Income Tax Return for the year 2019 - Form 12



(Employees, Pension Recipients & Non-Proprietary Directors)

Services through my Account on www.revenue.ie
Your PPSN
Remember to quote this number in all correspondence or when calling at your Revenue office.
This form is to be completed and returned to your Revenue office on or before 31 October 2020.
Return Address
Use any envelope and write 'FREEPOST' above the address. NO STAMP REQUIRED
If the Return Address of your Revenue office is not shown on this page, check any recent correspondence from Revenue or visit the 'Contact us' page on www.revenue.ie to find the address to which you should submit this form.
RETURN OF INCOME, CHARGES AND CAPITAL GAINS FOR THE YEAR ENDED 31 DECEMBER 2019 CLAIM FOR TAX CREDITS, ALLOWANCES AND RELIEFS FOR THE YEAR ENDED 31 DECEMBER 2019
This Tax Return should be completed by a person whose main source of income is from a PAYE employment or pension or by non-proprietary company director who pays all his / her Income Tax under the PAYE system (see notes below). NOTICE: YOU ARE HEREBY REQUIRED, UNDER SECTION 879 TAXES CONSOLIDATION ACT 1997, BY THE INSPECTOR OF TAXES NAMED ABOVE TO PREPARE AND DELIVER, ON OR BEFORE 31 OCTOBER 2020, A TAX RETURN ON THIS PRESCRIBE FORM FOR THE YEAR 1 JANUARY 2019 TO 31 DECEMBER 2019
NOTE:
1. An individual who is a 'chargeable person' for the purposes of Income Tax Self-Assessment should complete a Form 11 Tax Return ar Self-Assessment for the year 2019.
2. An individual with a PAYE source of income and with total gross income from all non-PAYE sources (including income subject to DIRT of €30,000 or more is regarded as a 'chargeable person' for Self-Assessment and must file a Form 11 for that year.
3. An individual with a PAYE source of income and with net assessable non-PAYE income (including income subject to DIRT), of €5,000 more is regarded as a 'chargeable person' for Self-Assessment and must file a Form 11 for that year.
4. An individual with a PAYE source of income and net assessable non-PAYE income less than €5,000 (after losses, capital allowances other reliefs), and where the income is coded against PAYE tax credits or fully taxed at source, is not regarded as a 'chargeable personal Capital Gains Tax Self-Assessment system applies to all individuals, including directors.
Civil Penalties / Criminal Prosecution - Tax law provides for both civil penalties and criminal sanctions for the failure to make a return,
making of a false return, facilitating the making of a false return, or claiming tax credits, allowances or reliefs which are not due. In the evor of a criminal prosecution, a person convicted on indictment of an offence may be liable to a fine not exceeding €126,970 and/or to a fine up to double the difference between the declared tax due and the tax ultimately found to be due and/or to imprisonment.
YOU MUST SIGN THIS DECLARATION I DECLARE that, to the best of my knowledge and belief, this form contains a correct return in accordance with the provisions of the Taxes Consolidation Act 1997 of: - all the sources of my income and the amount of income derived from each source in the year 2019, and - all disposals and acquisitions of chargeable assets and the amount of chargeable gains that accrued to me in the year 2019.
I DECLARE that, to the best of my knowledge and belief, all the particulars given as regards gifts and inheritances received, tax credits, allowances and reliefs claimed and as regards outgoings and charges are stated correctly.
Signature Date Date
Capacity of Signatory (Insert ⊠) Tax Payer ☐ Tax Advisor ☐ Other ☐ (Specify)
Main Residence Address
Eircode Telephone Number
Agent's Details Tax Adviser Identification No. (TAIN) Client's Ref.

A non-assessable spouse or other civil partner electing to be the assessable spouse or nominated civil partner for the year 2019,

for the purposes of completing this Form 12, must include a letter to this effect with the completed Form 12.

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Panel	Page No.(s)	Panel No.(s)
Personal Details	4	1 - 2
 Income from Irish Employments, Offices (including Non-Proprietary Directorships), Pensions, etc. Income from Foreign Offices or Employments Attributable to the Duties of those Offices and Employments Exercised in the State 	5	3 - 12
Income from a Trade or Profession	7	13 - 14
 Income from Fees, Irish Rental Income, Covenants, Distributions, etc. and income chargeable under S. 811B 	8	15 - 22
Exempt Income	10	23 - 25
Property Relief Surcharge - S. 531AAE	10	26
• Foreign Income (Dividends, Employments, Pensions, Rents, etc.)	10	27 - 41
Annual payments, Charges and Interest paid	12	42 - 51
 Claim for Tax Credits, Allowances and Reliefs for the year 2019 	14	52 - 75
Capital Acquisitions in 2019	19	76
Capital Gains and Chargeable Assets	19	77
Property Based Incentives on which Relief is claimed in 2019	20	78

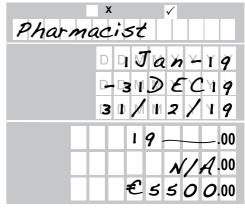
How to fill in this Tax Return

- 1. Use CAPITAL LETTERS. Write clearly and accurately within box(es).
- 2. Insert ⊠ in box as required.
- 3. Any panel(s) or section(s) that do not require an entry should be left blank.
- 4. In date boxes enter the format of DD/MM/YYYY, see example of correct and incorrect entries below.
- 5. All monetary entries, including entries in the Foreign Income panels, should be in Euro denomination. Do not enter € symbol.
- 6. Where **.00** is shown in monetary panels, enter figures in whole Euro ignore cent. Round down your income to the nearest Euro, and round up your credits, allowances, reliefs, expenses and tax paid to the nearest Euro it's to your benefit. Where **.00** is not shown, cents should be entered.
- 7. Legislative references relate to Sections of the Taxes Consolidation Act 1997, unless otherwise stated.

CORRECT

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	I		1	9	0	0	0	.00
								.00
				5	5	0	0	.00

Example of correct and incorrect entries.



INCORRECT

- P	PSN		Any panel(s) or se	ction(s) that do not	require an entry should be left blan	nk
PEF	RSONAL DETAILS					
1 - In:	sert ⊠ in the box to indicate your civil statu	ıs:			changed in 2019 insert ⊠ in the I	box
(a)	Single		to indicate you	r previous status	and state date of change:	
(b)	Married		Single	Married	In a Civil Partnership]
(c)	In a Civil Partnership		Widowed		Surviving Civil Partner	
(d)	Married but living apart		Married		In a Civil Partnership]
	If wholly or mainly maintaining your Spouse insert ⊠ in the box		but living apart Divorced		but living apart Former Civil Partner	
(e)	In a Civil Partnership but living apart					_
	If wholly or mainly maintaining your Civil Partner insert ⊠ in the box		Date of Marriag	ge		
(f)	Widowed		Date of Separa	tion or Divorce	D D / M M / Y Y Y	
(g)	A Surviving Civil Partner		Chausala ar Cir	vil Dortnorto		- -
(h)	Divorced		Spouse's or Cir date of death	vii Faitilei S	D D / M M / Y Y Y	
(i)	A former Civil Partner					
If mai	ried or in a civil partnership, insert ⊠ in th	e box to indicate	e basis of assessr	ment applicable fo	or 2019:	
Jo	nt Assessment Separ	ate Assessment		Single Treatme	ent 🔲	
Tax C	wish to claim Widowed Person or Survivir redit state date of death of your spouse or		with Qualifying Cl	hild DD/		
State	the number of Qualifying Children			Ш		
Spou	se's or civil partner's details					
Name					PPSN	
			_	Self	Spouse or Civi	I Partner
State	your / your spouse's or civil partner's Date	e(s) of Birth)		D/M M/Y		YYY
Resi	dence status for 2019					
	year 2019, insert ⊠ in the box(es) if r your spouse or civil partner were:	Non-resident		П	П	
you o	i your spouse or civil partitel were.	Not ordinarily	resident		ā	
		Not domiciled	Coldon			
	19 if you and / or your spouse or civil partn per State of the European Communities (E	er were residen				
	Resident Aggregation Relief	,	,			
	e your spouse / civil partner is not resident	t and not all of y	our joint income i	s chargeable to ta	ax in Ireland, additional relief, kn	own as
	Resident Aggregation Relief (NRAR), may	be due.		_		
If yes	, please provide spouse / civil partner deta	iils:				
(a)	Country of residence in 2019		-			
(b)	Tax Identification Number in country of re	esidence				
(c)	State total world wide income in Euro an	d complete sec	tion on foreign inc	come (panels 27-	41)	.00
Medi	☑ in the box(es) if you or your spouse or cal Card or had entitlement to one under E Ponly Card does not qualify as a Full Med	U Regulations a				

PPSN Any pan	nel(s) or section(s) that do not require an	entry should be left blank
2 - Non-Proprietary Directorships		
List all Non-Proprietary Directorships in respect of you and / or your spouse	e or civil partner and state the percenta	ge shareholding in each Company
Self (%)	Spouse or Civil I	Partner (%)
INCOME FROM IRISH EMPLOYMENTS, OFFICES (IN PENSIONS, ETC. INCOME FROM FOREIGN OFFICE DUTIES OF THOSE OFFICES AND EMPLOYMENTS (Write the name of the employer or the source of the pension opposite	ES OR EMPLOYMENTS AS S EXERCISED IN THE STA	TTRIBUTABLE TO THE
3 - Employments subject to PAYE (including income subjec		performance in the
State of the duties of foreign employments)	Self	Spouse or Civil Partner
Employer's Name		
Employer's PAYE Registered Number		
The following details are available from your final payslip for 2019		
Pay for USC	.00	.00
USC paid		
Pay for income tax	.00	.00
Income tax paid		
If any of the above employment income has been subjected to non-refundable foreign tax, insert ⊠ in the box(es)		
Foreign Tax Amounts Amount of income included above that has been subjected to non-refundable foreign tax	.00	.00
Amount of non-refundable foreign tax paid on the income		
Foreign jurisdiction where the employment was exercised		
Note: If the tax is refundable by the foreign jurisdiction, a claim for	credit should not be made here.	
If you received a performance-related bonus payment from a speci of €20,000 and have suffered USC at the rate of 45% on this paym		
If you are related to your employer by marriage or otherwise, state relationship		
4 - Pension(s) / Annuities (subject to PAYE)		
Name of Payer(s)		
Pension Company PAYE Registered Number		
The following details are available from your final payslip for 2019 Pension / income for USC	.00	0.00
USC paid		
Pension / income for income tax	.00	.00
Income tax paid		
5 - Withdrawal of funds from AVC		
Amounts of funds withdrawn from an AVC under S. 782A Amount of tax deducted	.00	.00

PPSN	lei(s) or section(s) that do not require	an entry should be left blank
	Self	Spouse or Civil Partner
- Lump sums from Relevant Pension Arrangements (S. 790)AA)	
(a) Amount of lump sum(s) paid between 7/12/2005 and 31/12/2018, both dates inclusive	.00	.00
(b) (i) Amount of lump sum(s) paid in 2019		
(ii) Amount of lump sum paid in 2019 which was paid under the r		
of a Qualifying Overseas Pension Plan (QOPP) (S. 790AA(17	('))	.00
(c) Tax free amount, if any, for 2019	.00	.00
(d) Amount of excess lump sum(s) for 2019	.00	.00
(e) Portion of amount at (d) chargeable under Case IV at the standard rate (S. 790AA(3)(a)(i) or (3)(b)(i)(I)) (Do not include any amount entered at (g)(i))	.00	.00
(f) Portion of amount at (d) chargeable under Schedule E (Note: this income should also be included with employment income subject to PAYE and income liable to USC)	.00	.00
(g) Where amount at (d) includes an amount paid under the rules of		
 (i) Portion of amount at (d) chargeable under Case IV at the star rate determined in accordance with S. 790AA(3)(a)(i) or (3)(b (Do not include any amount entered at (e)) 		.00
(ii) Portion of amount at (d) chargeable under Case IV at the rates determined in accordance with S. 790AA(3)(a)(ii), (3)(b)(i)(II) or (3)	00. (ii)(d)(.00.
- Payments from Department of Employment Affairs and So	ocial Protection	
beneficiary has an adult dependant. For tax purposes, the State per the increased adult dependant payment in the relevant field on the re credit. Their spouse or civil partner is not entitled to the Employee to Enter details of any State Pension / Illness Benefit / Occupational Inj Pre-Retirement Allowance / Maternity Benefit / Paternity Benefit / Ad	eturn. The State pension recipien ax credit in respect of the adult de ury Benefit / Jobseeker's Benefit	nt will be due the Employee tax ependant payment. / Carer's Allowance /
Type of payment		
Taxable amount of payment in 2019	.00	.00
- Distributions from Approved Retirement Funds, Approved	d Minimum Retirement Fund	s & PRSA (Part 30 Chs 2 & 2A)
(a) Distributions from an Approved Retirement Fund (S. 784A)		.00
(i) Amount of USC deducted in 2019		
(ii) Amount of tax deducted in 2019		
(b) Distributions from an Approved Minimum Retirement Fund (S. 78	4C) .00	.00
(c) Distributions from a PRSA (S. 787G)	.00	.00
- Other Payments (for example, Payments received on comin conditions of employment, or lump sum payments paid		
Name of Payer(s)	<u> </u>	
Gross amount of payment(s)	.00	.00
Nature of Benefit(s)	<u> </u>	
Amount chargeable to tax	.00	.00
 O - Foreign Earnings Deduction Where you are claiming relief under S. 823A, state the following: (a) (i) Country 		
(ii) Number of qualifying days spent there		_
(b) (i) Country (ii) Number of qualifying days apont there		
(ii) Number of qualifying days spent there	 	 - - - - - - - -
(c) Amount of relief claimed	vour donorture from and return to	Iroland and the leastion(s) at which

Please attach a statement from your employer showing the dates of your departure from and return to Ireland and the location(s) at which the duties of your employment were performed while abroad.

PPSN Any pa	anel(s) or section(s) that do not require a	an entry should be left blank
	Self	Spouse or Civil Partner
11 - Benefits from Employments / Non-Proprietary Directors	ships	
Most benefits-in-kind are taxed at source, however, some payments Any taxable benefits not taxed at source should be entered here. Nature of Benefit	s including payments under PRSAs	are not.
Taxable benefits: (not taxed at source under PAYE)	.00	.00
12 - Employments / Offices / Pensions not subject to PAYE	deductions	
Description of Income		
Amount of Income	.00	.00
INCOME FROM A TRADE OR PROFESSION		
13 - Income from a Trade or Profession	TRADE 1/	TRADE 2/
(Only use this form if your Total Gross non-PAYE income from all sources is within income thresholds - see note on page 1)	PROFESSION 1	PROFESSION 2
Insert \boxtimes in the box(es) to indicate to whom the income in each column r	refers. Self Spouse or Civil Partner	Self Spouse or Civil Partner
Description of Trade or Profession – you must clearly describe the trade		
If sharefarming in the year 2019 insert ⊠ in the box		
Commencement Date		
Accounting Period End Date		
Gross Income	.00	.00
Adjusted / Assessable Net Profit	.00	.00
Adjusted Net Loss	.00	.00
Unused Capital Allowances from a prior year	.00	.00
Capital Allowances for year 2019	.00	.00
(a) If you wish to claim under S. 381, to set any loss in the trade in the 2019 (other than a relevant loss as defined in S. 381B) against y other income, enter the amount of the loss. Claim to be made or before 31/12/2021.	our .00	.00
(b) If you wish to claim under S. 381 to set a relevant loss, as define in S. 381B, made in the year 2019 against your other income, er the amount of the loss. Claim to be made on or before 31/12/202 (Note: relief is restricted to a maximum of €31,750)	nter .00	.00
(c) If there are no/insufficient profits, and you wish to claim unused current year Capital Allowances in computing a loss made in the trade in the year 2019 (S. 392), enter the amount of unused Cap Allowances. Claim to be made on or before 31/12/2021.		.00
(d) Total loss for offset against other income (by virtue of S. 381 and / S. 392)	or	.00
14 - Credit for Professional Services Withholding Tax (PSW	/T)	
Gross withholding tax (before any interim refund) related to the baperiod for 2019 on fees for Professional Services	-	

Г	PPSN Any panel(s	s) or se	ectior	n(s)	that c	lo not	require	an entry sh	ould be	left bla	ank	コ
	ICOME FROM FEES, IRISH RENTAL INCOME, CO	VEN	ΙΔΝ		Self S. D	IST	RIBL		Spouse		ivil Pa	artner
	ND INCOME CHARGEABLE UNDER S. 811B				-, –				, –	•		
15	Fees, Commissions, etc. not included elsewhere Fees, commissions, S. 811B income, etc. from sources other than en			s or	dire	ctors	nips					
	(Emoluments from employments, etc. should be shown on page	s 5-7)) 					_				
	Description of Income			_				L				
40	Total amount of Income		Ш				.00					.00
16	Fig. 1. From Relief If you wish to avail of Rent-a-Room relief, state the amount of gross											
	rental income received in the year 2019 for room(s) in a 'Qualifying Residence'. Do not include this amount in Panel 17 below.						.00					.00
	If you do not wish to avail of Rent-a-Room relief, insert \boxtimes in the box(e include the income in Panel 17 under Gross Rent Receivable.	es) an	d									
17	* Where a claim to tax relief on property based incentives is include below, insert ⊠ in the box(es) and give details in Panel 78 on page 20		iis re	turr	1							
	Where the registration requirements of Part 7 of the Residential Tenal Act 2004 have been complied with in respect of all tenancies which en in relation to residential premises in the year 2019, insert ⊠ in the box	xisted										
	Number of Properties let											
	Number of Tax Incentive Properties			_								
	Area in hectares, if applicable											
	Non-resident landlord (where the rent is paid directly to the landlord or	to th	e lan	dlo	rd's b	ank a	accoun	t either in tl	ne Stat	e or a	broad)
	(a) State the PPSN of tenants(s)								Ш			Ш
	(b) State the amount of Irish tax withheld					T	.00			П		.00
	Gross Rent Receivable		H		\pm	÷			\vdash	$\overline{\Box}$	\pm	
	Add Clawback of Section 23 Relief		H		+	<u> </u>	.00		H	${}^{\rm H}$	+	.00
			Н	Н	_	<u> </u>	.00		井	$\pm \pm$	+	.00
	Less: Repairs		Ш				.00		Щ	Щ		.00
	Allowable interest						.00					.00
	Amount of additional 'Relevant interest' claimed for the years 2017 and 2018 where a relevant undertaking under S. 97(2K) been made						.00					.00
	Pre-letting expenditure on vacant properties allowed by S. 97A						.00		П	П		.00
	Other		H	Ħ	\pm	╈			\vdash	Ħ	╁	1.99
	* Rented Residential Relief (Section 23) where 2019 is the first year of	of clair	$_{ extstyle m}$	Ш			.00		Щ			.00
	Net Rental Income (after expenses but before Capital Allowances)						.00		П			.00
	Net Rental Loss (after expenses but before Capital Allowances)						.00		П			.00
	Capital Allowances brought forward from a prior year		П				.00			T		.00
	Note: As provided for in Part 12, Chapter 4A, passive investors strained forward beyond 2014 or the tax life of the building or structure.	hould cture	not if la	inc iter	lude	any		accelerat	ted cap	ital a	llowa	
	* Capital/Balancing Allowances for the year 2019						.00		Ш			.00
	In respect of any Living City Initiative (S. 372AAC) capital allowances, enter the amount of capital allowances. (Note, your first claim for relief respect of Living City Initiative must be made on the online Form 12.)	f in					.00					.00
	Capital Allowances used against rental income in the year 2019						.00					.00
	Capital Allowances available for carry forward or offset						.00		П			.00
	Excess Case V Capital Allowances						.00					.00
	If you wish to elect under S. 305(1)(b) to set any unused Capital Allow for 2019 against your other income, state the amount of unused Capital											
	(a) To which S. 409A applies (restricted to €31,750)						.00	_		\prod		.00
	(b) To which S. 409A does not apply (no restriction applies)						.00			\prod		.00
	Losses - Amount of unused losses from a prior year						.00			\prod		.00
L	RPC012329_EN_WB_L_1											

	PPSN Any	panel(s) or section(s) that do not require an	entry should be left blank
		Self	Spouse or Civil Partner
18 -	- Payments received under a Legally Enforceable Main	tenance Arrangement from which	Irish Tax was not deducted
	Gross amounts (exclude any amounts in respect of children)	.00	.00
19	- Untaxed Income arising in the State		
	Irish Government Stocks	.00	
	Irish Exchequer Bills	.00	1.00
	Irish Credit Union Dividends	.00	.00
	Other Investments	.00	.00
	Total untaxed income arising in the State	.00	.00
20	- Irish Deposit Interest		
	Number of ordinary Deposit Accounts held		
	Gross Interest received (on which DIRT was not deducted)	.00	.00
	Gross Deposit Interest received on which DIRT was deducted	.00	.00
	Gross Interest received from Special Share Account(s)/ Special Term Share Account(s) / Special Savings Account(s on which DIRT was deducted	s) .00	.00
	If you are exempt from income tax and you or your spouse 65 or over, or you are permanently incapacitated insert \boxtimes in		
21 -	- Income from which Irish tax was deducted (State gross amount)		
	(a) Appuition		
	(a) Annuities		
	(b) Covenant	.00	.00
		.00	.00
	(b) Covenant	.00	
	(b) Covenant(c) Settlements(d) Legally Enforceable Maintenance Arrangement (exclude any amounts in respect of children)(e) Estate Income	.00	.00
	 (b) Covenant (c) Settlements (d) Legally Enforceable Maintenance Arrangement (exclude any amounts in respect of children) (e) Estate Income (f) Patent royalty income (including income previously exempted) 	.00	.00
	(b) Covenant(c) Settlements(d) Legally Enforceable Maintenance Arrangement (exclude any amounts in respect of children)(e) Estate Income	.00 .00 .00	.00
22	 (b) Covenant (c) Settlements (d) Legally Enforceable Maintenance Arrangement (exclude any amounts in respect of children) (e) Estate Income (f) Patent royalty income (including income previously exempted under S. 234) Total Irish taxed Income [(a) to (f) inclusive] 	.00 .00 .00 .00	.00
22	 (b) Covenant (c) Settlements (d) Legally Enforceable Maintenance Arrangement (exclude any amounts in respect of children) (e) Estate Income (f) Patent royalty income (including income previously exempted under S. 234) Total Irish taxed Income [(a) to (f) inclusive] 	.00 .00 .00 .00	.00
22 -	 (b) Covenant (c) Settlements (d) Legally Enforceable Maintenance Arrangement (exclude any amounts in respect of children) (e) Estate Income (f) Patent royalty income (including income previously exempted under S. 234) Total Irish taxed Income [(a) to (f) inclusive] - Irish Dividends (a)(i) Gross amount of Dividends from Irish Resident Companies (from which Dividend Withholding Tax was deducted), other than dividends received from 	.00 .00 .00 .00	.00
22 -	 (b) Covenant (c) Settlements (d) Legally Enforceable Maintenance Arrangement (exclude any amounts in respect of children) (e) Estate Income (f) Patent royalty income (including income previously exempted under S. 234) Total Irish taxed Income [(a) to (f) inclusive] - Irish Dividends (a)(i) Gross amount of Dividends from Irish Resident Companies (from which Dividend Withholding Tax 	.00 .00 .00 .00 .00	.00
22 -	 (b) Covenant (c) Settlements (d) Legally Enforceable Maintenance Arrangement (exclude any amounts in respect of children) (e) Estate Income (f) Patent royalty income (including income previously exempted under S. 234) Total Irish taxed Income [(a) to (f) inclusive] Irish Dividends (a)(i) Gross amount of Dividends from Irish Resident Companies (from which Dividend Withholding Tax was deducted), other than dividends received from a Real Estate Investment Trust (REIT) 	.00	.00

PPSN Any panel(s) or	section(s) that do not require an enti	•
EXEMPT INCOME	Self	Spouse or Civil Partner
23 - Exempt Income for Childcare Services An individual in receipt of income from Childcare Services is regarded as Form 11 for that year.	a 'chargeable person' for Self-As	sessment and must file a
24 - Exempt Income		
Source of Income		
Amount of Income	.00	.00
25 - Exempt Income from Personal Injury		
Amount of gross income	.00	.00
Tax deducted, if any, on income	.00	.00
PROPERTY RELIEF SURCHARGE - S. 531AAE		
26 - (a) If your aggregate income for the 2019 tax year is €100,000 or more, insert ⊠ in the box(es) and complete line (b)		
(b) Amount of specified property reliefs used in 2019	.00	.00
FOREIGN INCOME (DIVIDENDS, EMPLOYMENTS, PE All amounts should be in Euro. Include details of any scrip dividends received	•	
27 - Great Britain & Northern Ireland Dividends		
Net Dividend(s) Received	.00	.00
28 - US Dividends Amount of gross US Dividends	.00	.00
Foreign tax deducted (if any, and not refundable)	.00	.00.
29 - Canadian Dividends		
Amount of net Canadian Dividends	.00	.00
Foreign tax deducted (if any, and not refundable)	.00	.00
30 - Other Foreign Dividends		
Amount of gross Other Foreign Dividends	.00	.00
Foreign tax deducted (if any, and not refundable)	.00	.00
31 - Irish Tax Deducted on Foreign Income		
Irish tax deducted on encashment (from 28, 29 & 30), if any	.00	.00
32 - Foreign Pensions		
Gross amount of State Welfare Pension(s)	.00	.00
Gross amount of all Other Pension(s)	.00	.00
33 - Income from Foreign employments attributable to the perform	nance OUTSIDE the State of	such employments
(on which Transborder Relief is not claimed) Gross amount of foreign salary		
Foreign tax deducted (if any, and not refundable by foreign tax authorities)	.00	.00

PPSN	Any panel(s) or section(s) that do not require an	entry should be left blank
	Self	Spouse or Civil Partner
34 - Foreign Rental Income		
Number of Foreign properties let		
Income from Foreign Rents (enter gross amount receiv	rable)	
Amount of expenses relating to this income (excluding in	nterest)	.00
Amount of Allowable Interest	1 00	00
Net profit on Foreign Rental properties		00
Capital Allowances (including Capital Allowances forwar	d) .00	.00
Losses		
- Amount of unused losses from prior years	.00	.00
- Amount of losses in this year	.00	.00
- Amount of losses carried forward to next year	.00	.00
Amount of Foreign tax deducted Foreign rental losses may be offset only against foreign	rental profits	.00
, , ,	·	
35 - UK Deposit Interest		
Gross amount of UK Deposit Interest	.00	.00
36 - EU Deposit Interest (excluding UK interest)		
(a) Amount of EU Deposit Interest	.00	.00
(b) Savings Directive withholding tax credit	.00	.00
(c) Foreign tax (other than (b) above)	.00	.00
37 - UK 'Other' Interest		
Gross amount of UK 'other' interest		.00
	0	
38 - EU `Other' Interest (excluding UK interest)		
(a) Amount of EU 'other' interest	00.	.00
(b) Savings Directive withholding tax credit	1.00	.00
(c) Foreign tax (other than (b) above)	100	.00
39 - Foreign Annuities / Royalties / Dividends / Non	n-Deposit Interest	
Amount of gross Foreign Income including income previ		
under S. 234 (enter amount net of any allowable deduct	an Tay authorition)	1 1 1 1.00
Foreign Tax deducted (if any, and not refundable by Foreign	gri fax authorities) 1.00	.00
40 - Other UK Income		
UK income from Royalties, Annuities, Dividends, Non-De	eposit Interest, etc.	
Gross amount of UK Income from all Royalties, Annuitie	·	
		. , , , , , , , , , , , , , , , , , , ,
41 - Other Foreign Income		
Source of other Foreign Income	L	
Gross amount of Foreign Income	.00	.00
Amount of Foreign Tax deducted (if any, and not refundable by Foreign tax authorities)	.00	.00
,		

Γ_1	PPSN Any p	panel(s) or section(s) that do not require	an entry should be left blank
•	- '	Self	Spouse or Civil Partner
AN	INUAL PAYMENTS, CHARGES AND INTERES	T PAID	
42	- Rent paid to Non-Resident Landlord		
	Gross amount of rent paid in the year 2019	.00	.00
43	- Retainable Charges (for example, Annuities)		
	Gross amount of Annual payment	.00	.00
	Date of Payment	D D / M M / Y Y Y	D D / M M / Y Y Y Y
44	- Payments made under Legally Enforceable Maintenan	nce Arrangements	
	(a) Name of spouse or civil partner		
	(b) PPSN of spouse or civil partner, if known		
	(c) Insert $\ensuremath{\boxtimes}$ in the box(es) if spouse or civil partner is non-reside	ent	
	(d) Date of the legally enforceable maintenance agreement		
	(e) From which no tax was deducted prior to payment Gross amount of annual payment (exclude any amounts in respect of children)	.00	.00
	(f) From which tax was deducted prior to payment Gross Amount of annual payment (exclude any amounts in respect of children)	.00	.00
45	- Deeds of Covenant		
	Insert \boxtimes in the box(es) to indicate who the covenant is in respect		_
	Permanently Incapacitated Minor (Other than parent to own o	child)	닏
	Permanently Incapacitated Adult Adult aged 65 or over*	片	片
	Name of Covenantee		
	Relationship to the Covenantee		
	·		
	Original date of the Deed of Covenant		
	Gross amount of the Annual Payment *Restricted amount (5% of Total Income in respect of covenants to adults aged 65 or over)	.00	.00
46	- Additional Voluntary Contributions (AVCs)		
	If you have made Additional Voluntary Contributions to your superinsert ⊠ in the box(es) to indicate the type of payment and give t		
	- PRSA AVC	ine details requested below	П
	- Other	H	H
	State the name of the employment where your Superannuation fund is held	on	
	If you are a Specified Sportsperson (Schedule 23A) insert \boxtimes	in the box(es)	
	If you are a member of a Pre-Approved Pension Scheme inse	ert ⊠ in the box(es)	
	Total Amount paid in 2019 (for which relief has not been claimed or granted in 2018)	.00	.00
	Amount of AVC Contributions already relieved under		
	the net pay arrangement in 2019 Amount of ordinary contributions already relieved under the		
	net pay arrangement for 2019	.00	.00
	Amount carried forward from a prior year, for which relief has not been obtained	.00	.00
	Amount paid between 1/1/2020 and 31/10/2020 for which relief halready been granted and for which relief is being claimed for 20		.00
	Total amount of AVC Relief claimed in 2019	.00	.00

_	PPSN Any p	anel(s) or section(s) that do not require an ent	ry should be left blank
•		Self	Spouse or Civil Partner
47 -	- Personal Retirement Savings Accounts (PRSAs)		
	Only complete Panel 47 if you, or your employer on your behalf, If you have made PRSA contributions, insert \boxtimes in the box(es) to of Certificate received from the Provider and give the details requ	indicate the type	
	PRSA 1 Certificate		
	PRSA 1 (Net Pay) Certificate	to a PDCA	
	(Note that amounts contributed by your employer on your behalf should also be included in Panel 11 on page 7)	IU a PROA	
	If you are a Specified Sportsperson (Schedule 23A) insert \boxtimes in the	ne box(es)	
	If you are a member of a pre-Approved pension scheme insert \boxtimes	l in the box(es)	
	Total amount paid in 2019 (for which relief has not been claimed or granted in 2018)	.00	.00
	Amount of PRSA contributions already relieved under the net pay arrangement in 2019	.00	.00.
	Amount carried forward from a prior year, for which relief has not been obtained	.00	.00
	Amount paid between 1/1/2020 and 31/10/2020 for which relief has not already been granted		0,0
	and for which relief is being claimed for 2019		
	Amount contributed by your employer on your behalf to a PRSA	.00	.00
	Total amount of PRSA Relief claimed in 2019	.00	.00
48 -	- Retirement Annuity Contracts (RACs)		
	If you are claiming relief in respect of RACs state the source(s) of your non-pensionable earnings		
	If you are a Specified Sportsperson (Schedule 23A) insert ⊠ in t	the box(es)	
	If you are a member of a Pre-Approved Pension Scheme insert	☑ in the box(es) ☐	
	Total amount paid in 2019 (for which relief has not been claimed or granted in 2018)	.00	.00
	Amount of RAC Contributions already relieved under the net pay arrangement in 2019	.00	.00
	Amount carried forward from a prior year, for which relief has no been obtained	too	.00
	Amount paid between 1/1/2020 and 31/10/2020 for which relief has not already been granted and for which relief is being claimed for 2019	.00	.00
	Total amount of RAC Relief claimed in 2019	.00	.00
49	- Qualifying Overseas Pension Plans (QOPPs)		
	Note: Contributions to QOPPs that are made to occupational sc	hemes and relieved on that basis should r	not be included below.
	Amount paid by 'relevant migrant member' in respect of a 'qualifying overseas pension plan' in 2019	.00	.00
	Amount paid between 1/1/2020 and 31/10/2020 for which relief has not already been granted and for which relief is being claimed in 2019	.00	.00
	Amount carried forward from a prior year, for which relief has not been obtained	.00	.00
	Total amount of QOPPs Relief claimed in 2019	.00	.00

	PS	N	Ш					11				Any p	anei(s)	or se	ection	(S) the	at uo i	ioi req	uire an	entry s	snoui	a be i	eit bia	INK		
			ш	<u> </u>		-	-		_							S	elf				S	ouse	or (Civil	Part	ner
50	- Inte	erest	Rel	ief o	n Cer	tai	n U	nsec	ure	ed Hom	e Loa	ns														
	mai	n res	iden	ce, ta	ken o	ut b	etwe	en 1	/1/2	Home Lo 2004 and ete the fo	31/12	/2012, a												or re	lief	
										rest clair out with							а]							
	(b)	Ente	r dat	e loar	ı taker	n ou	ut						D	D /	M	VI /	Y	ΥΥ]	D	D/	M	// /	ΥΥ	Υ	Υ
	(c)	Ente	r exp	iry da	ite of I	oan	1						D	D/	M	M / `	Y	Υ		D	D/	M	/ /	ΥΥ	Υ	Υ
	(d)									TRS) in i				an				.00	9							.00
	(e)				•	•	•			tled to fir		•	elief]							
	(f)				ınt of i rest at				n 2	019								.00	<u>, </u>							.00
	(g)				er of t er reli		year	s (1-6	6) p	rior to 20)19 yo	u were e	entitled	İ]						[
	(h)	and 3	31/12	2/200	3 to pu	ırch	nase	your	firs	at (f) was t qualifyir residenc	ng resi	dence,	or sub	sequ	ent c	qualify	/ing	004]							
51	- Bri	dgin	g Lo	an lı	iteres	st																				
	Date	e loan	take	en ou									D	D/	M	M /	Y	ΥΥ		D	D /	M	И /	ΥΥ	Υ	Υ
			·	•						t for this	•							.00	_							.00
								•		OWAN re entitled								E YI	EAR	2019	9					
52	- Hor	ne C	areı	· Tax	Cred	it																				
	Inse	ert⊠ iı	n the	appro	priate	box	c to ir	ndicate	e th	e depend	lant (ot	her than	the sp	ouse	or ci	vil paı	tner c	of the c	laiman	t) for w	hom	care	is bei	ng pr	ovide	d:
	Chil	ld									Perr	manently	y Incap	oacit	ated	Indivi	dual									
	Indi	vidua	l age	ed 65	or ove	er					Dep	endent	relative	e livi	ng wi	thin 2	km o	f claim	ant							
53					redit (es) if	•		-	ΆΥ	E Tax C	redit)]							
54					Tax C]							
55 -	- Allo	wab	le D	educ	tions	in	cur	red i	n E	mployr	ment															
		ure of																		[
		Rate www				r a f	full li	st of '	Flat	t Rate Ex	kpense	es')						.00								.00
	(the	ese m	ust b	e inc		who	lly, e	exclus	sive	ses ly and ne mployme		rily]	[_			_	_	\exists
	Am	ount												L		Ш		.00	<u>)</u>		L				Ш	.00
	Sup	eranı	nuati	on Co	ntribu	itior	ns (w	here	not	deducte	ed by e	mploye	r)					.00								.00
	Tota	ıl																.00	o							.00
	Note	e: Fxr	ens	es. et	c. rela	tino	ı onl	v to e	mp	lovments	shoul	d be sh	own he	ere.	Reim	burse	ed exi	oenses	s not ti	reated	as n	av fo	r tax			

Note: Expenses, etc. relating only to employments should be shown here. Reimbursed expenses not treated as pay for tapurposes should be excluded.

PPSN	Any panel(s) or section(s) that do not	require an entry should be left blank
	Self	Spouse or Civil Partner
56 - Blind Person's Tax Credit		
Insert ⊠ in the box(es) if you wish to claim Blind Person's	Tax Credit	
To qualify for this tax credit, you must hold a certificate from have impaired vision to the extent that your central visual at the widest diameter of the visual field subtends an angle no your claim.	acuity does not exceed 6/60 in the	better eye with correcting lenses, or that
57 - Guide Dog Allowance		
Number of Guide Dogs maintained by you		П
To qualify for this allowance you must hold a letter from the confirming you are a registered owner. A copy of this letter claim. The relief may be granted each year thereafter during	should accompany your first	
58 - Assistance Dogs for Adults and Children		
Number of Assistance Dogs maintained by you		
To qualify for this allowance, you must prove that you main supplied by an organisation accredited by Assistance Dogs A statement from the organisation which supplied the dog claim. The relief may be granted each year thereafter during	s Europe (ADEu). must be submitted with your first	
59 - Dependent Relative Tax Credit		
Number of Dependent Relatives		П
Dependent Relative tax credit is not due if your relative's incident in the year 2019 or if this tax credit is being claimed in full b		
60 - Single Person Child Carer Credit, Widowed Person Increased Exemption - Qualifying Children	on or Surviving Civil Partner,	Incapacitated Child,
If you wish to claim any of these tax credits, insert $\ensuremath{\boxtimes}$ in the	appropriate box(es) and enter the	details requested below
(a) Single Person Child Carer Credit* (b) Wi	dowed Person or Surviving Civil Pa	artner with Qualifying Child Tax Credit
(c) Increased Exemption for Qualifying Children	(d) Incapacitated Child Tax Cre	dit**
Child's Name	Date of Birth	PPSN
	D D / M M / Y	YYY
	D D / M M / Y	YYY
	D D / M M / Y	Y Y Y
*Single Person Child Carer Credit may not be claimed by a co-habiting couple. Claimants must complete Form SPCC1		
**To claim incapacitated child credit a form ICC1 must be considered Practitioner must complete a form ICC2. Both form following each year in which the credit is claimed (in line with	s must be submitted with a first cla	im and retained for a period of 6 years,
61 - Employing a Carer		
If you, your spouse or civil partner or a relative were perman you employed a carer insert ⊠ in the appropriate box(es).	ently incapacitated by reason of m	ental or physical infirmity and
For whom was the carer employed?	Spouse or Civil Partner	_
Net cost of employing a carer in the year 2019 (after deducany payments received from Health Service Executive, etc.)		Spouse or Civil Partner
62 - Permanent Health Insurance (Income Continuance Note that this is not Health / Medical Insurance	ce) - if not deducted from Gross	Pay by Employer
Name of Insurer		
Amount paid in the year 2019		

PPSN Ar	ny panel(s) or section(s) that do not require an entry should be left blank
	Self Spouse or Civil Partner
63 - Medical Insurance	2040 45
State the gross amount of premium paid in the period 1 Januar 31 December 2019 for which tax relief was not granted at sour employer paid medical insurance premiums on your behal of your dependents to an authorised insurer (for example VH	rce or if your on behalf .00
Insert ⊠ in the box(es) to confirm that your employer paid a prenauthorised medical insurance provider on your behalf or on beh dependents and this has been taxed as a benefit in kind	
Adults covered by the policy	
Name Amount	
	.00
Name Amount	
	.00
is receiving full-time education and in respect of whom a child part of Birth Child's Name Date of Birth Child's Name Date of Birth Amount of any personal contribution Date in 2019 the policy was renewed or entered into	Amount Amount Self Spouse or Civil Partner
64 - Start-up Relief for Entrepreneurs (SURE) (a) Amount subscribed for eligible shares in 2019	
•	
(b) Name of company in which investment was made	
(c) Tax reference number of company in which investment was made	
(d) Date of the "Statement of Qualification (SURE)"	
(e) Amount to be treated as a deduction from total income in 2(f) Amounts to be relieved against:	.00
(i) 2018	.00
(ii) 2017	.00
(iii) 2016	.00
(iv) 2015	.00
(v) 2014	.00
(vi) 2013	.00
(g) Amount to be carried forward to future periods	.00

PPSN Any	panel(s) or section(s) that do not require a	an entry should be left blank
-	Self	Spouse or Civil Partner
65. Employment and Investment Incentive (EII) (a) Employment and Investment Incentive – Shares issued before	ore 1 January 2019	
(i) (l) Amount subscribed for eligible shares in 2018 through		
a designated investment fund in respect of which relief	f .00	.00
(II) Enter relevant EII 3 certificate number		
(ii) (I) Amount subscribed for shares in 2015 on which additional relief is now due	.00	.00
(II) Enter relevant EII 3 certificate number		
(iii) (I) Amount claimed in previous years and carried forward into 2019	0,00	.00
(II) Amount claimed in 2019 but unused and		
carried forward into 2020	or ofter 1 January 2010 and before 9.0	.00
(b) Employment and Investment Incentive – Shares issued on a(i) Amount subscribed for eligible shares in 2019		
(ii) Name of company in which investment was made		
(iii) Tax reference number of company in which investment was made		
(iv) Date of 'EII5' where the amount subscribed for eligible shares was through a designated fund	D D / M M / Y Y Y	D D / M M / Y Y Y
(v) Date of the "Statement of Qualification (EII)"		
(vi) Amount of investment which qualifies for relief		
under S. 502(2)(a) (vii) Deduction from total income under S. 502(2)(a)		.00
(viii) Amount to be carried forward to future periods		
(c) Employment and Investment Incentive – Shares issued on c	or after 8 October 2019 and on or before	
(i) Amount subscribed for eligible shares in 2019	.00	.00
(ii) Name of company in which investment was made		
(iii) Tax reference number of company in which investment		
was made		
(iv) Date of 'EII5' where the amount subscribed for eligible shares was through a designated fund	D D / M M / Y Y Y Y	
(v) Date of the "Statement of Qualification (EII)"	D D / M M / Y Y Y	D D / M M / Y Y Y Y
(vi) Amount of investment which qualifies for relief under S. 502(2A)	.00	.00
(vii) Deduction from total income under S. 502(2A)	.00	.00
(viii) Amount to be carried forward to future periods	.00	.00
66. Start-up Capital Incentive (SCI) (a) Amount subscribed for eligible shares in 2019	.00	.00
(b) Name of company in which investment was made		
(c) Tax reference number of company in which investment was made		
(d) Date of the "Statement of Qualification (SCI)"	DD/MM/YYYY	D D / M M / Y Y Y Y
(e) Amount of investment which qualifies for relief under S. 502(2)(a)		.00
(f) Deduction from Total Income under S. 502(2)(a)	.00	.00
(g) Amount to be carried forward to future periods	.00	.00
67 - Tuition Fees Name of Student		
Amount of tuition fees paid, including student contribution, per approved course.	.00	.00
(Do not include administration, exam, registration, capitation fee	es, etc.)	
Insert ⊠ in the box(es) if a part-time course	forming long transition	片
Insert ⊠ in the box(es) if fees relate to an information technology or	ioreign language training course	

	PPSN	ПТ	Т	П	П	٦		Any p	anel(s	s) or s	ectio	n(s) tł	hat d	lo not	requ	ire ar	n entr	y sho	uld be	left b	lank		٦
'		ш_										;	Self					;	Spou	se or	Civil	Par	tner
68	- Amoun			-					opert	y in	a D	esig	nate	ed A	rea	due _	in 2	019				_	
		ou are clai ert these de													.0	0							.00
	The Liv	ing City	Initiati	ve								_											
		claim for my accoun					ity Initiati	ve must b	e mad	de or	the	onlin	e Fo	orm 1	2. Tł	nis is	avai	lable	in PA	YE S	ervice	es	
69	- Retirem	,					ersons																
	If, during	the tax ye	ear 2019	9, you	or you	r spou	se or civi	l partner c															
		ecified prof on reques		as lis	ted in S	Schedu	ıle 23A aı	nd you wis	sh to c	claim	relie	f und	ler S	3. 480	A, ir	nsert	⊠ in	the b	oox(e	s) and	d give	the	
					_					г						닉							ᆜ
	What spe	ecific occu	pation c	or pro	ression	does	this claim	relate to								ᆜ	_	L	_	_			
	Date of P	Permanent	Cessati	ion fro	m spec	cified o	ccupation	n/professio	n	D	□ /	M	4/[Υ	Υ	Υ		D	/ M	M /	ΥΥ	Y	Υ
	Amount	of rollof old	simod fo	or tha	voor 20	110					Ī		ΠĪ		Ī	.00			İΠ	\overline{T}		Ī	00
		of relief cla you are cla					you shou	ıld submit	full de	etails	. L	-				.00						-	1.00
70	- Seafare				•		•			ı						\neg							
		employer												_	_	ᄅ						_	_
74	Number - Transbo	of days sp		sea in	2019									L									Ш
/1				ef an i	ndividu	al mus	st be an I	rish Resid	ent, h	old t	ne fo	reign	em	ployn	nent	for a	cont	tinuoi	us pe	riod o	f at le	ast	13
				nich Ir	eland h	nas a D	ouble Ta	xation Agr	reeme	ent a	nd he	/ sh	e mi	ust b	e pre	sent	in th	e Sta	ate for	at le	ast on	e d	ay
		of those we come from		n Em	ployme	ent on v	which				Г	П	П	Т	Т				П	Т		Т	
	Transbo	rder Relie	ef is clai	imed						ı	<u> </u>		Ш			.00			<u> </u>			<u> </u>	.00
	-	where the	_	-	-		d											<u>L</u>					
	Name ar	nd address	or the	Forei	gn Emp	oloyer												L					
		er's tax refe			er in the	e juriso	diction			П			П			$\overline{\Box}$	Γ	Ī		T		T	$\overline{\Box}$
		e employr						. C		片	+	+	버	+	+	片	F	┿	+	╈		╆	\forall
	inaiviaua	al's tax refe	erence r	numb	er in the	e torei	an jurisai	ction		Щ	- -	+	<u> Н</u>	<u> </u>	<u> </u>	닉	L	<u> </u>	Щ	\perp		Ļ	붜
	Amount	of foreign	tax paid	d (and	not ref	undab	le)				L		L		<u> </u>	.00			Ш			<u> </u>	.00
	Number	of weeks t	foreign (emplo	yment	held c	ontinuous	sly (in the	year o	of as	sessi	ment)										
		e claiming		ear Tr	eatmen	nt inser	t ⊠ in the	e box(es)														_	
72	- Health			n Evn	ancac (rlaime	d for the	year 2019	(furth	or in	forms	ation	on e	aliaih	م ما	nanc	2A2 C	an he	foun	d on			
	www.rev	enue.ie).	You car	nnot c	laim re	lief in i	respect o	f refunds a	alread	ly red	ceive	d or o	due	to be	rece	ived	I from	n any	publi	c or lo			
								y of insura ned. There															
								eriod of si													iiius	1101	alli
	Maintena	ance or tre	atment	in an	approv	ed nur	sing hom	ne								.00						Π	.00
	PPSN of	nursing h	ome res	sident											Ī			Т					
		_								ı					-			-					$\overline{}$
	Name of	nursing h	ome								_	_		_	_	_			_			_	ᆗ
	Non-Rou	itine Denta	al Exper	nses												.00			Ш				.00
	Other He	ealth Expe	nses													.00			П				.00
								above ex		es	-			\pm	+							+	<u> </u>
		nple, from insurance,						a policy of	f							.00			Ш				.00
73	- Home F				•		14111 <i>)</i>				_											_	
	Tax cred	it due for 2	2019 ba	sed o	n your		ıline clair	n					Ш		\perp	.00			Ш			\perp	.00
74	- Help to A claim f					eln to I	Ruv (HTF	3) incentive	e for r	nurch	ased	امو / ا	lf_hu	ilt ro	siden	ntial r	าเกกร	rtv h	etwe	n 10	July S) 14	3
	and 31 D	December	2019 m					vw.revenu							Jiuci	iciai þ	Jiope	orty D	CINAC	,ıı 13	July 2	-010	,
75	- Fisher			na n:::	mbor of	f dava	enent of	sea on a fi	ichina	. voc	eol ro	aista	arod	on th	ام E	ırono	an C	'Omr	nunit.	fichi	na flor	at ro	aistor
				i c IIUI	ווטכו 0	uays	ap c iii di	oca ∪II d II	ısııııy	ves	3 C 1 16	giste	.ı C U	טוו נו	ie Et	TT	an C	ווווטע	iuiilly	HIGH	ig ilet	е	gistel.
		nber of da ner Tax Cr	-	mour	t claim	ed.					_				<u> </u>	붜						부	븬
	(n) LI9I	ioi iax Oli	Juit – al	moun	Coldinit	Ju									1	1.00						1	.00

18

- PPSN					П	\neg		Any panel(s) o	r sectio	n(s) th	at do i	not re	equire	an entry	should	be left	blank		٦
FFSN	' []		ļ																
CAPIT	AL A	CQU	ISIT	IONS	S IN	1 20	19			Self				Spo	ouse or	Civil	Partn	er	
76 - If yo	u recei	ived a g	jift or a	an inhe	ritan	ce in	2019, insert ⊠	in the box(es)											
Not	5 De		r 199				neritance, when e group, exceed												
		ft is trea th of a p			ng be	en re	eceived on the d	ate of the gift.	An inh	neritan	ce is	treat	ted as	having	been re	eceive	ed on t	he da	ate of
							a requirement to d this is the qui							see ww	w.rever	nue.ie	. Form	ı IT 3	8 can
CAPIT	AL G	AINS	AN	D CI	IAF	RGE	ABLE ASS	ETS		Se	elf				Spo	use o	r Civi	l Par	tner
Give	detail	s of all	dispos	sals (by	/ sale	e, exc	anuary 2019 – change, gift or of partner in the ye	therwise) of c			sets,	for e	examp	le, land	, share:	s, pair	ntings,	antiq	ques,
Cha	rgeable	e Gain(s) (exc	cluding	Fore	eign L	ife Policies) bet	fore S. 604A r	elief			T	0.	0					.00
Prev	ious G	ain(s) F	Rolled	-over (now	charg	geable)						.0	0					.00
Net	Loss(e	s) in 20	19 be	fore S.	604	A reli	ef			Ш		\perp	.0	<u>。</u>					.00
Unu	sed Lo	sses fro	om pri	or yea	r(s)				L				<u>.o</u>	0		$oxed{oxed}$	$\bot \bot$	┸	.00
Amo	unt of	Gain re	lieved	l under	S. 6	04A							.0	0					.00
							ouse or civil par		ansfera	ble)			.0	00					.00
Net	Charge	eable G	ain (e	xcludir	ıg Fo	reign	Life Policies)		Γ				0.	٥					.00
Net	Charge	eable G	ain or	Forei	gn Li	fe Po	licies		Ī	П			0.0				\Box	Ī	.00
Unu	sed Lo	sses fo	r carry	/ forwa	rd to	2020)						.0	0					.00
							ss in 2019 ther se in the perio							elow.					
(a)	Enter	amour	nt of n	et gain	to be	e cha	rged @ 33%						.0	00					.00
(b)		amour uding F					rged @ 40%						.0	0					.00
(c)		amour charge			on F	oreig	n Life Policies		[.0	00			П		.00
In respec	ct of n	et char	geabl	e gain	s tha	t aro	se in the perio	d 1 Decembe	r 2019	to 31	Dece	emb	er 201	19					
(a)	Enter	amour	nt of n	et gain	to be	e cha	rged @ 33%						.0	0					.00
(b)		amour uding F					rged @ 40%						.0	0					.00
(c)		amour charge			on F	oreig	ın Life Policies						.0	0			П		.00
Double Ta	xatio	n Relie	f																
							ct of a disposal of the contract of the contra						gains	tax sho	wn abo	ve, pr	ovide		
			С	ountry	,			_	Amo	ount c	f gai	n .			Amount hich re		_		
										\coprod	$oxed{oxed}$		00						.00
		_											00						.00

PPSN	Any panel(s)	or sec	ion(s)	that do	not require	e an er	ntry sh	ould b	e lef	t blan	k	
78 - PROPERTY BASED INCENTIVES ON WHICH	RELIEF IS CLA	IME) IN 2	019								
You are required to provide the following information in sudetails required by this panel are the 'specified details' refully and correctly complete this panel may leave you liab	ferred to in S. 105	2(1)(a	a) and	S. 10	84(1)(b)(ib) TCA	1997	and t	hat a	any fa	ailure	
Enter the amount of the annual cost of the relief, that is the am as losses or capital allowances, and before deducting any amount subsequent years.	nount claimed in the ount of unused loss	e year ses an	exclu d / or o	ding a capital	mounts car allowance	rried fo s whic	rward h will b	into t pe cai	he y	ear ei forwa	ither ard to	
Residential Property			O	wner (Occupier			In	vest	or - L	Lesso	r
Urban Renewal	S.372AP & AR	П		П		.00	П			Т	П	.00
Town Renewal	S.372AP & AR	П	\top	H	111	.00	H	Ť	一	十	\top	.00
Seaside Resort	S.372AU					1.00	H	T	一	十	\top	.00
Rural Renewal	S.372AP & AR	П		П		.00	\Box		一	十	$\dagger \dagger$.00
Living over the Shop	S.372AP & AR	Ħ	\top	H		.00	\sqcap		一	十	\top	.00
Park and Ride	S.372AP & AR	Ħ	\top	Ш	111	.00	\sqcap	İ	一	十	\top	.00
Student Accommodation	S.372AP					1.001	\sqcap	Ť	一	十	\top	.00
Living City Initiative	S.372AAB					.00		•				1001
Industrial Buildings Allowance			Ov	vner (Occupier			In	vest	or - I	Lesso	or
Urban Renewal	S.372C & D	П				.00		П		Т	П	.00
Town Renewal	S.372AC & AD	Ħ			1 1 1	.00		┪		十	\Box	.00
Seaside Resort	S.352 & S.353	H	Ì		1 1 1	.00		\top		十	\Box	.00
Rural Renewal	S.372M & N	П				.00		П	十	十	Ħ	.00
Multi-storey Car Parks	S.344	Ħ	十			.00		\sqcap	寸	十	П	.00
Living over the Shop (Commercial Premises Only)	S.372D	П	丁			.00		Ħ	寸	十	\sqcap	.00
Enterprise Areas	S.343	П			111	.00		\sqcap	丁	丁	П	.00
Park and Ride	S.372V & W	П				.00		Ħ		T	Ħ	.00
Hotels	S.268(1)(d)	П				.00		Ħ		T	П	.00
Holiday Cottages	S.268(3)	П				.00		П		T	П	.00
Holiday Hostel	S.268(2C)(b)	П				.00		П		T	П	.00
Guest Houses	S.268(2C)(a)				111	.00		П	丁	十	П	.00
Nursing Homes	S.268(1)(g)	П	一		111	.00		\sqcap	寸	十	П	.00
Housing for elderly/infirm	S.268(3A)	П			111	.00		\sqcap	寸	丁	П	.00
Convalescent Homes	S.268(1)(i)	П				.00		Ħ	丁	丁	П	.00
Qualifying Hospitals	S.268(2A)	П	十		111	.00		Ħ	寸	十	Ш	.00
Qualifying Mental Health Centres	S.268(1C)	П				.00		П		T	П	.00
Qualifying Sports Injury Clinics	S.268(2B)	П				.00		П			П	.00
Buildings used for certain childcare purposes	S.843A	П				.00		\sqcap		T		.00
Buildings used for the purposes of providing Childcare Service or a Fitness Centre to employees	es S.843B					.00			•	-		
Specialist Palliative Care Units	S.268(1)(m)	П	Т			.00		П	Т	\top	П	.00
Buildings or Structures in registered caravan & camping sites	S.268(2D)	H	\top	\sqcap		.00	\vdash	╁┤	\dagger	十	廿	.00
Mid-Shannon Corridor Tourism Infrastructure Investment Sche	eme S.372AW	H		$ \uparrow $	$\dagger \dagger \dagger$.00	$ \uparrow $	$\dagger \dagger$	十	\top	$\dag \uparrow$.00
Living City Initiative	S.372AAC					.00		П			П	.00
Living City Initiative	S.372AAD						\sqcap	\sqcap	丁	\top	\prod	.00
Aviation Services Facilities	S.268(1)(n)					.00		\prod	Ť	\top	\prod	.00
Where the scheme(s) on which you are claiming relief is / are			name	of the	Incentive		ne(s),	quote	the	releva	ant Se	
and enter the amount of relief claimed in the year (Owner Occ	upier, Investor–Les	ssor).	_			\neg			\Box	—		$\neg \neg$
		Ш				.00	Щ	\perp	Щ		Ш	.00