

# Self-Assessment Tax Payment Form

Taxpayer Name

Tax Identification Number

Assessment Year

YYYY

Date of Payment

## ITEMIZED TAX PAYMENT CHECKLIST

| No.                  | Payment Item    | Description                               | Amount (USD) |
|----------------------|-----------------|---|--------------|
| 1                    | Income Tax      | Tax payable on total taxable income       | <div></div>  |
| 2                    | Surcharge       | Additional charge (if applicable)         | <div></div>  |
| 3                    | Education Cess  | Cess levied for education purpose         | <div></div>  |
| 4                    | Interest        | Interest due for delayed payment (if any) | <div></div>  |
| 5                    | Other (Specify) | Miscellaneous charges                     | <div></div>  |
| Total Amount Payable |                 |   | <div></div>  |

## DECLARATION

☐ I hereby declare that the information provided above is true and correct to the best of my knowledge.

## IMPORTANT NOTES

- Ensure all amounts are accurately entered and items checked as applicable to your situation.
- This form is for self-assessment tax payments and should accompany your main tax return submission.
- Keep a copy of this form and payment proof for your records and future reference.
- Incomplete or incorrect submission may lead to penalty/interest charges by tax authorities.
- If in doubt, consult a tax advisor before submitting your self-assessment payment.

