by								
members of family									
b. House Insurance(	·								
8. Student Loan: Max. \$30,000 (combined tot									
A resident individual is entitled to a material of any amount paid during the year of its second sec	· •								
money borrowed to finance <i>their</i> educa									
9. Purchase of Shares in Co-operatives So	ocieties: Max. \$5,000								
Shares purchased up to a maximum of	\$5000 shall be claimed.								
10.Registered Home Ownership Savings (F									
Relief is granted to a resident individua									
of \$6,000 may be claimed.	of your <b>FIRST</b> home. Up to a maximum								
11. Medical: (Min. \$400)									
Claim Medical Insurance Premium OR	R an allowance of \$400.00								
N.B. CERTIFICATE OF INTEREST IS									
12. Total Other Allowances & Deductions on Retur	,								
ADD 10	OTAL ALLOWANCES: ENTER HERE								
	CERTIFICATION								
I	hereby certify that the information given in the	nis Declaration							
is TRUE AND CORRECT.									
	<b>a.</b>								
Date	Signature								
ANY PERSON WHO MAKES A FALSE DECI SUMMARY CONVICTION TO A FINE OR IMI	LARATION IS GUILTY OF AN OFFENCE AND IS LIAB	BLE ON							
FOI	R OFFICIAL USE ONLY								
	EMPLOYER'S TPN:								
	EMPLOYEE'S TPN:								
NAME OF EMPLOYEE									
PLACE OF EMPLOYMENT									
TAX CODE NUMBER:									
Please give to your Accounts Department. Remember that you can be issued a new Code if your circumstances change.									
DATE	COMPTROLLER OF BUILD	ND DEVENUE							
DATE	COMPTROLLER OF INLAI	ND KEVENUE							