Ta	x Year B.E. 2556 (2013)	Personal Income for taxpayer with only income under Section 40 (1) of the Re	from employment J.9.91		
Taxpayer	Тахрау	er Identification No.	Spouse -	axpayer Identification No.	
	Date of Birth:		Date of Birth:		
First Name		Surname	First NameSurname		
(Please clearly specify title Address:Building	: Mr, Miss, Ms., or Others)	Room No. Floor No.	(Please clearly specify title: Mr, Miss, M Marital status	s., or Others) Filing Status	
Village Name		Street No. Moo	Marriage existed throughout	(1) Has income and file joint tax retur	
	R	load	this tax year Married during this tax year	(2) Has income and file separate ta	
Sub-District	D	listrict	Divorced during tax year	return	
Province		Postal Code	Deceased during tax year	(3)Has no income	
Tel :Home	O	ffice	In case spouse has no incom	e and is a foreigner, please specify	
Reg	ular Filing	Additional Filing	Passport No. Nationality	Country	
Status Sing		Divorced/ Deceased during th Widowed tax year			
			For Of	īcer's Use Only	
Tax Payable		baht	For Of	icer's Use Only	
Tax Payable	Donation of tax	baht x payable to political party :	Tax Overpaid		
Tax Payable Taxpayer	Donation of tax		Tax Overpaid Political F	baht	
		x payable to political party :	Tax Overpaid Political F	baht	
Taxpayer Spouse	No No	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to	Tax Overpaid Political F	baht	
Taxpayer Spouse	No No be an individual w	x payable to political party :	Tax Overpaid Political F	Party No. :	
Taxpayer Spouse (The donor must	No No be an individual w Statement o	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to vith Thai citizenship)	Tax Overpaid Political F	Party No. :	
Taxpayer Spouse (The donor must	No No be an individual w Statement o certify that all item	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to Yith Thai citizenship)	Tax Overpaid Political F	Party No. : for Tax Refund	
Taxpayer Spouse (The donor must	No No be an individual w Statement o certify that all item	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yith Thai citizenship) f Certification s declared are true and have attached	Tax Overpaid Political F	Party No. : for Tax Refund	
Taxpayer Spouse (The donor must I hereby supporting docum	No No be an individual w Statement o certify that all item	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to f Certification s declared are true and have attached nt forms (<i>if any</i>). Total copy/copies Taxpayer	Tax Overpaid Political F Request I hereby request above in the amount of	Party No. : for Tax Refund st a refund of the tax overpaid f Daht	
Taxpayer Spouse (The donor must I hereby supporting docum	No No be an individual w Statement o certify that all item nents and attachme	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to f Certification s declared are true and have attached nt forms (<i>if any</i>). Total copy/copies Taxpayer	Tax Overpaid Political F Political F Request I hereby request above in the amount of Signature	Party No. : for Tax Refund st a refund of the tax overpaid f Daht	
Taxpayer Spouse (The donor must I hereby supporting docum	No No be an individual w Statement o certify that all item nents and attachme	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to rith Thai citizenship) f Certification s declared are true and have attached nt forms (<i>if any</i>). Total copy/copies Taxpayer Representative)	Tax Overpaid Political F Political F Request I hereby request above in the amount of Signature	Party No. : for Tax Refund st a refund of the tax overpaid f Daht	
Taxpayer Spouse (The donor must I hereby supporting docum	No No be an individual w Statement o certify that all item nents and attachme	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to f Certification s declared are true and have attached nt forms (<i>if any</i>). Total copy/copies Taxpayer	Tax Overpaid Political F Political F Request I hereby request above in the amount of Signature Date	for Tax Refund for Tax Refund t a refund of the tax overpaid f bah Taxpayer (DD/MM/YYYY)	
Taxpayer Spouse (The donor must I hereby supporting docum	No No be an individual w Statement o certify that all item nents and attachme	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to rith Thai citizenship) f Certification s declared are true and have attached nt forms (<i>if any</i>). Total copy/copies Taxpayer Representative)	Tax Overpaid Political F Political F I Request I hereby request above in the amount of Signature Date	baht Party No. : for Tax Refund st a refund of the tax overpaid f bah Taxpayer (DD/MM/YYYY t provides electronic services	
Taxpayer Spouse (The donor must I hereby supporting docum	No No be an individual w Statement o certify that all item nents and attachme	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to rith Thai citizenship) f Certification s declared are true and have attached nt forms (<i>if any</i>). Total copy/copies Taxpayer Representative) (relationship to taxpayer)	Tax Overpaid Political F Political F Request I hereby request above in the amount of Signature Date The Revenue Department related to ภ.ง.ด.91 on the	Party No. : for Tax Refund f f Taxpayer (DD/MM/YYYY) t provides electronic services website www.rd.go.th as follows:	
Taxpayer Spouse (The donor must I hereby supporting docum	No No be an individual w Statement o certify that all item nents and attachme	x payable to political party : Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to Yes, donate 100 baht to rith Thai citizenship) f Certification s declared are true and have attached nt forms (<i>if any</i>). Total copy/copies Taxpayer Representative) (relationship to taxpayer)	Tax Overpaid Political F Political F Request I hereby request above in the amount of Signature Date The Revenue Department related to ก.ง.ด.91 on the 1. ก.ง.ด.91 submiss	for Tax Refund for Tax Refund t a refund of the tax overpaid f bah Taxpayer (DD/MM/YYYY)	

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Payer of Income	entification No.			
A Tax Computatio		C Allowances and Exemptions after Deduction of Expense		
1. Salaries, wages, pensions etc.				
(Plus exempted income from B 5.)		1. Taxpayer		
2. Less exempted income (from B 6.)		 Spouse (30,000 baht if filing jointly or has no income) 		
 Balance (1 2.) Less expense 		3. Child persons 15,000 Baht/person		
(40 percent of 3. but not exceeding legal limit)		Childpersons		
5. Balance (3 4.)		17,000 Baht/person	-	
Less allowances (from C 13.)		4. Parental care (Please fill in Personal Identifical	tion No.)	
 Balance (5 6.) Less donation supporting education/sports/other 		(Father of taxpayer)		
(twice the actual amount paid but not exceeding			-	
10 percent of 7 .)		(Mother of taxpayer)		
. Balance (7 8.)		(Father of spouse who is filing joint tax return or h	as no income)	
D. Less other donation (not exceeding 10 percent of S				
. Net Income (9 10.)		(Mother of spouse who is filing joint tax return or l	nas no income)	
2. Tax computed from Net Income under 11.		5. Disabled/Incompetent person support		
. Less Exemption for first time home buyer				
Property Value		6. Health insurance premium for parents of	of both taxpayer a	
. Tax Payable (only if 12. is more than 13.)		spouse (Please fill in Personal Identification N	lo.)	
5. Less Withholding Tax		(Father of taxpayer)		
5. Total Tax : Payable Overpaid		(rather of taxpayer)		
(Attached evidence for 8., 10., 13. and 15. totalcopy/copies	s)	(Mother of taxpayer)		
7. Add additional tax payable				
(from C 6. on Attachment Form (if any))		(Father of spouse)		
3. Less tax overpaid				
(from C 7. on Attachment Form (if any))		(Mother of spouse)		
). Less tax paid from previous filing of ก.ง.ด.91		7. Life insurance premium paid		
(In the case of additional filing)		Pension insurance premium paid		
D. Tax : Payable Overpaid		8. Provident fund contribution		
. Add surcharge (if any)		(not exceeding 10,000 baht)		
. Total Tax : Payable Overpaid		9. Retirement Mutual Fund unit purchase		
		10. Long - Term Equity Fund unit purchase		
Exempted Incom	ne	 Interest paid on loan for purchase, hire-purchase, or construction of 		
Provident fund contribution		residence		
(Only the part exceeding 10,000 baht)		12. Social security fund contribution		
Government pension fund contribution		13. Total (1. to 12.) to be filled in A 6.		
Private teacher aid fund contribution		(Evidence attached $f B$ 1. to 5. and $f C$ 4. to 12. t	otal copy/copies)	
. Income exemption				
Disabled taxpayer aged under 65 years old				
Taxpayer aged 65 years or older (including				
disabled taxpayer)				
. Severance pay under Labor Law				
(If wish to include)				
6. Total (1. to 5.) to be filled in A 2.				

6	. Total	(1 . to	5 .) to	be fi	lled in	A