Instructions on Completing the Registration of Charitable Organizations (MIRA 103, version 12.1)

Complete this form to register your organization / entity as a charitable organization with the MIRA.

Section 10(e) of the Business Profit Tax Act (Law Number 5/2011) allows deductions in computing taxable profits, in respect of donations made to a body, association or public institution which is approved by the MIRA and established for the promotion of Islam, relief of the poor, medical relief, education or any other object of similar general public utility.

Section 15(a)(3) of the Act exempts such bodies, associations and public institutions from Business Profit Tax. Organizations falling within Section 10(e) and Section 15(a)(3) of the Act who wish to be approved by the MIRA under these Sections are required to submit this application to MIRA.

If you are submitting this form via email, scan the original of the completed form and email to registration@mira.gov.mv along with the required documents.

1. Are you registered in the Maldives?

This section indicates whether you are registered in the Maldives.

Select ‘Yes’ if you are registered with the relevant Government authority under the Associations Act (Law Number 1/2003) or is established in the Maldives pursuant to an Act of the Parliament.

For Example: 1. Are you registered in the Maldives? ☑ Yes ☐ No

2. Nature of the Organization

Select the type which best describes your organization.

Promotion of Islam:

This refers to organizations/entities that work to spread the news of Islam or conduct awareness programs to promote Islam.
Education
This refers to organizations/entities that provide education for public welfare and other related activities that have a non-profit motive.

Relief of the Poor
This refers to organizations/entities established to help the poor people in the society through funding, carrying out awareness campaigns or other related work.

Medical Relief
This refers to organizations/entities set up in order to help people in medical crises and provide financial aid or carry out other related work to support them.

Other Public Utility
This refers to organizations/entities that do not fall into any criteria above, but works for public welfare. The organizations/entities that were established for providing humanitarian aid, conserving the environment or wildlife, enhancing social well-being, promoting cultural activities, promoting sports and recreational activities, developing a profession or an industry, or for developing a regional or island community would fall into this criteria.

Please specify the details in this box.

For Example:

<table>
<thead>
<tr>
<th>2. Nature of the Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Promotion of Islam</td>
</tr>
<tr>
<td>Relief of the Poor</td>
</tr>
<tr>
<td>Education</td>
</tr>
<tr>
<td>Medical Relief</td>
</tr>
<tr>
<td>Other Public Utility – Please Specify</td>
</tr>
</tbody>
</table>

3 Purpose of the Organization
Provide here a brief description of the objective(s) of the organization.

For Example:

<table>
<thead>
<tr>
<th>3. Purpose of the Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brief description of the objectives of the organization</td>
</tr>
</tbody>
</table>

4 About the Organization
This Section includes the details of the organization.

(a) Name of the Organization
Enter the name of the entity or the charitable organization here.
(b) Registration Number:
State here the registration number issued to you by the relevant Government or State Institution.

(c) Registered Address:
Enter your registered address as stated in your registration certificate here.

(d) Registration Date:
State here the registered date of the organization as stated in the registration certificate.

(e) Contact Number(s):
Enter your contact details here.
State your ‘Telephone Number’, ‘Mobile Number’ and ‘Fax Number’.

(f) Email Address:
Enter your ‘Email Address’ here.

(g) Executive Board Members:
This refers to the members of the executive committee of the organization. You must provide details of at least two members. Please use additional sheets if required.
Enter the Name, Permanent Address and ID Number of the Executive Board Member as it appears on his/her National Identity Card/Work Permit Card.

For Example:
5. Do you conduct any form of business activity?

Select ‘Yes’, if you conduct any form of business activity.

If your answer is ‘No’ please go to question 7.

For Example: 5. Do you conduct any form of business activity? ✔ Yes 〇 No

6. Taxpayer Identification Number (TIN)

All Persons conducting business activities in the Maldives are required to register with the MIRA under the Tax Administration Act (Law Number 3/2010). If you have not registered yet, please submit MIRA 101 (Taxpayer Registration) along with this application in order to obtain your Taxpayer Identification Number.

Please provide your TIN here. If you are submitting MIRA 101 form along with this application you may leave this box blank.

For Example: 6. Taxpayer Identification Number (TIN)

7. Person to contact regarding this application

This is the person that MIRA will contact regarding the application form.

Please enter the relevant details of the person here.

For Example: 7. Person to contact regarding this application

Name: Mohamed Usama
Contact Numbers: 960 7123999
President
Designation
Email Address: President@ipsports.maldives.com
Document Checklist

The following documents must be submitted along with this application.

- Registration Certificate
- Business Permits (if any)
- Articles of Association
- Memorandum of Association
- Profile of organization, detailing past activities and future plans

Please tick the documents that you are submitting along with the application.

For Example:

| Document Checklist | ✔ Registration Certificate | ✔ Business Permits (if any) | ✔ Articles of Association | ✔ Memorandum of Association | ✔ Profile of organization, detailing past activities and future plans |

Declaration

The declaration must only be signed by one of the executive board members in 4(g) of this application. State your ‘Name’ (name should be stated as it appears on your National ID Card / Immigration ID Card), ‘Contact Number’, ‘Designation’ and the ‘Date’ the declaration is signed. Companies, partnerships, trusts, cooperative societies and other legal entities must stamp their official seal next to the signature.

For Example:

<table>
<thead>
<tr>
<th>Declaration</th>
<th>Mohamed Usman</th>
<th>960 7123959</th>
<th>President</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>I declare that the information given on this form is true and correct, and that I am authorised to sign this application. This declaration shall only be signed by one of the executive board members in 4(g) of this application.</td>
<td>Name</td>
<td>Contact Number</td>
<td>Designation</td>
<td>Date</td>
</tr>
<tr>
<td>Signature &amp; Seal</td>
<td></td>
<td></td>
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<td></td>
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</tbody>
</table>

For Office Use Only

Leave this part blank.

For Example:

<table>
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<tr>
<th>For Office Use Only</th>
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