

Fringe benefits tax (FBT) return 2019

1 April 2018 to 31 March 2019

WHEN COMPLETING THIS RETURN

For help with completing this return visit ato.gov.au/FBT2019

- Print clearly using a black pen only.
- Use BLOCK LETTERS and print one character in each box.
- Place X in all relevant boxes.
- Send your completed form and attachments to:

Australian Taxation Office GPO Box 9845

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| - 1 | Business details | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| В | 1 Tax file number (TFN) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | Ta | ax 1 | file | nu | ıml | er | (TI | FN) | | | | | Γ | | | | Γ | | | | | | | | | | | | | | | | | | |
| | See the Privacy note in the Declaration on page 4 of this return. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 3 Name of trustee or senior partner INDIVIDUAL | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Г | Previous name and/or postal address If the employer name and/or postal address has changed, print it exactly as shown on the last FBT return lodged. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Title | | Mr | | Mr | s | 7 | Miss | | M | s | | Othe | er 🗀 | | | | | | | | | | | | | | | 7 | | | | | | | | |
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| | Name of the person to contact Provide details below (if applicable) of the person we can contact, if needed, regarding the information in this return. | | | | | | | | | | | | | | |
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| 9 | Provide details below (if applicable) of the person we can contact, if needed, regarding the information in this return. Example: Mr Mrs Miss Ms Other Ms Other Ms | | | | | | | | | | | | | | |
| Title: | Provide details below (if applicable) of the person we can contact, if needed, regarding the information in this return. | | | | | | | | | | | | | | |
| Fami | y name | | | | | | | | | | | | | | |
| First | given name Other given name/s | | | | | | | | | | | | | | |
| Dayti | me contact phone number | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| Emai | address (please use BLOCK LETTERS) | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| 10 | Number of employees receiving fringe benefits during the period 1 April 2018 to 31 March 2019 |], | | | | | | | | | | | | | |
| 11 | Hours taken to prepare and complete this form Visit ato.gov.au/FBT2019 for more information. Do not include tax agent's time. Do you expect to lodge FBT return forms for future years? No We will cancel your FBT recipient and future instalments. | | | | | | | | | | | | | | |
| | The Market service of the control of | | | | | | | | | | | | | | |
| 12 | Do you expect to lodge FBT return forms for future years? No We will cancel your FBT registration and future instalments Electronic funds transfer (EFT) We need your financial institution details to pay any refund owing to you, even if you have provided them to us before. Write the BSB number, account number and account name below. Visit ato.gov.au/FBT2019 for more information. | | | | | | | | | | | | | | |
| 13 | Electronic funds transfer (EFT) We need your financial institution details to pay any refund owing to you, even if you have provided them to us before. Write the BSB number, account number and account name below. Visit ato.gov.au/FBT2019 for more information. | | | | | | | | | | | | | | |
| | Electronic funds transfer (EFT) We need your financial institution details to pay any refund owing to you, even if you have provided them to us before. Write the BSB number, account number and account name below. Visit ato.gov.au/FBT2019 for more information. | | | | | | | | | | | | | | |
| BSE | Electronic funds transfer (EFT) We need your financial institution details to pay any refund owing to you, even if you have provided them to us before. Write the BSB number, account number and account name below. Visit ato.gov.au/FBT2019 for more information. | | | | | | | | | | | | | | |
| Acc | ount name | | | | | | | | | | | | | | |
| Re | eturn calculation details | | | | | | | | | | | | | | |
| 4.4 | eturn calculation details Visit ato.gov.au/FBT2019 for more information. Calculated fringe benefits taxable amounts (whole dollars only) | | | | | | | | | | | | | | |
| 14 | | = \$ | | | | | | | | | | | | | |
| | Calculated fringe benefits taxable amounts (whole dollars only) | | | | | | | | | | | | | | |
| | C Aggregate non-exempt amount (hospitals, ambulances. | | | | | | | | | | | | | | |
| | public benevolent institutions and health promotion charities only) | ·\$,,c | | | | | | | | | | | | | |
| 15 | Fringe benefits taxable amount $(A + B)$ or C | \$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | | | | | | | | | | | | |
| 16 | Amount of tax payable (47% of item 15 amount) | \$ | | | | | | | | | | | | | |
| 17 | Aggregate non-rebatable amount | | | | | | | | | | | | | | |
| | Only complete this item if you are a rebatable employer. Visit ato.gov.au/FBT2019 for more information. | \$, | | | | | | | | | | | | | |
| 18 | Amount of rebate 47% of (item 16 amount less item 17 amount) | \$ | | | | | | | | | | | | | |
| | Only complete this item if you are a rebatable employer. Visit ato.gov.au/FBT2019 for more information. | | | | | | | | | | | | | | |
| 19 | Sub-total (item 16 amount less item 18 amount) | \$, | | | | | | | | | | | | | |
| 20 | Less instalment amounts reported on activity statements Visit ato.gov.au/FBT2019 for more information. | \$, | | | | | | | | | | | | | |
| <u></u> | Payment due | \$ | | | | | | | | | | | | | |
| | or | | | | | | | | | | | | | | |
| 22 | Credit due to you | \$, | | | | | | | | | | | | | |

Details of fringe benefits provided

| 20 Betaile of milige benefits pro | | | | WHOLE DO | LLARS ONLY | |
|---|---|--------|-------------------------|---------------------------|----------------------------|---|
| Type of benefits provided (1 April 2018 to 31 March 2019) | | Number | Gross taxable value (a) | Employee contribution (b) | Value of reductions (c) | Taxable value of benefits (a) – (b) – (c) |
| Cars using the statutory formula | A | | | | | |
| Cars using the operating cost method | В | | | | | |
| Loans granted | C | | | | | |
| Debt waiver | D | | | | | |
| Expense payments | E | | | | | |
| Housing – units of accommodation provided | F | | | | | |
| Employees receiving living-away-from-home allowance (show total paid including exempt components) | G | | | | | |
| Board | J | | | | | |
| Property | K | | | | | |
| Income tax exempt body – entertainment | L | | | | | |
| Other benefits (residual) | M | | | | | |
| Car parking | N | | | | | |
| Meal entertainment | P | | | | | |

Declarations

Penalties may be imposed for giving false or misleading information.

Privacy

The ATO is authorised by the *Taxation Administration Act 1953* to request the provision of tax file numbers (TFNs). We will use the TFN to identify the entity in our records. It is not an offence not to provide the TFN. However if you do not provide the TFN, the processing of this form may be delayed.

Taxation law authorises the ATO to collect information and to disclose it to other government agencies. For information about privacy, visit **ato.gov.au/privacy**

| 24 | Tax I decla decla | lare ti | hat | thi | s re | etui | n | h | as i | be | | | | | | | | | | | | | | | , | | | | - | | | , | , , | | | | | | | _ | , | | |
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| | | | | | Γ | T | | | \prod | | | | | | | brack | | | | | | | | | | \prod | | | | | | | | | | | bracket | | | | | | |
| Sig | nature | of t | ax | ag | en | t* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | nature of tax agent* | | | | | | | | | | | | | | | | Da | te Day |] / | N | 1onth | | / [| | Ye | ar | | | | | | | | | | | | | | | | | |
| | the tax npany | _ | | | | | | | |) () | or a | cor | npa | ıny, | this | s d | ecl | lara | tio | n m | านร | st b | e s | sigr | nec | d b | ру а | a p | ers | SOI | n a | uth | oris | sed | by | tha | t p | artr | iers | ship | o or | | |
| 25 | Emp I dec | _ | | | | | | | | | | | | | | | | | _ | | | reti | urr | 1 | | | | | | | | | | | | | | | | | | | |

Name of employer

Signature of employer*

Date

Day Month Year

Proprietor, partner, public officer, trustee or, for government departments and authorities, the delegated officer.

This return will not be regarded as having been lodged unless the appropriate declaration has been signed by the tax agent or the employer.