

#### **Your PPS Number (PPSN)**

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# Income Tax Return 2022 (incorporating Med 1) - Form 12S

This form is intended for customers with routine tax affairs who are unable to use our online services. Please state the reason you are unable to use our online services in the box provided.							

**Note:** In joint assessed cases this form must be completed by the assessable spouse or civil partner. He or she is responsible for filing tax returns and paying any tax due. If you are not the assessable spouse, completing this form will deem you to be the assessable spouse for this tax year only.

You should return this form to your Revenue office. The address of your Revenue office can be found on any correspondence you have received from Revenue. Use any envelope and write 'FREEPOST' above the address. No stamp is required.

Revenue collects taxes, duties and implements customs controls. We need customers to provide certain personal data for these purposes and for other statutory functions as assigned by the Oireachtas. Your personal data may be shared with other Government Departments and agencies where required by law. Full details of our data protection policy are available on **www.revenue.ie/privacy**. Details of this policy are also available in paper form upon request.

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	Your PPSN					
Personal Details						

Name	
Address	
Date of Birth  Spouse's or civil partner's Date of Birth	
If your marital or civil status changed in 2022, please enter date of change	D D M M Y Y Y
Please provide reason for the change in the box below name, date of birth and PPSN.	w and include spouse / civil partner's

Number of Dependent Children, if any

# **Employment / Pension Details**

If you or your spouse or civil partner has more than 2 types of payment, please provide the additional details on page 12.

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Details - Self							
Employer's / Pension Company's Name (1)							
The following details are available from your fin	al payslip for 2022.						
Pay for income tax							
Income tax paid							
Pay for USC							
USC paid							
Employer's / Pension Company's Name (2)							
The following details are available from your fin	al payslip for 2022.						
Pay for income tax							
Income tax paid							
Pay for USC							
USC paid							

Your	<b>PPSN</b>
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# **Employment / Pension Details Continued**

Details - Spouse or Civil Partner						
Employer's / Pension Company's Name (1)						
The following details are available from your fina	I payslip for 2022.					
Pay for income tax						
Income tax paid						
Pay for USC						
USC paid						
Employer's / Pension Company's Name (2)						
The following details are available from your fina	I payslip for 2022.					
Pay for income tax						
Income tax paid						
Pay for USC						
USC paid						

Your PPSN					
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# Payments from the Department of Social Protection

If you or your spouse or civil partner has more than 2 types of payment from the Department of Social Protection (DSP), please provide the additional details on page 12.

Payments from DSP include -

- State pension (contributory)
- State pension (non-contributory)
- Survivor's pension
- Blind pension
- Invalidity pension

- · Illness benefit
- · Carer's allowance
- Occupational injury benefit
- · Jobseeker's benefit
- Pandemic Unemployment Payment (PUP)

Details - Self	
Payment Type 1	
Total amount of payment received in 2022	.00
Payment Type 2	
Total amount of payment received in 2022	.00
Details – Spouse or Civil Partner	
Payment Type 1	
Total amount of payment received in 2022	.00
Payment Type 2	
Total amount of payment received in 2022	.00

# Your PPSN

# Other Income not subject to PAYE

#### **Details - Self**

Untaxed Income arising in the State (this **includes** income from Irish credit union dividends and Irish government stocks but **excludes** rental income)



#### Irish Deposit Interest / Credit Union Dividends

Gross Deposit Interest / Credit Union Dividends - where Deposit Interest Retention Tax (DIRT) has been deducted

Gross Deposit Interest / Credit Union Dividends - where Deposit Interest Retention Tax (DIRT) has **not** been deducted



#### **Details - Spouse or Civil Partner**

Untaxed Income arising in the State (this **includes** income from Irish credit union dividends and Irish government stocks but **excludes** rental income)



# Irish Deposit Interest / Credit Union Dividends

Gross Deposit Interest / Credit Union Dividends - where Deposit Interest Retention Tax (DIRT) has been deducted

Gross Deposit Interest / Credit Union Dividends - where Deposit Interest Retention Tax (DIRT) has **not** been deducted



Your PPSN					
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# Foreign Pensions / Income

If you or your spouse or civil partner has more than one foreign pension or income, please provide the additional details on page 12. Please enter all amounts in Euro.

Details - Self	
Country where paid from	
Gross amount (€) of State Welfare Pension(s)	.00
Gross amount (€) of all Other Foreign Pension(s) (for example, occupational pension)	.00
Gross amount (€) of other Foreign Income	.00
Details – Spouse or Civil Partner	
Country where paid from	
Gross amount (€) of State Welfare Pension(s)	.00
Gross amount (€) of all Other Foreign Pension(s) (for example, occupational pension)	.00
Gross amount (€) of other Foreign Income	.00

					•			
Healt	th Expenses Relief							
-	or your spouse or civil partner wish to claim for your spouse or civil partner wish to claim for the following the			you m	aintain	in ar	า	
	of Individual	•	e of Birtl	h of In	dividua	ıl		
		D	D	M	Υ	Υ	Y	Υ
	nt paid for maintenance or treatment in an ved' nursing home						.00	(1)
Nursin	g Home Name & Address							
If the e	expenses listed below apply to individuals oth	er than	vou or v	our so	ouse c	r civ	il par	tner.
	provide details below. (Additional details car	-		-			pa.	,
Name	1	PPSN						
Name	2	PPSN						
Amour	nt paid for non routine dental treatment						.00	(2)
Amour	nt of Other Qualifying Expenses						.00	(3)
	Total Health Expenses (1 +	2 + 3)					.00	
Deduc	ctions (see 'Deductions' section on page 15)	- if none	write 'N	NONE				
(i)	from any public or local authority, for examp Health Service Executive	ole,						.00
(ii)	under any policy of insurance, for example, VHI, Laya Healthcare, Irish Life Health, etc.							.00
(iii)	other, for example, compensation claim							.00
	Total Deduc	ctions	Γ					.00
	Amount on which tax relief is cla (Total Health Expenses less Total Deduc		Ī					.00

**Your PPSN** 

	Your PPSN		
Tax Credits, Allowances	and Reliefs		
Please note, tax credits such as t tax credit and the employee tax of spouse or civil partner.			
Home Carer Tax Credit To claim the Home Carer Tax Cre married or in a civil partnership a	•		must also be
<ul> <li>The dependent person you care to a child for whom you received Protection (DSP)</li> <li>a person aged 65 years or contact a person who is permanently</li> </ul>	e the child benefit pa over		
<b>Blind Person's Tax Credit</b> If you are blind or you have impa Credit.	ired vision during the	tax year, you can claim th	ne Blind Tax
If you are married or in a civil par Credit.	tnership and you are	both blind, you can both o	laim the Blind Tax
Guide Dog Allowance If you are blind or visually impaire	ed, you can claim a ta	ax credit if you own a train	ed guide dog.
Assistance Dogs for Adults and You can claim a tax credit if you r		stance dog.	
Details - Self			
Home Carer Tax Credit	G	Guide Dog Allowance	
Blind Person's Tax Credit	A	ssistance Dog Allowance	
Flat-rate expenses are available entitled to them please state the			=
Details – Spouse or Civil Partne	er		
Home Carer Tax Credit		Guide Dog Allowance	
Blind Person's Tax Credit	A	ssistance Dog Allowance	

Flat-rate expenses are available to a wide range of trades and professions. If you think your spouse or civil partner is entitled to them please state the nature of his or her trade or profession

in the box below.

	Your PPSN							
Rent Tax Credit								ı
Note: Rent tax credit is <b>not</b> due we remail Accommodation Scheme the tenancy or where your landlo who owns the property in an office Housing Association. See www.r	(RAS) or any othe rd is a Governmer ial capacity, or wh	r State Hous nt Minister or ere your lan	sing Su r a Com dlord is	pport Sonmission	chemes ner of P	s in responding the second sec	pect of Vorks or <b>Spou</b>	se or
l confirm that, in respect of this te payment from a government sche Insert   in the box(es)	• • •	•	-	-	-	Self (	Civil P	artner
confirm that the landlord is not a Works who owns the property in or Housing Association. Insert 🗵 i	an official capacity						Е	
confirm that I paid rent under a toox(es)	tenancy(ies) in the	tax year 20	22. Ins	ert ⊠ in t	the			
Please select (a) and / or (b) as options below applies this disc box(es)			-					<b>)</b>
<ul> <li>a) I confirm that the rented property private residence (PPR) in the but I use it for work or study, a</li> </ul>	e year 2022, or the		•	•	•			
<ul> <li>I am not related to my land</li> </ul>	dlord as parent / cl	nild or child /	parent	t, or				
<ul> <li>I am related to my landlord example, siblings, grandpa etc) and the property is req (RTB) and is not a licence</li> </ul>	arent / grandchild, gistered with the F	aunt / uncle Residential To	, niece enancie	/ nephe es Board	w, d			
<ul> <li>b) I confirm that the rented proper in the year 2022 and he or sh third level education; is not re with the Residential Tenancie</li> </ul>	e was aged under lated to the landlo	23 years pr rd and the p	ior to c roperty	ommeno is regis	cing tered			
		Where the prope				he prope		
Residential Tenancies Board (RT number (if known)		Self or Spouse	or Civil P	arther	a ciliid	in third le	sver educ	ation
Address of the rented property (in (This property must be located w	· ·							
Name of tenant	[							
PPSN of tenant				一一				egiliar
Start date of tenancy	ББММ		V		B/I B			
If the tenancy ended in 2022, provide the end date	D D M M	YYY	Υ	D D	M	Л	Y	Y
Local Property Tax (LPT) Property ID (if known)	_ [	- 40						
	Pag	<del>2</del> 10						

Your PPSN
Gross amount of rent paid in 2022
Address of Landlord / Agency, if known (include Eircode)
Insert ⋈ in the box if your landlord is non-resident
If the rent was paid to an agent, please provide the landlord's name and address (if known)
Landlord's PPSN (if known)
Declaration
I declare that, to the best of my knowledge and belief, all the particulars given in this form are stated correctly.
stated correctly.  If I am the non-assessable spouse, I hereby elect to be the assessable spouse for the 2022 ta year.  Any person who knowingly makes a false statement in completing this return is liable to heavy
stated correctly.  If I am the non-assessable spouse, I hereby elect to be the assessable spouse for the 2022 ta year.  Any person who knowingly makes a false statement in completing this return is liable to heavy penalties. (See page 16)
If I am the non-assessable spouse, I hereby elect to be the assessable spouse for the 2022 ta year.  Any person who knowingly makes a false statement in completing this return is liable to heavy penalties. (See page 16)  Signature  Date
stated correctly.  If I am the non-assessable spouse, I hereby elect to be the assessable spouse for the 2022 ta year.  Any person who knowingly makes a false statement in completing this return is liable to heavy penalties. (See page 16)
If I am the non-assessable spouse, I hereby elect to be the assessable spouse for the 2022 ta year.  Any person who knowingly makes a false statement in completing this return is liable to heavy penalties. (See page 16)  Signature  Date  Relationship to Signatory (If not signed by taxpayer, for example, Agent, Personal
If I am the non-assessable spouse, I hereby elect to be the assessable spouse for the 2022 ta year.  Any person who knowingly makes a false statement in completing this return is liable to heavy penalties. (See page 16)  Signature  Date  Relationship to Signatory (If not signed by taxpayer, for example, Agent, Personal Representative)  In case of query about this Return, please provide the following details:
If I am the non-assessable spouse, I hereby elect to be the assessable spouse for the 2022 ta year.  Any person who knowingly makes a false statement in completing this return is liable to heavy penalties. (See page 16)  Signature  Date  Relationship to Signatory (If not signed by taxpayer, for example, Agent, Personal Representative)

	Your PPSN					
Refunds						
It is quicker to receive payment paid directly to your bank accor Revenue refunds will be made Bank Details – Self	unt, please provide y	our bank acco	unt details	<u> </u>		
IBAN (Maximum 34 characters	)					
Bank Details – Spouse or Civil Partner						
If you are married or in a civil p provide your spouse's or civil p	•	•	t Assessme	ent in 2022, please		
IBAN (Maximum 34 characters	)					

# **Additional Information**

Please use this page to provide additional details on any section in the form if needed.

#### What is this Form 12S?

The Form 12S is a simplified return for certain PAYE taxpayers. If you are claiming other tax credits or have other sources of income not included on this form; for example, remote working credit or rental income, you should complete the income tax return (Form 12). You must declare all taxable income that you received in 2022.

#### **Completing the Form 12S**

When completing this form please use BLOCK CAPITALS and a blue pen where possible. Please insert Euro (€) figures only.

#### **Accessibility**

If you are a **person with a disability** and have any difficulties in completing this form the Revenue Access Officer can be contacted at

PerAccessOfficer@revenue.ie or by phone at (01) 424 4229 or (047) 62145.

#### **Payments from the Department of Social Protection**

The Social Welfare Consolidation Act 2005 provides for the payment of an increase in the amount of the State pension where the recipient has an adult dependent. For tax purposes, the State pension recipient should include the total amount of the pension and the increased adult dependent payment in the relevant field on the return. The State pension recipient will be due the employee tax credit. Their spouse or civil partner is not entitled to the employee tax credit in respect of the adult dependent payment.

#### **Qualifying Health Expenses**

The headings under which expenses qualify include, but are not limited to -

- Services of a doctor or consultant
- Total cost of prescribed drugs or medicines for the year (where supplied on the prescription of a qualifying practitioner)
- Educational Psychological Assessment for a dependent child
- Speech and Language Therapy for a dependent child
- Orthoptic or similar treatment (on referral from a doctor or other qualifying practitioner)
- Diagnostic procedures (X-rays, etc.)
- Physiotherapy or similar treatment (on referral from a doctor or other qualifying practitioner)
- Maintenance or treatment in a hospital
- · Expenses incurred on any medical, surgical or nursing appliance
- Non-Routine Dental Treatment.

#### **Nursing Homes**

Nursing Homes must provide qualified nursing care on-site on a 24 hour per day basis.

## **Consumable products**

Relief can be claimed for the costs incurred on products manufactured specifically for coeliacs and diabetics where this expenditure is incurred on the advice of a qualifying medical practitioner.

## **Non-Routine Dental Expenses**

You must have a completed Form Med 2 (Dental), signed and certified by the dental practitioner when making a claim for non-routine dental expenses. A full list of qualifying treatments is listed on the reverse of the Form Med 2 (Dental) which is available from your dental practitioner. You do not have to submit the Form Med 2 (Dental) with this Return. However, you must keep the Form Med 2 (Dental) for six years as you may be asked to send it in if your claim is chosen for a detailed examination.

#### Health Expenses that do not qualify

- Cost of sight testing and provision and maintenance of spectacles and contact lenses.
- Routine dental treatment which is defined as 'the extraction, scaling and filling of teeth and the provision and repair of artificial teeth and dentures'.
- Cosmetic surgery unless the surgery or procedure is necessary as a result of a physical deformity arising from, or directly related to a congenital abnormality, personal injury or a disfiguring disease.

#### Receipts for expenses claimed

You should only make a claim for amounts that you have receipts for. You must keep the receipts for six years as you may be asked to send them to Revenue if your claim is chosen for a detailed examination.

#### Deductions for sums received or receivable in respect of Health Expenses

You cannot claim relief in respect of refunds already received or due to be received from

- · Any public or local authority, for example, Health Service Executive
- · Any policy of insurance
- Any other source, for example, a compensation claim.

You must give details of such amounts and deduct them from the amount claimed on the claim form.

## **Capital Gains Tax**

If you, or your spouse or civil partner, have disposed of any chargeable assets, for example, land, shares, paintings, antiques, etc. in the year 2022, you must complete Form CG1. Please contact your Revenue office if you need a Form CG1.

#### Penalties / 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 penalty of up to double the difference between the declared tax due and the tax ultimately found to be due and / or to imprisonment.

#### **Time Limit for Repayment Claims**

You must make a claim for a repayment of tax within four years after the end of the tax year to which the claim relates. For example, claims for 2019 must be made by 31 December 2023. You must have paid income tax during the year of your claim in order to receive a repayment. If you owe income tax to Revenue for an earlier year, your repayment may be reduced by this amount.

#### **Further information**

You can get further information by contacting your Revenue office on 01 738 3636.

If you are calling from outside the Republic of Ireland, please telephone +353 1 738 3636.

The information in these notes is provided as a guide only and is not professional advice, including legal advice. It should not be assumed that the guidance is comprehensive or that it provides a definitive answer in every case.

