

ZWS ISO 9001:2008 QUALITY MANAGEMENT SYSTEM

CGT 1

ZIMBABWE REVENUE AUTHORITY Return for Remittance of Capital Gains Tax

| Return for Remittance of Capital Gains Tax | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Name of Seller | | | | | | | | | | | | | | | |
| Date of Birth | | | | | | | | | | | | | | | |
| I. D. Number | | | | | | | | | | | | | | | |
| Business Partner | | | | | | | | | | | | | | | |
| Number | | | | | | | | | | | | | | | |
| Postal Address | | | | | | | | | | | | | | | |
| Tax Year | | | | | | | | | | | | | | | |
| E-mail address | | | | | | | | | | | | | | | |
| Cell number | | | | | | | | | | | | | | | |
| Name of Bank | | | | | | | | | | | | | | | |
| . Branch Name | | | | | | | | | | | | | | | |
| . Account Number | | | | | | | | | | | | | | | |

INFORMATION ON CAPITAL GAINS TAX – IMMOVABLE PROPERTY

| INFORMATION ON CAPITAL GAINS TAX – IMMOVABLE PROPERTY | |
|---|--------|
| Full address of property being sold | |
| Full description of property being sold | |
| Title Deed Number | |
| Date of purchase | |
| Reason for purchase | |
| Nature of improvements | |
| Date improvements made | |
| Date sold | |
| Reason for sale | |
| Capital gain rolled over from previous sale | Yes/No |
| Election to roll over proceeds | Yes/No |
| Is the sale made under Suspensive sale conditions | Yes/No |
| If disposed of other than by sale | |
| Selling Price(Gross Capital Amount) | |
| Current Year Gross Capital Allowance (where applicable) | |
| Recoupment (where applicable) | |
| Capital gain rolled over from previous sale | |
| Capital amount/ net selling price | |
| Cost of acquisition | |
| Addition / improvements | |
| Selling costs including legal costs | |
| Bad debts | |
| Are you Exempt from Capital Gains Tax? (State reason for exemption) | |
| Transfer between companies under the same control* | |

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| Transfer of DDD hattures are success | |
|---|--|
| Transfer of PPR between spouses | |
| Transfer of business property by an individual to company under his control | |
| Deceased estate | |
| Company wholly owned by the state | |
| Local authority | |
| Statutory corporation | |
| Zimbabwe Development Bank | |
| Licensed investor | |
| Industrial park developer | |
| Insurance company | |
| Quasi government institutions | |
| Clubs, institutes and associations organized and operated solely for social welfare | |
| Ecclesiastical ,charitable and Educational institutions of a public character | |
| Employees' savings schemes or funds approved by the commissioner | |
| Friendly, benefit or medical aid societies | |
| Pension funds | |
| Trade unions | |
| Trusts of a public character | |
| International organizations | |
| Reserve Bank of South Africa | |
| Organizations that provide finance for development in Zimbabwe | |
| Deposit protection funds | |
| PPR by a person who has attained the age of 55 years | |
| The first \$1800 received by an elderly person on the sale of marketable securities | |

CAPITAL GAINS TAX ON SALE OF UNLISTED MARKETABLE SECURITIES

| Name of seller | |
|-----------------------------|--|
| Date of birth/Incorporation | |
| Date of purchase | |
| Purchase price | |
| Date of sale | |
| Number of shares sold | |
| Selling price | |

CGT ATTACHMENTS

| CGT Attachments | For Office Use (Tick) |
|---|--------------------------|
| Copy of Title Deeds | |
| Purchase and sale agreement | |
| Purchase and sale agreement | |
| Copy of identification | |
| Proof of purchase price | |
| Copy of Death Certificate | |
| Letter of appointment of Executor/Executrix/Administrator | |

DECLARATION

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| Warning: It is an offence to provide false information | | | | | | | | |
|--|-------------|-----------|------|--|--|--|--|--|
| I hereby declare that the information given herein is correct and hereby apply for registration. | | | | | | | | |
| Full Name | Designation | Signature | Date | | | | | |
| | | | | | | | | |

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