



Kenya Revenue Authority

INCOME TAX DEPARTMENT
FORM I.T.2C RETURN (DECEMBER CASES) - TO BE MADE FOR A COMPANY, CLUB, TRUST, ETC..
2002 YEAR OF INCOME

Tax File No.

(If address shown below is incorrect delete incorrect entry and enter correct information).
(Please Print All Required Information)

Under Sec. 52B of the Income Tax Act you are required to submit this return not later than the last day of the sixth month following the end of the accounting period.

Name:
Address
P.I.N.

THE COMMISSIONER,
INCOME TAX DEPARTMENT,
P.O. BOX 30008,
NAIROBI.

ACCOUNTING PERIOD ENDED 31ST DECEMBER, 2002

TICK RESIDENTIAL STATUS OF COMPANY

RESIDENT [] NON RESIDENT []

Table with columns: Line No., STATE EXACT NATURE OF FARMING AND BUSINESS, A FARMING, B BUSINESS, C RENT, D INTEREST, Line No. Rows include: PART A - TOTAL TAXABLE PROFIT/LOSS, PART B - ASSESSMENT TO TAX, PART C - COMPENSATING TAX - DIVIDEND TAX ACCOUNT, PART D - DETAILS OF PAYMENTS.

22	Simple interest at the rate of 2% per month on any outstanding amount of tax and penalty that remained unpaid after one month of the due date.			22
23	Total Penalty and late Payment Interest (Line 20+21a+21b+22).			23
24	Total Taxes, Penalties and Interest (Line 18+19+23) PAY THIS AMOUNT.			24
25	Claim of Overpayment (Line 13+23-17).			25
26	Balance of unused Credit under Sect.39A (Import duty) carried forward.			26

Indicate if 2001 and prior years overpayments if any should be offset against outstanding tax liability or refunded.

Overpayment for	Amount	Receipt	Offset against	Amount
.....	shs.	No.	Year	shs.
2001.....	2001.....
19.....	19.....
19.....	19.....

PART E

CERTIFICATE UNDER SECTION 54 (PRIVATE COMPANIES ONLY)

Under the terms of Section 54 of the Act, you are required to furnish a certificate of all the payments or benefits, advantages and facilities made and granted during the Year of Income 2002 as appropriate, with full names and addresses of the Directors and employees to whom the payments were made or benefits advantages or facilities granted.

**PART F
DECLARATION**

I, (Full Name in BLOCK LETTERS).....declare that

this return contains a full and true statement of (1) the income liable to tax of (name of Company).....

.....for the accounting year endedday of

2002 and (2) of particulars required under Section 54, 57, 58 and 61 on page 1 and 2 of the return.

The control and management of the business of the body of persons was/was not ** exercised in Kenya, in the year to which the accounts relate. If this return claims repayment of tax paid, such claim is a full and true statement of my entitlement to such repayment.

.....

*Signature of person making the return

.....

Designation

*The return is to be signed by the General Manager or other Principal officer of a body of persons in case of private Companies

**Delete whichever is inapplicable.

.....
Date

.....
Postal

.....
Address