

# FORM P8



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Business Income Payment Tax

PAPUA NEW GUINEA INTERNAL REVENUE COMMISSION

**PNGIRC - Your Partner in Nation Building**

Taxpayer Identification Number (TIN):

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Effective date: 7 March 2014

INCOME TAX ACT 1959 AS AMENDED

## BUSINESS INCOME PAYMENT TAX RECONCILIATION STATEMENT

### NAME AND ADDRESS OF TAXPAYER (WITHHOLDER)

NAME OF TAXPAYER:					
CONTACT / REPRESENTATIVE:					
PHONE No:					
E-MAIL ADDRESS:					
MAILING ADDRESS	SECTION No:			LOT No:	
	STREET / SUBURB / DISTRICT:				
	P.O. BOX:				
	COUNTRY:			PROVINCE:	
	CITY / POST OFFICE:				
	CARE OF (C/-):				

### DEDUCTION PERIOD

YEAR:

DEDUCTION PERIOD FROM 1 JANUARY TO 31 DECEMBER <sup>10</sup>

### BUSINESS INCOME PAYMENT TAX REMITTANCES

SHOW BELOW REMITTANCES PAID TO THE I.R.C. DURING THE YEAR

DEDUCTION MONTH	AMOUNT PAID	DEDUCTION MONTH	AMOUNT PAID
JANUARY	<sup>10</sup> K	JULY	<sup>70</sup> K
FEBRUARY	<sup>20</sup> K	AUGUST	<sup>80</sup> K
MARCH	<sup>30</sup> K	SEPTEMBER	<sup>90</sup> K
APRIL	<sup>40</sup> K	OCTOBER	<sup>100</sup> K
MAY	<sup>50</sup> K	NOVEMBER	<sup>110</sup> K
JUNE	<sup>60</sup> K	DECEMBER	<sup>120</sup> K
		<b>TOTAL (1)</b>	<sup>130</sup> K

SHOW BELOW THE TOTAL AMOUNT OF TAX DEDUCTIONS SHOWN ON THE SCHEDULE ATTACHED FOR THE YEAR

		<b>TOTAL (2)</b>	<sup>140</sup> K
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NOTE: IF THE TWO TOTALS DO NOT AGREE YOU MUST FURNISH AN EXPLANATION IN WRITING DETAILING THE REASON FOR THE DISCREPANCY

PLEASE CONTINUE ON PAGE 2 TO LIST THE NAMES AND ADDRESS OF PERSONS / BUSINESSES TO WHOM BUSINESS INCOME PAYMENT TAX HAS BEEN DEDUCTED BY YOU FOR THE ABOVE PERIOD INCLUDING DETAILS OF TOTAL TAX DEDUCTIONS.



PLEASE PROVIDE A FULL LIST OF NAMES AND ADDRESSES OF PERSONS / BUSINESSES TO WHOM PAYMENTS WERE MADE BY YOU FOR THE ABOVE PERIOD FOR WHICH BUSINESS PAYMENTS TAX WAS **NOT DEDUCTED**. INCLUDE THE CERTIFICATE OF COMPLIANCE NUMBER.

**ANNUAL INCOME REPORTING STATEMENT**

TAXPAYER IDENTIFICATION NUMBER (TIN) if known	CERTIFICATE OF COMPLIANCE (COC) NUMBER	NAME AND ADDRESS OF PERSON/BUSINESS	GROSS AMOUNT

TOTAL (3) <sup>140</sup>  
K

If additional lines are required, provide the data on a separate sheet and attach it to this form.

**Note:** By signing the declaration below, you are certifying that prior to entering into a contract or contracts in excess of K500 (for 2013 and prior years), or K5,000 (for 1 January 2014 onwards), the payee(s) mentioned above have produced a valid certificate of compliance issued by the Commissioner General of Internal Revenue, or you have deducted withholding tax at the prescribed rate from any payments made.

**DECLARATION**

I declare that the information that I have provided is true and correct in every detail and discloses a full and complete statement of the facts. I understand that the law imposes heavy penalties for false and misleading statements.

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_