



1 July 2008 to 30 June 2009

Your tax file number (TFN)

821 022 525

See the **Privacy** note in the *Taxpayer's declaration* on page 8 of your tax return.

Are you an Australian resident?

YES

NO

Your sex

Male

Female

Your name

Print your full name.

Title –for example,  
Mr, Mrs, Ms, Miss

Doctor

Surname or  
family name

MANTILLA

Has any part of your name  
changed since completing  
your last tax return?

NO

YES

Given names

ANECITO

Previous surname

Your postal address

Print the address where you  
want your mail sent.

4/90 TERALBA ROAD

Has this address changed since  
completing your last tax return?

Fill in the appropriate box then read on.

NO

YES

Suburb or  
town

ADAMSTOWN

State

NSW

Postcode

2289

Country  
if not Australia

Is your home address different  
from your postal address?

NO

Read on.

YES

Print your home address.

Suburb or  
town

ADAMSTOWN

State

NSW

Postcode

2289

Country  
if not Australia

Your date of birth

If you were under 18 years old on 30 June 2009 you  
must complete item **A1** on page 6.

DAY MONTH YEAR

24/06/1974

Provide your date of birth to avoid  
delays in the processing of your tax return.

Your telephone number during business hours – If we need to ask you about your tax return, it is quicker by telephone.

Area code 04

Telephone number 39383622

Will you need to lodge an Australian  
tax return in the future?

YES

DON'T KNOW

NO

FINAL TAX RETURN

It's faster and simpler to have your refund paid directly to your financial institution account.  
Do you want your refund paid directly into your financial institution account?

YES

Fill in the BSB number, account number and account name below.

BSB number  
must be six digits

017500

Account number

594628507

Account name – for example, JQ Citizen. Do not show the account type, such as cheque, savings, mortgage offset.

ANECITO MANTILLA

NO

Read on.

# INCOME

**1 Salary or wages** Your main salary and wage occupation **Doctor - specialist (incl. registrar) - specialist physician (general me**

Payer's Australian business number	Tax withheld – do not show cents	Income – do not show cents
24 500 842 605	45224 .00	C 128305 .00
	.00	D .00
	.00	E .00
	.00	F .00
	.00	G .00

**2 Allowances, earnings, tips, director's fees etc** .00 **K** 1656 .00

**3 Employer lump sum payments** .00

Amount A in lump sum payments box **R** .00  TYPE

5% of amount B in lump sum payments box **H** .00

**4 Employment termination payments (ETP)** .00

Date of payment Day Month Year  Taxable component **I** .00  TYPE

Payer's ABN

**5 Australian Government allowances and payments like Newstart, Youth Allowance and Austudy payment** .00 **A** .00

**6 Australian Government pensions and allowances** .00 **B** .00

You must also complete item T2 or T3 in Tax offsets.

**7 Australian annuities and superannuation income streams** .00

Taxable component Taxed element **J** .00

Untaxed element **N** .00

Lump sum in arrears – taxable component Taxed element **Y** .00

Untaxed element **Z** .00

**8 Australian superannuation lump sum payments** .00  TYPE

Date of payment Day Month Year  Taxable component Taxed element **Q** .00

Payer's ABN  Untaxed element **P** .00

**9 Attributed personal services income** .00 **O** .00

**TOTAL TAX WITHHELD** \$ 45224 .00

**10 Total reportable fringe benefits amount** **W** 16368 .00

**11 Gross interest** If you are a non-resident make sure you have printed your country of residence on page 1. Gross interest **L** 13 .00

Tax file number amounts withheld from gross interest **M** 0

**12 Dividends** Unfranked amount **S** .00

If you are a non-resident make sure you have printed your country of residence on page 1. Franked amount **T** .00

Tax file number amounts withheld from dividends **V** .00 Franking credit **U** .00

**Only used by taxpayers completing the Tax return for individuals (supplementary section) 2009**

**I** Transfer the amount from **TOTAL SUPPLEMENT INCOME OR LOSS** \$ .00  LOSS on page 11 and write it here.

**TOTAL INCOME OR LOSS** Add up all the income amounts and deduct any loss amount in the right-hand column. \$ 129974 .00  LOSS

# DEDUCTIONS

Deductions – do not show cents CLAIM

<b>D1</b>	Work related car expenses	<b>A</b>	<input type="text" value=""/>	.00	<input type="checkbox"/>
<b>D2</b>	Work related travel expenses	<b>B</b>	<input type="text" value=""/>	.00	<input type="checkbox"/>
<b>D3</b>	Work related uniform, occupation specific or protective clothing, laundry and dry cleaning expenses	<b>C</b>	<input type="text" value="145"/>	.00	<input type="checkbox"/> <b>N</b>
<b>D4</b>	Work related self-education expenses	<b>D</b>	<input type="text" value="358"/>	.00	<input type="checkbox"/> <b>K</b>
<b>D5</b>	Other work related expenses	<b>E</b>	<input type="text" value="1236"/>	.00	<input type="checkbox"/>
<b>D6</b>	Low value pool deduction	<b>K</b>	<input type="text" value=""/>	.00	<input type="checkbox"/>
<b>D7</b>	Interest and dividend deductions	<b>I</b>	<input type="text" value=""/>	.00	<input type="checkbox"/>
<b>D8</b>	Gifts or donations	<b>J</b>	<input type="text" value="10"/>	.00	<input type="checkbox"/>
<b>D9</b>	Cost of managing tax affairs	<b>M</b>	<input type="text" value=""/>	.00	<input type="checkbox"/>

Only used by taxpayers completing the *Tax return for individuals (supplementary section) 2009*

<b>D</b>	Transfer the amount from <b>TOTAL SUPPLEMENT DEDUCTIONS</b> on page 11 and write it here	\$	<input type="text" value=""/>	.00	<input type="checkbox"/>
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<b>TOTAL DEDUCTIONS</b>	Add up all the deduction amounts at items <b>D1</b> to <b>D</b> .	\$	<input type="text" value="1749"/>	.00	<input type="checkbox"/>
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<b>SUBTOTAL</b>	<b>TOTAL INCOME OR LOSS less TOTAL DEDUCTIONS</b>	\$	<input type="text" value="128225"/>	.00	<input type="checkbox"/> <b>LOSS</b>
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# LOSSES

<b>L1</b>	<b>Tax losses of earlier income years</b>				
	Primary production losses carried forward from earlier income years	<b>Q</b>	<input type="text" value=""/>	.00	
	Non-primary production losses carried forward from earlier income years	<b>R</b>	<input type="text" value=""/>	.00	
	Primary production losses claimed this income year	<b>F</b>	<input type="text" value=""/>	.00	
	Non-primary production losses claimed this income year	<b>Z</b>	<input type="text" value=""/>	.00	

<b>TAXABLE INCOME OR LOSS</b>	If you were not required to complete <b>L1</b> write the amount from <b>SUBTOTAL</b> here.	\$	<input type="text" value="128225"/>	.00	<input type="checkbox"/> <b>LOSS</b>
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# TAX OFFSETS

## T1 Spouse (without dependent child or student), child-housekeeper or housekeeper

To claim the spouse tax offset you must also complete **Spouse details – married or de facto** on pages 6-7. Separate net income of your spouse must be shown on page 7, not here.

Child-housekeeper's separate net income **V** .00

Tax offsets – do not show cents  
**P** .00  CLAIM TYPE

## T2 Senior Australians (includes age pensioners, service pensioners and self-funded retirees)

If you had a spouse during 2008–09 you must also complete **Spouse details – married or de facto** on pages 6-7 of your tax return.

**N** TAX OFFSET CODE   
**Y** VETERAN CODE

## T3 Pensioner If you completed item T2 Senior Australians above DO NOT complete this item.

If you had a spouse during 2008–09 you must also complete **Spouse details – married or de facto** on pages 6-7 of your tax return.

**O** TAX OFFSET CODE   
**T** VETERAN CODE

## T4 Australian superannuation income stream

**S** .00

## T5 Private health insurance

You must also complete **Private health insurance policy details** below.

Amount of refundable tax offset not previously claimed by way of reduced private health insurance premiums **G**  4707.00

## T6 Education tax refund

**L** .00

Number of primary school students **W**

Number of secondary school students **X**

## T7 Ongoing baby bonus claim

Number of eligible days **H**   CODE

First-time baby bonus claimants and all transferees must use the *Baby bonus instructions and claim 2009*.

### Only used by taxpayers completing the Tax return for individuals (supplementary section) 2009

**T** Transfer the amount from **TOTAL SUPPLEMENT TAX OFFSETS** on page 12 and write it here. **U** \$  554.00

## TOTAL TAX OFFSETS

Add up all the tax offset amounts at items **T1**, **T4**, **T5**, **T6** and **T**. **U** \$  5261.00

# PRIVATE HEALTH INSURANCE POLICY DETAILS

You must provide the details for each policy if item **T5** or **M2** asked you to complete this section.

Health insurer ID

**B** MBF

**B** MBF

**B**

Membership number

**C** 50036045

**C** 5003604501

**C**

Type of cover

**C**

**C**

# MEDICARE LEVY RELATED ITEMS

## M1 Medicare levy reduction or exemption



### NOTE

Only certain taxpayers are entitled to a Medicare levy reduction or exemption.

### Reduction based on family income

Number of dependent children and students **Y**

### Exemption categories

Full 1.5% levy exemption – number of days **V**

Half 1.5% levy exemption – number of days **W**

CLAIM  
**C**  
TYPE

If you have completed item **M1** and had a spouse during 2008–09 you must also complete **Spouse details – married or de facto** on pages 6-7.

## 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.

For the **whole** period 1 July 2008 to 30 June 2009 were **you** and **all** of your dependants (including your spouse) – if you had any – covered by private patient **hospital** cover?



### NOTE

#### For this year only:

For the purpose of answering this question, if you were covered by a health insurance policy that provided private patient hospital cover during any part of the period 1 July to 31 December 2008 and you continued to be covered by that policy on 1 January 2009 then the law will treat you as having held private patient hospital cover for the whole of the period 1 July to 31 December 2008.

**E**

YES

You **must** complete **Private health insurance policy details** on page 4 of your tax return. You have now finished this item.

NO

Read on.

For the whole of 2008–09 were you:

- **a single person** – without a dependent child or children – and your taxable income for MLS purposes (including your total reportable fringe benefits amounts) was \$70,000 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 taxable income for MLS purposes (including the total reportable fringe benefits amounts) of you and your spouse (if you had one) was \$140,000 (plus \$1,500 for each dependent child after the first) or less?

NO

You may have to pay the surcharge.

YES

You do not have to pay the surcharge. 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 2008 to 30 June 2009
- **365** when you do **not** have to pay the surcharge for the whole period 1 July 2008 to 30 June 2009
- **the number of days** you do **not** have to pay the surcharge for part of the period 1 July 2008 to 30 June 2009.

Number of days you do **not** have to pay the surcharge **A**

Number of dependent children **D**

If you had a spouse during 2008–09 complete **Spouse details – married or de facto** on pages 6-7.

If you were covered by private patient hospital cover at any time during 2008–09 you **must** complete **Private health insurance policy details**.

**Make sure you sign the Taxpayer's declaration on page 8 of your tax return.**

## ADJUSTMENTS

### A1 Under 18

If you were under 18 years of age on 30 June 2009 you must complete this item or you may be taxed at a higher rate.

J  .00  TYPE

### A2 Part-year tax-free threshold

Months eligible for threshold N

Date 

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

## SPOUSE DETAILS – MARRIED OR DE FACTO

If you completed any of the items listed below, and you had a spouse during 2008–09, or if you consent to use part or all of your 2009 tax refund to repay your spouse's Family Assistance Office (FAO) debt, you must complete **Spouse details – married or de facto**. We need the information included in this section to assess your tax accurately.

**Did you complete any of the following items or do you consent to use part or all of your 2009 tax refund to repay your spouse's FAO debt?**

T1	Spouse (without dependent child or student) tax offset
T2	Senior Australians tax offset
T3	Pensioner tax offset
M1	Medicare levy reduction or exemption
M2	Medicare levy surcharge – and you printed <input checked="" type="checkbox"/> in the <b>NO</b> box at <b>E</b>
T8	Superannuation contributions on behalf of your spouse (on the supplementary section of the tax return)

NO  You do not need to complete this section. Go to page 8.

YES  You must complete this section. Complete the information required below then go to page 8.

### Your spouse's name

If you had more than one spouse during 2008–09 print the name of your spouse on **30 June 2009** or your last spouse.

Surname or family name   
Given names

### Your spouse's date of birth

Day	Month	Year
<input type="text" value="22"/>	<input type="text" value="09"/>	<input type="text" value="1978"/>

Your spouse's sex Male  Female

### Period you had a spouse – married or de facto

Did you have a spouse for the full year – 1 July 2008 to 30 June 2009? L YES  NO

If you did not have a spouse for the full year, write the dates you had a spouse between 1 July 2008 and 30 June 2009.

From 

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

To 

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

## SPOUSE DETAILS – MARRIED OR DE FACTO – continued

Make sure you have checked on page 6 that you need to complete **Spouse details – married or de facto**.

The information on this page relates to your spouse's income. The following list shows which details you need to complete.

If you have completed:

▪ item <b>T1</b>	complete <b>R</b>
▪ item <b>T2</b> or <b>T3</b>	complete <b>C</b> , <b>T</b> , <b>P</b> and <b>Q</b>
▪ item <b>M1</b> ( <b>V</b> or <b>W</b> )	complete <b>C</b>
▪ item <b>M1</b> ( <b>Y</b> only)	complete <b>C</b> if you had a spouse on 30 June 2009
▪ item <b>M2</b> and you printed <input checked="" type="checkbox"/> in the <b>NO</b> box at <b>E</b>	complete <b>C</b> , <b>T</b> , <b>U</b> and <b>S</b> if you had a spouse for all of 2008–09 or your spouse died during the year
▪ item <b>T8</b>	complete <b>C</b> and <b>S</b> .

For any of the following that you are required to complete, if the amount is zero, do not leave blank – write **0**.

Spouse's 2008–09 taxable income **O**  .00

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**  .00

Distributions to your spouse on which family trust distribution tax has been paid which your spouse would have had to show as assessable income if the tax had not been paid **U**  .00

Your spouse's total reportable fringe benefits amounts **S**  .00

Amount of Australian Government pensions and allowances that your spouse received in 2008–09 (not including **exempt pension** income) **P**  .00

Amount of any exempt pension income that your spouse received in 2008–09 (make sure you only include your spouse's **exempt pension** income) **Q**  .00

Your spouse's 2008–09 **separate net income** **R**  .00

**Family Assistance Office consent** – Complete this section only if you consent to use part or all of your 2009 tax refund to repay your spouse's Family Assistance Office (FAO) 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 2009 **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 FAO – **and**
- your spouse has a debt due to the FAO or expects to have a FAO debt for 2009 **and**
- you expect to receive a refund for 2009 **and**
- you consent to use part or all of your refund to repay your spouse's FAO debt.

Do you consent to use part or all of your 2009 tax refund to repay your spouse's FAO debt? **YES**  → Your spouse's CRN **Z**

**NO**  You do not need to complete this section. Go to page 8

I consent to the Tax Office using part or all of my 2009 tax refund to repay any FAO debt of my spouse, whose details I have provided above. I have obtained my spouse's permission to quote their CRN.

Your signature for FAO consent purposes only

Day      Month      Year

Date

# 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) 2009*?

NO  Go to question 2. YES  Attach pages 9-12 to this page.

2 Has *e-tax 2009* asked you to attach the following?

- a. Any attachments relating to specific questions – to page 3 of your tax return NO  YES
- b. *Business and professional items schedule for individuals 2009* – to page 3 of your tax return NO  YES

Make sure you have also attached all other documents that *e-tax* tells you to.

## Privacy

The Tax Office is authorised by the *Taxation Administration Act 1953* to request you to quote your tax file number (TFN). It is not an offence not to quote your TFN. However, your assessment may be delayed if you do not quote your TFN.

The Tax Office is also authorised by the *Income Tax Assessment Act 1936*, the *Income Tax Assessment Act 1997* and the *A New Tax System (Family Assistance) (Administration) Act 1999* to ask for the other information on this tax return. We need this information to help us to administer the taxation laws.

We may give this information to other government agencies as authorised in taxation law – for example, benefit payment agencies such as Centrelink, the Department of Education, Employment and Workplace Relations, and the Department of Families, Housing, Community Services and Indigenous Affairs; law enforcement agencies such as state and federal police; and other agencies such as the Child Support Agency, the Australian Bureau of Statistics and the Reserve Bank of Australia. The Commissioner of Taxation, as Registrar of the Australian Business Register, may use the ABN and business details which you provide on this tax return to maintain the integrity of the register.

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 2008–09
- I have completed and attached the supplementary section, schedules and other attachments – as appropriate – that *e-tax* 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.**

DAY MONTH YEAR  
Date

The Tax Office will issue your assessment based on your tax return. However, the Tax Office 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 [www.ato.gov.au/notices](http://www.ato.gov.au/notices)





Your tax file number (TFN)

821 022 525

See the **Privacy** note in the *Taxpayer's declaration* on page 8 of your *Tax return for individuals 2009*.

Your name

Print your full name.

Title – for example,  
Mr, Mrs, Ms, Miss

Doctor

Surname or  
family name

MANTILLA

Given names

ANECITO

## INCOME

### 13 Partnerships and trusts

Include any deferred non-commercial business losses from a prior year at  or  as appropriate and insert the relevant code in the **TYPE** box.

#### Primary production

Distribution from partnerships **N**  .00

Distribution from trusts **L**  .00

Landcare operations and deduction  
for decline in value of water facility **I**  .00

Other deductions relating to distribution **X**  .00

If you have a net loss from a partnership business activity, complete items **P3** and **P9** in the *Business and professional items schedule for individuals 2009* in addition to item 13.

#### Non-primary production

Net primary production distribution  .00

Distribution from partnerships,  
less foreign income **O**  .00

Distribution from trusts, less  
net capital gains and foreign income **U**  .00

Landcare operations expenses **J**  .00

Other deductions relating to  
distributions shown at **O** and **U** **Y**  .00

Show distributions of:

- net capital gains at item 18 and
- foreign income at item 19 or 20.

#### Share of credits from income and tax offsets

Net non-primary production distribution  .00

Share of credit for tax withheld where  
Australian business number not quoted **P**

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**

Share of credit for tax paid by trustee **S**

Share of credit for amounts withheld from  
foreign resident withholding or a managed  
investment trust fund payment **A**

Share of National rental  
affordability scheme tax offset **B**

### 14 Personal services income (PSI)

Tax withheld – voluntary agreement **G**  .00

Tax withheld where Australian  
business number not quoted **H**

Tax withheld – labour hire or  
other specified payments **J**  .00

To complete this item, you must have read the publication *Business and professional items 2009* and completed the *Business and professional items schedule for individuals 2009*. Attach the schedule to page 3 of your tax return.

Net PSI – transferred from **A** on your *Business and professional items schedule for individuals 2009*

**A**  .00

# INCOME continued

## 15 Net income or loss from business

To complete this item, you must have read the publication *Business and professional items 2009* and completed the *Business and professional items schedule for individuals 2009*. Attach the schedule to page 3 of your tax return.

Primary production – transferred from **B**  .00 LOSS

**Y** item **P8** on your *Business and professional items schedule for individuals 2009*

Non-primary production – transferred from **C**  .00 LOSS

**Z** item **P8** on your *Business and professional items schedule for individuals 2009*

If you show a loss at **B** or **C** you must complete item **P9** in the *Business and professional items schedule for individuals 2009*.

Tax withheld – voluntary agreement **D**  .00

Tax withheld where Australian business number not quoted **W**

Tax withheld – foreign resident withholding **E**

Tax withheld – labour hire or other specified payments **F**  .00

## 16 Deferred non-commercial business losses

Your share of deferred losses from partnership activities **F**  .00

Deferred losses from sole trader activities **G**  .00

Item **P9** in the *Business and professional items schedule for individuals 2009* must be completed before you complete this item.

Primary production deferred losses **I**  .00

Non-primary production deferred losses **J**  .00

## 17 Net farm management deposits or withdrawals

**E**  .00 LOSS

## 18 Capital Gains

Did you have a capital gains tax event during the year? **G** NO  YES

You must print  in the YES box at **G** if you received a distribution of a capital gain from a trust.

Did this CGT event relate to a forestry managed investment scheme interest that you held other than as an initial participant? **Q** NO  YES

Net capital gains **A**  .00

Total current year capital gains **H**  .00

Net capital losses carried forward to later income years **V**  .00

## 19 Foreign entities

Did you have either a direct or indirect interest in a controlled foreign company (CFC)? **I** NO  YES  CFC income **K**  .00

Have you ever, either directly or indirectly, caused the transfer of property – including money – or services to a non-resident trust estate? **W** NO  YES  Transferor trust income **B**  .00

Did you have an interest in a foreign investment fund (FIF) or a foreign life assurance policy (FLP)? **J** NO  YES  FIF and FLP income **C**  .00

## 20 Foreign source income and foreign assets or property

Assessable foreign source income **E**  .00

Net foreign employment and net foreign pension or annuity income WITHOUT an undeducted purchase price **L**  .00 LOSS

Net foreign pension or annuity income WITH an undeducted purchase price **D**  .00 LOSS

Net foreign rent **R**  .00 LOSS

Other net foreign source income **M**  .00 LOSS

Also include at **F** Australian franking credits from a New Zealand company that you have received indirectly through a partnership or trust distribution.

Australian franking credits from a New Zealand company **F**  .00

Exempt foreign employment income **N**  .00

Foreign income tax offsets **O**

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** NO  YES

# INCOME continued

## 21 Rent

Gross rent **P**  .00

Interest deductions **Q**  .00

Capital works deductions **F**  .00

Other rental deductions **U**  .00

**P** less (**Q** + **F** + **U**)

Net rent  .00 LOSS

## 22 Bonuses from life insurance companies and friendly societies

**W**  .00

## 23 Forestry managed investment scheme income

**A**  .00

## 24 Other income

Type of income

Category 1  **Y**  .00

Category 2  **V**  .00

### Employee share scheme

Do you elect to be taxed this year on the discounts you received on all the qualifying shares, rights, options and stapled securities you acquired under an employee share scheme in 2008–09? If yes, print **Y** at **C** and write the assessable amount of the discount at **B**. If no, leave blank.

**C**  Assessable amount of the discounts **B**  .00

Tax withheld – lump sum payments in arrears **E**  .00

Taxable professional income **Z**  .00

## TOTAL SUPPLEMENT INCOME OR LOSS

For the amounts in the right-hand column at items **13** to **24** add up all the income amounts and deduct any loss amounts.

\$  .00 LOSS

Transfer this amount to the bottom of page 2 of your tax return at **I**

# DEDUCTIONS

## D10 Australian film industry incentives

**G**  .00

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

**Y**  .00

## D12 Personal superannuation contributions

Full name of fund  Account number  **H**  .00

Fund Australian business number

Fund tax file number

## D13 Deduction for project pool

**D**  .00

## D14 Forestry managed investment scheme deduction

**F**  .00

Product or private ruling information

Code **U**  Year **V**  / Number **W**

## D15 Other deductions – not claimable at items **D1** to **D14** or elsewhere on your tax return

Description of claim

Election expenses **E**  .00

Other deductions **J**  .00

## TOTAL SUPPLEMENT DEDUCTIONS

Add up all the deduction amounts in the right-hand column.

\$  .00

Transfer this amount to page 3 of your tax return at **D**

# TAX OFFSETS

Tax offsets – do not show cents

**T8 Superannuation contributions on behalf of your spouse** Contributions paid  .00 **A**  .00  
 You must also complete **Spouse details – married or de facto** on pages 6-7 of your tax return.

**T9 Zone or overseas forces** **R**  .00

**T10 20% tax offset on net medical expenses over the threshold amount** **X**  .00

**T11 Parent, spouse's parent or invalid relative** **B**  .00

**T12 Landcare and water facility** Landcare and water facility tax offsets brought forward from earlier years **T**  .00

**T13 Net income from working – supplementary section** **M**  .00  LOSS **We use this amount to work out your mature age worker tax offset entitlement. Do not include it in your total supplement tax offsets below.**

**T14 Entrepreneurs tax offset**  
 Small business entity aggregated turnover **K**  .00 Net small business entity income **N**  .00  CODE

**T15 Other tax offsets** If you are entitled to a tax offset for low income, do **not** write it anywhere on your tax return. The Tax Office will work it out for you. **C**  .00  CLAIM TYPE

**TOTAL SUPPLEMENT TAX OFFSETS** Add up all the tax offset amounts at items **T8**, **T9**, **T10**, **T11**, **T12** and **T15** \$  .00  
 Transfer this amount to page 4 of your tax return at **T**

# ADJUSTMENT

**A3 Amount on which family trust distribution tax has been paid** **X**  .00  
 If a trust, partnership or company made a distribution to you on which family trust distribution tax has been paid.

# CREDIT FOR INTEREST ON TAX PAID

**C1 Credit for interest on early payments – amount of interest** **L**

# TAXPAYER'S SIGNATURE

When you have completed your supplementary section, sign and date below.

Signature

Date

## What to do when you have completed this supplementary section

- Sign and date the supplementary section above
- Make sure you answer **YES** at *Taxpayer's declaration* question **1** on page 8 of your tax return.
- If you completed item **13** on page 9 and you were asked to complete the *Business and professional items schedule for individuals 2009*, attach your completed schedule to page 3 of your tax return.
- If you completed item **14** on page 9, or **15** or **16** on page 10, attach your completed *Business and professional items schedule for individuals 2009* to page 3 of your tax return.
- Attach your supplementary section to page 8 of your tax return.

**Don't forget to sign the Taxpayer's declaration on page 8 of your tax return.**























Taxpayer name: ANECITO MANTILLA

Tax file number: 821 022 525

Signature .....

**Individual non-business payment summary – 2008–09 (Downloaded)**

Date downloaded: 13/07/2009

Payer's name: HUNTER NEW ENGLAND AREA Payer's ABN: 24500842605 Branch: 1

HEALTH SERVI  
Period during which payments were made: 01/07/2008 to 30/06/2009 Type of payment: INB

Payments	Total amount	Tax return item
Gross payments – (whole dollars) (excluding amounts shown under 'Allowances', 'Lump sum payments', 'CDEP payments' and any 'other income')	128,305.00	1
Total allowances	1,656.00	2
Lump sum payments (whole dollars)		
Lump sum payment A	0.00	3
Lump sum payment B	0.00	3
Lump sum payment D	0.00	
Lump sum payment E	0.00	24
CDEP payments (whole dollars)	0.00	5
Other income (whole dollars) (eg exempt income or foreign source salary and wages)	0.00	*
Reportable fringe benefits amount	16,368.00	10
Total tax withheld (whole dollars)	45,224.00	

**\*Note: 11** This information cannot be pre-filled directly into your tax return. You should consult your records or your payer for details relating to this amount.

- Amounts for **Union/professional association fees** and **Workplace giving** are not shown. If your employer issued payment summary shows either of these amounts, you must complete **D5** – Other work-related expenses or **D8** – Gifts or donations to claim these amounts.

Retain this page for your records - the information on this page is NOT sent to the Tax Office.

Taxpayer name: **ANECITO MANTILLA**

Tax file number: **821 022 525**

Signature .....

### Interest summary – 2008–09 (Downloaded)

Date downloaded: 31/07/2009

Name of financial institution	Account number	Account name	No. of account holders	Your share gross interest	Your share TFN amounts withheld (less any refunded)	Total gross interest	Total TFN amounts withheld (less any refunded)
ST. GEORGE BANK LIMITED	*****421	ANECITO MANTILLA CHARINA MANTILLA	2	10.00	0.00	20.00	0.00
<b>Total</b>				<b>10.00</b>	<b>0.00</b>	<b>20.00</b>	<b>0.00</b>

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# E-tax estimate

for year ended 30 June 2009

	\$	\$
<b>Taxable income</b>		<b>128225.00</b>
Tax on your taxable income	37290.00	
Medicare levy	0.00	
Medicare levy surcharge	0.00	
Financial supplement repayment	0.00	
HELP repayment	0.00	
<b>Gross tax payable</b>		<b>37290.00</b>
<b>Subtract:</b>		
Tax withheld - salary and wage type income	45224.00	
Tax withheld - voluntary agreement	0.00	
Tax withheld - where ABN not quoted	0.00	
Tax withheld - labour hire or other specified payment	0.00	
Tax withheld - where TFN not quoted	0.00	
Franking credits	0.00	
Australian franking credits from a NZ company	0.00	
Foreign resident withholding credits and managed investment trust fund payments	0.00	
Share of credit for tax paid by trustee	0.00	
Tax offsets available (see page 2 for details)	5261.00	
Tax offsets used	5261.00	
Early payment interest credit	0.00	
<b>Total tax offsets &amp; credits subtracted</b>		<b>50485.00</b>
<b>Estimated refund due</b>	<b>for 2008-09</b>	<b>13195.00</b>

Calculations for: **ANECITO MANTILLA**

Date of print: **31/07/2009**

This calculation is an estimate and is based on the information supplied by you, and does not take into account any prior year assessments, or other situations outlined in the hyperlink "Tax estimate – important information" on the estimate screen.

**Retain this page for your records - the information on this page is NOT sent to the Tax Office.**

# Tax offsets:

The tax offsets included in the tax estimate have been calculated as follows:

Spouse / child-housekeeper / housekeeper	0.00
Senior Australians (SATO)	0.00
Superannuation	0.00
Private health insurance	4707.00
Education tax refund	0.00
Zone or overseas forces	0.00
Medical expenses	554.00
Parent / parent in law / invalid relative	0.00
Mature age worker	0.00
Entrepreneurs	0.00
Landcare and water facility	0.00
Land transport facilities or infrastructure borrowings interest	0.00
Joint Petroleum Development Area	0.00
Beneficiary or pensioner	0.00
Life insurance bonuses from item 22	0.00
Lump sum payments – 'A' amounts on payments summary, employment termination payments and superannuation lump sum payments	0.00
Foreign income tax credits allowed (amount available: 0.00)	0.00
Low income	0.00
Share of credit for tax paid by trustee - legal disability	0.00
National rental affordability scheme tax offset	0.00
Baby bonus claim	0.00
<b>Total available tax offsets</b>	<b>5261.00</b>

Calculations for: **ANECITO MANTILLA**

Date of print: **31/07/2009**

**Retain this page for your records - the information on this page is NOT sent to the Tax Office.**



### Allowances, earnings, tips, director's fees etc.

Description	Tax withheld	Gross payment
HUNTER NEW ENGLAND AREA HEALTH SERVICE 24500842605	0	1656
<b>Total</b>	<b>0</b>	<b>1656</b>

### Reportable fringe benefits amounts

Name of payer	Reportable fringe benefits
HUNTER NEW ENGLAND AREA HEALTH SERVICE 24500842605	16368
<b>Total</b>	<b>16368</b>

### Gross interest

Description	Your share TFN amounts withheld (less any refunded)	Your share of gross interest
ST. GEORGE BANK LIMITED *****421	0.00	10.00
ANZ Banking	0.00	3.79
<b>Total</b>	<b>0.00</b>	<b>13.79*</b>

\* The cent values will not be displayed on your tax return.

### Work related uniform, clothing and laundry

Description of expenses	Amount claimed
Laundry and Iron	145
<b>Total</b>	<b>145</b>

### Work related self-education expenses – general expenses

Description of expenses	Amount claimed
Handbook of Clinical Assessmen	288
Physician Education Program 09	320
<b>Total</b>	<b>608</b>

### Other work related expenses

Description of expenses	Amount claimed
NSW Medical Board registration	270.00
Iphone - Pocket PC	876.00
Passport Renewal	90.00
<b>Total</b>	<b>1236.00</b>

### Gifts or donations

Description	Amount claimed
kids cancer donation	10
<b>Total</b>	<b>10</b>

### Private health insurance

Fund ID	Membership number	Cover type	G	Gross premium	Medicare rebate	Reduction amount	Share %	Tax offset
MBF	50036045	C	4707				100	4707.00
<b>Total</b>			<b>4707</b>	<b>0</b>	<b>0</b>	<b>0</b>		<b>4707</b>

Taxpayer Name **ANECITO MANTILLA**  
Tax File Number **821 022 525**

Signature .....

**Net medical expenses**

<b>Description</b>	<b>Gross amount</b>	<b>Refundable amount</b>	<b>Net medical expense</b>
Charina Dental	1008	360	648
Charina Dental	290	87	203
Charina Professional	3611	709	2902
John Dental	919	400	519
<b>Total</b>	<b>5828</b>	<b>1556</b>	<b>4272</b>

**Parent, spouse's parent or invalid relative**

<b>Name of dependant</b>	<b>Type</b>	<b>SNI</b>	<b>Days</b>
spouse parents	P	12000	365

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