



Tip: You can also fill out and submit this declaration electronically via Finanz-Online (bmf.gv.at) – around the clock and without special software.

2019

Supplement L 1k-bF for 2019 to Form L 1 or E 1 for the Family Bonus Plus:

- in special cases (Item 3)
- in case of **90%/10% splitting** (Item 4)

How to fill out this form correctly?

- All information must be complete and correct
- Please fill out in **CAPITAL LETTERS** and only in black or blue colour – amount fields in euros and cents

- Fields with a bold frame must be filled in at any rate.
- The appropriate items must be ticked

Supplementary information can be found in the completion instructions L 1k-bF-Erl and in the Tax Book 2020 (bmf.gv.at)

1. Information on the applicant

1.1 10-digit Austrian Social Security Number according to e-card	1.2 Tax account number Tax office number – Tax number ¹⁾	1.3 Date of birth (if there is no social security N ^o , to be filled in at any rate)																										
<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>											<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>											<table border="1" style="width: 100%; height: 20px;"> <tr><td>D</td><td>D</td><td>M</td><td>Y</td><td>Y</td><td>Y</td></tr> </table>	D	D	M	Y	Y	Y
D	D	M	Y	Y	Y																							

2. Information on the child (a separate Supplement L 1k-bF is to be filled in for each child)

2.1 SURNAME		2.3 10-digit social security number of the child																							
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2.2 FIRST NAME		2.4 Date of birth (if there is no social security N ^o , to be filled in at any rate)																							
<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>														<table border="1" style="width: 100%; height: 20px;"> <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																		
2.5 Identification number of the European health insurance card, if no social security number is available		<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>																							

3. Family Bonus Plus in special cases (For further explanations, please refer to the completion instructions L 1k-bF-Erl)

In 2019 there were special circumstances that necessitate monthly consideration of the Family Bonus Plus:

- Separation of the spouses/partners in 2019
- Establishment of a marriage or registered partnership in 2019
- Establishment of a domestic partnership that existed for more than six months in 2019
- Change in the child's country of residence in 2019
- Maintenance payment for the child was not fully made in 2019
- Death of spouse/partner in 2019

2019 Month	My relationship with the child			I apply for the Family Bonus Plus		Country of residence of the child ²⁾ <i>to be filled in in any case</i>			
	I am the recipient of the family allowance	I am the spouse/partner of the parent entitled to family allowances	I am a maintenance payer and entitled to the support money deduction ³⁾	one-half	in full				
January	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td></tr> </table>			
February	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td></tr> </table>			
March	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td></tr> </table>			
April	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td></tr> </table>			
May	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<table border="1" style="width: 100%; height: 20px;"> <tr><td> </td><td> </td><td> </td></tr> </table>			

¹⁾ Field 1.2 is **not** to be completed as a supplement to Form L 1.

²⁾ Enter the vehicle nationality symbol of the country of residence – e.g. A for Austria, D for Germany, H for Hungary, SK for Slovakia, SLO for Slovenia

³⁾ Item 4.1 in Form L 1 k must be completed in any case. Tick the months for which you are entitled to the support money deduction. Information can be found in Item 12 of the completion instructions L 1k-bF-Erl.

Data Protection Policy at bmf.gv.at/datenschutz or in printed form at all tax and customs office locations

PLEASE DO NOT WRITE INTO THIS GREY FIELD

bmf.gv.at

Bundesministerium Finanzen





2019 Month	My relationship with the child			I apply for the Family Bonus Plus		Country of residence of the child ²⁾ to be filled in in any case
	I am the recipient of the family allowance	I am the spouse/partner of the parent entitled to family allowances	I am a maintenance payer and am entitled to the support money deduction	one-half	in full	
June	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text"/>
July	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text"/>
August	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text"/>
September	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text"/>
October	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text"/>
November	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text"/>
December	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="text"/>

4. Distribution of the Family Bonus Plus when paying childcare costs (90%/10% splitting)

(No entry may be made in Item 3 nor in Item 3 of form L 1k).

The following conditions must be met in order for the recipient of the family allowance or the maintenance payer who paid the full amount of statutory maintenance in 2019 to be able to apply for 90% of the available Family Bonus Plus:

- The parents are separated.
- The applicant paid more than half of the childcare costs for the child in 2019 and at least € 1,000.
- As of 01-JAN-2019, the child was not yet 10 years old (significantly disabled children with increased family allowance: 16 years).
- Childcare was provided in a childcare facility in accordance with the law or by a pedagogically qualified person, with the exception of family members belonging to the household.

The other parent is then entitled to 10% of the Family Bonus Plus.

4.1 Country of residence of the child ²⁾ as of 31-DEC-2019

Change of country of residence during the year 2019

4.2 I apply for 90% of the available Family Bonus Plus and confirm that all of the above conditions have been met. In 2019, I paid childcare costs for the child to the amount shown opposite.

4.3 I am entitled to 10% of the Family Bonus Plus because the other parent claims 90%.

Notes

Original documents and receipts

However, retain original documents and vouchers for at least 7 years for a possible inspection. Do **not** send us any additional documents as evidence with this declaration.

Declaration of correctness and completeness

I confirm with my signature that all information given is true. I am aware that incorrect or incomplete disclosure of information is punishable by law.

Tax representation (name, address, telephone/fax number)

Date, signature

²⁾ Enter the vehicle nationality symbol of the country of residence – e.g. A for Austria, D for Germany, H for Hungary, SK for Slovakia, SLO for Slovenia

