

ANNUAL FRINGE BENEFITS TAX RETURN

FBT Year Ending 31 March

1. EMPLOYER DETAILS

Employer Name	
Australian Business Number (ABN)	
Postal Address	
Contact Person	
Phone Number	

2. SUMMARY OF FRINGE BENEFITS

Benefit Category	Gross-up Type	Taxable Value (\$)
Car Fringe Benefits		
Debt Waiver Fringe Benefits		
Loan Fringe Benefits		
Expense Payment Fringe Benefits		
Housing Fringe Benefits		
Living-away-from-home Allowance Fringe Benefits		
Airline Transport Fringe Benefits		
Board Fringe Benefits		
Meal Entertainment Fringe Benefits		
Car Parking Fringe Benefits		
Property Fringe Benefits		
Residual Fringe Benefits		

3. FBT CALCULATION

Calculation Step	Amount (\$)
Total Type 1 Aggregate Taxable Value (Gross-up rate:)	
Total Type 2 Aggregate Taxable Value (Gross-up rate:)	
Total Grossed-up Value (Type 1 + Type 2)	
Fringe Benefits Tax Rate (%)	
Gross FBT Liability	

Calculation Step	Amount (\$)
Less: FBT Installments Paid	
Net FBT Payable / (Refundable)	

4. DECLARATION

I declare that the information provided in this return is true and correct.

Authorized Signature

Date

Name of Signatory

Designation / Title