

Inland Revenue PO Box G9 Honiara Ph: 22556 www.ird.govt.sb

EMPLOYER'S ANNUAL SUMMARY Year

TAX	IDENT	IFICATION	NUMBER	

THIS RETURN IS TO BE COMPLETED AND FORWARDED TO INLAND REVENUE WITH 2 COPIES OF THER TAX CERTIFCATE FOR EACH

EMI	PLOYER DETAILS			
Na	me (E.g. Company Name or Individual Name if sole trader)			
Bus	iness Trading Name (if different to above)			
Pos	ital Address			
Tel	ephone Number			
Pla	ce of Business (street location of business)			
1	Total Tax Deducted during the year as per Tax Certificates			
2	Total Tax Paid to IRD for last year including tax paid this year for last year			
3	Tax Deducted but not paid to IRD. PLEASE PAY NOW			
4	Reason for variance			
5	Number of Tax Certificates Attached			
6	Total Gross Earnings of Employees as per tax Certificates Attached			
7	Total Gross Earnings of Employees where no tax has been deducted			
	DECLARATION	-1 414		
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	return is a true and accurate record of all employee payments and benefits made t year	hroughout		
Sia	ned Date			