

# Form 12

## Tax Return for the year 2009 (Employees, Pensioners & Non-Proprietary Directors)



Please quote this number in all correspondence or when calling at your Revenue office

Your PPS Number

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Office Hours Monday – Friday 9.30 a.m. – 5.00 p.m.

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This form is to be completed and returned to your local Revenue Office on or before 31 October 2010.

### Return Address

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Use any envelope and write "FREEPOST" above the address.  
NO STAMP REQUIRED

If the Return Address of your Local Tax Office is not shown on this page, please check your Tax Credit Certificate to find the address to which you should submit this form

### RETURN OF INCOME, CHARGES AND CAPITAL GAINS FOR THE YEAR ENDED 31 DECEMBER 2009 CLAIM FOR TAX CREDITS, ALLOWANCES AND RELIEFS FOR THE YEAR ENDED 31 DECEMBER 2009

This Tax Return should be completed by a person whose source of income is from a PAYE employment or pension or by a non – proprietary company director who pays all his/her Income Tax under the PAYE system.

**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 2010, A TAX RETURN ON THIS PRESCRIBED FORM FOR THE YEAR 1 JANUARY 2009 TO 31 DECEMBER 2009.**

#### NOTE:

Section 14 Finance Act 2005 amends the definition of a "chargeable person" for Self-Assessment purposes. An individual who is in receipt of income chargeable to tax under the PAYE system but who is also in receipt of gross non – PAYE income of €50,000 or more from other sources, such as trading, professional or rental income etc but where this income has been reduced to nil or to a negligible amount because of deductions, losses, allowances and other reliefs, is regarded as a 'chargeable person'. An individual who is a 'chargeable person' for the purposes of Self Assessment Income Tax should complete a Pay and File Income Tax Return Form 11E or Form 11.

The 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, the 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 event 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 of 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 (TCA 1997) of:

- All the sources of my income, and the amount of income derived from each source in the year 2009, and
- All disposals of chargeable assets and the amount of chargeable gains which accrued to me in the year 2009.

I DECLARE that, to the best of my knowledge and belief, all the particulars given as regards tax credits, allowances and reliefs claimed and as regards outgoings and charges are stated correctly.

Signature

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Date

D	D	M	M	Y	Y	Y	Y
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Capacity of Signatory (Please tick )

Tax Payer

Tax Adviser

Other (Please Specify)

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Main Residence Address


Telephone Number

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Agent's Details

Tax Adviser Identification No. (TAIN)

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Client's Ref.

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PPS No.

This Form 12 is to be completed by a person whose main source of income is from a PAYE employment or pension or a non-proprietary company director who pays all his/her Income Tax under the PAYE system.

To assist you in completing this return, each section of the form has been separated into the different categories of income, tax credits, allowances and reliefs as set out below. For further information on the content of this form, you should refer to the Guide to Completing 2009. Tax Returns available from Revenue's website [www.revenue.ie](http://www.revenue.ie), from any Revenue office or from Revenue's Forms & Leaflets Service at Lo-Call 1890 30 67 06 (ROI only) (+353 1 7023050 if calling from outside ROI). Please note that the rate charged for the use of 1890 (LoCall) numbers may vary among different service providers.

## Refunds

If you wish to have any refund paid directly to your Irish bank account, please supply your bank account details below:

Sort Code

Account Number

Tax Refunds can be paid by cheque or to your Irish bank account. It is not possible to make a refund directly to a foreign bank account.

**Note: Any subsequent Revenue refunds will be made to this bank account.**

Panel	Page No.(s)
◆ Personal Details	3
◆ Employments (Including Foreign Employments in the State), Offices, Pensions, Non-Proprietary Directorships, etc.	3
◆ Income from a Trade or Profession	5
◆ Income from Fees, Rental Income, Covenants, Distributions, etc.	5
◆ Foreign Income (Dividends, Employments, Pensions, Rents, etc.)	7
◆ Annual payments, Charges and Interest paid	9
◆ Claim for Tax Credits, Allowances and Reliefs for the year 2009	11
◆ Capital Gains and Chargeable Assets	15
◆ Property Based Incentives on which Relief is claimed in 2009	16

### How to fill in this Return

- Use BLOCK CAPITALS. Write clearly and accurately within box(es).
- Insert  clearly in any relevant tick box as required.
- Any panel(s) or section(s) that do not require an entry should be left blank.
- In date boxes enter the format of DD/MM/YYYY, see example of correct and incorrect entries below.
- All monetary entries, including entries in the Foreign Income panels, should be in Euro denomination. Do not enter € symbol.
- 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.
- The terms "S." and "TCA 1997" in this form refer to "Section" and "Taxes Consolidation Act 1997".

<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>CORRECT</b></div> <div style="text-align: center;">↓</div> <div style="display: flex; justify-content: space-around; align-items: center;"> <input checked="" type="checkbox"/> <input type="checkbox"/> </div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin: 5px 0;">PHARMACIST</div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">0 1 0 1 2 0 0 9</div> <div style="border: 1px solid black; padding: 2px;">3 1 1 2 2 0 0 9</div> <div style="border: 1px solid black; padding: 2px;">3 1 1 2 2 0 0 9</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">4 7 0 0 0 .00</div> <div style="border: 1px solid black; padding: 2px;">.00</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">1 9 0 0 0 .00</div> <div style="border: 1px solid black; padding: 2px;">.00</div> </div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px; display: flex; justify-content: space-between;"> <span>5 5 0 0 .00</span> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>INCORRECT</b></div> <div style="text-align: center;">↓</div> <div style="display: flex; justify-content: space-around; align-items: center;"> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> </div> <div style="border: 1px solid black; padding: 2px; text-align: center; margin: 5px 0;"><i>Pharmacist</i></div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">1 J A N - 0 9</div> <div style="border: 1px solid black; padding: 2px;">E N D D E C 0 9</div> <div style="border: 1px solid black; padding: 2px;">3 1 / 1 2 / 0 9</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">4 7 0 0 0 .00</div> <div style="border: 1px solid black; padding: 2px;">.00</div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">1 9 — .00</div> <div style="border: 1px solid black; padding: 2px;">.00</div> </div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px; display: flex; justify-content: space-between;"> <span>N/A .00</span> </div> <div style="border: 1px solid black; padding: 2px; margin-top: 5px; display: flex; justify-content: space-between;"> <span>€ 5 5 0 0 .00</span> </div>
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PPS No.

Any panel(s) or section(s) that do not require an entry should be left blank.

**PERSONAL DETAILS**

1 - In the year 2009, please tick  the box to indicate whether you were:

Single  Married  Widowed  Married but Living Apart/Separated  Divorced

Please state your nationality

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If married, state:  
 Spouse's name  
 Spouse's PPS Number  
 Spouse's Nationality

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Date of marriage (if after 31/12/2008) (DD/MM/YYYY)  
 If widowed, state spouse's date of death, (if after 31/12/2003)  
 If separated/divorced, state date of separation/divorce (if after 31/12/2008)

D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y

**Legally enforceable maintenance arrangements -**  
 See Panel 14 on page 6, Panel 17 on page 7 and Panel 33 on page 9

Please state your Date(s) of Birth

<b>Self</b>	<b>Spouse</b>																
<table border="1" style="width: 100%; text-align: center;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y	<table border="1" style="width: 100%; text-align: center;"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y										
D	D	M	M	Y	Y	Y	Y										

In the year 2009, please tick  the box(es) if you or your spouse were:  
 Non – resident  
 Not ordinarily resident  
 Not domiciled

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Please tick the box(es) if you or your spouse held a Full Medical Card at any time during the year (a GP Only Card does not qualify as a Full Medical Card)

In 2009 if you and/or your spouse were resident in another Member State of the European Communities (EC) tick  the box(es)

**2 - Non-Proprietary Directorships**

List all Non-Proprietary Directorships in respect of you and/or your spouse and state the percentage shareholding in each company

SELF (%)	SPOUSE (%)

**EMPLOYMENTS (INCLUDING FOREIGN EMPLOYMENTS IN THE STATE) OFFICES, PENSIONS, NON-PROPRIETARY DIRECTORSHIPS, ETC.**

(Write the name of the employer or the source of the pension opposite the corresponding income)

3 - Employments subject to PAYE Tax (including income subjected to PAYE attributable to the performance in the State of the duties of foreign employments)

Employer's Name  
 Employer's PAYE registered Number  
 Gross amount of income for Income Levy (available from your Income Levy Certificate)  
 Gross amount of income Levy Deducted  
 Gross amount of Taxable income (available from your P60)  
 Gross amount of Tax Deducted  
 If you are related to your employer by marriage or otherwise, state relationship

<b>SELF</b>	<b>SPOUSE</b>																																																		
<table border="1" style="width: 100%; text-align: right;"><tr><td colspan="4"></td><td>.00</td></tr><tr><td colspan="4"></td><td>.00</td></tr><tr><td colspan="4"></td><td>.00</td></tr><tr><td colspan="4"></td><td>.00</td></tr><tr><td colspan="4"></td><td>.00</td></tr></table>					.00					.00					.00					.00					.00	<table border="1" style="width: 100%; text-align: right;"><tr><td colspan="4"></td><td>.00</td></tr><tr><td colspan="4"></td><td>.00</td></tr><tr><td colspan="4"></td><td>.00</td></tr><tr><td colspan="4"></td><td>.00</td></tr><tr><td colspan="4"></td><td>.00</td></tr></table>					.00					.00					.00					.00					.00
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Any panel(s) or section(s) that do not require an entry should be left blank.

**4 - Pension(s) (Subject to PAYE Tax)**

	SELF	SPOUSE
Name of Payer(s)	<input type="text"/>	<input type="text"/>
Pension Company PAYE Registered Number	<input type="text"/>	<input type="text"/>
Gross amount of income for Income Levy (available from your Income Levy Certificate)	<input type="text"/>	<input type="text"/>
Gross amount of Income Levy Deducted	<input type="text"/>	<input type="text"/>
Gross amount of Taxable Income (available from your P60)	<input type="text"/>	<input type="text"/>
Gross amount of Tax Deducted	<input type="text"/>	<input type="text"/>

**5 - Social Welfare Pension/Illness Benefit/Occupational Injury Benefit/Jobseekers Benefit/Carer's Allowance/Pre-Retirement Allowance**

	SELF	SPOUSE
State type of payment	<input type="text"/>	<input type="text"/>
Taxable amount of payment in 2009	<input type="text"/>	<input type="text"/>

**6 - Other Payments (e.g. Payments received on commencement of employment, or in consideration of change in conditions of employment)**

	SELF	SPOUSE
Name of Payer(s)	<input type="text"/>	<input type="text"/>
Gross amount of payment(s)	<input type="text"/>	<input type="text"/>
Nature of Benefit(s)	<input type="text"/>	<input type="text"/>
Amount chargeable to tax	<input type="text"/>	<input type="text"/>
If you wish to claim Top Slicing Relief (TSR) in relation to any lump sum(s) you and/or your spouse received on Redundancy/Retirement in 2009 please tick <input type="checkbox"/> the box(es)	<input type="checkbox"/>	<input type="checkbox"/>

**7 - Benefits from Employments/Non-Proprietary Directorships**

Most benefits-in-kind are now taxed at source, however, payments under PRSA's and certain Shares/Securities are not. Any taxable benefits from these sources should be entered here.

	SELF	SPOUSE
Nature of Benefit	<input type="text"/>	<input type="text"/>
Taxable benefits: (not taxed at source under PAYE)	<input type="text"/>	<input type="text"/>

**8 - Employments/Offices/Pensions not subject to PAYE deductions**

	SELF	SPOUSE
Description of Income	<input type="text"/>	<input type="text"/>
Amount of Income	<input type="text"/>	<input type="text"/>

**9 - Credit for Professional Services Withholding Tax (PSWT)**

	SELF	SPOUSE
Gross amount of withholding tax on fees for professional services in basis period for 2009.	<input type="text"/>	<input type="text"/>

**INCOME FROM A TRADE or PROFESSION**

**10-Income from a Trade or Profession**

(Gross Income less than €50,000 – see note on Page 1)

Tick  box(es) to indicate to whom the income in each column refers.

**TRADE 1/  
PROFESSION 1**

**TRADE2/  
PROFESSION 2**

Self  Spouse

Self  Spouse

Description of Trade or Profession – you must clearly describe the trade



Commencement Date (DD/MM/YYYY)



Accounting Period End Date



Gross Income



Net Trading Profit



Net Trading Loss



If you wish to claim for relief under Section 381 TCA 1997, to set any loss in this trade made in the year 2009 against your other income, enter the amount of the loss. Claim to be made on or before 31/12/2011.



If there are no/insufficient profits, and you wish to claim to add any unused current year Capital Allowances to any loss made in the trade for this year (Section 392 TCA 1997), enter the relevant amount. Claim to be made on or before 31/12/2011.



**INCOME FROM FEES, RENTAL INCOME, COVENANTS, DISTRIBUTIONS, ETC.**

**11 - Fees, commissions, etc. not included elsewhere**

Self

Spouse

Fees, commissions, etc. from sources other than employments or directorships (Emoluments from employments, etc. should be shown on page 3/4)

Description of Income



Total amount of Income



**12 - Rent-a-Room Relief**

If you wish to avail of Rent-a-Room relief, state the amount of gross rental income received in the year 2009 for room(s) in a “Qualifying Residence”. Do not include this amount in Panel 13 below.



If you do not wish to avail of Rent-a-Room relief, tick  the box(es) and include the income in Panel 13 under Gross Rent Receivable.

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**13 - Rental Income from Land and Property in the State**

**Self**

**Spouse**

\* Where a claim to tax relief on property based incentive schemes is included below, you must give details in Panel 66 on page 16 of this return

Where the registration requirements of Part 7 of the Residential Tenancies Act 2004 have been complied with in respect of all Residential premises tick  the box(es)

Number of Properties let							
Number of Tax Incentive Properties							
Acreage of Rented Land							
Non-resident landlord (a) State the PPS number of tenants(s)							
(b) State the amount of Irish tax withheld						.00	
Gross Rent Receivable						.00	
Add Clawback of Section 23 Relief						.00	
Less: Repairs						.00	
Allowable interest						.00	
Other						.00	

\* Rented Residential Relief (Section 23) where 2009 is the **first** year of claim

<b>Net Rental Income (after expenses but before Capital Allowances)</b>						.00	
<b>Net Rental Loss (after expenses but before Capital Allowances)</b>						.00	
Capital Allowances forward from a prior year						.00	
* Capital/Balancing Allowances for the year 2009						.00	
Capital Allowances used against rental income in the year 2009						.00	
Capital Allowances available for carry forward or offset						.00	
Excess Case V Capital Allowances						.00	

If you wish to **elect** under Section 305(1)(b) TCA 1997 to set any unused Capital Allowances (not already ring-fenced) in respect of **Buildings** for 2009 against your other income state the amount of Capital Allowances in respect of **Buildings** for 2009 available for offset against other income:

						.00	
Loss forward from a prior year						.00	

**14 - Payments received under a legally enforceable maintenance arrangement from which Irish Tax was not deducted**

Gross amounts (Exclude any amounts in respect of children)						.00	
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**15 - Untaxed Income Arising in the State**

Government Stocks						.00	
Exchequer Bills						.00	
Credit Union Dividends						.00	
Other Investments						.00	
<b>Total untaxed income arising in the State</b>						.00	

PPS No.

Grid for PPS No.

Any panel(s) or section(s) that do not require an entry should be left blank.

16 - Irish Deposit Interest

Self

Spouse

Number of ordinary Deposit Accounts held

Gross Interest received (on which DIRT was not deducted)

Gross Interest received in the period 1/1/2009 - 7/4/2009 (on which DIRT was deducted @23%)

Gross Interest received in the period 8/4/2009 - 31/12/09 (on which DIRT was deducted @25%)

Gross Interest received in the period 1/1/2009 - 7/4/2009 (on which DIRT was deducted @26%)

Gross Interest received in the period 8/4/2009 - 31/12/09 (on which DIRT was deducted @28%)

Gross Interest received from Special Savings Account(s)/ Special Share Account(s)/Special Term Share Account(s) in the period 1/1/2009 - 7/4/2009 (on which DIRT was deducted @23%)

Gross Interest received from Special Savings Account(s)/ Special Share Account(s)/Special Term Share Account(s) in the period 8/4/2009 - 31/12/2009 (on which DIRT was deducted @25%)

If you are exempt from income tax and you or your spouse are either 65 or over, or you are permanently incapacitated please tick the box(es)

Grids for Self and Spouse interest amounts and exemption checkboxes.

17 - Income from which Irish tax was deducted

(State gross amount)

(a) Annuities

(b) Covenant

(c) Settlements

(d) Legally enforceable Maintenance

(e) Estate Income

Total Irish taxed Income [(a) to (e) inclusive]

Grids for Irish tax deducted income categories.

18 - Distributions ("Dividends") of Companies Resident in the State

Gross amount of Dividends from Irish Resident Companies (from which Dividend Withholding Tax was deducted)

Gross amount of Dividends from Irish Resident Companies (from which Dividend Withholding Tax was not deducted)

Grids for Dividend distributions.

19 - Exempt Income for Childcare Services

I confirm that I have notified the relevant person recognised by the Health Service Executive that I am providing Childcare Services and elect to have the gross income, before expenses, in respect of these services exempted from income tax (to elect enter the gross income received)

Grids for Exempt Income for Childcare Services.

FOREIGN INCOME (DIVIDENDS, EMPLOYMENTS, PENSIONS, RENTS, ETC.)

All amounts should be in Euro. Include details of any scrip dividends received from non-resident companies in the appropriate panel.

20 - Great Britain & Northern Ireland Dividends

Self

Spouse

Net Dividend(s) Received

Grids for Great Britain & Northern Ireland Dividends.

PPS No.

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Any panel(s) or section(s) that do not require an entry should be left blank.

**21 - US Dividends**

Amount of gross US Dividends

Self							
							.00

Spouse							
							.00

**22 - Canadian Dividends**

Amount of net Canadian Dividends

							.00
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							.00
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Foreign tax deducted (if any, and not refundable)

							.00
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							.00
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Amount of Irish tax deducted, if any, on encashment

							.00
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							.00
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**23 - Irish Tax Deducted on Foreign Income**

Irish tax deducted on encashment (from 21 & 22), if any

							.00
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							.00
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**24 - Foreign Pensions**

Gross amount of Foreign State Welfare Pension(s)

							.00
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							.00
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Gross amount of all other Pension(s)

							.00
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							.00
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**25 - Income from Foreign employments attributable to the performance OUTSIDE the State of such employments**

Gross amount of foreign salary

							.00
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							.00
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Tax deducted from Foreign salary  
(if any, and not refundable)

							.00
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							.00
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**26 - Foreign Rental Income**

Number of Foreign properties let

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Income from **Foreign Rents** (Enter gross amount receivable)

							.00
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							.00
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Amount of expenses relating to this income (excluding interest)

							.00
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							.00
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Amount of allowable interest

							.00
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							.00
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Net profit on Foreign Rental Income

							.00
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							.00
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Amount of Foreign tax deducted

							.00
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							.00
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**27 - Other Foreign Income**

Source of other Foreign Income

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Gross amount of Foreign Income

							.00
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							.00
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Amount of Foreign tax deducted  
(if any, and not refundable by Foreign tax authorities)

							.00
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							.00
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**28 - Interest/Annuities/Royalties/Dividends**

Amount of gross Foreign Income  
(enter amount net of any allowable deductions)

							.00
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							.00
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Foreign Tax deducted  
(if any, and not refundable by Foreign Tax authorities)

							.00
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							.00
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**29 - Exempt Income**

Source of Income

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Amount of Income

							.00
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							.00
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PPS No.

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Any panel(s) or section(s) that do not require an entry should be left blank.

**30 - Exempt Income from Personal Injury**

**Self**

**Spouse**

Amount of gross income

										.00
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										.00
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Tax deducted, if any, on income

										.00
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										.00
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**ANNUAL PAYMENTS, CHARGES AND INTEREST PAID**

**31 - Rent paid to Non-Resident Landlord**

Gross amount of rent paid in the year 2009

										.00
--	--	--	--	--	--	--	--	--	--	-----

										.00
--	--	--	--	--	--	--	--	--	--	-----

**32 - Retainable Charges (e.g. Annuities)**

Gross amount of Annual payment

										.00
--	--	--	--	--	--	--	--	--	--	-----

										.00
--	--	--	--	--	--	--	--	--	--	-----

Date of Payment (DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**33 - Payments made under Legally Enforceable Maintenance Arrangements**

(a) From which **no tax was deducted** prior to payment

Gross amount of annual payment

										.00
--	--	--	--	--	--	--	--	--	--	-----

										.00
--	--	--	--	--	--	--	--	--	--	-----

Date of payment (DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

(b) From which **tax was deducted** prior to payment

Gross Amount of annual payment

										.00
--	--	--	--	--	--	--	--	--	--	-----

										.00
--	--	--	--	--	--	--	--	--	--	-----

Date of payment (DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**34 - Deeds of Covenant**

Please tick  the box(es) to indicate who the covenant is in respect of:

Permanently Incapacitated Minor  
(Other than parent to own child)

Permanently Incapacitated Adult

Adult aged 65 or over\*

Name of Covenantee

--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--

Relationship to the Covenantee

--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--

Original date of the Deed of Covenant

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Gross amount of the Annual Payment

										.00
--	--	--	--	--	--	--	--	--	--	-----

										.00
--	--	--	--	--	--	--	--	--	--	-----

\*Restricted amount (5% of Total Income in respect of covenants to adults aged 65 or over)

										.00
--	--	--	--	--	--	--	--	--	--	-----

										.00
--	--	--	--	--	--	--	--	--	--	-----

**35 - Additional Voluntary Contributions (AVCs)**

If you have made Additional Voluntary Contributions to your superannuation fund tick  the box(es) to indicate the type of payment and give the details requested below.

- PRSA AVC

- Other

State the name of the employment where your Superannuation fund is held

--	--	--	--	--	--	--	--	--	--	--

--	--	--	--	--	--	--	--	--	--	--

If you are a Specified Sports person (Schedule 23A TCA 1997) please tick  the box(es)

If you are a member of a Pre-Approved Pension Scheme please tick  the box(es)

Total Amount paid in 2009 (for which relief has not been claimed or granted in 2008)

										.00
--	--	--	--	--	--	--	--	--	--	-----

										.00
--	--	--	--	--	--	--	--	--	--	-----

--	--	--	--	--	--	--	--

**35- Additional Voluntary Contributions (AVCs) (contd.)**

**Self**

**Spouse**

Amount of AVC Contributions already relieved under the net pay arrangement in 2009

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

Amount paid in a prior year, for which relief has not been obtained

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

Amount paid between 1 January 2010 and 31 October 2010 for which relief has not already been granted and for which relief is being claimed for 2009

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

**Total amount of AVC Relief claimed in 2009**

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

**36- Personal Retirement Savings Account (PRSA)**

Only complete Panel 36 if you, or your employer on your behalf, made PRSA contributions.

If you have made PRSA contributions, tick  the box(es) to indicate the type of Certificate received from the Provider and give the details requested below

**PRSA 1 Certificate**



**PRSA 1 (Net Pay) Certificate**



(Please note that PRSA contributions made on your behalf by your employer should be included in Panel 7 on Page 4)

If you are a Specified Sportsman (Schedule 23A TCA 1997) please tick  the box(es)



If you are a member of a pre-Approved pension scheme Please tick  the box(es)



Total amount paid in 2009 (for which relief has not been claimed or granted in 2008)

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

Amount of PRSA contributions already relieved under the net pay arrangement in 2009

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

Amount carried forward in a prior year, for which relief has not been obtained

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

Amount paid between 1 January 2010 and 31 October 2010 for which relief has not already been granted and for which relief is being claimed for 2009

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

PRSA contributions made on your behalf by your employer

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

**Total amount of PRSA Relief claimed in 2009**

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

**37 - 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 Sportsman (Schedule 23A TCA 1997) please tick  the box(es)



If you are a member of a Pre-Approved Pension Scheme please tick  the box(es)



Total amount paid in 2009 (for which relief has not been claimed or granted in 2008)

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

Amount of RAC Contributions already relieved under the net pay arrangement in 2009

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

Amount paid in a prior year, for which relief has not been obtained

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

Amount paid between 1 January 2010 and 31 October 2010 for which relief has not already been granted and for which relief is being claimed for 2009

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

**Total amount of RAC Relief claimed in 2009**

								.00
--	--	--	--	--	--	--	--	-----

								.00
--	--	--	--	--	--	--	--	-----

--	--	--	--	--	--	--	--

**38 - Overseas Pension Plans: Migrant Member Relief**

Amount claimed by 'relevant migrant member' in respect of a 'qualifying overseas pension plan'

Self							
							.00

Spouse							
							.00

Amount paid between 1/1/2010 and 31/10/2010 for which relief has not already been granted and for which relief is being claimed in 2009

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

Amount paid in a prior year, for which relief has not been obtained

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

**Total amount of Migrant Member Relief claimed in 2009**

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

**39 - Mortgage Interest Relief where Tax Relief at Source (TRS) was NOT granted**

**On a loan used for the purchase, repair, development or improvement of your main residence**

Amount of Loan

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

Date loan taken out (DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Where the loan was taken out on or before 31/12/2002 state the amount of interest paid in the period 1/1/2009 – 30/4/2009

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

Where the loan was taken out after 1/1/2003 please complete the following:

a) If 2009 is one of the first 7 tax years for which you have entitlement to relief please tick  the box(es)

b) State the amount of interest paid in the period 1/1/2009 - 30/4/2009

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

c) State the amount of interest paid in the period 1/5/2009 - 31/12/2009

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

**40 - Bridging Loan Interest**

Date loan taken out (DD/MM/YYYY)

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Amount of qualifying bridging loan interest for this year

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

**CLAIM FOR TAX CREDITS, ALLOWANCES AND RELIEFS FOR THE YEAR 2009**

**41- Home Carer Tax Credit**

Tick  the appropriate box to indicate the dependent (other than the spouse of the claimant) for whom care is being provided:

Child

Permanently Incapacitated Individual

Individual aged 65 or over

Dependent relative living within 2km of claimant

**42- PAYE Tax Credit**

Tick  the box(es) if claimed

Self

Spouse

**43- Allowable Deductions Incurred in Employment**

Nature of Employment

--

--

Expenses

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

Superannuation Contributions (where not deducted by employer)

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

**Total**

							.00
--	--	--	--	--	--	--	-----

							.00
--	--	--	--	--	--	--	-----

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

PPS No.

Any panel(s) or section(s) that do not require an entry should be left blank.

**44 - Blind Person's Tax Credit**

Self

Spouse

Please Tick  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 an Ophthalmic Surgeon stating that you or your spouse have impaired vision to the extent that your central visual acuity does not exceed 6/60 in the better eye with correcting lenses, or that the widest diameter of the visual field subtends an angle no greater than 20 degrees.  
(It is not necessary to forward this certificate with your claim)

**45 - Guide Dog Allowance**

Number of Guide Dogs maintained by you.



To qualify for this allowance you must hold a letter from the Irish Guide Dogs for the Blind confirming you are a registered owner. (It is not necessary to forward this letter with your claim)

**46 - Dependent Relative Tax Credit**

Number of Dependent Relatives



Dependent Relative tax credit is not due if your relative's income exceeded €13,837 in the year 2009 or if this tax credit is being claimed in full by another person

**47 - One-Parent Family/Widowed Parent/Incapacitated Child/ Increased Exemption - Dependent Children**

If you wish to claim any of these tax credits, please tick  the appropriate box(es) and enter the details requested below

(a) One-Parent Family Tax Credit\*

(c) Incapacitated Child Tax Credit

(b) Widowed Parent Tax Credit

(d) Increased Exemption for Dependent Children

Child's Name

Date of Birth

Name of school if receiving full-time education or name of employer if receiving at least 2 years full-time training for a trade or profession - or - Nature of incapacity, if relevant.

(DD/MM/YYYY)

	D	D	M	M	Y	Y	Y	Y	
	D	D	M	M	Y	Y	Y	Y	
	D	D	M	M	Y	Y	Y	Y	

\*One-Parent Family Tax Credit may not be claimed in the case of a married couple or an unmarried couple who are living together as man and wife. The child must reside with the claimant for the whole or part of the tax year.

**48 - Employing a Carer**

Self

Spouse

If you, your spouse or a relative were permanently incapacitated by reason of mental or physical infirmity and you **employed** a carer please tick  the appropriate box(es).

For whom was the carer employed? Self

Spouse

Relative

Net cost of **employing** a carer in the year 2009 (After deducting any payments received from Health Service Executive, etc.)



**49 - Permanent Health Insurance**

(if not deducted from Gross Pay by Employer) - Please note that this is not Health/Medical Insurance

Name of Insurer



Amount paid in the year 2009



**50 - Medical Insurance**

Amount of premium paid in the year 2009 for which tax relief was **not** granted at source or if **your employer** paid medical insurance premiums on your behalf to an authorised insurer (e.g. VHI, Quinn Healthcare, Hibernian Aviva Health, etc.) in the year 2009, state the gross amount paid



Amount of age - related tax credit in respect of this premium



Amount of any contribution made by you

PPS No.

Grid for PPS No.

Any panel(s) or section(s) that do not require an entry should be left blank.

51- Business Expansion Scheme

Amount of relief claimed in 2009

Self: Amount of relief claimed in 2009

Spouse

Spouse: Amount of relief claimed in 2009

Enter relevant RICT 3 certificate number, or, if appropriate,

Self: RICT 3 certificate number

Spouse: RICT 3 certificate number

The Designated Fund's reference number

Self: Designated Fund's reference number

Spouse: Designated Fund's reference number

52- Seed Capital Scheme

Amount of relief claimed in 2009

Self: Amount of relief claimed in 2009

Spouse: Amount of relief claimed in 2009

Note: If you are claiming relief for prior years you should submit full details to your Revenue Office

Self: Note details

Spouse: Note details

53 - Film Relief

Amount claimed in 2009

Self: Amount claimed in 2009

Spouse: Amount claimed in 2009

Amount carried forward from previous year

Self: Amount carried forward from previous year

Spouse: Amount carried forward from previous year

Enter all relevant Film 3 certificate numbers

Self: Film 3 certificate numbers

Spouse: Film 3 certificate numbers

Self: Film 3 certificate numbers

Spouse: Film 3 certificate numbers

54 - Qualifying Tuition Fees Paid

If you are claiming for more than one course, please provide full details of any additional courses on a separate sheet and attach it to the back of this Form 12.

Type of course (e.g. Third Level Undergraduate, Postgraduate, Information Technology or Foreign Language Training courses.)

Self: Type of course

Spouse: Type of course

Duration of course (Number of Years)

Self: Duration of course

Spouse: Duration of course

Name of course

Self: Name of course

Spouse: Name of course

Name of college or course provider

Self: Name of college or course provider

Spouse: Name of college or course provider

Amount of qualifying Fees paid in respect of the 2009 academic year

Self: Amount of qualifying Fees paid

Spouse: Amount of qualifying Fees paid

Name of Student

Self: Name of Student

Spouse: Name of Student

You must obtain a receipt from the course provider

55 - Trade Union Subscriptions

If you are a member of a trade union, please tick the box(es) to claim this credit

Self: Trade Union Subscriptions

Spouse: Trade Union Subscriptions

56 - Amount of Owner Occupier Relief on a Residential Property in a Designated Area due in 2009

Where you are claiming relief under this incentive scheme please also insert these details in Panel 66 on page 16 of this return

Self: Amount of Owner Occupier Relief

Spouse: Amount of Owner Occupier Relief

57 - Service Charges

Tax Relief for amounts paid in full and on time in the 12 months ended 31 December 2008:

As a fixed annual charge to a Local Authority/Private Contractor

Self: As a fixed annual charge

Spouse: As a fixed annual charge

Under a "tag system" to a Local Authority/Private Contractor

Self: Under a "tag system"

Spouse: Under a "tag system"

PPS No.

PPS Number input boxes

Any panel(s) or section(s) that do not require an entry should be left blank.

58 - Retirement Relief for Certain Sportspersons

Self

Spouse

If, during the tax year 2009, you or your spouse ceased permanently to be engaged in a "specified occupation" or to carry on a "specified profession" as listed in Schedule 23A TCA 1997 and you wish to claim relief under Section 480A TCA 1997, tick [X] the box(es) and give the information requested

Self checkbox

Spouse checkbox

What specific occupation or profession does this claim relate to

Self occupation input box

Spouse occupation input box

Date of Permanent Cessation from specified occupation/profession

Self date input box (DDMMYYYY)

Spouse date input box (DDMMYYYY)

Amount of relief claimed for the year 2009

Self amount input box (with .00)

Spouse amount input box (with .00)

Note: If you are claiming relief for prior years you should submit full details.

59 - Seafarer Allowance

Name of employer

Self employer name input box

Spouse employer name input box

Number of days spent at sea in 2009

Self days input box

Spouse days input box

60 - Transborder Relief

To claim Transborder Relief an individual must be an Irish Resident, hold the foreign employment for a continuous period of at least 13 weeks in a country with which Ireland has a Double Taxation Agreement and he/she must be present in the State for at least one day in each of those weeks

Country in which employment took place

Self country input box

Spouse country input box

If you are claiming Split-Year Treatment please tick [X] the box(es)

Self checkbox

Spouse checkbox

Amount of salary on which you are claiming Transborder Relief

Self salary input box (with .00)

Spouse salary input box (with .00)

61 - Health Expenses

(please complete and submit a form Med 1 if you have not already done so)

State the amount of Health Expenses claimed for the year 2009 (Excluding Relief for Nursing Home expenses)

Self health expenses input box (with .00)

Spouse health expenses input box (with .00)

State the amount of Approved Nursing Home Expenses claimed for the year 2009

Self nursing home expenses input box (with .00)

Spouse nursing home expenses input box (with .00)

62 - Rent Tax Credit

Address of rented property

Self address input box

Spouse address input box

Rent payable to (please tick: [X] the appropriate box(es))

Private Landlord [ ]

Business [ ]

Agent [ ]

Non-Resident Landlord [ ]

Name of Landlord/Business/Agent

Self name input box

Spouse name input box

Address of Landlord/Business/Agent

Self address input box

Spouse address input box

Tax Registration Number of Landlord (e.g. PPS Number if known)

Self tax registration number input box

Spouse tax registration number input box

Date Tenancy Commenced (DD/MM/YYYY)

Self tenancy date input box (DDMMYYYY)

Spouse tenancy date input box (DDMMYYYY)

Amount of rent paid in 2009

Self rent paid input box (with .00)

Spouse rent paid input box (with .00)

PPS No.

Grid for PPS No.

Any panel(s) or section(s) that do not require an entry should be left blank.

63 - Revenue Job Assist

Name of employer

Box for Name of employer (Self)

Box for Name of employer (Spouse)

Year of Claim - please tick the appropriate box(es):

Year 1, Year 2, Year 3 checkboxes (Self)

Year 1, Year 2, Year 3 checkboxes (Spouse)

64 - Employee Share Purchase

Total cost of new ordinary shares

Grid for Total cost of new ordinary shares (Self)

Grid for Total cost of new ordinary shares (Spouse)

Date of purchase (DD/MM/YYYY)

Grid for Date of purchase (Self)

Grid for Date of purchase (Spouse)

Relief granted in prior years (S.479 TCA 1997)

Note: Lifetime Limit = €6,350

Grid for Relief granted in prior years (Self)

Grid for Relief granted in prior years (Spouse)

CAPITAL GAINS AND CHARGEABLE ASSETS

65 - Capital Gains Tax for the year 1 January 2009 – 31 December 2009

Give details of all disposals (by sale, exchange, gift or otherwise) of chargeable assets, e.g. land, shares, paintings, antiques, etc. made by you or your spouse in the year 2009.

Chargeable Gain(s) (excluding Foreign Life Policies)

Grid for Chargeable Gain(s) (Self)

Grid for Chargeable Gain(s) (Spouse)

Previous Gain(s) Rolled-over (now chargeable)

Grid for Previous Gain(s) Rolled-over (Self)

Grid for Previous Gain(s) Rolled-over (Spouse)

Net Loss(es) in 2009

Grid for Net Loss(es) in 2009 (Self)

Grid for Net Loss(es) in 2009 (Spouse)

Unused Losses from prior year(s)

Grid for Unused Losses from prior year(s) (Self)

Grid for Unused Losses from prior year(s) (Spouse)

Personal Exemption (max €1,270 per spouse & non transferrable)

Note: losses, including losses forward must be used first

Grid for Personal Exemption (Self)

Grid for Personal Exemption (Spouse)

Net Chargeable Gain (excluding Foreign Life Policies)

Grid for Net Chargeable Gain (Self)

Grid for Net Chargeable Gain (Spouse)

Net Chargeable Gain on Foreign Life Policies

Grid for Net Chargeable Gain on Foreign Life Policies (Self)

Grid for Net Chargeable Gain on Foreign Life Policies (Spouse)

Unused Losses for carry forward to 2010

Grid for Unused Losses for carry forward to 2010 (Self)

Grid for Unused Losses for carry forward to 2010 (Spouse)

If you have an overall Capital Gains Tax loss in 2008 there is no need to complete the sections below.

In respect of net chargeable gains that arose in the period 1 January 2009 to 30 November 2009

(a) Enter chargeable gain @ 22% (1/1/2009 – 7/4/2009)

Grid for (a) (Self)

Grid for (a) (Spouse)

(b) Enter chargeable gain @ 25% (8/4/2009 – 30/11/2009)

Grid for (b) (Self)

Grid for (b) (Spouse)

(c) Enter chargeable gain @ 40% (excluding Foreign Life Policies)

Grid for (c) (Self)

Grid for (c) (Spouse)

(d) Enter chargeable gain on Foreign Life Policies @ 40%

Grid for (d) (Self)

Grid for (d) (Spouse)

In respect of net chargeable gains that arose in the period 1 December 2009 to 31 December 2009

(a) Enter amount of net gain to be charged @ 25%

Grid for (a) (Self)

Grid for (a) (Spouse)

(b) Enter amount of net gain to be charged @ 40% (excluding Foreign Life Policies)

Grid for (b) (Self)

Grid for (b) (Spouse)

(c) Enter amount of net gain on Foreign Life Policies to be charged @ 40%

Grid for (c) (Self)

Grid for (c) (Spouse)

**66 – PROPERTY BASED INCENTIVES ON WHICH RELIEF IS CLAIMED IN 2009**

You are required to provide the following information in support of your claim to any of the following reliefs. You should note that the details required by this panel are the “specified details” referred to in Section 1052(1)(aa) and Section 1084(1)(b)(ib) TCA 1997 and that any failure to fully and correctly complete this panel may leave you liable to penalties under Section 1052 TCA 1997 and/or a surcharge under Section 1084 TCA 1997.

Enter the amount of the annual cost of the relief, that is the amount claimed in the year, excluding amounts carried forward into the year either as losses or capital allowances, and before deducting any amount of unused losses and/or capital allowances which will be carried forward to subsequent years.

**Residential Property**

	Sections in TCA 1997	Owner Occupier S.372 AR	Investor - Lessor S.372 AP/AU
Urban Renewal	S.372AP & AR	.00	.00
Town Renewal	S.372AP & AR	.00	.00
Seaside Resort	S.372AU		.00
Rural Renewal	S.372AP & AR	.00	.00
Living over the Shop	S.372AP & AR	.00	.00
Park and Ride	S.372AP & AR	.00	.00
Student Accommodation	S.372AP		.00

**Industrial Building Allowance**

		Owner Occupier	Investor - Lessor
Urban Renewal	S.372C & D	.00	.00
Town Renewal	S.372AC & AD	.00	.00
Seaside Resort	S.352 & S.353	.00	.00
Rural Renewal	S.372M & N	.00	.00
Multi-storey Car Parks	S.344	.00	.00
Living over the Shop (Commercial Premises Only)	S.372D	.00	.00
Enterprise Areas	S.343	.00	.00
Park and Ride	S.372V & W	.00	.00
Hotels	S.268(1)(d)	.00	.00
Holiday Cottages	S.268(3)	.00	.00
Holiday Hostel	S.268(2C)(b)	.00	.00
Guest Houses	S.268(2C)(a)	.00	.00
Nursing Homes	S.268(1)(g)	.00	.00
Housing for elderly/infirm	S.268(3A)	.00	.00
Convalescent Homes	S.268(1)(i)	.00	.00
Qualifying Hospitals	S.268 (2A)	.00	.00
Qualifying Mental Centres	S.268(1C)	.00	.00
Qualifying Sports Injury Clinics	S268(2B)	.00	.00
Buildings used for certain childcare purposes	S843A	.00	.00
Specialist Palliative Care Units	S.268(1)(m)	.00	.00
Buildings or Structures in registered caravan & camping sites	S.268(2)(D)	.00	.00
Mid-Shannon Corridor Tourism Infrastructure Investment Scheme	S. 372AW	.00	.00

Where the scheme(s) on which you are claiming relief is/are not listed above state the name of the Incentive Scheme(s), quote the relevant section and enter the amount of relief claimed in the year (Owner Occupier, Investor-Lessor).

	.00
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