(C.P.8A - Pin. 2024)

MALAYSIA

INCOME TAX

PRIVATE SECTOR Employee's Statement of Remuneration **EA**

Employee's Tax Identification No. (TIN)

Serial No. .....

STATEMENT OF REMUNERATION FROM EMPLOYMENT .....

Employer's TIN E .....

FOR THE YEAR ENDED 31 DECEMBER .....

LHDNM State .....

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 I.C. No .....
5. Passport No. .....
6. EPF No. .....
7. SOCSO No. .....
8. Number of children qualified for tax relief .....
9. 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. (a) Gross salary, wages or leave pay (including overtime pay) .....
   (b) Fees (including director fees), commission or bonus .....
   (c) Gross tips, perquisites, awards / rewards or other allowances (Details of payment: .....) .....
   (d) Income tax borne by the employer in respect of his employee .....
   (e) Employee Share Option Scheme (ESOS) benefit .....
   (f) Gratuity for the period from ..... to ....
2. Details of arrears and others for preceding years paid in the current year
   Type of income (a) .....
   (b) ....
3. Benefits in kind (Specify: .....) .....
4. Value of living accommodation provided (Address: .....) .....
5. Refund from unapproved Provident / Pension Fund .....
6. Compensation for loss of employment .....

C PENSION AND OTHERS

1. Pension .....
2. Annuities or other periodical payments .....

TOTAL

D TOTAL DEDUCTION

1. Monthly tax deductions (MTD) remitted to LHDNM .....
2. CP38 deductions remitted to LHDNM .....
3. *Zakat* paid via salary deduction .....
4. Approved donations / gifts / contributions via salary deduction .....
5. Total claim for deduction by employee via Form TP1 in respect of:
   (a) Relief RM .....
   (b) *Zakat* other than that paid via monthly salary deduction RM .....
6. Total qualifying child relief .....

E CONTRIBUTIONS PAID BY EMPLOYEE TO APPROVED PROVIDENT / PENSION FUND AND SOCSO

1. Name of Provident Fund .....
   Amount of compulsory contribution paid (state the employee's share of contribution only) RM .....
2. SOCSO: Amount of compulsory contribution paid (state the employee's share of contribution only) RM .....

F TOTAL TAX EXEMPT ALLOWANCES / PERQUISITES / GIFTS / BENEFITS

RM .....

Name of Officer .....

Designation .....

Name and Address of Employer .....

.....

Employer's Telephone No. .....

Date: .....