

INCOME TAX RETURN - BUSINESS SCHEDULE

NAME					
ITR YEAR		DATE PREPARED			
Description of business activity					
Number of business activities					
Status of business	<input type="radio"/> Continuing <input type="radio"/> Started <input type="radio"/> Ceased				
Business name					
ABN					
Address					
Did you sell goods or services using the internet					
Type of business	<input type="radio"/> Primary <input type="radio"/> Non-Primary				
Deferred loss from prior year					
Type of loss [current year if applicable]					

Income	Weekly	Monthly	Quarterly	Annual	Total
Income					
Total Income					

Cost of Sales	Weekly	Monthly	Quarterly	Annual	Total
Opening					
Purchases					
Closing					
Total Cost of Sales					

Expenses	Weekly	Monthly	Quarterly	Annual	Total
Contractor, sub-contractor and commission expenses					
Superannuation					
Bad debts					
Lease					
Rent					
Interest					

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Expenses	Weekly	Monthly	Quarterly	Annual	Total
Depreciation					
Motor vehicle					
Repairs and maintenance					
All other expenses					
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
Total Expenses					
Total Net					

Client Signature

Date:

Agent Signature

Date: