FORM	Α
ALDERN	IEY

Tax Cap Return (Alderney) 2019

Name:	
Address:	
Tax Reference Number:	
I hereby confirm that for t	the calendar year 2019:
computed in accordance to limit my liability on tha	e income, excluding Guernsey/Alderney property income, would, if with the relevant legislation, exceed £50,000 and I therefore wish t income to that amount, in accordance with section 39B and the ome Tax (Guernsey) Law, 1975.
My Guernsey/Alderney pr schedule (enter "nil" if ap	roperty income for 2019 is £ as per the attached propriate).
paid was limited under se	available if, for any year prior to 1st January 2016, the tax you ection 39B. If this is the case you may claim the limit on tax e under the Sixth Schedule as if you were resident in Guernsey.
Interaction of company p	company distributions please refer to Statement of Practice C48 rofits and the tax cap/standard charge and provide details on a ation form (Form 687 – available at www.gov.gg/tax under
	e best of my knowledge and belief all the statements made in including any accompanying schedules) are true and correct.
Signed	
Date	
* The tax cap of £50,000 wil	l be available to Alderney residents for the calendar years 2016 – 2025.

Fair Processing Notice: The information you have provided on this form is required under the Income Tax (Guernsey) Law, 1975 for the purposes of the assessment and collection of income tax. This information will be processed in line with the Data Protection (Bailiwick of Guernsey) Law, 2017. For full details of our Fair Processing Notice and how we look after your data please visit:

https://www.gov.gg/revenueservice. If you don't have access to the internet please contact us and a paper copy will be provided.

(06/19)