



**FORM S128-TE**

**Income Tax Return for Trusts and Estates for Year Ended 31 March 2021**

|   |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|
| <b>DETAILS OF TRUST OR ESTATE</b>         | Tick if applicable <input type="checkbox"/> Final return (trust terminated or estate closed)<br>If an estate, enter date of deceased's death (day, month, year) <input type="checkbox"/> |  |  |  |  |  |  |  |  |  |  |  |  |
| Name of trust or estate                   | TIN  |  |  |  |  |  |  |  |  |  |  |  |  |
| If an estate, name of deceased            | TIN  |  |  |  |  |  |  |  |  |  |  |  |  |
| Name and designation of nominated officer |  |  |  |  |  |  |  |  |  |  |  |  |  |

**Caution: In Parts A through E, only report amounts allowed in computing chargeable income.**

| <b>PART A</b>  |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
|--|-----------------|--|---|---|---|---|---|---|---|--------------------------|---|---|---|---|---|---|---|--|
| <b>EMPLOYMENT INCOME &amp; EXPENSES</b> (Include fringe benefits that have not been taxed, but do not include employment income earned and taxed in a foreign country) |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| <b>1. Employment information – Attach Form P.16 for each employer</b> (if more than three employers, attach a list with the additional information)                    |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| Name of employer(s)  | Employer TIN(s) | Employed from<br>(in the year 2020/21) |   |   |   | Employed until<br>(in the year 2020/21) |   |   |   | Gross employment income  |   |   |   |   |   |   |   |  |
| (a)  |                 | Y                                      | Y | Y | Y | M                                       | M | D | D | Y                        | Y | Y | Y | M | M | D | D |  |
| (b)  |                 | Y                                      | Y | Y | Y | M                                       | M | D | D | Y                        | Y | Y | Y | M | M | D | D |  |
| (c)  |                 | Y                                      | Y | Y | Y | M                                       | M | D | D | Y                        | Y | Y | Y | M | M | D | D |  |
| <b>Period during the Tax Year when the Taxpayer was unemployed (if more than two such periods, attach list with the additional information).</b>                       |                 | Y                                      | Y | Y | Y | M                                       | M | D | D | Y                        | Y | Y | Y | M | M | D | D |  |
|  |                 | Y                                      | Y | Y | Y | M                                       | M | D | D | Y                        | Y | Y | Y | M | M | D | D |  |
|  |                 | Y                                      | Y | Y | Y | M                                       | M | D | D | Y                        | Y | Y | Y | M | M | D | D |  |
| <b>1d. Total gross employment income (1a+1b+1c)</b>  |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| <b>2. Unreimbursed employment-related expenses and donations</b>   |                 |  |   |   |   |   |   |   |   | <b>Deductible amount</b> |   |   |   |   |   |   |   |  |
| a. Travel expenses incurred for work   |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| b. Education expenses to improve work knowledge and skills   |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| c. Expenses for technical and trade books and journals and   |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| d. Motor vehicle expenses incurred for work  |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| e. Home office expenses  |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| f. Employee contributions to an employer superannuation fund   |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| g. Donations paid to the Lesotho Sports and Recreation Commission  |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| <b>2h. Total unreimbursed employment-related expenses and donations</b>  |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |
| <b>3. Chargeable employment income (1d-2h)</b>   |                 |  |   |   |   |   |   |   |   |                          |   |   |   |   |   |   |   |  |

| PART B   |                                     |  |   |   |   |   |   |   |   |  |   |   |   |   |   |   |   |                      |
|--|-------------------------------------|--|---|---|---|---|---|---|---|--|---|---|---|---|---|---|---|----------------------|
| PENSION INCOME<br>(Do not include pension income that relates to employment carried on in a foreign country <b>and taxed in that country</b> or, if the deceased 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 with the additional information)  |                                     |  |   |   |   |   |   |   |   |  |   |   |   |   |   |   |   |                      |
| Name of employer(s)/pension payer(s)   | Employer(s)/Pension payer(s) TIN(s) | Pension start date (in the year 2020/21) |   |   |   |   |   |   |   | Pension end date (in the year 2020/21) |   |   |   |   |   |   |   | Gross pension income |
| (a)  |                                     | Y  | Y | Y | Y | M | M | D | D | Y                                      | Y | Y | Y | M | M | D | D |                      |
| (b)  |                                     | Y  | Y | Y | Y | M | M | D | D | Y                                      | Y | Y | Y | M | M | D | D |                      |
| Period during the Tax Year when the Taxpayer was not earning pension income (if more than three such periods, attach list with the additional information).  |                                     | Y  | Y | Y | Y | M | M | D | D | Y                                      | Y | Y | Y | M | M | D | D |                      |
|  |                                     | Y  | Y | Y | Y | M | M | D | D | Y                                      | Y | Y | Y | M | M | D | D |                      |
|  |                                     | Y  | Y | Y | Y | M | M | D | D | Y                                      | Y | Y | Y | M | M | D | D |                      |
| 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 pension income (1c-2)  |                                     |  |   |   |   |   |   |   |   |  |   |   |   |   |   |   |   |                      |

| PART C<br>BUSINESS INCOME & EXPENSES (Do not include commercial farming, property, or other income. If more than one business in either column, enter the totals here and attach a schedule showing the details for each business.) | (a)<br>Lesotho-source business income | (b)<br>Foreign-source business income | (c)<br>Total business income |
|---|---------------------------------------|---------------------------------------|------------------------------|
| 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. Total Expenses   |                                       |                                       |                              |
| 3. Subtotal (1-2)   |                                       |                                       |                              |
| 4. Business income or loss from partnerships (attach schedule)  |                                       |                                       |                              |
| 5. Business income from other trusts and estates (attach schedule)  |                                       |                                       |                              |
| 6. Net profit or loss (lines 3+4+5)   |                                       |                                       |                              |
| 7. Share of net profit on line 6 to which beneficiaries are entitled* (if a loss, enter nil)  |                                       |                                       |                              |
| 8. Amount taxable to trust or estate (line 6-line 7)  |                                       |                                       |                              |
| 9. Losses brought forward from prior years  |                                       |                                       |                              |
| 10. Chargeable business income (In columns (a) and (b), enter line 8-line 9. If zero or less, enter nil. In column (c), add columns (a) and (b) on this line)   |                                       |                                       |                              |

\*Treat nonresident beneficiaries as residents for this purpose.

| PART D<br>COMMERCIAL FARMING INCOME & EXPENSES (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.) | (a)<br>Lesotho-source commercial farming income | (b)<br>Foreign-source commercial farming income | (c)<br>Total commercial farming income |
|---|---|---|--|
| 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)   |   |   |  |

|  |  |  |  |
|--|--|--|--|
| <b>2. Total Expenses:</b>  |  |  |  |
| <b>3. Subtotal (1-2)</b>   |  |  |  |
| <b>4. Commercial farming income or loss from partnerships</b> (attach schedule)  |  |  |  |
| <b>5. Commercial farming income from other trusts and estates</b> (attach schedule)  |  |  |  |
| <b>6. Net profit or loss</b> (lines 3+4+5)   |  |  |  |
| <b>7. Share of net profit on line 6 to which beneficiaries are entitled*</b> (if a loss, enter nil)  |  |  |  |
| <b>8. Amount taxable to trust or estate</b> (line 6-line 7)  |  |  |  |
| <b>9. Losses brought forward from prior years</b>  |  |  |  |
| <b>10. Chargeable commercial farming income</b> (In columns (a) and (b), enter line 8-line 9. If zero or less, enter nil. In column (c), add columns (a) and (b) on this line) |  |  |  |

\*Treat nonresident beneficiaries as residents for this purpose.

| <b>PART E<br/>PROPERTY INCOME &amp; EXPENSES</b>  |   |   |   |
|---|---|---|---|
| <b>SECTION 1 - RENTAL INCOME &amp; EXPENSES</b><br>(If more than one property in either column, enter the totals here and attach a schedule showing the details for each property.) | <b>(a)<br/>Property situated in Lesotho</b> | <b>(b)<br/>Property situated in a foreign country</b> | <b>(c)<br/>Chargeable property income</b> |
| <b>1a. Type of property</b> (Single family residence, stand alone house, apartment house, commercial building, land, etc.)  |   |   |   |
| <b>1b. Physical address or location of property</b>   |   |   |   |
| <b>2. Gross rents</b>   |   |   |   |
| <b>3. Total Expenses</b>  |   |   |   |
| <b>4. Net rental income or loss</b> (line 2-3).   |   |   |   |
| <b>SECTION 2 – INVESTMENT INCOME &amp; EXPENSES</b>   | <b>(a)<br/>Lesotho-source income</b>        | <b>(b)<br/>Foreign-source income</b>                  |   |
| <b>5. Income or gains:</b>  |   |   |   |
| a. Interest, dividends, and royalties   |   |   |   |
| b. Gains on the disposal of investment assets (attach schedule)   |   |   |   |
| c. Other property income (except from partnerships and other trusts and estates) (attach schedule)  |   |   |   |
| d. Total other income (5a+5b+5c)  |   |   |   |
| <b>6. Expenses and losses from investment assets and donations paid to the Lesotho Sports and Recreation Commission</b> (attach schedule)   |   |   |   |
| <b>7. Net investment income or loss</b> (5d-6)  |   |   |   |
| <b>SECTION 3 – CHARGEABLE PROPERTY INCOME</b>   |   |   |   |
| <b>8. Property income or loss from partnerships</b> (attach schedule)   |   |   |   |
| <b>9. Property income from other trusts and estates</b> (attach schedule)   |   |   |   |
| <b>10. Add lines 4, 7, 8, and 9</b>   |   |   |   |
| <b>11. Share of net property income on line 10 to which beneficiaries are entitled*</b> (if a loss, enter nil)  |   |   |   |
| <b>12. Amount taxable to trust or estate</b> (line 10-line 11)  |   |   |   |
| <b>13. Losses brought forward from prior years</b>  |   |   |   |
| <b>14. Chargeable property income.</b> In columns (a) and (b), enter line 12 minus line 13. If zero or less, enter nil. In column (c), add columns (a) and (b) on this line         |   |   |   |

\*Treat nonresident beneficiaries as residents for this purpose.

| <b>PART F<br/>OTHER INCOME &amp; EXPENSES</b>  | <b>(a) Lesotho-source income</b> | <b>(b) Foreign-source income</b> |  |
|--|----------------------------------|----------------------------------|--|
| <b>1. Other income</b> (including net other income from partnerships, trusts, and estates) (attach schedule)   |                                  |                                  |  |
| <b>2. Expenses</b> (attach schedule)   |                                  |                                  |  |
| <b>3. Net other income.</b> 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 |                                  |                                  |  |
| <b>4. Share of net other income on line 3 to which beneficiaries are entitled*</b> (if a loss, enter nil)  |                                  |                                  |  |

|   |  |  |  |
|---|--|--|--|
| <b>5. Chargeable other income.</b> In columns (a) and (b), enter line 3 minus line 4. If zero or less, enter nil. In column (c), add columns (a) and (b) on this line |  |  |  |
|---|--|--|--|

\*Treat nonresident beneficiaries as residents for this purpose.

| <b>PART G:<br/>CREDIT FOR FOREIGN TAX PAID<br/>ON INCOME TAXED TO THE TRUST<br/>OR ESTATE</b>   | <b>(a) Foreign-<br/>source net<br/>income</b> | <b>(b) Foreign tax<br/>paid on the<br/>amount in<br/>column (a)</b> | <b>(c) Lesotho tax<br/>on the amount<br/>in column (a)<br/>(see<br/>instructions)</b> | <b>(d) Credit<br/>allowed (enter<br/>the smaller of<br/>the amount in<br/>column (b) or<br/>column (c))</b> |
|---|---|---|---|---|
| <b>1. Foreign-source income:</b>  |   |   |   |   |
| a. Enter in col. (a) foreign-source business income from Part C, line 10, col. (b). Then complete column (b) on this line                           |   |   |   |   |
| b. Enter in col. (a) foreign-source commercial farming income from Part D, line 10, 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 14, col. (b). Then complete column (b) on this line                           |   |   |   |   |
| e. Enter in col. (a) foreign-source other income from Part F, line 5, col. (b). Then complete column (b) on this line                               |   |   |   |   |
| f. Add 1d + 1e. Then complete columns (c) and (d) on this line  |   |   |   |   |
| <b>2. Credit for foreign tax paid on income taxed to the trust or estate</b> (in col. (d) only, add 1c+1f). Transfer this amount to Part I, line 5b |   |   |   |   |

| <b>PART H<br/>FOREIGN TAX PAID ON INCOME TAXED TO<br/>BENEFICIARIES</b>  | <b>(a) Foreign-source<br/>net income</b> | <b>(b) Foreign tax paid<br/>on the amount in<br/>column (a)</b> |
|--|--|---|
| 1. Enter in col. (a) foreign-source business income from Part C, line 7, col. (b). Then complete column (b) on this line           |  |   |
| 2. Enter in col. (a) foreign-source commercial farming income from Part D, line 7, col. (b). Then complete column (b) on this line |  |   |
| 3. Enter in col. (a) foreign-source property income from Part E, line 11, col. (b). Then complete column (b) on this line          |  |   |
| 4. Enter in col. (a) foreign source other income from Part F, line 4, col. (b). Then complete column (b) on this line              |  |   |

| <b>PART I - TAX COMPUTATION</b>   |                                  |                             |                                       |
|---|----------------------------------|-----------------------------|---------------------------------------|
| <b>1. Chargeable income:</b>  |                                  |                             |                                       |
| 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 10, col. (c)  |                                  |                             |                                       |
| d. Enter chargeable commercial farming income from Part D, line 10, col. (c)                              |                                  |                             |                                       |
| e. Enter chargeable property income from Part E, line 14, col. (c).                                       |                                  |                             |                                       |
| f. Enter chargeable other income from Part F, line 5, col. (c).   |                                  |                             |                                       |
| <b>2. Total chargeable income.</b> Add 1a+1b +1c+1d+1e+1f   |                                  |                             |                                       |
| <b>3. Tax before credits:</b>   | <b>(a) Chargeable<br/>income</b> | <b>(b)<br/>Tax<br/>rate</b> | <b>(c)<br/>Multiply (a) *<br/>(b)</b> |
| a. Enter in col. (a) the amount on <b>line 1d</b> on this part and then complete column (c) on this line. |                                  | <b>10%</b>                  |                                       |
| b. If this return is for:   |                                  | <b>20%</b>                  |                                       |

|  |  |            |  |
|--|--|------------|--|
| <p>▶ An estate for the year of a resident deceased's death or the following year:</p> <ul style="list-style-type: none"> <li>Enter in col. (a) the <b>smaller</b> of: <ul style="list-style-type: none"> <li>(i) M64, 200.00 or</li> <li>(ii) <b>Line 2</b> minus <b>line 1d</b>, if the deceased was 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).</li> </ul> </li> <li>Complete column (c) on this line, and</li> <li>Go to line 3c.</li> </ul> <p>▶ Any other estate or a trust: Skip this line and the next line and go to line 3d</p> |  |            |  |
| <p>c. If this return is for:</p> <p>▶ An estate for the year of a resident deceased's death or the following year:</p> <ul style="list-style-type: none"> <li>Enter in col. (a) <b>line 2</b> minus <b>line 3a+3b (from col. (a))</b>,</li> <li>Complete column (c) on this line, and</li> <li>Skip line 3d and go to line 4.</li> </ul> <p>▶ Any other estate or a trust: Skip this line and go to line 3d</p>  |  | <b>30%</b> |  |
| <p>d. If this return is for:</p> <p>▶ An estate for the year of a resident deceased's death or the following year: Skip this line and go to line 4.</p> <p>▶ Any other estate or a trust:</p> <ul style="list-style-type: none"> <li>Enter in col. (a) <b>line 2</b> minus <b>line 1d</b>,</li> <li>Complete column (c) on this line, and</li> <li>Go to line 4.</li> </ul>  |  | <b>40%</b> |  |
| <b>4. Total tax before credits</b> (Add 3a+3b+3c+3d in col. (c))   |  |            |  |
| <b>5. Nonrefundable credits:</b>   |  |            |  |
| <p>a. Personal tax credit. If this is:</p> <p>▶ An estate return for the year of a resident deceased's death, multiply <b>M10,080.00</b> by the fraction of the number of months in the year prior to the date of the deceased's death during which the deceased engaged in an income-earning activity divided by 12, and enter the result (but do not enter more than the amount of tax on the chargeable income received or accrued during the year prior to the date of the deceased's death)</p> <p>▶ Any other estate return or a trust return, enter nil</p>   |  |            |  |
| b. Credit for foreign tax paid from Part G, line 4   |  |            |  |
| <b>6. Total nonrefundable credits</b> (5a+5b)  |  |            |  |
| <b>7. Total tax after nonrefundable credits</b> (line 4-line 6) (if zero or less, enter nil)   |  |            |  |
| <b>8. Payments (tax already paid):</b>   |  |            |  |
| a. Income tax deducted from employment and pension income - PAYE (as shown on Form P.16)   |  |            |  |
| b. Income tax (WHT) paid   |  |            |  |
| c. Advance installments of income tax paid   |  |            |  |
| <b>9. Total payments.</b> Add 8a+8b+8c   |  |            |  |
| <b>10. Tax due.</b> Line 7 minus line 9. Enter nil if less than -0-  |  |            |  |
| <b>11. Tax overpaid.</b> Line 9 minus line 7. Enter nil if less than -0-.  |  |            |  |
| <b>If you are claiming repayment of the tax overpaid as shown on this line, tick this box</b> ▶ <input type="checkbox"/>   |  |            |  |

| <b>PART J - INFORMATION ON BENEFICIARIES</b>   |            |                       |   |
|--|------------|-----------------------|---|
| <b>Name of beneficiary</b> (if more than 5 beneficiaries, attach schedule and list additional beneficiaries) | <b>TIN</b> | <b>Postal address</b> | <b>Resident beneficiary (Yes or No)</b> |
| <b>A</b>   |            |                       |   |
| <b>B</b>   |            |                       |   |
| <b>C</b>   |            |                       |   |
| <b>D</b>   |            |                       |   |
| <b>E</b>   |            |                       |   |

**PART K**

**ALLOCATION TO BENEFICIARIES OF THEIR SHARES OF INCOME AND FOREIGN TAX PAID (Columns must correspond to the beneficiary lettering from Part J.) Caution: See instructions for special rules that apply to allocating amounts to nonresident beneficiaries.**

**IMPORTANT: The trust or estate must provide to each beneficiary the information from the column below that applies to that specific beneficiary.**

| <b>Income or loss</b>   | <b>Total</b> | <b>Beneficiary A</b> | <b>Beneficiary B</b> | <b>Beneficiary C</b> | <b>Beneficiary D</b> | <b>Beneficiary E</b> |
|---|--------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| 1. Lesotho-source business income from Part C, col. (a), line 7*          |              |                      |                      |                      |                      |                      |
| 2. Foreign-source business income from Part C, col. (b), line 7           |              |                      |                      |                      |                      |                      |
| 3. Lesotho-source commercial farming income from Part D, col. (a), line 7 |              |                      |                      |                      |                      |                      |
| 4. Foreign-source commercial farming income from Part D, col. (b), line 7 |              |                      |                      |                      |                      |                      |
| 5. Lesotho-source property income from Part E, col. (a), line 11          |              |                      |                      |                      |                      |                      |
| 6. Foreign-source property income from Part E, col. (b), line 11          |              |                      |                      |                      |                      |                      |
| 7. Lesotho-source other income from Part F, col. (a), line 4              |              |                      |                      |                      |                      |                      |
| 8. Foreign-source other income from Part F, col. (b), line 4              |              |                      |                      |                      |                      |                      |
| <b>Foreign tax paid</b>   | <b>Total</b> | <b>Beneficiary A</b> | <b>Beneficiary B</b> | <b>Beneficiary C</b> | <b>Beneficiary D</b> | <b>Beneficiary E</b> |
| 9. Foreign tax paid on business income from Part H, line 1                |              |                      |                      |                      |                      |                      |
| 10. Foreign tax paid on commercial farming income from Part H, line 2     |              |                      |                      |                      |                      |                      |
| 11. Foreign tax paid on property income from Part H, line 3               |              |                      |                      |                      |                      |                      |
| 12. Foreign tax paid on other income from Part H, line 4                  |              |                      |                      |                      |                      |                      |

\*For company beneficiaries, the amount of business income must be stated separately on an attached schedule for manufacturing.

**Declaration of Paid Preparer (External tax consultant/accountant/auditor) (Skip this section if there is no paid preparer.)**

Based on all information of which I have any knowledge, 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 2021.

I understand that false statements can result in prosecution and imposition of penalties.

|                            |  |                         |  |
|----------------------------|--|-------------------------|--|
| Name of paid preparer      |  | Date (day, month, year) |  |
| Signature of paid preparer |  | TIN of paid preparer    |  |
| Firm's name                |  | Firm's physical address |  |
| Firm's TIN                 |  |                         |  |
| Contact telephone number   |  | Email address           |  |

**Declaration of Nominated Officer**

I, the nominated officer, 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 2021. If I am reclaiming repayment of the tax overpaid as shown on line 11 of Part E, I have ticked the box on that line.

I understand that false statements can result in prosecution and imposition of penalties.

|  |  |                          |  |                         |             |  |
|--|--|--------------------------|--|-------------------------|-------------|--|
| Signature of officer                         |  | TIN of nominated officer |  | Date (day, month, year) |             |  |
| Postal address of officer (P/Bag or P.O Box) |  |                          |  |                         | Postal code |  |
| Contact telephone number                     |  | Email address            |  |                         |             |  |

If there has been a change of nominated officer during the year of assessment, show below the date of change and the name of the previous nominated officer.

Date of change (day, month, year): \_\_\_\_\_ Name of previous nominated officer: \_\_\_\_\_