



MALDIVES
INLAND REVENUE
AUTHORITY

Income Tax Return INSURANCE BUSINESSES

MIRA 605
Version 21.1

| | | | |
|--|--|--|---|
| TIN (Taxpayer Identification Number) <input type="text"/> <small>Your TIN as it appears on your Notification of Registration</small> | Taxpayer Name <input type="text"/> <small>Your name as it appears on your Notification of Registration</small> | | |
| If you are a company within a group of companies, provide the number of companies in the group subject to income tax (exclusive of you) <input type="text"/> | | | |
| Residency status (Tick the applicable box) | <input type="checkbox"/> Resident | <input type="checkbox"/> Temporary resident | <input type="checkbox"/> Non-resident |
| Taxpayer's Contact Details | <input type="text"/> <small>Telephone / Mobile</small> <input type="text"/> <small>Email Address</small> | | |
| Taxpayer's Mailing Address | <input type="text"/> <small>House Name / Building Name</small> <input type="text"/> <small>Level</small> <input type="text"/> <small>Apartment Number</small> <input type="text"/> <small>Street</small> | | |
| <input type="text"/> <small>Country</small> | <input type="text"/> <small>Atoll / City</small> | <input type="text"/> <small>Island / District</small> | <input type="text"/> <small>Postcode</small> |
| Accounting Period | Auditor Registration Number | Industry Code | |
| <input type="text"/> <small>From</small> <small>These are the dates specified in your financial statements</small> | <input type="text"/> <small>To</small> <small>Registration number of the auditor who audited your financial statements</small> | <input type="text"/> <small>The industry code for the industry from which you earned the majority of your revenue. Refer to the list of industry codes available on MIRA's website.</small> | |

Please complete pages 3 to 11 before filling in this page. You must complete and submit Schedule 4 as part of this return where applicable.

COMPUTATION OF INCOME TAX PAYABLE

| | (Rounded off to two decimals) |
|--|-------------------------------|
| A Total Tax liability (Transferred from Box 103 on page 8) | <input type="text"/> |
| B Foreign tax credit (Enter zero if you are a non-resident. Attach explanations & supporting documents) | <input type="text"/> |
| C Tax payable for the year (Box A minus Box B) | <input type="text"/> |
| D NWT deducted by your payer | <input type="text"/> |
| E First interim payment | <input type="text"/> |
| F Second interim payment | <input type="text"/> |
| G Income tax paid in excess to date | <input type="text"/> |
| H Business Profit Tax paid in excess to date | <input type="text"/> |
| I Final payment (Box C minus Boxes D, E, F, G and H) | <input type="text"/> |
| J Amount being paid | <input type="text"/> |

DECLARATION

I declare that the information in this Return is true and correct and represents my assessment as required under the Income Tax Act (Law Number 25/2019), and that I am authorised to sign this Return.

| | | | | |
|----------------------|----------------------|----------------------|---|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Title | First Name | Other Names | Contact Number | <input type="text"/> |
| <input type="text"/> | | | <input type="text"/> <small>Date</small> | |
| Designation | | | Signature & Seal | |

| | | | |
|----------------------------|----------------------|----------------------|----------------------|
| For Office Use Only | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Received By | Received Date | Voucher Number | Verified By |

INCOME TAX ASSESSMENT

All legislative references are to the Income Tax Act (Law Number 25/2019) and Income Tax Regulation (Regulation Number 2020/R-21), as amended.

- **In computing your taxable income, you must include:**
 - **income from general insurance business derived ONLY from the Maldives**
 - **ONLY investment income from your life insurance business, which is derived in the Maldives and outside the Maldives.**

- **If you conduct ONLY general insurance business, you must apportion your indirect expenditure on an acceptable fair and reasonable accounting basis between your:**
 - **general insurance business income derived from the Maldives; and**
 - **general insurance business income derived outside the Maldives.**

- **If you conduct ONLY life insurance business, you must apportion your indirect expenditure on an acceptable fair and reasonable accounting basis between your:**
 - **investment income; and**
 - **other income**

derived from your worldwide life insurance business.

- **If you conduct BOTH general insurance business and life insurance business, you must apportion your indirect expenditure on an acceptable fair and reasonable accounting basis between your:**
 - **general insurance business income derived from the Maldives;**
 - **general insurance business income derived outside the Maldives;**
 - **investment income derived from your worldwide life insurance business, and**
 - **other income derived from your worldwide life insurance business.**

Document Checklist

Tick the documents you have presented with this Return.

- | | | |
|---|--|--|
| <input type="checkbox"/> Statement of Profit or Loss | <input type="checkbox"/> Statement of Financial Position | <input type="checkbox"/> Statement of Cash Flows |
| <input type="checkbox"/> Statement of Changes in Equity | <input type="checkbox"/> Auditor's Report | <input type="checkbox"/> Explanations and supporting documents for Boxes B, and 51 |
| <input type="checkbox"/> Notes to Financial Statements | <input type="checkbox"/> Directors' Report | |

I What is the basis of preparing your accounts?

This is the basis you have opted under Section 13(b) or (c) of the Act

- (a) Accrual basis
 (b) Cash basis

II What is your presentation currency?

This is the currency you have chosen to prepare your financial statements, under Section 106 of the Regulation

- (a) Rufiyaa
 (b) United States Dollar

III Type of audit opinion

- (a) Unqualified
 (b) Qualified
 (c) Disclaimer
 (d) Adverse
 (e) Not required to audit

IV Record keeping

- (a) Computerized
 (b) Semi-computerized
 (c) Manual

V Number of employees at the end of the accounting period

| | | | | | | | | | |
|------------|--|--|--|--|-------------|--|--|--|--|
| | | | | | | | | | |
| Maldivians | | | | | Expatriates | | | | |

VI Details of other companies within the group

To be completed ONLY if you are a company within a group of companies. Tick if you share the tax threshold with the company. Use additional sheets if necessary.

| Name of the company | TIN | Country of residence | Shares tax free bracket |
|---------------------|-----|----------------------|-------------------------|
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VII Details of financial interest in any shares outside the Maldives

Provide details of all private limited companies and those public limited companies in which you hold more than 5% of shares. Use additional sheets if necessary.

| Name and address of the entity | Country of incorporation | Investment (at cost) | Percentage of total investment |
|--------------------------------|--------------------------|----------------------|--------------------------------|
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VIII Details of immovable property

If you are a resident, list all the immovable properties in and outside the Maldives. If you are a non-resident with a permanent establishment in the Maldives, list the immovable properties which relates to your operation in the Maldives. Use additional sheets if necessary.

| Address of the property | Country | Total investment (at cost) |
|-------------------------|---------|----------------------------|
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IX Details of bank accounts

If you are a resident, provide details of both local and foreign bank accounts. If you are a non-resident with a permanent establishment in the Maldives, provide details of all bank accounts which are used for your operation in the Maldives. Use additional sheets if necessary.

| Account name | Account number | Account currency | Name and address of the bank |
|--------------|----------------|------------------|------------------------------|
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30 *Box 28 plus Box 29*

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31 *Box 27 minus Box 30*

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Add: Investment and other income

32 Dividends

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33 Less: Dividends derived from resident companies (if you are a resident)

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34 *Box 32 minus Box 33*

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35 Profits derived from a partnership

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36 Less: Profits derived from a resident Partnership

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37 *Box 35 minus Box 36*

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38 Interest / Finance income

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39 Other income

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40 Balancing charge (*Transferred from the Statement of Balancing Allowance / Balancing Charge on Page 10*)

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41 *Sum of Boxes 34 and 37, and Boxes 38 to 40*

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Add: Deductions not allowed

42 Expenses incurred to generate receipts that have been subject to NWT (Only if you are a permanent establishment of a non-resident)

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Less: Deductions allowed (Excluding zakat al-mal, donations and loss relief)

43 Capital allowance (*Transferred from the Statement of Capital Allowance on Page 9*)

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44 Balancing allowance (*Transferred from the Statement of Balancing Allowance / Balancing Charge on Page 10*)

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45 Employee welfare expenses allowed under Section 20 of the Act

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46 Pension contribution to MRPS as an employer

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47 Irrecoverable debts relating to transactions entered into after the commencement of the Act or included in the computation of taxable profit under the BPT Act

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48 Receipts that have been subject to NWT (if you are a permanent establishment of a non-resident)

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49 Interest/finance cost paid/payable to approved banks and institutions

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50 Interest/finance cost paid/payable to non-approved persons at a rate not exceeding 6% per annum

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51 Cost of low-value assets allowed under Section 78 of the Regulation

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52 Director's / Partners remuneration

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53 Other deductible expenditure incurred in deriving income from general insurance business excluding related party remuneration and donations (*Please attach explanations and supporting*)

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54 **Total amount of deduction allowed** (*Sum of Boxes 43 to 53*)

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55 **Taxable income from general insurance Business** (*Sum of Boxes 31, 41 and 42 minus Box 54*)

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Life Insurance Business

Amounts in Boxes 56 to 79 must relate to the investment income derived from ALL sources

Add: Investment income

| | | | | | | | | | | | | | | | | | | | | | | | |
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| 56 | Dividends | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | | |
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| 57 | Less: Dividends derived from resident companies (if you are a resident) | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | | |
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| 58 | Box 56 minus Box 57 | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 59 | Profits derived from a partnership | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | | |
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| 60 | Less: Profits derived from a resident Partnership | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | | |
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| 61 | Box 59 minus Box 60 | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 62 | Interest / Finance income | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 63 | Other investment income | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 64 | Gains / (losses) on disposal of investment assets | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| 65 | Sum of Boxes 58 and 61 and Boxes 62 to 64 | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| 66 | Less: Management, commission and administration expenses, each related to deriving investment income only | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 67 | Box 65 minus Box 66 | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 68 | Life insurance premiums received in the Maldives | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 69 | Less: Life insurance agency expenses in the Maldives relating to premiums received in the Maldives | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | | |
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| 70 | Add: Allowable head office expenses relating to premiums received in the Maldives (applicable only to non-residents with a permanent establishments in the Maldives) | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | | |
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| 71 | Box 69 plus Box 70 | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 72 | Net life insurance income received in the Maldives (Box 68 minus Box 71) | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 73 | Total life insurance premiums received | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 74 | Less: Total life insurance agency expenses | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | | |
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| 75 | Add: Total head office expenses (applicable only to non-residents with a permanent establishment in the Maldives) | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | | |
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| 76 | Box 74 plus Box 75 | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 77 | Net life insurance income received (Box 73 minus Box 76) | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 78 | Proportion of net life insurance income derived from the Maldives (Box 72 divided by Box 77) | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| 79 | Taxable life insurance investment income (Box 67 multiplied by Box 78) | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| 80 | Taxable income / (loss) before capital gain, Zakat al-mal, donations and loss relief (Box 55 plus Box 79) | | <table border="1" style="width: 100%; height: 20px;"> <tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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COMPUTATION OF TAX LIABILITY

- 100** Size of the tax bracket available at 0% *(See Note 1 below)*
- 101** Amount subject to Tax at 0% *(Lower of 99 and 100)*
- 102** Amount subject to tax at 15% *(Box 99 minus 100. if this figure is negative, enter zero)*
- 103** Tax liability for the year *(Multiply Box 102 by 0.15)*

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Transfer to A

Note 1:

Tax-free threshold must be calculated as follows:

$$\frac{\text{Number of days in your accounting period}}{365} \times \frac{\text{MVR 500,000 or USD 32,425.42}}{A+1}$$

If you are a company in a group of companies, A is the number of companies in the group (excluding you) which are subject to Income Tax. If not, A is 0 (zero)

OTHER INFORMATION

- 104** Gross operating revenue
- 105** Gross non-operating revenue
- 106** Total revenue from all sources
- 107** Gross profit

| | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
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- 108** Total assets
- 109** Total non-current assets
- 110** Total liabilities
- 111** Trade receivables
- 112** Non-current liabilities
- 113** Inventory
- 114** Total equity

| Beginning of the accounting period | End of the accounting period |
|------------------------------------|------------------------------|
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STATEMENT OF CAPITAL ALLOWANCE

| No. | Asset category | Rate 1 | Cost of assets 2 | Capital allowance at cost 3 | Notional adjustment 4 | Accumulated capital allowance claimed 5 | Written down value 6 | Claimable capital allowance 7 |
|--------------|--|--------------------|---------------------|--------------------------------|--------------------------|--|-------------------------|----------------------------------|
| 1 | Buildings | 4% | | | | | | |
| 2 | Aircraft | 7% | | | | | | |
| 3 | Wooden marine vessels | 7% | | | | | | |
| 4 | Other marine vessels | 5% | | | | | | |
| 5 | Furniture and fittings | 10% | | | | | | |
| 6 | Motor vehicles | 20% | | | | | | |
| 7 | Earth moving vehicles | 5% | | | | | | |
| 8 | Plant and equipment (excluding office equipment) | 10% | | | | | | |
| 9 | Office equipment | 20% | | | | | | |
| 10 | Computer software | 33 $\frac{1}{3}$ % | | | | | | |
| 11 | Crockery, cutlery, utensils, linen, loose tools | 33 $\frac{1}{3}$ % | | | | | | |
| 12 | Intangible assets | - | | | | | | |
| 13 | Reclamation of land | - | | | | | | |
| 14 | Capital expenditure incurred in the development of a building financed through a housing loan as under section 83(d) of the Regulation | - | | | | | | |
| TOTAL | | | | | | | | |

The amounts for each column must first be calculated separately for individual assets and the sum for the category entered in each column.

TOTAL

↓
Transfer to 43

¹ Capital allowance rates as specified under Section 83 of the Regulation.

² Cost of the assets which have positive written down value on the commencement of the accounting period *plus* cost of assets acquired during the accounting period (which have been used for more than half of the accounting period), *minus* cost of assets disposed of during the accounting period.

³ Apportion the figures in this column from the start of your accounting period to the end of your accounting period.

For tangible assets: Column 1 *multiplied* by column 2.

For intangible assets: Cost price of the intangible asset *divided* by its estimated useful life (in years).

⁴ Notional adjustment to the cost of the assets held at the date of commencement of the Act of which the cost had not been determined under the BPT Regulation.

⁵ Capital allowance claimed for the preceding years. Capital allowance claimed under the BPT Act can be deemed as capital allowance claimed for the preceding year.

⁶ Column 2 *minus* column 4 and 5.

⁷ Lower of column 3 and column 6.

STATEMENT OF BALANCING ALLOWANCE / BALANCING CHARGE

| No. | Asset category | Cost of disposed asset 8 | Accumulated capital allowance claimed for the disposed asset 9 | Written down value 10 | Disposal value 11 | Gain/loss on disposal 12 | Capital gain 13 | Balancing charge / (Balancing allowance) 14 | |
|--------------|--|-----------------------------|---|--------------------------|----------------------|-----------------------------|--------------------|--|-----------------------------|
| | | | | | | | | Balancing charge 14.1 | Balancing allowance 14.2 |
| 1 | Buildings | | | | | | | | |
| 2 | Aircraft | | | | | | | | |
| 3 | Wooden marine vessels | | | | | | | | |
| 4 | Other marine vessels | | | | | | | | |
| 5 | Furniture and fittings | | | | | | | | |
| 6 | Motor vehicles | | | | | | | | |
| 7 | Earth moving vehicles | | | | | | | | |
| 8 | Plant and equipment (excluding office equipment) | | | | | | | | |
| 9 | Office equipment | | | | | | | | |
| 10 | Computer software | | | | | | | | |
| 11 | Crockery, cutlery, utensils, linen, loose tools | | | | | | | | |
| 12 | Intangible assets | | | | | | | | |
| 13 | Reclamation of land | | | | | | | | |
| 14 | Capital expenditure incurred in the development of a building financed through a housing loan as under section 83(d) of the Regulation | | | | | | | | |
| TOTAL | | | | | | | | | |

The amounts for each column must first be calculated separately for individual assets and the sum for the category entered in each column.



⁸ Actual cost of the asset disposed.
⁹ Accumulated capital allowance claimed after the date of commencement of the Act.
¹⁰ Cost of the asset *minus* accumulated capital allowance (notional adjustment plus capital allowance claimed for the preceding years)
¹¹ Proceeds from disposal of the asset (consideration from the sale less expenses directly related to the sale).
¹² Column 11 *minus* column 10.
¹³ Column 11 *minus* column 8 (if the answer is negative, enter zero).
¹⁴ If column 12 is positive: column 13 *plus* lower of column 9 and column 12 (enter the amount in 14.1). If column 12 is negative: enter that amount in 14.2.

STATEMENT OF DONATIONS TO STATE INSTITUTIONS AND APPROVED CHARITABLE ORGANIZATIONS

| No. | Date of donation 1 | Name of donee 2 | Details of donation 3 | Amount of donation 4 |
|-----|---------------------------------------|--------------------|--------------------------|-------------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |
| 10 | | | | |
| 11 | | | | |
| 12 | | | | |
| 13 | | | | |
| 14 | | | | |
| 15 | Total from additional sheets (if any) | | | |

TOTAL

| |
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| |
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Transfer to **94**

You must hold receipts to support your claim for each donation and the cost of assets donated.

- ¹ This is the date on which you made the donation.
- ² Write the name of the body, association or public institution approved by the MIRA to which you made the donation.
- ³ If you donated money, write "Cash". If your donation is in kind, write the details of assets you have donated.
- ⁴ If you donated money, enter the amount of your donation. If your donation is in kind, enter the cost of the assets you donated.