



Focus Business Services (Malta) Limited

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FS7

Final Settlement System (FSS) Payer's Annual Reconciliation Statement

A Payer Information

| | | | | | | | | | |
|-----------------------|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | |
| Telephone Number | | | | | | | | | |
| Principal's Full Name | | | | | | | | | |
| Principal's Position | | | | | | | | | |
| Principal's Signature | | | | | | | | | |

For Year Ended 31 December

A1

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Payer P.E. No.

A2

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IT Reg. No.

A3

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ETC Reg. No.

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Have you paid or reimbursed the cost of Childcare Facility for the benefit of the Employees?

Yes No

If yes insert amount paid and number of Employees.

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 No. of Employees

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Date

A4

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B Number of FSS FS3s Issued

B1

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C Gross Emoluments

Gross Emoluments (FSS Main or FSS Other applies)

C1

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Gross Emoluments (FSS Part-time method applies)

C2

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Taxable Fringe Benefits (Total of all Categories less any Non-Taxable Car Allowances)

C3

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Total Gross Emoluments and Fringe Benefits

C4

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D Tax Deductions due as per FS3s attached

Tax Deductions (FSS Main or FSS Other applies)

D1

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Tax Deductions (FSS Part-time method applies)

D2

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Tax Arrears Deductions (as per amount on PCU2(A))

D3

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Total Tax Deductions

D4

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E Social Security Contributions due to IRD as per FS3s attached

E1

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F Payments Made to IRD During the Year

| Month | Receipt No. | Date | FSS Tax | | SSC | | Month | Receipt No. | Date | FSS Tax | | SSC | |
|-------|-------------|------|---------|---|-----|---|-------|-------------|------|---------|---|-----|---|
| | | | € | c | € | c | | | | € | c | € | c |
| Jan | | | | | | | Jul | | | | | | |
| Feb | | | | | | | Aug | | | | | | |
| Mar | | | | | | | Sep | | | | | | |
| Apr | | | | | | | Oct | | | | | | |
| May | | | | | | | Nov | | | | | | |
| Jun | | | | | | | Dec* | | | | | | |

If the Total paid (F1) is less than total due (F2) please enclose outstanding payment with FS5 form. In the case of overpayment please enclose a letter with this form explaining why the amounts differ.

| | | | |
|----|---------------------------------|---------|-----|
| F1 | TOTAL PAID JAN – DEC | | |
| F2 | TOTAL DUE AS PER ABOVE (D4, E1) | | |
| F3 | AMOUNT UNDERPAID/OVERPAID | | |
| | | FSS Tax | SSC |