

## Tax return for individuals

2020

1 July 2019 to 30 June 2020

■ Use BLOCK LETTERS and print one character in each box.  ■ Do not use correction fluid or tage. ■ Complete your details carefully to avoid delays in processing your tax return.  Individual information  Your tax file number (TFN) ■ See the Privacy note in the Taxpayer's declaration on page 10 of this return.  Are you an Australian resident? Yes No  Your name (Print your full name) Trile: Me Mes Mes Mes Other Signed remains on page 10 of this return.  Has any part of your name changed since completing your last tax return? No Pesd on. Yes See Completing individual information on your tax return on page 8 of the instructions.  Your postal address Print the address where you want your mail sent.  Suburb town/focally ■ Stater leminoy Postcode  Last this address changed since completing your last tax return? No Yes Suburb lown/focally ■ Suburb town/focally ■ Suburb lown/focally ■ Suburb lown/f	■ Print clearly using a black pen only.	to iii iii tiiis tax retuiii.	■ Print X in all appropriate boxes.	
Individual information  Your tax file number (TFN)		naracter in each box.	■ Do not use correction fluid or tape.	
Individual information  Your tax file number (TFN)	8 M / T H 8 T			
Your tax file number (TFN)			delays in processing your tax return.	254
Are you an Australian resident? Yes No  Your name (Print your full name) Title: Mr Mrs Miss Miss Ms Other Summer or family name  First given name  Other given names  Other given names  Other given names  As any part of your name changed since completing your last tax return?  Your postal address Print the address where you want your mail sent.  Your postal address Frint the address where you want your mail sent.  Suburbitown/locality  State/territory  Postcode  Suburbitown/locality  State/territory  Postcode  Suburbitown/locality  State/territory  Postcode  Tourn your nome address different from your postal address?  Your daytine phone number (ifferent from your mobile phone number)  Your contact details  Your daytime phone number (ifferent from your mobile phone number)  Your contact details nay be used by the ATO:	Individual information			10620
Your name (Print your full name) Title: Mr	Your tax file number (TFN)			
Title: Mr Mrs Mss Ms Other  Surname or family name  What any part of your name changed since completing your last tax return?  Your postal address Print the address where you want your mail sent.  Suburb town/locality  Suburb town/locality  Suburb town/locality  No Read on.  Yes Suburb town/locality  State/termitory  State/termitory  State/termitory  Postcode  Country if not Australia  Has this address changed since completing your last tax return?  No Read on.  Yes Print your home address below.  Yes Print your home address below.  Your contact details  Your mobile phone number  (if different from your mobile phone number)  Your contact details  Your daytime phone number  Your contact details may be used by the ATO:	Are you an Australian resident?	Yes No		
Suname or family name    First given name	Your name (Print your full name)			
First given name  Other given names  No Read on. Yes See Completing individual information on your stax return?  Your postal address Print the address where you want your mail sent.  Suburb/town/locality  State/territory  Postcode  Country if not Australia  Is your home address different from your postal address?  No Read on. Yes Print your home address below.  Your contact details  Your contact details may be used by the ATO:	Title: Mr Mrs Miss Ms	Other		
Has any part of your name changed since completing your last tax return?  No Read on. Yes See Completing individual information on your tax return on page 8 of the instructions.  Your postal address Print the address where you want your mail sent.  Suburb/towr/locality State/territory Postcode  Country if not Australia  Has this address changed since completing your last tax return?  No Yes Print your home address below.  Suburb/towr/locality State/territory Postcode  Country if not Australia  Ves Print your home address below.  Your contact details  Your daytime phone number  (if different from your mobile phone number)  Your contact details may be used by the ATO:	Surname or family name			
Has any part of your name changed since completing your last tax return?  No Read on. Yes See Completing individual information on your tax return on page 8 of the instructions.  Your postal address Print the address where you want your mail sent.  Suburb/towr/locality State/territory Postcode  Country if not Australia  Has this address changed since completing your last tax return?  No Yes Print your home address below.  Suburb/towr/locality State/territory Postcode  Country if not Australia  Ves Print your home address below.  Your contact details  Your daytime phone number  (if different from your mobile phone number)  Your contact details may be used by the ATO:	First sives page	Othor given		
Your postal address Print the address where you want your mail sent.  Suburb/town/locality  Country if not Australia  Suburb/town/locality  State/territory  No  Read on.  Yes  Print your home address below.  Yes  Print your home address below.  Your contact details  Your mail address  Your daytime phone number  (if different from your mobile phone number)  Your contact details may be used by the ATO:	First given name	Other given		
Your postal address Print the address where you want your mail sent.  Suburb/town/locality  Country if not Australia  Suburb/town/locality  State/territory  No  Read on.  Yes  Print your home address below.  Yes  Print your home address below.  Your contact details  Your mail address  Your daytime phone number  (if different from your mobile phone number)  Your contact details may be used by the ATO:				
Suburb/town/locality Country if not Australia Has this address changed since completing your last tax return? No Read on. Yes Print your home address below.  Suburb/town/locality State/territory Postcode Postcode  Yes Vour contact details Your daytime phone number (if different from your mobile phone number) Your contact details may be used by the ATO:		No Read on.	Yes See Completing individual information tax return on page 8 of the instruction	nation on your ctions.
Country if not Australia  Is your home address different from your postal address?  No  Pead on.  Yes  Print your home address below.  Suburb/town/locality  State/territory  Postcode  Country if not Australia  Country if not Australia  Your contact details  Your daytime phone number  (if different from your mobile phone number)  Your contact details may be used by the ATO:	Your postal address Print the address	where you want your mai	l sent.	
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Country if not Australia  Is your home address different from your postal address?  No  Pead on.  Yes  Print your home address below.  Suburb/town/locality  State/territory  Postcode  Country if not Australia  Country if not Australia  Your contact details  Your daytime phone number  (if different from your mobile phone number)  Your contact details may be used by the ATO:				
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Is your home address different from your postal address?  No Read on. Yes Print your home address below.  Suburb/town/locality State/territory Postcode  Country if not Australia  Your contact details Your mobile phone number (if different from your mobile phone number)  Your contact details may be used by the ATO:				
Is your home address different from your postal address?  No Read on. Yes Print your home address below.  Suburb/town/locality State/territory Postcode  Country if not Australia  Your contact details Your mobile phone number (if different from your mobile phone number)  Your contact details may be used by the ATO:	Country if not Australia		Has this address changed since	
your postal address?  No Pead on. Yes Print your nome address below.  Suburb/town/locality State/territory Postcode  Country if not Australia  Your contact details Your mobile phone number (if different from your mobile phone number)  Your email address  Your daytime phone number (if different from your mobile phone number)  Your contact details may be used by the ATO:				No Yes
Suburb/town/locality State/territory Postcode Country if not Australia  Your contact details Your mobile phone number (if different from your mobile phone number) Your email address Your contact details may be used by the ATO:		No Nead o	on. Yes Print your home address belo	OW.
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Country if not Australia  Your contact details Your mobile phone number (if different from your mobile phone number)  Your email address Your contact details may be used by the ATO:				
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Your contact details Your mobile phone number (if different from your mobile phone number) Your email address Your contact details may be used by the ATO:	Suburb/ town/locality		State/terntory	Postcode
Your mobile phone number (if different from your mobile phone number)  Your email address  Your contact details may be used by the ATO:	Country if not Australia			
Your mobile phone number (if different from your mobile phone number)  Your email address  Your contact details may be used by the ATO:				
Your mobile phone number (if different from your mobile phone number)  Your email address  Your contact details may be used by the ATO:	V			
Your email address  Your contact details may be used by the ATO:				
Your contact details may be used by the ATO:				
Your contact details may be used by the ATO:	Your email address			
	Your contact details may be used by the  to advise you of tax return lodgment or			

- to correspond with you with regards to your taxation and superannuation affairs
- to issue notices to you, or

NAT 2541-06.2020

■ to conduct research and marketing.

ı	
Will you need to lodge an Australian tax return in the future?	on't know No FINAL TAX RETURN
Your date of birth  If you were under 18 years old on 30 June 2020  you must complete item A1 on page 7.	Provide your date of birth to avoid delays in the processing of your tax return.
Electronic funds transfer (EFT)  We need your financial institution details to pay any refund owing Write the BSB number, account number and account name belo BSB number (must be six digits)  Account name (for example, JQ Citizen. Do not show the account name)	count number
Income	
1 Salary or wages Your main salary and wage occupation  Paver's Australian business number	Tax withheld – do not show cents Income – do not show cents
	\$ C \$
	\$
	\$
	\$
2 Allowances, earnings, tips, director's fees etc	\$
3 Employer lump sum payments	Amount A in lump sum payments box  TYPE  Amount A in lump sum payments box  TYPE  Sw of amount B in lump sum payments box  H  Sw of amount B in lump sum payments box
4 Employment termination payments (ETP)  Date of payment	Taxable component Code  S S S S S S S S S S S S S S S S S S S
Payer's ABN	
5 Australian Government allowances and payments like Newstart, Youth Allowance, JobSeeker and Austudy payments	\$ A \$
6 Australian Government pensions and allowances You must complete item T1 in Tax offsets.	\$ B \$
7 Australian annuities and superannuation income streams	\$
Taxable	component Taxed element J \$,
	Untaxed element N \$,
Assessable amount from capped	defined benefit income stream MS ,
Lump sum in arrears – taxable	component Taxed element Y \$,
	Untaxed element Z \$

	Attach here all documents that the instructions tell you to attach.	Your tax f	ile numb	per (TFN)	_ ¬
G	Do not send in your tax return until you have attached all requested attachments.				
					254
					107
					20
					_
In	come – continued				
8	Australian superannuation lump sum payments	Tax withheld – do not sho			
	Day Month Year	<b>V</b> ,	->0	Income – do n	ot show cents TYPE
		·	element	QS	
	Payer's ABN	Untaxed	element	P \$	, <del>\</del>
9	Attributed personal services income	\$,	-00	<b>o</b> \$	, □ □ -∞
T	OTAL TAX WITHHELD Add up the \$\\$\)boxes. \$		·%		t include come here
10	Gross interest			Income – do not	show cents
	If you are a foreign-resident make sure you have printed your country of residence on page 1.	Gross interest	L \$		,
	Tax file number amounts withheld from gross interest <b>M</b> \$				
_					
11	<b>Dividends</b> If you are a foreign-resident make sure you have printed	Unfranked amount	<b>S</b> \$		,
	your country of residence on page 1.	Franked amount	T \$		],
	Tax file number amounts v \$ ,	Franking credit	U\$		,
12	Employee share schemes				
	Discount from taxed upfront schemes – eligible for reduction <b>D</b> \$ ,	_,∞			
D	Discount from taxed upfront schemes - not eligible for reduction  E \$	],□□□-∞			
	Discount from deferral schemes <b>F</b> \$				
	Total asses	sable discount amount	<b>B</b> \$		
TFN	amounts withheld from discounts C\$				
	Foreign source discounts A\$ ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	If you completed the <i>Tax return for individuals (supsection) 2020</i> , write here the amount from TOTAL SUPPOR LOSS on page 15.	pplementary LEMENT INCOME	<b>\$</b>		, Loss
TO	<b>DTAL INCOME</b> Add up the income amounts and deduct any	oss amount in the \$ have	20 🛧		LOSS
	R LOSS on pages 2 and 3.	555 AFFICUITE III THE DOXE	* <b>\$</b> _		,· <b>X</b>

<b>Deductions</b>			CLAIM
	D1	Work-related car expenses	A \$
You must read	D2	Work-related travel expenses	B \$
the deductions section in the instructions if you	D3	Work-related clothing, laundry and dry cleaning expenses	C\$ TYPE
are claiming deductions for expenses that relate	D4	Work-related self-education expenses	D\$ TYPE
to your work as an employee at items <b>D1–D6</b> .	D5	Other work-related expenses	E \$, \
51 50.	D6	Low value pool deduction	K \$ □ □ □, □ □ ·∞
D7 Interest ded	uctio	ns	I \$
D8 Dividend de	ducti	ons	H \$ □ □ , □ □ · ≫
D9 Gifts or dona	ations	5	J \$
D10 Cost of mar	nagin	g 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) mount from TOTAL SUPPLEMENT DEDUCTIONS on page 15.	,
TOTAL DEDUC	TION	Add amounts at items <b>D1</b> to <b>D</b>	] ,
SUBTOTAL		TOTAL INCOME OR LOSS less TOTAL DEDUCTIONS \$	, loss
Losses			
L1 Tax losses o	of earl	ier income years	
Primary production forward from earlier			
Non-primary production forward from earlies			s z \$
TAXABLE INCOI OR LOSS	ME	If you were not required to complete L1, write the amount from SUBTOTAL above here.  If you completed L1, add up the amounts you wrote the amount you wrote at SUBTOTAL. Write the answ	
		Make sure that you complete item M2 on page (	6.

**Sensitive** (when completed)

Your tax t	file nui	mber (	TFN	)	



# Tax offsets

T1	T1 Seniors and pensioners (includes self-funded retirees)		N TAX OFFSET
	If you had a spouse during 2019–20 you must also complete <b>Spouse details – married or de facto</b> on pages 8–9.	The ATO will work out this tax offset amount. Print your code letter in the <b>TAX OFFSET CODE</b> box.	VETERAN
T2	Australian superannuation income stream		s \$ □ □, □ □ □ ·∞
Ī	If you completed the <b>Tax return for individuals 2020</b> , write here the amount from TOTAL SUPPLEME		\$,
T	OTAL TAX OFFSETS Add up all the t	ay offset amounts at items T2 and T	11 ¢ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

## 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

Number of dependent children and students

**Exemption categories** 

Full 2.0% levy exemption – number of days

		(	CLAIN
,			
	 ш		TVPF

Half 2.0% levy exemption – number of days W

If you have completed item M1 and had a spouse during 2019–20 you must also complete Spouse details - married or de facto on pages 8-9.

Medicare levy surcharge (MLS)					
THIS ITEM IS COMPULSORY FOR ALL TAXPAYERS	<b>3.</b>				
To help you determine if you have to pay the surcharge read $oldsymbol{N}$	12 Medicare	levy su	<b>ircharge</b> in the i		
E Yes You must complete Private health insurance pode details on the next page. You have now finished	<b>olicy</b> this item.	No	Read on.		
For the whole of 2019–20 were you:					
			urcharge purpo	oses	
a dependent child or children; or a sole parent with a dependence income for surcharge purposes (including the total reportable	dent child or e fringe bene	childrer fits amo	n – and the comb ounts) of you and	nbined ad your	
No You may have to pay the surcharge. Read M2 No levy surcharge in the instructions.	/ledicare	Yes	You do not l You must w	have to pay the surcharg write <b>366</b> at <b>A</b> .	Э.
You must write the following at <b>A</b> :  ■ 0 when you have to pay the surcharge for the whole period 1 July 2019 to 30 June 2020  ■ 366 when you do <b>not</b> have to pay the surcharge for the whole period 1 July 2019 to 30 June 2020  ■ <b>the number of days</b> you do <b>not</b> have to pay the surcharge for part of the period 1 July 2019 to 30 June 2020.	Num hav	ber of c	lays you do <b>not</b> y the surcharge	t A	
	THIS ITEM IS COMPULSORY FOR ALL TAXPAYERS If you do not complete this item you may be charged the full Not help you determine if you have to pay the surcharge read Not had any – covered by private patient hospital cover?  E Yes You must complete Private health insurance producted the whole of 2019–20 were you:  a single person – without a dependent child or children – and (including your total reportable fringe benefits amounts) was a member of a family – which may consist of you and your a dependent child or children; or a sole parent with a dependent compose (if you had one) was \$180,000 or less (plus \$1,500 for Not in your have to pay the surcharge. Read M2 Not in your have to pay the surcharge for the whole period 1 July 2019 to 30 June 2020  366 when you do not have to pay the surcharge for the whole period 1 July 2019 to 30 June 2020  the number of days you do not have to pay the surcharge	THIS ITEM IS COMPULSORY FOR ALL TAXPAYERS.  If you do not complete this item you may be charged the full Medicare levy To help you determine if you have to pay the surcharge read M2 Medicare For the whole period 1 July 2019 to 30 June 2020 were you and all of 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.  For the whole of 2019–20 were you:  a single person – without a dependent child or children – and your incor (including your total reportable fringe benefits amounts) was \$90,000 or I a member of a family – which may consist of you and your spouse (mar a dependent child or children; or a sole parent with a dependent child or income for surcharge purposes (including the total reportable fringe bene spouse (if you had one) was \$180,000 or less (plus \$1,500 for each dependent child or levy surcharge in the instructions.  You must write the following at A:  O when you have to pay the surcharge for the whole period 1 July 2019 to 30 June 2020  366 when you do not have to pay the surcharge for the whole period 1 July 2019 to 30 June 2020  the number of days you do not have to pay the surcharge	THIS ITEM IS COMPULSORY FOR ALL TAXPAYERS.  If you do not complete this item you may be charged the full Medicare levy surchar To help you determine if you have to pay the surcharge read M2 Medicare levy surchar the whole period 1 July 2019 to 30 June 2020 were you and all of your dependent 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.  For the whole of 2019–20 were you:  a single person – without a dependent child or children – and your income for se (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 a dependent child or children; or a sole parent with a dependent child or children income for surcharge purposes (including the total reportable fringe benefits amounts) was \$180,000 or less (plus \$1,500 for each dependent on the instructions.  You must write the following at A:  You must write the following at A:  of when you have to pay the surcharge for the whole period 1 July 2019 to 30 June 2020  affection and the following the surcharge for the whole period 1 July 2019 to 30 June 2020  the number of days you do not have to pay the surcharge  the number of days you do not have to pay the surcharge	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 For the whole period 1 July 2019 to 30 June 2020 were you and all of your dependants (includin 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.  For the whole of 2019–20 were you:  a single person – without a dependent child or children – and your income for surcharge purpor (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 a dependent child or children; or a sole parent with a dependent child or children – and the complete income for surcharge purposes (including the total reportable fringe benefits amounts) of you are spouse (if you had one) was \$180,000 or less (plus \$1,500 for each dependent child after the file No You may have to pay the surcharge. Read M2 Medicare  You must write the following at A:  You must write the following at	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 2019 to 30 June 2020 were you and all of your dependants (including your spouse) – if you had any – covered by private patient hospital cover?  E Yes

If you had a spouse during 2019–20 complete Spouse details - married or de facto on pages 8-9. If you were covered by private patient hospital cover at any time during 2019-20 you must complete Private health insurance policy details on the next page. Read the Private health insurance policy details section in the instructions.

r	rivate health insurance policy details	
	You must read <b>Private health insurance policy details</b> in the instr Fill all the labels below unless directed in the instructions.	uctions before completing this item.
	Health insurer ID B Membership c number	
	Your premiums eligible for Australian Government rebate J \$ ,	Your Australian Government K \$ , ,
	Benefit code	Tax claim code. Read the instructions.
	Health insurer ID B Membership C Membership C	
	Your premiums eligible for Australian Government rebate J \$ ,	Your Australian Government K \$,
	Benefit code L	Tax claim code. Read the instructions.
	Health insurer ID B Membership C Membership C	
	Your premiums eligible for Australian Government rebate J \$ ,	Your Australian Government K \$ ,
	Benefit code L	Tax claim code. Read the instructions.
	Health insurer ID B Membership c III	
	Your premiums eligible for Australian Government rebate J \$ ,	Your Australian Government <b>K</b> \$ □ □, □ □ • ∞
	Benefit code L	Tax claim code. Read the instructions.
lo	djustments	
1	Under 18 If you were under 18 years old on 30 June 2020 you must complete this item or you may be taxed at a higher rate. Read A1 Under 18 in the instructions for more information.	
2	Part-year tax-free threshold  Months oligible	for threshold N
	Date Day / Month / Year MOTH'S eligible	Tor threshold
3	Government super contributions Read A3 Government super contributions in the instructions before	ore completing this item
	Income from investment, partnership and other sou	CODE -
	Other income from employment and busi	ness <b>G</b> \$
	Other deductions from business inc	
4	Working holiday maker net income	
T	Torking holiday makor not moonic	D \$,

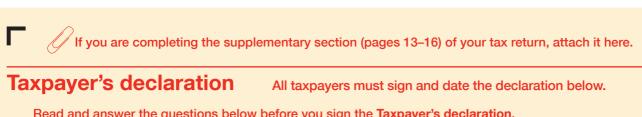
1	
Income tests	
You must complete this section. If you had a spouse during 2019–20 you must also complete <b>Spouse details – married or de facto</b> on pages 8–9.	If the amount is zero write 0.
IT1 Total reportable fringe benefits amounts	
Employers exempt from FBT under section 57A of the FBTAA 1986	N \$
Employers not exempt from FBT under section 57A of the FBTAA 1986	w \$ □ □ □, □ □ □ ·∞
IT2 Reportable employer superannuation contributions	T \$,
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	<b>z</b> \$□□□,□□⋅∞
IT8 Number of dependent children	D
Spouse details – married or de facto  If you had a spouse during 2019–20 you must complete Spouse details – married or de fact We need the information included in this section to assess your tax accurately.  If you did not have a spouse, go to page 10.	to.
Your spouse's name	
If you had more than one spouse during 2019–20 print the name of your spouse on <b>30 June 2</b> Surname or family name	2020 or your last spouse.
First given name  Other given names	
Your spouse's date of birth  K Day Month Year  Year	
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 2019 to 30 June 2020?	
If you did not have a spouse for the full year, write the dates you had a spouse between 1 July 2019 and 30 June 2020.    From Day Month Year   Year   To Day Month Year   To Day Month Year   Year	
Did your spouse die during the year?  Yes  No	

**Sensitive** (when completed)

TAX RETURN FOR INDIVIDUALS 2020

Page 8

Spouse details – married or de facto – continued	
The information on this page relates to your spouse's income. You must complete all labels.	If the amount is zero write 0.
Your spouse's 2019–20 taxable income (excluding any assessable First home super saver released amount)	o \$,∞
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	T \$
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 <b>Q6 Australian Government pensions and allowances</b> in the instructions) that your spouse received in 2019–20 (exclude <b>exempt pension</b> income)	P \$ □ □ , □ □ ·∞
Amount of exempt pension income (see <b>Spouse details – married or de facto</b> in the instructions) that your spouse received in 2019–20. 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	<b>c</b> \$ □ □ , □ □ ·∞
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 <b>M2 Medicare levy surcharge</b> in the instructions)	F \$ □ □ , □ □ ·∞
Family Assistance consent – Complete this section only if you consent to use part tax refund to repay your spouse's Family Assistance debt.	or all of your 2020
Complete the details below only if:  you were the spouse of a family tax benefit (FTB) claimant, or the spouse of a child care  your spouse has given you authority to quote their customer reference number (CRN) or not know their CRN, they can contact Services Australia and	
<ul> <li>your spouse has a Family Assistance debt or expects to have a Family Assistance debt to you expect to receive a refund for 2020 and</li> <li>you consent to use part or all of your refund to repay your spouse's Family Assistance debt to your spouse's Family Assistance d</li></ul>	
Do you consent to use part or all of your 2020 tax refund to repay your spouse's Family Assistance debt?  You do not need to complete this section. Go to page 10.  Yes  Yes  Yes	e's CRN <b>Z</b>
I consent to the ATO using part or all of my 2020 tax refund to repay any Family Assis whose details I have provided above. I have obtained my spouse's permission to quot	
Your signature for Services Australia consent purposes only	
	Date
	Day Month Year



3	lead and answer the questions below before you sign the Taxpayer's declaration.
	Are you required to complete any of the items on the <i>Tax return for individuals</i> (supplementary section) 2020? To find out, read Will you need <i>Individual tax return instructions supplement 2020?</i> in the instructions.
	No Read on. Yes 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.
V	Make sure you have also attached all other documents that the instructions tell you to.
כ	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

### 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 2019–20
- 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		
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** 

[insert the name and postcode of your capital city]

For example;

Australian Taxation Office GPO Box 9845 SYDNEY NSW 2001

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