

Tax Reference No : SXXXX813B
Year of Assessment : 2019
Income Tax
Date : 06 May 2019

**NOTICE OF ASSESSMENT
ORIGINAL**



INLAND REVENUE
AUTHORITY OF
SINGAPORE

Please quote the Tax Reference Number (eg. NRIC, FIN, etc) in full when corresponding with us.

MS SRI GAYATHRI D/O G HARIDAS
530 WOODLANDS DRIVE 14
#08-545
SINGAPORE 730530



55 Newton Road
Revenue House
Singapore 307987
Tel: 1800-356 8300
Website: <http://www.iras.gov.sg>
e-Services: <https://mytax.iras.gov.sg>

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	S'PORE (\$)	OTHER COUNTRIES (\$)	TOTAL (\$)
EMPLOYMENT	90,732.00		90,732.00
DIVIDENDS	1.00		1.00
TOTAL INCOME	90,733.00		90,733.00
LESS: Approved Donations			1,140.00
ASSESSABLE INCOME			89,593.00
LESS: PERSONAL RELIEFS			
Earned Income		1,000.00	
NSman-self/wife/parent		750.00	
Child (QCR + WMCR)		17,610.00	
Provident Fund/Life Insurance		16,560.00	
Foreign Maid Levy		1,440.00	
TOTAL PERSONAL RELIEFS			37,360.00
CHARGEABLE INCOME			52,233.00
FIRST 40,000.00		550.00	
NEXT 12,233.00 @ 7.00%		856.31	1,406.31
LESS: TAX SETOFFS			
50 % Tax Rebate (capped at \$200)		200.00	
Parenthood Tax Rebate/Further Tax Rebate		1,206.31	1,406.31
TAX PAYABLE			0.00

1. Your tax assessment is based on information given by you through e-Filing on 05 Mar 2019.

2. If you have any objection, please submit your objection online within 30 days via the Object to Assessment e-service or email us at myTax Portal.

NG WAI CHOONG
COMPTROLLER OF INCOME TAX

Annex A Employer and Spouse Income Tax Declaration

This form may take you 1 minute to fill in.

Please complete this form only if you do not wish to submit your Income Tax Notice of Assessment when applying for a Work Permit (WP) for a foreign domestic worker.

Part I – Monthly Combined Income of Employer and Spouse

Please tick (✓) the appropriate box.

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> Below \$2,000 | <input type="checkbox"/> \$2,000 to \$2,499 | <input type="checkbox"/> \$2,500 to \$2,999 | <input type="checkbox"/> \$3,000 to \$3,499 |
| <input type="checkbox"/> \$3,500 to \$3,999 | <input type="checkbox"/> \$4,000 to \$4,999 | <input type="checkbox"/> \$5,000 to \$5,999 | <input checked="" type="checkbox"/> \$6,000 to \$7,999 |
| <input type="checkbox"/> \$8,000 to \$9,999 | <input type="checkbox"/> \$10,000 to \$12,499 | <input type="checkbox"/> \$12,500 to \$14,999 | <input type="checkbox"/> \$15,000 to \$19,999 |
| <input type="checkbox"/> \$20,000 to \$24,999 | <input type="checkbox"/> \$25,000 and above | | |

Part II – Authorisation by Employer and His/Her Spouse


If either you and/or your spouse do not wish to submit a copy of your Income Tax Notice of Assessment, please complete Part II and authorise the Comptroller of Income Tax to verify your income range stated in Part I above and communicate the results of the verification to the Controller of Work Passes.

I, Sri Gayathri D/O Haridas, *NRIC/WP No/FIN: S8339813B
(Name of employer)

and/or I, _____, *NRIC/WP No/FIN: _____
(Name of the employer's spouse)

authorise the Comptroller of Income Tax to verify *my/our income tax range stated in Part I above, based on *my/our assessment record(s) for the current Year of Assessment and the two previous Years of Assessment, for the Controller of Work Passes. *I/We also authorise the Comptroller of Income Tax to thereafter communicate the results of the verification to the Controller of Work Passes.

In the event that *my/our assessment record(s) for the current Year of Assessment *is/are not available or finalised at the point of verification, I/we understand that the Comptroller of Income Tax will verify *my/our income range stated in Part I against *my/our assessment record(s) for the two previous Years of Assessment.

Employer	Employer's Spouse
Income Tax Notice of Assessment No: <u>S8339813B</u>	Income Tax Notice of Assessment No:
Signature: 	Signature:
Date: <u>12/02/20</u>	Date:

*Delete where inapplicable