

## 2001 business and professional items schedule

**Please print neatly in BLOCK LETTERS with a black or blue ballpoint pen only. Print one letter or number in each box. Print ☒ in appropriate boxes.**

**You must read the publication *Business and professional items* before you can complete this schedule and answer item 13, 14 or 15 on your 2001 tax return for individuals (supplementary section).**

### Your tax file number (TFN)

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See the **Privacy** note in the *Taxpayer's declaration* on page 8 of your 2001 tax return for individuals.

**Your name**

Print your full name.

Title—for example,  
Mr, Mrs, Ms, Miss

[illegible]

Surname or family name

[illegible]

Given names

[illegible]

## P1 Personal services income (PSI)

Only complete this item if you earned PSI as a sole trader.

You will need to read pages 9–13 in *Business and professional items* to complete this item.

## PART A

Did you have a prescribed payments system payee declaration that was in force and received by the Commissioner as at 13 April 2000?

**B** NO ☐ Read on.

**YES** ☐ Go to item **P2**.

**Did you receive 80 per cent or more of your PSI from one source and have a personal services business determination(s) that was in force for the whole of the period you earned PSI?**

**C** NO ☐ Read on.

**YES** ☐ Go to item **P2**.

**If you received less than 80 per cent** of your PSI from each source for the whole of the period you earned PSI **and** you satisfied any of the following personal services business tests, indicate which business test(s) you satisfied. Print **X** in the appropriate boxes.

Unrelated clients test **D1** ☐      Employment test **E1** ☐      Business premises test **F1** ☐

If you printed **X** at **D1**, **E1** or **F1** go to item **P2** on page 2. Otherwise go to part B.

## PART B

PSI—voluntary agreement G . . . . .00

PSI—where Australian Business Number not quoted H . . . . .00

PSI—labour hire or other specified payments 0.....00

PSI—other J . . . . .00

Total amount of deductions for payments to associates for principal work **K** [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] .00

Total amount of other deductions against PSI L [ ] [ ] . [ ] [ ] . [ ] [ ]

**Net PSI** (**G + H + I + J**) less (**K + L**) **M** [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  $\cdot \frac{0}{1}$  [ ] LOSS

Transfer the amount at **M** to **A** item 13 on page 10 of your tax return.

[illegible]

<b>B</b>		
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Commenced business **C2** ☐[illegible]

**Business**

**Suburb or town**

**State**

**Postcode** **D**

	YES	NO
<b>Q</b>		

## INCOME

Total

□ □ □ □ □ □ □ □ . 00

[illegible]

□ □ □ □ □ □ □ □ . ~~00~~

□ □ . □ □ . □ □ □ . □ □

□ □ □ □ □ □ □ □ . ~~00~~ □

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## EXPENSES

**TOTAL EXPENSES**

S													.	00	T													.	00														.	00	
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Add up the boxes for each column.

## RECONCILIATION ITEMS

	<i>Primary production</i>	<i>Non-primary production</i>	<i>Total</i>
Drought investment allowance	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>		<b>U</b> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
Environmental impact assessment and environmental protection expenses	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<b>V</b> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
Landcare operations and water conservation/conveying expenses	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>	<b>W</b> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
Income reconciliation adjustments	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/>	<b>X</b> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/>
Expense reconciliation adjustments	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/>	<b>H</b> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/>
<b>NET INCOME OR LOSS FROM BUSINESS</b>	<b>Y</b> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/>	<b>Z</b> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/>
	Transfer this amount to item 14 on page 10 of your tax return.	Transfer this amount to item 14 on page 10 of your tax return.	

**P9**

## ACTIVITY 1

**F**

Partnership ☐

Sole trader ☐

Type of loss	G	
1. Loss of a loved one		
2. Loss of a job		
3. Loss of a pet		
4. Loss of a home		
5. Loss of a business		
6. Loss of a friend		
7. Loss of a limb		
8. Loss of a spouse		
9. Loss of a child		
10. Loss of a pet		
11. Loss of a home		
12. Loss of a business		
13. Loss of a friend		
14. Loss of a limb		
15. Loss of a spouse		
16. Loss of a child		
17. Loss of a pet		
18. Loss of a home		
19. Loss of a business		
20. Loss of a friend		
21. Loss of a limb		
22. Loss of a spouse		
23. Loss of a child		
24. Loss of a pet		
25. Loss of a home		
26. Loss of a business		
27. Loss of a friend		
28. Loss of a limb		
29. Loss of a spouse		
30. Loss of a child		
31. Loss of a pet		
32. Loss of a home		
33. Loss of a business		
34. Loss of a friend		
35. Loss of a limb		
36. Loss of a spouse		
37. Loss of a child		
38. Loss of a pet		
39. Loss of a home		
40. Loss of a business		
41. Loss of a friend		
42. Loss of a limb		
43. Loss of a spouse		
44. Loss of a child		
45. Loss of a pet		
46. Loss of a home		
47. Loss of a business		
48. Loss of a friend		
49. Loss of a limb		
50. Loss of a spouse		
51. Loss of a child		
52. Loss of a pet		
53. Loss of a home		
54. Loss of a business		
55. Loss of a friend		
56. Loss of a limb		
57. Loss of a spouse		
58. Loss of a child		
59. Loss of a pet		
60. Loss of a home		
61. Loss of a business		
62. Loss of a friend		
63. Loss of a limb		
64. Loss of a spouse		
65. Loss of a child		
66. Loss of a pet		
67. Loss of a home		
68. Loss of a business		
69. Loss of a friend		
70. Loss of a limb		
71. Loss of a spouse		
72. Loss of a child		
73. Loss of a pet		
74. Loss of a home		
75. Loss of a business		
76. Loss of a friend		
77. Loss of a limb		
78. Loss of a spouse		
79. Loss of a child		
80. Loss of a pet		
81. Loss of a home		
82. Loss of a business		
83. Loss of a friend		
84. Loss of a limb		
85. Loss of a spouse		
86. Loss of a child		
87. Loss of a pet		
88. Loss of a home		
89. Loss of a business		
90. Loss of a friend		
91. Loss of a limb		
92. Loss of a spouse		
93. Loss of a child		
94. Loss of a pet		
95. Loss of a home		
96. Loss of a business		
97. Loss of a friend		
98. Loss of a limb		
99. Loss of a spouse		
100. Loss of a child		

[illegible]ATO use only **E**

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[illegible]

**K**

Partnership ☐

Sole trader ☐

Type of loss **L** ☐

**Loss \$**

ATO use only

J					
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[illegible]

**P**

Partnership ☐

Sole trader ☐

Type of loss **R** ☐

Loss \$ T [ ] [ ] [ ] [ ] [ ] [ ] [ ].00

ATO use only 

O				
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**P10**

To find out if this item applies to you, you must read pages 36–37 in *Business and professional items*.

### Do the new prepayment provisions apply to you?

**A** NO ☐ Go to item **P11**.

**YES** ☐ Complete **B** and **C**.

Initial year 13 month  
prepaid expenses

[illegible]

Later year 13 month  
prepaid expenses

[illegible]

## Other

[illegible]

**P12** Trade creditors **F**

<b>P13</b>	Total salary and wage expenses	G	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	-00	<input type="text"/>
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[illegible][illegible]

**P16** Depreciable assets sold **J** [ ][ ][ ][ ][ ][ ][ ][ ] .00

**P17** Trading stock election—  
print **Y** for yes or leave blank **P** ☐

**Taxpayer's signature**

**When you have completed this schedule, complete the time taken, sign and date below.**

Hours taken to prepare and complete this schedule **S**   **F**

Signature

Date        
Day Month Year

**Check that you have included your personal details on this schedule. Attach this schedule to page 3 of your 2001 tax return for individuals. You will only receive your correct entitlement if this schedule is attached.**