



Seychelles Revenue Commission

Business Activity Statement

Client trading name:

When completing this form, please:

* leave boxes blank if not applicable (do not use N/A, Nil or Symbols +,-,/,RS)

TIN: OR

*GST Services and other receipts includes professional services, communications and insurance

* use the BAS instruction brochure for guidance

Month: Year:

* cheques payable to Seychelles Revenue Commission

Income & Non-Monetary Benefits Tax (INMBT)

No. of Seychellois Employees	<input style="width: 90%;" type="text"/>	Full Time	<input style="width: 90%;" type="text"/>	Part Time	<input style="width: 90%;" type="text"/>	Casual	<input style="width: 90%;" type="text"/>
No. of Non-Seychellois Employees	<input style="width: 90%;" type="text"/>	Full Time	<input style="width: 90%;" type="text"/>	Part Time	<input style="width: 90%;" type="text"/>		
Total emolument paid: SR	<input style="width: 90%;" type="text"/>			SR		I1	
Non-Seychellois emolument paid:			15%	<input style="width: 90%;" type="text"/>		I2	
Seychellois emolument paid: SR	<input style="width: 90%;" type="text"/>		15%	<input style="width: 90%;" type="text"/>		I3	
Emolument paid under specific program or approved project	<input style="width: 90%;" type="text"/>		2.5%	<input style="width: 90%;" type="text"/>		I4	
Non-Monetary Benefits paid: SR	<input style="width: 90%;" type="text"/>		20%	<input style="width: 90%;" type="text"/>		I5	
Bonus Paid liable to Income Tax:SR	<input style="width: 90%;" type="text"/>		15%	<input style="width: 90%;" type="text"/>		I6	
		Fixed rate payments:		<input style="width: 90%;" type="text"/>		I7	
Other payments:		Surcharge & others:		<input style="width: 90%;" type="text"/>		I8	
		Income & non-monetary benefits-arrears:		<input style="width: 90%;" type="text"/>		I9	
		Social security contribution -arrears:		<input style="width: 90%;" type="text"/>		I10	
Total INMBT to remit:(labels I2+I3+I4+I5+I6+I7+I8+I9+I10)	<input style="width: 90%;" type="text"/>					I Summary	

Good & Services Tax (GST)

Amount (SR) (including GST)		Rate	GST amounts (SR)	
Total sales:	<input style="width: 90%;" type="text"/>			G1
Tourism receipts:	<input style="width: 90%;" type="text"/>	15%	<input style="width: 90%;" type="text"/>	G2
Manufacturing & other receipts:	<input style="width: 90%;" type="text"/>	12%	<input style="width: 90%;" type="text"/>	G3
*Services & other receipts:	<input style="width: 90%;" type="text"/>	15%	<input style="width: 90%;" type="text"/>	G4
Residential rent receipts:	<input style="width: 90%;" type="text"/>	15%	<input style="width: 90%;" type="text"/>	G5
Other payments:		Surcharge & others:	<input style="width: 90%;" type="text"/>	G6
Total GST to remit:(labels G2+G3+G4+G5+G6)	<input style="width: 90%;" type="text"/>			G Summary

Excise Tax (on locally manufactured goods)

Amounts (SR) (excluding Excise)		Excise amounts (SR)	
Tobacco sales:	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	E1
Alcohol sales:	<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>	E2
Other payments:		Surcharge & others:	<input style="width: 90%;" type="text"/> E3
Total Excise Tax to remit:(labels E1+E2+E3)	<input style="width: 90%;" type="text"/>		E Summary

Pay As You Go (PAYG) - Business Tax

Amounts paid (SR)	Rate	SR	
Dividends paid to non-residents:	15%		P1
Royalties paid to non-residents:	15%		P2
Interest paid:			P3
Technical Service Fee:	15%		P4
Natural Resources Amount:	15%		P5
Insurance Premium:	5%		P6
Specified business:	5%		P7
Other Withholding Payments:			P8
Total amount of PAYG instalment (provisional tax:)			P9
Business Tax	Year:	Amount:	P10
Other Payments:			P11
Total amount PAYG to remit:(labels P1+P2+P3+P4+P5+P6+P7+P8+P9+P10+P11)			P Summary

Summary		SR
Total Income & Non monetary benefits tax remitted:		
Total GST remitted:		
Total Excise tax remitted:		
Total PAYG remitted:		
Total amount remitted:		
Cheque Number or Bank Transfer Code (Reference):		

<input checked="" type="checkbox"/> A behind an item means you need to supply explanatory or supporting documentation.	Optional HRS MINS <input type="text"/> <input type="text"/> Please estimate the time taken to complete this form. Include the time taken to collect any information
<input checked="" type="checkbox"/> Check if you supplied your trading name, Tax identification Number (TIN) and the tax period.	
This BAS must be lodged by or on the 21st day of the month following your liability.	
Any late lodgement or late payment will result in a penalty and /or interest payments.	
A 'nil return' must be lodged.	
Activity statement instruction are available from www.src.gov.sc or can be ordered by phoning 4293737	

Declaration: I declare that the information on this form is true and correct, and that I am authorised to make this declaration.

Signature: _____ Date: _____

Tax Reform
Equity & Fairness

