# FORM NO. 15CA

Income-tax Department [See rule 37BB]

Information to be furnished for payments to a non-resident not being a company, or to a foreign company

Ack. No. 3S456

Part A

(To be filled up if the remittance is chargeable to tax under the provisions of the Income-tax Act, 1961 and the remittance or the aggregate of such remittances as the case may be does not exceed five lake runges during the financial year)

th	e aggregate of such remittances, as the case may be, does not exceed five lakh rupees during the fir	ancial year)					
	Name of remitter	MARINE FO	DDS				
REMITTER	[Permanent Account Number or Aadhaar Number] of the remitter (if available)	S2DYW8					
	TAN of the remitter (if available)	DELH9876	5K				
EMI	Complete address, email and phone number of the remitter	DE 11.5070	Keshava Nagar , Bandra-Kurla Complex				
≃	Status of remitter	Company	Bandra (East), Mumbai 400051,				
	Residential status of remitter <sup>2</sup>		ndia,info@smf.com,+91-8887996612				
H	Name of recipient of remittance	UNITED CAT	ER LTD				
E	[Permanent Account Number or Aadhaar Number] of the recipient of remittance, if availables	GHIJK5678L					
REMITTEE	Complete address, email and phone number of the recipient of remittance		UNIT 14 FLEETWAY				
≃	Country to which remittance is made	United Kingdom	BUSINESS PARK PERIVALE, GREENFORD				
	Amount payable before TDS (In Indian Currency)	8578901.23	UB6 7LD UNITED KINGDOM				
	Aggregate amount of remittances made during the financial year including this proposed remittance	2024-03-18					
l <sub>El</sub>	Name of bank	JPMorgan Cha	se Bank				
REMITTANCE	Name of the branch of the bank	New York					
ΙÈ	Proposed date of remittance	2023-04-17					
EW	Nature of remittance	JPMorgan Chas	e Bank				
~	Please furnish the relevant purpose code as per RBI	S0210					
	Amount of TDS	164578					
	Rate of TDS	2.00					
	Date of deduction	2004-03-15					
knowled document above re	unported Signatury (and to solemnly declare that the information given above is true to ge and belief and no relevant information has been concealed. I/We* further undertake to so that for enabling the income-tax authorities to determine the nature and amount of income of termitance as well as documents required for determining my liability under the Income-tate the fordeduction of tax at source.	the best of mubmit the requisite the recipient of the Act as a person	y e e				
Plac	e: Signature of the person responsible for paying to non						
Flac							
Date	e: Name and Designation of the person responsible for paying to						
* Delete whichever is not applicable.  ¹ Write 1 if company, write 2 if firm, write 3 if individual and write 4 if others.  ² In case of company, write 1 if domestic company, write 2 if foreign company, in case of person other than company, write 3 if resident, write 4 if non-resident  ³ In case of non-availability of [Permanent Account Number or Aadhaar Number], provisions of section 206AA shall be applicable  ¹ If available  ³ If available							
	Part B						

(To be filled up if the remittance is chargeable to tax under the provisions of the Income-tax Act,1961 and the remittance or the aggregate of such remittances, as the case may be, [exceeds] five lakh rupees during the financial year and an order/certificate u/s 195(2)/195(3)/197 of Income-tax Act has been obtained from the Assessing Officer)

ME.	Name of remitter	
M F T	[Permanent Account Number or Aadhaar Number] of the remitter	

	TAN of the remitter		
	Complete address, email and phone nu		
	Status of remitter <sup>2</sup>		
	Residential status of remitter <sup>3</sup>		
6-3	Name of recipient of remittance		
TEE	[Permanent Account Number or Aadhaar Nu		
REMITTEE	Complete address, email <sup>5</sup> and phone nu		
~	Section under which order/certificate has be	een obtained	
A.O. ORDER	Name and designation of the Assessing Off	icer who issued the order/certificate	
A. J.	Date of order/certificate		
	Order/ certificate number		
	Country to which remittance is made	Country:	Currency:
	Amount payable	In foreign currency:	In Indian Rs.
	Name of the Bank	Branch of the Bank	
	BSR Code of the bank branch (7 digit)		(DDAMANAYAY)
NA.	Proposed date of remittance  Nature of remittance as per agreement/ doc	(DD/MM/YYYY)	
E	Please furnish the relevant purpose cod		
REMITTANCE	Amount of TDS		
×	Rate of TDS		
	Date of deduction		
	Date of deduction		
knowledge section 19 I/We* fur	of(designation) solemnly dece e and belief and no relevant information (5(2)/195(3)/197 of the Income-tax Act, ther undertake to submit the requisite	VERIFICATION  me in block letters), son/daughter ofclare that the information given above is on has been concealed. I/We* certify tha 1961 has been obtained, particulars of whidocuments for enabling the income-tax and	s true to the best of my t a certificate/order under the are given in this Form. Athorities to determine the
	amount of income of the recipient of the income-tax. Act as a person response	e above remittance as well as documents re	quired for determining my
naomity ui.	ider the meome-tax Act as a person response	onside for deduction of tax at source.	
Place: Signature of the person responsible for paying to non-res			
Date:	Name and	Designation of the person responsible for pa	aying to non-resident
<sup>1</sup> In case TAN <sup>2</sup> Write 1 if co <sup>3</sup> In case of co non-resident.			

remittance or the aggregate of such remittances, as the case may be, exceeds five lakh rupees during the financial year and a certificate in Form No. 15CB from an accountant as defined in the *Explanation* below sub-section (2) of section 288 has been obtained)

Section	A GENERAL INFO	RMATION										
	Name of the remitter	Marine Foods										
ER	[Permanent Account Number or A B C D B 1 2 3 4 F Aadhaar Number], of remitter	Area Code	AO Ty	be	Ran 4	ge Co 5	de	AO No 123				
III	Principal Place of Business	TAN of remitter	.1	D E	L H	9	8	7 6 5	K			
REN	Complete address, email and phone number of the remitter	Basement No.7, Keshava, Bandra-Kurla Complex, Bandra (Ba						a (Ea	st), Mum	bai 4000	51, Inc	

	St	atus <sup>2</sup> Company	Residential st	atus of remitter <sup>3</sup>	Resident			
	N:	ame of recipient of remittar	nce	Cater Ltd		recipient of r	Account Number or Acclluour Number] of the emittance <sup>4</sup>	
田田	Status <sup>5</sup> Company					<del>19 18 19 10 17 10 12 1</del>		
REMITTEE	A	idress	PERIVALE, GR	TWAY BUSINESS PA		Country to which remittance is made: United Kingdom		
	Pr	incipal place of business Unit 14 Fleetway Bus	KINGDOM Ema	ail address		(ISD co	de)-Phone Number	
	(a	Perivale, Greenford L	JB6.7LD   Olde	rs@unitedcater.co.uk				
	(4				John Doe	9		
	(b		ship/firm of the	accountant	Doe & As	sociates		
ACCOUNTANT	(c)	) Address			123 Main \$	Street, Any	rtown, CA 91234, USA	
AC	(d	Registration No. of the	accountant		CA123456	6		
	(e	Date of certificate (DD	O/MM/YYYY)	17-03-2004	Certificate No CERT-2024-			
A.O. ORDER	(a	Whether any order/ cer Income-tax Act has bee Officer.			(Tick)	Yes	□ No	
- INC	(b	) Section under which or						
	(c)	Name and designation the order/certificate	of the Assessing	Officer who issued				
A.	(d		e					
	(e		oer					
Sect	ion B			TANCE AND TDS (		te of the a		
	2.	Country to which remitta Amount payable	ince is made	Country: United Kin In foreign currency:			Currency: USD In Indian Rs. 857901.23	
(-)	3.	Name of the Bank		Branch of the Bank			III IIIdaa Itaa oo oo aa a	
Š	4.	BSR Code of the bank br			0 2 1			
T.	5.	Proposed date of remittar  Nature of remittance as		(DD/MM/YYYY)	17-03-2024			
REMITTANCE	0	document	per agreement/	Payment for good	S			
E E	7.	Relevant purpose code	as per RBI	S0210				
	8.	In case the remittance is whether tax payable has up?		(Tick) Yes	s Ao			
	9.	Taxability under the prov Income-tax Act (without DTAA)		0				
E		(a) the relevant section of						
I.T.AC		which the remittance is c (b) the amount of income tax		100000.00				
	ļ	(c) the tax liability		2000.00				
		(d) basis of determining t and tax liability	taxable income					
	10.	If any relief is claimed ur (i) whether tax residenc obtained from the remittance	y certificate is recipient of	(Tick) Yes	s No			
		(ii) please specify releva		N/A				
DTAA		(iii) please specify rele	vant article of	Nature of payment DTAA	as per			
		(iv) taxable income as pe	r DTAA	In Indian Rs.				
		(v) tax liability as per DT	ГАА	In Indian Rs.				
		A. If the remittance is fo	or royalties, fee	(Tick) Yes	s No			

		for technical services, interest, dividend, etc., (not connected with permanent establishment) please indicate:-	
		(a) Article of DTAA	
		(b) Rate of TDS required to be deducted in terms of such article of the applicable DTAA	As per DTAA (%) 2.00
		B. In case the remittance is on account of business income, please indicate:-	(Tick) Yes No
		(a) The amount of income liable to tax in India	
		(b) The basis of arriving at the rate of deduction of tax.	
		C. In case the remittance is on account of capital gains, please indicate:-  (a) amount of long term capital gains	(Tick) Yes No
		(b) amount of short-term capital gains	
		(c) basis of arriving at taxable income	
		D. In case of other remittance covered by sub-items A, B and C	(Tick) Yes No
		(a) Please specify nature of remittance (b) Whether taxable in India as per DTAA	
		(c) If yes, rate of TDS required to be deducted in terms of such article of the applicable DTAA	
		(d) if not, please furnish brief reasons thereof specifying relevant article of DTAA	
	11.	Amount of tax deducted at source	In foreign currency 2000.00 In Indian Rs. 164578
S	12.	Rate of TDS	As per Income-tax Act (%) or 2.00
TDS			As per DTAA (%)
	13. 14.	Actual amount of remittance after TDS  Date of deduction of tax at source, if	In foreign currency 102169.00 (DD/MM/YYYY) 15-03-2024
	17.	any	(DDMWITTT) 15-03-2024
			VERIFICATION
my/or obtain of de not be deduce for the	city of ur* kn ned fro ductio een de cted or ne said	Authorized Signatory (designation) solo owledge and belief and no relevant in om an accountant, particulars of which no ftax at source. In case where it is ducted or after deduction has not been not paid, as the case may be, along we default as per the provisions of the I	iull name in block letters), son/daughter of Peter Smith in the emnly declare that the information given above is true to the best of formation has been concealed. I/We* certify that a certificate has been have given in this Form, certifying the amount, nature and correctnes found that the tax actually deductible on the amount of remittance ha paid or not paid in full, I/We* undertake to pay the amount of tax no ith interest due. I/We* shall also be subject to the provisions of penalty income-tax Act, 1961. I/We* further undertake to submit the requisitions to determine the nature and amount of income of the recipient of the
above	e remi		for determining my/our liability under the Income-tax Act, 1961 as a
F	Place:	-	the person responsible for paying to non-resident
Ι	Date:		Designation of the person responsible for paying to non-resident

- \* Delete whichever is not applicable.

  ¹In case TAN is applied for, please furnish acknowledgement number of the application.

  ²Write 1 if company, write 2 if firm, write 3 if individual and write 4 if others.

  ³In case of company, write 1 if domestic company, write 2 if foreign company, in case of person other than company, write 3 if resident, write 4 if one-resident.

  ¹In case of non-availability of [Permanent Account Number or Acathewn Number], provisions of section 206AA shall be applicable

  ³Write 1 if company, write 2 if firm, write 3 if individual and write 4 if others.

  ³Accountant shall have the meaning as defined in Explanation below sub-section (2) of section 288 of the Income-tax Act, 1961.

  ³Please fill the serial number as mentioned in the certificate of the accountant.

### Part D

[To be filled up if the remittance is not chargeable to tax under the provisions of the Income-tax Act, 1961 {other than payments referred to in rule 37BB(3)} by the person referred to in rule 37BB(2)]

~	Name of the remitter									
	[Permanent Account Number or Andhaar Number] of the remitter, if available									
REMITTER	TAN of the remitter, if available									
SEMI SEMI	Complete address, email and phone number of the remitter									
	Status of remitter <sup>1</sup>									
	Residential status of the remitter <sup>2</sup>									
	Name of recipient of remittance									
題	[Permanent Account Number or Aadhaar Number] of the recipient of remittance, if available									
REMITTEE	Complete address, email <sup>3</sup> and phone number <sup>4</sup> of the recipient of remittance									
쮼	Country to which remittance is made		Country:		Currency:					
	Country of which the recipient of remittance is resident, if available									
	Amount payable	In foreign currency:			In Indian Rs.					
ш	Name of the bank	e of the bank Name of the		branch of	of the bank					
REMITTANCE	BSR code of the bank branch (7 digit)									
EIW	Proposed date of remittance (DD/MM/YYYY)			•	•					
22	Nature of remittance									
	Please furnish the relevant purpose code as per RBI									

I certify that I have reason to believe that the remittance as above is not chargeable under the provision of Income-tax Act 1961 and is not liable for deduction of tax at source.

## **VERIFICATION**

I/We*,	(full name in block letters), son/daughter of	in the
capacity of	(designation) solemnly declare that the information given above is true to	the best of
my/our* knowledge and b	belief and no relevant information has been concealed. In a case where it is found t	that the tax
actually deductible on the	amount of remittance has not been deducted or after deduction has not been paid or	not paid in
full, I/We* undertake to j	pay the amount of tax not deducted or not paid, as the case may be, along with in	iterest due.
I/We* shall also be subject	ct to the provisions of penalty for the said default as per the provisions of the Incon	ne-tax Act,
1961. I/We* further und	ertake to submit the requisite documents for enabling the income-tax authorities to	determine
the nature and amount of	income of the recipient of the above remittance as well as documents required for de-	etermining
my/our* liability under the	e Income-tax Act as a person responsible for deduction of tax at source.	
Place:	Signature of the person responsible for paying to non-resider	nt

Date: Name and Designation of the person responsible for paying to non-resident

- \* Delete whichever is not applicable.

  1 Write 1 if company, write 2 if firm, write 3 if individual and write 4 if others.
- <sup>2</sup> In case of company, write 1 if domestic company, write 2 if foreign company, in case of person other than company, write 3 if resident, write 4 if non-resident.

  <sup>3</sup> If available.
- <sup>4</sup> If available.

For Office Use only	For Office Use Only
	Receipt No.
	Date
	Seal and Signature of receiving official