

## FORM S128-EP

## Resident Individual Income Tax Return for Employment, Pension and Other Income Year Ended 31 March 2019.

YOUR DETAILS																										
Surname, forenames, a	nd maiden			_		_	_	_	_		_	7	TIN													
name																		$\perp$								J
Contact telephone num								_				Email address														
Caution: In Parts A			ou	nt	s a	llo	W	ed	l in	ı CC	m	pu	ıtin	gc	ha	rge	eat	ole	in	CO	me.	Do	) no	t in	clu	ıde
income of any spous	income of any spouse on this return.  PART A: EMPLOYMENT INCOME & EXPENSES																									
(Include fringe benefits that have not been taxed, but <b>do not</b> include employment income earned and taxed in a foreign country)																										
1. Employment info	<b>1. Employment information – Attach Form P16 for each employer</b> (if more than three employers attach a list																									
with additional information)																										
Name(s) of Employers TIN(s) Employed from Employed until														T 4	Caro	77.0		Love	22.0	+						
Name(s) of employer(s)	Employers	TIN(S)	(i	Employed from (in the year 2018/19)								(	in t						a)	,	Gros	_	mpi		nie	nι
(a)			Y	T	YY	7 7	Y	M	M	D	D	Y	Y	Y	Y	N	IV	D	I							
(b)			Y	-	YY	7	Y	M	M	D	D	Y	Y	Y	Y	IV	IV	1 D	I							
(c)			Y	- 4	7 7	7 7	V	M	IVI	D	D	Y	Y	Y	Y	IV		4 D	T	)						
					L			111	4.1.4							21.				1						
Posical describe To		11	Y	T	Y	7	<b>Y</b> ]	M	M	D	D	Y	Y	Y	Y	IV	IV	D	I	)						
Period during the Taxpayer was unem			Y		YY	7 3	Y :	M	M	D	D	Y	Y	Y	Y	N	IV	D	I	)						
than three such peri	iods, attach l		Y	-	Y 7	7	Y	M	M	D	D	Y	Y	Y	Y	IV	IV	D	I							
the additional infor			Ļ	Ţ	$\bot$	Ţ	_												L	╀						
1.d Total gross emp	loyment inco	<b>)me</b> (1a+1	b+1	lc)								1								Ļ						
2. Unreimbursed en																										
donations (Caution		_				cti	on	ι, s	see	?			Ded			le										
instructions for req			mee	et.	.)							8	ımo	our	ıt											
a. Travel expenses incu			1		1	1.:1	1													4						
b. Education expenses	-		_							1.2										4						
c. Expenses for technical and trade books and journals and association									-								4									
d. Motor vehicle expen		or work										-								4						
e. Home office expenses																										
f. Contributions you made to a complying superannuation fund																										
g. Donations paid to the Lesotho Sports and Recreation Commission																										
2h. Total unreimbu	2h. Total unreimbursed employment-related expenses and donations																									
3. Chargeable empl	oyment inco	<b>me</b> (1d-2h	1)																							

TPSIAGE	TD) -	DENIC	TANT	TRICO	<b>TA // T</b>
IP AN IRC II	1850	PHINS			IIVI H

(Do not include pension income that relates to employment carried on in a foreign country **and taxed in that country** or, if you retired before 11 March 1993, any war pension or gratuity paid by the Lesotho Government)

**1. Pension information – Attach Form P16 for each pension payer** (if more than two pension payers, attach a list with additional information).

Name of employer(s)/pension payer(s)	Employer(s)/pension payer(s) TINs	Pension start date (in the year 2018/19)						Pension end date (in the year 2018/19)								G	_	s pe icon	nsio ne	n			
(a)		Y	7	Y	7	YI	M N	1	D	Y	Y	Y	Y	IV	I	VI I	) ]	D					
(b)		Y	7	Y	7	Y I	M N	1	D	Y	Y	Y	Y	IV	I	VI I	) ]	D					
1c. Total gross pension income (1a + 1b)																							
2. Donations paid to the Lesotho Sports and Recreation Commission (Do not include amounts deducted on line 2g in Part A)																							
3. Chargeable pension income (1c-2)																							

PART C OTHER INCOME		
1. Other income		
2. Expenses (attach schedule)		
3. Chargeable other income (line 1 – line		
2).		

PAIRT D TAX COMPUTATION			
1. Chargeable income:			
a. Enter chargeable employment income from Part A, line 3			
b. Enter chargeable pension income from Part B, line 3			
c. Enter chargeable other income from Part C, line 3			
2. Total chargeable income. Add 1a+1b+1c			
3. Tax before credits:	(a) Chargeable income	(b) Tax rate	(c) Multiply (a) * (b)
a. Enter in col. (a) the <b>smaller</b> of <b>M61</b> , <b>080.00</b> or <b>line 2 on this part</b> if engaged in an incomeearning activity for the entire year (if not engaged in an income-earning activity for the entire year, chargeable income must be apportioned). Then complete column (c) on this line		20%	
<ul><li>b. Enter in col. (a) line 2 minus line 3a (from col.</li><li>(a)). Then complete column (c) on this line</li></ul>		30%	
4. Total tax before credits (Add 3a+3b in col. (c))		_	
<b>5. Personal tax credit.</b> Enter <b>M7</b> , <b>260.00</b> if engage entire year (if not engaged in an income-earning activity apportioned)			
<b>6. Total tax after personal tax credit</b> (line 4-line 5)			
7. (a) Income tax deducted from employment an Form P.16)			

Form S128-EP Page 2

7. (c) Total tax already paid (Add 7 (a) +7 (b)								
<b>8.</b> Tax due. Line 6 minus line 7 (c). Enter nil if less								
<b>9. Tax overpaid.</b> Line 7 (c) minus line 6. Enter nil i repayment of the tax overpaid as shown on thi								
PART E: Declaration	n of Taxpayer or Representative							
I declare that the information given on this return is c	*	- C						
chargeable to income tax for the year ended 31 March 2019. If I am reclaiming repayment of the tax overpaid as shown								
on line 9 of Part D, I have ticked the box on that line.	on line 9 of Part D, I have ticked the box on that line.							
I understand that false statements can result in prosec	cution and imposition of penalties.							
	Date (day,							
Signature	month,							
	year)							
If you are signing this form on behalf of a	Contact telephone/cell							
legally incapacitated person, print your	number of							
full	representative							
on line 9 of Part D, I have ticked the box on that line.  I understand that false statements can result in prosect  Signature  If you are signing this form on behalf of a legally incapacitated person, print your	eution and imposition of penalties.  Date (day, month, year)  Contact telephone/cell number of							

7. (b) Tax already paid from other income (e.g. tax withheld from other income)

Form S128-EP Page 3