



THE INCOME TAX ACT
**RETURN OF PAYMENTS MADE AND AMOUNTS WITHHELD
(DIVIDENDS)**

IT13

i This form is to be completed by any person who is required to deduct Income Tax from dividend payments to shareholders.

This return is due within fourteen days after the end of any month in which any payment of dividend was made and must be filed on-line at www.jamaicatax.gov.jm.

Section A: GENERAL INFORMATION

1. Name of Withholding Body		2. Taxpayer Registration Number (TRN)	
		3. Return Period (yyyy-mm-dd to yyyy-mm-dd) _____ to _____	
4. Business Address		5. Mailing Address (if different from 4)	
6. Telephone Number	7. Fax Number	8. E-mail Address	
9. Date Dividends Declared: _____		10. Date Dividends Paid: _____	
		11. Tick Appropriate Box: <input type="checkbox"/> New Address <input type="checkbox"/> Revised Return State reason below	
12. Reason for Revised Return:			

Section B: SUMMARY OF DIVIDENDS DECLARED, PAYMENTS AND AMOUNT WITHHELD (Complete Schedule 1 Overleaf)

Total Dividends Declared (Transfer total of Schedule 1, column (g))	1	
Total Dividends Paid (Transfer total of Schedule 1, column (h))	2	

Section C: TAX PAYABLE

Total Tax Withheld/ Payable (Transfer total of Schedule 1, column (j)) 3		
Preparer's Details - (Completed if form not prepared by Taxpayer)		
Preparer's Name: (Individual/Firm)	Address	TRN
		Contact Number

OFFICIAL USE	

Section D - DECLARATION

Note: Any false statement herein will render you liable to penalties and/or criminal proceedings.

I declare that, to the best of my knowledge and belief, this is a true and correct return of the information and particulars given in the form.

Name of Responsible Officer	Title
Signature	Date

