



THE GENERAL CONSUMPTION TAX ACT
SPECIAL CONSUMPTION TAX RETURN

FORM 4C

Please Read Instructions Overleaf before Completing this Return

Section A: GENERAL INFORMATION	2. Taxpayer Registration Number (TRN)
1. Name of Business	3. Return Period (Year- Month -Day to Year Month-Day)
4. Address of Business	2 0 0 1 to 2 0
	5. Tick if applicable. <input type="checkbox"/> New Address <input type="checkbox"/> Revised Return

Section B: SUPPLIES (Goods & Services)	
Total Supplies for Period	6
Export Supplies	Zero Rated Supplies
7	8
=	
9	10
Taxable Supplies taxable at a positive rate (Subtract Line 9 from Line 6)	

Section C: OUTPUT TAX (If Additional Rows are Needed, Enter in Table Overleaf)							
Commodity	Commodity Code	Tax Code	Statistical Unit	Quantity	Values	Rate	SCT Due
Total column ▶							
Sub Total from Page 2 overleaf.							11
Total SCT (Add Line 11 with Total of column "SCT Due" above) ▶							12

Section D: INPUT TAX/TAX CREDIT	
Purchases	Expenses
SCT on Local Purchases & Expenses that Qualify for Credit	13
SCT Paid on Imports that Qualify for Credit	14
=	
Adjustments - Specify:	15
Total Input Tax (Add Lines 15, 16, 17 and 18)	16
	17
	18

Section E: SCT PAYABLE / (CREDITABLE)		OFFICIAL USE
SCT Payable/(Creditable) (Subtract Line 18 from Line 12)	19	
Balance Brought Forward: Payable/(Creditable)	20	
Total SCT Payable/(Creditable) (Add Lines 19 and 20)	21	
SCT Being Paid this Period	22	
If amount at Line 19 is negative, tick appropriate box at Line 23	23	<input type="checkbox"/> Refund <input type="checkbox"/> Credit

Preparer's Details -		
Preparer's Name (Individual/Firm)	Address	TRN:
		Contact Number:

Section F: DECLARATION: (To be signed by Taxpayer only)	
I declare that to the best of my knowledge and belief this is a true and correct statement of the information and particulars given on this form.	
Name of Sole Trader / Responsible Officer	Title
Signature	Date

