

NOTICE FOR LABUAN ENTITIES

MALAYSIA'S LATEST GAZETTED AMENDMENT TO THE LABUAN TAX REGULATIONS EXCLUDES TWO LABUAN BUSINESS ACTIVITIES FROM THE SCHEDULE

Another shocking decision made by the Government of Malaysia that caught Labuan jurisdiction by surprise with two Labuan business activities were taken out from the recently gazetted amendment to the <u>Schedule</u>¹. After "general trading activity" was snubbed in the first-round overhaul of the Labuan tax regime back in late December 2018, this time Code 6; "Labuan International Commodity Trading Company" (LICT) was completely deleted while Code 23; "Other Trading Activity" (OTC) was not cited at all in the Schedule.

Kindly take note that this notice is intended only for Labuan entities carrying on business activities as LICT (Code 6) or OTC (Code 23) and are significantly affected by this latest amendment.

Quick background of the sudden turnabout in policy and why it has brought jittery to the industry, illustrated below in chronological events –



* <u>first Schedule</u> – Labuan Business Activity Tax (Requirements for Labuan Business Activity) Regulations 2018

** letter – Labuan FSA letter dated 21st January 2020 – "Addition to the Revised Substance Regulations"

*** letter – IRB letter dated 5th February 2021

Note that between 31st December 2018 and 24th December 2020, there were numerous meetings held and consultation among the Labuan financial services stakeholders i.e., the Association of Labuan Trust Companies (ALTC), Labuan FSA, Inland Revenue Board of Malaysia (IRB) and the Ministry of Finance to iron out uncertain issues arising from the Labuan tax regime overhaul. Some issues were addressed and settled but the main sticky points are still unresolved as of the date of this notice.

What does this mean to Labuan entities affected by this amendment?

- LICT (Code 6) was deleted and OTC (Code 23) was not cited in the latest Schedule. This means
 Labuan entities affected by this amendment are out of scope and will not be benefiting from the 3%
 tax rate under the LBATA².
- Chargeable income will be taxed up to 24% under the ITA.
- Following the latest Government's gazette, the IRB issued a letter on 5th February 2021 ruling that the affected Labuan entities with OTC business activity must file their tax return under the domestic

¹ Labuan Business Activity Tax (Requirements for Labuan Business Activity) 2018 (Amendment) Regulations 2020 – PU(A)375 dated 24th December 2020

² Labuan Business Activity Tax Act 1990



<u>ITA</u>³. Now that the affected Labuan entities will be assessed in accordance with the domestic tax regulations i.e., on a current year basis, and it is not anymore on a preceding year basis.

So, what now?

- Filing of tax return is no more a straightforward affair. A qualified tax agent in Labuan will need to be engaged by the affected Labuan companies to do the proper tax computation and file the tax return with the IRB which is due this 31st March 2021.
- The tax filing requirement will have a retroactive effect starting from year of assessment (YA) 2019.
- The affected Labuan entities are no longer subject to *economic substance requirements* (ESR). There is no need to comply with the full-time employees and meeting the OPEX requirements in Labuan.

Awaiting clarifications from Labuan FSA

Our association, the ALTC, is demanding clarifications from Labuan FSA about this matter. We will update you with more information and any new development.

We will be contacting our clients whose Labuan entities are affected by this latest amendment and discuss steps to take or options available.

Thank you.

Yours faithfully,

Sukor Ashak Managing Director HMR Konsultan (Labuan) Ltd.

³ Income Tax Act 1967



LEMBAGA HASIL DALAM NEGERI MALAYSIA UNIT ANTARABANGSA LABUAN UNIT E.004 & E.005 TINGKAT 1 ARAS PODIUM KOMPLEKS UJANA KEWANGAN JALAN MERDEKA 87000 W.P. LABUAN Laman Web: https://www.icite.com/icite

 Telefon
 : 087-595300

 Faks
 : 087-415385

 Laman Web:
 http://www.hasil.gov.my

Our Ref.: LHDN.SBH.C.600-8/21/4

Date : 05/02/2021

CHAIRMAN ASSOCIATION OF LABUAN TRUST COMPANIES (ALTC) C/O LEVEL 1, LOT 7, BLOCK F SAGUKING COMMERCIAL BUILDING JALAN PATAU - PATAU 87000 LABUAN F.T., MALAYSIA



Dear Datuk,

STATUS OF OTHER TRADING ACTIVITIES (CODE 23) UNDER THE NEWLY-GAZETTED P.U. (A) 375/2020

The above subject matter refers.

2. The newly gazetted Labuan Business Activity Tax Act (Requirements For Labuan Business Activity) 2018 (Amendment) Regulations 2020 (P.U.(A) 375/2020) has caused Labuan Entity carrying on "Other Trading" activities not to be included in the meaning of "Labuan Entity" under subsection 2B (1) Labuan Business Activity Tax Act (LBATA) 1990 and are required to submit Income Tax Return Form (ITRF) under Income Tax Act (ITA) 1967.

3. The due date for tax return submission under ITA 1967 can be summarized in the following table:

YEAR ASSESSMENT	DUE DATE
2019	31/03/2021
2020 (accounting period up to 30/6/2020)	31/03/2021
2020 (accounting period up to 31/07/2020 – 31/12/2020)	According to ITA 1967

*No penalty will be imposed under Subsection 112(3) ITA 1967 if the income tax return submitted within the stipulated time.

4. Kindly inform non-submission of CP204 in relation to YA2019 and YA2020 will not be imposed any penalty. However, please note that CP204 for YA2021 must be submitted at soonest.

5. If the Labuan Entity has made tax payment under LBATA 1990 for the respective year of assessment, the amount will be transferred to ITA 1967 ledger.

6. The application for the Income tax file registration should be forwarded to IRBM Labuan F.T Branch using appropriate forms as summarized below:

TYPES OF LABUAN ENTITY	FORM TO BE FILLED UP	SUPPORTING DOCUMENTS NEEDED
Company	CP600C	
Partnership	CP600D	
Employer	CP600E	
Association (Foundation)	CP600F	Please refer to
Limited Liability Partnership	CP600PT	Appendix 1
Trust Body / Unit Trust / Property Trust / Real Estate Investment Trust / Property Trust Fund	CP600T	
Business Trust	CP600TN	

7. In relation to paragraph 3 to 6, any inquiries pertaining to the related matters can be addressed to the following officers:

PARTICULARS	OFFICER
Income Tax File Registration	1. Mr. Samin Sembagoh
	Email: <u>samin@hasil.gov.my</u>
	Tel: 087-595300 extension 181815
	2. Mr. Azmawi Sulaiman
	Email: azmawi@hasil.gov.my
	Tel: 087-595300 extension 181804
Income Tax Return Submission	1. Mr. Mohamad Usul Basiunee
	Email: mohamadusul@hasil.gov.my
	Tel: 087-595300 extension 181826
CP 204 Submission	1. Mr. Mohd Nasri Ibrahim
	Email: mohdnasri.b@hasil.gov.my
	Tel: 087-595300 extension 18184
	2. Mdm. Nor Farehah Che Othman
	Email: norfarehah@hasil.gov.my
	Tel: 087-595300 extension 181834
e - Filing	1. Mdm. Martina Awang
	Email: martina@hasil.gov.my
	Tel: 087-595300 extension 181846
	2. Mdm. Iresjoy Egin
	Email: iresjoy@hasil.gov.my
	Tel: 087-595300 extension 181832

8. Please disseminate this communication to all members of ALTC and relevant industry players.

9. Your kind understanding and cooperation are highly appreciated.

Regards:

(MARYLINE JOMAS) DEPUTY DIRECTOR, FEDERAL TERRITORY OF LABUAN BRANCH FOR CHIEF EXECUTIVE OFFICER / DIRECTOR GENERAL OF INLAND REVENUE INLAND REVENUE BOARD MALAYSIA

- C.C. DIRECTOR TAX OPERATIONS DEPARTMENT HEADQUARTERS INLAND REVENUE BOARD OF MALAYSIA LEVEL 12, HASIL TOWER PERSIARAN RIMBA PERMAI CYBER 8, 63000 CYBERJAYA SELANGOR
- C.C. DIRECTOR TAX POLICY DEPARTMENT HEADQUARTERS INLAND REVENUE BOARD OF MALAYSIA LEVEL 17, HASIL TOWER PERSIARAN RIMBA PERMAI CYBER 8, 63000 CYBERJAYA SELANGOR
- C.C. DIRECTOR SABAH STATE DIRECTOR'S OFFICE WISMA HASIL JALAN TUNKU ABDUL RAHMAN 88600 KOTA KINABALU, SABAH
- C.C. All Trust Companies, All Tax Agents and All Labuan Entities.

SILA	KEMUKAKAN : / PLEASE SUBMIT :	
1.	Syarikat Labuan Labuan Company	 Salinan perakuan pemerbadanan syarikat Labuan / Copy of certificate of incorporation of the Labuan company Salinan penyata pengumpukan syer / Copy of return of allotment of shares Salinan penyata butir-butir dan pertukaran pengarah dan setiausaha / Copy of return on particulars and changes of directors and secretanes Salinan memorandum dan perkara-perkara persatuan / Copy of memorandum and articles of association
2.	Yayasan Labuan / Yayasan Islam Labuan / Amanah Labuan / Amanah Islam Labuan Labuan foundation / Labuan Islamic foundation / Labuan trust / Labuan Islamic trust	 Salinan perakuan pendaftaran / Copy of certificate of registration Salinan pengisytiharan oleh syarikat amanah Labuan sebagai pemegang amanah (jika berkenaan) / Copy of declaration of a Labuan frust company as trustee (if applicable) Salinan plagam yayasan / Instrumen amanah (yang mana berkenaan) / Copy of charter of the Labuan foundation / Trust instrument (whichever applies)
З.	Perkongsian Terhad Labuan / Perkongsian Terhad Islam Labuan / Perkongsian Llabiliti Terhad Labuan / Perkongsian Llabiliti Terhad Islam Labuan Labuan Limited Partnership / Labuan Islamic Limited Partnership / Labuan Limited Liability Partnership / Labuan Islamic Limited Liability Partnership	i) Salinan perakuan pendaftaran / Copy of certificate of registration ii) Salinan perjanjian perkongsian / Copy of partnership agreement
4.	Entiti Berlesen Labuan / Labuan licensed Entities	 i) Salinan perakuan pendaftaran atau lesen / Copy of certificate of Registration or license yang dikeluarkan oleh Labuan Financial Services Authority (LFSA) / Issued by the Labuan Financial Services Authority (LFSA) ii) Salinan profil pemegang saham korporat / Copy of profile of corporate shareholder(s); iii) Salinan profil pengarah / pegawal utama / Copy of Profile of director(s) / principal officer, iv) Salinan maklumat setiausaha / Copy of secretary information; atau / or v) Salinan memorandum dan perkara-perkara persatuan / Copy of memorandum and articles of association yang dikeluarkan oleh LFSA / Suruhanjaya Syarikat Malaysia (SSM) / pendaftar asing / issued by the LFSA / Suruhanjaya Syarikat Malaysia (SSM) / pendaftar asing /



LEMBAGA HASIL DALAM NEGERI MALAYSIA INLAND REVENUE BOARD OF MALAYSIA BORANG PENDAFTARAN NOMBOR CUKAI PENDAPATAN SYARIKAT INCOME TAX NUMBER REGISTRATION FORM FOR COMPANY

MALA	YSIA	INCOME TAX			ISIRA	
BAHA	GIAN A : / PARTA :	MAKLUMAT	SYAR	IKAT / F	PARTIC	ULARS OF COMPANY
A1	Nama syarikat / Name of company					
A2	Negara mastautin /					
A3	Country of residence No. pendaftaran syarikat /					
A4	Company registration no. Tarikh syarikat ditubuhkan /					(hh/bb/tttt) / (dd/mm/yyyy)
A5	Date of incorporation of company Tarikh mula operasi /		-			(hh/bb/tttt) / (dd/nim/yyyy)
A6a	Commencement date of operations Tarikh mula akaun /					(hh/bb/tttt) / (dd/mm/yyyy)
A6b	Opening date of accounts Tarikh tutup akaun /					(hh/bb/tttt) / (dd/mm/yyyy)
A7a	Closing date of accounts Jenis perniagaan utama /					
A7b	Type of main business Kod perniagaan utama /				_	
A8	Main business code Alamat surat-menyurat /					
1.0	Correspondence address			_		
		Poskod /				Bandar /
		Postcode Negeri	_			Town
	Alemet promis porplagaan /	State				
A9	Alamat premis perniagaan / Address of business premise (Gunakan alamat SELAIN alamat peti					
	Surat atau karung berkunci / Use address OTHER THAN P.O. Box or					
	locked bag address)	Poskod /				Bandar /
		Postcode				Town
		Negeri State				
A10	No. telefon / Telephone no.					
A11	e-Mel / e-Mail					
BAH	AGIAN B : I PART B :	MAKLUMA	T PEN	GARAH	IPAR	TICULARS OF DIRECTORS
B1	Pengarah I :					
B1a	Nama / Name					
B1b	No. kad pengenalan / Identification ca	rd no.				
B1c	No. pasport / Passport no					
B2	Pengarah II :					
B2a	Nama / Name					
B2b	No. kad pengenalan / Identification ca	rd no.				
B2c	No. pasport / Passport no.					
B3	Pengarah III :					
B3a	Nama / Name					
B3b	No. kad pengenalan / Identification ca	rd no.				
B3c	No. pasport / Passport no.					

BAH	AGIAN C : / PART C :	PENDAFTARAN FAIL MAJIKAN	I FILE REGISTRATION FOR EMPL	OYER
C1	Status majikan / Employer's status	1 = Kerajaan / Government 3 = Pihak berkuasa tempatan / Local authority	2 = Berkanun / Statutory 4 = Swasta – Syarikat / Private sector – Company	5 = Swasta - Selain syarikat / Private sector - Other than company
C2	Jumlah pekerja / No. of employees			

	MAKLUMAT FIRMA EJEN CUKAI / PARTICULARS OF TAX AGENT
D1 Nama firma / Name of firm	
D2 Alamat firma / Address of firm	Poskod / Bandar / Postcade Town
	Negeri / State
D3 No. kelulusan ejen cukai / Tax agent's approval no	
D4 No.telefon / Telephone no.	
D5 e-Mel / e-Mail	
Saya / /	AKUAN PENGARAH / SETIAUSAHA SYARIKAT / EJEN CUKAI / DECLARATION BY DIRECTOR / COMPANY SECRETARY / TAX AGENT
No. kad pengenalan / Pasport * / Identifice (* Potong yang tidak berkenaan / * Delete whiche	tion card / Passport no. * ever is not relevant)
dengan ini mengakui bahawa makluma hereby declare that the information given in	t yang diberikan di dalam borang ini adalah benar, betul dan lengkap. / Ihis form is true, correct and complete.
Tandatangan / Signature	Tarikh /
Jawatan / Designation	
SILA KEMUKAKAN : / PLEASE SUBMIT :	
	Salinan notis pendaftaran syarikat di bawah seksyen 15 Akta Syarikat 2016 / Copy of notice of registration of company under section 15 Companies Act 2016 atau / or
 Syarikat Berhad Menurut Jaminan / Company Limited by Guarantee iv) S 	alinan perakuan pemerbadanan bagi pertukaran nama syarikat di bawah seksyen 28 kta Syarikat 2016 (jika berkenaan) / opy of certificate of incorporation of change of name of company under section 28 Companies Act 2016 (if relevant) alinan Profil Syarikat terkini / opy of current Company Profil alinan perlembagaan (jika berkenaan) / Copy of constitution (if relevant) dikeluarkan oleh Suruhanjaya Syarikat Malaysia (SSM) / issued by the Suruhanjaya Syarikat Malaysia (SSM)
	alinan notis pendaftaran syarikat asing di bawah seksyen 562 Akta Syarikat 2016 / ppy of notice of registration of foreign company under section 562 Companies Act 2016
AI	alinan dokumen perubahan atau pengubahan butir-butir berkaitan syarikat asing di bawah subseksyen 567(1) kta Syarikat 2016 / ppy of document of particulars of change or alteration relating to foreign company under subsection 567(1) Companies Act 2016

and and a

UNTU	K KEGUNAAN PEJABAT	
No. cukai pendapatan	С	
No. majikan	E	

2



LEMBAGA HASIL DALAM NEGERI MALAYSIA INLAND REVENUE BOARD OF MALAYSIA BORANG PENDAFTARAN NOMBOR CUKAI PENDAPATAN PERKONGSIAN

ALCONT OF STREET	ATSTA MCOM		1101		ALC.	13110	anon	T ORM	I FOR PAR	
BAH	AGIAN A : / PARTA :	MA	KLU	TAN	ASAS	SIBA	SIC P	PARTICL	ILARS	
A1	Nama perkongsian / Name of partnership									
A2	No. pendaftaran perkongsian / Partnership registration no.									
A3	Bilangan ahli kongsi / Number of partners									
A4	Tarikh mula beroperasi / Commencement date of operations		Î					(hh/bl	b/tttt) / (dd/m	m/yyyy)
A5a	Jenis perniagaan utama / Type of main business									
A5b	Kod perniagaan utama / Main business code									
A6	Alamat surat-menyurat / Correspondence address									
			skod / stcode						Bandar / Town	
		Neg	geri /							
A7	Alamat perniagaan utama /	Stai	(e	_						
	Address of main business (Gunakan alamat SELAIN alamat peti surat atau									
	karung berkunci / Use address OTHER THAN P.O. Box or locked bag address)	<u> </u>								
		Por	skod /				_		Bandar /	
		Pos	tcode		_				Town	
		Stat	geri /							
A8	No. telefon / Telephone no									
A9	e-Mel / e-Mail									
BAH	AGIAN B : / PART B :									PARTNERS ngsi / Use attachment if more than two (2) partners]
B1	Nama ahli kongsi utama / Name of precedent partner		000111101					diversion of the	Topole permanent	
B1a	No. kad pengenalan / identification card no									
B1b	No. pasport / Passport no.									
B1c	No. pendaftaran dengan SSM atau lain-lain / Registration no. with SSM or others			_						
B1d	No. cukai pendapatan / Income tax no.									
B1e	Alamat / Address									
			kod /	T	_		_		Bandar /	
			tcode jeri /	+					Town	
		Stat		_		-	T			Asso pombobasion * /
B1f	Bahagian ahli kongsi / Partner's share									Asas pembahagian * / Basis of apportionment *
B1g	Negara mastautin / Country of residence									

NOTA :- / 'Asas pembahagian' adalah angka pembawah yang digunakan untuk membahagi keuntungan atau kerugian. / Note :- 'Basis of apportionment is the denominator used to apportion profit or loss Contoh : / Exemple : Bahagian ahli kongsi A / Partner A's share - 60% (60/100) Dengan itu, bahagian ahli kongsi A adalah 60 dan asas pembahagian adalah 100. / Therefore, partner A's share is 60 and the basis of apportionment is 100.

B2 Nama ahli kongsi II / Name of partner II	
B2a No. kad pengenalan / identification card n	2.
B2b No. pasport / Passport no.	
B2c No. pendaftaran dengan SSM atau lain-la Registration no. with SSM or others	lin /
B2d No. cukai pendapatan / Income tax no.	
B2e Alamat / Address	Poskod / Bandar / Postcode Town Negeri / State Asas pembahagian /
B2f Bahagian ahli kongsi / Partner's share	Basis of apportionment
B2g Negara mastautin / Country of residence	
BAHAGIAN C : / PART C :	PENDAFTARAN FAIL MAJIKAN / FILE REGISTRATION FOR EMPLOYER
C1 Status majikan / Employer's status	1 = Kerajaan / Government 2 = Berkanun / Statutory 3 = Pihak berkuasa tempatan / Local authority 4 = Swasta – Syarikat / Private sector – Company 5 = Swasta – Selain syarikat / Private sector – Other than company
C2 Bilangan pekerja / No. of employees	
BAHAGIAN D : / PART D :	MAKLUMAT FIRMA EJEN CUKAI / PARTICULARS OF TAX AGENT
D1 Nama firma / Name of firm	
D2 Alamat firma / Address of firm	Poskod / Bandar / Postcode Town Negeri /
D3 No. kelulusan ejen cukai / Tax egent's approval no.	State
D4 No. telefon / Telephone no.	
D5 e-Mel / e-Mail	
AKUAN A	HLI KONGSI / EJEN CUKAI / DECLARATION BY PARTNER / TAX AGENT
Saya / /	
No. kad pengenalan / Pasport ** / Identification (* Potong yang tidak berkenaan / ** Delete which	ver is not relevant)
dengan ini mengakui bahawa maklumat ya hereby declare that the information given in this	ing diberikan di dalam borang ini adalah benar, betul dan lengkap. / form is true, correct and complete.
Tandatangan / Signature	Tarikh / Date (hh/bb/tttt) / (dd/mm/yyyy)
Jawatan / Designation	
SILA KEMUKAKAN : I PLEASE SUBMIT :	
Copy of the partnership business registration of Salinan perjanjian usaha sama / Copy of j Salinan sijil pendaftaran dari badan profe b) Maklumat perniagaan dan pemilik perniag	ongsian yang dikeluarkan oleh Suruhanjaya Syarikat Malaysia (SSM) / ertificate issued by the Companies Commission of Malaysia (SSM); atau / or bint venture agreement; atau / or sional yang diiktiraf / Copy of the registration certificate issued by a recognised professional bodies gaan terkini atau senarai ahli-ahli kongsi / Information of business and current owners or list of partners ; atau / or audit (yang mana berkenaan) dari SSM / Copy of business profile or audit firm profile(if any) from SSM

	UNTUK KEGUN	AAN PEJABAT
No. cukai pendapatan	D	
No. majikan	E	



LEMBAGA HASIL DALAM NEGERI MALAYSIA INLAND REVENUE BOARD OF MALAYSIA BORANG PENDAFTARAN NOMBOR MAJIKAN NUMBER REGISTRATION FORM FOR EMPLOYER

BAH	AGIAN A : / Part A :	MAKLUMAT ASAS / BASIC PARTICULARS
A1	Nama majikan (seperti didaftarkan) / Name of employer (as registered)	
A2	Jawatan tertinggi * / Highest position *	
A3	No. cukai pendapatan / Income tax no.	A Isikan : / Enter : SG / OG / D / C / J / F / TP / TA / TC / CS / TR / PT / TN / LE
A4	No. kad pengenalan / Identification card no.	
A5	No. pasport / Passport no.	
A6	No. pendaftaran dengan SSM atau lain-lain / Registration no. with SSM or others	
A7	Tarikh mula beroperasi / Commencement date of operations	(hh/bb/tttt) / (dd/mm/yyyy)
A8	Status majikan / Employer's status	1 = Kerajaan / Government 2 = Berkanun / Statutory 3 = Pihak berkuasa tempatan / 2 = Berkanun / Statutory 4 = Swasta – Syarikat / 5 = Swasta – Selain syarikat / Local authority Private sector – Company
A9	Status perniagaan / Status of business	1 = Beroperasi / In operation 2 = Dorman / Dormant 3 = Dalam proses penggulungan / In the process of winding up
A10	Alamat surat-menyurat / Correspondence address	Poskod / Bandar / Postcode Town Negeri / State
A11	Bilangan pekerja / No. of employees	
A12	No.telefon / Telephone no.	
440	No, faks / Fax no	
A13	NO, Idito / / dx //0	
	e-Mel / e-Mail	
A14		MAKLUMAT MAJIKAN / EMPLOYER'S PARTICULARS
A14	e-Mel / e-Mail	MAKLUMAT MAJIKAN I EMPLOYER'S PARTICULARS
A14	e-Mel / e-Mail AGIAN B : / PART B : Nama pengarah / Pemilik tunggal / Pekongsi utama / individu yang diberi kuasa Name of director / Sole proprietor /	Poskod / Bandar / Postcode Town Negeri /
A14 BAH B1 B2	e-Mel / e-Mail AGIAN B : / PART B : Nama pengarah / Pemilik tunggal / Pekongsi utama / individu yang diberi kuasa Name of director / Sole proprietor / Precedent partner / individual with authority Alamat Kediaman / Residential Address	Poskod / Bandar / Postcode Town Negeri / State
A14 BAH B1 B2 BAH	e-Mel / e-Mail AGIAN B : / PART B : Nama pengarah / Pemilik tunggal / Pekongsi utama / individu yang diberi kuasa Name of director / Sole proprietor / Precedent partner / individual with authority Alamat Kediaman / Residential Address AGIAN C : / PART C :	Poskod / Bandar / Postcode Town Negeri /
A14 BAH B2 BAH C1	e-Mel / e-Mail AGIAN B : / PART B : Nama pengarah / Pemilik tunggal / Pekongsi utama / Individu yang diberi kuasa Name of director / Sole proprietor / Precedent partner / individual with authority Alamat Kediaman / Residential Address AGIAN C : / PART C : Nama / Name	Poskod / Bandar / Postcode Town Negeri / State
A14 BAH B1 B2 BAH	e-Mel / e-Mail AGIAN B : / PART B : Nama pengarah / Pemilik tunggal / Pekongsi utama / individu yang diberi kuasa Name of director / Sole proprietor / Precedent partner / individual with authority Alamat Kediaman / Residential Address AGIAN C : / PART C :	Poskod / Bandar / Postcode Town Negeri / State
A14 BAH B2 BAH C1	e-Mel / e-Mail AGIAN B : / PART B : Nama pengarah / Pemilik tunggal / Pekongsi utama / individu yang diberi kuasa Name of director / Sole proprietor / Precedent partner / individual with authority Alamat Kediaman / Residential Address AGIAN C : / PART C : Nama / Name Alamat firma / Address of firm No. kelulusan ejen cukai /	Poskod / Bandar / Postcode Town Negeri / State MAKLUMAT EJEN CUKAI / PARTICULARS OF TAX AGENT
A14 BAH B1 B2 B2 C1 C2	e-Mel / e-Mail AGIAN B : / PART B : Nama pengarah / Pemilik tunggal / Pekongsi utama / individu yang diberi kuasa Name of director / Sole proprietor / Precedent partner / individual with authority Alamat Kediaman / Residential Address AGIAN C : / PART C : Nama / Name Alamat firma / Address of firm	Poskod / Bandar / Postcode Town Negeri / State MAKLUMAT EJEN CUKAI / PARTICULARS OF TAX AGENT

AKUAN MAJIKA	N / EJEN CUKAI / DECLARATION BY EMPLOYER / TAX AGENT
Saya / I	
No. kad pengenalan / Pasport ** / Identification card / Pass (** Potong yang tidak berkenaan / ** Delete whichever is not releva	
dengan ini mengakui bahawa maklumat yang diberil hereby declare that Ihe informalion given in this form is tru	kan di dalam borang ini adalah benar, betul dan lengkap. / e_ correct and complete
Tandatangan / Signature	Tarikh /
Jawatan / Designation	

* Ruang A2 : / Item A2 : Jawatan Tertinggi N	lajikan / Highest Position of Employer	a second and the second second
Akauntan / Accountant	Kongsi Utama / Precedent Partner	Pengerusi / Chairman
Akauntan Negara / Accountant General	Konsul / Consul	Pengarah Urusan / Managing Director
Bendahari / Treasurer	Kuartermaster / Quartermaster	Pengerusi / Chairman
Datuk Bandar / Mayor	Naib Canselor / Vice Chancellor	Pengerusi Eksekutif / Executive Chairman
Gabenor / Governor	Pegawai Daerah / District Officer	Pengetua / Principal
Guru Besar / Headmaster / Headmistress	Pegawai Kesihatan / Health Officer	Pengurus / Manager
Jurutera Daerah / District Engineer	Pegawai Pematuhan / Compliance Officer	Pengurus Besar / General Manager
Karta / Karta	Pegawal Pemerintah / Commanding Officer	Pengurus Dana / Fund Manager
Ketua Audit Negara / Auditor General	Pegawai Pergigian / Dental Officer	Penolong Pengarah / Assistant Director
Ketua Eksekutif / Chief Executive	Pegawai Perhutanan / Forestry Officer	Pentadbir / Administrator
Ketua Hakim Negara / Chief Justice	Pegawai Turus / Staff Officer	Pesuruhjaya / Commissioner
Ketua Pengarah / Director General	Peguam Negara / Attorney General	Pesuruhjaya Tinggi / High Commissioner
Ketua Polis Daerah / District Police Chief	Pemegang Amanah / Trustee	Presiden / President
Ketua Polis Negara / Inspector-General of Police	Pengurus Pemegang Amanah / Trustee Manager	Setiausaha / Secretary
Ketua Polis Negeri / State Police Chief	Pemilik Tunggal / Sole Proprietor	Setiausaha Agung / Secretary-General
Ketua Setiausaha / Chief Secretary	Pengarah / Director	Setiausaha Syarikat / Company Secretary
Ketua Trafik / Traffic Chief	Pengarah Eksekutif / Executive Director	Tetuan / Messrs.
Komandan / Commander	Pengarah Jurutera / Director of Engineering	Wasi / Executor
Kaunselor Komersil / Commercial Counsellor	Pengarah Urusan / Managing Director	Yang Dipertua / Governor

	UNTUK KEGUN	AAN PEJABAT
No. majikan	E	



LEMBAGA HASIL DALAM NEGERI MALAYSIA INLAND REVENUE BOARD OF MALAYSIA BORANG PENDAFTARAN NOMBOR CUKAI PENDAPATAN PERTUBUHAN INCOME TAX NUMBER REGISTRATION FORM FOR ASSOCIATION

CP600F [Pin. 1/2020]

	INCOM							FORM FOR			
BAH	AGIAN A : / PARTA :	MAł	KLUM	ATA	SAS	BASK	PA	ARTICULARS	OF A	SSOCIATION	
A1	Nama pertubuhan / Name of association										
A2	Negara mastautin / Country of residence										
A3	No. sijil pendaftaran / Registration certificate no.						-				
A4	Tarikh ditubuhkan / Date established							(hh/bb/tttt)			
A5	Jenis pertubuhan / Type of association					ititution Associatio	n	Religiou	ıs in	ganisasi keagamaan / stitution / organisation erdagangan / Trade association	5 = Kelab / Club 6 = Tabung / Fund 7 = Lain-lain / Others
A6	Tarikh mula beroperasi / Commencement date of operations							(hh/bb/tttt)	1 (da	s/mm/yyyy)	
A7a	Jenis perniagaan utama / Type of main business		1.								
A7b	Kod perniagaan utama / Main business code								_		
A8	Alamat surat-menyurat / Correspondence address										
		Post Post	kod / code					Banda Town	r/		
		Neg State									
A9	Alamat premis perniagaan / Address of business premise										
	(Gunakan alamat SELAIN alamat peti surat atau karung berkunci / Use address OTHER THAN P.O.										
	Box or locked bag address)				_				-		
		Pos	kod /	Т				Banda	r /		
		Post		-				Town			
		State									
A10	No. Telefon / Telephone no										
A11	e-Mel / e-Mail						_	_			
BAH	AGIAN B : / PART B :							AMA PERTL			
B1	Nama pengerusi / Presiden / Name of manager / President										
B1a	No. kad pengenalan / Identification card no.										
B1b	No. pasport / Passport no.										
B1c	No. cukai pendapatan / Income tax no.										
B1d	Alamat / Address										
			kod / code					Banda Town	nr /		
		Neg State	егі /					1,		1.	
B1e	No. telefon / Telephone no						_		_		
B2	Nama bendahari / Name of treasurer										
B2a	No. kad pengenalan / Identification card no.										
B2b	No. pasport / Passport no.										
B2c	No. cukai pendapatan / Income tax no.										
B2d	Alamat / Address										
									_		
			kod / code					Banda Town	nr /		
		Neg	eri /	-				TOWN		<i>\</i> //	
P2a	No. telefon / Telephone no.	State	9						_		
B2e	No. telefon / Telephone no.										

B3 Nama setlausaha / Name of secretary	
B3a No. kad pengenalan / Identification card no	
B3b No. pasport / Passport no.	
B3c No. cukai pendapatan / Income tax no.	
B3d Alamat / Address	
	Poskod / Bandar / Postcode Town
	Negeri / State
B3e No. telefon / Telephone no	
BAHAGIAN C : / PART C :	PENDAFTARAN FAIL MAJIKAN / FILE REGISTRATION FOR EMPLOYER
C1 Status majikan / Employer's status	1 = Kerajaan / Government 2 = Berkanun / Statutory 3 = Pihak berkuasa tempatan / 4 = Swasta – Syarikat / 5 = Swasta – Selain syarikat /
C2 Bilangan pekerja / No. of employees	Local authority Private sector – Company Private sector – Other than company
BAHAGIAN D : / PART D :	MAKLUMAT FIRMA EJEN CUKAI / PARTICULARS OF TAX AGENT
D1 Nama firma / Name of firm	
D2 Alamat firma / Address of firm	
	Poskod / Bandar / Postcode Town
	Negeri / State
D3 No.telefon / Telephone no.	
D4 No. kelulusan ejen cukal / Tax agent's approval no.	
D5 e-Mel / e-Mail	
	UAN PENTADBIR UTAMA PERTUBUHAN / EJEN CUKAI / RATION BY ASSOCIATION'S CONTROLLING MEMBER / TAX AGENT
Saya / /	ATION OF ASSOCIATIONS CONTROLLING INCIDENT TAX AGENT
No. kad pengenalan / Pasport * / Identification (* Potong yang tidak berkenaan / * Delete whichever	
dengan ini mengakui bahawa maklumat yang	g diberikan di dalam borang ini adalah benar, betul dan lengkap. /
hereby declare that the information given in this fo	rm is true, correct and complete.
Tandatangan / Signature	Tarikh / Date (hh/bb/tttt) / (dd/mm/yyyy)
Signature	
Jawatan /	
Designation	
SILA KEMUKAKAN : / PLEASE SUBMIT :	
 a) Salinan sijil pendaftaran / Copy of certificate of b) Senarai nama, nombor pengenalan dan alan List of committee members' names, identification nu 	nat kediaman ahli-ahli Jawatankuasa /
L	

No work and a second	JNTUK KEGUNAAN PEJABAT	
No. cukai pendapatan	F	
No. majikan	E	



LEMBAGA HASIL DALAM NEGERI MALAYSIA INLAND REVENUE BOARD OF MALAYSIA

CP600PT [Pin. 1/2020]

BORANG PENDAFTARAN NOMBOR CUKAI PENDAPATAN PERKONGSIAN LIABILITI TERHAD (PLT) INCOME TAX NUMBER REGISTRATION FORM FOR LIMITED LIABILITY PARTNERSHIP (LLP)

BAH	AGIAN A : / PART A :	MA	KLU	MAT	ASA	SI	BASI	C PAI	ARTICULARS
A1	Nama PLT / Name of LLP								
A2	No. pendaftaran PLT / LLP registration no.								
A3	Bilangan pekongsi / Number of partners								
A4	Tarikh PLT mula beroperasi / Date when LLP commence operations				-1				(hh/bb/tttt) / (dd/mm/yyyy)
A5a	Tarikh mula akaun /								(hh/bb/tttt) / (dd/mm/yyyy)
A5b	Opening date of accounts Tarikh tutup akaun /		-						(hh/bb/tttt) / (dd/mm/yyyy)
A6a	Closing date of accounts Jenis perniagaan utama /			_		-			
A6b	Type of main business Kod perniagaan utama /	-				-			
A7	Main business code Alamat surat-menyurat /								
1.0	Correspondence address					_			
		1	kod code						Bandar / Town
		Neg Stat	jeri /						
A8	Alamat premis perniagaan / Address of Business Premise								
	(Gunakan alamat SELAIN alamat peti surat atau								
	karung berkunci / Use address OTHER THAN P.O. Box or locked bag address)								
		1	kod						Bandar /
		Neg	icode Jeri /	-					Томп
A9	No. telefon / Telephone no	Stat	9				_		
		-	_			-			
A10	e-Mel / e-Mail Pertukaran kepada PLT / Conversion to LLP		_		1		10		
	(Jika 'Ya', isi juga ruang A11b / If 'Yes', also complete it				_			1 = Y	Ya / Yes 2 = Tidak / No
A11b	No. cukai pendapatan sebelum pertukarar Income tax no, before conversion to LLP	і кера	ida F	'L1/					
					_				/ Enter : D / C
BAH	AGIAN B: / PART B :	MAI [Gun	(LU) akan	Iamph	PEKC ran jiki	a me	SSI /	PAR1 i tiga	RTICULARS OF PARTNERS a (3) orang pakongsi / Use attachment if more than three (3) partners]
B1	Nama pekongsi utama / Name of precedent partner								
B1a	No. kad pengenalan / Identification card no.								
B1b	No. pasport / Passport no.								
B1c	No. pendaftaran dengan SSM atau lain-lain / Registration no. with SSM or others		-	- r					
B1d	No. cukai pendapatan / Income tax no.								
B2	Nama pekongsi II / Name of partner II								
B2a	No. kad pengenalan / Identification card no.								
B2b	No. pasport / Passport no								
B2c	No. pendaftaran dengan SSM atau lain-lain / Registration no. with SSM or others								
B2d	No. cukai pendapatan / Income tax no								
В3	Nama pekongsi III / Name of partner III								
B3a	No. kad pengenalan / Identification card no.								
B3b	No. pasport / Passport no.					_			
B3c	No. pendaftaran dengan SSM atau lain-lain / Registration no. with SSM or others			10					
B3d	No. cukai pendapatan / income tax no.								

BAH/	AGIAN C : I PART C :	MAKLUMAT PEGAWAI PEMATUHAN						
C1	Nama / Name							
C2	No. kad pengenalan / Identification card no.							
C3	No. pasport / Passport no							
C4	No. cukai pendapatan / Income tax no							
C5	No.telefon / Telephone no.							
C6	e-Mel / e-Mail							
C7	Alamat surat-menyurat / Correspondence address							
		Poskod / Bandar /						
		Postcode Town						
		State						
BAHA	AGIAN D : I PARTD :	PENDAFTARAN FAIL MAJIKAN / FILE REGISTRATION FOR EMPLOYER						
D	Bilangan pekerja / No. of employees							
BAHA	GIAN E :/ PARTE:	MAKLUMAT FIRMA EJEN CUKAI / PARTICULARS OF TAX AGENT						
E1	Nama firma / Name of firm							
E2	Alamat firma / Address of firm							
		Poskod / Bandar /						
		Postcode Town Negeri / State						
E3	No. kelulusan ejen cukai /							
E 4	Tax agent's approval no.							
E4 E5	No.telefon / Telephone no. e-Mel / e-Mail							
20								
		N PEGAWAI PEMATUHAN / PEKONGSI / EJEN CUKAI / ARATION BY COMPLIANCE OFFICER / PARTNER / TAX AGENT						
Saya	11							
	ad pengenalan / Pasport * / Identification card / I							
deng	• • •	diberikan di dalam borang ini adalah benar, betul dan lengkap.						
	atangan /	Tarikh / (hh/bb/tttt) / (dd/mm/yyyy)						
Signal	ure	Date (IIII Date						
Jawata Design								
SILA	KEMUKAKAN : / PLEASE SUBMIT :							
	alinan notis pendaftaran PLT / Copy of the not	lice of registration of the LLP						
	tau / or Jainan parakuan pandaffaran PI T/jika ada)	di beweb sekeven 11 Akta Darkangaian Lishiliki Tarbad 2012 /						
		di bawah seksyen 11 Akta Perkongsian Liabiliti Terhad 2012 / available) under section 11 of the Limited Liability Partnership Act 2012						
	atau / or							
		PLT di bawah seksyen 32 Akta Perkongsian Liabiliti Terhad 2012 (jika berkenaan) /						
		to LLP under section 32 of the Limited Liability Partnership Act 2012 (if relevant) sia (SSM) / issued by the Companies Commission of Malaysia (SSM)						
	alinan borang pendaftaran PLT / Copy of for							
	tau / or	-						
	alinan Profil Terkini PLT / Copy of LLP Currer	t Profile						
yang o	likeluarkan oleh SSM / issued by the SSM							

UNTUK KEGUNAAN PEJABAT						
No. cukai pendapatan	PT					
No. majikan	Е					
Status majikan		5 = Swasta – Selain syarikat /				

MAL	INL. BORANG PENDAFT	GA HASIL I AND REVEN ARAN NOMB NUMBER REG	<i>JE BC</i> OR CL) ARD (IKAI PI	of M Enda	ALAYSIA APATAN BA	DAN AMANAH	CP600T [Pin. 1/2020]
Jeni Type	s fall cukal pendapatan yang dimohon untul of income tax file requested for registration :	k pendaftaran	: [[Ny	ataka	n kod bagi je	nis fail / State the code f	or the type of file]
1 = 7		= TC – Unit An = TC – Amana				perty Trust		
BAH	AGIAN A : / PARTA :	MAKLUM	AT AS	AS / B	ASIC	PARTICULAR	25	
A1	Nama untuk pendaftaran / Name for registration							
A2	Negara mastautin / Country of residence							
A3	Tarikh mula beroperasi / Commencement date of operations					(hh/bb/tt	tt) / (dd/mm/yyyy)	
A4a	Tarikh mula akaun / Opening date of accounts					(hh/bb/tt	tt) / (dd/mm/yyyy)	
A4b	Tarikh tutup akaun / Closing date of accounts					(hh/bb/tt	tt) / (dd/mm/yyyy)	
A5a	Jenis perniagaan utama / Type of main business							
A5b	Kod perniagaan utama / Main business code							
A6	Alamat surat-menyurat / Correspondence address							
		Poskod / Postcode				Band	ar /	
		Negeri / State	-			1 Town	I,	
A7	Alamat premis perniagaan / Address of business premise							
	(Gunakan alamat SELAIN alamat peti surat atau karung berkunci / Use address OTHER THAN P.O.							
	Box or locked bag address)							
		Poskod / Postcode				Band	ar /	
		Negeri / State						
A8	No. Telefon / Telephone no							
A9	e-Mel / e-Mail						_	
Nota :	I note : Ruang A5a dan A5b perlu diisi jika fail untuk p	endaftaran adala	ah TA. /					

Nota : / note : Ruang A5a dan A5b perlu diisi jika fail untuk pendaftaran adalah T/ Items A5a and A5b have to be completed if file for registration is TA

BAH	AGIAN B : / PART B :	MAKLUMAT PEMEGA PARTICULARS OF TRUS	NG AMANAH / PENGURUS DANA TEE / FUND MANAGER	
B1	Nama pemegang amanah 1 / Name of trustee 1			
B1a	No. kad pengenalan / Identification no.			
B1b	No. pasport / Passport no.			
B1c	No. pendaftaran syarikat / Company registration no			
B1d	No. cukai pendapatan / Income tax no.	SG / OG / C		
B1e	Alamat surat-menyurat / Correspondence address	Poskod / Postcode	Bandar / Town	
		Negeri / State		
B1f	No. telefon / Telephone no.			

B2	Nama pemegang amanah 2 / Pengurus dana * Name of trustee 2 / Fund manager *			
B2a	No. kad pengenalan / Identification no.			
B2b	No. pasport / Passport no.			
B2c	No. pendaftaran syarikat / Company registration no.			
B2d	No. cukai pendapatan / Income tax no.	SG/OG/C		
B2e	Alamat surat-menyurat / Correspondence address	Poskod / Postcode	Bandar / Town	
		Negeri / State		
B2f	No. telefon / Telephone no.			

* Isikan nama pemegang amanah 2 bagi fail TA atau nama pengurus dana bagi fail TC / TR. / * Fili in the name of trustee 2 for file TA or name of fund manager for file TC / TR

BAHAGIAN C : / PART C :		PENDAFTARAN FAIL MAJIKAN / FILE REGISTRATION FOR EMPLOYER			
C1	Status majikan / Employer's status		1 = Kerajaan / Government 3 = Pihak berkuasa tempatan / Local authonty	2 = Berkanun / Statutory 4 = Swasta – Syarikat / 5 = Swasta – Selain syarikat / Private sector – Company Private sector – Other than company	
C2	Bilangan pekerja / No of employees				
BAHA	GIAN D : / PARTD :	MA	KLUMAT FIRMA EJEN CUP	AI / PARTICULARS OF TAX AGENT	
D1	Nama firma / Name of firm				
D2	Alamat firma / Address of firm				
		Pos	kod / code jeri / e	Bandar / Town	
	No. kelulusan ejen cukai / Tax agent's approval no.				
	No. telefon / Telephone no				
D5	e-Mel / e-Mail				
			MANAH / PENGURUS DAN TRUSTEE / FUND MANAGER		
Saya /	i				
	ngenalan / Pasport ** / Identification / Passport ong yang tidak berkenaan / ** Delete whichever is not re				
	n ini mengakul bahawa maklumat yang diberi declare that the information given in this form is tru			enar, betul dan lengkap.	
Tandatangan / Signature			Tarikh / Date	(hh/bb/tttt) / (dd/mm/yyyy)	
Jawata Designa					
SILA K	EMUKAKAN : / PLEASE SUBMIT :	12			
ТА	a) Salinan surat ikatan amanah / Copy of trust (b) Lain-lain dokumen seperti salinan geran pr		Surat kusas mentadhir usag	mengendungi elemen amanah /	
	Other documents such as copy of grant of probal			· ·	
тс	Salinan surat ikatan amanah / Copy of trust dee				

TR Salinan surat ikatan amanah / Copy of trust deed

1	INTUK KEGUNA	AN PEJABAT
No. cukai pendapatan (* Potong yang	TA / TC / TR * tidak berkenaan)	
No. majikan	E	
Kod perniagaan utama bagi:	тс	64302
	TR	64303
Status majikan		5 = Swasta – Selain syarikat



LEMBAGA HASIL DALAM NEGERI MALAYSIA INLAND REVENUE BOARD OF MALAYSIA BORANG PENDAFTARAN NOMBOR CUKAI PENDAPATAN AMANAH PERNIAGAAN

MAL	AYSTA INCOME	TAX NUMBER REGISTRATION FORM FOR BUSINESS TRUST			
BAHAGIAN A : / PARTA :		MAKLUMAT ASAS / BASIC PARTICULARS			
A1	Nama amanah perniagaan / Name of business trust				
A2	Negara mastautin / Country of residence				
A3	Tarikh mula beroperasi / Commencement date of operations	(hh/bb/tttt) / (dd/mm/yyyy)			
A4a	Tarikh mula akaun / Opening date of accounts	(hh/bb/tttt) / (dd/mm/yyyy)			
A4b	Tarikh tutup akaun / Closing date of accounts	(hh/bb/tttt) / (dd/mm/yyyy)			
A5a	Jenis perniagaan utama /				
A5b	Type of main business Kod perniagaan utama /				
A6	Main business code Alamat surat-menyurat /				
	Correspondence address				
		Poskod / Bandar /			
		Postcode Town Negeri /			
A7	Alamat premis perniagaan /	State			
	Address of business premise				
	(Gunakan alamat SELAIN alamat peti surat atau karung berkunci / Use address OTHER THAN P.O.				
	Box or locked bag address)				
		Poskod / Bandar / Postcode Town			
		Negeri / State			
A8	No. telefon / Telephone no.				
A9	e-Mel / e-Mail				
		MAKLUMAT PENGURUS PEMEGANG AMANAH / PARTICULARS OF TRUSTEE MANAGER			
B1	AGIAN B : / PART B : Nama pengurus pemegang amanah /	MARLOWATTEROOROGTEMEGARG AMARAITTRARIODERIG OF MODILE MARDOLI			
B1a	Name of trustee manager No. pendaftaran syarikat /				
	Company registration no				
B1b	No. cukai pendapatan / Income tax no. Alamat surat-menyurat /				
B1c	Correspondence address				
		Destant Destant			
		Poskod / Bandar / Postcode Town			
		Negeri / State			
B1d	No. telefon / Telephone no.				
B1e	e-Mel / e-Mail				
BAH	AGIAN C : / PART C :	MAKLUMAT PEMEGANG UNIT UTAMA AMANAH PERNIAGAAN /			
		PARTICULARS OF MAIN UNIT HOLDER OF THE BUSINESS TRUST			
C1	Nama pengarah 1 / Name of director 1				
C1a	No. kad pengenalan / Identification card no.				
C1b	No. pasport / Passport no.				
C1c	No. cukai pendapatan / Income tax no.	▲ Isikan : / Enter : SG / OG / C			
C1d	Alamat / Address				
		Poskod / Bandar / Postcode Town			
		Negerí /			
C1e	No. telefon / Telephone no.	Stale			
	· · · · · · · · · · · · · · · · · · ·				

C2	Nama pengarah 2 / Name of director 2						
C2a	No. kad pengenalan / Identification card no.						
C2b	No. pasport / Passport no						
C2c	No. cukai pendapatan / Income tax no.						
		Isikan : / Enter : SG / OG / C					
C2d	Alamat / Address						
		Deated / Deader /					
		Poskod / Bandar / Postcode Town					
		Negeri / State					
C1e	No. telefon / Telephone no.						
BAH	AGIAN D : I PART D :	PENDAFTARAN FAIL MAJIKAN / FILE REGISTRATION FOR EMPLOYER					
D1	Status majikan / Employer's status	1 = Kerajaan / Government 2 = Berkanun / Statutory					
	,	3 = Pihak berkuasa tempatan / Local authority 4 = Swasta – Syarikat / Private sector – Company 5 = Swasta – Selain syarikat / Private sector – Other than company					
D2	Bilangan Pekerja / No. of employees	1					
-		MAKLUMAT FIRMA EJEN CUKAI / PARTICULARS OF TAX AGENT					
	AGIAN E : / PARTE :	MARLUMAT FIRMA EJEN CORALT PARTICULARS OF TAX AGENT					
E1	Nama firma / Name of firm						
E2	Alamat firma / Address of firm						
		Poskod / Bandar /					
		Postcode Town					
		Negeri / State					
E3	No. kelulusan ejen cukai / Tax agent's approval no.						
E4	No.telefon / Telephone no						
E5	e-Mel / e-Mail						
	AKU	AN PENGURUS PEMEGANG AMANAH / EJEN CUKAI / DECLARATION BY TRUSTEE MANAGER / TAX AGENT					
Saya	1/7						
No. k	kad pengenalan / Pasport * / Identification card.	/Passport no. *					
(* Potong yang lidak berkenaan / * Delete whichever is not relevant) dengan ini mengakui bahawa maklumat yang diberikan di dalam borang ini adalah benar, betul dan lengkap.							
nerel	by declare that the information given in this form						
Tandatangan / Signature		Tarikh /					
Signi	ature						
lowa							
	Jawatan / Designation						
SILA KEMUKAKAN : / PLEASE SUBMIT : Salinan surat ikatan amanah / Copy of trust deed							
		UNTUK KEGUNAAN PEJABAT					

U	UNTUK KEGUNAAN PEJABAT			
No. cukai pendapatan	TN			
No. majikan	E			