

centrelink

Notes for **Private Company**

This form is used to work out your share of a private company's income and assets.

When to use this form



Use this form if in the last 5 years you (and/or your partner):

- have been involved with or transferred any shares related to a private company that is still registered through the Australian Securities Investment Commission (ASIC)
- have been involved with a private company registered overseas
- have made any type of gifts involving a private company (either registered or deregistered).

You do **not** need to complete this form if:

• the private company is now deregistered with ASIC and no gifts need to be declared.

Online services



You can upload this form, with any supporting documents, online.

For more information about how to access an online account or how to lodge documents online, go to servicesaustralia.gov.au/submitdocumentsonline

Using a tax agent or accountant

Much of the information required on the form is only available from those who know the details of the company. Services Australia is not able to help you complete the form.

We suggest you talk to the company tax agent or accountant and consider having them complete the form on your behalf. It is still your responsibility to make sure the form is completed and returned.

If a tax agent or accountant provides information, advice or completes the form, or provides the Income Tax Returns for the company, we will not reimburse any fees they may charge you for this service.

What else you will need to provide

If you are making a claim, you must return this form and **all** other supporting documents at the same time you lodge your claim form. If you do not return all documents, your claim may not be accepted. The only exception will be if you are waiting for medical evidence or other documents from a third party.

For more information

Go to servicesaustralia.gov.au/trustsandcompanies or visit one of our service centres.

If you need to call us, go to servicesaustralia.gov.au/phoneus

We can translate documents you need for your claim for free.

To speak to us in your language call 131 202.

Call charges may apply.

If you have a hearing or speech impairment, you can contact the **TTY service** Freecall™ **1800 810 586**. A TTY phone is required to use this service.

1000 610 300. A 111 priorie is required to use this service.



Keep these Notes (pages 1 to 4) for your information.

Definitions

What is a private company?

For social security purposes, a private company is a company that meets the following rules:

- The company satisfies at least 2 of the following conditions:
 - the consolidated gross operating revenue for the financial year for the company and its subsidiaries is less than \$50 million
 - the value of the consolidated gross assets at the end of the financial year of the company and its subsidiaries is less than \$25 million
 - the company and its subsidiaries have fewer than 100 employees at the end of the financial year, or
- the company is a new company and came into existence after the end of the last financial year, or
- the company is a declared private company, and
- the company is not an excluded company.

Involvement in a private company

A person is involved in a private company if they or their partner:

- are a shareholder, director or other office holder of the company
- are owed money by the company
- have provided, for less than market value, property or services to the company since 9 May 2000
- can expect the director, governing director or major shareholder of the company to act in accordance with their wishes
- are able to benefit from the company.

A direct benefit

A person may enjoy a direct benefit from a company by having the company pay all their personal living expenses or using the company assets as if they were their own personal assets.

An indirect benefit

A person may enjoy an indirect benefit from the company by having access to and use of company assets such as holiday homes.

Assessment of private company income and assets

Attribution

If we attribute any share of the income or assets of a company to you, this means we treat them as yours.

To decide this, we use either:

- · a control test
- · a source test.

The control test

Control of a company rests with those persons who hold majority voting powers or governing director type powers.

A person may also control a company by being able to influence the major shareholder or director to act in their favour. In some cases, the major shareholder or director could be expected to act in accordance with their wishes. A person may also be considered to control a company through their use and enjoyment of the income and assets.

The source test

The source test only applies where a person transfers assets or services to a company after 7:30 pm Australian Eastern Standard Time (AEST) 9 May 2000.

The Source Test recognises that if you and/or your partner transfer assets or services to a company and do not receive adequate consideration in return, you generally retain some means of control.

Where you can clearly show that a genuine gift has been made and you have no ongoing involvement in the company at all, attribution would not be made.

Resignations

If you relinquish control of a private company, you will be considered to have gifted the assets held by the company.

Gifts may be assessed for 5 years from the date of transfer.

Note: Documentation may be requested.

Associates

Associates include:

- directors
- shareholders
- spouse/partner
- · a business partner
- parents and grandparents
- children (whether biological, adoptive, step or foster) and their spouse/partner and the children
 of those parties and the spouse/partner of those children
- siblings and their spouse/partner
- nephews and nieces and their spouse/partner and the children of those parties and the spouse/partner of those children
- uncles, aunts and their spouse/partner and the children of those parties and the spouse/partner of those children
- a professional adviser such as an accountant, solicitor or financial adviser who may be expected to act in accordance with a person's wishes
- a trustee of a trust from which a person is capable of benefiting under the trust directly or indirectly
- a company where the directors could reasonably be expected to act in accordance with a
 person's directions or wishes, or where a person and associates are able to cast more than
 50% of the votes that may be cast at a general meeting of the company.

Authority to inspect the property

Purpose of this authority

To enable us to correctly assess your entitlement, it may be necessary for a valuation of a property held by the company to be completed.

In order to continue paying your correct entitlement, we may arrange to have the property professionally valued from time to time, at no cost to you.

Information about having a valuation

Why is a valuation required?

Social security law requires that the value of assets (for example, property, shares in a company, units in a trust) is included when calculating the amount of pension, benefit or allowance payable.

How is the value of a property decided?

The value of real estate is its current market value, less any allowable debts on the property. The 'current market value' is the price the owner could expect to receive if the property was sold.

Through regular updates using relevant market data, we will maintain the value of the property.

What happens if there is no permission to inspect the property?

If the value of the property is likely to affect a person's entitlement to social security payments or the rate of payment, but no permission to inspect the property is provided, the person's payment may not be granted, payment may be reduced or payment may be stopped.

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Private Company

* Client to complete

| Filling in this form | | | | | |
|--|--|--|--|--|--|
| You can complete this form on your computer, print and sign it. | | | | | |
| If you have a printed form: | | | | | |
| Use black or blue pen. | | | | | |
| Print in BLOCK LETTERS. | | | | | |
| Where you see a box like this | | | | | |
| Use a separate form for each company. | | | | | |
| If you need more space to answer any questions, provide a separate sheet. Write the company name and your Centrelink Reference Number (CRN) if known, on each sheet. | | | | | |
| Each form can be used jointly for all our customers and their partners who are involved in the company. For privacy, you may choose to complete your own | | | | | |
| separate form. | | | | | |
| | | | | | |
| ut you | | | | | |
| | | | | | |
| Your Centrelink Reference Number (if known) | | | | | |
| Your name | | | | | |
| Family name | | | | | |
| | | | | | |
| First given name | | | | | |
| | | | | | |
| Second given name | | | | | |
| · | | | | | |
| | | | | | |
| Your date of birth | | | | | |
| / / | | | | | |
| D I | | | | | |
| Do you have a partner? | | | | | |
| For the definition of a partner, go to servicesaustralia.gov.au/moc | | | | | |
| | | | | | |

| Your partner's name Family name |
|--|
| First given name |
| Second given name |
| Your partner's date of birth / / |
| Is your only role in the private company as a director and you have no shares in, or loans to the company? No Go to 10 This company is an independent trustee. I have no financial interest in or role with this company. |
| Have you (and/or your partner) ever held shares in the company? N/A No Go to next question Yes Go to 10 |
| Have you (and/or your partner) gifted, transferred or sold assets to this company for less than their market value or provided services to the company and not received adequate payment/consideration since 7:30 pm AEST on 9 May 2000? N/A |
| You will need to provide details of your wages from this company. Refer to servicesaustralia.gov.au/incomereporting • Go to 75 |
| Yes Go to next question |



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No **Go to 7**

Yes Go to next question

2

3

| Ab | out the private company | * 13 | Provide contact person det taxation returns and financi | ails for future requests for al statements of the compan |
|----|--|------|--|---|
| 10 | What is the name of the private company? | | if required for a review (for or accountant). | example, you, your tax agent |
| | This private company will be referred to as 'the company' on the rest of this form. | | | on 12 Go to next question below Give details below |
| | | | Business name (if applicable | e) |
| 11 | Company tax file number (Company TFN) | | Position in relation to the co | ompany discussed in this form |
| | Company Australian Business Number (Company ABN) Company Australian Company Number (Company ACN) | | Postal address | |
| | | | | Postcode |
| 12 | Provide details of the person we can contact about details given in this form (for example, you, your tax agent or | | Daytime phone number | |
| | accountant). Name | | Fax number | () |
| | Business name (if applicable) | 14 | In which month are the taxa statements for the company | |
| | Position in relation to the company discussed in this form | 15 | Is this company a corporate trade in its own right? | e trustee only that does not |
| | Postal address | | No Go to next questio | п |
| | | | Yes Give details below | |
| | Postcode | | Name of the trust | |
| | Daytime phone number Fax number () | | You will need to comprivate Trust (Mod P) If you do not have this servicesaustralia.go | 7) form for the trust. is form, go to |
| | | | | |
| | | 16 | When was the company inc | corporated? |
| | | | What date did the company | commence trading? |
| | | 17 | Is the company still trading No Go to next questio | |

Yes **Go to 20**

| 19 | / / N/A | | Only answer questions 22 and 23 if you (and/or your partner) are age pension age or claiming Age Pension otherwise, <i>Go to 24</i> | | | | |
|----|--|--|---|---|--|--|--|
| | Explain why the company ceased trading N/A | | To work out if you (or y age, use the table belo | our partner) are Age Pension w. | | | |
| | | | 1 January 1954 to 30 | Qualifying age at aber 1953 65 years and 6 months June 1955 66 years aber 1956 66 years and 6 months 67 years | | | |
| 20 | business and the type of business | | From 1 July 2019, the Work Bonus will also apply to self-employment income of Age Pension age customers if the income earned is a direct result of your actions or effort in a particular task. | | | | |
| | Trading name Type of business (for example, primary production, retail, commercial, investment) | | This means if you work for financial gain or reward that involves your personal exertion, you will be eli to have the Work Bonus applied to that income. For example, book keeping, lawn mowing and/or of tasks where your direct involvement generates that income. We call this active self-employment. | | | | |
| | 2 Trading name | | Does your (and/or your partner's) role in the involve personal exertion? | | | | |
| | Type of business (for example, primary production, retail, commercial, investment) 3 Trading name | | This does not include domestic or household maintenance tasks and management or administration of your place of residence or any financial investment or real property belonging to: • a member of your family group | | | | |
| | | | a company that is a family company a trustee or trustees of a family trust. No Go to 24 Yes Go to next question | | | | |
| | Type of business (for example, primary production, retail, commercial, investment) | | | | | | |
| | If there are more than 3 trading names, provide a separate sheet with details. | | • | income is from personal exertion? | | | |
| | | | Trading name of bus | III655 N/A | | | |
| | | | You % | Your partner | | | |
| | | | 2 Trading name of bus | | | | |
| | | | Trading hame or bas | | | | |
| | | | You | Your partner | | | |
| | | | % | % | | | |
| | | | 3 Trading name of bus | iness | | | |
| | | | | | | | |
| | | | You | Your partner | | | |

What date did the company cease trading?

If you need more space, provide a separate sheet with details.

%

%

21 Read this before answering the following question.

Details of directors **Company financials** 1 Name 25 Total number of shares issued by the company Class (for example. Date of birth Ordinary, Class A, Class B) Number Centrelink Reference Number (CRN) (if known) Tick all that apply Voting rights provided Permanent address Entitlement to dividends Entitlement to capital distributions on wind up [2 Class (for example. Ordinary, Class A, Class B) Number Postcode 2 Name Tick all that apply Voting rights provided [Date of birth Entitlement to dividends Entitlement to capital distributions on wind up Centrelink Reference Number (CRN) (if known) Class (for example, Ordinary, Class A, Class B) Number Permanent address Tick all that apply Voting rights provided Entitlement to dividends [Postcode Entitlement to capital distributions on wind up 3 Name 4 Class (for example, Ordinary, Class A, Class B) Number Date of birth Tick all that apply Voting rights provided [Centrelink Reference Number (CRN) (if known) Entitlement to dividends Entitlement to capital distributions on wind up Permanent address 5 Class (for example, Ordinary, Class A, Class B) Number Postcode Tick all that apply Voting rights provided If there are more than 3 directors, provide a separate Entitlement to dividends sheet with details. Entitlement to capital distributions on wind up

Continued

| 6 | Class (for example, |
|----|---|
| | Ordinary, Class A, Class B) Number |
| | |
| | Tick all that apply |
| | Voting rights provided |
| | Entitlement to dividends |
| | Entitlement to capital distributions on wind up |
| lf | there are more than 6 shares issued, provide a |

If there are more than 6 shares issued, provide a separate sheet with details.

${\bf 26} \quad \hbox{Give details of all ${\bf shareholders}$ and their shareholding}$

| 1 Name | | | |
|---|----------------------|--|--|
| | | | |
| Date of birth | CRN (if known) | | |
| / / | | | |
| Tick if related to: Director(s) Other shareholders | | | |
| | Other office-holders | | |
| Details of the shareholding for this shareholder | | | |
| Class of share | | | |
| Number | | | |
| Purchase price | \$ | | |
| Date purchased shares | / / | | |
| Class of share | | | |
| Number | | | |
| Purchase price | \$ | | |
| Date purchased shares | / / | | |

Continued

| 2 Name | | | | |
|---|---|--|--|--|
| | | | | |
| Date of birth | CRN (if known) | | | |
| / / | | | | |
| Tick if related to: Director(s) | | | | |
| Dataile of the chareholding | Other office-holders | | | |
| Details of the shareholding | or this shareholder | | | |
| Class of share | | | | |
| Number | | | | |
| Purchase price | \$ | | | |
| Date purchased shares | 1 1 | | | |
| Class of share | | | | |
| Number | | | | |
| Purchase price | \$ | | | |
| Date purchased shares | / / | | | |
| 3 Name | | | | |
| ○ Name | | | | |
| Name | | | | |
| Name Date of birth | CRN (if known) | | | |
| | CRN (if known) | | | |
| Date of birth | | | | |
| Date of birth / / Tick if related to: Director(s) | Other shareholders Other office-holders | | | |
| Date of birth / / Tick if related to: Director(s) Details of the shareholding | Other shareholders Other office-holders | | | |
| Date of birth / / Tick if related to: Director(s) | Other shareholders Other office-holders | | | |
| Date of birth / / Tick if related to: Director(s) Details of the shareholding | Other shareholders Other office-holders | | | |
| Date of birth / / Tick if related to: Director(s) Details of the shareholding Class of share | Other shareholders Other office-holders | | | |
| Date of birth / / Tick if related to: Director(s) Details of the shareholding Class of share Number | Other shareholders Other office-holders for this shareholder | | | |
| Date of birth / / Tick if related to: Director(s) Details of the shareholding Class of share Number Purchase price | Other shareholders Other office-holders for this shareholder | | | |
| Date of birth / / Tick if related to: Director(s) Details of the shareholding Class of share Number Purchase price Date purchased shares | Other shareholders Other office-holders for this shareholder | | | |
| Date of birth / / Tick if related to: Director(s) Details of the shareholding of the class of share Number Purchase price Date purchased shares Class of share | Other shareholders Other office-holders for this shareholder | | | |
| Date of birth / / Tick if related to: Director(s) Details of the shareholding of the | Other shareholders Other office-holders for this shareholder \$ // / | | | |

Continued

| onunaca | | | | |
|------------------------------------|----------------------|--|--|--|
| Name | | | | |
| | | | | |
| Date of birth | CRN (if known) | | | |
| / / | | | | |
| Tick if related to: Director(s) | | | | |
| Other office-holders | | | | |
| Details of the shareholding | tor this snareholder | | | |
| Class of share | | | | |
| Number | | | | |
| Purchase price | \$ | | | |
| Date purchased shares | / / | | | |
| Class of share | | | | |
| Number | | | | |
| Purchase price | \$ | | | |
| Date purchased shares | / / | | | |
| Name | | | | |
| - Name | | | | |
| Date of birth | CRN (if known) | | | |
| / / | | | | |
| Tick if related to: Director(s) | Other shareholders | | | |
| | Other office-holders | | | |
| Details of the shareholding | for this shareholder | | | |
| Class of share | | | | |
| Number | | | | |
| Purchase price | \$ | | | |
| Date purchased shares | / / | | | |
| Class of share | | | | |
| Number | | | | |
| Purchase price | \$ | | | |

Continued

| 6 Name | | | |
|--------------------------------------|----------------------|--|--|
| Date of birth | CRN (if known) | | |
| 1 1 | | | |
| Tick if related to: Director(s) | | | |
| Dataila of the aboveholding f | Other office-holders | | |
| Details of the shareholding f | or this shareholder | | |
| Class of share | | | |
| Number | | | |
| Purchase price | \$ | | |
| Date purchased shares | / / | | |
| Class of share | | | |
| Number | | | |
| Purchase price | \$ | | |
| Date purchased shares | / / | | |
| 7 Name | | | |
| | | | |
| Date of birth | CRN (if known) | | |
| / / | | | |
| Tick if related to: Director(s) | Other shareholders | | |
| Other office-holders | | | |
| Details of the shareholding f | or this shareholder | | |
| Class of share | | | |
| Number | | | |
| Purchase price | \$ | | |
| Date purchased shares | / / | | |
| Class of share | | | |
| Number | | | |
| Purchase price | \$ | | |
| Date purchased shares | / / | | |
| If there are more than 7 shar | cahaldara pravida a | | |

separate sheet with details.

Date purchased shares

| 27 | Has the shareholding for the company changed in the last 5 years? No Go to next question Yes Give details of the historical shareholding | 29 | Has anyone gifted, transferred or sold for less than their market value, any cash, investments, services, real estator other assets to this company since 7:30 pm AEST on 9 May 2000? This is referred to as 'contribution'. |
|----|--|----|---|
| | | | Include any loans which may have been written off, waived or for any reason decided not to recover. Market value is the price a willing but not anxious purchaser is prepared to pay a willing but not anxious seller for an item. |
| 28 | Has the company had a change in circumstances since | | No Go to next question N/A Yes Give details of each contribution |
| | the last financial statements were prepared (for example, upturn or downturn in trade, business sold, changes in wages paid by the company to you and/or your partner)? No Go to next question N/A Yes Give details below You will need to provide a copy of the evidence of the change in circumstances. Evidence may include: • an Interim Profit and Loss Statement • sale documents • a current Balance Sheet • an Administrator's or Liquidator's Report. Date change occurred // Change in circumstances since last financial statement | | Value of contribution The value of: cash is the amount contributed services is the gross amount normally charged by a qualified person for a similar service real estate is the market value at the time the property was transferred to the company. If the contribution was in the form of real estate, you must complete the 'Company real estate details' section (questions 43 to 74), about that real estate. Name of contributor |
| | | | Is the person: Still living Deceased |
| | | | Nature of the contribution: Gifted Transferred Sold for less than market value What was contributed? |
| | | | Date of contribution Value of contribution |
| | | | / / \$ |
| | | | Amount originally paid for contribution (if applicable) \$ |
| | | | If there is more than 1 contributor, provide a separate sheet with details. |
| | | | |

| 30 | Does the company hold any shares or securities in public | 31 | Does the | company hold an | ıy manage | d investments? | | |
|----|--|------|-------------------------|---|-------------------|---------------------------------------|--|--|
| | companies? | | Include | | | | | |
| | Include: | | | tment trusts | | | | |
| | • futures | | | onal investment pl | ans | | | |
| | • options | | life in | surance bonds | | | | |
| | derivatives | | friendly society bonds. | | | | | |
| | rights or convertible notes | | Do not | include: | | | | |
| | other securities including those not listed on a | | | entional life insura | ance policie | es | | |
| | securities or stock exchange. | | | al bonds | | | | |
| | | | rannuation or rollo | ver investr | ments | | | |
| | No Go to next question N/A | | | tments purchased | | | | |
| | Yes Give details below | | | • | | • | | |
| | You will need to provide a copy of | | | de – is commonly individual financia | | | | |
| | the latest statement detailing the | | luentily | IIIUIVIUUAI IIIIAIIUI | ai products | • | | |
| | shareholding in each company. | | No 📄 | Go to next question | on _{N/A} | | | |
| | | | Yes | s Give details below | | | | |
| | Name of the public company or ASX code | | .00 | | | | | |
| | | | | | | d to provide a complete | | |
| | Number of shares held | | | | | ent which gives or each investment | | |
| | Number of Shares field | | | | | cate with number | | |
| | | | | | account b | | | |
| | | | | Of drifts of | uooount b | | | |
| | Name of the public company or ASX code | | 1 Name | e of the fund man | aner | | | |
| | | | Ivain | o or tho fana man | agoi | | | |
| | Number of shares held | | | | | | | |
| | Number of Shares held | | Name o | e of the product | | Number of units | | |
| | | | and pro | duct option | | held (if applicable | | |
| | 2 11 (11 11 12 | | | | | | | |
| | Name of the public company or ASX code | | ADID oo | do (if known) | Value o | f the investment | | |
| | Number of shares held | | | APIR code (if known) | | Value of the investment | | |
| | | | | | \$ | | | |
| | Number of shares held | | 0 | | | | | |
| | | | 2 Nam | e of the fund man | ager | | | |
| | A Name of the mublic common or ACV ands | | | | | | | |
| | A Name of the public company or ASX code | Name | | Name of the product | | Number of units | | |
| | | | and product option | | | held (if applicable | | |
| | Number of shares held | | | | | Tiola (II applicable | | |
| | Training of ordinate field | | | | | | | |
| | 5 Name of the public company or ASX code | | APIR co | APIR code (if known) | | f the investment | | |
| | | | | | \$ | | | |
| | | | | | | | | |
| | | | 3 Name | e of the fund man | ager | | | |
| | Number of shares held | | | | | | | |
| | Number of shares held | | | | | | | |
| | | | | f the product | | Number of units | | |
| | 6 Name of the multiple comment at AOV and the | | | duct option | | held (if applicable | | |
| | Name of the public company or ASX code | | | | | | | |
| | Number of shares held | | | de (if known) | ח פוולא/ | f the investment | | |
| | | | | ao (ii kilovvii) | | T THE HIVESUITETIL | | |
| | Transport of office for | | | | \$ | | | |
| | | | | | | | | |
| | | | | | | | | |
| | If there are more than 6 public companies, provide a | | | | | | | |
| | separate sheet with details. | | | | | | | |

Continued

| 4 Name of the fund manag | er | | |
|----------------------------|-------------------------|--|--|
| | | | |
| Name of the product | Number of units | | |
| and product option | held (if applicable) | | |
| | | | |
| APIR code (if known) | Value of the investment | | |
| | \$ | | |
| 5 Name of the fund manager | | | |

| 5 Name of the fund mana | ager |
|-------------------------|-------------------------|
| | |
| Name of the product | Number of units |
| and product option | held (if applicable) |
| | |
| APIR code (if known) | Value of the investment |
| | \$ |
| | |

| 6 Name of the fund manag | er |
|--|--------------------------------------|
| Name of the product and product option | Number of units held (if applicable) |
| APIR code (if known) | Value of the investment \$ |

If there are more than 6 managed investments, provide a separate sheet with details.

| 32 | Does the company hold any shares or have any other |
|----|--|
| | involvement in other private companies? |

No Go to next question N/A
Yes Give details below

g

You will need to complete and return a *Private Company (Mod PC)* form for each of these companies if this has not already been done.

If you do not have this form, go to servicesaustralia.gov.au/forms

| 1 Name of the company | |
|-----------------------|---|
| | |
| Company ABN or ACN | _ |
| | |
| | |

Name of the company

Company ABN or ACN

3 Name of the company

Company ABN or ACN

Name of the company

Company ABN or ACN

Name of the company

Company ABN or ACN

6 Name of the company
Company ABN or ACN

If there are more than 6 private companies, provide a separate sheet with details.

| 33 Is the company a beneficiary of or otherwise involved (for example, made a loan, gift or transferred assets) private trust? N/A No Go to next question Yes Give details of each trust You will need to complete and return a | No Go to 36 Yes Go to next que 35 Give details of other as | No Go to 36 N/A Yes Go to next question | | |
|--|--|--|--|--|
| separate <i>Private Trust (Mod PT)</i> form for each of these trusts if this has not already been done. If you do not have this form, go to servicesaustralia.gov.au/forms 1 Name of the private trust | Only an estimate of the professional valuation we may have the asset the company. The company balance their historical or Written | | | |
| Trust | | Tick if this is a primary production asset | | |
| Trust | Type of asset | Your estimate of the current market value | | |
| 2 Name of the private trust | Plant and equipment | \$ | | |
| | Machinery | \$ | | |
| Trust | Vehicles | \$ | | |
| Trust ABN | Livestock | \$ | | |
| 3 Name of the private trust | Stock | \$ | | |
| | Licences | \$ | | |
| Trust | Bank accounts | \$ | | |
| TFN Trust Trust | Other (describe) | | | |
| ABN | | \$ | | |
| 4 Name of the private trust | | \$ | | |
| | | \$ | | |
| Trust Trust ABN | | | | |
| If there are more than 4 private trusts, provide a separate sheet with details. | | | | |

| Does the company owe money to anyone, including associates? | | | | |
|---|---|--|--|--|
| Include: • salaries and wages owing to a person • loans made to the company • dividends allocated to a shareholder that have not | | | | |
| | o the shareholder. on about 'Associates', refer to the No t | | | |
| No Go to 38 Yes Give deta | | | | |
| 1 Name of perso | n or associate | | | |
| Date of birth | Amount owed | | | |
| / / \$ | | | | |
| Intere | Interest rate paid on the loan (if applicable) | | | |
| 2 Name of person or associate | | | | |
| | | | | |
| Date of birth | Amount owed | | | |
| / / | \$ | | | |
| Intere | est rate paid on the loan (if applicable) | | | |
| 3 Name of perso | n or associate | | | |
| Date of birth | Amount owed | | | |
| / / | \$ | | | |
| Intere | Interest rate paid on the loan (if applicable) | | | |
| If there are more than 3 people or associates, provide a separate sheet with details. | | | | |

party, of a loan made to the company from a person or an associate? N/A

No Go to next question

Yes

You will need to provide a copy of each loan agreement (if available).

A written loan agreement must be signed by all parties to the agreement and witnessed by a genuine third party. Associates are not considered to be genuine third parties.

Does the company have any other liabilities?

No Go to next question

Yes Give details for each liability

Include:

- bank loans
- mortgages
- · fully drawn advances
- personal loans not provided in question 36.

Collateral security is fall back security in the event that the primary security is insufficient.

| 1 Type of liability | Amount of liability |
|-------------------------|-------------------------------|
| | \$ |
| Asset secured against | Current market value of asset |
| | \$ |
| Tick if this is | s collateral security |
| Tick if this is a prima | ry production asset |
| 2 Type of liability | Amount of liability |
| | \$ |
| Asset secured against | Current market value of asset |
| | \$ |
| Tick if this is | s collateral security |
| Tick if this is a prima | ry production asset 🗌 |
| 3 Type of liability | Amount of liability |
| | \$ |
| Asset secured against | Current market value of asset |
| | \$ |
| Tick if this is | s collateral security |
| Tick if this is a prima | ry production asset 🗌 |

If there are more than 3 liabilities, provide a separate

sheet with details.

| ntitled to receive, any income from the ast financial year? | ; company in the | | No Go to next que | IN/A |
|--|------------------|----|--|---|
| Include: | | | | |
| wages | | | Date change occurred | |
| salaries | | | / / | |
| director's fees | | | Details of current inco | me |
| bonus shares | | | | |
| an income or capital distribution | | | | |
| superannuation contributions made behalf to a superannuation fund. | on the person's | | | |
| No Go to 41 N/A es Give details of each person | | | | |
| Name | | 41 | | areholder receive, or were they |
| _ | | | last financial year? | y benefit from the company in the |
| Date of birth | | | Include noncash ben | |
| / / | | | | an indirect or direct benefit from a |
| Total wages entitledTotal wage | es paid | | | e, having the company pay their ses, or having access to, or use o |
| \$ \$ | | | company assets. | 300, 01 1.a.ig access 10, 01 acc |
| Total superannuation entitled Total supe | erannuation paid | | No Go to next qu | uestion N/A |
| \$ \$ | | | | of each director or shareholder |
| Other income type (for example, direct | or's foos | | | Tradit director of shareholder |
| bonus shares) | 01 5 1665, | | 1 Name | |
| | | | Date of birth | Type of benefit |
| Total other income paid Financial y | year of payment | | | Type of beliefit |
| \$ | | | / / | |
| Will the person receive this income | No Voc | | Value | Financial year of paymen |
| in the current financial year? | No Yes Yes | | \$ | |
| Name | | | 2 Name | |
| | | | | |
| Date of birth | | | Date of birth | Type of benefit |
| / / | | | / / | |
| Total wages entitled Total wage | hec naid | | Value | Financial year of paymen |
| | es paiu | | | I mandai year or paymen |
| \$ \$ \$ | | | \$ | |
| Total superannuation entitled Total supe | rannuation paid | | 3 Name | |
| \$ | | | | |
| Other income type (for example, direct bonus shares) | or's fees, | | Date of birth | Type of benefit |
| | | | / / | |
| T. C. | year of payment | | Value | Financial year of paymer |
| Total other income paid Financial y | | | \$ | |
| \$ Financial y | | | | |
| \$ | | | | |
| \$ Will the person receive this income | No Yes | | If there are more than sheet with details. | n 3 people, provide a separate |

| Does the company own any real estate? | | | |
|--|--|--|--|
| Only include real estate held in the company name. | | | |
| No Go to 75 | | | |
| Yes How many properties does the company hold? | | | |
| | | | |
| If the company owns more than 1 | | | |
| property, complete a separate 'Company real estate details' section (questions | | | |
| 43 to 74) for each property. | | | |
| Go to next question | | | |

Company real estate details

| 43 | Name of the company which owns the real estate N/A | 47 | What is the legal description of the property (for example, lot, section or parish. This may appear on the rates notice)? N/A |
|----|---|----|---|
| | Company ABN | | If the property is made up of more than 1 title, give details for each separate title. |
| | out the property | | Provide a copy of the latest council rate/valuation notice. |
| | ou need to complete this section for more than 1 property, by pages 14 to 18 before you answer the questions. | 48 | What is the estimate of the current market value of the property, including land, buildings and water assets |
| 44 | Address of the property N/A | | (for example, water rights, allocations or licences)? You do not need to have the property professionally valued. We may have the property valued at no cost to you. |
| | Postcode | | \$ N/A |
| | Country (if not in Australia) | | Provide a copy of the water rights, allocation or licence documents, if applicable. |
| 45 | What date did the property become an asset of the company? / / N/A | 49 | Is there a residence on the property? No Go to 64 N/A Yes Go to next question |
| 46 | What type of property is this? N/A Vacant land Bush block | 50 | Does any shareholder or director live on the property? No |
| | Home office/business House Self contained flat (part of or attached to a residence) Units/flats/town house | 51 | Is the property larger than 2 hectares (5 acres)? No |
| | Retail premises Commercial premises Industrial premises Farm (or hobby farm) | 52 | What is the estimate of the value of the residence and surrounding 2 hectares (5 acres)? N/A |
| | Market garden Residential block larger than 2 hectares (5 acres) Other Other Other Other | 53 | Does the property have more than 1 title document? No |
| | | | |

| 54 | What is the estimate of the value of the residence and surrounding title? N/A | 59 | No Go to next question N/A |
|----|---|----|---|
| | \$ | | Yes Go to 62 |
| | Provide the legal description and area of the title on which the residence sits. | 60 | Is there any reason that prevents the company from using the property to produce an income? |
| | | | No Go to 62 N/A |
| | | | Yes Go to next question |
| | | 61 | Why is the property not being used to produce an income? |
| | | | Tick all that apply N/A |
| | Provide a copy of each title deed. | | Rural residential block |
| | | | Land is not viable for commercial or agricultural use |
| 55 | Is the person who lives on the property (or their partner) | | Caring responsibilities |
| 33 | currently over Age Pension age and receiving , or claiming : | | Health reasons |
| | Age Pension | | Zoning restrictions |
| | • Carer Payment | | Environmental restrictions |
| | Pension Bonus Bereavement Payment | | Other Give details below |
| | Department of Veterans' Affairs Age Service Pension? | | Other |
| | No Go to 63 | | |
| | Yes Go to next question | | |
| 56 | Has the property been their home property for 20 years or more continuously? | 62 | How is the property currently used? N/A |
| | No Go to 63 N/A | | Tick all that apply |
| | Yes Go to next question | | Do not currently make any use of the property |
| | les do to hext question | | Primary production |
| 57 | Does the person (and/or their partner) or a family member | | Rural residential only |
| • | use the property to support themselves? | | Leased |
| | No Go to next question N/A | | Other commercial or business |
| | Yes Describe how they use the property to support | | use (for example, commercial |
| | themselves | | kennels) |
| | | | Hobby farm |
| | | | Other Give details below |
| | | | |
| | | | |
| 58 | Is there any potential commercial use of the property | | |
| | (for example, subdividing, agistment, hobby farming)? No Go to next question N/A | | |
| | Yes Describe the potential commercial use | | |
| | Describe the potential commercial use | 63 | Have 2 or more titles been amalgamated after 9 May 2006? No N/A |
| | | | Yes |
| | | | |
| | | | |
| | | | |

| 64 | Does the company have 100% ownership of the | e property? | 67 | Describe all buildings on the property N/A |
|----|---|------------------|----|--|
| | No Go to next question N/A | | | This will help us to value the property. |
| 65 | Yes Go to 66 Who else owns the property? N/A | | | What is the approximate floor area in square metres? How old is the building? |
| | Name of person/entity | Percentage owned | | Type of construction |
| | warne or person/entity | | | Exterior (for example, brick, timber) |
| | | % | | |
| | | % | | Interior (for example, plaster, not lined) |
| | | % | | |
| | If there are more than 3 owners, provide a sheet with details. | separate | | Roof (for example, metal, tiles) |
| 66 | What is the area or dimensions of the property? | ? | | General condition (for example, good, fair, poor) |
| | Complete one of these measurements only. No. | /A | | Total number of flats/units in the |
| | or Area in acres | | | complex (if applicable) For residential building, number of bedrooms |
| | | = | | Number of other rooms |
| | or Area in square metres | | | (excluding laundry, bathroom, toilet) |
| | or Dimensions X | | | What is the approximate floor area in square metres? How old is the building? |
| | If the property is made up of more than 1 till a separate sheet with details of the area or for each title. | | | Time of construction |
| | Tor odorr title. | | | Type of construction Exterior (for example, brick, timber) |
| | | | | Exterior (for example, stron, umber) |
| | | | | Interior (for example, plaster, not lined) |
| | | | | Roof (for example, metal, tiles) |
| | | | | |
| | | | | General condition (for example, good, fair, poor) |
| | | | | Total number of flats/units in the |
| | | | | complex (if applicable) For residential building, number of |
| | | | | bedrooms |
| | | | | Number of other rooms (excluding laundry, bathroom, toilet) |

If there are more than 2 buildings, provide a separate sheet with details.

| Pro | perty financial details | | 71 | Are there any circumstances affecting the value of the property? N/A |
|-----|--|---|----|--|
| 68 | Is the property mortgaged or No Go to next question Yes Give details below Date of loan / Amount of the loan Name of finance provider | | | This may include details such as: • no water on property for grazing livestock • lack of adequate fencing • hills • rocky ground • natural bushland • unusual title. No Go to next question Yes Give details below |
| | | | | |
| 69 | Have any other assets or proper loan to purchase this property? No Go to next question Yes Give details below | 1 | 72 | If the property is hard to locate, give full directions or provide a map. N/A |
| | already been done: mortgage or loan ag | greement(s) showing which are held as security each loan account. | | |
| 69 | Describe the asset or give the used to secure the loan. | e address of the property | | |
| | | | | |
| | Estimated market value | | | |
| | If there is more than 1 asset provide a separate sheet with | | | |
| 70 | Does the company receive ar lease of the property? N/A No Go to next question Yes Give details below Gross amount of rent receive (before tax and other deducti | d | | |

Privacy notice

73 You need to read this

Privacy and your personal information

The privacy and security of your personal information is important to us, and is protected by law. We need to collect this information so we can process and manage your applications and payments, and provide services to you. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to servicesaustralia.gov.au/privacy

Authority to inspect the property

74 For more information about 'Authority to inspect the property', refer to the **Notes Booklet**.

I hereby authorise a licenced valuer to enter and inspect the property for the purposes of a valuation in relation to the *Social Security (Administration) Act 1999*.

I understand that if the property to be inspected is not occupied by me, it is my responsibility to give the actual occupant reasonable notice, or such notice as is required by agreement, of the inspection.

This authorisation does not permit the valuer to enter my home, or any dwelling I may own, during the inspection, unless invited to do so. A similar condition applies to the home of any tenant involved.

I further understand that Centrelink or its representative will contact me, or the person noted below, to arrange a mutually convenient time for any inspection of the property.

| Name of authorised officer N/A |
|--------------------------------------|
| |
| Authorised officer's signature N/A |
| |
| |
| Date |
| / / |
| Person to be contacted by the valuer |
| |
| Their daytime phone number |
| |

When you have **completed** a 'Company real estate details' section for **each** real estate property owned by the company

▶ Go to next question

Checklist

75 Which of the following forms and documents are you (and/or your partner) providing with this form?

You must provide **copies** of documents. The copies will not be returned.

| Documents you must provide | | | | |
|--|------|--|--|--|
| Tick all that a | oply | | | |
| Details of your wages from this company (if you answered No at question 9) • Go to 76 | | | | |
| Personal Income Tax Return for you | | | | |
| Personal Income Tax Return for your partner if they are involved with the company | | | | |
| Latest Income Tax Return for the company | | | | |
| Profit and Loss Statement for the company | | | | |
| Depreciation Schedule for the company This must show depreciation as claimable under Division 40 of the <i>Income Tax Assessment Act 1997</i> . Instant Asset write-off claimed under Division 328-D of that Act are not allowed for social security purposes. | | | | |
| Balance sheet for the company | | | | |
| Notes to and forming part of the accounts (If applicable) | | | | |
| Trading account details for the company (If applicable) | | | | |
| Profit and Loss Statement(s) for all income sources and/or balance sheet for the company for the current financial year if the most recent completed year is not an accurate reflection of the current circumstances of the company (if applicable) | | | | |
| Additional Profit and Loss Statement(s) because the company derives income from more than 1 source (if applicable) | | | | |
| If you are not able to lodge any of the required documentation, give an explanation below | | | | |
| N/A. This company acts as a trustee and is independ | ent | | | |
| of me. | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| Documents you may need to provide | |
|--|------|
| If you are not sure, check the question to see if you should provide the documents. | |
| Tick all that a | pply |
| Private Trust (Mod PT) form (if you answered Yes at question 15 and/or 33) | |
| A copy of the evidence of change in circumstances (if you answered Yes at question 28) | |
| A copy of the latest statement detailing the share holding in each company (if you answered Yes at question 30) | |
| A copy of a document which gives details for each investment | |
| (if you answered Yes at question 31) Private Company (Mod PC) form (if you answered Yes at question 32) | |
| Copies of any written agreements concerning loans from a person or an associate to the company (if you answered Yes at question 37) | |
| A completed 'Company real estate details' section for each real estate property owned by the company (if you answered Yes at question 42) | |
| A copy of the council rate/valuation notice for each property owned by the company (at question 47) | |
| A copy of the water rights, allocation or licence documents, if applicable (at question 48) | |
| A copy of each title deed (required at question 54) | |
| The mortgage or loan agreement(s) showing which assets or properties are held as security against the loan (if applicable) and latest statement of each loan account (if you answered Yes at question 68 or 69) | |
| We may request further documents that relate to the company. |) |

Go to the next page

Privacy notice

76 You (and your partner) need to read this

Privacy and your personal information

The privacy and security of your personal information is important to us, and is protected by law. We need to collect this information so we can process and manage your applications and payments, and provide services to you. We only share your information with other parties where you have agreed, or where the law allows or requires it. For more information, go to servicesaustralia.gov.au/privacy

Declaration

77 I declare that:

 the information I have provided in this form is complete and correct.

I understand that:

- if submitting this document as part of a claim, the claim may not be accepted unless supporting documents are lodged at the same time as the claim. The only exception will be if I am waiting for medical evidence or other documents from a third party.
- the company may be reviewed but I must tell Centrelink of any changes to the company's circumstances that may impact my payment within
 14 days of the change(s) occurring, or within 28 days if I live outside Australia. For example:
 - changes in the company's shareholding, income or assets
 - gifts made or received, or
 - distributions made.

* Your signature

- Centrelink can make relevant enquiries to make sure I receive the correct entitlement.
- giving false or misleading information is a serious offence.

| Ø. | . | | | | |
|----------|-------------------|------------|-------|--|--|
| Date | e / | / | | | |
| You | r partne | er's signa | ature | | |
| L | 5 | | | | |
| Date | 2 / | / | | | |

Returning your form

You can return this form and any supporting documents:

- online using your Centrelink online account.
 For more information, go to servicesaustralia.gov.au/submitdocumentsonline
- in person at one of our service centres, if you are not able to use your Centrelink online account.