Income Tax

CLAIM FOR ALLOWANCES FOR THE YEAR 2024

(By virtue of the Income Tax Law No.118(I) of 2002, as amended)

NOTE. Before completing this form please read the instructions and notes on page two.

ΤΜΗΜΑ ΦΟΡΟΛΟΓΙΑΣ TAX DEPARTMENT

Employee's Name: .... Social Ins. No: ....

Home Address: ....

E-mail Address: ....

T.I.C.: .... Identity / Identification No: .... Tel. Number: ....

EMPLOYEES DECLARATION

PART A. INCOME	€	For use by employer €
1. Salaried Services and benefits that fall within the meaning of income for Social Security purposes (notes 1 and 14)		....
2. Benefits and other amounts that do not fall within the meaning of income for Social Security purposes (notes 1 and 14)		....
3. Social Security Pension and Social Insurance Widow's pension taxable at normal rates (note 5)	....	....
4. Gross Rents → Rents that you receive	Rents	....
5. Income from other sources (note 3) → Income from previous employment (total) or income from second employment (in total)	Other Income	....
6. TOTAL INCOME		....
7. Less income that is not taxable (note 4)	....	....
8. TOTAL TAXABLE INCOME [A6 – A7] with normal rates		....
9. Widow's Pension from this employer –Tick the box if you have chosen to be taxed separately (note 5)	☐	(a) ....
and declare the amount of widows pension that you receive from the Social Security Department	....	(b) ....
Deductions relating to Widows pension		(c) ....
10. AIF carried interest and UCITS performance taxed at 8% special rate –Tick the box if you have chosen to be taxed separately (note 6)	☐	(a) .... (b) ....

** Example: If your yearly gross amount is €15000 then you are eligible to claim up to 1.5% of your total amount that is: 15000*1.5% = **€225,** meaning if you are paying €450 per year on medical insurance you can claim only the €225.

PART B. Less : ALLOWANCES AND DEDUCTIONS

1. Subscriptions to Unions or / and other Professional bodies	Subscriptions	....
2. Deductions for First employment (note 7) — If you are eligible for 20% or 50%	20% or 50%	....
3. Deductions for Rented properties (Capital allowances, Interest and 20% of gross rental income for expenses of rented properties) (note 8)	....	....
4. Other deductions (note 9)	....	....
5. INTERMEDIARY CALCULATION [A8 – (total B1 to B4)]		....
6. Pension, Provident, Health and Social Insurance Funds plus Medical Fund (note 10)	Medical Fund	....
7. Contributions to G.H.S. (General Healthcare System)	....	....
8. Life Insurance Premiums (notes **10 and 11**)	Life Insurance	....
9. Investment in innovative companies (note 12)	....	....

Medical Fund: 1.5% on your gross salary **

I, ...

declare that I have read the instructions on page two and with this in mind I declare that the above information is true and correct and that (Enter X if and where applicable)

☐ **I wish to have tax deducted from the pensions I receive from the Social Security Department**

Signature .... **Date** ....

Your Signature