

## **Application for a Tax Directive: Section 8A or 8C amount**

IRP3(s)

Any amount to be included under section 8A or 8C of the Income Tax Act

IRP3(s)

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Particulars of Employer (continued)	
Business Address	
	Postal Code Postal Code
Postal Address	
	Postal Code
Amount Details	
Mark the applicable reason for the directive application request with an X:	
Revenue gain i.r.o rights to acquire marketable securities in terms of section 8A	Revenue gain i.r.o the vesting of equity instruments in terms of section 8C  Amounts in terms of par (dd) of the proviso to section 10(1)(k)(i) dividends
Amounts in terms of par (ii) of the proviso to section 10(1)(k)(i) dividends	Amounts in terms of par $(j)$ of the proviso to section $10(1)(k)(i)$ dividends
Date of accrual (CCYYMMDD)	
Is the exemption in terms of section 10(1)(o)(ii) applicable? Yes No	
Indicate the qualifying 12 months period(s) during which the exemption in terms of secti	on 10(1)(o)(ii) applies:
Start date (CCYYMMDD)	End date (CCYYMMDD)
Total number of work days during above qualifying period	Number of work days outside SA during above qualifying period
Start date (CCYYMMDD)	End date (CCYYMMDD)
Total number of work days during above qualifying period	Number of work days outside SA during above qualifying period
Start date (CCYYMMDD)	End date (CCYYMMDD)
Total number of work days during above qualifying period	Number of work days outside SA during above qualifying period
Start date (CCYYMMDD)	End date (CCYYMMDD)
Total number of work days during above qualifying period	Number of work days outside SA during above qualifying period

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Amount Details (continued)
Start date (CCYYMMDD) End date (CCYYMMDD)
Total number of work days during above qualifying period Number of work days outside SA during above qualifying period
Please provide source period relating to the section 8A/8C revenue gain:  Start date (CCYYMMDD)  End date (CCYYMMDD)
Total number of work days during source period Number of work days outside SA during source period
R R , , . , , . , , . , , . , , , , , ,
Exempt amount of the gain/amount under section 10(1)(o)(ii) [ ( Number of work days outside   Total number of work days ) X Gross Value ] R ,
Taxable portion of gain/amount ,
<b>Declaration</b>
I declare that the information furnished is true and correct in every respect.    Date (CCYYMMDD)     For enquiries go to www.sars.gov.za or call 0800 00 SARS (7277)

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