(C.P. 8A - Pin. 2017)

MALAYSIA

INCOME TAX

PRIVATE SECTOR Employee's Statement of Remuneration

Serial No. Employer's No. E DEMO

STATEMENT OF REMUNERATION FROM EMPLOYMENT FOR THE YEAR ENDED 31 DECEMBER 2020.

A PARTICULARS OF E						
	oyee/Pensioner (Mr./Miss/Ma				40004	
Job Designation					10001	
4. New I.C. No.	999999-99-9999				000000 00 00	
6. EPF No.					999999-99-99	
8. Number Of Childre					nent is less than a y	
Qualified For Tax F	Relief0		` '		ment	
			(b)	Date of cessation		
B EMPLOYMENT INCO	ME, BENEFITS AND LIVING	G ACCOMODATION	N			RM
(Excluding Tax Exemp	ot Allowances/Perquisites/Gif	fts/Benefits)				400 000 00
	ages or leave pay (including					120,000.00
	director fees), commission o					0.00 0.00
	quisites, awards/rewards or o		tails of payment :))	0.00
	ne by the employer in respec					
(e) Employee Shar	e Option Scheme (ESOS) be	enefit				0.00
	period from					0.00
Details of arrears a	and others for preceding year	s paid in the current	year			
Type of income	(a)					0.00
	(b)					0.00
Benefits-in-kind (S)	pecify:)			0.00
Value of living accord	omodation provided (Address	5:)	0.00
Refund from unapp	proved Provident/Pension Full	nd				0.00
6. Compensation for l	oss of employment					0.00
C PENSIONS AND OTH	IERS					
1. Pension						0.00
2. Annuities or other I	Periodical Payments					0.00
TOTAL	•				-	120,000.00
D TOTAL DEDUCTION					_	
Monthly Tax Deduction 1. Monthly Tax Deduction	ctions (MTD) remitted to LHD	NM				12,580.20
2. CP 38 Deductions	(–)					0.00
3. Zakat paid via sala	rv deduction					0.00
·	uction by employee via Form	TP1 in respect of:				
(a) Relief			RM	0.00)	
(/	han that paid via monthly sal	ary deduction	RM	0.00)	
5. Total qualifying chi		ary accusation.				0.00
E CONTRIBUTIONS DA	AID BY EMPLOYEE TO APP	POVED PROVIDE	NT FIIND/DENGI	ON FUND AND SO	ncso	
Name of Provident	Fund KWSP	KOVED I KOVIDE	NI I OND/I ENOI	ON I OND AND OC	,000	
Amount of compuls	sory contribution paid (state t	he employee's shar	e of contribution o	nlv)	RM	0.00
	of compulsory contribution pa					0.00
2. 30030 : Amount o	T compaisory contribution pa	id (state the employ	ee's share of con	inbution only)	TXIVI	
F TOTAL TAX EXEMPT	TALLOWANCES / PERQUIS	SITES / GIFTS / BE	NEFITS		RM	0.00
				25110		
		Name of Office	r	DEMO		
		Designation		PAYROLL CLER		
		Name and Add	ress of Employer	DEMO (DEMO)		
				DEMO		
04 40 0000				1004		
Date 31-12-2020		Employer's Tel	ephone No.	1234		

MALAYSIA **INCOME TAX**

PRIVATE SECTOR Employee's Statement of Remuneration

Employee's IncomeTax No.

Serial No. Employer's No. E. DEMO

STATEMENT OF REMUNERATION FROM EMPLOYMENT FOR THE YEAR ENDED 31 DECEMBER 2020.

LHDNM Branch KUC THIS FORM FA MUST BE PREPARED AND PROVIDED TO THE EMPLOYEE FOR INCOME TAX PURPOSE

A PARTICULARS OF EMPLOYEE			
Full Name of Employee/Pensioner (Mr./Miss.			
		No./Payroll No10002	
74404000	5. Passı	000000 00	
	7. SOCS)-1234
8. Number Of Children		period of employment is less than	
Qualified For Tax Relief0		Pate of commencement Date of cessation	
	(b) I	Date of cessation	
B EMPLOYMENT INCOME, BENEFITS AND LIV	ING ACCOMODATION		RM
(Excluding Tax Exempt Allowances/Perquisites/			
1. (a) Gross salary, wages or leave pay (includi	ng overtime pay)		21,600.00
(b) Fees (including director fees), commissio	n or bonus		1,800.00
(c) Gross tips, perquisites, awards/rewards of	r other allowances (Details of payment :.)	0.00
(d) Income tax borne by the employer in resp			0.00
(e) Employee Share Option Scheme (ESOS)			0.00
(f) Gratuity for the period from			0.00
Details of arrears and others for preceding year	ears paid in the current year		
Type of income (a)			0.00
(b)	,		0.00
3. Benefits-in-kind (Specify:		,	0.00
4. Value of living accommodation provided (Addr5. Refund from unapproved Provident/Pension)	0.00
Compensation for loss of employment	runu		0.00
o. Compensation loss of employment			
C PENSIONS AND OTHERS			
1. Pension			0.00
Annuities or other Periodical Payments			0.00
TOTAL			23,400.00
			23,400.00
D TOTAL DEDUCTION			0.00
Monthly Tax Deductions (MTD) remitted to L	HDNM		0.00
2. CP 38 Deductions			0.00 0.00
Zakat paid via salary deduction			0.00
4. Total claim for deduction by employee via Fo	•	0.00	
(a) Relief	RM	0.00	
(b) Zakat other than that paid via monthly	salary deduction RM	0.00	0.00
Total qualifying child relief			
E CONTRIBUTIONS DAID BY EMPLOYEE TO A	DDDOVED DDOVIDENT EUND/DENSIG	ON FUND AND SOCSO	
CONTRIBUTIONS PAID BY EMPLOYEE TO A Name of Provident Fund KWSP	PROVED PROVIDENT FUND/PENSIC	ON FUND AND SUCSU	
Amount of compulsory contribution paid (state	e the employee's share of contribution of	nlv) R	M 1,854.00
SOCSO : Amount of compulsory contribution		7.7	M 105.00
	F (,,,	
F TOTAL TAX EXEMPT ALLOWANCES / PERQ	UISITES / GIFTS / BENEFITS	R	M2.00
_			
	Name of Officer	DEMO	
	Designation	PAYROLL CLERK	
	Name and Address of Employer	DEMO (DEMO)	
		DEMO	
Date 31-12-2020	Employer's Telephone No.	1234	

INCOME TAX

PRIVATE SECTOR Employee's Statement of Remuneration

IEA

Serial No.
Employer's No. E .DEMO

STATEMENT OF REMUNERATION FROM EMPLOYMENT FOR THE YEAR ENDED 31 DECEMBER 2020.

Employee's IncomeTax No. 12345 LHDNM Branch KUC.....

PARTICUL ARS OF EMPLOYEE			
A PARTICULARS OF EMPLOYEE 1. Full Name of Employee/Pensioner (Mr./Miss/Ma	dam/ CCCCCC		
	SOR 3. Sta	off No /Doyroll No	10003
3		-	
			909999-99-9999
Number Of Children Qualified For Tax Relief1			ment is less than a year, please state:
Qualified For Tax Relief	,		ment
	(I	b) Date of cessation	
B EMPLOYMENT INCOME, BENEFITS AND LIVING	ACCOMODATION		RM
(Excluding Tax Exempt Allowances/Perquisites/Gift			ANITA
(a) Gross salary, wages or leave pay (including of the control of the contro			44,400.00
(b) Fees (including director fees), commission or			3,500.00
(c) Gross tips, perquisites, awards/rewards or ot		nt·	0.00
(d) Income tax borne by the employer in respect		,	0.00
(e) Employee Share Option Scheme (ESOS) ber			0.00
(f) Gratuity for the period from			0.00
Details of arrears and others for preceding years			
	s paid in the current year		
Type of income (a)			0.00
(b)	,		0.00
3. Benefits-in-kind (Specify:			0.00
4. Value of living accomodation provided (Address:			0.00
5. Refund from unapproved Provident/Pension Fur	ıd		0.00
6. Compensation for loss of employment			0.00
C PENSIONS AND OTHERS			
1. Pension			0.00
			0.00
Annuities or other Periodical Payments TOTAL			
TOTAL			47,900.00
D TOTAL DEDUCTION			127.00
Monthly Tax Deductions (MTD) remitted to LHDI	NM		137.00
2. CP 38 Deductions			0.00
Zakat paid via salary deduction			0.00
Total claim for deduction by employee via Form	TP1 in respect of:		•
(a) Relief		0.00)
(b) Zakat other than that paid via monthly sala		0.00	
5. Total qualifying child relief	illy deduction 1 (ivi		2,000.00
o 4y 3			
E CONTRIBUTIONS PAID BY EMPLOYEE TO APPI	ROVED PROVIDENT FUND/PENS	SION FUND AND SO	OCSO
Name of Provident Fund KWSP			2.027.00
Amount of compulsory contribution paid (state the	ne employee's share of contribution	າ only)	RM 3,937.00
2. SOCSO : Amount of compulsory contribution paid	d (state the employee's share of co	ontribution only)	_{RM} 219.00
E TOTAL TAY EVENDT ALLOWANCES / DEDOLUG	NITEO / CIETO / DENEEITO		_{RM} 173.70
F TOTAL TAX EXEMPT ALLOWANCES / PERQUIS	ITES / GIFTS / BENEFITS		RM173.70
	_		
	Name of Officer	DEMO	
	Designation	PAYROLL CLE	RK
	_	DEMO (DEMO)	
	Name and Address of Employe	DEMO	
Date 31-12-2020	Employer's Telephone No.	1234	
Date	,,		

MALAYSIA **INCOME TAX**

PRIVATE SECTOR Employee's Statement of Remuneration

Employee's IncomeTax No.

Serial No. Employer's No. E. DEMO

STATEMENT OF REMUNERATION FROM EMPLOYMENT FOR THE YEAR ENDED 31 DECEMBER 2020.

LHDNM Branch KUC

A PARTICULARS OF EMPLOYEE				
Full Name of Employee/Pensioner (Mr./Miss/Ma	adam)DDDDDDDD			
		f No./Payroll No	10004	
		sport No		
6. EPF No. 71916300	7. SOC	CSO No	919999-99-9999	
8. Number Of Children		e period of employment		
Qualified For Tax Relief1	(a)	Date of commencement	t	
	(b)) Date of cessation		
B EMPLOYMENT INCOME, BENEFITS AND LIVIN	G ACCOMODATION			DM
(Excluding Tax Exempt Allowances/Perquisites/Gi				RM
(a) Gross salary, wages or leave pay (including	•			23,602.11
(b) Fees (including director fees), commission of				2,000.00
(c) Gross tips, perquisites, awards/rewards or o				0.00
(d) Income tax borne by the employer in respec)		0.00
(e) Employee Share Option Scheme (ESOS) be				0.00
(f) Gratuity for the period from				0.00
Details of arrears and others for preceding year				
Type of income (a)	a paid iii tiie cuitetit yeal			
(b)				0.00
3. Benefits-in-kind (Specify:	,			0.00
Value of living accomodation provided (Address		١		0.00
Refund from unapproved Provident/Pension Fu)		0.00
Compensation for loss of employment	nu .			0.00
o. Compensation for loss of employment				
C PENSIONS AND OTHERS				0.00
1. Pension				0.00
2. Annuities or other Periodical Payments				0.00
TOTAL				25,602.11
D TOTAL DEDUCTION				
Monthly Tax Deductions (MTD) remitted to LHE	NM			0.00
2. CP 38 Deductions				0.00
3. Zakat paid via salary deduction				0.00
Total claim for deduction by employee via Form	TP1 in respect of:			
(a) Relief	RM			
(b) Zakat other than that paid via monthly sal	ary deduction RM	0.00		0.000.00
Total qualifying child relief	,			2,000.00
-				
CONTRIBUTIONS PAID BY EMPLOYEE TO APP Name of Provident Fund KWSP	PROVED PROVIDENT FUND/PENSI	ION FUND AND SOCS	0	
1. Name of Provident Fund	he employed a charact contribution	anlu)	DM	3,023.00
Amount of compulsory contribution paid (state t	' '	• /	RM RM	120 50
SOCSO : Amount of compulsory contribution pa	id (state the employee's share of cor	illibution only)	KIVI	
F TOTAL TAX EXEMPT ALLOWANCES / PERQUI	SITES / GIFTS / BENEFITS		RM	1,797.11
	Name of Off	DEMO		
	Name of Officer	PAYROLL CLERK		
	Designation	DEMO (DEMO)		
	Name and Address of Employer	DEMO		
Date: 31-12-2020	Employer's Telephone No.	1234		
Date				

INCOME TAX

PRIVATE SECTOR Employee's Statement of Remuneration

Employee's IncomeTax No.

Serial No. Employer's No. E. DEMO

STATEMENT OF REMUNERATION FROM EMPLOYMENT FOR THE YEAR ENDED 31 DECEMBER 2020.

LHDNM Branch KUC

A PARTICULARS OF EMPLOYEE				
Full Name of Employee/Pensioner (Mr./Miss/Max.)	adam) EEEEEE			
	3. Staf			
		sport No	070000 00 0000	
6. EPF No. /1/5939/	7. SOC	CSO No	979999-99-9999	
Number Of Children		e period of employmer		
Qualified For Tax Relief1	` '	Date of commenceme	nt	
	(b)) Date of cessation		
B EMPLOYMENT INCOME, BENEFITS AND LIVING	G ACCOMODATION			RM
(Excluding Tax Exempt Allowances/Perquisites/Gi				
1. (a) Gross salary, wages or leave pay (including	•			24,900.00
(b) Fees (including director fees), commission of				2,000.00
(c) Gross tips, perquisites, awards/rewards or c		:)		0.00
(d) Income tax borne by the employer in respec		,		0.00
(e) Employee Share Option Scheme (ESOS) be				0.00
(f) Gratuity for the period from				0.00
Details of arrears and others for preceding year				
Type of income (a)	•			
(b)				0.00
3. Benefits-in-kind (Specify:)			0.00
Value of living accomodation provided (Address)		0.00
5. Refund from unapproved Provident/Pension Fu				0.00
6. Compensation for loss of employment				0.00
PENSIONS AND OTHERS				0.00
1. Pension				0.00
2. Annuities or other Periodical Payments				0.00
TOTAL				26,900.00
				· · · · · · · · · · · · · · · · · · ·
D TOTAL DEDUCTION				0.00
Monthly Tax Deductions (MTD) remitted to LHE	NM			0.00
2. CP 38 Deductions				0.00
Zakat paid via salary deduction				
4. Total claim for deduction by employee via Form	·	0.00		
(a) Relief	RM			
(b) Zakat other than that paid via monthly sal	ary deduction RM	0.00		2,000.00
5. Total qualifying child relief				
E CONTRIBUTIONS PAID BY EMPLOYEE TO APP	PROVED PROVIDENT FUND/PENS	ION FLIND AND SOC	sn.	
Name of Provident Fund KWSP	ROVED I ROVIDENT I OND/I ENO	ION I OND AND OOO	30	
Amount of compulsory contribution paid (state t	he employee's share of contribution	only)	RM	3,184.00
SOCSO : Amount of compulsory contribution part	• •	• /	RM	135.00
, ,	, , ,	,,		
F TOTAL TAX EXEMPT ALLOWANCES / PERQUI	SITES / GIFTS / BENEFITS		RM	1,830.00
	Name of Officer	DEMO		
	Designation	PAYROLL CLERK	·	
	Name and Address of Employe	r DEMO (DEMO)		
		DEMO		
- 24.40.0000	Employed Talant N	1234		
Date 31-12-2020	Employer's Telephone No.	1234		
	i i			

INCOME TAX

PRIVATE SECTOR Employee's Statement of Remuneration

Employee's IncomeTax No.

Serial No.	
Employer's No. E	DEMO

STATEMENT OF REMUNERATION FROM EMPLOYMENT FOR THE YEAR ENDED 31 DECEMBER 2020.

LHDNM Branch KUC

A PARTICULARS OF EMPLOYEE				
1. Full Name of Employee/Pensioner (Mr./Miss/				
		•	סטטטו	
	•	assport No.	939999-99-9999	
8. Number Of Children			yment is less than a year,	
Qualified For Tax Relief0	,		cement	
		(b) Date of cessation	n	
B EMPLOYMENT INCOME, BENEFITS AND LIVI	NG ACCOMODATION			RM
(Excluding Tax Exempt Allowances/Perquisites/0	Gifts/Benefits)			
1. (a) Gross salary, wages or leave pay (includir	ng overtime pay)			15,380.78
(b) Fees (including director fees), commission	or bonus			1,500.00
(c) Gross tips, perquisites, awards/rewards or	other allowances (Details of payme	nt :)	0.00
(d) Income tax borne by the employer in resp	ect of his employee			0.00
(e) Employee Share Option Scheme (ESOS)	benefit			0.00
(f) Gratuity for the period from	to			0.00
2. Details of arrears and others for preceding ye	ars paid in the current year			
Type of income (a)				
(b)				0.00
3. Benefits-in-kind (Specify:)			0.00
Value of living accomodation provided (Addre)	0.00
5. Refund from unapproved Provident/Pension I	- und		••••	0.00
6. Compensation for loss of employment				0.00
C PENSIONS AND OTHERS				
1. Pension				0.00
Annuities or other Periodical Payments				0.00
TOTAL				16,880.78
				10,000.70
D TOTAL DEDUCTION				0.00
Monthly Tax Deductions (MTD) remitted to Li	HDNM			0.00
2. CP 38 Deductions				0.00
3. Zakat paid via salary deduction				0.00
4. Total claim for deduction by employee via Fo	m TP1 in respect of:			
(a) Relief	RM		.00	
(b) Zakat other than that paid via monthly s	alary deduction RM	0.	.00	0.00
5. Total qualifying child relief	-			0.00
CONTRIBUTIONS PAID BY EMPLOYEE TO AI Name of Provident Fund				
	the control of the state of the			2,022.00
Amount of compulsory contribution paid (state			RM	82.00
2. SOCSO : Amount of compulsory contribution	paid (state the employee's share of c	contribution only)	RM	
F TOTAL TAX EXEMPT ALLOWANCES / PERQU	JISITES / GIFTS / BENEFITS		RM	3,490.46
_				
	Name of Off	DEMO		
	Name of Officer	PAYROLL CL	FRK	
	Designation	DEMO (DEM		
	Name and Address of Employ	DEMO	<u>~</u> /	
Date 31-12-2020	Employer's Telephone No.	1234		
Date	Employer of relephone No.			

INCOME TAX

PRIVATE SECTOR Employee's Statement of Remuneration

F/

Employee's IncomeTax No.

Serial No.
Employer's No. E .DEMO

STATEMENT OF REMUNERATION FROM EMPLOYMENT FOR THE YEAR ENDED 31 DECEMBER 2020.

LHDNM Branch KUC

A PARTICULARS OF EMPLOYEE	000000			
Full Name of Employee/Pensioner (Mr./Miss/	Madam)GGGGGGG			
		•	10007	
	5. Pass		050000 00 0000	
			959999-99-9999	
8. Number Of Children			ent is less than a year,	
Qualified For Tax Relief1	` '		ent	
	(b)	Date of cessation		
B EMPLOYMENT INCOME, BENEFITS AND LIV	ING ACCOMODATION			RM
(Excluding Tax Exempt Allowances/Perquisites/				KWI
(a) Gross salary, wages or leave pay (including the control of the control o	•			14,400.00
(b) Fees (including director fees), commission				1,200.00
(c) Gross tips, perquisites, awards/rewards o)		0.00
(d) Income tax borne by the employer in resp		,		0.00
(e) Employee Share Option Scheme (ESOS)				0.00
(f) Gratuity for the period from				0.00
Details of arrears and others for preceding years.				
Type of income (a)	•			
(b)				0.00
3. Benefits-in-kind (Specify:)			0.00
4. Value of living accomodation provided (Addre	ess:)		0.00
5. Refund from unapproved Provident/Pension	Fund		****	0.00
6. Compensation for loss of employment				0.00
_				
PENSIONS AND OTHERS				0.00
1. Pension				0.00
2. Annuities or other Periodical Payments				0.00
TOTAL				15,600.00
D TOTAL DEDUCTION				
	LIDNIM			0.00
 Monthly Tax Deductions (MTD) remitted to L CP 38 Deductions 	HDINIVI		••••	0.00
Zakat paid via salary deduction				0.00
Total claim for deduction by employee via Fo	rm TP1 in respect of			
(a) Relief	RM	0.00		
(b) Zakat other than that paid via monthly		0.00		
Total qualifying child relief	raw			2,000.00
7 7 3				
E CONTRIBUTIONS PAID BY EMPLOYEE TO A	PPROVED PROVIDENT FUND/PENSI	ON FUND AND SO	cso	
Name of Provident Fund KWSP				4 020 00
Amount of compulsory contribution paid (stat	e the employee's share of contribution o	only)	RM	
2. SOCSO: Amount of compulsory contribution	paid (state the employee's share of con	tribution only)	RM	81.00
E			211	1,800.00
F TOTAL TAX EXEMPT ALLOWANCES / PERQ	UISITES / GIFTS / BENEFITS		RM	1,000.00
		DEMO		
	Name of Officer	DEMO PAYROLL CLER	 K	
	Designation	DEMO (DEMO)	13	
	Name and Address of Employer	DEMO		
Date. 31-12-2020	Employer's Telephone No.	1234		

INCOME TAX

PRIVATE SECTOR Employee's Statement of Remuneration

IEA

Employee's IncomeTax No.

Serial No.
Employer's No. E DEMO

STATEMENT OF REMUNERATION FROM EMPLOYMENT FOR THE YEAR ENDED 31 DECEMBER 2020.

LHDNM Branch KUC

A PARTICULARS OF EMPLOYEE				
Full Name of Employee/Pensioner (Mr./Miss/Ma				
		aff No./Payroll No		
		ssport No		
6. EPF No. /1930466	7. SO	OCSO No	999999-99-9922	
Number Of Children		he period of employme		
Qualified For Tax Relief0) Date of commenceme	ent	
	(k	b) Date of cessation		
B EMPLOYMENT INCOME, BENEFITS AND LIVING	G ACCOMODATION			RM
(Excluding Tax Exempt Allowances/Perquisites/Gif				KWI
(a) Gross salary, wages or leave pay (including)	· ·			23,400.00
(b) Fees (including director fees), commission of				2,000.00
(c) Gross tips, perquisites, awards/rewards or o		ıt :)		0.00
(d) Income tax borne by the employer in respec		,		0.00
(e) Employee Share Option Scheme (ESOS) be				0.00
(f) Gratuity for the period from				0.00
Details of arrears and others for preceding year				
Type of income (a)	•			
(b)				0.00
3. Benefits-in-kind (Specify:)			0.00
Value of living accomodation provided (Address)		0.00
5. Refund from unapproved Provident/Pension Fu	nd			0.00
6. Compensation for loss of employment				0.00
PENSIONS AND OTHERS				0.00
1. Pension				0.00
2. Annuities or other Periodical Payments				0.00
TOTAL				25,400.00
				· · · · · · · · · · · · · · · · · · ·
D TOTAL DEDUCTION				0.00
Monthly Tax Deductions (MTD) remitted to LHD	NM			0.00
2. CP 38 Deductions				0.00
Zakat paid via salary deduction				
4. Total claim for deduction by employee via Form	•	0.00		
(a) Relief		0.00		
(b) Zakat other than that paid via monthly sal	ary deduction RM	0.00		0.00
5. Total qualifying child relief				
E CONTRIBUTIONS PAID BY EMPLOYEE TO APP	POVED DROVIDENT ELIND/DENS	SION ELIND AND SOC	280	
Name of Provident Fund KWSP	ROVED PROVIDENT FOND/FENS	SION FUND AND SOC	30	
Amount of compulsory contribution paid (state t	he employee's share of contribution	only)	RM	2,992.00
SOCSO : Amount of compulsory contribution par		• ,	RM	123.00
2. Cooco : / linearit of compared y contribution pa	ia (state the employee's chare of ea	onandadon omy)	1 400	••••••
F TOTAL TAX EXEMPT ALLOWANCES / PERQUIS	SITES / GIFTS / BENEFITS		RM	1,800.00
_				
	Name of Officer	DEMO		
	Designation	PAYROLL CLERK	······································	
	Name and Address of Employe	DEMO (DEMO)		
	Tamb and Addiose of Employe	DEMO		
Date. 31-12-2020	Employer's Telephone No.	1234		