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SUPPLEMENT

PROCLAMATIONS, RULES AND REGULATIONS

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No. 182

No. 247


THE INCOME TAX ACT

THE INCOME TAX (PRESCRIBED FORMS) (AMENDMENT) (NO. 3) ORDER, 2021

In exercise of the power conferred on the Commissioner General by sections 2, 66(2) and 67(6) of the Income Tax Act, and of every other power hereunto enabling, the following Order is hereby made:—

1. This Order may be cited as the Income Tax (Prescribed Forms) (Amendment) (No. 3) Order, 2021 and shall be read and construed as one with the Income Tax (Prescribed Forms) Order, 2015 (hereinafter referred to as the principal Order), and all amendments thereto.
2. The Schedule to the principal Order is amended by deleting forms S02, S04 and S04a and substituting therefor the following forms, respectively—

SCHEDULE



THE INCOME TAX ACT
THE REVENUE ADMINISTRATION ACT

EMPLOYER'S ANNUAL RETURN*

Please Read Instructions before Completing this Return

S02

Section A - GENERAL INFORMATION

1. Name of Employer:		2. Taxpayer Registration Number: (TRN) (Branch Sequence No.)	
3. NIS Reference Number:	4. Return/Calendar Year	5. Telephone Number:	6. Email Address:
7a. Business Address: <input type="checkbox"/> Check if New Address		7b. Mailing Address: (If different from 7a) <input type="checkbox"/> Check if New Address	
8. Please Select Category for Organization: <input type="checkbox"/> Foreign Embassy <input type="checkbox"/> High Commission <input type="checkbox"/> Consulate <input type="checkbox"/> Agency of United Nations <input type="checkbox"/> Ministry or Department of Government <input type="checkbox"/> Parish Council <input type="checkbox"/> KSAC <input type="checkbox"/> Other Organization			
9a. Number of persons employed during Return/Calendar Year: Complete Employee Schedule A (include persons who at any time during the year were employed by you. - part-time, temporary and casual workers)		10a. Did the business cease operation during the Return/ Calendar Year? <input type="checkbox"/> Yes <input type="checkbox"/> No	11. If return is not original indicate type: (If information being filed is in addition to that filed previously for the year tick Supplemental, if it is a correction of information for the return/ calendar year, tick Revised). <input type="checkbox"/> Supplemental <input type="checkbox"/> Revised
9b. Number of HEART Trainees employed during Return/Calendar Year		10b. If yes, state month and day the business ceased operation: (month / day)	

Section B - SUMMARY OF TAXES AND CONTRIBUTIONS DUE, REMITTED AND PAYABLE

	(a) Amount Assessed for Return/Calendar Year	(b) HEART Trainee Tax Credit	(c) = (a) - (b) Total Payable for Return/Calendar Year	(d) Total Prepaid Taxes/Contributions	(e) = (c) - (d) Balance Payable/(Refundable)
H.E.A.R.T	12				
N.I.S.	13				
N.H.T.	14				
Education Tax	15				
Income Tax	16				
Total	17				

Section C - Preparer's Details - (To be completed if prepared by person other than taxpayer)

Preparer's Name (Individual/Firm)	Address	TRN
		Contact Number


Section D - DECLARATION: (To be signed by taxpayer only)

NOTE: Any false statement made herein by you or on your behalf will render you liable to penalties and/or criminal proceedings.

I declare that the particulars given in this return are in accordance with the requirements of the applicable laws and that the total emoluments paid to each of my taxable employees and all statutory deductions have been fully and correctly stated to the best of my knowledge and belief.

Name

Signature/Electronic ID



Title/Position

Date

FOR OFFICIAL USE

Schedule A Employee Count:
Schedule B Employee Count:
Schedule C Employee Count:
Schedule D Trainee Count:

Form S02 (Revised 2021/07/13)

Tax Administration Jamaica

*Note: *This form relates to the annual returns for employee payroll deductions by an Employer, collectible by the Commissioner General in relation to taxes and contributions payable under the following provisions: income tax under the Income Tax Act (67), education tax, N.I.S., and N.H.T. contributions, respectively under certain provisions of the Income Tax Act (67) being made applicable by virtue of the Education Tax Act (Appendix, Regulation (2)), National Insurance Act (Section (5)(2) Second Schedule), National Housing Trust Act (1979 Regulations 5 and 6)*.

SCHEDULE, *contd.***NOTES & INSTRUCTIONS:****Who Must File:**

Every employer is required by law to make a return of the pay and statutory deductions of every person who was in their employment (whether full-time, part-time or temporary) for the year stated.

Where and When to File:

This return together with the relevant schedules are to be filed online only at www.jamaicatax.gov.jm any time after December 31st (of the Calendar/Return year), but not later than the 31st day of March of the following year.

Instructions for S02 - Employer's Annual Return

Complete all relevant lines/fields in Sections A, B and Section C.

Schedule A - Employee Emoluments, Deductions & PAYE Taxes & Contributions

List ALL persons employed during the year; whether full, part-time or temporary.

Copy totals to S02, Section B, column (a).

Employee List Number: Enter sequential number.

(d) Gross Emoluments Received in Cash: Enter the total value of each employee's gross emoluments received as money. For example: salaries, wages, overtime pay, bonuses, commissions etc.

(e) Gross Emoluments Received in Kind: Enter the total value of benefits/perquisites received including Accommodation Benefit, Motor Vehicle Benefit and Other Perquisites. Add columns (c), (k) and (l) of Schedule B and transfer totals to this column.

(f) Superannuation/Pensions, Agreed Expenses, Employee Share Ownership Plan: Enter the total amount deducted for each employee. Complete and attach Schedule C (Employee Deductions) and transfer totals from Schedule C to this column

(g) Number of weekly NIS and NHT Contributions: Enter the total number of weekly contributions (NIS and NHT

contributions) made on behalf of the employee for the year of assessment.

(h) NIS: Enter the total NIS payable (that is, the employee's plus employer's contribution) for each employee.

(i) NHT: Enter the total NHT payable (that is, the employee's plus employer's contribution) for each employee.

(j) Education Tax: Enter the total Education Tax payable (that is, the employee's plus employer's contribution) for each employee.

(k) PAYE Income Tax (Refunds): Enter amount calculated as tax less any refund amount for the calendar year for each employee. If refund amount is in excess of tax, show amount in parentheses (brackets) as a negative figure.

Total columns (h), (i), (j) and (k) and transfer to Section B of Return; column (a), Lines 12, 13, 14 and 15 respectively.

Schedule B - Employee Benefits/Perquisites

Total columns (c), (k) and (l) and enter in column (e) of Schedule A.

ACCOMMODATION

(b) Annual Rent Paid by Employer for Quarters or Residence: Enter the annual rent paid for any quarters or board or residence provided to any employee by reason of any office or employment of profit. Where the premises are owned by the employer enter the annual commercial rent which the premises would fetch if placed on the open market.

(c) Taxable Value of Quarters or Residence: The taxable value will be, in instances:

1. Where cash payments are made whether to a third party, landlord or to the employee, the total amount paid for the allowance is subject to income tax at 25%.
2. Where the employer is the landlord for the accommodation, the value of the accommodation shall be deemed to be the market value of the said accommodation.
3. Where an employee is provided with accommodation on the same premises where the employment is exercised or resides elsewhere and it can be established that it is

necessary for the employee to have that accommodation for the exercise of his employment; the employee shall be taxed on an amount not exceeding thirty percent (30%) of his gross emoluments excluding the cost/value of the accommodation.

4. Where an employee occupies premises owned or operated by any exempt body as defined in Section 12(h) of the Income Tax Act; the tax is computed on thirty percent (30%) of the gross emoluments excluding the cost/value of the accommodation.

(d) Address of Quarters/Residence for which Rent is being Paid: Enter the address/location of the quarters/residence

(e) Name of Landlord: Enter the name of the landlord; if employer owns premises, enter "Same as Employer".

MOTOR VEHICLE

(h) Original Cost of Motor Vehicle: Enter the actual price paid to acquire the motor vehicle.

(i) Age of Vehicle: Enter the age (in years) of the motor vehicle; that is, the number of years between the motor vehicle's year of manufacture and year of assessment being reported.

(j) % Private Usage: Enter the percentage of use that the motor vehicle was used for private purposes.

(k) Vehicle Benefit Subject to Tax: Enter the taxable value of the Motor Vehicle Benefit. Refer to Schedule at Appendix A, Regulation 11 of The Income Tax Act or Technical Bulletin or the Employers' Guide to PAYE available online at www.jamaicatax.gov.jm

OTHER


(l) Other Perquisites or Benefits in Kind: Enter the value of any other benefit.

Schedule C - Deductions:

List ALL persons employed during the Calendar/Return Year; whether full, part-time or temporary and show the relevant deductions for each employee. Copy totals from column (g) of Schedule C to respective employee rows of column (f) of Schedule A.

Schedule D - Heart Trainee Information: Enter information for Heart Trainee on this schedule and transfer total trainee credit to Section B Line 12b of Return.

SCHEDULE, *contd.*



THE INCOME TAX ACT
**SELF EMPLOYED PERSONS ANNUAL RETURN OF INCOME, TAXES
 AND CONTRIBUTIONS PAYABLE**
Please Read Notes and Instructions on Page 4 before Completing this Return

S04

Year of Assessment

Accounting Period ▶ Begins

Year	Month	Day

 Ends

Year	Month	Day

Section A - GENERAL INFORMATION

1. Name (Last Name) (First Name) (Middle Name)			2. NIS Number	3. TRN
4. Home Address:		5. Business Mailing Address: (if different from 4)		6. Telephone Number
				7. Email address
8. Residency Status (See definition for Residency Status at bottom of Page 4) <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <i>If Non-Resident, State duration of stay in the Island: _____ and see Instructions on Page 5</i>				
9. Trade Name	10. Start Date of Trade	11. Occupation:	12. Tick if applicable: <input type="checkbox"/> New Address <input type="checkbox"/> Revised Return	
13. Are you gainfully employed in Jamaica? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If "Yes", go to Section B; if "No", go to next question</i>				
14. Are you employed to, (a) a Foreign Embassy, (b) High Commission, (c) Consulate or Agency of the United Nations or (d) Any other International Organization entitled to privileges under the Diplomatic Immunities and Privileges Act? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Section B - SUMMARY OF INCOME (Complete Schedule 1 or Upload Financial Statement where applicable - See Notes)

INCOME FROM TRADE, BUSINESS, PROFESSION AND VOCATION

Gross Receipts/ Sales/ Income	1	
Cost of Goods Sold	2	
Gross Operating Profit/(Loss) (Section B, Line 1 less Line 2)	3	
Business/Administrative Expenses	4	
Net Adjustments (Complete page 2 of Schedule 1)	5	
Total Expenses (Section B, Line 4 less Line 5)	6	
Net Profit / (Loss) from Trade, Business, Profession and Vocation (Section B, Line 3 less Line 6)	7	
Share of Partnership Income (Complete Schedule 4)	8	

INCOME FROM RENTAL OF PROPERTY

Gross Rental from Land, House or other Property	9	
Rental Expenses	10	
Net Rental Income (Section B, Line 9 less Line 10)	11	

INCOME FROM ALL EMPLOYMENT AND OFFICES

Salary, Wages, Bonus, Fees, Commission (Upload P24)	12	
Cash Allowances (Traveling, housing, entertainment, etc.)	13	
Annual Value of Perquisites (Car, credit cards, etc.)	14	
Annual Value of Quarters of Residence (See Notes for calculation)	15	
Income from Other Employment (Employers other than Line 12 - Upload P24s)	16	
Total Income from All Employment and Offices (Add Section B, Lines 12, 13, 14, 15 & 16)	17	
DEDUCT: Expenses Claimed (Complete Schedule 3)	18	
NIS deducted by Employer(s) (Employee Contributions only)	19	
Superannuation	20	
ESOP	21	
20 + 21 = 22		
Total Deductions (Add Section B, Lines 18, 19 and 22)	23	
Net Taxable Income arising from Employment & Offices (Section B, Line 17 less Line 23)	24	
Income From Domestic Employment, Embassies, etc.	25	
Domestic Employment	25	
Embassies etc. Employment	26	
25 + 26 = 27		

SCHEDULE, *contd.*

Section B - SUMMARY OF INCOME (Complete Schedule 1 or Upload Financial Statement where applicable - See Notes) Continued											
INCOME FROM INVESTMENTS AND OTHER SOURCES (Upload/Complete Schedule 4)											
Pensions (Attach/Upload supporting documents)									28		
Gross Preference Dividends	Gross Dividends other than Preference Dividends (Franked) Jamaican Companies (Dividends taxed at source)									31	
29	+	30	=								
Gross Interest Received	Discounts									34	
32	+	33	=								
Other Distributions (Excluding Gross Dividends and Gross Interest Received)									35		
Annuities									36		
Total Income from Investments, Other Sources (Add Section B, Lines 28, 31, 34, 35 and 36)										37	
INCOME FROM SOURCES OUTSIDE THE ISLAND:											
Net Business Profits/(Loss)	Employment Income		Pensions								
38	39		40								
Gross Dividends	Gross Interest Received		Other Income Outside the Island								
41	42		43								
Total Income from Sources Outside the Island (Add Section B, Lines 38, 39, 40, 41, 42 and 43)										44	
Non Executive Directors' Fees										45	
Other Income										46	
Total Income from all Sources excluding Dividends other than Preference Dividends (Unfranked) (Add Section B, Lines 7, 8, 11, 24, 27, 37, 44, 45 and 46)										47	
Gross Dividend other than Preference Dividends (Unfranked Income) Received from Companies Resident in Jamaica										48	
Total Income from all Sources (Add Section B, Lines 47 and 48)										49	
Section C - EXEMPTIONS AND FRANKED INCOME											
Pension Exemption	Age Exemption		Other Exemptions								
1	+	2	+	3						=	4
Gross Dividend other than Preference Dividends (Franked) (Transfer from Section B, Line 30)										5	
Total Exemptions and Franked Income (Add Section C, Lines 4 and 5)										6	
Total Income from all Sources excluding Dividends other than Preference Dividends (Unfranked) less Exemptions and Franked Income (Section B, Line 47, less Section C, Line 6)										7	
Section D - DEDUCTIONS AND STATUTORY INCOME											
Total Capital Allowances (Upload Schedule 2)									1		
Covenanted Donations (Complete Schedule 4 and upload proof of covenant - See Notes)									2		
Total Income from all sources excluding Dividends other than Preference Dividends (Unfranked) less Exemptions and Franked Income less Capital Allowance and Covenanted Donations (Section C, Line 7 less Section D, Lines 1 and 2)										3	
NIS paid on income from Self-employment									4		
Allowable Loss (Transfer from Section E, Line 4)									5		
Contribution to Approved Retirement Scheme (Only if Section B, Line 20 is nil)									6		
Other Donations (Restrict to Section B, Line 48 plus Section D, Line 3 less Lines 4, 5, and 6) *(5/105) or restrict to zero if Line 3 is less than zero (Complete Schedule 4)									7		
Total Deductions (Add Section D, Lines 1, 2, 4, 5, 6 and 7)										8	
Statutory Income excluding Dividends other than Preference Dividends (Unfranked) (Section D, Line 3 less Lines 4, 5, 6 and 7)										9	
Section E - AVAILABLE LOSSES (Please provide a response to Question 4)											
Losses brought forward from previous years									1		
Current losses (Equals Section D, Line 3 *(-1) if Section D, Line 3 is negative)									2		
Total losses available (Add Section E, Lines 1 and 2)										3	
Allowable Loss: Is business within the first 6 years of trading OR is Gross Sale less than \$10,000,000? (See Note 1) <input type="checkbox"/> Yes <input type="checkbox"/> No									4		
Total losses available to carry forward (Section E, Line 3 less Line 4)										5	
Note 1 - If "Yes" - Allowable Loss is restricted to the profits as a result of Section D; Line 3 less Section D, Line 4 If "No" - Allowable Loss is restricted to 50% of the profits as a result of Section D; Line 3 less Section D, Line 4											

SCHEDULE, *contd.*

Section F - COMPUTATION OF INCOME TAX			
Gross Dividends other than Preference Dividends (Unfranked income) received from Companies Resident in Jamaica (Transfer from Section B, Line 48)	1		
Statutory Income subject to tax at rates of 0%, 25% and 30% (Transfer from Section D, Line 9)	2		
Tax on Net Statutory Income at 0% (Line 2 to the maximum of \$1,500,096.00)	3	Statutory Income	Rate
Tax on Net Statutory Income at 25% (Line 2 less Line 3 to a maximum of \$4,499,904.00, restricted to zero)	5	x	0% =
Tax on Net Statutory Income in excess of \$6,000,000.00 at 30% (Line 2 less \$6m restrict to zero)	7	x	25% =
Tax on dividend other than preference dividend transferred from Section F, Line 1 (See Note 2 below)	9	x	30% =
Total Tax payable on Statutory Income (Add Section F, Lines 4, 6, 8 and 10)	11	x	15% =
Note 2 - If Section 12(1)(i), (ab) of The Income Tax Act applies, enter tax payable and withheld at Lines 15 and 26 respectively; else enter at Line 15 only.			
Non-Refundable Tax Credits (Upload Certificates and/or Supporting Documents where applicable)			
Double Taxation Relief (Restrict to tax associated with income at Section B, Line 44)	12		
Contractor's levy (Upload Certificates)	13		
Employment Tax Credit (ETC) (Complete Schedule 7)	14		
Tax deducted from dividend other than preference dividend from Companies Resident in Jamaica	15	+	16
Other Non-Refundable Tax Credits (Attach Supporting Documents)	16	=	17
Total Non-Refundable Credits (Add Section F, Lines 12, 13, 14 and 17)	18		
Tax on Statutory Income less Non-Refundable Tax Credits (Section F, Line 11 less Line 18; restricted to zero)	19		
Refundable Tax Credits (Exclude any previous refund claim - Upload Certificates and/or Supporting Documents)			
P.A.Y.E. Tax Deducted by Employer(s) (Upload P24s)	20		
Tax deducted from other Distributions (Excluding Gross Dividends and Gross Interest Received)	21		
Tax deducted from Gross Interest Received at Section B, Line 32	22		
3% Tax Withheld on Specified Services	23	-	24
		=	25
Tax on dividend other than preference dividend received from Companies resident in Jamaica for pensioners & persons age 65 & over	26		
Tax Withheld on Gross Preference Dividend	27		
Other Refundable Tax Credits	28		
Total Refundable Tax Credits (Add Section F, Lines 20, 21, 22, 25, 26, 27 and 28)	29		
NET TAX PAYABLE / (REFUNDABLE) (Section F, Line 19 less Line 29) (Transfer to Section I, Line (1a))	30		
Section G - COMPUTATION OF EDUCATION TAX			
EDUCATION TAX Note 3 Enter nil at Section G, Line 5 if Line 4 is less than current annual minimum wage (i.e. \$ _____)			
Pension, Dividends, Interest, Other Distributions and Annuities (Add Section B, Lines 28, 29, 32, 35, 36, 40, 41 and 42)	1		
Employment Income earned after age 65 (If you become 65 within the year of Assessment, only include the portion earned over age 65)	2		
Assessable Earnings (Section D, Line 9 less Section G, Lines 1 and 2)	3		
Education Tax Payable (Section G, Line 3 x Rate _____ %)	4		
Education Tax deducted/paid by Employer(s) (Employee contributions only)	5		
NET EDUCATION TAX PAYABLE/(REFUNDABLE) (Section G, Line 4 less Line 5; Transfer to Section I Line 2, Column a)	6		

SCHEDULE, *contd.*

Section H - RELATED PARTY TRANSACTIONS			
1. During the current Year of Assessment did you conduct any transaction with an Affiliated Company or Connected Person? <input type="checkbox"/> Yes, complete Schedule 8 - Declaration of Related Party Transactions. <input type="checkbox"/> No			
Section I - SUMMARY OF TAXES AND CONTRIBUTIONS PAYABLE, AND BALANCES DUE			
		(a) Net amount Payable/ (Refundable) (Transfer respective net amounts payable from Section F, G and Schedules A and B)	(b) Estimated Tax / Contribution Paid
			(c) Balance <i>(a) - (b) = (c)</i>
Income Tax (Transfer from Section F Line 30)	1		
Education Tax (Transfer from Section G Line 6)	2		
NIS (Transfer from Schedule B, Section C Line 10)	3		
NHT (Transfer from Schedule A, Section C, Line 11)	4		
Total Taxes and Contributions	5		
Section J - PREPARER'S DETAILS (To be completed if prepared by person other than Taxpayer)			FOR OFFICIAL USE
Preparer's Name:(Individual or Firm)	Address	TRN	
		Contact Number	
Section K - DECLARATION - To be signed by taxpayer only			
<p><i>Note: Any false statement made herein will render you liable to penalties and / or criminal proceedings.</i></p> <p>I declare that to the best of my knowledge and belief this Return and its accompanying Schedules and Statements are a true and correct representation of the whole of my income from every source whatsoever for the stated year of assessment.</p>			
_____ Taxpayer's Signature		_____ Date	

DEFINITION

Section A - Box 8: Residency Status

If you are in Jamaica for 183 days or more in a tax year, you are resident for that year. If you come to Jamaica to live for two years or more, you are resident from the date of arrival.

You are also likely to be Jamaican resident, if you come to Jamaica regularly each year and you are in Jamaica for an average of 90 days or more in a tax year. This is usually worked out over a maximum of four consecutive tax years.

SCHEDULE, *contd.*

Notes & Instructions for the Completion of S04

This form relates to the annual returns for Self Employed Persons, collectible by the Commissioner General, Tax Administration Jamaica, in relation to taxes and contributions payable under provisions of the following Acts: Income Tax Act, Education Tax Act, National Insurance Act, National Housing Trust Act and the Tax Collection Act.

This form is to be completed by all Self-employed Persons. The completed form is to be accompanied by a copy of the Statement of Financial Position (Balance Sheet) and Statement of Profit or Loss (and such other subsidiary accounts as are necessary for a proper understanding of these accounts) and a copy of the individual's income tax computation. Schedule 1, Details of Trading, should be completed by businesses with Gross Receipts under \$10 million instead of the Financial Statements. All other persons must submit proper Financial Statements.

This return together with the relevant Schedules are to be submitted online at www.jamcattax.gov.jm after the 31st of December (of the year of assessment), but not later than the 15th of March of the following year.

Section A - GENERAL INFORMATION

Box 8: For Non Residents, Tax on Statutory Income is at the rate of 25% only.

Box 11: New Address

Tick box if there has been a change of address since filing of the last Return.

Box 11: Revised Return

Tick box if return is a Revised Return, that is, changes are being made to a previously-submitted Return.

Section B - SUMMARY OF INCOME**INCOME FROM TRADE, BUSINESS, PROFESSION AND VOCATION****Lines 1 - 4: Gross Sales/Income, Cost of Sales/Operations, Business Expenses**

Include that information relating to trade, business, profession or vocation, or cultivation of farmland as shown in your financial statements (or Schedule 1 as the case may be). Should you carry out more than one activity, a breakdown showing gross receipts and the related expenses of each activity should also be submitted.

Line 5 - Net Adjustments

Complete the adjustment form on Schedule 1 to determine the value of Net Adjustments. Adjustments should be made for items that could result in an increase or reduction to profit. Expenses not allowable for income tax purposes, for example, depreciation, donations, expenses not wholly and exclusively incurred for the purposes of acquiring the income and income tax paid are to be added back. Any capital gain should be deducted. The net adjustment should be taken to Section B, Line 5.

INCOME FROM RENT OF PROPERTY**Lines 9: Gross Rental from Land, House or Other Property**

Enter the total amount received from renting and/or leasing real property.

Line 10: Rental Expenses

A statement showing how the total of expenses is made up should be submitted. Normal repairs and replacements are allowable expenses. The cost of improvements, reconstructions or alterations is not repairs. Amounts payable by the tenant must not be included.

INCOME FROM ALL EMPLOYMENTS & OFFICES**Lines 12 - 16:**

Enter relevant amounts received (cash and kind) from all employments. Attach P24s.

If in receipt of an Approved Non-Taxable Travelling Allowance, do not include this amount in Line 13.

Line 15: Annual Value of Quarters of Residence

- i) Where rent is paid directly to the employee or the Landlord the full amount is taxable.
- ii) Where the employer is the Landlord of the accommodation provided the Market Value is the taxable sum.
- iii) Where the employee is required to live in the accommodation provided by the employer the value of the benefit shall not exceed 30% of his emolument (excluding the value of the accommodation).

iv) Where the employee lives in accommodation owned or operated by an approved Charitable Organization the value of the benefit shall not exceed 30% of his emolument (excluding the value of the accommodation).

Line 18 - Expenses Claimed

Expenses exclusively incurred in acquiring the income, which were not reimbursed by the employer, may be claimed here. Attach Schedule 3 - Employee Expenses Claim.

INCOME FROM INVESTMENTS & OTHER SOURCES

Line 29 - 36 Dividends, Interest, Discounts, Annuities In arriving at the amount, exclude Unfranked Dividends and Capital Distributions.

The gross amount of income received should be entered. Any credit for income tax deducted will be given in Section F - Tax Computation. - Attach certificates and/or warrants.

Line 38 - 43 Sources Outside the Island

The amount to be included is the amount arising or accruing, whether or not the whole of the income will be actually received in Jamaica. In arriving at the income, you are entitled to deduct any expense wholly and exclusively incurred in acquiring the income.

Double Tax Credit is given in Section F for any tax deducted in countries with which a Double Taxation Agreement (DTA) exists. If, however, you are a non-resident, the amount returned should be restricted to the amount of your actual income remitted into the Island during the year.

Section C - EXEMPTIONS AND FRANKED INCOME**Lines 1 - 3: Pension Exemption, Age Exemption & Other Exemptions**

If under 55 years, the pension income only up to a maximum of \$80,000 derived from a Statutory Pension Scheme or a Superannuation Scheme approved by the Commissioner General is exempt from tax; OR, if 55 years or over, \$80,000 of income from pension and any other source is exempt from tax. If 65 years or over, \$80,000 of income derived from any source is exempt.

Section D - DEDUCTIONS AND STATUTORY INCOME**Line 1: Capital Allowances**

If you claim any capital allowances, you are required to complete and attach Schedule 2

Capital Allowances and enter the appropriate amount in Line 1.

Line 2: Covenanted Donations

Enter any amounts made in respect of annuities or other annual payments secured by deed of covenant in favour of the University of the West Indies, the University of Technology or any other approved institution. (Upload proof).

Line 7 - Other Donations

The amount or value of a donation to an Approved Charitable Organization (whether money or property) should not exceed the allowable deduction of 5% of Statutory Income.

Section F - COMPUTATION OF INCOME TAX

Lines 3, 5, 7 & 9: Tax Payable on Statutory Income
Declare amounts subject to applicable tax rates.


Lines 13, 15, 21, 22, 23 & 26: Credits

All credit claims are to be substantiated by the submission of the relevant certificates, for example, Withholding Tax Certificate, Contractor's Levy Receipt.

Section I - SUMMARY OF TAXES AND CONTRIBUTIONS PAYABLE AND BALANCES DUE**Lines 3 - 4**

NIS Payable and NHT Payable
Transfer from NHT Schedule A and NIS Schedule B.

SCHEDULE, *contd.*

 <p>Tax Administration Jamaica</p>	<p>The Income Tax Act</p> <p>DECLARATION OF ESTIMATED INCOME, TAXES AND CONTRIBUTIONS PAYABLE</p> <p>(SELF EMPLOYED RESIDENT INDIVIDUALS)</p>	<p>S04a</p>						
<p>Accounting Period ▶ Begins <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px;">Year</td><td style="width: 20px;">Month</td><td style="width: 20px;">Day</td></tr></table> Ends <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px;">Year</td><td style="width: 20px;">Month</td><td style="width: 20px;">Day</td></tr></table> Year of Assessment</p>		Year	Month	Day	Year	Month	Day	
Year	Month	Day						
Year	Month	Day						
<p>i This form is for Self Employed Individuals. This declaration is due on or before March 15 each year and can be filed at any Tax Office or on-line at www.jamaicatax.gov.jm.</p> <p>Write figures to the nearest dollar.</p>		<p>Check box if form is a Revised Declaration and state reason below <input type="checkbox"/> Revised Return</p>						
<p>Section A – TAXPAYER INFORMATION</p>								
1. Last Name:		First Name:	Middle Name:	2. NIS Number	3. TRN			
4. Current Business Address			5. Current Mailing Address (if different from 4)					
Shop No. and Plaza name ▶ Street No. and name ▶ City / Town / District ▶ Post Office and P.O. Box ▶ Parish / Postal Code ▶ Country ▶								
6. Residency Status?		If Non-Resident, State duration of stay in Island		7. Telephone Number				
<input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident				8. Email address				
9. Are you a domestic worker? (cook, maid, nanny, laundress, butler, general help, gardener or chauffeur) <input type="checkbox"/> Yes <input type="checkbox"/> No								
10. Are you a Jamaican citizen employed by an Embassy, High Commission, Consulate or United Nations Agency located in Jamaica? <input type="checkbox"/> Yes <input type="checkbox"/> No								
(If your answer to questions 9 or 10 is "yes", the rate for Income at Section G, Line 13a should be 2 percent. If "no" use rate of 3 percent at Line 13b.								
11. Do you anticipate a significant change in your Statutory Income for the coming year of assessment? <input type="checkbox"/> Yes <input type="checkbox"/> No								
(If "yes", State reason for change, in Section F, below box 2 overleaf)								
Section B – ESTIMATED TAXES & CONTRIBUTIONS PAYABLE				OFFICIAL USE				
Estimated Income Tax Payable (Section G, Line 8)		1						
Estimated Education Tax Payable (Section G, Line 10)		2						
Estimated NIS Payable (Section G, Line 12)		3						
Estimated NHT Payable (Section G, Line 14)		4						
Section C – ESTIMATED QUARTERLY TAXES & CONTRIBUTIONS PAYABLE								
Estimated Quarterly Income Tax (Section B, Line 1 x 0.25)		1						
Estimated Quarterly Education Tax (Section B, Line 2 x 0.25)		2						
Estimated Quarterly NIS (Section B, Line 3 x 0.25) . .		3						
Estimated Quarterly NHT (Section B, Line 4 x 0.25) . .		4						
Section D – PREPARER'S DETAILS (To be completed if prepared by person other than taxpayer)								
Name		Address		TRN				
				Contact No.:				
Section E – DECLARATION (To be signed by taxpayer only)								
I declare that the estimated total income shown has been computed in accordance with the provisions of the Income Tax Act.								
Signature				Date				

SCHEDULE, *contd.*

Form S04a	Name:		TRN:	
Section F - STATUTORY INCOME SUBJECT TO ESTIMATED TAXES AND CONTRIBUTIONS				
INCOME TAX				
Statutory Income from immediately preceding year of assessment (Transfer from Section D, Line 9 S04)	1			
Net increase/(decrease) in Statutory Income	2			
Reason for increase/(decrease):				
Estimated Statutory Income (Add lines 1 and 2)	3			
Less Income on which tax is withheld at source:-				
Employment Income from Jamaica (Transfer from Section B, Line 24 S04)	4			
Employment Income from sources outside the island (Transfer from Section B, Line 39 S04)	5			
Pension (Jamaican) (Transfer from Section B, Line 28 S04)	6			
Pension (Sources Outside the Island) (Transfer from Section B, Line 40 S04)	7			
Gross Dividend (Jamaican Company) (Transfer from Section B, Line 48 S04)	8			
Gross Dividend (Sources Outside the Island) (Transfer from Section B, Line 41 S04)	9			
Gross Interest Received (Jamaican Company) (Transfer from Section B, Line 32 S04)	10			
Gross Interest Received (Sources Outside the Island) (Transfer from Section B, Line 42 S04)	11			
Annuities (Transfer from Section B, Line 36 S04)	12			
Non-Executive Directors' Fees (Transfer from Section B, Line 45 S04)	13			
Income from Self-employment earned overseas	14			
Other Income	15			
Total Income on which tax is withheld at source (Add Lines 4 to 15)	16			
Statutory Income Subject to Estimated Income Taxes (Line 3 less Line 16)	17			
Statutory Income Subject to Contributions (Line 17 less Line 14)	18			
SECTION G - ESTIMATED TAXES AND CONTRIBUTIONS				
INCOME TAX				
Tax on net Statutory Income at 0% (Section F Line 4 up to the maximum of current threshold, restricted to zero)	1	X	0%	= 2
Tax on Statutory Income at 25% (Section F Line 17, less Section G Line 1, to a maximum of J\$4,499,904.00 or less, restricted to zero)	3	X	25%	= 4
Tax on Statutory Income in excess of J\$6m at 30%	5	X	30%	= 6
Credits	7			
Estimated Income Tax payable (Add Lines 2, 4 and 6) and less Line 7 (Transfer to Section B line 1)	8			
EDUCATION TAX				
Estimated Assessable Earnings for Education Tax (Transfer Section G Line 10 to Section B Line 2)	9	X	2.25%	= 10
NIS Contribution				
Estimated Statutory Income assessable to NIS Section G Line 11 restricted to:- - Zero, where Section F Line 4 is greater than or equal to \$4.5m; or - \$4.5m, where Section F Line 4 zero; or - \$4.5m minus Section F Line 4, where Section F Line 4 is greater than zero up to a maximum of \$4.5m; or - \$216,666.67, where Section F Line 16 is \$216,666.67 or less. (Transfer Section G Line 12 to Section B Line 3)	11	X	6%	= 12
NHT Contribution				
Estimated Statutory Income Assessable to NHT (If your answer to question 9 or 10 in Section A is "yes", put amount in 13a otherwise use 13b). (Transfer Section G Line 14 to Section B Line 4)	13a	X	2%	= 14
	13b	X	3%	

Dated this 31st day of December, 2021.

DAVE JEFFERY,
for Commissioner General.