

FORM S128-I

Individual Income Tax Return – Year Ended 31 March 2020

YOUR DETAILS	UR DETAILS Tick applicable box ▶ □ Resident □ □ Part-year resident − enter number													ı re	side	nt	•					
Your surname, forenames,	- Ture year	100	Iuc		CII	ter	ma	1100	<i>.</i> 1 0	ı ac		ΓΙΝ					111					
and maiden name																						
Contact telephone number											ad	nail dre	ss									
Caution: In Parts A through						al	lov	ed	in	co	mp	uti	ng	cha	arg	geal	ble	ine	com	e. I	o r	ot
Include the income of any spouse on this return. PART A EMPLOYMENT INCOME & EXPENSES (Include fringe benefits that have not been taxed, but do not include employment income earned and taxed in a foreign country) 1. Employment information – Attach Form P.16 for each employer (if more than three employers, attach a list with the additional information)																						
Name of Employer(s)	oyer TIN(s)	(ihe :)	(oloy yea			il /20)		emj	Grosoloy	me	nt
(a)		Y	Y	Y	Y	M	M	D	D	Y	Y	Y	Y	M	N	D	D			iicoi		
(b)		Y	Y	Y	Y	M	M	D	D	Y	Y	Y	Y	M	IV	D	D					
(c)		Y	Y	Y	Y	M	M	D	D	Y	Y	Y	Y	M	IV.	D	D					
Period during the Tax Yea		Y	Y	Y	Y	M	M	D	D	Y	Y	Y	Y	M	N	D	D					
Taxpayer was unemployed than three such periods, a		Y	Y	Y	Y	M	M	D	D	Y	Y	Y	Y	M	IV	D	D					
with the additional inform		X 7	T 7	X 7	X 7	M	78.7	D	D	T 7	X 7	T 7	T 7	M	TN /	D	D					
1 1	- •	I Y	Y	ı	Y	IVI	IVI	ט	D	Y	Y	Y	Y	IVI	IV.	D	D					
1d. Total gross employment						1				ъ	. 1.		1.1.									
2. Unreimbursed employs donations	nent-related	ex	pei	nse	s a	na				Deductible amount												
a. Travel expenses incurred fo	r work																					
b. Education expenses to impr			_																			
c. Expenses for technical and		•	ouri	nals	an	d																
d. Motor vehicle expenses incurred for work																						
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 unreimbursed employment-related expenses and de				ona	atic	ns															
3. Chargeable employmen	t income (1d	-2h)																			

PENSION INCOME (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 P.16 for each pension payer (if more than two pension payers,																	
attach a list v	vith additional inform	ation	.)															
Name of employer(s)/pensi on payer(s)	Employer(s) TIN(s)	Pension start date (in the year 2019/20) Pension end date (in the year 2019/20)						Gross pension income										
(a)		Y	Y	Y	Y	M	M	D	D	Y	Y	Y	Y	N	1 N	1 I		
(b)		Y	Y Y Y M M D D Y Y Y M M D D															
1.c. 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 per																		

PART C	(a)	(b)	(c)
BUSINESS INCOME & EXPENSES	Lesotho-source	Foreign-source	Chargeable
(Do not include commercial farming, property, or	business	business	business income
other income. If more than one business in either	income	income	
column, enter the totals here and attach a schedule			
showing the details for each business.)			
Principal/main business or profession,			
including product or service			
Name and physical address or location of			
business			
1. Business income (Sales/ turnover,			
investments, interest, premiums, gains from			
business assets, etc. – attach schedule)			
2. Expenses			
3. Net profit or loss (line 1-line 2)			
4. Business income or loss from			
partnerships (attach schedule)			
5. Business income from trusts and estates			
(attach schedule)			
6. Amount taxable (3+4+5)			
7. Losses brought forward from prior years			
8. Chargeable business income. In columns			
(a) and (b), enter line 6 minus line 7. If zero or less,			
enter nil. In column (c), add columns (a) and (b) on			
this line			

PART ID	(a)	(b)	(c)
	Lesotho-source	Foreign-source	Chargeable commercial
COMMERCIAL FARMING	commercial farming	commercial farming	farming income

INCOME & EXPENSES	income	income	
(Do not include other business,			
property, or other income. If			
more than one farm in either			
column, enter the totals here and			
attach a schedule showing the			
details for each farm.)			
Principal/main crop or			
activity			
Name and physical address			
or location of farm			
1. Commercial farming			
income (Sales/turnover,			
investments, interest, premiums,			
gains from farm assets, etc.–			
attach schedule)			
2. Expenses:			
3. Net profit or loss (line 1-line			
2)			
4. Commercial farming			
income or loss from			
partnerships (attach schedule)			
5. Commercial farming			
income from trusts and			
estates (attach schedule) 6. Amount taxable (3+4+5)			
7. Losses brought forward			
from prior years			
8. Chargeable commercial			
farming income. In columns			
(a) and (b), enter line 6 minus			
line 7. If zero or less, enter nil. In			
column (c), add columns (a) and			
(b) on this line			

PART E			
PROPERTY INCOME & EXPENSES			
SECTION 1 - RENTAL INCOME &	(a)	(b)	(c)
EXPENSES (If more than one property in	Property situated	Property	Chargeable
either column, enter the totals here and attach	in Lesotho	situated in a	property income
a schedule showing the details for each		foreign country	
property.)			

	<u> </u>	
1a. Type of property (Single family		
residence, stand-alone house, apartment		
house, commercial building, land, etc.)		
1b. Physical address or location of		
property		
2. Gross rents		
3. Expenses		
4. Net rental income or loss (line 2-3)		
SECTION 2 – INVESTMENT INCOME &	(a)	(b)
EXPENSES	Lesotho-source	Foreign-source
	income	income
5. Income or gains:		
a. Interest, dividends, and royalties		
b. Gains on the disposal of investment assets		
(attach schedule)		
c. Other property income (except from		
partnerships, trusts, or estates) (attach		
schedule)		
d. Total other income (5a+5b+5c)		
6. Expenses and losses from investment		
assets and donations paid to the Lesotho		
Sports and Recreation Commission (attack		
schedule)		
7. Net investment income or loss (5d-6)		
SECTION 3 – CHARGEABLE PROPERTY	INCOME	
8. Property income or loss from		
partnerships (attach schedule)		
9. Property income from trusts and		
estates (attach schedule)		
10. Add lines 4, 7, 8, and 9		
11. Losses brought forward from prior		
years		
12. Chargeable property income. In		
columns (a) and (b), enter line 10 minus line		
11. If zero or less, enter nil. In column (c),		
add columns (a) and (b) on this line		
	<u> </u>	

PART F	(a) Lesotho-	(b Foreign-source
OTHER INCOME & EXPENSES	source income	income
1. Other income (including net other		
income from partnerships, trusts, and		
estates) (attach schedule)		
2. Expenses (attach schedule)		

3. Chargeable other income. In	
columns (a) and (b), enter line 1 minus	
line 2. If zero or less, enter nil. In	
column (c), add columns (a) and (b) on	
this line	

PART G	(a) Foreign-	(b) Foreign	(c) Lesotho	(d)Credit
CREDIT FOR FOREIGN TAX PAID	source net	tax paid on	tax on the	allowed (enter
(Lesotho residents only)	income	the amount	amount in	the smaller of
		in column (a)	column (a)	the amount in
			(see	column (b) or
			instructions)	column (c))
1. Foreign-source income:				
a. Enter in col. (a) foreign-source				
business income from Part C, line 8, col.				
(b). Then complete column (b) on this				
line				
b. Enter in col. (a) foreign-source				
commercial farming income from Part				
D, line 8, col. (b). Then complete				
column (b) on this line				
c. Add 1a + 1b. Then complete columns				
(c) and (d) on this line				
d. Enter in col. (a) foreign-source				
property income from Part E, line 12,				
col. (b). Then complete column (b) on				
this line				
e. Enter in col. (a) foreign-source other				
income from Part F, line 3, col. (b).				
Then complete column (b) on this line				
f. Add 1d + 1e. Then complete columns				
(c) and (d) on this line				
2. Credit for foreign tax paid allowed	ed (In col. (d), add	1c+1f). Transfer t	nis amount to	
Part H, line 5b				

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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 business income from Part C, line 8, col. (c)	
d. Enter chargeable commercial farming income from Part D, line 8,	
col. (c)	
e. Enter chargeable property income from Part E, line 12, col. (c).	

f. Enter chargeable other income from Part F, line 3, col. (c)			
2. Total chargeable income. Add 1a+1b+1c+1d+1e+1f			
3. Tax before credits:	(a) Chargeable income	(b) Tax rate	(c) Multiply (a) * (b)
a. Enter in col. (a) the amount on line 1d on this part and then			
complete column (c) on this line.		10%	
b. If this return is for:			
► A Lesotho resident who is at least 18 years of age: or			
► A non-resident who lives permanently outside Lesotho but works			
full time in Lesotho:			
• Enter in col. (a) the smaller of:			
(i) M61, 080.00 or			
(ii) Line 2 minus line 1d , if engaged in an income-earning			
activity for the entire year (if not engaged in an income-			
earning activity for the entire year chargeable income must be			
apportioned).			
Complete column (c) on this line, and			
Go to line 3c.			
► For any other non-resident skip this line and the next line and go			
to line 3d			
If this return is for			
► A Lesotho resident who is under the age of 18:			
• Enter in col. (a) the smaller of:			
(i) M61, 080.00 or			
(ii) Lines 1a+1b+1c+1f (but not less than zero), if engaged in an			
income-earning activity for the entire year (if not engaged in an			
income-earning activity for the entire year, chargeable income must			
be apportioned).Complete column (c) on this line, and			
Go to line 3c.			
► Any other non-resident: Skip this line and the next line and go to			
line 3d		20%	
c. If this return is for:			
► A Lesotho resident who is at least 18 years of age: or			
► A non-resident who lives permanently outside Lesotho but works			
full time in Lesotho:			
• Enter in col. (a) line 2 minus lines 3a+3b (from col. (a)			
above),			
• Complete column (c) on this line, and			
► For any other non-resident skip this line and go to line 3d			
If this return is for		30%	

► A Lesotho resident who is under the age of 18:				
Enter in col. (a) lines 1a+1b+1c+1f minus lines 3a+3b (from				
col. (a) above),				
• Complete column (c) on this line,				
For property income of a Lesotho resident who is under the age of				
18: skip this line and go to line 3d.				
d. If this return is for:				
► A Lesotho resident who is at least 18 years of age: Skip this line				
and go to line 4.				
► Any other non-resident other than a nonresident who lives				
permanently outside Lesotho but works full time in Lesotho or a				
Lesotho resident who is under the age of 18:				
• Enter in col. (a) line 1e ,				
• Complete column (c) on this line, and				
• Go to line 4.				
► Any other non-resident:				
• Enter in col. (a) line 2 minus line 1d,				
• Complete column (c) on this line, and			25%	
• Go to line 4.			(*40%)	
4. Total tax before credits (Add 3a+3b+3c+3d in col. (c))				
* For the purposes of line 3d, please note that non-residents m	naking ar	election	under sect	tion 109 to be taxed
by assessment and Lesotho residents under the age of 18 must use a ta				
5. Nonrefundable credits:				
a. Personal tax credit. If this return is for:				
► A Lesotho resident at least 18 years of age or a non-resident who li	ives			
permanently outside Lesotho but works full time in Lesotho , enter Ma	8,			
430.00 if engaged in an income-earning activity for the entire year (if	f a			
part-year resident or not engaged in an income-earning activity for the	e			
entire year, the credit must be apportioned. For a period starting April				
ending September 2019, monthly personal tax credit is $\bf M605.00$. For				
period starting October 2019 and ending March 2020, monthly person	nal			
tax credit is M800.00).				
► A Lesotho resident who under the age of 18, enter:				
A. The smaller of line 3d (in col. (c)) or M 400, plus				
B. The smaller of:				
(i) Line 4 minus line 3d (in col. (c)) or				
(ii) M8, 430.00 minus the amount from A above				
(if a part-year resident or not engaged in an income-earning activity for the				
entire year, the credit must be apportioned as explained in 5 (a) above.				
► Any other non-resident, enter nil				
b. Credit for foreign tax paid from Part G, line 2				
6. Total nonrefundable credits (5a+5b)				
7. Total tax after nonrefundable credits (line 4-line 6) (if zero or				
, · · · · · · · · · · · · · · · · · · ·				

8. Payments (tax	aiready paid):							
a. Income tax deduc	cted from employmen	t and pension i	income - PAYE (as					
shown on Form P.16)							
b. Income Tax (WH	T) paid							
c. Advance installments of income tax paid								
9. Total payments. Add 8a+8b+8c								
10. Tax due. Line	7 minus line 9. Enter	r nil if less than	1 -0-					
11. Tax overpaid.	Line 9 minus line 7.	Enter nil if less	s than -o If you	are claiming				
repayment of the	tax overpaid as sh	own on this l	ine, tick this bo	x ▶□				
Declaration of Pa	id Preparer (Exter	nal tax consu	ultant/accounta	nt/auditor etc.)	(Skip t	this section if		
there is no paid p	reparer.)							
Based on all informa	ntion of which I have a	any knowledge,	, I declare that the	information giver	n on this	return is correct		
and complete and is	a full statement of the	e income and g	gains chargeable to	income tax for th	ie year e	nded 31 March		
2020.								
I understand that fal	lse statements can res	ult in prosecut	tion and imposition	n of penalties.				
Nama afaa:d			Date (day,					
Name of paid			month,					
preparer			year)					
Signature of paid			TIN of					
preparer			paid					
Firm's name			Firm's					
Firm's TIN			physical					
Contact telephone			address Email					
number			address					
Declaration of Taxpayer or Representative								
I declare that the information given on this return is correct and complete and is a full statement of the income and								
gains chargeable to income tax for the year ended 31 March 2020. If I am reclaiming repayment of the tax overpaid as								
shown on line 11 of Part G, I have ticked the box on that line.								
I understand that false statements can result in prosecution and imposition of penalties.								
Signature				Date (day,				
				month, year)				
If you are signing this form on behalf of Contact telephone/cell								
a legally incapacitate	ed person, print			number of				
your full name				representative				
		1						