

Serial No. .... STATEMENT OF REMUNERATION FROM EMPLOYMENT ..... Employee's Income Tax No. ....  
Employer's No. E ..... FOR THE YEAR ENDED 31 DECEMBER ..... LHDNM Branch .....

**THIS FORM EA MUST BE PREPARED AND PROVIDED TO THE EMPLOYEE FOR INCOME TAX PURPOSE**

**A PARTICULARS OF EMPLOYEE**

- 1. Full Name of Employee/Pensioner (Mr./Miss/Madam) .....
- 2. Job Designation ..... 3. Staff No./Payroll No. ....
- 4. New Identity Card No. .... 5. Passport No. ....
- 6. EPF No. ....
- 7. If the period of employment is less than a year, please state:
  - (a) Date of commencement .....
  - (b) Date of cessation .....

**B EMPLOYMENT INCOME, BENEFITS AND LIVING ACCOMMODATION (Excluding Tax Exempt Allowances/Perquisites/Gifts/Benefits)**

**RM**

- 1. Gross salary, wages or leave pay (including overtime pay) .....
- Fees (including director fees), commissions or bonuses .....
- Gross tips, perquisites, awards/rewards or other allowances (Details of payment .....)
- Income tax borne by the employer in respect of his employee .....
- 2. Value of benefits-in-kind:
  - (a) Motorcars (Actual date provided.....) (i) Value of motorcar and petrol .....
  - (Type.....Year..... Model.....) (ii) Value of driver .....
  - (b) Electricity, water, telephone and other benefits .....
  - (c) Value of household benefits: ( \*Delete whichever is not relevant )
    - (i) Semi-furnished with furniture\*/air-conditioners\*/curtains\*/carpets\*, or .....
    - (ii) Fully-furnished with kitchen equipment, crockery, utensils and appliances, or .....
    - (iii) Separate Items: Furniture and fittings .....
    - Kitchen equipment .....
    - Entertainment and recreation .....
  - (d) Household servant and gardener .....
  - (e) Benefit of leave passage for travel .....
  - (f) Others (for example food and garments) .....
- 3. Value of living accommodation provided (Address.....)
- 4. Refund from unapproved Pension/Provident Fund, Scheme Or Society .....
- 5. Compensation for loss of employment .....

**C PENSIONS AND OTHERS**

- 1. Pensions .....
- 2. Annuities or other Periodical Payments .....

**TOTAL** .....

**D TOTAL DEDUCTION**

- 1. Current Year's Monthly Tax Deductions (MTD) remitted to LHDNM .....
- 2. CP 38 Deductions .....
- 3. Deductions for Zakat remitted to the collection authority of Malaysian zakat .....

**E CONTRIBUTIONS TO APPROVED PENSION/PROVIDENT FUND, SCHEME OR SOCIETY**

Name of Provident Fund .....  
Amount of contribution (state the employee's share of contribution only) RM .....

**F PARTICULARS OF PAYMENT IN ARREARS AND OTHER PAYMENTS IN RESPECT OF PRECEDING YEARS (PRIOR TO CURRENT YEAR)**

| <u>Year for which Paid</u> | <u>Type of Income</u> | <u>Total Payment (RM)</u> | <u>EPF Contribution (RM)</u> | <u>Monthly Tax Deductions (MTD) (RM)</u> |
|----------------------------|-----------------------|---------------------------|------------------------------|--|
| .....                      | .....                 | .....                     | .....                        | .....                                    |
| .....                      | .....                 | .....                     | .....                        | .....                                    |

**G TOTAL TAX EXEMPT ALLOWANCES / PERQUISITES / GIFTS / BENEFITS** **RM** .....

|                              |       |
|------------------------------|-------|
| Name of Officer              | ..... |
| Designation                  | ..... |
| Name and Address of Employer | ..... |

Date.....