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Resident	
Non Resident	

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இலங்கை உள்நாட்டு இறைவரி
Sri Lanka Inland Revenue

RETURN OF INCOME - INDIVIDUAL

YEAR OF ASSESSMENT : 2019 / 2020

Taxpayer Identification Number (TIN)	
	Address
Date of Issue:	**Due Date:**

SECTION - 01: STATEMENT OF TAX CALCULATION

PART A - INCOME LIABLE TO TAX

			Rs.	Cents
Employment Income	(Schedule 1)	10		
Business Income	(Schedule 2)	20		
Investment Income	(Schedule 3)	30		
Other Income	(Schedule 4)	40		
ASSESSABLE INCOME (10+20+30+40)		50		

PART B - DEDUCTIONS FROM ASSESSABLE INCOME

Reliefs				
Relief for Employment Income	(Schedule 1)	60		
Relief for Foreign Service Income	(Schedule 1&2)	70		
Relief for Rent Income	(Schedule 3)	80		
Relief for Interest Income (Senior Citizens only)	(Schedule 3)	90		
Relief for Expenditure		95		
Personal Relief		100		
Total Reliefs (60+70+80+90+95+100)		110		
Qualifying Payments	(Schedule 5)	120		
Total Deductions from Assessable Income (110+120)		130		
TAXABLE INCOME (50 -130)		140		

PART C - CALCULATION OF TAX PAYABLE

Tax on Terminal Benefits	(Schedule 8)	150		
Tax on Gain on Realization of Investment Assets	(Schedule 8)	160		
Tax on Balance Taxable Income	(Schedule 8)	170		
Tax on final withholding payments (WHT not deducted)	(Schedule 8)	180		
Total Tax Payable (150+160+170+180)		190		
Less: Tax Credits	(Schedule 9)	200		
Balance Tax Payable (If 190 > 200, Then 190 - 200)		210		
Refund Claimed (If 190 < 200, Then 200 - 190)		220		

PART D - EXEMPT INCOME

Total Exempt Income (116+217+318)	230		

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வரிகள் – வளமான எதிர்காலத்திற்காக
TAXES - FOR A BETTER FUTURE

Sample

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PART E – MANDATORY SCHEDULES

Mark your Mandatory Schedules which are filled and attached to this form by marking ''✓'' in the relevant cage in the below table.

Sch. 1	Sch. 2	Sch.3	Sch. 4	Sch. 5	Sch. 6	Sch. 7	Sch. 8	Sch. 9	Sch. 10	Sch. 11

SECTION – 02: DECLARATION

Whether Return or part of the Return is prepared by any other person? YES ☐ NO ☐

(If "Yes", PART-A & PART-B of the DECLARATION should be filled. If "No", only PART-B should be filled.)

PART - A

Approved Accountant/ Any other Authorized Person	
Designation	
Telephone Number	Mobile
E-Mail	
Signature	OFFICIAL FRANK
NIC Number / Passport Number	
TIN (If applicable)	
Date	D D / M M / Y Y Y Y

PART – B

I declare to the best of my knowledge and belief that all particulars furnished in the Return of Income are true, correct and complete. I am aware that making an incorrect or false statement or giving false information is an offence.

Full Name of the Declarant	
Telephone Number	Mobile
E - Mail	
Signature	OFFICIAL FRANK
Date	D D / M M / Y Y Y Y

- ***Return of Income specified under Section 126 of the Inland Revenue Act, No. 24 of 2017, by the Commissioner General of Inland Revenue***
- ***Declare income and other particulars for the year of assessment ended 31st March, 2020***
- ***Attach Tax Computation, Accounts if relevant & any other documents required to be submitted***
- ***Duly completed Return of Income and attached documents should be submitted to the Inland Revenue Department on or before 30th November, 2020***
- ***Penalties are imposed on any person who has not submitted a Return or submitted an incorrect Return***
- ***Penalties and interest shall be imposed for non-payment of taxes on due dates***

Sample

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