|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PAYG payment summary - individual non-business** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Payment Summary for year ending 30 June 2015** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Payee details** | | | | | | | | | | | **NOTICE TO PAYEE** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | If this payment summary shows an amount in the total | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | tax withheld box you must lodge a tax return. If no tax | | | | | | | | | | | | | | | | | | |
|  | Amy Pond | | | | | | | | | | was withheld you may still have to lodge a tax return. | | | | | | | | | | | | | | | | | | |
|  | PO Box 34 | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  | ERINA NSW 2250 | | | | | | | | | | For more information on whether you have to lodge, or | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | about this payment and how it is taxed, you can: | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | » | visit | | **www.ato.gov.au** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | » | phone | | | **13 28 61** | | | | between 8.00am and 6.00pm (EST) | | | | | | | | | | |
|  | | | | | | | | | | |  | Monday to Friday. | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | Day/Month/Year | | |  | | | | | | Day/Month/Year | | | | | | | | |  | | | | |
| Period of payment | | | | | | | 13/03/2015 | | | to | | | | | | 30/06/2015 | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | |  |  | | | | | | | | | | | | |  |  | | | | | |  |
| Payee's tax file number | | | 123456789 | | | | |  | **TOTAL TAX WITHHELD** | | | | | | | | | | | | | **$** | **1134** | | | | | |  |
|  | | | | | | | |  |  | | | | | | | | | | | | |  |  | | | | | |  |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | Lump sum payments | | | | | | | Type | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  |  | |
| Gross payments | | | | | **$** | 10163 | | | | | | | **A** | | | | | **$** | | 0 | | | | | | |  |  | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  | | |
| CDEP payments | | | | | **$** | 0 | | | | | | | **B** | | | | | **$** | | 0 | | | | | | |  | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  | | |
| Reportable fringe benefits amount FBT year 1 April to 31 March | | | | | **$** | 0 | | | | | | | **D** | | | | | **$** | | 0 | | | | | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  | | |
| Reportable employer superannuation contributions | | | | | **$** | 0 | | | | | | | **E** | | | | | **$** | | 0 | | | | | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  | | |
| Total allowances | | | | | **$** | 0 | | | | | | | Total allowances are not included in Gross payments above. This amount needs to be shown separately in your tax return. | | | | | | | | | | | | | | | | |
|  | | | | |  |  | | | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Payer details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Payer's ABN or withholding payer number | | | | | | |  | | | | | | | | | | Branch number | | | | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Payer's name | | ACME Corp | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature of authorised person | | | | Matt | | | | | | | | | | | | | | | | | Date | | | 30/06/2015 | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PAYG payment summary - individual non-business** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Payment Summary for year ending 30 June 2015** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Payee details** | | | | | | | | | | | **NOTICE TO PAYEE** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | If this payment summary shows an amount in the total | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | tax withheld box you must lodge a tax return. If no tax | | | | | | | | | | | | | | | | | | |
|  | Tony Stark | | | | | | | | | | was withheld you may still have to lodge a tax return. | | | | | | | | | | | | | | | | | | |
|  | 1 Tarfalgar Avenue | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  | UMINA BEACH NSW 2257 | | | | | | | | | | For more information on whether you have to lodge, or | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | about this payment and how it is taxed, you can: | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | » | visit | | **www.ato.gov.au** | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | » | phone | | | **13 28 61** | | | | between 8.00am and 6.00pm (EST) | | | | | | | | | | |
|  | | | | | | | | | | |  | Monday to Friday. | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | Day/Month/Year | | |  | | | | | | Day/Month/Year | | | | | | | | |  | | | | |
| Period of payment | | | | | | | 01/07/2014 | | | to | | | | | | 30/06/2015 | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | |  |  | | | | | | | | | | | | |  |  | | | | | |  |
| Payee's tax file number | | | 234567890 | | | | |  | **TOTAL TAX WITHHELD** | | | | | | | | | | | | | **$** | **170** | | | | | |  |
|  | | | | | | | |  |  | | | | | | | | | | | | |  |  | | | | | |  |
|  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | Lump sum payments | | | | | | | Type | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  |  | |
| Gross payments | | | | | **$** | 10738 | | | | | | | **A** | | | | | **$** | | 0 | | | | | | |  |  | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  |  | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  | | |
| CDEP payments | | | | | **$** | 0 | | | | | | | **B** | | | | | **$** | | 0 | | | | | | |  | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  | | |
| Reportable fringe benefits amount FBT year 1 April to 31 March | | | | | **$** | 0 | | | | | | | **D** | | | | | **$** | | 0 | | | | | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  | | |
| Reportable employer superannuation contributions | | | | | **$** | 0 | | | | | | | **E** | | | | | **$** | | 0 | | | | | | |  | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  |  | | | | | | |  | | | | |  | |  | | | | | | |  | | |
| Total allowances | | | | | **$** | 0 | | | | | | | Total allowances are not included in Gross payments above. This amount needs to be shown separately in your tax return. | | | | | | | | | | | | | | | | |
|  | | | | |  |  | | | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Payer details** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Payer's ABN or withholding payer number | | | | | | |  | | | | | | | | | | Branch number | | | | | | | | |  | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Payer's name | | Stark Enterprises | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature of authorised person | | | |  | | | | | | | | | | | | | | | | | Date | | | 30/06/2015 | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |