

URUSAN SERI PADUKA BAGINDA

BAYARAN POS JELAS POSTAGE PAID PUSAT MEL NASIONAL SHAH ALAM **MALAYSIA** NO. WP0218

Date:

BORANG M 2014

- ★ Due date to furnish Form M and pay the balance of tax payable:
 - (a) 30 April 2015 (for those who do not carry on any business); or
 - (b) 30 June 2015 (for those who carry on business)
 - Penalty under subsection 112(3) of the Income Tax Act 1967 (ITA 1967) shall be imposed for failure to furnish this return form before or on the due date for submission.
 - An increase in tax of 10% under subsection 103(3) of ITA 1967 shall be imposed for failure to pay the balance of tax payable before or on the due date for submission. Any balance remaining unpaid upon the expiration of 60 days from the date of such increase, shall be further increased by 5% of the balance unpaid under subsection 103(4) of ITA 1967.
- ★ Please refer to the Form M 2014 Explanatory Notes before filling up this form

IMPORTANT REMINDER

- All relevant items have to be completed in BLOCK LETTERS and use black ink pen.
- METHOD OF PAYMENT
 - 1. Payment can be made at:
 - 1.1 Bank Information regarding payment via bank is available at the LHDNM Official Portal, http://www.hasil.gov.my
 - 1.2 LHDNM
- ByrHASiL via FPX (Financial Process Exchange) at the LHDNM Official Portal, http://www.hasil.gov.my
 LHDNM payment counters in Peninsular Malaysia (Kuala Lumpur Payment Centre), Sabah and FT Labuan (LHDNM Kota Kinabalu Branch) and Sarawak (LHDNM Kuching Branch) or by mail. Cheques, money orders and bank drafts must be crossed and made payable to the Director General of Inland Revenue. When making payment, use the Remittance Slip (CP501) which is available at the LHDNM Official Portal, http://www.hasil.gov.my
 - If sent by post, payment must be sent separately from the form. Payment by CASH must not be sent by post.
 - 1.3 Pos Malaysia Berhad counter and Pos Online
 - 2. Write down the name, address, telephone number, income tax number, year of assessment, payment code '084' and instalment no. '99' on the reverse side of the financial instrument. Check the receipts / bank payment slips before leaving the payment counter.

 Pursuant to section 89 of ITA 1967, a change of address must be furnished to LHDNM within 3 months of the change. Notification can be made via e-Kemaskini
- or by using Form CP600B (Change of Address Notification Form) which can be obtained at the LHDNM Official Portal, http://www.hasil.gov.my.
- The use of e-Filing (e-M) is encouraged. Please access https://e.hasil.gov.my
- For further information, please contact :- Toll Free Line: 1-800-88-5436 (LHDN) Calls From Overseas: 603-77136666

FOR OFFICE USE	

Date received (1)

Date received (2)

If Undelivered, Return To: JABATAN PEMPROSESAN MAKLUMAT LEMBAGA HASIL DALAM NEGERI MALAYSIA **MENARA HASIL** NO. 3, JALAN 9/10, SEKSYEN 9 **KARUNG BERKUNCI 222** 43659 BANDAR BARU BANGI SELANGOR, MALAYSIA



RETURN FORM OF A NON-RESIDENT INDIVIDUAL UNDER SECTION 77 OF THE INCOME TAX ACT 1967 This form is prescribed under section 152 of the Income Tax Act 1967

Form

YEAR OF ASSESSMENT 2014

Lemb	paga Hasil Dalam Negeri Malaysia		is form is presembed	anacı se	tion 102 of the meome 14	CACCISO?	CP54	I - Pin. 2014	
_	Name (as a state of the state of		E	SASIC PAI	RTICULARS				
1	Name (as per identification de	ocument)			2 International Alexander		T		
2	Income Tax No.			3 Identification No.					
4	Current Passport No.			5 Expiry Date of Current Passport (dd/mm/yyyy)					
6	Passport No. Registered w	ith LHDNM _			7 Date of Birth (dd/mm/	уууу)			
	RT A:				OF INDIVIDUAL				
A1	Citizen		Use Country Code <i>Enter 'MY' if Malaysian</i>	Citizen)	A2 Sex		1 = Male 2	2 = Female	
А3	Status as at 31-12-2014	1 = Single 2 = Married	3 = Divorcee/Widow/ 4 = Deceased	Widower	A4 Date of Marriage / D	ivorce / Demise (dd/mm/yy)	yy)		
			the name of husband		= Joint in the name of wife	3 = Separate			
A5	Type of Assessment				/ no income / no source of inc		cee/widow/widower	r/deceased)	
A6	Record-keeping	1 = Yes	2 = No						
PAR	TB:	STATU	JTORY INCOME, TOT	AL INCO	ME AND TAX PAYABLE / F	REPAYABLE	RM	Sen	
В1	Statutory income from bus	inesses				B1		.00	
B2	Statutory income from part	nerships				B2		.00	
В3	Aggregate statutory incom	e from business	ses (B1 + B2)			В3		.00	
В4	LESS: Business losses be	rought forward	(Restricted to amount in	1 B3)		B4		.00	
B5	Total (B3 – B4)					B5		.00	
B6	Statutory income from emp	oloyment * / dire	ector's fees			В6		.00	
	* If there is a claim for e		ployment income und	der:					
	1 = Paragraph 21 \$								
	State: Amount exemp	· —	ween Malaysia and		Country Code)				
B7				.00		B7		.00	
B8	Statutory income from divi Statutory income from disc			e othern	eriodical navmente	B8		1.00	
Бо	other gains or profits and a		· •		enouicai payments,	50		.00	
В9	AGGREGATE INCOME (35 + B6 + B7 + B8	3)			В9		.00	
B10	LESS: Current year busin	ess losses (Res	stricted to amount in B9)		B10		.00	
B11	LESS: Qualifying prospec	ting expenditure	e – Schedule 4 and p	aragraph	44 (1)(b)	B11		.00	
B12	LESS: Approved donation	ns / gifts / contrib	butions			B12		.00	
B13	TOTAL [B9 – (B10 to B12)] (Enter '0' if valu	ue is negative)			B13		.00	
B14	TAXABLE PIONEER INCO	OME				B14		.00	
B15	Gross income subject to ta	x at other rates	(Please specify)		.00	
B16	TOTAL INCOME (SELF) (B13 + B14 + B15)			B16		.00	
B17	TOTAL INCOME TRANSFE	RRED FROM H	USBAND / WIFE * FO	R JOINT	ASSESSMENT	B17		.00	
	* Type of income transferr	ed from HUSBA	AND / WIFE	1 = With t	usiness income 2 = Witho	out business income		·	
B18	318 AGGREGATE OF TOTAL INCOME (B16 + B17) B18							.00	
B19	CHARGEABLE INCOME (f	rom B16 or B18 w	hichever applies)			B19		.00	
B20	Computation of Tax Charg								
	Division of Chargeable Income	e according to the			Tax Rate (%)	-	Income Tax	<u> </u>	
	B20a		.00		26	B20a			
	B20b		.00			B20b			
	B20c		00.			B20c		-	
	TOTAL INCOME TAX (B20 LESS: Section 51 Finance	a to B20c)	Section 110		Section			<u> </u>	
B22	Act 2007 (dividends)		(others)		132 and 133				
B23	TAX PAYABLE (B21 – B22	:)				B23			
B24	Or TAX REPAYABLE (B	22 – B21)				B24			
B25	Instalments / Monthly Tax [Deductions (MTD	O) paid for 2014 incon	ne – SELF	and HUSBAND / WIFE fo	r joint assessment			
B26	Balance of Tax Payable (I	323 – B25) / Ta	ax Paid in Excess (B2	25 – B23)		B26			
				DECL	ADATION .	▲ (E	nter 'X' if Tax Paid	in Excess)	
	T			DECL	ARATION Identificati	ion / Passport No.			
here	eby declare that the inform	ation regarding	the income and cla	im for de		· · · · · · · · · · · · · · · · · · ·	orm and in any	document	
	ched is true, correct and cor				v	•	Í		
* Th	s return form is made:	ursuant to subse	ection 74(3) of the Inc		dividual in item 1 3 = as ar Act 1967. Please furnish F			,	
ava	ailable at the LHDNM Official	ortai, <i>Http://ww</i> v	v.nasii.yuv.niy						
					Signature:				
Data	e: (dd/mm/yyyy)				g.i.a.a. 5.				
عادل	o. (adminingyyy)	I				1			

PAR			PARTICULARS OF	F HUSBA	ND / WIFE							
C1	Name of Husband / Wife (as per identification document)											
C2	Identification No.											
C3	Current Passport No.			C4 E	xpiry Date of C	urren	Pass	port (da	/mm/yyyy			
C5	Passport No. Registered with LHDNN			C6 D	ate of Birth (da	/mm/yy	уу)					
PAR	T D:	<u>-</u>	OTHER PAR	TICULAR	RS							
D1	Telephone No.		-	D2 E	mployer's no.		Е					
D3	e-Mail	•		"								
D4	Permanent Address in Country of Or	igin										
	of Individual / Executor of the Deceased Person's Estate Postcode											
			City									
	State & Cou	ntry										
D5	Name of Bank *			D6 B	ank Account N	lo. *						
D7	Type of Foreign Currency Requested	*		D8 SWIFT Code *								
* NC	TE: Enter the Name of the Bank and	Bank Acc	count No. for the purpose of	f electron	ic refund of inc	ome t	ax					
PAR	TE:		INCOME OF PRECEDING			RED						
	Type of Income		Year for which Paid	G	ross Amount		Pro	vident	and Pen	sion Fu	ınd Con	tribution
E1 E2						.00						.00
			FINANCIAL BARTIO	U A DO O	E INDUIDUA							.00
PAR			FINANCIAL PARTICU	JLARS U	F INDIVIDUAL	-						
	Name of business (main business)											
F2	Business code				NCE SHEET							
	DING, PROFIT AND LOSS ACCOUNT	╨┌──		_	<u>ASSETS</u>							
F3	Sales / Turnover				F28 Land and buildings							
	LESS:		,		29 Plant and machinery							
F4	Opening stock				30 Motor vehicles							
F5	Purchases and cost of production			— I	F31 Other fixed assets F32 TOTAL FIXED ASSETS							
F6	Closing stock				(F28 to F31)							
F7	Cost of sales (F4 + F5 – F6)			F33 In	vestments							
F8	GROSS PROFIT / LOSS (F3 – F7)				CURRENT ASSETS							
		▲ (E	▲ (Enter 'X' if negative)		F34 Stock							
<u>OTH</u>	IER INCOME			F35 Ti	ade debtors							
F9	Other business income			F36 S	undry debtors							
F10	Dividends			F37 C	F37 Cash in hand							
F11	Interest and discounts			F38 C	38 Cash at bank							
F12	Rents, royalties and premiums			_				(Enter 'X'	if negati	ive)		
F13	Other income				ther current as							
F14	TOTAL (F9 to F13)				F40 TOTAL CURRENT ASSETS (F34 to F39)		•					
EXP	ENSES			F41 T	OTAL ASSET							
	Loan interest			LIABII	32 + F33 + F4	10)		Ь				
	Salaries and wages			┨	oans and over	drafts						
	Rental / Lease				rade creditors	aranto						
	Contracts and subcontracts				undry creditors	 }						
	Commissions				OTAL LIABILI							
					42 to F44)			L				
	Bad debts			┨ ──	R'S EQUITY							
	Travelling and transport				6 Capital account							
	F22 Repairs and maintenance			⊣	F47 Current account balance brought forward			(Enter 'X'	if negat	ive)		
	F24 Other expenses				F48 Current year profit / loss			,,	oguti	- 🗸		
	Other expenses TOTAL EXPENDITURE (F15 to F24	·			unom year pit	/IIC / IU			(Enter 'X'	if neaat	ive)	
	NET PROFIT / LOSS			F49 Net advance / drawing				- 3-4	•			
5		▲ (E	inter 'X' if negative)	│			•		(Enter 'X'	if negati	ive)	
F27	Non-allowable expenses			F50 ∩	urrent account	balan	ice			-		
	······································				arried forward			_	(Enter 'X'	if negati	ive)	

Income Tax No.:

Name:

Nan				Income Tax No.:		
PAF	RT G:		PARTICULARS OF BI	JSINESS INCOME		
G1	Losses carried fo		G2	Pioneer loss carried forward		
G3	Business capital carried forward		G4	Partnership capital allowance carried forward		
PAF	RT H:	PARTI	CULARS OF TAX AGENT WHO	COMPLETES THIS RETU	RN FORM	
H1	Name of Firm		H2	Telephone No.	_	
			H4	Signature		
Н3	Tax Agent's App	proval No.				