

LEMBAGA HASIL DALAM NEGERI MALAYSIA RETURN FORM OF AN INDIVIDUAL (RESIDENT WHO CARRIES ON BUSINESS)

UNDER SECTION 77 OF THE INCOME TAX ACT 1967 This form is prescribed under section 152 of the Income Tax Act 1967 Form

YEAR OF ASSESSMENT

		COMPLETE THE	FOLLOWING	GITEMS
Name :				
dentification / passport no. * : * Delete whichever is not relevant)				
ncome tax no. :				
Correspondence address :				
		·		
	Poscode		Town	

FORM B 2020

RESIDENT INDIVIDUAL WHO CARRIES ON BUSINESS

IMPORTANT REMINDER

1) Due date to furnish this form and pay tax or balance of tax payable: 30 Jun 2021

State

- 2) Submission through e-Filing (e-B) can be made via https://mytax.hasil.gov.my.
- 3) Failure to furnish a return on or before the due date for submission:
 - Penalty under subsection 112(3) of the Income Tax Act 1967 (ITA 1967) shall be imposed.
- 4) Failure to pay the tax or balance of tax payable on or before the due date for submission:
 - An increase in tax of 10% under subsection 103(3) of the ITA 1967 shall be imposed.
- 5) Guidelines for completing this form:
 - a) Refer to the Explanatory Notes before filling up this form.
 - b) Use Form BE if NOT carrying on any business.
 - c) Complete all relevant items in BLOCK LETTERS and use black ink pen.
- 6) Method of payment for tax or balance of tax payable:
 - a) ByrHASiL at the ByrHASiL Lembaga Hasil Dalam Negeri Malaysia (LHDNM) Portal, https://byrhasil.hasil.gov.my/.
 - Payment via FPX (Financial Process Exchange) at https://byrhasil.hasil.gov.my/fpx.php.
 - Payment via Visa, Mastercard & American Express credit cards at https://byrhasil.hasil.gov.my/creditcard/.
 - b) Appointed banks Information is available at http://www.hasil.gov.my.
 - c) Pos Pos Malaysia Berhad Counter only.

If payment is made over the bank counter or Pos Malaysia counter, write down the name, address, telephone number, income tax number, year of assessment, payment code '084' and instalment no. '99' on the reverse side of the financial instrument. Check the receipt(s) / bank payment slip(s) before leaving the payment counter.

- 7) Pursuant to section 89 of the ITA 1967, a change of address must be notified to LHDNM within 3 months of the change. Notification can be made:
 - a) Online by using e-Kemaskini Personal Profile through MyTax. Please access via https://mytax.hasil.gov.my; or
 - b) Using Form CP600B (Change of Address Notification Form) which can be obtained at the LHDNM Official Portal, http://www.hasil.gov.my.
- 8) For further information, please contact Hasil Care Line:-03-89111000 (Local) / 603-89111100 (Overseas)

OR OFFICE USE							
Data received 1	Data received 0						

Date received 1

Date received 2



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Form B

YEAR OF ASSESSMENT

2020 CP4A - Pin. 2020

					DAS	IC PAI	RTICULARS	•								
1	Name (As per identification document)															
2	ncome tax no. 3 Identification no.															
4	Current passport no.						5 Passpo	ort no.	regist	ered with	LHDNI	И				
PART	ГА:				PARTIC	ULARS	OF INDIVI	DUAL								
A1	Citizen	Use country code (Enter 'MY' if Malaysian citizen) A2 Gender										1 = Male		2 = Fem	ale	
A3	Date of birth			(de	d/mm/yyyy)		A4 Status	s as at	31-12	31-12-2020						
A5	Date of marriage / divorce / demise			(de	d/mm/yyyy)		A6 Recor	d-kee _l	ping							
A7	Type of assessment		oint in the oint in the			= Self w	ate hose spouse l Single / divorc					ne or has	ax exempt inc	ome		
PAR	T B:	<u> </u>				·	OF INCOM							RM		Sen
 В1	Statutory income from businesses						f businesses					B1				.00
B2	Statutory income from partnerships	 3			B2a Nui	mber o	f partnershi	ps				B2				.00
B3	Aggregate statutory income from b	usinesses	s (B1 + B	2)								B3				.00
В4	LESS: Business losses brought fo											B4	1			.00
 В5	TOTAL (B3 – B4)											B5				.00
В6	Statutory income from employmen	t			B6a Nui	mber o	f employmer	 nt				B6				.00
В7	Statutory income from rents										~	B7				.00
B8	Statutory income from interest, dis-	counts, ro	yalties, pi	emiums,	pensions,	annuiti	es, other				1	B8				
	periodical payments, other gains o	r profits a	nd additio	ns pursu	ant to para	graph 4	43(1)(c)									.00
B9	AGGREGATE INCOME (B5 + B6	+ B7 + B8	3)									B9				.00
B10	LESS: Approved investment und	<u>-</u>		tax ince	entive (Res	stricted	to B9)					B10				.00
B11	TOTAL (B9 – B10) (Enter '0' if valu								4			B11				.00
B12	LESS: Current year business loss	es (Restric	ted to B11)					\leftarrow		<u> </u>		B12				.00
B13	TOTAL (B11 – B12) (Enter '0' if valu	ie is negativ	/e)					7				B13				.00
B14	LESS: Other expenses [Qualifying p	rospecting	expenditur	e – Sched	ule 4] (Restri	cted to E	313)					B14				.00
B15	LESS: Approved donations / gifts	s / contrib	utions <i>(A</i>	mount froi	n E8)		$\Delta \lambda$	<i>y</i>				B15				.00
B16	TOTAL [B13 – B14 – B15] (Enter 6	0' if value is	negative)									B16				.00
B17	TAXABLE PIONEER INCOME											B17				.00
B18	18 TOTAL INCOME [SELF] (B16 + B17) B18										.00					
B19	TOTAL INCOME TRANSFERRED	FROM H	JSBAND									B19				.00
	* Type of income transferred from HUSE	BAND / WIF	E	1 2	With businWithout b	ness inc usiness	ome income									
B20	AGGREGATE OF TOTAL INCOME	E (B18+	B19)									B20				.00
B21	Total relief (Amount from F20)											B21				.00
B22	CHARGEABLE INCOME [(B18 -	B21) or (B20 – B2	?1)] (Ent	er '0' if value	is nega	tive)					B22				.00
B23	INCOME TAX COMPUTATION	Refer to the	a tax rate s	chedule pr	rovided at the	: LHDNN	/ Official Porta	al, http:/	/www.i	nasil.gov.m	v)				•	•
B23a	Tax on the first					.00						B23a				
B23b	Tax on the balance		7			.00	At rate		% B23b .							
B24	TOTAL INCOME TAX (B23a + B2	23b)										B24				
B25	LESS: Total rebate - Self	7	.00	- Husban	d / wife		.00						•		-	
	- Departure levy for umrah trav religious travel for other religi	ions		.00	No. of trips		- Zakat and	fitrah				B25				
B26	(Restricted to 2 trips in a lifet TOTAL TAX CHARGED [B24 – I		or 'O' if valu	e ie noact	ivo)							B26				
B27	LESS: - Section 110 (others)	JZJ J (ENTE	ı u ıı valu		ve) Section 132 a	nd 122			T			B27	1			•
B28	TAX PAYABLE (B26 – B27)					110 133		•				B28				-
B29	OR: TAX REPAYABLE (B27 – B	326)										B29				•
B30	Payment made for 2020 income –	·······	HUSBAN	JD / WIF	F for joint a	esessr	nent						L			•
	- Monthly Tax Deductions (MTD)	and		T	stallments / (B30				
B31	Balance of tax payable (B28 – B30)) / Tax n	aid in exc	l				-	J			B31				_
		,		(-0								·	(Ente	r 'X' if tax paid ir	excess)	
					D	ECLA	RATION									
I										tion / pass						
	L	g the incon	ne and cla	im for de	ductions and	d reliefs	given bv me	— ·		hichever is not		· —	attached is t	rue, correct a	nd comple	ete.
		-					,				., .				19515	1
	1 = This return form is made on m 3 = As an executor of the decea ** This form is not a notificatio (Notification of Taxpayer's	sed person' on pursuant t	s estate (if o subsection	A4 = 4) ** n 74(3) of th	he ITA 1967. F	Please fu		57			ignatur	e				
Doto		•	IIOI IO AVAII	avie at tile	. EL IDIAINI OIIII	oiai FUili	ai, 1149.//www.1	iasii.y0	iy.							
Date	(dd/mm/yyyy)															

PART	· C:					PART	ICULARS	OF HU	SBAN	ID / WIFE							
C1	Name of husban																
	(As per identification Identification no																
C2 C3	Date of birth	J.				(dd/mm/n		C4					<u>-</u>				
										sport no.							
PART		l			1		OTHER PA			ress of	1						
D1	Telephone no.			Handphone	no.			D2		ness							
D3	E-mail							4	pren	nise							
D4 D5	Employer's no. Has financial acc	count(s) at fina	E		1			4				1					
DS	institution(s) out	` '	IICiai			1 = Yes	2 = No			Postcod	е	Town					
D6a	Carries on e-Co					1 = Yes	2 = No	1		State							
 D6b	(If 'Yes', also com Website / blog a	***************************************															
D7	Details of bank (e name c	of the hank a	nd ha	nk account	no for the	nurnose	of ele	ctronic inc	ome tax refun	/ 1)					
D7a	Name of bank	TTO TE: Emor un	o mamo c	or tire barne a	774 54	im account	110. 101 1110	D7b		k accoun		-/					
D8a	Disposal of asse	t under the Re	al Prope	erty Gains		1 = Yes	2 - No	D8b			lared to LHDN	 NM		1 - Voo	1 = Yes 2 = No		
	Tax Act 1976 (If	'Yes', also com	olete iten	n D8b)		i – res	2 - NO							I - res	2 - 100		
PART	`E:					DONATIO	NS / GIFT	S / CO	NTRII	BUTION	S						
E1	Gift of money to	the Governme	nt / State	e Governme	ent / le	ocal autho	rity										.00
E2a	Gift of money to	approved instit	tutions /	organizatio	ns / fu	unds						.00					
E2b	Gift of money for						nance					.00	Place	atriated to			
E2c	Gift of money or of national intere					ect						.00		stricted to % of B9 E	2		.00
E2d	Gift of money in					religious l	oody / publ	lic				-		, ,			
	university or gift						×					.00					1 1
E3	Gift of artefacts						ite Govern	ment					7 .				.00
E4	Gift of money for	the provision of	f library fa	acilities or to	librar	ies							Res	stricted to 20,0	00		.00
E5	Gift of money or	contribution in k	ind for th	ne provision	of fac	ilities in pub	olic places f	for the b	enefit (of disable	d persons						.00
E6	Gift of money / c	cost / value of g	ift of me	dical equip	ment	to any hea	Ithcare fac	ility app	roved	by the M	linistry of Hea	lth	Res	stricted to 20,0	00		.00
E7	Gift of paintings	to the National	Art Gall	ery or any s	state a	art gallery											.00
E8	Total approved of	donations / gifts	s / contri	butions [E1	l to E	7] (Transfe	er this amou	ınt to B1	(5)	10							.00
PART	· F·						RELI	FF									
F1	Individual and de	ependent relati	ves						V.	\ Y						9,000	.00
F2a	Medical treatme			aror ovnon	oo fo	r paranta							Doo	triated to	1		
rza	(Medical condition					n parents						.00	5,00	stricted to 00			
OR	Dt		- Climibi		٠.)									1 1
F2b	Parent:	Identification / passport no.	Eligible amour	÷		idividuals claim		mable lount									.00
	i. Mother	<u> </u>	1,500				= .00 Restricted to 1,500 for only on					e mother Restricted to					
	ii. Father		1,500) ÷		2	-	.00	Res	tricted to 1	,500 for only on	e father	3,00				
F3	Basic supporting	r equipment for	disable	d self snou	se d	nild or nare	ent	•					Res	stricted to 6,00	00		00
F4	Disabled individu		disable	u son, spou)	illa or parc							7100	6,00			.00
F5	Education fees (,0		.00
		degree at maste						nology					Res	stricted to 7,00	0		.00
		asters or doctor					illic or tecr	illology									
F6a	Medical expense	es on serious d	iseases	for self, spo	ouse (or child		.00									
F6b	Medical expense	es on fertility tre	eatment	for self or s	pouse	Э						.00	Res	stricted to 6,00	0		.00
F7	Complete medic	al examination	for self,	spouse or	child	(Restricted	to 500)					.00	J				
F8a	Lifestyle – Exper	nses for the us books / iournals							iono (N	lot bonno	d roading mate	riolo))				
	(ii) Purchase of	personál compu	iter, smar	rtphone or ta	blet (i	Not for busi	ness use)				J	,	Res	stricted to 2,50	0		.00
	(iii) Purchase of s(iv) Payment of m							nent Act 1	1997 aı	nd paymer	nt of gym memb	ership	J				
F8b	Lifestyle – Purcha	-		<u>`</u> `				nefit or fo	or spou	use or chil	d and not for b	usiness use		stricted to 2,50	0		- 00
	(Additional relief for																.00
F9	Purchase of brea (Deduction allowed					orilia aged	∠ years ar	ia pelov	N				Res	stricted to 1,00	0		.00
F10	Child care fees t	to a registered	child car	re centre / k	inder	garten for	a child age	d 6 yea	rs and	below			Res	stricted to 3,00	0		.00
F11	Net deposit in S				al								Res	stricted to 8,00	0		.00
E40	(Total deposit in 2																
F12	Husband / wife /		mony to	ionner wife	;								Kes	stricted to 4,00			.00
F13	Disabled husbar	iu / wile					1000	V EI: ''	. <u>.</u> .	NI-		E00/ E1	akaa.	3,50	<u> </u>		.00
F14	Child Under th	no ago of 10	orc	No	J.	V 2.00		% Eligibili	ıty	No.	V 1000	50% Elig	ibility	E11-			1 00
г 14а	Child – Under th	ie age oi 18 ye	aıs			X 2,000					X 1,000 =			F14a			.00
F14b	Child – 18 years	s and above an	d studyi	ng		X 2,000					X 1,000 =			F4.41			
						X 8,000					X 4,000 =			F14b			.00
F14c	Child – Disabled	d child		<u> </u>		X 6,000 X 14,000					X 3,000 = X 7,000 =			F14c			00
	l l					∧ 14,000	, -				A 1,000 -	1		1 140	1		.00

PAR	T H: NON-EMPLOY	NON-EMPLOYMENT INCOME OF PRECEDING YEARS NOT DECLARED									
	Type of Income		Year of Assessment		Amount (RM)						
H1			() /			.00					
H2						.00					

PART J: PARTICULARS OF BUSINESS INCOME

Enter the amount without sen.

J1 Losses

LOSSES OF CURRENT YEAR OF ASSESSMENT (including pioneer losses after tax relief period)									
(a) Current Year Of Assessment Business And Partnership Losses	(b) Amount Absorbed In The Current Year Of Assessment	(c) Balance Carried Forward (c = a - b)							

LOSSES OF PRIOR	YEARS OF ASSE	SSMENT (including pic	neer losses after	tax relief period)	•		
			ed / Disregarded U ding The Current Y	ntil The Year Of ear Of Assessment		d / Disregarded In ar Of Assessment	
Year Of Assessmen Which Loss Is Incur	Amount C	, arrount Biorogaraca	(f) Amount Absorbed	(g) Balance After Disregarded / Absorbed (g = d - e - f)	(h) Amount Disregarded [Subsection 44(5F)]	(j) Amount Absorbed	(k) Balance Carrie Forward (k = g - h - j)
2018 and before							
2019							
Business capital allowa	nces		J3	Partnership capita carried forward	l allowances		

PAR	ΓK: FINAN	CIAL P	ARTICULARS OF INDIV	/IDUAL	. (MAII	N BUSINESS ONLY)		
K1	Name of business					·		
K2	Business code							
K2a	Type of business activity							
	TRADING, PROFIT AND LOSS ACCOUNT					BALANCE SHEET		
K3	Sales or turnover			.00		FIXED ASSETS:		
	LESS:				K28	Land and buildings		.00
K4	Opening stock			.00	K29	Plant and machinery		.00
K5	Purchases and cost of production			.00	K30	Motor vehicles		.00
K6	Closing stock			.00	K31	Other fixed assets		.00
K7	Cost of sales (K4 + K5 – K6)			.00	K32	TOTAL FIXED ASSETS (K28 to K31)		.00
K8	GROSS PROFIT / LOSS (K3 – K7)			.00	K33	Investments		.00
		_	(Enter 'X' if negative)			CURRENT ASSETS:		
	OTHER INCOME :				K34	Stock		.00
K9	Other business(es)			.00	K35	Trade debtors		.00
K10	Dividends			.00	K36	Sundry debtors		.00
K11	Interest and discounts			.00	K37	Cash in hand		.00
K12	Rents, royalties and premiums			.00	K38	Cash at bank		.00
K13	Other income			.00			▲ (Enter 'X' if negative)	
K14	TOTAL (K9 to K13)			.00	K39	Other current assets		.00
	EXPENSES:				K40	TOTAL CURRENT ASSETS (K34 to K39)		.00
K15	Loan interest			.00	K41	TOTAL ASSETS (K32 + K33 + K40)		.00
K16	Salaries and wages			.00		LIABILITIES:	•	
K17	Rental / lease			.00	K42	Loans and overdrafts		.00
K18	Contract and subcontracts			.00	K43	Trade creditors		.00
K19	Commissions			.00	K44	Sundry creditors		.00
K20	Bad debts			.00	K45	TOTAL LIABILITIES (K42 to K44)		.00
K21	Travelling and transport			.00		OWNER'S EQUITY:		
K22	Repairs and maintenance			.00	K46	Capital account		.00
K23	Promotion and advertisement			.00	K47	Current account balance brought forward		.00
K24	Other expenses			.00			▲ (Enter 'X' if negative)	
K25	TOTAL EXPENDITURE (K15 to K24)			.00	K48	Current year profit / loss		.00
K26	NET PROFIT / LOSS			.00			▲ (Enter 'X' if negative)	
	-	_	(Enter 'X' if negative)		K49	Drawings / advance (Net		.00

PART L:	DARTICIU ARS OF TAY AC	ENT WHO COMPLETES THIS RETURN FORM
PARIL:	PARTICULARS OF TAX AG	ENT WHO COMPLETES THIS RETURN FORM
L1 Name of firm		L3 Tax agent's approval no.
		L4 Signature
L2 Telephone no.		

K27 Non-allowable expenses

.00 K50 Current account balance carried forward

▲ (Enter 'X' if negative)

▲ (Enter 'X' if negative)

.00