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For Office	ce Use	
DLN		
Date		

## STATEMENT OF ESTIMATED TAX PAYABLE

YEAR OF ASSESSMENT: 2021/2022

Taxpayer Identification Number (TIN)										
	Addre	SS								
			-41 .							
Date of Issue:			5 <sup>th</sup> Aug							
You may read the instructions provided before co	mpleting t	his Sta	tement	of Est	imated	Tax	(SE)	Γ) Pa	ayabl	e.
The Statement of Estimated Tax Credit Schedul	e which s	hould	be file	d on c	or befor	re the	due	da	te of	each
instalment is a part of the SET.										
(Please '√' mark the relevant cages)										
STATEMENT TYPE : Original Statement	Revised	Statem	ent							
INCOME TAX : Corporate	Individ	ıal			Pa	rtners	ship			
PART – I: CALCULATION OF ESTIMATED	TAX PA	YABI	Æ							
Sources of Income	Cage			Rup	oees				Cen	ıts
Employment	10									
Business	20									
Investment	30									
Other Income	40									
Estimated Assessable Income (10+20+30+40	50									
Total Estimated Qualifying Payments	60									
Total Estimated Reliefs	70									
<b>Estimated Taxable Income</b> (50-60-70)	80									
Estimated Tax Liability (Refer to Part II)	90									
Estimated Foreign Tax Credits	100									
Estimated Advance Personal Income Tax (APIT)	110									
Estimated Tax Payable (90-100-110	120									



## PART - II: COMPUTATION OF ESTIMATED TAX LIABILITY

Nature of the Activity	Cage	Cage Estimated Taxable Income					Tax Rate	Cage	E	stimat	ted Ta	x Lia	bility	
	80.1							90.1						
	80.2							90.2						
	80.3							90.3						
	80.4							90.4						
	80.5							90.5						
	80.6							90.6						
	80.7							90.7						
	80.8							90.8						
	80.9							90.9						
Total	80.10							90.10						

(Enter value of the cage 90.10 in the cage 90 of the estimated tax payable)

## PART – III: DECLARATION

I declare to the best of my knowledge that the Statement does not contain any incorrect, false or misleading information.

Full Name of the Declarant																								
Designation		Pi	ropr	ietor /	Partn	er/ N	/Ianaş	ging l	Direc			ctor /			ry / F	rinc	ipal	Offi	cer /	Tru	stee/	Oth	er	
NIC No:																								<u> </u>
Telephone Number											M	obil	e											
E-Mail																								
Signature of the Declarant														0	F	IC	IA	I,	FH	A	N			
Date:	D	D	/	M	M	/	Y	Y	Y	Y	L													

This Statement of Estimated Tax payable form has been specified by the Commissioner General of Inland Revenue and required to be filed under section 91 of the Inland Revenue Act, No.24 of 2017.

The completed form should be returned to Central Document Management Unit (CDMU) at the Inland Revenue Department (IRD) Head Office or any IRD Regional Office on or before 15<sup>th</sup> August 2021.

Please note that penalties shall be imposed on any person for making an **incorrect statement** (if it has not been revised) **false** or **misleading statement**, **not submitting the statement or non-payment of quarterly payments on due dates.** 



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