

2019/2020

Republic of the Union of Myanmar
Associations Income Tax Return

(see separate instructions to properly complete the tax return)

(for Annual Associations Income Tax Returns for the Income Year 1 October 2019 to 30 September 2020)

TAXPAYER DETAILS	A. Type of taxpayer: Tick applicable box ▶ <input type="checkbox"/> Association <input type="checkbox"/> Company <input type="checkbox"/> Primary co-operative <input type="checkbox"/> Non-primary co-operative <input type="checkbox"/> State-owned Economic Enterprise		
	B. Residency: Tick applicable box ▶ <input type="checkbox"/> Myanmar citizen <input type="checkbox"/> Non-resident citizen <input type="checkbox"/> Non-resident foreigner <input type="checkbox"/> Resident foreigner		
	C. Name of tax treaty country (if any) ▶ _____		
	D. Check applicable box(es): <input type="checkbox"/> Initial return with IRD <input type="checkbox"/> Final return with IRD <input type="checkbox"/> Amended return for 2019/2020 income year <input type="checkbox"/> MIC / SEZ exemption <input type="checkbox"/> Grant Aid / Concessional Loan exemption <input type="checkbox"/> Change of address <input type="checkbox"/> Listed public company on Yangon Stock Exchange <input type="checkbox"/> Accounting / inventory valuation method change		
Name		TIN	
Postal address (including postal code)			
Physical address			
Contact telephone number		Email address	
Customs IE Code		Industry code	

Caution: In Parts A through C, only report amounts allowed in computing taxable income. Express all money amounts in kyats.

PART A BUSINESS INCOME & EXPENSES (Do not include capital gains, rental income, or other income. If more than one business in either column, enter the totals here and attach a schedule showing the details for each business.)	(a) Business income from within Myanmar	(b) Business income from a foreign country (does not apply to non-resident foreigners)	(c) Taxable business income
Principal business or profession, including product or service			
Name and physical address or location of business			
1. Business income including Specific Goods Tax (excluding commercial tax): (Sales, turnover, investment income, interest income, premiums, etc. – attach schedule)			
2. Expenses (excluding commercial tax):			
a. Cost of sales or operations (attach schedule)			
b. General & administrative (attach schedule)			
c. Staff/labour costs			
d. Management fees			
e. Interest expense			
f. Depreciation & amortization (attach schedule)			
g. Foreign taxes			
h. Specific goods tax paid			
i. Other expenses (attach schedule)			
j. Total expenses (line 2a+2b+2c+2d+2e+2f+2g+2h+2i)			
3. Net business income (loss). In columns (a) and (b), enter line 1 minus line 2j. In column (c), add columns (a) and (b) on this line.			

PART B INCOME & EXPENSES RESPECTING THE RENTAL OF IMMOVABLE PROPERTY (Do not include capital gains. If more than one property in either column, enter the totals here and attach a schedule showing the details for each property.)	(a) Income respecting the rental of property situated in Myanmar	(b) Income respecting the rental of property situated in a foreign country (does not apply to non-resident foreigners)	(c) Taxable income respecting the rental of immovable property
1a. Type of property (Single-family house, apartment house, commercial building, land, etc.)			
1b. Physical address or location of property			
2. Gross rents			
3. Expenses:			
a. Repairs & maintenance			
b. Interest expense			
c. Property insurance			
d. Utilities (electricity, water, and sewerage)			
e. Waste disposal			
f. Security expenses			
g. Depreciation & amortization (attach schedule)			
h. Other expenses (attach schedule)			
i. Total expenses (line 3a+3b+3c+3d+3e +3f+3g+3h)			
4. Net income respecting the rental of immovable property (loss). In columns (a) and (b), enter line 2 minus line 3i. In column (c), add columns (a) and (b) on this line			

PART C OTHER INCOME & EXPENSES (Do not include capital gains.)	(a) Other income derived within Myanmar	(b) Other income derived from a foreign country (does not apply to non-resident foreigners)	(c) Taxable other income
1. Other income (attach schedule)			
2. Expenses (attach schedule)			
3. Net other income (loss). In columns (a) and (b), enter line 1 minus line 2. In column (c), add columns (a) and (b) on this line			

PART D**COMPUTATION OF TAXABLE INCOME****1. Net income:**

- | | | |
|---|--|--|
| a. Enter net business income (loss) from Part A, line 3, col. (c) | | |
| b. Enter net rental income (loss) from Part B, line 4, col. (c) | | |
| c. Enter net other income (loss) from Part C, line 3, col. (c) | | |
| d. Total net income (loss) before additional deductible expenses under Covid-19 Economic Relief Plan.
Add 1a+1b+1c | | |

2. Additional deductible expenses under Covid-19 Economic Relief Plan

- | | | |
|--|--|--|
| a. Additional deductible expenses on incremental staff/ labour costs (use attachment A to compute and attach schedule) | | |
| b. Additional depreciation allowance on incremental capital equipment (use the attachment A to compute and attach schedule) | | |
| c. Total additional deductions under Covid-19 Economic Relief Plan. Add 2a + 2b. | | |
| d. Total net income (loss) before carryover losses. Add 1d - 2c. If a net loss, skip the rest of Part D and enter -0- on part E, line 1. | | |

3. Carryover losses from previous income years (see instructions):

- | | | |
|---|--|--|
| a. Enter any unused carryover loss from 2018-2019 / 2019 income year | | |
| b. Enter any unused carryover loss from 2018 / 2018-2019 income year | | |
| c. Enter any unused carryover loss from 2017-2018 income year | | |
| d. Enter any unused carryover loss from income years before 2017-2018 allowed per MIC permit or other document (attach documents, see instructions) | | |
| e. Total carryover losses. Add 3a+3b+3c+3d | | |

4. Total net income before MIC/SEZ/Grant Aid/Concessional Loan exemption and allowances. Line 2d minus 3e. If a net loss, enter -0-. Skip the rest of Part D and enter -0- on Part E, line 1.

5. Amount of income exempted based on MIC/SEZ permit (attach schedule of computation and copy of relevant permit)

6. Total net income after MIC/SEZ exemption but before Grant Aid/Concessional Loan exemption and allowances. Line 4 minus 5. If a net loss, enter -0-. Skip the rest of Part D and enter -0- on Part E, line 1.

7. Amount of income exempted based on Grant Aid/ Concessional Loan (attach a copy of exemption granted by the Union Government)

8. Total net income after Grant Aid/ Concessional Loan exemption but before allowances. Line 6 minus 7. If a net loss, enter -0-. Skip the rest of Part D and enter -0- on Part E, line 1.

9. Basic allowance – cooperatives only. Multiply line 8 by 20%. If the result is smaller than MMK 10,000,000, enter it here. Otherwise, enter MMK 10,000,000.

10. Total taxable income before deduction for donations. Subtract line 9 from line 8. (If you are a non-resident foreigner, enter the amount from line 10 on line 12. You are not entitled to a deduction for donations.)

11. Tax deductible donations you paid, if any* (see instructions)

12. Total taxable income Line 10 minus line 11. Enter on Part E, line 1.

PART E		
TAX COMPUTATION		
1. Enter the amount from Part D, line 2d or line 4 or line 6 or line 8 or line 10 or line 12.		
2. Tax before payments (Primary co-operatives see instructions.)		
3. Payments		
a. Total quarterly advance tax payments		
b. Income tax withheld		
c. Income tax paid to Customs Department		
d. Income tax paid to foreign governments under terms of a tax treaty		
e. Amount of tax overpaid last year carried over to this year		
f. Total payments (3a+3b+3c+3d+3e)		
4. Balance due before non-refundable tax credits. Line 2 minus line 3f. If zero or less, enter -0-. Skip line 5 and line 6 and enter line 9.		
5. Non-refundable tax credits on incremental staff/labour costs. Enter the amount from Table 1, line 6 of attachment A. (use attachment A to compute and attach schedule)		
6. Non-refundable tax credits on incremental investment in capital equipment. Enter the amount from Table 2, line 4 of attachment A. (use attachment A to compute and attach schedule)		
7. Total amount of non-refundable tax credits. Add line 5 and line 6.		
8. Balance due after non-refundable tax credits. Line 4 minus Line 7. If zero or less, enter -0-.		
9. Amount overpaid. Line 3f minus line 2. If zero or less, enter -0-. The amount overpaid will be refunded in accordance with the Section 43 of the Tax Administration Law. If there is a remaining amount of overpayment after complying with the Section 43 of the Tax Administration Law and you want to carry forward it to the next tax year, tick this box <input type="checkbox"/>		

PART F	Year ended 30 September 2019		Year ended 30 September 2020	
STATEMENT OF FINANCIAL POSITION				
ASSETS	(a)	(b)	(c)	(d)
Non-current assets				
1. Land				
2a. Land and Building				
2b. Less: Accumulated depreciation	()		()	
3a. Plant and equipment				
3b. Less: Accumulated depreciation	()		()	
4. Biological assets				
5a. Intangible assets				
5b. Less: Accumulated amortisation	()		()	

6. Investments in associates and joint ventures				
7. Long-term loans				
8. Deferred tax assets				
9. Non-current finance lease receivables				
10. Other non-current assets				
11. Total non-current assets (1+2a+2b+3a+3b+4+5a+5b+6+7+8+9+10)				
Current assets				
12. Inventories				
13. Trade and other receivables				
14. Current finance lease receivables				
15. Costs and estimated earnings in excess of contract billings				
16. Current tax assets				
17. Cash and equivalents				
18. Assets held for sale				
19. Other current assets				
20. Total current assets (12+13+14+15+16+ 17+18 +19)				
21. TOTAL ASSETS (11+20)				

PART F (continued)	Year ended 30 September 2019		Year ended 30 September 2020	
STATEMENT OF FINANCIAL POSITION				
EQUITY AND LIABILITIES				
Equity	(a)	(b)	(c)	(d)
22. Issued capital				
23. Reserves				
24. Retained earnings (accumulated loss)				
25. Equity related to assets held for sale				
26. Non-controlling interests				
27. TOTAL EQUITY (22+23+24+25+26)				

Non-current liabilities				
28. Long-term loans				
29. Deferred tax liabilities				
30. Non-current provisions				
31. Non-current deferred revenue				
32. Other non-current liabilities				
33. Total non-current liabilities (28+29+30+31+32)				
Current liabilities				
34. Trade and other payables				
35. Contract billings in excess of costs and estimated earnings				
36. Short-term loans				
37. Current tax liabilities				
38. Current provisions				
39. Current deferred revenue				
40. Liabilities related to assets held for sale				
41. Other current liabilities				
42. Total current liabilities (34+35+36+37+38+39+40+41)				
43. TOTAL LIABILITIES (33+42)				
44. TOTAL EQUITY & LIABILITIES (27+43) (21=44)				

PART G		
RECONCILIATION OF BOOK INCOME (LOSS) TO TAXABLE INCOME	Year ended 30 September 2020	
1. Total income (loss) per books		
2. Income tax per books		
3. Income subject to tax not recorded on books (attach schedule)		
4. Expenses recorded on books not deducted on this return:		
a. Contributions more than 25% income limit		
b. Book depreciation more than tax		
c. Inappropriate expenditures (such as bribes, fines, and penalties)		
d. Expenses not in proportion to the size or volume of the business		

e. Capital losses		
f. Other expenses not allowed for tax (attach schedule)		
g. Total expenses (4a+4b+4c+4d+4e+4f)		
5. Total (1+2+3+4g)		
6. Income recorded on books exempt from tax (attach schedule)		
7. Capital gains		
8. Deductions on this return not charged against book income:		
a. Tax depreciation in excess of book		
b. Special deductions from Part D, line 4 and line 6		
c. Total additional deductions under Covid-19 Economic Relief Plan from Part D, line 2c.		
d. Other deductions not claimed on books (attach schedule)		
e. Total deductions (8a+8b+8c+8d)		
9. Total (6+7+8e)		
10. Taxable income (5-9). (Part D, line 12)		

Declaration of Paid Preparer (Skip this section if there is no paid preparer.)			
Based on all information of which I have any knowledge, I declare that to the best of my knowledge and belief, the information given on this return is correct and complete and that the taxpayer had no other income whatsoever during the year ended 30 September 2020. (Note: Submission of false documents is a violation of Section 177, Myanmar Penal Code.)			
Signature of paid preparer		Date (DD/MM/YYYY)	
Name of paid preparer		TIN	
Firm's name		Firm's address	
Firm's TIN			
Contact telephone number		Email address	

Declaration of Taxpayer or Representative			
I declare that to the best of my knowledge and belief, the information given on this return is correct and complete, and that I (or the taxpayer) had no other income whatsoever during the year ended 30 September 2020. (Note: Submission of false documents is a violation of Section 177, Myanmar Penal Code.)			
Signature		Date (DD/MM/YYYY)	
If you are signing this form on behalf of an association of persons or a Government organization, print your full name.		Your title	

2019/2020

Republic of the Union of Myanmar

Associations Income Tax Return

(for Annual Associations Income Tax Returns for the Income Year 1 October 2019 to 30 September 2020)

Calculation for incremental tax-deductible expenses and non-refundable tax credits as per the Notification No. 65/2020 issued by the Union Minister's office of the Ministry of Planning, Finance and Industry dated 17th June 2020

1. Calculate as shown below in accordance with the Procedures for the Executive Order concerning the Union Tax Law and attach a schedule showing the details for each table.

Table (1)

Calculation of staff/labour costs (Attach a schedule showing the detailed calculations)

Sr.	Description	Current Year Amount	Previous Year Amount	Incremental Amount
(a)	(b)	(c)	(d)	(e) (c) - (d)
1	Staff/labour costs under the Cost of Sales			
2	Staff/labour costs under the General & administrative expenses			
3	Staff/labour costs under			
4	Total amount of incremental staff/labour costs (line 1 e + line 2 e + line 3 e)			
5	Additional deductible expenses on incremental staff/labour costs (line 4e x 25%)			
6	Non-refundable tax credits on incremental staff/labour costs (line 4e x 10%)			

Note: Enter the amount from line 5 on Part D, line 2a of the Income Tax Return.
Enter the amount from line 6 on Part E, line 5 of the Income Tax Return.

Table (2)

Calculation of Capital Equipment (Attach a schedule showing the detailed calculations)

Sr.	Description	Incremental Amount
(a)	(b)	(c)
1	Value of Capital Equipment which is in line with the criteria in the Notification No. 65/2020 (Cost exclusive of Commercial Tax)	
2	Depreciation related to line 1	
3	Additional depreciation allowance on incremental capital equipment (line 2c x 25%)	
4	Non-refundable tax credits on incremental investment in capital equipment (line 1c x 10%)	

Note: Enter the amount from line 3 on Part D, line 2b of the Income Tax Return.
Enter the amount from line 4 on Part E, line 6 of the Income Tax Return.

2. I declare that the above amounts are calculation of "incremental staff/labour costs" and "incremental investment in capital equipment" in accordance with the Notification No. 65/2020, the Procedures for the Executive Order concerning the Union Tax Law, and further that I understand the tax benefits may be rejected, revoked or re-assessed if it is found that tax benefits are obtained with the intention of tax evasion or by providing fraudulent information.

Declaration of Paid Preparer (Skip this section if there is no paid preparer.)

Based on all information of which I have any knowledge, I declare that to the best of my knowledge and belief, the information given above is correct and complete.

(Note: Submission of false documents is a violation of Section 177, Myanmar Penal Code.)

Signature of paid preparer		Date (DD/MM/YYYY)	
Name of paid preparer		TIN	
Firm's name		Firm's address	
Firm's TIN			
Contact telephone number		Email address	

Declaration of Taxpayer or Representative

I declare that to the best of my knowledge and belief, the information given on above is correct and complete.

(Note: Submission of false documents is a violation of Section 177, Myanmar Penal Code.)

Signature		Date (DD/MM/YYYY)	
If you are signing this form on behalf of an association of persons or a Government organization, print your full name.		Your title	