



Income Tax Return INSURANCE BUSINESSES

	N (Taxpayer Identification Number) Taxpayer Name											
You												
You												
	r TIN as it appears on your Notification of Registration Your name as it appears on your Notification of Registration											
lf y	ou are a company within a group of companies, provide the number of companies in the group subject to	inco	me	tax (e	exclı	usive	e of	you	1)			
Та	xpayer's Contact Details											
	ephone / Mobile Email Address											
Та	xpayer's Mailing Address											
Hoi	use Name / Building Name Level Apartment Number Street											
Co	untry Atoll / City Island / District Postcoo	le										
Ac	counting Period Auditor Registration Numb	er	In	dustr	у Со	ode						
Fro The	m To Registration number of the auditor wi se are the dates specified in your financial statements audited your financial statements	10		e indus ned the	-				-		-	
			of i	ndustry	code	es ava	ailabl	le on	MIRA	4's wel	bsite.	
COM	PUTATION OF INCOME TAX PAYABLE				(Roi	unded	off to	two de	ecimal	ls)		
A	Total Tax liability (Transferred from Box 103 on page 8)							T				
•												
В	Foreign tax credit (Enter zero if you are a non-resident. Attach explanations & supporting documents)						i			П	
	Foreign tax credit (Enter zero if you are a non-resident. Attach explanations & supporting documents. Tax payable for the year (Box A minus Box B)) [
0								 				
G 1	Tax payable for the year (Box A minus Box B)											
	Tax payable for the year (Box A minus Box B) NWT deducted by your payer											
	Tax payable for the year (Box A minus Box B) NWT deducted by your payer First interim payment											
	Tax payable for the year (Box A minus Box B) NWT deducted by your payer First interim payment Second interim payment											
	Tax payable for the year (Box A minus Box B) NWT deducted by your payer First interim payment Second interim payment ncome tax paid in excess to date											
	NWT deducted by your payer First interim payment Second interim payment ncome tax paid in excess to date Business Profit Tax paid in excess to date											

INCOME TAX ASSESSMENT

All legislative references are to the Income Tax Act (Law Number 25/2019) and Business Profit Tax Regulation (Regulation Number 2011/R-35), as amended.

- In computing your taxable profit, you must include:
 - income from general insurance business derived ONLY from the Maldives
 - ONLY investment income from your life insurance business, which is derived in the Maldives and outside the Maldives.
- If you conduct ONLY general insurance business, you must apportion your indirect expenditure on an acceptable fair and reasonable accounting basis between your:
 - general insurance business income derived from the Maldives; and
 - general insurance business income derived outside the Maldives.
- If you conduct ONLY life insurance business, you must apportion your indirect expenditure on an acceptable fair and reasonable accounting basis between your:
 - investment income; and
 - other income

derived from your worldwide life insurance business.

- If you conduct BOTH general insurance business and life insurance business, you must apportion your indirect expenditure
 on an acceptable fair and reasonable accounting basis between your:
 - general insurance business income derived from the Maldives;
 - general insurance business income derived outside the Maldives;
 - investment income derived from your worldwide life insurance business, and
 - other income derived from your worldwide life insurance business.

	cument Checklist the documents you have presented with this Return.					
	Statement of Profit or Loss	Statement of	Financial Position	Sta	tement of Cash Fi	lows
	Statement of Changes in Equity	Auditor's Rep	ort			oporting documents for
	Notes to Financial Statements	Directors' Rep	port	Вох	es B, and 51	
1	What is the basis of preparing your accounts? This is the basis you have opted under Section 13(b) or (c) of the Act		your presentation	_		r Section 106 of the Regulation
	(a) Accrual basis		Rufiyaa			
	(b) Cash basis		United States Dollar	r		
Ш	Type of audit opinion	Record keeping			mber of employe counting period	ees at the end of the
	(a) Unqualified	(a) Computerize				
	(b) Qualified	(b) Semi-comp	uterized	Malo	divians	Expatriates
	(c) Disclaimer	(c) Manual				
	(d) Adverse					
	(e) Not required to audit					
VI	Details of other companies within the group					
	To be completed ONLY if you are a company within a group of company	ies. Tick if you share the tax th	reshold with the company. U	Jse additional sh	eets if necessary.	
	Name of the company	TIN		Country of re	esidence	Shares tax free bracket
_						
VII	Details of financial interest in any shares outside Provide details of all private limited companies and those public limited Name and address of the entity	companies in which you hold r	Country of		nvestment	Percentage of
VII	Provide details of all private limited companies and those public limited	companies in which you hold r			-	Percentage of total investment
VII	Provide details of all private limited companies and those public limited	companies in which you hold r	Country of		nvestment	
VII	Provide details of all private limited companies and those public limited	companies in which you hold r	Country of		nvestment	
VII	Provide details of all private limited companies and those public limited	companies in which you hold r	Country of		nvestment	
	Provide details of all private limited companies and those public limited Name and address of the entity	companies in which you hold r	Country of		nvestment	
	Provide details of all private limited companies and those public limited Name and address of the entity Details of immovable property If you are a resident, list all the immovable properties in and outside the	y	Country of incorporation	1	nvestment (at cost)	total investment
	Provide details of all private limited companies and those public limited Name and address of the entity Details of immovable property If you are a resident, list all the immovable properties in and outside the your operation in the Maldives. Use additional sheets if necessary.	y Maldives. If you are a non-res	Country of incorporation	ablishment in the	nvestment (at cost) Maldives, list the immove	able properties which relates to
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	Provide details of all private limited companies and those public limited Name and address of the entity Details of immovable property If you are a resident, list all the immovable properties in and outside the your operation in the Maldives. Use additional sheets if necessary. Address of the property Details of bank accounts If you are a resident, provide details of both local and foreign bank account for your operation in the Maldives. Use additional sheets if necessary.	y Maldives. If you are a non-resounts. If you are a non-resident	Country of incorporation Sident with a permanent establish.	ablishment in the Country	Maldives, list the immove	able properties which relates to otal investment (at cost)
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	(Rounded off to two decimal places)	(Rounded off to two decimal places)	(Rounded off to two decimal places)
General Insurance Business			
Amounts in Boxes 1 to 53 must relate to the general insurance business income de Gross premium income	erived from the Maldives ONLY		
Less: Premiums refunded to insured parties			
Add: Reinsurance premiums			
Box 2 plus Box 3			
Box 1 minus Box 4			
Less: Claims paid			
Claims reported and payable but unpaid at the end of the year]	I
Less: Claims reported and payable but unpaid at the beginning of the year	ar		
Box 7 minus Box 8			
Box 6 plus Box 9 Less: Re-insurance recoveries			
Add: Expected net recoveries in respect of claims made			
]
Box 11 plus Box 12			
Box 10 minus Box 13			
Box 5 minus Box 14			
Less: Unexpired risk reserve at the end of the year			
Unexpired premium reserve at the end of the year			
Box 16 plus Box 17			
Less: Unexpired risk reserve at the beginning of the year			
Unexpired premium reserve at the beginning of the year			1
Box 19 plus Box 20			
Box 18 minus Box 21			
Box 15 minus Box 22			
Less: Estimated claims incurred but not reported (IBNR) at the end of the year			
Less: Estimated claims incurred but not reported (IBNR) at the beginning of the year			
Box 24 minus Box 25			
Box 23 minus Box 26			
Less: Agency expenses			
Allowable head office expenses (applicable only to non-residents with a permanent establishment in the Maldives)			

30	Box 28 plus Box 29		
31	Box 27 minus Box 30		
,	Add: Investment and other income		
32	Dividends		
33	Less: Dividends derived from resident companies (if you are a resident)		
34	Box 32 minus Box 33		
35	Profits derived from a partnership		
36	Less: Profits derived from a resident Partnership		
37	Box 35 minus Box 36		
38	Interest / Finance income		
39	Other income		
40	Balancing charge (Transferred from the Statement of Balancing Allowance / Balancing Charge on Page 10)		
41	Sum of Boxes 34 and 37, and Boxes 38 to 40		
	Add: Deductions not allowed		
42	Expenses incurred to generate receipts that have been subject to NWT (Only if you are a permanent establishment of a non-resident)		
ı	.ess: Deductions allowed (Excluding zakat al-mal, donations and loss rel	lief)	
43	Capital allowance (Transferred from the Statement of Capital Allowance on P	Page 9)	
44	Balancing allowance (Transferred from the Statement of Balancing Allowanc / Balancing Charge on Page 10)	ee	
45	Employee welfare expenses allowed under Section 20 of the Act		
46	Pension contribution to MRPS as an employer		
47	Irrecoverable debts relating to transactions entered into after the commen of the Act or included in the computation of taxable profit under the BPT A	cement act	
48	Receipts that have been subject to NWT (if you are a permanent establish of a non-resident)	nment	
49	Interest/finance cost paid/payble to approved banks and institutions		
50	Interest/finance cost paid/payable to non-approved persons at a rate not exceeding 6% per annum		
51	Cost of low-value assets allowed under Section 78 of the Regulation		
52	Director's / Partners remuneration		
53	Other deductible expenditure incurred in deriving income from general insurance business excluding related party remuneration and donations (<i>Please attach explanations and supporting</i>)		
54	Total amount of deduction allowed (Sum of Boxes 43 to 53)		
55	Taxable income from general insurance Business (Sum of Boxes 31, 41 42 minus Box 54)	and	

Life Insurance Business

Specified Profit / (loss) before capital gain, Zakat al-mal, donations and

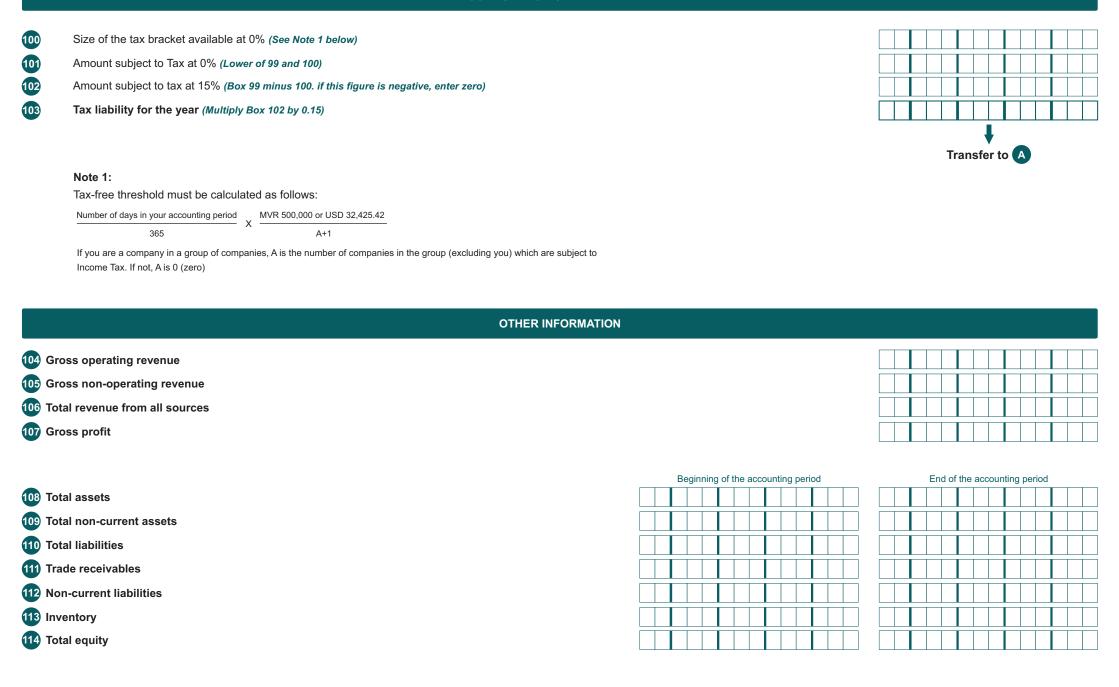
loss relief (Box 55 plus Box 79)

4	Amounts in Boxes 56 to 79 must relate to the investment income derived from ALL s	ources
	Add: Investment income	
56	Dividends	
57	Less: Dividends derived from resident companies (if you are a resident)	
58	Box 56 minus Box 57	
59	Profits derived from a partnership	
60	Less: Profits derived from a resident Partnership	
61	Box 59 minus Box 60	
62	Interest / Finance income	
63		
64	Gains / (losses) on disposal of investment assets	
65	Sum of Boxes 58 and 61 and Boxes 62 to 64	
66	Less: Management, commission and administration expenses, each related to deriving investment income only	
67	Box 65 minus Box 66	
68	Life insurance premiums received in the Maldives	
69	Less:Life insurance agency expenses in the Maldives relating to premiums received in the Maldives	
70	Add: Allowable head office expenses relating to premiums received in the Maldives (applicable only to non-residents with a permanent establishments in the Maldives)	
71	Box 69 plus Box 70	
72	Net life insurance income received in the Maldives (Box 68 minus Box 71)	
73	Total life insurance premiums received	
74	Less:Total life insurance agency expenses	
75	Add: Total head office expenses (applicable only to non-residents with a permanent establishment in the Maldives)	
76	Box 74 plus Box 75	
77	Net life insurance income received (Box 73 minus Box 76)	
78	Proportion of net life insurance income derived from the Maldives (Box 72 divided by Box 77)	
79	Taxable life insurance investment income (Box 67 multiplied by Box 78)	

TAXABLE INCOME FROM CAPITAL GAIN

TAX	KABLE INCOME FROM CAPITAL GAIN	
81	Capital Gain derived	
82	Capital loss incurred	
83	Capital loss deductible (Lower of Boxes 81 and 82)	
84	Capital gains before capital loss relief, zakat al-mal and donations (Box 81 minus Box 83)	
85	Capital loss brought forward from previous year	
86	Capital loss relief (Lower of boxes 84 and 85)	
87	Capital gains for the year before zakat al-mal and donations (Box 84 minus 86)	
88	Capital loss for the year available to be carried forward (If Box 82 is greater than Box 83, subtract Box 82 from Box 83. Otherwise enter zero.)	
89	Taxable income before zakat al-mal, donations and loss relief (Sum of Boxes 80 and 84)	
90	Zakat al-mal paid	
91	Zakat al-mal deductible (Lower of Box 89 and 90)	
92	Taxable income before donations and loss relief (Boxes 89 minus 91)	
	Donations made to State Institution and approved charitable Organizations	
93	5% of taxable income before donations (Multiply Box 92 by 0.05)	
94	Donations to State Institutions and approved charitable Organizations (Transferred from the Statement of Donations to State Institutions and approved Charitable Organizations on Page 11)	
95	Allowable Donations (Lower of Boxes 93 and 94)	
96	Taxable income from before loss relief (Box 92 minus Box 95)	
	Loss relief	
97	Business loss carried forward from previous tax year (See section 33 of the Act)	
98	Business loss deductible (Lower of Box 96 and 97)	
99	Taxable income for the year (Box 96 minus Box 98)	

COMPUTATION OF TAX LIABILITY



STATEMENT OF CAPITAL ALLOWANCE

No.	Asset category	Rate 1	Cost of assets	Capital allowance at cost 3	Notional adjustment 4	Accumulated capital allowance claimed 5	Written down value	Claimable capital allowance 7
1	Buildings	4%						
2	Aircraft	7%						
3	Wooden marine vessels	7%						
4	Other marine vessels	5%						
5	Furniture and fittings	10%						
6	Motor vehicles	20%						
7	Earth moving vehicles	5%						
8	Plant and equipment (excluding office equipment)	10%						
9	Office equipment	20%						
10	Computer software	331/3%						
11	Crockery, cutlery, utensils, linen, loose tools	331/3%						
12	Intangible assets	-						
13	Reclamation of land	-						
14	Capital expenditure incurred in the development of a building financed through a housing loan as under section 83(d) of the Regulation	-						

The amounts for each column must first be calculated separately for individual assets and the sum for the category entered in each column.

¹ Capital allowance rates as specified under Section 83 of the Regulation.

For tangible assets: Column 1 multiplied by column 2.

For intangible assets: Cost price of the intangible asset divided by its estimated useful life (in years).

TOTAL



² Cost of the assets which have positive written down value on the commencement of the accounting period *plus* cost of assets acquired during the accounting period (which have been used for more than half of the accounting period), *minus* cost of assets disposed of during the accounting period.

³ Apportion the figures in this column from the start of your accounting period to the end of your accounting period.

A Notional adjustment to the cost of the assets held at the date of commencement of the Act of which the cost had not been determined under the BPT Regulation.

⁵ Capital allowance claimed for the preceding years. Capital allowance claimed under the BPT Act can be deemed as capital allowance claimed for the preceding year.

⁶ Column 2 minus column 4 and 5.

⁷ Lower of column 3 and column 6.

STATEMENT OF BALANCING ALLOWANCE / BALANCING CHARGE

	Asset category		Accumulated capital		5	0.1	0.771		g charge / allowance) 4
No.	Asset category	Cost of disposed asset	allowance claimed for the disposed asset	Written down value	Disposal value 11	Gain/loss on disposal	Capital gain 13	Balancing charge	Balancing allowance
1	Buildings	·						131	
2	Aircraft								
3	Wooden marine vessels								
4	Other marine vessels								
5	Furniture and fittings								
6	Motor vehicles								
7	Earth moving vehicles								
8	Plant and equipment (excluding office equipment)								
9	Office equipment								
10	Computer software								
11	Crockery, cutlery, utensils, linen, loose tools								
12	Intangible assets								
13	Reclamation of land								
14	Capital expenditure incurred in the development of a building financed through a housing loan as under section 83(d) of the Regulation			_	_	_		-	
		,							

The amounts for each column must first be calculated separately for individual assets and the sum for the category entered in each column.







⁸ Actual cost of the asset disposed.

⁹Accumulated capital allowance claimed after the date of commencement of the Act.

¹⁰ Cost of the asset *minus* accumulated capital allowance (notional adjustment plus capital allowance claimed for the preceding years)

¹¹ Proceeds from disposal of the asset (consideration from the sale less expenses directly related to the sale).

¹² Column 11 *minus* column 10.

¹³ Column 11 *minus* column 8 (if the answer is negative, enter zero).

¹⁴ If column 12 is positive: column 13 plus lower of column 9 and column 12 (enter the amount in 14.1). If column 12 is negative: enter that amount in 14.2.

STATEMENT OF DONATIONS TO STATE INSTITUTIONS AND APPROVED CHARITABLE ORGANIZATIONS

No.	Date of donation	Name of donee 2	Details of donation 3	Amount of donation
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15	Total from additional	sheets (if any)		
You	must hold receiv	ots to support your claim for each donation and t	he cost of assets donated TOTAL	

You must hold receipts to support your claim for each donation and the cost of assets donated.



¹ This is the date on which you made the donation.

² Write the name of the body, association or public institution approved by the MIRA to which you made the donation.

³ If you donated money, write "Cash". If your donation is in kind, write the details of assets you have donated.

⁴ If you donated money, enter the amount of your donation. If your donation is in kind, enter the cost of the assets you donated.