

Year X in Reiwa Income tax withholding slip for employment income

Employee's residence or domicile	your residence or domicile										Employee Number										
											Individual Number										
											Appointment										
											name in Kana					your name					
name																					
category of your earnings			amount of earnings paid by the employer			amount of earnings after deduction for employment income (after deduction for Relieve of tax burden)			total amount of exemptions, deductions from income			income tax amount withheld by the employer									
salary/wage/remuneration			¥			¥			¥			¥									
whether Exemption for spouses is claimed or not		elderly		amount of (special) Exemption for spouses claimed		number of your dependents qualified for exemption (except your spouse)						number of your dependents under 16	number of disabled qualified for exemption among your family		number of dependents of non-Japanese residents						
						specific		elderly		ordinary											
yes	yes (secondary)	O	¥	X	X	X	X	X	X	X	X	X	X	X	X						
amount of social insurance premiums			amount of deduction for life insurance premiums			amount of deductions for earthquake insurance premiums			amount of special tax credit for loans related to a dwelling												
¥			¥			¥			¥												
(Note)																					
breakdown of life insurance premiums		life insurance		¥		life insurance (former)		¥		nursing care insurance		¥		pension insurance premiums		¥		pension insurance (former)		¥	
details of special tax credit for loans related to a dwelling		number of cases applicable		X		starting date of living(1st)		Year/Month/Day		provision claimed (1st)				loan amount at the year-end(1st)		¥					
		maximum amount to be				starting date of living(2nd)		Year/Month/Day		provision claimed (2nd)				loan amount at the year-end(2nd)		¥					
spouses qualified for exemption		name in Kana		spouse's name		type		total income amount of your spouses of the relevant year		¥		amount of National pension insurance premiums		¥		amount of Long-term casualty insurance premiums		¥			
		name				amount of basic exemption						¥		amount of deduction for Relieve of tax burden		¥					
dependents qualified for exemption		1 name in Kana		dependents' name		type		dependents under 16		1 name in Kana		type									
		1 name				2 name in Kana				type		2 name		type							
		2 name		3 name in Kana		type				3 name		type									
		3 name		4 name in Kana		type				4 name		type									
		4 name																			
minority	foreigner	A (refer to note below)	B (refer to note below)	C (refer to note below)	disabled		widows	single parent	working student	date when you join/quit the job during this year					birth date						
O	O	O	O	O	O	O	O	O	O	Join	quit	year	month	day	era		year	month	day		
										O	O				Reiwa / Heisei / Showa						
payer (employer)		Head quarter(residence)																			
		name																			

A: those who quit the job with death during the relevant year
 B: those to whom any relieve measures by "the Law relating to exemptions ,deductions and deferment of tax collection for disaster victims" are applied.
 C: those who don't submit a "Report of exemptions for dependents" to the employer issuing this tax slip
 " secondary " means that the job at this employer is your secondary job.
¥ : filled with an amount of money in Japanese yen
X : filled with figures that show the number related to the items described in the box above
O : filled with O if you conform to it