

# FORM 501 V.I.

(REV. 01/17)

## Government of the U. S. Virgin Islands BUREAU OF INTERNAL REVENUE

## Employer's Withholding Tax Deposit Coupon

(Refer to Publication 15 or the Circular E for deposit requirements)

(1) Employer Identification Number (EIN)

(2) TAX PERIOD

(Please indicate the appropriate quarter, darken only one.)

1st QTR

☐

3rd QTR

☐

Jan. 1 — Mar. 31

July 1 — Sept. 30

2nd QTR

☐

4th QTR

☐

Apr. 1 — June 30

Oct. 1 — Dec. 31

20

1. **EMPLOYER IDENTIFICATION NUMBER:** Enter your EIN to ensure that your deposit is applied to the proper account. If you do not have an EIN, apply for one on Form SS-4, Application for Employment Identification Number.

2. **TAX PERIOD:** Darken the box identifying the quarter for which the payment is made.

3. **AMOUNT OF DEPOSIT:** Enter the amount being desposited and submit with coupon.

4. **NAME AND ADDRESS:** Enter your business name, address and your daytime telephone number.

Name

Trade Name, if any

Mailing Address

City

State

Zip Code

Telephone Number

This deposit coupon **MUST BE** submitted with remittance

PLEASE REMIT BY DUE DATE:  
BUREAU OF INTERNAL REVENUE

ST. THOMAS, U.S.V.I. 00802

ST. CROIX, U.S.V.I. 00820