

Page 1

1 July 2017 to 30 June 2018

 Duint all automatical all all and an and all all all all all all all all all al		ta all'actività della facto		
Print clearly using a black pen only.		in all appropriate bo		
Use BLOCK LETTERS and print one character in each box.		se correction fluid or e your details careful		
		sing your tax return.		254
Individual information			. <u>-</u> .	110618
Your tax file number (TFN)		he Privacy note in the aration on page 10 of the second se		
Are you an Australian resident? Yes No				
Your name (Print your full name)				
Title: Mr Miss Ms Other Surname or family name				
	ven names			
Has any part of your name changed since completing your last tax return?	on. Yes		dividual information 8 of the instructions.	on your
Your postal address Print the address where you want your r	nail sent.			
Suburb/town/locality			State/territory	Postcode
Country if not Australia		s this address cha mpleting your last		Yes
Is your home address different from				
your postal address?	d on. Yes	Print your hon	ne address below.	
			State/territory	
			State/territory	Postcode
			State/territory	Postcode
Suburb/town/locality Country if not Australia Your contact details			State/territory	Postcode
Suburb/town/locality Country if not Australia			State/territory	Postcode
Suburb/town/locality Country if not Australia Your contact details Your mobile phone number (if different from your			State/territory	Postcode
Suburb/town/locality Country if not Australia Your contact details Your daytime phone				Postcode
Your contact details Your mobile phone number (if different from your Your email address				
Your contact details Your mobile phone number (if different from your Your email address Your contact details may be used by the ATO: To advise you of tax return lodgment options				Postcode
Your contact details Your mobile phone number Your email address Your contact details may be used by the ATO:				

Г		
Will you need to lodge an Australian Yes Yes	Don't know No	FINAL TAX RETURN
Your date of birth If you were under 18 years old on 30 June 2018 you must complete item A1 on page 7.		your date of birth to avoid delays in cessing of your tax return.
Electronic funds transfer (EFT) We need your financial institution details to pay any refund owin Write the BSB number, account number and account name belo		ded them to us before.
BSB number (must be six digits) Account name (for example, JQ Citizen. Do not show the account n	count number	gs, mortgage offset)
Income		
1 Salary or wages Your main salary and wage occupation		
Payer's Australian business number	Tax withheld – do not show cents	
		FS,
2 Allowences corriges tips director's feed ato		
2 Allowances, earnings, tips, director's fees etc	\$, _·∞	K <u>\$</u> ,·%
3 Employer lump sum payments	\$,·× \$,·×	Amount A in lump sum payments box R S a b b b c c c c c c c c c c
4 Employment termination payments (ETP)		Taxable component CODE
Date of payment / / / / / / / / / / / / / / / / / / /	\$,∞	
5 Australian Government allowances and payments like Newstart, Youth Allowance and Austudy payment	\$,∞	▲ <u>\$</u> ,∞
6 Australian Government pensions and allowances You must complete item T1 in Tax offsets.	\$,∞	B S,∞
7 Australian annuities and superannuation income streams	\$,∞	
Taxable	component Taxed element	J <u>S , · </u>
	Untaxed element	
Assessable amount from capped	defined benefit income stream	
Lump sum in arrears – taxable	component Taxed element	Y \$,·%
	Untaxed element	Z \$,∞

Sensitive (when completed)

Г		Your tax file number (TFN)
-	Attach here all documents that the instructions tell you to attach. Do not send in your tax return until you have attached all requested attachments.	
		254
		1071
-		
	Tax withheld – do not show ce	ents Income – do not show cents
8	Australian superapplication lump sum payments	NA INC.
	Date of / / / / / Taxable components. Taxable	
	Payer's Untaxed elem	nent P \$,%
9	Attributed personal services income	× 0 <u>\$</u> ,·%
	TOTAL TAX WITHHELD Add up the S boxes. S	Do not include
		total income here
10) Gross interest	Income – do not show cents
	If you are a foreign-resident make sure you have printed Gross interest	\$ S
	your country of residence on page 1.	
	Tax file number amounts withheld from gross interest	
1	1 Dividends Unfranked amount S	s III III III.×x
	If you are a foreign-resident make sure you have printed	
	Franked amount	S,,,
	Tax file number amounts V \$, Franking credit U	\$,,∞
1:	2 Employee share schemes	
	Discount from taxed upfront schemes – eligible for reduction	
	Discount from taxed upfront schemes E \$	
	Discount on ESS Interests acquired pre 1 July 2009 and 'cessation time' G \$	
	occurred during financial year	
	Total assessable discount amount	\$,,,·≥
TF	N amounts withheld from discounts C \$	
	Foreign source discounts A \$	
Г		LOSS
	If you completed the <i>Tax return for individuals (supplementary section) 2018</i> , write here the amount from TOTAL SUPPLEMENT INCOME	\$,,,×
	OR LOSS on page 15.	
	FOTAL INCOME Add up the income amounts and deduct any loss amount in the S boxes	\$ • • • • • • • • • • • • • • • • • • •
(OR LOSS on pages 2 and 3.	♥└レレ,└ノ└レ,└ノ└ノ べĹ

TAX RETURN FOR INDIVIDUALS 2018

Page 3

•			
Deductions	5		
	D1	Work-related car expenses	
You must read	D2	Work-related travel expenses	B\$
the deductions section in the instructions if you are claiming	D3	Work-related uniform, occupation specific or protective clothing, laundry and dry cleaning expenses	C \$,
deductions for expenses that relate to your work as an	D4	Work-related self-education expenses	
employee at items D1–D6 .	D 5	Other work-related expenses	E\$,·∞
	D6	Low value pool deduction	K \$
D7 Interest dec	luctio	ons	I \$
D8 Dividend de	duct	ions	H\$
D9 Gifts or don	atior	IS	J \$,%
D10 Cost of mar	nagir	ng tax affairs Interest charged by the ATO	N \$,×
		Litigation costs	L \$,·%
		Other expenses incurred in managing your tax affairs	M\$,∞
		Tax return for individuals (supplementary section) amount from TOTAL SUPPLEMENT DEDUCTIONS on page 15.	,,∞
TOTAL DEDUC	TION	IS Add amounts at items D1 to D) \$	
SUBTOTAL		TOTAL INCOME OR LOSS less TOTAL DEDUCTIONS \$	

Losses

L1 Tax losses of earlier incon	ne years
Primary production losses carried of forward from earlier income years	Primary production losses F S Image: state sta
Non-primary production losses carried forward from earlier income years	\$, ·≫ ^{Non-primary production losses} Z \$, ·≫
TAXABLE INCOME OR LOSS	If you were not required to complete L1, write the amount from SUBTOTAL above here.
OR LOSS	If you completed L1, add up the amounts you wrote at F and Z and take the total away from the amount you wrote at SUBTOTAL. Write the answer at \$ TAXABLE INCOME OR LOSS.
Μ	ake sure that you complete item M2 on page 6.

Your tax file number (TFN)						



Tax offsets

Г

T1	Seniors and pensioners (includ		
	If you had a spouse during 2017–18 complete Spouse details – married on pages 8–9.		le letter in the VEIERAN
T2	Australian superannuation inco	ome stream	S \$,∞
T		individuals (supplementary section TAL SUPPLEMENT TAX OFFSETS on page	
т	OTAL TAX OFFSETS	Add up all the tax offset amounts at items	T2 and T. U\$,%



Medicare levy related items

M1 Medicare levy reduction or exemption

NOTE

Only certain taxpayers are entitled to a Medicare levy reduction or exemption. Read **M1 Medicare levy reduction or exemption** in the instructions to work out if you are eligible to claim.

Reduction based on family income

Exemption categories

Number of dependent children and students

Full 2.0% levy exemption – number of days

Υ				
			(CLAIM
V				
	\equiv			TYPE
W				

Half 2.0% levy exemption – number of days

If you have completed item **M1** and had a spouse during 2017–18 you must also complete **Spouse details – married or de facto** on pages 8–9.

M2 Medicare levy surcharge (MLS)

THIS ITEM IS COMPULSORY FOR ALL TAXPAYERS.

If you do not complete this item you may be charged the full Medicare levy surcharge. To help you determine if you have to pay the surcharge read M2 Medicare levy surcharge in the instructions. For the whole period 1 July 2017 to 30 June 2018 were you and all of your dependants (including your spouse) – if you had any – covered by private patient hospital cover?
E Yes You must complete Private health insurance policy details on the next page. You have now finished this item. No Read on.
For the whole of 2017–18 were you:
a single person – without a dependent child or children – and your income for surcharge purposes (including your total reportable fringe benefits amounts) was \$90,000 or less or
a member of a family – which may consist of you and your spouse (married or de facto) with or without a dependent child or children; or a sole parent with a dependent child or children – and the combined income for surcharge purposes (including the total reportable fringe benefits amounts) of you and your spouse (if you had one) was \$180,000 or less (plus \$1,500 for each dependent child after the first)?
No You may have to pay the surcharge. Read M2 Medicare Yes You do not have to pay the surcharge. Read M2 Medicare Yes You must write 365 at A.
 You must write the following at A: 0 when you have to pay the surcharge for the whole period 1 July 2017 to 30 June 2018 365 when you do not have to pay the surcharge for the whole period 1 July 2017 to 30 June 2018 the number of days you do not have to pay the surcharge for part of the period 1 July 2017 to 30 June 2018.

If you had a spouse during 2017–18 complete **Spouse details – married or de facto** on pages 8–9. If you were covered by private patient hospital cover at any time during 2017–18 you **must** complete **Private health insurance policy details** on the next page. Read the Private health insurance policy details section in the instructions.

Private health insurance policy details

E I	invate meanin insurance policy details	
	You must read Private health insurance policy details in the instruct Fill all the labels below unless directed in the instructions.	ions before completing this item.
	Health insurer ID B Membership C	
		ur Australian Government K \$
	Benefit code	code claim code. Read the instructions.
		ur Australian Government K \$,
	Benefit code L Ta	< claim code. Read the instructions.
	Health insurer ID B Membership C	
		ur Australian Government K \$, , , , , , , , , , , , , , , , , ,
	Benefit code L Ta	code. Read the instructions.
	Health Insurer ID B Membership C C	
		ur Australian Government K \$,
	Benefit code L Tax	code claim code. Read the instructions.
Ac	djustments	
A1	Under 18 If you were under 18 years old on 30 June 2018 you must complete this item or you may be taxed at a higher rate. Read A1 Under 18 in the instructions for more information.	J \$,
A2	Part-year tax-free threshold Months eligible for	threshold N
	Date / / / / / / / / / / / / / / / / / / /	
A 3	Government super contributions	
	Read A3 Government super contributions in the instructions before	
	Income from investment, partnership and other source	s F \$, , , , , , _ _, _ , _
	Other income from employment and busines	s G\$,,,,∞
	Other deductions from business incom	e H\$,,∞
A 4	Working holiday maker net income	D \$,,%



Income tests

You must complete this section. If you had a spouse during 2017–18 you must also complete **Spouse details – married or de facto** on pages 8–9.

	If the amount is zero write 0.
IT1 Total reportable fringe benefits amounts	
Employers exempt from FBT under section 57A of the FBTAA 1986	N\$,∞
Employers not exempt from FBT under section 57A of the FBTAA 1986	₩\$ <u></u> ,
IT2 Reportable employer superannuation contributions	т \$,∞
IT3 Tax-free government pensions	U \$,·%
IT4 Target foreign income	V \$∞
IT5 Net financial investment loss	X \$
IT6 Net rental property loss	Y \$
IT7 Child support you paid	z \$,∞
IT8 Number of dependent children	D

Spouse details - married or de facto

If you had a spouse during 2017–18 you must complete **Spouse details – married or de facto**. We need the information included in this section to assess your tax accurately.

If you did not have a spouse, go to page 10.

Your spouse's name

If you had more than one spouse during 2017–18 print the name of your spouse on **30 June 2018** or your last spouse. Surname or family name

Your spouse's date of birth K							
Your spouse's gender Male	Female Indeterminate						
Period you had a spouse – married o	r de facto						
Did you have a spouse for the full year – 1 July 2017 to 30 June 2018?	L Yes No						
If you did not have a spouse for the full year, write the dates you had a spouse between 1 July 2017 and 30 June 2018.	From Vear Day Month Year M Image: A state of the state						
Did your spouse die during the year?	Yes No						

Spouse details - married or de facto - continued

The information on this page relates to your spouse's income. You must complete all labels.

Your spouse's 2017–18 taxable income	0	\$,,∞
Your spouse's share of trust income on which the trustee is assessed under section 98, and which has not been included in your spouse's taxable income	т	\$,∞
Distributions to your spouse on which family trust distribution tax has been paid and which your spouse would have had to show as assessable income if the tax had not been paid	U	\$,∞
Your spouse's total reportable fringe benefits amounts		
Employers exempt from FBT under section 57A of the FBTAA 1986	R	\$,∞
Employers not exempt from FBT under section 57A of the FBTAA 1986	S	\$,∞
Amount of Australian Government pensions and allowances (see Q6 Australian Government pensions and allowances in the instructions) that your spouse received in 2017–18 (exclude exempt pension income)	Ρ	\$,∞
Amount of exempt pension income (see Spouse details – married or de facto in the instructions) that your spouse received in 2017–18. Do not include any amount paid under the <i>Military Rehabilitation and Compensation Act 2004</i>	Q	\$,∞
Amount of your spouse's reportable superannuation contributions (which is the total of reportable employer superannuation contributions and deductible personal superannuation contributions)	A	\$,∞
Other specified exempt payments (see Spouse details – married or de facto in the instructions) that your spouse received	В	\$,∞
Your spouse's target foreign income	С	\$,∞
Your spouse's total net investment loss (total of net financial investment loss and net rental property loss)	D	\$,∞
Child support your spouse paid	E	\$,∞
Your spouse's taxed element of a superannuation lump sum for which the tax rate is zero (see M2 Medicare levy surcharge in the instructions)	F	\$,∞

If the amount is zero write 0.

Page 9

Family Assistance consent – Complete this section only if you consent to use part or all of your 2018 tax refund to repay your spouse's Family Assistance debt.

Complete the details below only if:

- you were the spouse of a family tax benefit (FTB) claimant, or the spouse of a child care benefit claimant on 30 June 2018 and
- your spouse has given you authority to quote their customer reference number (CRN) on your tax return if your spouse does not know their CRN, they can contact the Department of Human Services and
- your spouse has a Family Assistance debt or expects to have a Family Assistance debt for 2018 and
- you expect to receive a refund for 2018 and
- you consent to use part or all of your refund to repay your spouse's Family Assistance debt.

Do you consent to use part or all of your 2018 tax refund to repay your spouse's Family Assistance debt? You do not need to complete this section. Go to page 10. Yes Your spou	use's CRN Z
I consent to the ATO using part or all of my 2018 tax refund to repay any Family Ass whose details I have provided above. I have obtained my spouse's permission to qu	
Your signature for Department of Human Services consent purposes only	7
	Date Day Month Year

Taxpayer's declaration All taxpayers must sign and date the declaration below.

Read and answer the questions below before you sign the **Taxpayer's declaration**.

1 Are you required to complete any of the items on the *Tax return for individuals* (supplementary section) 2018? To find out, read Will you need *Individual tax return instructions supplement 2018*? in the instructions.

	Read on.	'es		Attach pages 13–16 to this page and read	on.
--	----------	-----	--	--	-----

2 Have the instructions asked you to attach further information relating to specific questions?

No Read on. Yes Attach the information to page 3 of your tax return and read on.

Make sure you have also attached all other documents that the instructions tell you to.

Privacy

No

The ATO is authorised by the *Taxation Administration Act 1953* to request your tax file number (TFN). We will use your TFN to identify you in our records. It is not an offence not to provide your TFN. However if you do not provide your TFN, your assessment may be delayed.

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

I declare that:

- all the information I have given on this tax return, including any attachments, is true and correct
- I have shown all my income including net capital gains for tax purposes for 2017–18
- I have completed and attached the supplementary section, schedules and other attachments as appropriate that the instructions told me to provide
- I have completed item M2 Medicare levy surcharge
- I have the necessary receipts and/or other records or expect to obtain the necessary written evidence within a reasonable time of lodging this tax return to support my claims for deductions and tax offsets.

IMPORTANT

The tax law imposes heavy penalties for giving false or misleading information.

FOR YOUR TAX RETURN TO BE VALID YOU MUST SIGN BELOW.

Date		
Day	Month	Year
	/ /	

The ATO will issue your assessment based on your tax return. However, the ATO has some time to review your tax return, and issue an amended assessment if a review shows inaccuracies that change the assessment. The standard review period is two years, but for some taxpayers it is four years. For more information go to **ato.gov.au/notices**

WHERE TO SEND YOUR TAX RETURN

Send your completed tax return to: **Australian Taxation Office GPO Box 9845 IN YOUR CAPITAL CITY** Do not replace the words IN YOUR CAPITAL CITY with the name of your capital city and its postcode.

For more information, read the Important information section in the instructions.



Г





Г