

Income

10 Gross interest

Gross interest L

Tax file number amounts withheld from gross interest M

BOC

Total Your share TFN amounts withheld Gross interest

ST GEORGE

Total Your share TFN amounts withheld Gross interest

WESTPAC

Total Your share TFN amounts withheld Gross interest

TOTAL INCOME OR LOSS Add up the income amounts and deduct any loss amount in the boxes. 0 LOSS

Deductions

D9 Gifts or donations

J 0

World Vision World Vision

D10 Cost of managing tax affairs

Interest charged by the ATO N 0

Litigation costs L 0

Other expenses incurred in managing your tax affairs M 0

Accounting Fee

D Only used by taxpayers completing the supplementary section Transfer the amount from TOTAL SUPPLEMENT DEDUCTIONS 25,000

TOTAL DEDUCTIONS Items D1 to D add up the boxes 25,000

SUBTOTAL TOTAL INCOME OR LOSS less TOTAL DEDUCTIONS 25,000 LOSS L

TAXABLE INCOME OR LOSS Subtract amounts at F and Z item L1 from amount at SUBTOTAL \$ 25,000 LOSS L

TOTAL TAX OFFSETS Items T2 and T -add up the boxes U 0

M2 Medicare levy surcharge (MLS)

THIS ITEM IS COMPULSORY

If you do not complete this item you may be charged the full Medicare levy surcharge.

For the whole period 1 July 2019 to 30 June 2020, were you and all your dependants (including your spouse) - if you had any - covered by private patient HOSPITAL cover? E Print Y for yes or N for no.

Number of days NOT liable for surcharge A

**Private health insurance policy details**

You must read Private health insurance policy details in the tax return instructions before completing this item.  
Fill all the labels below unless directed in the instructions.

Health insurer ID **B**  Membership number **C**

Your premiums eligible for Australian Government rebate **J**  Your Australian Government rebate received **K**

Benefit code **L**  Tax claim code. Read the tax return instructions. **CODE**

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**Income tests**

You must complete this section.  
If you had a spouse during 2019-20 you must also complete Spouse details – married or de facto on page 7.

**IT1 Total reportable fringe benefits amounts**

If the amount is zero, write 0.

Total reportable fringe benefits amounts (for ATO validation only)

Employers exempt from FBT under section 57A of the FBTA 1986 **N**

Employers not exempt from FBT under section 57A of the FBTA 1986 **W**

**IT2 Reportable employer superannuation contributions**

**T**

**(For ATO validation only)**

Adjusted taxable income  /

Estimated total income  /

Estimated eligible income

Non-resident foreign income

### Supplementary section Income

Refer to the supplement instructions before you complete item 13. If you are required to complete item 13 include deferred non-commercial business losses from a prior year at either X or Y as appropriate. Refer to the supplement instructions for the relevant code.

#### 13 Partnerships and trusts

##### Non-primary production

Distribution from partnerships, less foreign income **O**  /

Share of net income from trusts less capital gains, foreign income and franked distributions **U**  0 /

Franked distributions from trusts **C**

Landcare operations expenses **J**

Other deductions relating to amounts shown at O, U and C **Y**  /  TYPE

Show amount of:  
Capital gains from trusts at item 18 on page 9 and Foreign income at item 19

Net non-primary production amount

0 /  LOSS

961	208	560	Y	T	I	QYA FAMILY TRUST
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NPP income	[	Investments	<input type="text"/>	Credits:	ABN	<input type="text"/>
		Net rental	<input type="text"/>		Franking	<input type="text"/>
		Other	<input type="text"/>		TFN	<input type="text"/>
		PP Income	<input type="text"/>		Closely held trusts	<input type="text"/>
Franked distributions	[	Investments	<input type="text"/>		Tax paid by trustee	<input type="text"/>
		Other	<input type="text"/>	Foreign Resident Withholding	<input type="text"/>	
Net small business inc	[	Partnership	<input type="text"/>		Rental Affordability Scheme	<input type="text"/>
		Trust	<input type="text"/>			

#### 18 Capital gains

Did you have a capital gains tax event during the year? **G**  **N** Print **Y** for yes or **N** for no.

Have you applied an exemption or rollover? **M**  /  CODE

Total current year capital gains **H**

Net capital losses carried forward to later income years **V**

Credit for foreign resident capital gains withholding amounts **X**

You must print Y at G if you had an amount of a capital gain from a trust.

Net capital gain

**A** /

#### 19 Foreign entities

Non-resident trust name

Trustee or Trustees name

Did you have either a direct or indirect interest in a controlled foreign company (CFC)? **I**  **N** Print **Y** for yes or **N** for no.

CFC income

**K** /

Non-managed fund amounts

Have you ever, either directly or indirectly, caused the transfer of property-including money-or services to a non-resident trust estate? **W**  **N** Print **Y** for yes or **N** for no.

Transferor trust income

**B** /

Non-managed fund amounts

#### 20 Foreign source income and foreign assets or property

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**  **N** Print **Y** for yes or **N** for no.

#### D12 Personal superannuation contributions

**H**  25,000

Did you provide your fund (including a retirement savings account) with a notice of intent to claim a deduction for personal superannuation contributions, and receive an acknowledgement from your fund?

Fund name / TFN / ABN	Account no	Y/N
THE YZJ ZENG SUPERANNUATION FUND ABN:60 191 160 041	1	25000

#### TOTAL SUPPLEMENT DEDUCTIONS

Items **D11** to **D15**-add up the **I** boxes and transfer this amount to **D**

25,000

<b>TOTAL SUPPLEMENT TAX OFFSETS</b>	Items T3 to T10 - add up the <input style="width: 50px;" type="text"/> boxes	<input style="width: 100%;" type="text"/>
Transfer this amount to <b>T</b>		<input style="width: 50px;" type="text"/>

**Taxpayer's declaration**

Read and sign the declaration after completing your tax return, including the Supplementary section, Business and professional items section and other schedules if applicable.

**I declare that:**

- the information provided to my registered tax agent for the preparation of this tax return is true and correct, and
- I authorise my registered tax agent to lodge this tax return.

<b>Taxpayer's Signature</b>	<input style="width: 100%;" type="text"/>	<b>Date</b>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
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**Important:** The tax law imposes heavy penalties for giving false or misleading information.

**The ATO will issue your assessment based on your tax return. However, the ATO has some time to review your tax return, and issue an amended assessment if a review shows inaccuracies that change the assessment. The standard review period is two years but for some taxpayers it is four years.**

**Privacy:**  
 The ATO is authorised by the Taxation Administration Act 1953 to request your tax file number (TFN). We will use your TFN to identify you in our records. It is not an offence not to provide your TFN. However if you do not provide your TFN, your assessment may be delayed.  
 Taxation law authorises the ATO to collect information and to disclose it to other government agencies. For information about your privacy go to [ato.gov.au/privacy](http://ato.gov.au/privacy)

**Tax agent's declaration**

I,

declare that this tax return has been prepared in accordance with information supplied by the taxpayer, that the taxpayer has given me a declaration stating that the information provided to me is true and correct and that the taxpayer has authorised me to lodge the tax return.

<b>Agent's signature</b>	<b>Date</b>	<b>Client's reference</b>
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text" value="ZENG0015"/>
<b>Contact name</b>	<b>Agent's telephone number</b>	
<input style="width: 100%;" type="text" value="Enquiry"/>	<small>Area code</small> <input style="width: 100%;" type="text" value="02"/>	<small>Telephonenumber</small> <input style="width: 100%;" type="text" value="9281 1880"/>
<b>Position held</b>	<b>Agent's reference number</b>	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text" value="73164000"/>	