

PART A Electronic Lodgment Declaration (Form I)

This declaration is to be completed where a taxpayer elects to use an approved ATO electronic channel. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties may apply for failure to do so.

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 However, you cannot lodge your income tax form electronically if you do not quote your TFN.

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

Electronic funds transfer - direct debit

Where you have requested an EFT direct debit some of your details will be provided to your financial institution and the Tax Office's sponsor bank to facilitate the payment of your taxation liability from your nominated account.

Tax file number 333 766 162

Year 2017

Name Mrs Heather Lynette Sheppard

Declaration**I declare that:**

- the information provided to my registered tax agent for the preparation of this tax return, including any applicable schedules is true and correct, and
- the agent is authorised to lodge this tax return.

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

Signature

Date

PART B Electronic funds transfer consent

This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through an approved ATO electronic lodgment channel.

The declaration must be signed by the taxpayer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.

Important: Care should be taken when completing EFT details as the payment of any refund will be made to the account specified.

Agent's reference number

Account Name: RJ & HL Sheppard

I authorise the refund to be deposited directly to the specified account as above.

Signature

Date

PART C Family Assistance Office consent**This declaration is to be completed where:**

- you were the spouse of an Family Tax Benefit (FTB) claimant, or the spouse of a child care benefit claimant on 30 June of the year of this return - 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 Family Assistance Office (FAO) - AND
- your spouse has a debt due to the FAO or expects to have a FAO debt for the year of this return - AND
- you expect to receive a tax refund for the year of this return - AND
- you consent to use part or all of your tax refund to repay your spouse's FAO debt.

Declaration of consent:

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

Tax file number:

Year:

Name:

Spouse's name:

Spouse's CRN:

Spouse's date of birth:

Spouse's gender:

Signature:

Date:

Individual tax return

1 July 2016 to 30 June 2017

2017

Your tax file number (TFN)

333 766 162

See the Privacy note in the Taxpayer's declaration on page 15 of this return.

Are you an Australian resident?
Print **Y** for yes or **N** for no.
Have you included any attachments?
Print **Y** for yes or **N** for no.
Your name

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

Mrs

Surname or family name

Sheppard

Given names

Heather

Lynette

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

Print **Y** for yes or **N** for no.

If yes, print previous surname.

Your postal address

C/- Home Tax Rowville

PO Box 328

Has your postal address changed since completing your last tax return?

Print **Y** for yes or **N** for no.

Endeavour Hills

VIC

3802

Your home address

If the same as your current postal address, print AS ABOVE.

9 Wendy Court

Hampton Park

VIC

3976

Your mobile phone number
Your daytime phone number
(if different from your mobile phone number above)

Area code

03

Phone number

97061121

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 2017 you must complete item A1 on page 5 of this tax return.

11/05/1961

Final tax return

If you know this is your final tax return, print FINAL.

Electronic funds transfer (EFT)

We need your financial institution details to pay any refund owing to you, even if you have provided them to us before. Write the BSB number, account number and account name below.

BSB number
(must be six digits)

733374

Account number

522872

Use Agent Trust Account?

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

RJ & HL Sheppard

Income

1 Salary or wages

Your main salary and wage occupation

Administrator - Office

Occupation code 512111

Payer	Allowances	Lump A	Lump B	Tax Withheld	Gross
Trans-mit Pty Ltd				ABN: 12 100 711 957 12,864.00	58,780

Total tax withheld Add up the boxes. \$ 12,864.00

**Supplementary section
Income**

Refer to the supplement instructions before you complete item 13. If you are required to complete item 13 include deferred non-commercial business losses from a prior year at either X or Y as appropriate. Refer to the supplement instructions for the relevant code.

13 Partnerships and trusts

Non-primary production

Distribution from partnerships, less foreign income

Share of net income from trusts less capital gains, foreign income and franked distributions 798 L

Franked distributions from trusts 3,867

Landcare operations expenses J

Other deductions relating to amounts shown at O, U and C Y TYPE

Show amount of:
Capital gains from trusts at item 18 on page 9 and Foreign income at item 19

Net non-primary production amount 3,069 LOSS

Share of credits from income and tax offsets

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

Share of franking credit from franked dividends 1,160.00 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 M

Share of credit for tax paid by trustee S

Share of credit for foreign resident withholding amounts (excluding capital gains) A

Share of National rental affordability scheme tax offset B

Show amount of:
Credit for foreign resident capital gains withholding from trusts at item 18.

802 005 696	Y	T	I	R	And H Sheppard Family Trust
NPP income	[Investments			
		Net rental			
		Other	798	L	
PP Income			0		
Franked distributions	[Investments			
		Other	3,867		
Net small business inc	[Partnership			
		Trust			
Credits:					
				ABN	0.00
				Franking	1,160.00
				TFN	0.00
				Closely held trusts	0.00
				Tax paid by trustee	
				Foreign Resident Withholding	0.00
				Rental Affordability Scheme	0.00

15 Net income or loss from business

Primary production - transferred from Y item P8. B / [] LOSS

Net income or loss from carrying on a business of investing 1,647 / []
Net income or loss from carrying on a rental property business / []
Other income or loss relating to item 15 / []

Non-primary production - transferred from Z item P8. C / [] 1,647 / [] LOSS

If you show a loss at B or C you must complete item P9 on page 14.

Tax withheld - voluntary agreement D []
Tax withheld where Australian business number not quoted W []
Tax withheld - foreign resident withholding (excluding capital gains) E []
Tax withheld - labour hire or other specified payments F []

Taxpayer eligible for Small Business income tax offset (Y/N) ? Y

Net small business income A [] 1,647

Table with 2 columns: Description and Total amount in return. Rows include Item 15 Label B, Item 15 Label C, Item 17 Labels N, R, Foreign source business income, Business interest income, Business dividend income, Other business income, Business losses, and Less: Item 17 Label D, Other business deductions.

18 Capital gains

Did you have a capital gains tax event during the year? G N Print Y for yes or N for no.
Have you applied an exemption or rollover? M [] / [] CODE
Total current year capital gains H []
Net capital losses carried forward to later income years V []
Credit for foreign resident capital gains withholding amounts X []

You must print Y at G if you had an amount of a capital gain from a trust.

Net capital gain A []

19 Foreign entities

Did you have either a direct or indirect interest in a controlled foreign company (CFC)? I N Print Y for yes or N for no.

CFC income K []

Have you ever, either directly or indirectly, caused the transfer of property—including money—or services to a non-resident trust estate? W N Print Y for yes or N for no.

Transferor trust income B []

20 Foreign source income and foreign assets or property

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 N Print Y for yes or N for no.

21 Rent

Gross rent P [] 9,000
Interest deductions Q [] 9,616
Capital works deductions F []
Other rental deductions U [] 468

Net rent P less (Q + F + U) [] 1,084 / [] LOSS

TOTAL INCOME OR LOSS Add up the income amounts and deduct any loss amount in the [] boxes. [] 62,412 / [] LOSS

Deductions

D5 Other work related expenses E [] 290

D10 Cost of managing tax affairs M [] 500

Tax Agent Fees

500

TOTAL DEDUCTIONS

Items D1 to D add up the boxes

790

SUBTOTAL

TOTAL INCOME OR LOSS less TOTAL DEDUCTIONS

61,622

LOSS

TAXABLE INCOME OR LOSS

Subtract amounts at F and Z item L1 from amount at SUBTOTAL

61,622

LOSS

TOTAL TAX OFFSETS

Items T2 and T —add up the boxes

0

T8 Early stage venture capital limited partnership

K

T9 Early stage investor

L

M2 Medicare levy surcharge (MLS)

THIS ITEM IS COMPULSORY

If you do not complete this item you may be charged the full Medicare levy surcharge.

For the whole period 1 July 2016 to 30 June 2017, were you and all your dependants (including your spouse) - if you had any - covered by private patient HOSPITAL cover?

E

Y

Print Y for yes or N for no.

Number of days NOT liable for surcharge

A

365

Private health insurance policy details

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

Health insurer ID

B

AUF

Membership number

C

171210131

Your premiums eligible for Australian Government rebate

J

2,609

Your Australian Government rebate received

K

699

Benefit code

L

30

Tax claim code. Read the tax return instructions.

CODE

E

Health insurer ID

B

AUF

Membership number

C

171210131

Your premiums eligible for Australian Government rebate

J

898

Your Australian Government rebate received

K

233

Benefit code

L

31

Tax claim code. Read the tax return instructions.

CODE

E

Spouse details—married or de facto

Use related ref details?

Y

SHEPPRJ

If you had a spouse during 2016-17, 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 2016-17 print the name of your spouse on 30 June 2017 or your last spouse.

Surname or family name

Sheppard

First given name

Rodney

Other given names

John

Your spouse's date of birth

K

06/05/1962

Your spouse's gender

Male

X

Female

Indeterminate

Period you had a spouse - married or de facto

Did you have a spouse for the full year - 1 July 2016 to 30 June 2017?

L

No

Yes

X

From

M

If you did not have a spouse for the full year, write the dates you had a spouse between 1 July 2016 and 30 June 2017.

N

Did your spouse die during the year?

No

Yes

This information relates to your spouse's income

You must complete all labels

Pre-fill using related ref return details?
(Related ref for spouse details above must be answered Y)

Your spouse's 2016-17 taxable income

Your spouse's share of trust income on which the trustee is assessed under section 98 and which has not been included in 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

Your spouse's total reportable fringe benefits amounts

Employers exempt from FBT under section 57A of the FBTA 1986

Employers not exempt from FBT under section 57A of the FBTA 1986

Amount of Australian Government pensions and allowances (see Q6 Australian Government pensions and allowances in the tax return instructions) that your spouse received in 2016-17 (exclude exempt pension income)

Amount of exempt pension income (see Spouse details - married or de facto in the instructions) that your spouse received in 2016-17. Do not include any amount paid under the Military Rehabilitation and Compensation Act 2004

Amount of your spouse's reportable superannuation contributions (which is the total of reportable employer superannuation contributions and deductible personal superannuation contributions)

Other specified exempt payments that your spouse received (see Spouse details - married or de facto in the instructions)

Your spouse's target foreign income

Your spouse's total net investment loss (total of net financial investment loss and net rental property loss)

Child support your spouse paid

Your spouse's taxed element of a superannuation lump sum for which the tax rate is zero (see M2 Medicare levy surcharge in the tax return instructions)

Spouse's total ATI
(ATO validation purpose only)

 /

Income tests

You must complete this section.

If you had a spouse during 2016-17 you must also complete Spouse details - married or de facto on page 7.

IT1 Total reportable fringe benefits amounts

If the amount is zero, write 0.

Total reportable fringe benefits amounts
(for ATO validation only)

Employers exempt from FBT under section 57A of the FBTA 1986

Employers not exempt from FBT under section 57A of the FBTA 1986

IT2 Reportable employer superannuation contributions

IT3 Tax-free government pensions

IT4 Target foreign income

IT5 Net financial investment loss

IT6 Net rental property loss

Net rent from partnerships - Item 13	0	
Net rent - Item 15	0	
Net rent from partnerships/sole trader activities - Item 16	0	
Total foreign rental income or loss - Items 20R, 24Y less D15J	0	
Net rent - Item 21	1,084	L
Less: Deduction - Item D6	0	
TOTAL (transfers to Label Y - LOSS amounts only)	1,084	L

IT7 Child support you paid

Z [] 0

(For ATO validation only)

Adjusted taxable income

62,706 / []

Estimated total income

74,062 / []

Estimated eligible income

61,993

Non-resident foreign income

[]

Business and professional items section

P1 Personal services income (PSI)

Print X in the appropriate box.

Did you receive any personal services income?

YES [] NO [X] Read on.

NO [] Go to item P2.

Part A

Did you satisfy the results test?

P NO [] YES [X] Read on.

YES [X] Go to item P2.

P2 Description of main business or professional activity

Art School Operation

Industry code A 82120

P3 Number of business activities

B 1

P5 Business name of main business and Australian business number (ABN)

Folk Art Haven [] ABN []

P6 Business address of main business

9 Wendy Court []
Hampton Park Suburb VIC State D 3976 Postcode

P8 Business income and expenses

Income	Primary production	Non-primary production	Totals
Gross payments where Australian Business Number not quoted	C []	D []	[]
Gross pmts subject to foreign resident withholding (excluding capital gains)	[]	B []	[]
Gross payments - voluntary agreement	E []	F []	[]
Gross payments - labour hire or other specified payments	N []	O []	[]
Assessable government industry payments	G [] / []	H [] / []	[]
Other business income	I [] / []	J 3,213 / []	3,213 / []
Total business income	[] / []	3,213 / []	3,213 / []

Expenses

Opening stock	<input type="text"/>	<input type="text"/>	K	<input type="text"/>
Purchases and other costs	<input type="text"/>	<input type="text"/>	L	<input type="text"/>
Closing stock	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	M	<input type="text"/> / <input type="text"/> TYPE
Cost of sales (K + L - M)	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>		<input type="text"/> / <input type="text"/>
Foreign resident withholding expenses (excluding capital gains)	<input type="text"/>	<input type="text"/>	U	<input type="text"/>
Contractor, sub-contractor and commission expenses	<input type="text"/>	<input type="text"/>	F	<input type="text"/>
Superannuation expenses	<input type="text"/>	<input type="text"/>	G	<input type="text"/>
Bad debts	<input type="text"/>	<input type="text"/>	I	<input type="text"/>
Lease expenses	<input type="text"/>	<input type="text"/>	J	<input type="text"/>
Rent expenses	<input type="text"/>	<input type="text"/>	K	<input type="text"/>
Interest expenses within Australia	<input type="text"/>	<input type="text"/>	Q	<input type="text"/>
Interest expenses overseas	<input type="text"/>	<input type="text"/>	R	<input type="text"/>
Depreciation expenses	<input type="text"/>	<input type="text"/> 110	M	<input type="text"/> 110
Motor vehicle expenses	<input type="text"/> / <input type="text"/>	<input type="text"/> 561 S	N	<input type="text"/> 561 / <input type="text"/> S TYPE
Repairs and maintenance	<input type="text"/>	<input type="text"/>	O	<input type="text"/>
All other expenses	<input type="text"/>	<input type="text"/> 895	P	<input type="text"/> 895

Total expenses

Add up the boxes for each column.

S	<input type="text"/>	/	<input type="text"/>	T	<input type="text"/> 1,566	/	<input type="text"/>	<input type="text"/> 1,566	/	<input type="text"/>
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Reconciliation items

Section 40-880 deduction	<input type="text"/>	<input type="text"/>	A	<input type="text"/>
Business deduction for project pool	<input type="text"/>	<input type="text"/>	L	<input type="text"/>
Landcare operations and business deduction for decline in value of water facility, fencing asset and fodder storage asset	<input type="text"/>	<input type="text"/>	W	<input type="text"/>
Income reconciliation adjustments	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	X	<input type="text"/> / <input type="text"/>
Expense reconciliation adjustments	<input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/>	H	<input type="text"/> / <input type="text"/>

Net income or loss from business this year

B	<input type="text"/>	/	<input type="text"/>	C	<input type="text"/> 1,647	/	<input type="text"/>	<input type="text"/> 1,647	/	<input type="text"/>
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Deferred non-commercial business losses from a prior year

D	<input type="text"/>	E	<input type="text"/>	<input type="text"/>
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Net income or loss from business

Y	<input type="text"/>	/	<input type="text"/>	Z	<input type="text"/> 1,647	/	<input type="text"/>	<input type="text"/> 1,647	/	<input type="text"/>
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Transfer the amounts at labels Y and Z to item 15 on page 9.

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.

**Taxpayer's
Signature**

Date

Day	Month	Year
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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

I,

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

Day	Month	Year
26	04	2018

Client's reference

Contact name

Agent's telephone number

Area code	Telephone number
03	97061121

Agent's reference number

Depreciation Worksheet

2017

Title Plant & Equipment
Transfer to 4 Business Folk Art Haven
Private Use % (default private use % for this worksheet)

Total Cost	Opening	Acquisition Date	Acquisition Cost	Total Value	Rate %	Type P/D	Decline in Value	Private Portion	Closing
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All Assets (1)

Studio Set Up									
4,400	3,093		0	3,093	2.50	P	110	0	2,983

Total Cost	Opening	Acquisition Cost	Total Value	Decline in Value	Private	Closing
4,400	3,093	0	3,093	110	0	2,983

	Deduct for Private Use	<input type="text" value="0"/>
	Net Depreciation	<input type="text"/>
Disposals: [Deduct for Private Use	<input type="text"/>
	Net Adjustment	<input type="text"/>
	Total Claimed for Depreciation	<input type="text" value="110"/>

Total Assets - 1 [On hand the full year - 1, Acquisitions - 0, Disposals - 0]

Work Related Expenses Schedule 2017

D5 Other work related expenses

Please explain how each expense claimed (except FID, union, or overtime meal allowance) related to your work.

Books & stationery for work related.

Other work related expenses

Expense type	Details of "O" code	Business %	Amount	Inv/Rcpt	Claimed \$
B			290		290
Evidence / calculation code	I				

	Total claimed \$	290
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Taxpayer declaration:

I declare that the information I have given is true and correct and that I hold the necessary evidence to support my claims.

Signature

Date

Tax agent declaration:

I declare that I have explained to my client the information necessary to complete this form.

Signature

Date

2017 Rental Property Schedule

Address of Rental Property

7 Wendy Court

Hampton Park

VIC

3976

Date property first earned rental income

05/07/2011

Number of weeks property was rented this year

52

Private Use %

Ownership**% owned**

Sheppard	Rodney	SHEPPRJ	50.00
Sheppard	Heather	SHEPPHL	50.00

Income**Return**

Gross rental income	18,000	9,000
Other rental related income		
Gross Rent	18,000	9,000

Expenses**Total****Prv %****Return**

K Insurance	936	468
L Interest On Loans	19,232	9,616
Total expenses	20,168	10,084

Net Rent

2,168

/ L

1,084

/ L

Business Worksheet**Non-Primary Production 2017**

Business Name	Folk Art Haven		
Business Activity	Art School Operation	82120	
Place of Business	9 Wendy Court		
	Hampton Park	VIC	3976
Ceased business during year	<input type="checkbox"/>	Commenced business during year	<input type="checkbox"/>
Number of business activities	<input type="text" value="1"/>	Consolidated subsidiary member	<input type="checkbox"/>

INCOME

Description	Art School Supplies		
Sales		<input type="text" value="3,213"/>	
Plus goods for own use		<input type="text"/>	
Gross Sales		<input type="text" value="3,213"/>	
Less cost of goods sold:			
Opening stock		<input type="text"/>	
Plus purchases		<input type="text"/>	
Less Closing stock	-	<input type="text"/>	
Cost of sales		<input type="text" value="0"/>	
	Trading income	<input type="text" value="3,213"/>	<input type="text"/>
	Gross trading income	<input type="text" value="3,213"/>	<input type="text"/>
Plus:			
	Business income	<input type="text" value="3,213"/>	<input type="text"/>

EXPENSES

Less:			Private %
	Transf in: Deprec \$110	<input type="text" value="110"/>	<input type="text"/>
20	Insurance Premiums	<input type="text" value="572"/>	<input type="text"/>
34	Printing And Stationery	<input type="text" value="323"/>	<input type="text"/>
28	Motor (set Rate) S	<input type="text" value="561"/>	<input type="text"/>
	Less expenses	<input type="text" value="1,566"/>	
Plus Reconciliation to Taxable Income/Loss			
	<input type="text"/>	<input type="text"/>	<input type="text"/>
TOTAL BUSINESS INCOME/LOSS		<input type="text" value="1,647"/>	<input type="text"/>

DECLARATIONS

Depreciating assets first deducted	—	┌	└	Intangible	<input type="text"/>
				Other	<input type="text"/>
Termination value of depreciating assets	—	┌	└	Self-assessed effective life?	<input type="text"/>
				Intangible	<input type="text"/>
				Other	<input type="text"/>
Did you recalculate the effective life for any assets this year?					<input type="text"/>

Total adjustable values at end of year	<input type="text" value="2,983"/>
Assessable balancing adjustments on disposal of intangible depreciating assets	<input type="text"/>
Deductible balancing adjustments on disposal of intangible depreciating assets	<input type="text"/>
Debtors	<input type="text"/>
Current assets	<input type="text"/>
Total assets	<input type="text"/>
Creditors	<input type="text"/>
Current liabilities	<input type="text"/>
Total liabilities	<input type="text"/>
Closing stock code	<input type="text"/>
Trading stock election	<input type="text"/>
Salary and wage action code	<input type="text"/>
Fringe benefit employee contributions	<input type="text"/>
Did you sell any goods or services using the internet?	<input type="text"/>
Hours taken to prepare business and professional items schedule	<input type="text"/>
Unpaid present entitlement to a private company	<input type="text"/> / <input type="text"/>

Income Tax Return Tax Estimate

2017

Mrs Heather Lynette Sheppard

TFN: 333 766 162

Tax Payable for Individual

Taxable Income	61,622
Tax Free Part	18,200
Tax Payable on Taxable Income	11,574.15

Sub-Total \$ 11,574.15

Less Offsets:	Offsets (T2 to T11)	0.00
	Private Health Insurance Offset	0.00
	Seniors / Pension / Beneficiary Offset	0.00
	Small business income offset (TNSBI: 1647)	24.75
	Low Income Offset	75.67
	Lump Sum	0.00
	Other Offsets	0.00

Sub-Total \$ 100.42

11,473.73

Plus:	Medicare Levy	1,232.44
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Sub-Total \$ 1,232.44

12,706.17

Less Credits:	Tax withheld - salary & wage type income	12,864.00
	Arrears tax withheld	0.00
	Foreign Tax Credits	0.00
	TFN Amounts (credits)	0.00
	Franking Tax Offset (refundable)	1,160.00
	Other Refundable Credits	0.00
	Other Amounts withheld - ABN, Vol, Labour, Foreign	0.00
	PAYG Income Tax Instalments	0.00

Sub-Total \$ 14,024.00

Estimated Tax Refund 1,317.83

DISCLAIMER

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This estimate is provided without warranty of any kind.
It is subject to legislative changes and includes estimates of currently unknown rates.
WARNING : Amounts shown may be adjusted by amounts not included in this return.