



Australian Government  
Australian Taxation Office

# PAYG payment summary – individual non-business



00460117

You must complete all sections of this form.

For help completing this form, visit our website at [ato.gov.au/paymentsummaries](http://ato.gov.au/paymentsummaries)

If you are **amending a payment summary** you have already sent, place X in this box.

Payment summary for year ending 30 June **2021**

## Section A: Payee details

Tax file number **546 178 088** Date of birth (if known) **22 / 01 / 1953**

Surname or family name

**A D A I R**

Given name/s

**B A R R Y G E O R G E**

Residential address

**162 BENTLEYS ROAD**

Suburb/town/locality

**MAC K A Y**

State/territory

**Q U D**

Postcode

**4740**

## Section B: Payment details

Period during which payments were made **01 / 07 / 2020 to 30 / 06 / 2021**

TOTAL TAX WITHHELD \$ **1,944**

GROSS PAYMENTS (do not include amounts shown under 'Allowances', 'Lump sum payments', 'CDEP payments' and 'Exempt foreign employment income')

\$ **14,400**

Gross payments type

Community Development Employment Projects (CDEP) payments

\$ **0**

Lump sum

A

\$ **0**

Type

Reportable employer superannuation contributions (do not include compulsory super guarantee amounts. For more information, see the back page of this form.)

\$ **23,632**

Lump sum

B

\$ **0**

Reportable fringe benefits amount FBT year 1 April to 31 March

\$ **0**

Lump sum

D

\$ **0**

Is the employer exempt from FBT under section 57A of the FBTAA 1986?

No  Yes

Lump sum

E

\$ **0**

Deductible amount of the undeducted purchase price of an annuity

\$ **0**

Exempt foreign employment income

Amount

\$ **0**

Allowances (provide details)

**0**

\$ **0**

**0**

\$ **0**

Total allowances

\$ **0**

Union/Professional association fees – Name of organisation

**0**

Amount

\$ **0**

**0**

\$ **0**

Workplace giving – Name of organisation

**0**

\$ **0**

## Section C: Payer details

Australian business number (ABN) or withholding payer number (WPN)

**!** You must also complete this section

**24 073 794 135**

Branch number

**0000**

Name (use the same name that appears on your activity statement)

**B G + R F A D A I R P T Y L T D**

Privacy – For information about your privacy, go to [ato.gov.au/privacy](http://ato.gov.au/privacy)

DECLARATION – I declare that the information given on this form is complete and correct.

Signature of authorised

*[Signature]*

Date

Day Month Year

ATO original