

Serial No. STATEMENT OF REMUNERATION FROM EMPLOYMENT Employee's Income Tax No.
Employer's No. E FOR THE YEAR ENDED 31 DECEMBER LHDNM Branch

THIS FORM EA MUST BE PREPARED AND PROVIDED TO THE EMPLOYEE FOR INCOME TAX PURPOSE

A PARTICULARS OF EMPLOYEE

- 1. Full Name of Employee/Pensioner (Mr./Miss/Madam)
- 2. Job Designation 3. Staff No./Payroll No.
- 4. New Identity Card No. 5. Passport No.
- 6. EPF No.
- 7. If the period of employment is less than a year, please state:
 - (a) Date of commencement
 - (b) Date of cessation

B EMPLOYMENT INCOME, BENEFITS AND LIVING ACCOMMODATION (Excluding Tax Exempt Allowances/Perquisites/Gifts/Benefits)

RM

- 1. Gross salary, wages or leave pay (including overtime pay)
- Fees (including director fees), commissions or bonuses
- Gross tips, perquisites, awards/rewards or other allowances (Details of payment)
- Income tax borne by the employer in respect of his employee
- 2. Value of benefits-in-kind:
 - (a) Motorcars (Actual date provided.....) (i) Value of motorcar and petrol
 - (Type.....Year..... Model.....) (ii) Value of driver
 - (b) Electricity, water, telephone and other benefits
 - (c) Value of household benefits: (*Delete whichever is not relevant)
 - (i) Semi-furnished with furniture*/air-conditioners*/curtains*/carpets*, or
 - (ii) Fully-furnished with kitchen equipment, crockery, utensils and appliances, or
 - (iii) Separate Items: Furniture and fittings
 - Kitchen equipment
 - Entertainment and recreation
 - (d) Household servant and gardener
 - (e) Benefit of leave passage for travel
 - (f) Others (for example food and garments)
- 3. Value of living accommodation provided (Address.....)
- 4. Refund from unapproved Pension/Provident Fund, Scheme Or Society
- 5. Compensation for loss of employment

C PENSIONS AND OTHERS

- 1. Pensions
- 2. Annuities or other Periodical Payments

TOTAL

D TOTAL DEDUCTION

- 1. Current Year's Monthly Tax Deductions (MTD) remitted to LHDNM
- 2. CP 38 Deductions
- 3. Deductions for Zakat remitted to the collection authority of Malaysian zakat

E CONTRIBUTIONS TO APPROVED PENSION/PROVIDENT FUND, SCHEME OR SOCIETY

Name of Provident Fund
Amount of contribution (state the employee's share of contribution only) RM

F PARTICULARS OF PAYMENT IN ARREARS AND OTHER PAYMENTS IN RESPECT OF PRECEDING YEARS (PRIOR TO CURRENT YEAR)

<u>Year for which Paid</u>	<u>Type of Income</u>	<u>Total Payment (RM)</u>	<u>EPF Contribution (RM)</u>	<u>Monthly Tax Deductions (MTD) (RM)</u>
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G TOTAL TAX EXEMPT ALLOWANCES / PERQUISITES / GIFTS / BENEFITS **RM**

Date.....

Name of Officer
Designation
Name and Address of Employer