



Employment termination payment schedule

Use the information on your income statements and payment summaries to complete this schedule.

When completing this form

- Print clearly in BLOCK LETTERS using a black or blue pen.

S M I T H S T

- Place in ALL applicable boxes.



717440622

Employment termination payment schedule for year ending 30 June

Payee's details

Full name

Title: Mr Mrs Miss Ms Other

Family name

First given name Other given name

Tax file number (TFN)

See the **Privacy** note in the *Taxpayer's declaration*.

Payment details

Date of payment Day / Month / Year

Tax withheld \$

Taxable component \$

Employment termination payment (ETP) CODE

Payer's Australian business number (ABN)

Date of payment Day / Month / Year

Tax withheld \$

Taxable component \$

Employment termination payment (ETP) CODE

Payer's Australian business number (ABN)



Date of payment / /

Tax withheld \$, .

Taxable component \$, . CODE

Employment termination payment (ETP)

Payer's Australian business number (ABN)

Date of payment / /

Tax withheld \$, .

Taxable component \$, . CODE

Employment termination payment (ETP)

Payer's Australian business number (ABN)

Taxpayer's declaration

If the schedule is not lodged with the income tax return you are required to sign and date the schedule.

Important

Before making this declaration check to ensure that all the information required has been provided on this form and any attachments to this form, and that the information provided is true and correct in every detail. If you are in doubt about any aspect of the tax return, place all the facts before the ATO. The income tax law imposes heavy penalties for false or misleading statements.

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 disclose it to other government agencies. For information about your privacy go to ato.gov.au/privacy

I declare that the information on this form is true and correct.

Signature

Date / /

Contact name

Daytime contact number (include area code)

When you have completed the schedule attach it to page 3 of your tax return.

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