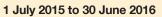


Individual tax return



Please print neatly in BLOCK LETTERS with a black or blue ballpoint pen only.

2016

Your name Title - for example, Mr, Mrs, Ms, Miss Surname or family name Surname or family name Given names Given names Has any part of your name changed since completing your last tax returm? Print Y for yes or N for no. To find out how to update your name on our records, go to ato.gov.au/updated or phone 13 28 61. Your postal address changed since completing your last tax returm? Print Y for yes or N for no. To find out how to update your name on our records, go to ato.gov.au/updated Your postal address thas your postal address fif the same as your current postal address, print AS ABOVE. Print Y for yes or N for no. State Postcode Your home address fif the same as your current postal address, print AS ABOVE. State Postcode Subub or town State Postcode Country - if not Australia State Postcode Your mobile phone number [State	
Has any part of your name changed since completing your last tax return? To find out how to update your name on our records, go to ato.gov.au/updated or phone 13 28 61. Your postal address Print Y for yes changed since completing or N for no. Your postal address Print Y for yes or N for no. update your postal address Print Y for yes or N for no. your last tax return? Print Y for yes or N for no. Suburb or town State Your home address Country - if not Australia Your home address, print AS ABOVE. Suburb or town Suburb or town State Suburb or town State country - if not Australia State Suburb or town State Country - if not Australia State	
name changed since or N for no. or phone 13 28 61. Your postal address Has your postal address changed since completing or N for no. Suburb or town State Country - if not Australia Your home address If the same as your current postal address, print AS ABOVE. Suburb or town State Country - if not Australia	
Has your postal address changed since completing your last tax return? State Postcode Country - if not Australia	details
changed since completing your last tax return? or N for no. Suburb or town State Postcode Country - if not Australia Country - if not Australia Your home address If the same as your current postal address, print AS Suburb or town Suburb or town State Suburb or town State Gountry - if not Australia State Suburb or town State Country - if not Australia Country - if not Australia	
changed since completingor N for no. Suburb or town Suburb or town Country - if not Australia Your home address If the same as your current postal address, print AS ABOVE. Suburb or town State Country - if not Australia	
Your home address If the same as your current postal address, print AS ABOVE. Suburb or town State Country - if not Australia	
If the same as your current postal address, print AS ABOVE. Suburb or town State , , Postcode Country - if not Australia	
Your mobile phone number	
Your daytime phone number Area code Phone number (if different from your mobile phone number above) Area code Phone number	
Your email address	
Your contact details may be used by the ATO: • to advise you of tax return lodgment options • to correspond with you with regards to your taxation and superannuation affairs • to issue notices to you, or • to conduct research and marketing.	
Your date of birth If you were under 18 years of age on 30 June 2016 you must complete item A1 on page 5 of this tax return.	
Electronic funds transfer (EFT) BSB number (must be six digits) Account number We need your financial institution details to pay any refund owing to you, even if you have provided them to us before. Account name (for example, JQ Citizen. Do not show the account type, such as savings, mortgage offset) Write the BSB number, account number and account name. Image: Count name (for example, JQ Citizen. Do not show the account type, such as	

Income

1 Salary or wages

	Your main salary and wage occupation	_	-
		Occupation code	
	Payer's Australian business number	Tax withheld (do not show cents)	Income (do not show cents)
		-00	C .00
		-00	D .90
		-00	E .90
		-00	F .90
		-00	G .00
2	Allowances, earnings, tips, director's fees etc	-00	K
3	Employer lump sum payments		Amount A in lump
-		.00	sum payments box
			5% of amount B in lump sum payments box
		·00	Н .00
4	Employment termination payments (ETP)		Taxable component CODE
	Date of payment	-00	
	Payer's ABN		//////
5	Australian Government allowances and payments like		
	newstart, youth allowance and austudy payment	-00	A •90
6	Australian Government pensions and allowances You must complete item T1 in Tax offsets on page 4.	-00	B •\$Q
7	Australian annuities and superannuation income streams	-00	
	Taxable component	nt Taxed element	J ·90
		Untaxed element	N .00
	Lump sum in arrears – taxable component	nt Taxed element	9Q. Y
		Untaxed element	Z
8	Australian superannuation lump sum payments	-00	TYPE
	Day Month Year	•00	
	Date of payment Taxable comp	oonent Taxed element	Q .00
	Payer's ABN	Untaxed element	P .00
9	Attributed personal services income	·00	00.00
	Total tax withheld Add up the boxes.	-00	

\checkmark	Attach all requested attachments here.							
10	Gross interest Gross interest	L .00						
11	Dividends Unfranked amount	S .00						
	Franked amount	DQ.						
	Tax file number amounts withheld from dividends	0Q.						
12	Employee share schemes Discount from taxed upfront schemes – eligible for reduction D							
	Discount from taxed upfront schemes – not eligible for reduction E							
	Discount from deferral schemes F							
	Discount on ESS Interests acquired pre 1 July 2009 and 'cessation time' occurred during financial year G							
	Total Assessable discount amount	B .00						
	TFN amounts withheld from discounts C							
	Foreign source discounts A							
0	Only used by taxpayers completing the supplementary section	LOSS						
	Transfer the amount from TOTAL SUPPLEMENT INCOME OR LOSS on page 10 and write it h							
· ·	TOTAL INCOME OR LOSS Add up the income amounts and deduct any loss amount in the V box	kes						
Dec	ductions	CLAIM						
D1	Work related car expenses	A						
D2	Work related travel expenses	B ·90						
D3	Work related uniform, occupation specific or protective clothing, laundry and dry cleaning expenses							
D4	Work related self-education expenses							
D5	Other work related expenses	E .00						
D6	D6 Low value pool deduction K							
D7	Interest deductions	00.						
D8	Dividend deductions	H .00						
D9	Gifts or donations	J ·\$Q						
D10	Cost of managing tax affairs	M .00						
D	Only used by taxpayers completing the supplementary section							
	Transfer the amount from TOTAL SUPPLEMENT DEDUCTIONS on page 11 and write it h	ere.						
	TOTAL DEDUCTIONS Items D1 to D - add up the box	kes. • 90						
	SUBTOTAL TOTAL INCOME OR LOSS less TOTAL DEDUCTION							
Los	sses							
L1	Tax losses of earlier income years Primary production losses carried forward from earlier income years Q • M Primary production losses carried forward from earlier income years	F .00						
	Non-primary production losses carried	Z .00						
		LOSS						
	TAXABLE INCOME OR LOSS Subtract amounts at F and Z item L1 from amount at SUBTOTAL.	\$						
INDIV	IDUAL TAX RETURN 2016 Sensitive (when completed)	Page 3						

Page 3

Tax offsets

T1	Seniors and pensioners (includes self-funded in If you had a spouse during 2015–16 you must also complete	
T2	Australian superannuation income stream	S
Ū	Only used by taxpayers completing the support of the support of the amount from TOTAL SUPP	plementary section PLEMENT TAX OFFSETS on page 11 and write it here.
	TOTAL TAX OFFSETS	Items T2 and T – add up the boxes. U \cdot
Me M1	dicare levy related items Medicare levy reduction or exemption If you complete this item and you had a spouse during 2015–16 you must also complete Spouse details – married or de facto on page 7.	Reduction based on family income Number of dependent children and students Exemption categories Full 2.0% levy exemption – number of days Half 2.0% levy exemption – number of days
M2	Medicare levy surcharge (MLS) THIS ITEM IS COMPULSORY. If you do not complete this item you may be For the whole period 1 July 2015 to 30 June 2016, (including your spouse) – if you had any – covered by	e charged the full Medicare levy surcharge. were you and all your dependants
		d 1 July 2015 to d 1 July 2015 to Number of days NOT liable for surcharge

Private health insurance policy details

You must read **Private health insurance policy details** in the instructions before completing this item. Fill all the labels below unless directed in the instructions.

Health B Membership C number C Your premiums eligible for Australian Government rebate Benefit code	Your Australian Government rebate received Tax claim code. Read the instructions.
Health insurer ID B Membership Your premiums eligible for Australian Government rebate Benefit code	Your Australian Government rebate received Tax claim code. Read the instructions.
Health insurer ID B Membership vour premiums eligible for Australian Government rebate Benefit code	Your Australian Government rebate received Tax claim code. Read the instructions.
Health insurer ID B Membership Vour premiums eligible for Australian Government rebate Benefit code	Your Australian Government rebate received Tax claim code. Read the instructions.

Adjustments

A1 Under 18 If you were under 18 years of age on 30 June 2016 you must complete this item or you may be J -04 taxed at a higher rate. Read the information on A1 in the instructions for more information. A2 Part-year tax-free threshold Read the information on A2 in the Months eligible for threshold Day Month Year instructions before completing Ν Date this item. **Government super contributions A**3 Read the information on A3 in the instructions before completing this item. CODE .00 F Income from investment, partnership and other sources .00 G Other income from employment and business .00 Η Other deductions from business income

Income tests

You must complete this section.

If you had a spouse during 2015–16 you must also complete **Spouse details – married or de facto** on page 7.

	If the amount is zero, write 0 .
IT1 Total reportable fringe benefits amount	DQ.
IT2 Reportable employer superannuation contributions	DQ.
IT3 Tax-free government pensions	0Q.
IT4 Target foreign income	DQ.
IT5 Net financial investment loss	0Q. X
IT6 Net rental property loss	DQ.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 2015–16, you must complete **Spouse details – married or de facto**. We need the information included in this section to assess your tax accurately.

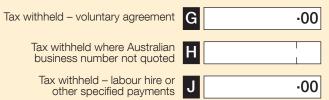
If you did not have a spouse, go to page 8.						
Your spouse's name If you had more than one spouse during 2015–16 print the name of your spouse on 30 June 2016 or your last spouse.						
Surname or family name						
First given name Other given names						
Your spouse's date of birth						
Your spouse's gender Male Female Indeterminate						
Period you had a spouse – married or de facto						
Did you have a spouse for the full year – 1 July 2015 to 30 June 2016? Ves						
If you did not have a spouse for the full year, write the dates you had a spouse between 1 July 2015 and 30 June 2016.						
N Day Month Year						
Did your spouse die during the year? Yes No						
This information relates to your spouse's income. You must complete all labels						
You must complete all labels. Your spouse's 2015–16 taxable income		·00				
Your spouse's share of trust income on which the trustee is assessed under		.00				
section 98, and which has not been included in your spouse's taxable income 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		.00				
Your spouse's total reportable fringe benefits amounts	S	·00				
Amount of Australian Government pensions and allowances (see Q6 Australian Government pensions and allowances in the instructions) that your spouse received in 2015–16 (exclude exempt pension income)	Р	-0Q-				
Amount of exempt pension income (see Spouse details – married or de facto in the instructions) that your spouse received in 2015–16. Do not include any amount paid under the <i>Military Rehabilitation and Compensation Act 2004</i>	Q	.00				
Amount of your spouse's reportable superannuation contributions (which is the total of reportable employer superannuation contributions and deductible personal superannuation contributions)	A	.90				
Other specified exempt payments (see Spouse details – married or de facto in the instructions) that your spouse received	В	.00				
Your spouse's target foreign income	С	.00				
Your spouse's total net investment loss (total of net financial investment loss and net rental property loss)	D	.00				
Child support your spouse paid	E	-00				

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)

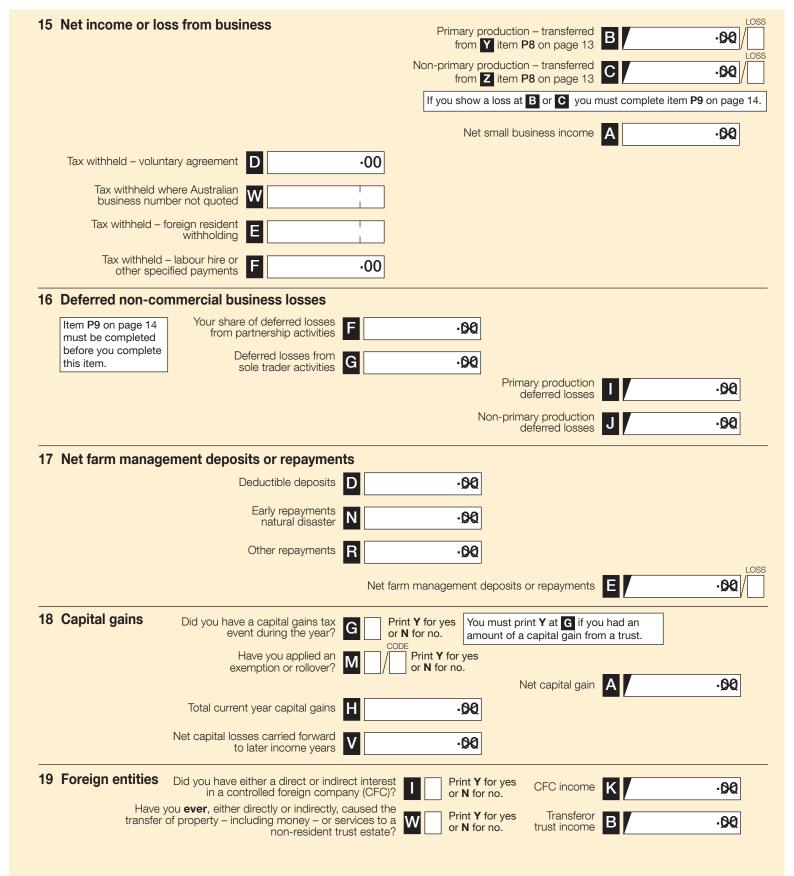
.00

Supplementary section Income

Partnerships and trusts		
Primary production Distribution from partnerships	N	• DO / Note: If you have a net loss from a
		partnership business activity, completion in the Business and P9 in
Share of net income from trusts	L	professional items section of this t return in addition to item 13.
Landcare operations and deduction for decline in value of water facility, fencing asset and fodder storage asset		• State Type
Other deductions relating to amounts shown at $[\mathbf{N}]$ and $[\mathbf{L}]$	Х	
		Net primary production amount
Non-primary production Distribution from partnerships less foreign income	0	•DO / Show amounts of:
Share of net income from trusts less capital gains, foreign income and franked distributions	U	Capital gains from trusts at item 18 of page 9 and Foreign income at item 10 or 20 on page 9-10.
Franked distributions from trusts	С	
Landcare operations expenses	J	.00
Other deductions relating to amounts shown at O , U and C	Y	-000
		Net non-primary production amount
Partnership share of net small business income less deductions attributable to that share	D	.00
Trust share of net small business income less deductions attributable to that share	Е	.00
Share of credits from income and tax offsets		
Share of credit for tax withheld where Australian business number not quoted	Ρ	
Share of franking credit from franked dividends	Q	
Share of credit for tax file number amounts withheld from interest, dividends and unit trust distributions	R	
Credit for TFN amounts withheld from payments from closely held trusts	Μ	
Share of credit for tax paid by trustee	S	
Share of credit for amounts withheld from foreign resident withholding	Α	
Share of National rental affordability scheme tax offset	В	



Net PSI – transferred from A .000 /



20	Foreign source income and foreign assets or	or property
	Assessable foreign source income	
		Other net foreign employment income T
		Net foreign pension or annuity income WITHOUT an undeducted purchase price
		Net foreign pension or annuity income WITH an undeducted purchase price D
		Net foreign rent R
		Other net foreign source income
	Also include at F Australian franking credits from a New Zealand franking company that you have received indirectly through a partnership or trust.	Australian franking credits from a New Zealand franking company
	Net foreign employment income – payment summary	
	Exempt foreign employment income	
	Foreign income tax offset	
	During the year did you own, or have an interest in, assets located outside Australia which had a total value of AUD\$50,000 or more?	P Print r for yes
21	Rent Gross rent	P .00
	Interest deductions	Q
	Capital works deductions	
	Other rental deductions	$\mathbf{U} \mathbf{O} \mathbf{O} \mathbf{P} \mathbf{less} (\mathbf{Q} + \mathbf{F} + \mathbf{U}) \mathbf{O} $
22	Bonuses from life insurance companies and	I friendly societies W .00
23	Forestry managed investment scheme incom	me A .00
24	Other income	
27	Type of Category 1	DQ. Y
	income Category 2	₿Q. V
	Tax withheld – lump sum	
	payments in arrears	• E •00
	Taxable professional income	
	TOTAL SUPPLEMENT Items 13 to 2	24 – add up the boxes for income amounts and deduct
	INCOME OR LOSS	any loss amounts in the boxes boxes

Deductions

D11 Deductible amount of undeducted purchase price of a foreign pension or annuity

Y

.00

D12	Personal superannuation	n contributions				
	Full name of fund	Ассо	unt number			
				н	-00	
	Fund Australian business num	Der				
	Fund tax file number					
D13	Deduction for project p	bol		D	·90	
D14	Forestry managed inve	stment scheme deduction		F	-00	
D15	Other deductions – not c Description of claim	aimable at items D1 to D14	Election expenses	8	·00	
			Other deductions	J	-00	
	TOTAL SUPPLEMENT DEDUCTIONS	ems D11 to D15 – add up the boxes and transfe	r this amount to D on page	e 3.	·00	
Tay	offsets					
T3		ions on behalf of your spouse Contributic				
10	•		aid •90	Α	-90	
T 4	Zone or overseas force	8		R	·00	
T5	Total net medical exper attendant care or aged		0Q.			
T6	Invalid and invalid ca	rer		В	-00	
T7	Landcare and water fac	ility Landcare brought forwar	and water facility tax offset d from earlier income years	Τ	·00	
Т8	Other non-refundable tax offsets	If you are entitled to a low-income tax offset, do no anywhere on your tax return. The ATO will calculate		C		
Т9	Other refundable tax of	isets		Р		
	TOTAL SUPPLEMENT TAX OFFSETS	ltems T3 , T4 , T6 , T7 , T 6	8 and T9 – add up the \int bo>	kes.	-00	
	Transfer this amount to p on page 4.					
Adj	ustment					
A 4		r trust distribution tax has been paid		X	-00	
	Read the information on A4 in the	supplement instructions before completing this item.				
Credit for interest on tax paid						
C1	Credit for interest on ea					

Business and professional items section

P1	Personal services income (PSI) Print X in the appropriate box.					
	Did you receive any personal services income?					
	YES Read on. NO Go to item P2.					
	Part A					
	Did you satisfy the results test?					
	P NO Read on. YES Go to item P2.					
	Have you received a personal services business determination(s) that was in force for the whole of the period you earned PSI?					
	C NO Read on. YES Go to item P2.					
	Did you receive 80% or more of your PSI from one source?					
	Q NO Read on. YES Go to part B.					
	If you received less than 80% of your PSI from each source for the whole of the period you earned PSI and you satisfied any of the following personal services business tests, indicate which business test(s) you satisfied. Print X in the appropriate box(es). Refer to the publication <i>Business and professional items 2016</i> before you complete this item.					
	clients test D1 test E1 premises test F1 to item P2 below; otherwise go to part B.					
	Part B PSI – voluntary agreement M • • • • • • • • • • • • • • • • • •					
	Do not show amounts at part B that were subject to foreign resident withholding. Show these at item P8 . PSI – where Australian business number not quoted N					
	PSI – labour hire or other specified payments					
	PSI-other J .DQ					
	Deductions for payments to associates for principal work					
	Total amount of other deductions against PSI					
	Transfer the amount at A above to A item 14 on page 8. Complete items P2 and P3 . Do not show at item P8 any amount you have shown at part B of item P1 .					
P2	Description of main business or professional activity					
P3	Number of business activities B					
P4	Status of your business – print X in one box only. Ceased business C1 Commenced business C2					
P5	Business name of main business and Australian business number (ABN)					
	ABN					
P6	Business address of main business					
	Suburb or town State D Postcode					
P7	Did you sell any goods or services using the internet?					

P 8	Business income and expenses					
	Income	Primary production	Ν	Ion-primary production	n	Totals
	Gross payments where Australian business number not quoted	-00	D	.00		.00
	Gross payments subject to foreign resident withholding		В	-00		.00
	Gross payments E	.00	F	-00		.00
	Gross payments – labour hire N	.00		.00	-	.90
	Assessable government G	.00		-00		.00
	Other business income	.00		.00		.00.
	Total business income	.00		.00		
	Expenses Opening stock	.00		.00	K	
	Purchases and other costs	.00		.00		.00
	Closing stock	.00·		.00	M	
	<u>_Cost of sales</u>	.00		.00		-90
	(K + L − M) Foreign resident			.00		.90
	withholding expenses Contractor, subcontractor	.00		.00	F	90.
	and commission expenses Superannuation expenses	.00		.00	G	90.
	Bad debts	.00		.00		.00
	Lease expenses	.00		.00		-00
	Rent expenses	.00		.00	K	-0Q
	Interest expenses	.00		.00	Q	
	within Australia Interest expenses overseas	.00		.00	R	90.
	Depreciation expenses	.00		·00.	M	90.
	Motor vehicle expenses	.00		.00	Ν	-90 /
	Repairs and maintenance	.00		-00	0	
	All other expenses	.00		-00	Р	90.
	Total expenses					
	Add up the boxes for each column.	.00		-90		
	Reconciliation items Section 40-880 deduction			20		
		.00		.00	A	<u>00</u> .
L	Business deduction for project pool andcare operations and business deduction	.00		.00		.00
	for decline in value of water facility, fencing asset and fodder storage asset	-00		-90	W	.00
	Income reconciliation adjustments	.00		-90	X	
	Expense reconciliation adjustments	.00		.00	/ H	-00
	Net income or loss from business this year	.00	/ C	.00	/	
	Deferred non-commercial D business losses from a prior year	.00	E	.90	-	
	Net income or loss from business	•90		•90		
	Iran	sfer the amounts at Y an		i io on page 9.		

P9 Business loss activity details

Show details of up to three business activities in which you made a net loss this year. List them in order of size of loss – greatest first. If you print loss code 8 at G, M or S you must also complete item 16 on page 9.

	Activity 1	Descriptio	on of activity	D						
	Industry code E			Partnership (P) or sole trader (S)	F					
	Time of lease			Code		/ear		[Number	
	Type of loss G		Reference for c	ode 5 C	Y		/ A			
	Deferred non-comm business loss from a		H	·90	Net loss			.00		
	Activity 2	Descriptio	on of activity	J						
	Industry code			Partnership (P) or sole trader (S)	L					
	Type of loss	F	Reference for c	ode 5 C	Y	Year	/ A		Number	
	Deferred non-comm business loss from a		Ν	90.	Net loss	0		·00		
	Activity 3	Descriptio	on of activity	P						
	Industry code Q			Partnership (P) or sole trader (S)	R					
	Type of loss S	F	Reference for c	ode 5 C	Y	Year	/ A		Number	
	Deferred non-comm business loss from a		T	-00	Net loss	U		.00		
P10	Small busines	s entity :	simplified d	epreciation					Deduction for general	
					4	eduction for ce		00	small business pool	•00
Oth	er business an	d profe	ssional iter	ns						
P11	Trade debtors				E			90		
P12	Trade creditors	S							25	
P13	Total salary an	d wage	expenses		C	G		00/		
P14	Payments to a	ssociate	ed persons		ŀ	1		90		
P15	Intangible dep	reciating	g assets firs	st deducted				00		
P16	Other deprecia	ating as	sets first de	ducted		J		00		
P17	Termination va	alue of ir	ntangible de	preciating assets				90		
P18	Termination va	alue of o	ther depred	iating assets	ł	K		90		
P19	Trading stock				F					

Hours taken to prepare and complete the Business and professional items section



Family Assistance consent

Complete this section only if you consent to use part or all of your 2016 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 2016 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 2016 and
- · you expect to receive a tax refund for 2016 and
- you consent to use part or all of your tax refund to repay your spouse's Family Assistance debt.

Spouse's CRN	Ζ	
	Important: You also need to provide your spouse's name, date of birth and their gender on page 7.	

I consent to the ATO using part or all of my 2016 tax refund to repay any Family Assistance debt of my spouse, whose details I have provided on page 7. I have obtained my spouse's permission to quote their CRN.

Your	Date	Day	Month	Year]
signature	Dale]

Taxpayer's declaration

Read and sign the declaration after completing your tax return, including the Supplementary section, Business and professional items section and other schedules if applicable.

I declare that:

- the information provided to my registered tax agent for the preparation of this tax return is true and correct, and
- I authorise my registered tax agent to lodge this tax return.

axpayer's		Date	Day	Month		Year	
signature		Dato			<u> </u>		
	Important: The tax law impages heavy penalties for siving f		ماممطنمم	informe	tion		

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

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.

Privacy

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

Tax agent's declaration

declare that this tax return has been prepared in accordance with information supplied by the taxpayer, that the taxpayer has given me a declaration stating that the information provided to me is true and correct and that the taxpayer has authorised me to lodge the tax return.

Agent's signature		Date	Client's reference
		Day Month Year	
Contact name	Agent's telephone	number	Agent's reference number
	Area code	Telephone number	

Page 16