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இலங்கை உள்நாட்டு இறைவரி
Sri Lanka Inland Revenue

www.ird.gov.lk

Form No. - Asmt_CIT_001 E
www.ird.gov.lk

Resident	
Non-Resident	

Return of Income

RESIDENT COMPANIES, NON-RESIDENT COMPANIES, ENTITIES AND CORPORATIONS Etc.

YEAR OF ASSESSMENT - 2019 / 2020

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

SECTION - 01: STATEMENT OF GAINS AND PROFITS

Part A

Please indicate the Values only in LKR
Rupees Cents

Exempt Amounts / Gains & Profits	(Schedule 01)	10																		
Assessable Income																				
a Business Income	(Schedule 02)	20																		
b Investment Income	(Schedule 02)	30																		
c Other Income	(Schedule 02)	40																		
TOTAL ASSESSABLE INCOME	(20+30+40)	50																		
Deductions From Assessable Income																				
a Qualifying Payments	(Schedule 03)	60																		
TAXABLE INCOME	(50-60)	70																		
Calculation of Tax Payable																				
a Tax on Income Taxable at Special Rates	(Schedule 04)	80																		
b Tax on Gain from Realization of Investment Assets	(Schedule 04)	90																		
c Tax on Balance Taxable Income	(Schedule 04)	100																		
d Tax on Remittance	(Schedule 05)	110																		
e Tax on Receipt of Final Withholding Payments	(Schedule 06)	120																		
TOTAL TAX PAYABLE	(80+90+100+110+120)	130																		
TOTAL TAX CREDITS	(Schedule 07)	140																		
BALANCE TAX PAYABLE	(If 130 >140, then 130-140)	150																		
REFUND CLAIMED	(If 130 < 140, then 140-130)	160																		

It is compulsory to fill all the cages of the return and if any cage is not relevant, fill it as "NIL".

Part B - Computation & Financial Information

SCHEDULE - 08: Computation Sheets	Yes		No	
SCHEDULE - 09: Financial Information	Yes		No	



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வரிகள் - வளமான எதிர்காலத்திற்காக
TAXES - FOR A BETTER FUTURE


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SECTION - 02: DECLARATION


Whether the 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																																			
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 this 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																																			
Designation	(Managing Director/Director/Secretary/Principal Officer/Duly Authorized Agent)																																		
Telephone Number																																			
E-Mail																																			
Signature																																			
NIC Number / Passport Number																																			
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 Audited Financial Statements, and 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