## INLAND REVENUE DEPARTMENT

В	BY AN EMPLOYER OF AN EMPLOYEE WHO IS ABOUT TO CEASE TO BE EMPLOYED  (Under section 52(5) of the Inland Revenue Ordinance, Cap.112)										5	6F		
	To be completed and returned <b>not later than 1 month before date of</b> If the employee is about to <b>depart from Hong Kong</b> , please complete <b>Forn</b>							Additional - reporting additional income in respect of the same employe  Replacement - correcting the form submitted on(DD/MM/YYYY)  ("\sqrt{"} one of the above boxes where applicable and fill in the date)						
All co	orrespondence should be sent to: P.O	. Box 28777 Con	corde Road Pos	st Office, Kowlo	on, Hong Ko	ng	("	✓ " one of the a	bove boxes w	here applic	able and f	ill in the d	late)	
1.	Employer's File No. (If not av	ailable, state	your Busin	ess Registra	tion No.)					H				
	Name of Employer (The busin	ess name is re	quired)											
	Address of Employer													
To th	e best of my knowledge, the en	nployee will N	IOT be leavin	ng Hong Kong	g after cess	ation of e	mplo	yment. The	following are	the parti	culars of	the empl	loyee: -	
2.	Name of Employee		-											
	Mr/Mrs/Ms/Miss #	Surname			] ]			1 1 1	1 1					
	# (Delete whichever is inapplicable)	Given Name												
		Full Name i	n Chinese											
3.	(a) H.K. Identity Card Number										( )			
	(b) Passport Number and place of issue (if Employee has no H.K. Identity Card)													
4.	Sex (M=Male, F=Female)													
	Marital Status (1=Single/Widowed/Divorced/Living Apart, 2=Married)													
	(a) If married, full name of spouse													
	(b) Spouse's H.K. Identity Card Number/Passport Number and place of issue (if known)													
7.	Residential Address													
8.	Postal Address after cessatio	n of employr	ment (if diff	erent from i	tem 7 abo	ove)								
	Capacity in which employed													
10.	Reason for cessation (e.g. re	signation, ret	tirement, di	smissal, dea	ith, etc.)									
11.	Period of employment from	1 April to the	e date of ces	ssation of e	nploymer	nt				to			لللل	
12.	Details of income from 1 Apr	il to the date	e of cessatio	n of emplo	ment : -		Day	/ Month	Year	Day	y Mont	n Y	/ear	
			Period (DD/MM/YYYY)			Amount (HK\$) (EXCLUDE CENTS)								
(a)	Salary/Wages					to		+					00	
(b)	Leave Pay						to		<del>                                     </del>				00	
(c)	Director's Fee						to						00	
(d)	Commission/Fees  Bonus						to to		+ + + +				000	
(e) (f)	Back Pay, Payment in Lieu of Notice, Terminal Awards or Gratuities						ιο		+				U U	
U7	(see Note 1 below)						to						00	
(g)	Certain Payments from Retirement Schemes (see Note 2 below)						to						0 0	
(h)	Salaries Tax paid by Employer						to		$\perp$				00	
(i)	Education Benefits  Gain realized under Share Option Scheme						to		+ + +	1	$\dashv$		0 0	
(j) (k)	Any other Rewards, Allowances or Perquisites						10		+ + +				970	
(1/)	Nature						to		1 1				00	
(1)	Payments that have not been declared above but will be made AFTER the employee has left							oyment					0×0	
	Nature							Total	+ 1 1					
								Total						
13.	Particulars of Place of Reside	nce provided	, ,	vided, 1=Prov ture	ided)						must be co			
	Address		(e.g. House,		Period F	Provided		Rent Paid to Landlord	Rent Paid to Landlord	to Er	mployee	to Em	t Paid iployer	
	Addiess		Apartment, N in Hote		From	То	b	y Employer (HK\$)	by Employe (HK\$)		mployer HK\$)		nployee IK\$)	
14	Whether the employee was who	olly or partly p	I aid either in I	Hong Kong or	elsewhere	by a non-	-Hong	Kong company	/ (0=No. 1=Yes	(This box	must be c	ompleted)	<u></u>	
14. Whether the employee was wholly or partly paid either in Hong Kong or elsewhere by a non-Hong Kong company (0=No, 1=Yes) (This box must be of the non-Hong Kong company														
			s											
			t (if known) (					em 12)						
		Signat	ure											
		Name												
		Design	nation											
	Space for Employer's official characteristics of the Space for Employer's official ch	p Date												
Notes :	<ol> <li>Severance payment/long service payment be included. Only report the excess among.</li> <li>Includes certain payments subsequent!</li> </ol>	ount made.												
	Form IR56B" for details.  3. Do not file Form IR56B in the following.	•							ISCI UCCIONS TOI					
IR56F (	12/2022) Please provide a copy of the completed Form to your employee									FOR OFFICIAL USE				

FOR OFFICIAL USE