

PLEASE READ THIS FIRST	SECTION A: EMPLOYER DETAILS & INSTRUCTIONS	
	Trade name	
	DTI registration name	
	DTI registration number	
	PAYE/SARS number	
	UIF reference number	
	EE reference number	
	Seta classification	
	Industry/Sector	
	Telephone number	
	Postal code	
	City/Town	
	Province	
	Postal code	
	City/Town	
	Province	
	Details of CEO/Accounting Officer at the time of submitting this report	
	Name and surname	
	Telephone number	
Fax number		
Email address		
Details of Employment Equity Senior Manager at the time of submitting this report		
Name and Surname		
Telephone number		
Fax number		
Email address		
Business type		
<input type="checkbox"/> Private Sector <input type="checkbox"/> National Government <input type="checkbox"/> Local Government <input type="checkbox"/> Non-profit Organisation	<input type="checkbox"/> State-Owned Enterprise <input type="checkbox"/> Provincial Government <input type="checkbox"/> Educational Institution	
Information about the organisation at the time of submitting this report		
Number of employees in the organisation	<input type="checkbox"/> 0 to 49 <input type="checkbox"/> 50 to 149 <input type="checkbox"/> 150 or more	
Is your organisation an organ of State?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Is your organisation part of a group / holding company?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please provide the name.	_____	
Year for which this report is submitted	_____	

SECTION B: THE FOLLOWING MUST BE TAKEN INTO CONSIDERATION WHEN COMPLETING THE EEA4 FORMS

1. All employees (including Foreign Nationals) must be included when completing the EEA4 form in the appropriate space provided in the table below. Temporary employees are employees employed to work for less than three months.
2. Calculation of remuneration must include twelve months, which must be in line with the period covered by the EEA2 reporting form. In the case of employees who have not worked a full twelve month period an amount equivalent to the annual salary should be furnished, e.g. if a person worked for three months and earned R30 000, the annual equivalent will be $(R30\ 000 / 3) * 12$, which means the annual equivalent for this person will be R120 000. All payment amounts to be reflected in the table below must be rounded to the nearest Rand (R) and included as total remuneration for each group in terms of race and gender.
3. No blank spaces, commas (,), full stops or decimal points (.) or any other separator should be included when capturing the payment amounts in each of the cells in the table below – for example R7 345 567.22 must be captured as 7345567 with no separators.
4. The payments below indicate what must be included and what must be excluded in an employee's remuneration for the purposes of calculating pay in order to complete the EEA4 form.

4.1. Included

- (a) Housing or accommodation allowance or subsidy or housing or accommodation received as a benefit in kind;
- (b) Car allowance or provision of a car, except to the extent that the car is provided to enable the employee to work;
- (c) Any cash payments made to an employee, except those listed as exclusions in terms of this schedule;
- (d) Any other payment in kind received by an employee, except those listed as exclusions in terms of this schedule;
- (e) Employer's contributions to medical aid, pension, provident fund or similar schemes; and
- (f) Employer's contributions to funeral or death benefit schemes.

4.2. Excluded

- (a) Any cash payment or payment in kind provided to enable the employee to work (for example, an equipment, tool or similar allowance or the provision of transport or the payment of a transport allowance to enable the employee to travel to and from work);
 - (b) A relocation allowance;
 - (c) Gratuities (for example, tips received from customers) and gifts from the employer;
 - (d) Share incentive schemes;
 - (e) Discretionary payments not related to an employee's hours of work or performance (for example, a discretionary profit-sharing scheme);
 - (f) An entertainment allowance; and
 - (g) An education or schooling allowance.
5. The value of payments in kind must be determined as follows –
 - (a) a value agreed to in either a contract of employment or collective agreement, provided that the agreed value may not be less than the cost to the employer of providing the payment in kind; or
 - (b) the cost to the employer of providing the payment in kind.
 6. An employee is not entitled to a payment or the cash value of a payment in kind as part of remuneration if-
 - (a) the employee received the payment or enjoyed, or was entitled to enjoy, the payment in kind during the relevant period; or
 - (b) in the case of a contribution to a fund or scheme that forms part of remuneration, the employer paid the contribution in respect of the relevant period.
 7. If an employee's remuneration or wage fluctuates significantly from period to period, any payment to that employee in terms of the BCEA must be calculated by reference to the employee's remuneration or wage during-
 - (a) the preceding 13 weeks; or
 - (b) if the employee has been in employment for a shorter period, that period.

SECTION D: Please indicate the key reason(s) for differentiation in income in each occupational level that apply to your organisation. Please use **(X)** to mark the applicable key reason(s).

OCCUPATIONAL LEVELS	REASONS FOR INCOME DIFFERENTIALS						
	Seniority or length of service	Qualifications, ability, competence or potential	Performance, quantity or quality of work	Demotion	Experiential training	Shortage of relevant skills	Other relevant factor
Top Management							
Senior Management							
Professionally qualified and experienced specialists and mid-management							
Skilled technical and academically qualified workers, junior management, supervisors, foremen and superintendents							
Semi-skilled and discretionary decision making							
Unskilled and defined decision making							
Temporary employees							

SECTION E: Signature of the Chief Executive Officer/Accounting Officer

Chief Executive Officer /Accounting Officer

I(full Name) CEO/Accounting Officer of
.....

hereby declare that I have read, approved and authorized this information.

Signed on thisday of (month) year

At (place):

.....
Chief Executive Officer/Accounting Officer