



**RETURN OF INCOME FOR THE YEAR ENDED 30 JUNE 2011 AND CLAIM FOR ALLOWANCES FOR  
THE YEAR COMMENCING 1 JULY 2011**

**Important notes**

You are required by law to make a return of your assessable income. This form must be duly completed, signed, bundled together with any relevant documents specifically requested within this form and submitted to the Income Tax Office at St. Jago's Stone Block, 331 Main Street, Gibraltar. If you require any assistance in completing this form please contact this Office on Tel. No. 200 74924 or by email at [paye@gibraltar.gov.gi](mailto:paye@gibraltar.gov.gi)

**DEADLINE**

**This Tax Return must be received by not later than the 30 November 2011.**

You will be charged a £50 penalty if your tax return is received on or after 1 July 2012. Further penalties will apply if the failure continues after this date.

**Notes for completing this return**

- 1. Employment** - Enter your, and/or your spouse's employer's name and the total gross amount earned. Include fees, bonuses, commissions, tips, etc.
- 2. Benefits In Kind** - Include amounts paid by your, and/or your spouse's employer in respect of private and personal expenses.
- 3. Trade, business, profession or vocation** - This must be completed by everyone who is in receipt of income from a trade, business, profession or vocation (including part-timers). Enter the nature of your trade, profession, etc., and the business name and address (if applicable). Enter your profits for the year ended 30 June 2011. For a new business, enter the date you commenced trading. An income and expenditure account must be submitted in support of your declaration. Accounts must be prepared to 30 June 2011.
- 4. Pensions and annuities** - Enter full details of pension/annuity received including by whom paid.
- 5. Property letting** - If you and/or your spouse receive rents from property situated in Gibraltar, enter the address of the property. Please state whether you and/or your spouse own the property, or if shared with others please state the percentage of your share. An income and expenditure account must be submitted. Accounts must be prepared to 30 June 2011. If any dwelling is let rent free or at a reduced rent please give particulars.
- 6. Dividends and/or trust income** - Enter the source and net amount received.
- 7. Other income** - Enter any other income received by you and/or your spouse not entered elsewhere. Please give full details of the source of the income.
- 8. Expenses in employment** - Enter details of any expenditure incurred by you and/or your spouse in performing your duties.
- 9. Gift aid** - Give details of any payments made by you and/or your spouse.
- 10. Election for Allowances Based System (ABS) or Gross Income Based System (GIBS)** - Before making your election, please read the conditions applicable to GIBS. These are available on the Gibraltar Government website - [www.gibraltar.gov.gi/taxation](http://www.gibraltar.gov.gi/taxation) or from the Income Tax Office.
- 11. Spouse allowance** - Enter your spouse's details if living with you or wholly maintained by you. If you are separated or divorced, please give details under Section 3 No. 13.
- 12. Child allowance** - Enter the details of any child for which you wish to claim. If over the age of 16 please provide proof of the College or University he/she is attending.
- 13. Alimony and maintenance** - Give details of any payments you make under a court order, settlement, etc., to your spouse and/or children if you are separated or divorced.
- 14. Nursery school allowance** - You may claim for this allowance if you have a child who has reached the age of three by the 31 August 2011 and is attending an independent nursery school in Gibraltar for the full school year.
- 15. Disabled individual** - If you maintain a child who is registered at the Department of Social Security as a disabled individual you may claim for this allowance.

F C Carreras

Commissioner of Income Tax

1 July 2011

## Notes for completing this return (contd)

- 16. Dependant relatives** - Subject to certain conditions you may claim relief if you support or help to support your widowed mother, your spouse's widowed mother or any other relative who is incapacitated by old age or infirmity. You can claim for a maximum of two dependents.
- 17. Low income earners allowance** - To be completed only if estimated assessable income for the tax year 1 July 2011 to 30 June 2012 is £19,500 or less.
- 18. Special deduction for senior citizens** - Men who are 65 years or over and women who are 60 years or over by 1 July 2011 are entitled to claim for this allowance.
- 19. Tax credit for persons over the age of 60** - You may apply for this credit if you are in receipt of earned income and are 60 years of age or over. If you are in receipt of income exceeding £2,000 per annum in respect of an occupational pension/annuity you will not be entitled to this tax credit.
- 20. Mortgage or loan** - If you and/or your spouse pay mortgage or loan interest in respect of a property that you occupy for residential purposes you may claim an allowance for the interest paid. A certificate of mortgage/loan interest paid for the year up to 30 June 2011 must be submitted with this Return.
- 21. Employment insurance** - Indicate the type of contribution payable for the year by ticking the appropriate box. Details of self-employed contributions should be recorded in the social insurance contributions schedule. If you have not yet received this form, please contact the Income Tax Contributions Section on Tel. No. (350) 200 52737.
- 22. Health insurance** - Any person making contributions to an approved insurance policy, scheme, society or fund for the purposes of providing health insurance, shall be entitled to this allowance. Proof of the June 2011 payment must be provided.
- 23. Life insurance** - A deduction is given for premiums paid by you or your spouse to insure your own or your spouse's life. The allowable premium must not exceed 7% of the capital sum assured at death. The total premiums allowable will be restricted to one-seventh of your total income. Proof of the June 2011 payment must be provided.
- 24. Retirement Annuity Contract & Personal Pension Scheme** - Enter full details and submit evidence of June 2011 payment.
- 25. Occupational Pension Scheme** - Enter full details and submit evidence of June 2011 payment.

## SECTION 1

### INCOME AND OUTGOINGS FOR THE YEAR ENDED 30 JUNE 2011

THIS SECTION IS TO BE COMPLETED BY ALL INDIVIDUALS INCLUDING THOSE WHO OPT TO PAY TAX UNDER THE GROSS INCOME BASED SYSTEM

**WRITE "NONE" WHERE YOU HAVE NO INCOME UNDER A PARTICULAR HEADING**

		SELF £	SPOUSE £
<b>1. Employment</b>  <b>Read note 1</b>  <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <b>IMPORTANT</b>  Please enter employer's name. </div>	Self: Gross		-----
	Spouse: Gross	-----	
	Director's Fees: Gross		
	Other: Gross		
<b>2. Benefits in kind</b>  <b>Read note 2</b>  <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <b>IMPORTANT</b>  Enter the total amount received or the total cash equivalent amount </div>	Life Insurances and/or Retirement Annuity Contracts:		
	Private medical insurance:		
	Accommodation:		
	Cars, vans and related benefits:		
	Other:		

		SELF £	SPOUSE £		
<b>3. Trade, Business, Profession or Vocation</b>  <b>Read note 3</b> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <b>IMPORTANT</b>             An Income &amp; Expenditure Account must be submitted.         </div>	Nature:  Business name (if any):  Address:  If commenced trading during year ended 30 June 2011 please give date of commencement.				
		dd	mm	yy	
<b>4. Pensions and Annuities</b>  <b>Read note 4</b> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <b>IMPORTANT</b>            If you are in receipt of a pension from abroad please attach a copy of the yearly pension statement.         </div>	Occupational Pension:  Annuity:  Other:				
<b>5. Property Letting</b>  <b>Read note 5</b> <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <b>IMPORTANT</b>            If you are in receipt of rental income, an Income &amp; Expenditure Account must be submitted.         </div>	Address of Property:   Percentage share of property:				
<b>6. Dividends and/or Trust Income</b>  <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <b>IMPORTANT</b>            If received from abroad please attach a copy of the dividend/trust income schedule.         </div>	Source	Net Amount £	Net Amount £		
<b>7. Other Income</b>  <b>Read note 7</b>	<div style="border: 1px solid black; padding: 5px;"> <b>IMPORTANT</b> Enter any other income received by you that has not been entered elsewhere in this form. If you are non-resident, receive income from Gibraltar and wish to claim for allowances, you must declare your income from all sources, including income which is not subject to tax chargeable in Gibraltar.         </div>				
	Details of income:				
<b>8. Expenses in Employment</b>  <b>Read note 8</b>	Nature of expenses claimed:				
<b>9. Gift aid</b>  <b>Read note 9</b>	<div style="border: 1px solid black; padding: 5px;"> <b>IMPORTANT</b> This only applies to payments made to registered charities under the Gift Aid Scheme.         </div>				
		Name of charity		Amount donated £	
	Self				
	Spouse				

## SECTION 2

### ELECTION FOR ALLOWANCES BASED SYSTEM ("ABS") OR GROSS INCOME BASED SYSTEM ("GIBS")

10. You may opt to pay tax either under the ABS or the GIBS. Please indicate your option by placing a tick in one of the relevant boxes provided below.

**Read note 10**

In order to fully understand the conditions of your election, please ensure that you read the terms and conditions for the GIBS. These are available on the Gibraltar Government website at [www.gibraltar.gov.gi/taxation](http://www.gibraltar.gov.gi/taxation).

SELF	
ABS <input type="checkbox"/>	GIBS <input type="checkbox"/>

SPOUSE	
ABS <input type="checkbox"/>	GIBS <input type="checkbox"/>

## SECTION 3

### CLAIM FOR ALLOWANCES FOR THE YEAR COMMENCING 1 JULY 2011

**IF THERE IS ANY CHANGE DURING THE TAX YEAR ENDED 30 JUNE 2012 THAT AFFECTS YOUR ENTITLEMENT TO THE DEDUCTIONS AND ALLOWANCES CLAIMED HEREIN, YOU ARE ADVISED TO CONTACT THIS OFFICE IMMEDIATELY.**

If you have opted to pay tax under the ABS, or have opted to pay tax under GIBS and you wish this Office to compare which of the two systems is more beneficial to you at assessment time, you must complete this section.

11. Spouse  <b>Read note 11</b>	First Name	Maiden Name	Date of Birth	Date of Marriage		
	Claimed by (please tick relevant box):			Self	<input type="checkbox"/>	Spouse
12. Child  <b>Read note 12</b>	<div style="display: flex; align-items: center;"> <div style="background-color: #800000; color: white; padding: 5px; margin-right: 10px;"><b>IMPORTANT</b></div> <div> <p>If your child is 16 or over on 1st July 2011 and is still in full time education please state name of school, college or university. Please provide proof of the College or University he/she is attending.</p> </div> </div>					
	Surname	First Name	Date of Birth	Income in own right	Name of School, College or University	
	Claimed by (please tick relevant box):			Self	<input type="checkbox"/>	Spouse

<b>13. Alimony &amp; Maintenance</b>  <b>Read note 13</b>	Give details of payments made during the year ended 30 June 2011										
	Payments to spouse		Name					Amount Paid £			
	Payments to children		Name of Child			Date of Birth		Amount Paid £			
<b>14. Nursery School</b>  <b>Read note 14</b>	Name of Child					Name of Nursery School <b>A certificate of attendance from the nursery school must be submitted.</b>					
	Claimed by (please tick relevant box):					Self		Spouse			
<b>15. Disabled Individual</b>  <b>Read note 15</b>	<div style="border: 1px solid black; padding: 5px;"> <b>IMPORTANT</b> The disabled individual must be in receipt of financial assistance from the Social Assistance Fund.         </div>										
	Full Name					Date of Birth					
	Claimed by (please tick relevant box):					Self		Spouse			
<b>16. Dependant Relatives</b>  <b>Read note 16</b>	Full Name		Relationship to you or to your spouse		Date of birth and nature of infirmity (if any)		Annual income of relative		Particulars of other persons who also support the relative		
	Claimed by (please tick relevant box):					Self		Spouse			
	<b>17. Low Income Earners Allowance</b>  <b>Read note 17</b>	<b>Return of estimated income for the year 1 July 2011 to 30 June 2012</b>									
					Self £		Spouse £				
Employment Income Gross											
Trade, Profession or Vocation											
Any other profits or income											
<b>Total estimated assessable income</b> £											
<b>Please note that if you underestimate your assessable income there could be an underdeduction of tax which will come to light when your assessment for the year 2011/12 is processed.</b>											
<b>18. Special Deduction for Senior Citizens</b>  <b>Read note 18</b>		Men aged 65 or over and Women aged 60 or over (enter dates of birth below)									
	Self		dd	mm	yy	Spouse		dd	mm	yy	

<b>19. Tax credit for persons over the age of 60</b>  <b>Read note 19</b>	<p align="center"><b>You may apply for a tax credit if you are over 60 years of age and your pension does not exceed £2,000 per annum.</b></p> <p>Please answer 'Yes' or 'No' to the following questions</p> <table border="1"> <thead> <tr> <th></th> <th>Self</th> <th>Spouse</th> </tr> </thead> <tbody> <tr> <td>Are you currently in receipt of an Occupational Pension/Annuity?</td> <td></td> <td></td> </tr> <tr> <td>Will you be receiving an Occupational Pension/Annuity in the future?</td> <td></td> <td></td> </tr> <tr> <td>Have you ever contributed towards any Retirement Annuity Contract or Pension Scheme?</td> <td></td> <td></td> </tr> <tr> <td>Has any employer, past or present, contributed towards any Retirement Annuity Contract or Pension Scheme on your behalf?</td> <td></td> <td></td> </tr> <tr> <td>Have you ever received or will receive a lump sum in lieu of a pension/annuity?</td> <td></td> <td></td> </tr> </tbody> </table> <p align="center"><b>Please note that if you give incorrect information you will be personally liable to repay any tax credit that is allowed.</b></p>							Self	Spouse	Are you currently in receipt of an Occupational Pension/Annuity?			Will you be receiving an Occupational Pension/Annuity in the future?			Have you ever contributed towards any Retirement Annuity Contract or Pension Scheme?			Has any employer, past or present, contributed towards any Retirement Annuity Contract or Pension Scheme on your behalf?			Have you ever received or will receive a lump sum in lieu of a pension/annuity?		
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<b>20. Mortgage or Loan</b>  <b>Read note 20</b>  <div style="border: 1px solid black; padding: 5px; width: fit-content;"> <b>IMPORTANT</b>  Mortgage interest can only be claimed in respect of the property you live in </div>	Name of lender:  Address of property mortgaged:  Date of Purchase:  <table border="1"> <tr> <td>Purchase Price</td> <td>£</td> </tr> <tr> <td>Amount of mortgage/loan advanced</td> <td>£</td> </tr> <tr> <td>Interest Payable</td> <td>£</td> </tr> <tr> <td>Capital Payable</td> <td>£</td> </tr> </table> <table border="1"> <tr> <td>Claimed by (please tick relevant box):</td> <td>Self</td> <td></td> <td>Spouse</td> <td></td> <td>Joint</td> <td></td> </tr> </table> <p align="center"><b>A certificate of mortgage/loan interest for the year ended 30th June 2011 must be submitted with this return.</b></p>						Purchase Price	£	Amount of mortgage/loan advanced	£	Interest Payable	£	Capital Payable	£	Claimed by (please tick relevant box):	Self		Spouse		Joint				
Purchase Price	£																							
Amount of mortgage/loan advanced	£																							
Interest Payable	£																							
Capital Payable	£																							
Claimed by (please tick relevant box):	Self		Spouse		Joint																			
<b>21. Employment Insurance</b>  <b>Read note 21</b>	<div style="border: 1px solid black; padding: 5px; width: fit-content;"> <b>IMPORTANT</b> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> All persons paying self-employed insurance contributions, should record weekly payments in the Social Insurance Contributions Schedule </div> <table border="1"> <tr> <td rowspan="3">Please tick as appropriate</td> <td>Contributor</td> <td>Employee</td> <td>Self-employed</td> <td>Voluntary</td> <td>Married Woman</td> </tr> <tr> <td>Self</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Spouse</td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						Please tick as appropriate	Contributor	Employee	Self-employed	Voluntary	Married Woman	Self					Spouse						
Please tick as appropriate	Contributor	Employee	Self-employed	Voluntary	Married Woman																			
	Self																							
	Spouse																							
<b>22. Health Insurance</b>  <b>Read note 22</b>  <div style="border: 1px solid black; padding: 5px; width: fit-content;"> <b>IMPORTANT</b>  Any changes to a claim for health insurance must be supported with documentary evidence </div>	<p align="center"><b>Proof of the June 2011 payment must be attached</b></p> <table border="1"> <thead> <tr> <th>Contributor</th> <th>Name of Insurance Provider</th> <th>Date of Policy</th> <th>Member/Policy No.</th> <th>Monthly Premium</th> <th>Annual Premium</th> </tr> </thead> <tbody> <tr> <td>Self</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Spouse</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						Contributor	Name of Insurance Provider	Date of Policy	Member/Policy No.	Monthly Premium	Annual Premium	Self						Spouse					
Contributor	Name of Insurance Provider	Date of Policy	Member/Policy No.	Monthly Premium	Annual Premium																			
Self																								
Spouse																								

**IMPORTANT**

Sections 23, 24 & 25 to be completed in full (if applicable).

Evidence of the June 2011 payment of the Life Insurance, Retirement Annuity Contract and/or Pension Scheme being claimed must be submitted.

**FAILURE TO COMPLY WITH THE ABOVE MAY RESULT IN THE CORRECT ALLOWANCE/RELIEF NOT BEING GIVEN.**

**23. Life Insurance**

**Read note 23**

Name of Life Insurance Company	Policy No.	Policy Holder (self, spouse or joint)	On Whose Life (self, spouse or joint)	Date of Policy	Date of Final Premium	Capital Sum Payable at Death	Premium Payable	Frequency of Payment	Allowance claimed by (self, spouse or joint)	OFFICE USE ONLY

**24. Retirement Annuity Contract and Personal Pension Scheme**

**Read note 24**

	Name of Retirement Annuity Contract or Personal Pension Scheme	Policy No.	Date of Policy	Date of Final Premium	Total Premium Payable	Premium Payable by Taxpayer	Premium Payable by Employer	Frequency of Payment	Single Premium	
									Date Paid	Amount
Self										
Spouse										

**25. Occupational Pension Scheme**

**Read note 25**

	Name of Occupational Pension Scheme	Policy No.	Date of Policy	Premium Payable by Taxpayer	Frequency of Payment	OFFICE USE ONLY	<b>IMPORTANT</b>			
Self							<p align="center"><b>This office must be advised, and documentary evidence produced, of any variations on Life Insurances, Retirement Annuity Contracts, Personal Pension Schemes or Occupational Pension Schemes during the tax year ending 30th June 2012.</b></p>			
Spouse										

## DECLARATION

### SELF

Full Name

I/C No. or Passport No.

Please tick the box applicable to you

☐

Married

☐

Single

☐

Widowed

☐

Divorced

☐

Separated

Address

  

Date of birth

Email

Telephone No.

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE PARTICULARS GIVEN ON THIS FORM ARE CORRECT AND COMPLETE

Signature:

Date:

### SPOUSE

**(TO BE COMPLETED IF IN RECEIPT OF INCOME)**

Full Name

I/C No. or Passport No.

Email

Date of birth

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THE PARTICULARS GIVEN ON THIS FORM ARE CORRECT AND COMPLETE

Signature:

Date:

If you make the return as Executor, Trustee, Receiver etc., state in what capacity and for whom made.

Name of person you have signed for:

Capacity:

FOR OFFICE USE ONLY