

Change of Rate of Employee Withholding Tax INCOME TAX

- Complete this form to request MIRA to adjust the rates and brackets at which tax is withheld from remuneration paid to you by a payer who has not been elected by you to utilize the rates and brackets specified in section 54(a) of the Income Tax Act.
- You must include in this form all your payers irrespective of the amount of remuneration you derive from that payer, and declare all the requested information. MIRA may determine a rate based on information obtained by MIRA as pursuant to section 41(l) of the Income Tax Regulation.
- Adjusted rates and brackets should be deemed granted only upon written notification from MIRA.
- You must submit this form via MIRAconnect. If you are unable to submit this form via MIRAconnect, you may submit this form to MIRA's counter.

TIN (Tax Identification Number)

Your TIN as it appears on your Notification of Income Tax Registration

Taxpayer Name (Your name as it appears on your Notification of Income Tax Registration)

First Name

Other Names

INFORMATION ON INCOME DERIVED AS REMUNERATION

A REGISTERED PRIMARY PAYER

(This is the payer you have elected in your MIRA 916 form to use the rates and brackets specified in section 54(a) of the Income Tax Act)

TIN (Tax Identification Number)

Name

Monthly amount of remuneration derived from payer

B REGISTERED OTHER PAYER(S)

Payer's Tax Identification Number (TIN)	Payer's Name	Monthly amount of remuneration paid by payer (MVR)	Do you wish this payer to apply a reduced rate? (Tick where applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> YES <input type="radio"/> NO
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> YES <input type="radio"/> NO

C UNREGISTERED PAYER(S) (Use additional sheets if you have more than 1 unregistered payer)

Payer's Tax Identification Number (TIN)	Payer's Name	Monthly amount of remuneration paid by payer (MVR)	Do you wish this payer to apply a reduced rate? (Tick where applicable)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="radio"/> YES <input type="radio"/> NO

DECLARATION

I declare that the information in this form is true and correct and includes information on all the remuneration I derive from and in the Maldives.

I hereby request MIRA to grant me a reduced rate for the purpose of withholding tax from the remuneration paid to me by the payers specified in item no. B and C of this form, and declare that I am authorised to sign this form.

<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"/>
Designation			Date	

For Office Use Only

Received By

Received Date

Reference Number

Verified By