



REVENUE DIVISION, MINISTRY OF FINANCE  
WITHHOLDING TAX FORM

Note: Please get ready a) particulars of non-resident and b) details of payments made. You are encouraged to submit your Withholding Tax Form via STARS eServices Portal at <https://www.stars.gov.bd>

**Section A: Particulars of Payer**

Identifier Number	<input type="text"/>		
Name of Company (Business Name)	<input type="text"/>		
Company Business Address	<input type="text"/>		
District/State	<input type="text"/>	Postal Code	<input type="text"/>
Country	<input type="text"/>		
Branch	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Office Telephone No	<input type="text"/>	Fax No	<input type="text"/>
Email Address	<input type="text"/>		

**Section B: Particulars of Non-Resident Person/Recipient to Whom Payment Has Been Made**

Payee Name	<input type="text"/>		
Foreign Address	<input type="text"/>		
Country of Residence	<input type="text"/>	Postal Code	<input type="text"/>
Tax Reference No. (If Any)	<input type="text"/>		
Email Address	<input type="text"/>		

**Section C: Nature of Payments (Please select only one applicable box)**

(Under Section 35, 37, 37A and 37B)

Interest, commission, fee or other payment in connection with any loan or indebtedness

Royalties or other lump sum payments for the use of movable properties

Use of or the right to use scientific, technical, industrial or commercial knowledge or information

Rendering technical assistance and service in connection with the application or use of scientific, technical, industrial or commercial knowledge or information

Management fee

Rent or other payments for the use of equipment or other movable property

Non-resident director's remuneration

Others (Please Specify:) \_\_\_\_\_

**Section D: Payment Date**

You are required to make tax payment together with the submission of this form.

Payment Date to Non-Resident	<input type="text"/>	(DD/MM/YYYY)
Tax Payment Date	<input type="text"/>	(DD/MM/YYYY)



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Identifier Number:

Remember to quote this number in all correspondence or when calling the Revenue Division counter. The Identifier Number is your ROC/RFC Number.

**Section E: Withholding Tax Computation**

<b>E1</b>	Amount of payment made to Non-Resident	BND	<input type="text"/>
<b>E2</b>	Tax Rate	%	<input type="text"/>
<b>E3</b>	Amount of Withholding Tax [E1*E2]	BND	<input type="text"/>
<b>E4</b>	Penalty <sup>1</sup> (If any)	BND	<input type="text"/>
<b>E5</b>	Total Tax [E3+E4]	BND	<input type="text"/>

**Important Notes:**

Note 1: Penalty is payable if the amount of tax which is required to be deducted is not paid to the Collector under the requirements of Section 37(4).

**Section F: Declaration**

**Company:**

I declare that:

- all the information stated in this form and the accompanying information is true and correct; and
- I have the necessary receipts and/or other records – or expect to obtain the necessary written evidence within a reasonable time of furnishing this form – to support my claims.

**Agent:**

I declare that:

- this form has been prepared in accordance with information provided by the taxpayer;
- the taxpayer has given me a declaration stating that the information provided to me is true and correct; and
- the taxpayer has authorised me to furnish this form.

**Particulars of Person completing the form**

Name/Name of Agent	<input type="text"/>		
Designation/Agent Identifier Number	<input type="text"/>		
Contact No	<input type="text"/>		
Email Address	<input type="text"/>		
Signature	<input type="text"/>	Date	<input type="text"/>