

ndividual tax return 2001—tax agents 1 July 2000 to 30 June 2001

Are yo	alian resident?	•		Print Y for yes or N for no.	
Have y	d any attachm ries.	ents—other than		Print Y for yes or N for no.	
Ta	ax file number (TFN)			
Privacy: It is not an offence not to TFN. The ATO is authorised by th this tax return. We need this informagencies authorised by law to recommend and Youth Affairs and De Authority; and other agencies such	e Income Tax A mation to help u eive it—for exar partment of Far	ssessment Act 193 s to administer the mple benefit payme nily and Community	6 and the Income taxation laws. We ent agencies such a Services; law ent	Tax Assessment A may give this infor as Centrelink and forcement agencie	act 1997 to ask for information in remation to other government the Department of Education, s such as the National Crime
Your name Title-	for example,			Your sex-	-print X
Mr,	Mrs, Ms, Miss			in the releva	
Surname or	family name Given names				
	Print Y for yes or N for no.	If yes, print previous surname.			
Your current postal address					
Has your postal address		Suburb or town		State	Postcode
	Print Y for yes or N for no.	Country—if not Australia			
Your home address If the same as your current posta address, print AS ABOVE.	I				
		Suburb or town Country—if not Australia		State	Postcode
Your date of birth If you were under 18 years of age of 30 June 2001 you must complete it on this tax return.		Day Month	Year	Final tax ret If you know th tax return, pri	nis is your final
Your daytime telephone number	Area code		Telephone number		
Your spouse's name	Surname or family name Given names				
Electronic funds transfer (EFT)			ou want to use EF ax benefit payme		
If yes complete the account deta not provide details if they are the as last year.	same	BSB number		Account num	ber

Income

1	Gross salary or wages Main salary or wage occupation					
			Occupation	code		
	Payer's Australian Business Number		Tax withheld	Gro	ss payment	
			.00	C	.00.	
			.00	D	.00.	
			.00	E	.DQ.	
			.00	F	.DQ.	
			.00	G	.Da	
2	Allowances, earnings, tips, director's fees, etc.		.00	K	.DG.	
3	Lump sum payments Amount A in lump sum payments bo	x D	.00	R	.00.	
	5% of amount B in lump sum payments bo	x D	.00	H	.00.	
4	Eligible termination payments Taxable amount other that excessive componer		.00		.00.	
			Excessive component	N	.DQ.	
5	Commonwealth of Australia government allowances and payments like Newstart, youth allowance and		.00	A	.00.	
	austudy payment					Tax
6	Commonwealth of Australia government pensions and allowances		.00	В	.Da	offse
	and allowances					code
7	Other Australian pensions or annuities—including superan	nua				
	Туре		.00	J	.DQ.	
8	Attributed personal services income		.00	0	.00.	
То	tal tax withheld Add up the boxes. \$.00			
9	Total reportable fringe benefits amounts		.00			
10	Gross interest If you are a non-resident make sure you have		Gross interest		.00	
	printed your country of residence on page 1.		O1033 IIItelest		.90	
	TFN amounts withheld from gross interest					
11	Dividends If you are a non-resident make sure you have printed your country of residence on page 1.		Unfranked amount	S	.Da	
	1 , ,		Franked amount	T	.Da	
	TFN amounts withheld from dividends		Imputation	U	.DØ.	
_						
	Only used by taxpayers completing the supplementary s	SUF	PLEMENTARY SECTIO		.00	
_	INCOME OR LO	SS 0	n page 8 and write it her	е.		_

Attach all requested attachments here on top followed by any other attachme	. Place the employee's tax return copy of PA'nts.	YG summaries
Deductions		Claim
D1 Work related car expenses		A .00
D2 Work related travel expenses		B .XX
D3 Work related uniform, occupation specific clothing, laundry and dry cleaning ex		C .Da / Claim
D4 Work related self-education expense	s	D .DQ / Claim type
D5 Other work related expenses		E .00
D6 Interest and dividend deductions		DØ.
D7 Gifts or donations		J .00
D8 Deductible amount of undeducted pu Australian pension or annuity. Deducti or annuities is dealt with at D11 on page 8.		L .00
D9 Cost of managing tax affairs		M .DG
Only used by taxpayers completing	the supplementary section	
	Transfer the amount from TOTAL SUPPLEME SECTION DEDUCTIONS on page 8 and write	
TOTAL DEDUCTIONS	Items D1 to D —add up the	boxes .DQ
SUBTOTAL	TOTAL INCOME OR LOSS less TOTAL DEDUC	CTIONS .Dd /
Losses		
L1 Tax losses of earlier income years cla	nimed this income year Primary product	ion F .Da
	Non-primary product	ion Z .M
TAXABLE INCOME OR LOSS So	ubtract item L1 amounts from amount at SUBTOT	AL \$.00/
Tax offsets		
T1 Spouse (without dependent child or s If you had a spouse during 2000–01 you mu or de facto on page 5.	student), child-housekeeper or housekeepe st complete Spouse details—married	P .DQ / Claim type
Child-housekeeper's separate net income	.00.	
T2 Low income aged persons—If you had must complete Spouse details—married or		N Tax offset
The ATO will calculate the low income aged p	ersons tax offset if label N is completed.	code
T3 Superannuation contributions, annui Personal undeducted superannuation contributions T	Superannuation contributio annuity and pension tax offs	
T4 30% private health insurance—You me Private health insurance policy details on		ble C
Only used by taxpayers completing	ng the supplementary section	
	Transfer the amount from TOTAL SUPPLEME SECTION TAX OFFSETS on page 8 and write	
TOTAL TAX OFFSETS	Items T1 to T —add up the \box	res U DO

Private health insurance policy details

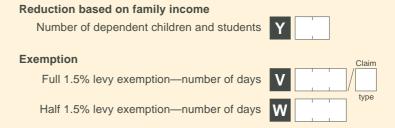
You must provide the details for each policy if items T4 or M2 asked you to complete this question.

Membership number Ty	уре
	F
Ту	уре
/	F
Ту	уре
	F
Ту	уре
	F

Medicare levy related items

M1 Medicare levy reduction or exemption

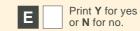
If you complete this item and you had a spouse during 2000–01 you must complete **Spouse details—married or de facto** on page 5.



M2 Medicare levy surcharge (MLS)

This item is compulsory—if you do not complete this question you may be charged the full Medicare levy surcharge.

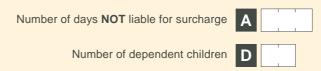
For the **whole** period 1 July 2000 to 30 June 2001, were **you** and **all** your dependants (including your spouse)—if you had any—covered by private patient HOSPITAL cover?



If yes, you must complete Private health insurance policy details above. If no, read below.

If you are liable for the surcharge for the whole period 1 July 2000 to 30 June 2001 you **must** write **0** at label **A**. If you are liable for the surcharge for part of the period 1 July 2000 to 30 June 2001 you **must** write the number of days you were **NOT** liable at label **A**.

If you are NOT liable for the surcharge for the whole period 1 July 2000 to 30 June 2001 you must write 365 at label A.



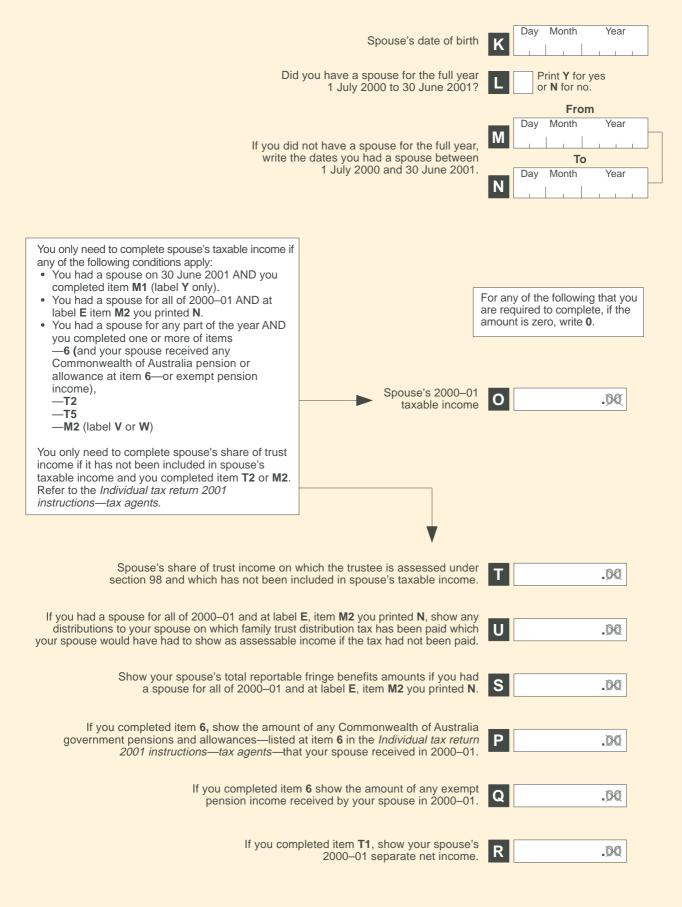
If you had a spouse during 2000–01 (and you printed **N** at label **E**), complete **Spouse details—married or de facto** on page 5. If you were covered by private patient hospital cover at any time during 2000–01 you **must** complete **Private health insurance policy details** above.

Adjustments A1 Under 18 excepted net income .00 If you were under 18 years of age on 30 June 2001 you must complete this item. Date A2 Part-year tax-free threshold Day Month You must read the information on A2 in the Months Individual tax return 2001 instructions—tax agents before completing this item. Income while a full-time student .DO A3 Amount on which family trust distribution tax has been paid .DO You must read the information on A3 in the Individual tax return 2001 instructions—tax agents before completing this item.

A4 Amount on which ultimate beneficiary non-disclosure tax was payableYou must read the information on **A4** in the *Individual tax return 2001 instructions—tax agents* before completing this item.

Spouse details—married or de facto

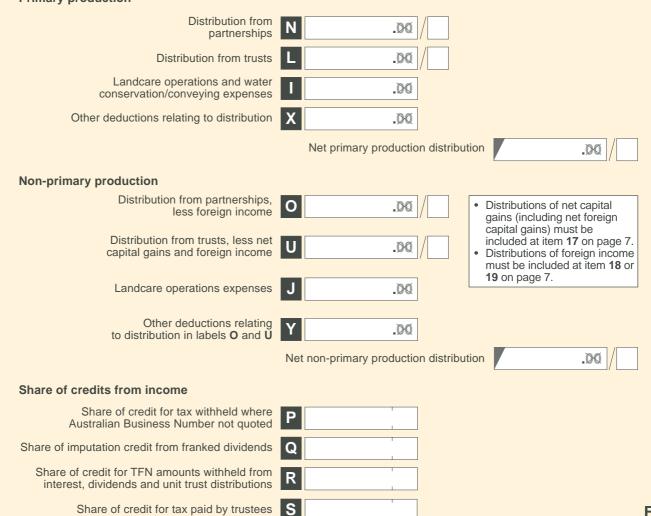
Only provide these details if you had a spouse—married or de facto—during 2000–01 and you completed any of the following items: **6** (and your spouse received any Commonwealth of Australia pension or allowance at item **6** or exempt pension income), **T1**, **T2**, **M1**, **M2** and at label **E** you printed 'N'), **T5** (supplementary section).



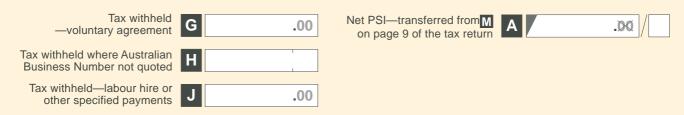
Supplementary section

Income

12 Partnerships and trusts Primary production



13 Personal services income



14 Net income or loss from business

Tax withheld —voluntary agreement		Primary production—transferred from Y on page 10 of your tax return	B .00/
ax withheld where Australian Business Number not quoted	W	Non-primary production— transferred from Z on page 10 of the tax return	C .Dd /
Tax withheld—labour hire or other specified payments	F .00	page 10 of the tax return	

 Loss from business activities—refer to item P9 on page 11 of this return.

15	Deferred non-commercial business los	ses				
	Deferred losses from partnership activities	F .00				
	Deferred losses from sole trader activities	G .00		e deferred loss page 11 of th		
		T.				
		lot	al deferred losses	н	.00	
16	Net farm management deposits or without	drawals		E	.00]/	
17	Capital gains					
	Did you have a CGT event during the year?	G Print Y for yes or N for no.	Net capital gain	A	.00.	
	You must also answer yes at label G , if you received	d a distribution of a capital ga	in from a trust.			
	Total current year capital gains	H .00				
	Net capital losses carried forward to later income years	V .DQ				
18	Foreign entities					
	Did you have either a direct or indirect interest in a controlled foreign company (CFC)?	Print Y for yes or N for no.	CFC income	K	.00	
	Have you ever , either directly or indirectly, caused the transfer of property—including money—or services to a non-resident trust estate?	Print Y for yes or N for no.	Transferor trust income		.00.	
	Did you have an interest in a foreign investment fund (FIF) or a foreign life assurance policy (FLP)?	J Print Y for yes or N for no.	FIF and FLP income		.00	
19	Foreign source income and foreign ass	sets or property				
	Assessable foreign source income	E .00				
	N					ype
	Net ro annuity i	oreign employment and net ncome without an undeduct	toreign pension or ed purchase price		.00.	
		Net foreign pension with an undeduct	or annuity income ed purchase price	D	.00	
		Other net forei	ign source income	M	.00	
	Exempt foreign employment income	N .00				
	Foreign tax credits	0				
	During the year did you own, or have an interest in, assets located outside Australia which had a total value of AUD \$50 000 or more?	P Print Y for yes or N for no.	ı			l
			1			
20	Rent Gross rent	P .00				
	Interest deductions	Q .00				
	Capital works deductions	F .00				
	Other rental deductions	U .00				
			Net P less (Q + F	rent + U)	.00	

22	Other inc	come—not s	hown elsewhere on y	our tax return			
	Type of	Category 1				Y	.DQ
	income	Category 2				V	.DO
		·	Tax withheld sum payments in arre- ble professional inco	ars E	.00.		
	TAL SUPP		RY SECTION		Add up income amounts and decany loss amounts in the box	ces.	.00]/
Ded	uctions						
D10	Australia	n film indu	stry incentives			G	.00
D11			of undeducted pu ension or annuity	rchase		Υ	.DQ.
D12	Non-emp	loyer spon	sored superannu	ation contribu	tions		
	Full name	of fund			Policy number	era a	
					-	Н	.00
D13			not claimable at it	tems D1 to D12	Election expenses	EL	.DQ.
	Description	n of claim			Other deductions	mi	.00
					Other deddellerie	V	.90
TOI	TAL CLIDD						
101	AL SUPP	LEMENTAR	RY SECTION DEDU	JCTIONS			
101	IAL SUPP			_	ransfer this amount to D on pa	age 3	.DQ.
	offsets			_	ransfer this amount to D on pa	age 3	.00.
	offsets Superan	Items I		boxes and t	ouse	age 3	.DØ.
Tax	offsets Superan	Items I	O10 to D13—add up t	boxes and t	ouse to on page 5.	age 3	DQ.
Tax	offsets Superant You must a	Items I	O10 to D13—add up to D10 to D13—add up to D1	boxes and the boxes are the boxes and the boxes are the boxes and the boxes are the bo	ouse to on page 5.	A R	
Tax	Offsets Superani You must a	nuation cor also complete	D10 to D13—add up to D10 to D13—add up to D1	boxes and to half of your spearried or de factorious Contribution	ouse to on page 5.	A R	.DQ.
Tax (offsets Superant You must a Zone or o	nuation cor also complete overseas fo	D10 to D13—add up to ntributions on behaviors details—morces	half of your spearried or de factorious contributions are seen are	ouse to on page 5.	A R X B	.00.
Tax 6 T5 T6	Offsets Superant You must a Zone or of 20% tax of	nuation cor also complete overseas fo	ontributions on behaviors Spouse details—morces	half of your spearried or de factorious contributions are seen are	ouse to on page 5. ons paid Landcare and water facility	A R X	. DQ DQ
Tax 6 T5 T6 T7 T8	Offsets Superant You must a Zone or of 20% tax of	nuation cor also complete overseas for offset on ne pouse's pa	ontributions on behaviors Spouse details—morces	nalf of your spo arried or de fact Contributions	Landcare and water facility tax offset claimed dcare and water facility tax offset	A R X B	.00 .00 .00
Tax 6 T5 T6 T7 T8	Offsets Superant You must a Zone or of 20% tax of	nuation cor also complete overseas for offset on ne pouse's pa	ontributions on behaviors Spouse details—morces	nalf of your spo arried or de fact Contributions	Douse to on page 5. Dons paid	A R X B	.00 .00 .00 .00 .00 .00 .00
Tax 6 T5 T6 T7 T8	Offsets Superant You must a Zone or of 20% tax of	nuation cor also complete overseas for offset on ne pouse's pa	ontributions on behaviors Spouse details—morces	nalf of your spo arried or de fact Contributions	Landcare and water facility tax offset claimed dcare and water facility tax offset	A R X B	.00 .00 .00 .00 .00 .00 .00
Tax (1) T5 T6 T7 T8 T9	offsets Superant You must a Zone or o 20% tax o Parent, s Landcare	nuation cor also complete overseas for offset on ne pouse's pa	ontributions on behaviors Spouse details—morces	nalf of your sparried or de factoristics Contribution ses over \$1250 ative Land brought for	Landcare and water facility tax offset claimed dcare and water facility tax offset	A R X B M T	.00 .00 .00 .00 .00 .00 .00 .00 .00 .00
Tax (17) T6 T7 T8 T9 T10	offsets Superant You must a Zone or o 20% tax o Parent, s Landcare Other tax If you are anywhere	nuation cor also complete overseas for offset on ne pouse's paragraphic and water	ntributions on behavior Spouse details—morces et medical expenserent or invalid relative facility	nalf of your sparried or de factoristics Contribution ses over \$1250 ative Land brought for	Landcare and water facility tax offset claimed dcare and water facility tax offset	A R X B M C T C	.00 .00 .00 .00 .00 .00 .00 .00 .00 .00
Tax (17) T6 T7 T8 T9 T10	Offsets Superant You must a Zone or o 20% tax o Parent, s Landcare Other tax If you are anywhere	nuation cor also complete overseas for offset on ne pouse's pa	ntributions on behavior Spouse details—morces et medical expenserent or invalid relative facility	nalf of your spoarried or de factoristics Contribution Sees over \$1250 ative Land brought for the collection of the	Landcare and water facility tax offset claimed dcare and water facility tax offset orward from earlier income years	A R X B M T C C	.00 .00 .00 .00 .00 .00 .00 .00 .00 .00

Business and professional items section

P1 Personal services income (PSI)

	Only complete item P1 if you earned P5I as a sole trader.
	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? Print X in the appropriate box.
	B NO Read on. YES Go to item P2.
	Did you receive 80% 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? Print X in the appropriate box.
	C NO Read on. YES Go to item P2.
	If you received less than 80% 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 box(es). Refer to the tax return instructions before you complete this question.
	Unrelated clients test D1 Employment test E1 Business premises test F1
	If you printed X at D1, E1 or F1, proceed to P2 below, otherwise go to Part B.
	Part B
	PSI—voluntary agreement G .DQ PSI—where Australian Business
	Number not quoted
	PSI—labour hire or other specified payments
	PSI—other J .DQ
	Total amount of deductions for payments to associates for principal work
	Total amount of other deductions against personal services income
	Net PSI (G + H + I + J) less (K + L) M
	Transfer the amount at label M to label A item 13 on page 6 of the tax return.
2	Description of main business activity
	Industry code A
3	Number of business activities B
4	Status of your business—print X in one box only
	Ceased business C1 Commenced business C2
5	Business name of main business and Australian Business Number (ABN)
	Dustriess Harrie of Hairi Business and Australian Business Harrise (ABH)
	ABN
6	Business address of main business
	Suburb or town State D Postcode
	State Positione

P 8 Business income and expenses

Cost payments where Australian Cost Co	Income	Primary production	Non-primary production	Totals	
Contractor, sub-contractor Contractor, sub-contractor, sub	Gross payments where Australian Business Number not quoted	.00	DØ.	.00	
Assessable governments Assessable governme	Gross payments —voluntary agreement	.00	.00	.00	
Assessable government Color Colo	Gross payments—labour hire or other specified payments			.00	
Total business Income	Assessable government industry payments			.DO	
Expenses	Other business income	.00/	J .DØ /	.00/	
Expenses	Total business income		DØ /	DØ /	
Opening stock	Total business income	.50	.00	.00/	
Purchases and other costs	Expenses				
Closing stock	Opening stock	.00	.00 K	.00	
Closing stock	Purchases and other costs	.00	.00 L		
Contractor, sub-contractor and commission expenses Dd Dd Dd Dd Dd Dd Dd D	Closing stock	.00	.DØ		
Superannuation expenses .0d .0			.00 /	.00 /	F
Superannuation expenses Dd Dd Dd Dd Dd Dd Dd D			.00 F	.00	
Lease expenses .0d	Superannuation expenses	.00	.00 G	.DO	
Rent expensesDdD	Bad debts	.00	.DQ	.DQ	
Interest expenses within AustraliaDd .	Lease expenses	.00	.00 J	.DQ	
Interest expenses overseas	Rent expenses	.00	.00 K	.00	
Interest expenses overseas .Dd .Dd .Dd .R .Dd	Interest expenses within Australia	.00	.00 Q	.DQ	
Motor vehicle expensesDdDdDdDdDdDdDdD			.00 R	.DQ	
Motor vehicle expenses .DØ	Depreciation expenses	.00	.DQ		
All other expensesDd	Motor vehicle expenses	.00	.DQ N		
Total expenses SDØ / TDØ /DØ /DØ /DØDØ /DØ / .	Repairs and maintenance	.00	.00	.00	
Reconciliation items Drought investment allowance .Dd	All other expenses	.DØ.	.00 P	.DØ.	
Reconciliation items Drought investment allowance .DØ	Total expenses S	.DØ /	.00 /	.00 /	
Drought investment allowance .Dd	Add up the boxes for	each column.			
Environmental impact assessment and environmental protection expenses Landcare operations and water conservation/conveying expenses Income reconciliation adjustments .Dd/	Reconciliation items				
and environmental protection expenses Landcare operations and water conservation/conveying expenses Income reconciliation adjustments DØ Net income or loss from business DØ DØ DØ DØ DØ DØ DØ F	Drought investment allowance	.00	U	.00	
Income reconciliation adjustments Expense reconciliation adjustments .Dd/ Expense reconciliation adjustments .Dd/ Net income or loss from business Y .Dd/ Z .Dd/ F	and environmental protection	.00	.00 V	.00	
adjustments .Dd /	Landcare operations and wate conservation/conveying expenses	.00	.DØ	.00	
Net income or loss from business Y .00 / Z .00 / F			.00 / X	.00 /	
from business Y			.00 / H	.00	
		.Dd / 2	.DØ]/	.00	F

P9 Business loss activity details

Note: If you incurred a net loss from more than 3 business activities this year show only the 3 activities with the highest losses. If you are completing this item because you have deferred non-commercial losses, you must have completed item 15 in your tax return.

Activity 1	Description of activity		F
	artnership (P) or sole trader (S)	Type of loss	Loss (\$) H .00 F
Activity 2	Description of activity		F
	artnership (P) or sole trader (S)	Type of loss	Loss (\$) M .00 F
Activity 3	Description of activity		F
	artnership (P) or sole trader (S)	Type of loss	Loss (\$)
P10 13 month prepaid expenses			
Do the new prepaymen provisions apply to you?	Print Y for yes or N for no.		
If Yes	s, complete labels B and C .		
Initial year 13 month prepaid expenses	B .∭		
Later year 13 month prepaid expenses	C .DO		
Other business and professional items			
P11 Trade debtors	E .00		
P12 Trade creditors	F .00		
P13 Total salary and wage expenses	G .DØ /		
P14 Payments to related entities	H .00		
P15 Depreciable assets purchased	.00		
P16 Depreciable assets sold	J .00		
P17 Trading stock election	P Print Y for yes or leave blank.		F

Consent to use part or all of your 2001 tax refund to repay your spouse's family tax benefit (FTB) overpayment

You must read the information on family tax benefit in the *Individual tax return 2001 instructions*—tax agents before completing FTB claimant's details.

Only complete the details below if:

- you were the spouse of an FTB claimant on 30 June 2001 and your income was taken into account in their claim—check with your spouse—AND
- your spouse has given you authority to quote on your tax return their customer reference number (CRN). If your spouse does not know their CRN they can contact the Family Assistance Office
- your spouse expects to have an FTB overpayment for 2001 AND
- you expect to receive a tax refund for 2001 AND
- you consent to use part or all of your tax refund to repay your spouse's FTB overpayment.

Note: An FTB overpayment can only be raised after reconciliation has been completed. If an FTB overpayment is raised after

your refund I	has been sent to you the A	NO will not be able	to use you	r retund to repay the FTE	3 overpayment.
	Spouse's CRN				Spouse's sex Male Female Print X in the relevant box
Spouse's name					
Print full name	Surname or family name Given names				
	Spouse's date of birth	Day Month	Year		
I consent to the ATO have provided above	using part or all of my 2000 e. I have obtained my spous	0–01 tax refund to rele's permission to que	pay the 200 ote their CR	1 FTB overpayment of my N.	spouse, whose details I
Signature			Date	Day Month Year	
I declare that: the information	Provided to my registered registered tax agent to lode	tax agent for the pi		of this tax return is true a	nd correct AND
Signature			Date	Day Month Year	
Important: The	tax law imposes heavy	penalties for givi	ng false or	misleading informatio	n.
Tax agent's ce	ertificate				
I,					
that the taxpayer has	return has been prepared in s given me a declaration sta r has authorised me to lodg	ting that the informa	ormation su tion provide	pplied by the taxpayer, d to me is true and correc	t
Agent's signature		Date		Client's reference	
		Day Month	Year		
Contact name		Agent's telephone	number		Agent's reference number

Telephone number

Area code