FORM I 2022





IRC OFFICE USE ONLY

Individual Income Tax

PNGIRC - Your Partner in Nation Building

Taxpayer Identification Number (TIN):

INCOME TAX ACT 1959 AS AMENDED

INCOME TAX RETURN FOR INDIVIDUALS

FOR ASSIS	STANCE IN COMP	LETING TH	IS FORM PLEAS	SE REFER TO	O THE FORM	I GUIDE - A	VAILABLE FRO	M WWW.IRC.GOV.	PG
			NAME AND) ADDRES	S OF TAXE	PAYER			
NAME OF TA	AXPAYER:								
BUSINESS O	R TRADING N	AME:							
CONTACT /	REPRESENTA	TIVE:							
PHONE No:									
E-MAIL ADI	ORESS:								
MAILING	SECTION No.	:			LOT No):			
ADDRESS	STREET / SU	BURB / D	ISTRICT:				'		
	P.O. BOX:			<u> </u>					
	COUNTRY:				PRO	VINCE:			
	CITY / POST	OFFICE:					· ·		
	CARE OF (C/	-):		!					
				TAX PER	RIOD				
TAX PERI	OD (FROM):					(TO):		
			TA	XPAYER I	DETAILS				
	RESIDENT OF				Yes			Guide to this form for dent" and "Non-Resident"	
IF NON-RESIL	DENT: DATE OF	FARRIVA	L IN PNG:			DATE	OF DEPARTU	URE:	
YEAR LAST	TAX RETURN	WAS LO	DGED:						
IS THIS YOUR	R LAST RETUR	N IN PNG?	: Yes	s 🔲 No	IF YES, ST	TATE WHY	<i>Y</i> :		
Percentage of	gross sales attr	ibuted to	business activ	ities in <u>Au</u> t	tonomous R	egion of B	ougainville:	1	%
	P	ARTICUI	LARS RELATI	NG TO SO	OURCES O	FINFORN	NATION		
	count kept by (or or , state the name and		1 5						
Are the figures i	n the return in acc	ordances w	ith those books?	•				Yes	No
	ccount have been l this return been p		what basis or						
Is the income re	ported on an accru	als basis or	a cash receipts l	basis?			Accruals Ba	asis Cash Rec	eipts
	gent's Certification"							Yes [No

DECLARATION BY TAXPAYER

I declare that the information that I have provided is true and correct in every detail and discloses a full and complete statement of the facts.

I understand that the law imposes heavy penalties for false and misleading statements.

This declaration applies to all of the information in this return including all accompanying documents and schedules.

	This deciaration appres to an C	of the information in this rec	arii inciuulli	ь ин иссотра	y 111 <u>2</u>	, documents and	selicatios.		
SIGNED:				D	ATE	E :			
		TAX AGENT'S	CERTIFIC	ATION					
I / We		of							
	having prepared or assisted in the "Particulars Relating to S	he preparation of this return Sources of Information" se						ne	
SIGNED:				D	ATE	E:			
CONTACT					HON				
PERSON: E-MAIL ADDRESS:		NUMBER: TAX AGENT NUMBER:							
	NOTE: IF ADDITIONAL SPA	CE IS REQUIRED WHEN CO SHEET AND ENSURE THAT Y							
ITEM 1 SA	LARY OR WAGE INCOM								
TIN OF EMPLOYER	NAME OF EMPLOYED		MPLOYMEN		I	SWT DEDUCT	1 (GROSS INCOME RECEIVED	
EMITLUTER		SIARI DAIE	END	DATE	10		11	RECEIVED	
					K		K		
					K		K		
					K		K		
					K		K		
			7	TOTAL	18 K		30 K		
ITEM 2 AL	LOWANCES PAID BY EN	1PLOYERS							
ALLOWANCES F	PAID BY EMPLOYERS (gross allowar	ices paid, before tax deduction		AMOUN	IT				
Housing	allowance		K						
Motor ve	ehicle allowance		**************************************						
Telephor	ne allowance		42 K						
Entertain	nment allowance		43 K						
Public ut	ilities allowance		44 K						
Domestic	c services allowance		45 K					TOTAL	
Other all	owances:		K			60 K			
value of the allowar	I not receive any allowances from your en nce, before any tax was deducted from the cted from allowances then report them in s here in Item 2.	e allowance. If you received "to	axable" and "r	on-taxable" po	rtions	of an allowance,	sum the two o	and write the total here.	
Deductions against	housing allowance are claimed in Item 6	. Allowances must be entered o	as a positive fi	gure. If you hav	е ехре	enses against these	e allowances,	enter them at Item 7.	
ITEM 3 TA	XABLE BENEFITS RECEIVE	/ED							
TAXABLE BENE	FITS RECEIVED (If tax was not deduce	cted, show at item 5).		ALUE OF BI	ENE	FIT			
Housing 1	provided by employer - as per	statement of earnings	70 K						
Motor ve	ehicle provided by employer	as per SOE	K						
Meals pr	ovided by employer - as per s	SOE	72 K						
Life or m	nedical insurance paid by emp	ployer	73 K						
Employe	e shares / options given by en	nployer	74 K		_		ΓΟΤΑL	TAXABLE	
Addition	al leave fares (over the exmp	ted one leave fare)	75 K BENEFITS						

Any other benefits:			K		K	
ITEM 4 TERMINATION	N PAYOUTS					
TERMINATION OR GRATUITY PA	AYOUT RECEIVED (IF A	PPLICABLE)		VALUE OF BENEFIT		
Termination payouts taxed Include termination payouts of L			100			
accrued prior to 1 Jan 1993. If Su payout, state date contributions c		,				
	/ .	/	K			
Superannuation payouts to State date contributions co		/	T/			
Superannuation payouts tax			K			
State date contributions con	nmenced: /	/				
Include retrenchment payme	ents (s46CA)		K		TOTAL PAYOU	TS
All other termination p	ayments (<u>fully taxe</u>	<u>d</u>)	K		K	
ITEM 5 UNTAXED SAL	ARY / WAGES					
SALARY OR WAGE INC		NOT HAVE TAX	DE	DUCTED		
NAME OF EMPLOYER	TYPE OF INCOME / BENEFIT	REASON WHY	Y TAX	X WAS NOT DEDUCTED	AMOUNT OF INCOM	IE
					140 K	
					141 K	
					142	
		A XXIID GA X A D	T 7 (DD WA CE DICOVE	K	
		K				
ITEM 6 CALCULATION	OF NET SALARY				155	
					K	-
	a boxes 30, 60, 90, 103, and 150.	160				
Estimated expenses again	st Housing Allowance	as reported in your	Hous	ing Allowance Variation	K	
Actual expenses incu	rred against Housi	ng Allowance			K	
LESS Housing Allowance I	Deduction				K	
NOTE: The Housing Allowance De exceed the amount shown in box 40 incurred against your Housing Allo Variation form.). If expenses exceed the I	Housing Allowance rec	eived,	write the value from box 40 in box	170. Note that the actual expe	enses
	NET TOTAL I	NCOME FRO	M	SALARY & WAGES	175 K	
IRC OFFICE USE ONLY:				OTAL S&W INCOME	180 K	
LESS GROUP TAX DEDU	JCTIONS MADE	BY YOUR EMP	LO	YER(S)	185 K	
	SALARY & WA	AGES TAX EX	XCI	ESS / (SHORTFALL)	190	
				, ,	K	
ITEM 7 DEDUCTIONS	S AGAINST SALAI	RY OR WAGE IN	ICO	ME		
DETAILS OF DEDUCTIONS				VALUE OF DEDUCTION	TOTALS	
Total deductions claime (excluding Housing Allo						
	, , , , , , , , , , , , , , , , , , ,		200		TOTAL DEDUCTIONS AG	AINST
			201		ALLOWANCES	
Other salary or wages ex	xpenses. Describe the	expense and how	K		<u>K</u>	
it is relevant to gaining s			9.7			
			211 K		TOTAL DEDUCTIONS AG SALARY OR WAGE	
			212 K		220 K	
Election expenses (elec	ction to National Par	liament)	K		230 K	
• `		•	17		IX	

Other deductions against your assessable income	K		240 K			
Gifts to Foundation for Law, Order & Justice; Sporting Bodies or approved charitable organisations	K		250 K			
	TOTAL DEDU	UCTIONS	255 K			
NOTE: To calculate box 255 add the am	ounts in boxes 210, 220, 23	0, 240, and 250.				
s214(3) Deduction (already included in Salary and Wages Tax Deductions - K200 for <i>all</i> taxpayers un	loss they are claiming a c214(4)) mahata)	260	200.00		
NET DEDUCTIONS	less they are craffilling a \$214(4)) rebate)	265 K	200.00		
NOTE: If box 255 is less than (or equ	ual to) K200, then write zero	o in box 265.	K			
s214(3) REBATE (25% of Net Deductions)			270 K			
NOTE: Your s214 rebate must not exceed the act	tual Salary & Wages tax wit					
TOTAL SALARY OF	R WAGES TAX F	REBATES	310 K			
Note that the total Rebates may not exceed the Salary and Wages deductions may write the value of the deductions in box 310.	nade by your employer in bo	ox 18. If the reba	tes exceed tl	he tax SWT deductions,		
ITEM 9 BUSINESS INCOME PAYMENTS FROM WHI	CH TAX WAS DED	UCTED				
PAYER'S NAME	TIN OF PAYER	GROSS IN	COME	TAX DEDUCTED		
				320		
		']	TOTAL	K		
NOTE: Attach copies of your P8 and PR2 deduction certificate(s) and submit	them with this return.					
ITEM 10 CALCULATION OF NET RENTAL INCOME						
RENTAL INCOME						
ADDRESS OF EACH PROPERTY		DATE ACC	QUIRED	GROSS RENT		
				330		
		1	TOTAL	К		
RENTAL EXPENSES						
RATES AND TAXES - LIST RECEIVING AUTHORITY(IES)	Taxo I					
	K					
		TOT				
	342 K		350 K			
REPAIRS (EXCLUDING IMPROVEMENTS) - LIST PROPERTY	K		W	-		
ADDRESS	360					
	K			m \ m \ · ·		
	K		370	TOTAL		
	K		K			

INSURANCE PREMIUMS - LIST INSURER				
		K		
		381 K		TOTAL
		382 K	390 K	
INTEREST - LIST NAME AND ADDRESS OF L	ENDER(S)			
		400		
		401		TOTAL
		K 402	410	101712
COMMISSION LIST NAME AND ADDRESS OF	NE DECIDIENT	K	K	
COMMISSION - LIST NAME AND ADDRESS O	F RECIPIENT	420		
		K 421		
		K	430	TOTAL
		K	K	
DEPRECIATION - Attach separate depreciation s	schedule.			TOTAL
Total depreciation shown on attach	ned schedule	K	450 K	
ANY OTHER DEDUCTION				
		460 K		
		461 K		TOTAL
462 470 K				
			ΓAL EXPENSES	475 K
]		NCOME (LOSS)	100
NOTE: if you are claiming depreciation as a rental exdepreciation relating to your rental expense. Write the will need to attach two separate depreciation schedul	xpense, complete and attack e total in box 440. Note that	a separate copy of the De	preciation Schedule (Sched	lule 8) covering only
ITEM 11 CALCULATION OF INTERE				
INTEREST RECEIVED OR CREDITED				
NAME AND ADDRESS OF EACH BORROWER OR BANK, ETC.	INTEREST WITHHOLDING TAX	FOREIGN TAX PAID	GROSS INTEREST	
				-
				TOTAL INTEDEST
тоты	490	491	492	TOTAL INTEREST 493
TOTAL	K	<u>K</u>	K	K
			MPT INTEREST	17
		TAXA	BLE INTEREST	К
ITEM 12 CALCULATION OF DIVIDE DIVIDENDS RECEIVED	IND INCOME			
NAME OF COMPANY OR UNIT TRUST	DIVIDEND WHT PAID	FOREIGN TAX PAID	GROSS DIVIDEND	
OF COMMAN OR UNIT IRUST	DITIDENT WITH TAID	TORLION TAX FAID	GROOD DIVIDEND	-

					TOTAL DIVIDENDS
TOTAL	510 K	K	K	513 K	
Did you receive any exmpte dividends? If yes, provide	details:	LESS EXE	MPT DIVIDENDS	520 K	
		TAXAE	BLE DIVIDENDS	525 K	
NOTE: Attach details of your Interest Withholding	Tax, Dividend Withholding	Tax, and Foreign Tax Cre	edits (as applicable) and sub	mit t	them with this return.

ITEM 13 SUMMARY INCOME TAX RETURN		
INCOME FROM SOURCES OTHER THAN SALARY/WAGES		
INCOME / DEDUCTION ITEM	ITEM TO COMPLETE	AMOUNT TRANSFERRED FROM ITEM / SCHEDULE
Gross Profit from Business/Professional Income (Non-Primary Production)	Schedule 5A	K
Gross Profit from Livestock Account (Primary Production)	Schedule 5A	K
Gross Profit from Produce Account (Primary Production)	Schedule 5A	K
Other Business Income	Schedule 5B	K
TOTAL BUSINESS INCOME		K
Business Deductions (Total Operating Expenses)	Schedule 5C	K
NET BUSINESS PROFIT (LOSS)		K
Net Rental Income	Item 10	K
Interest Income (Taxable Interest)	Item 11	K
Dividend Income (Taxable Dividends)	Item 12	K
Other Income (from trusts, partnerships, etc.)	Schedule 2	K
TOTAL NON-BUSINESS INCOME		K
TAXABLE INCOME / LOSS (EXCLUDING SALARY/V	WAGES)	K
LESS Prior Year Losses Utilised		K
NET NON-SALARY / WAGE INCOME	(Box 570 less Box 575)	K
SALARY & WAGES INCOME	Item 6	K
TOTAL TAXABLE INCOME FROM ALL SOURCES	(Box 580 + Box 585)	K
NOTE: BOXES 595 TO 610 ARE FOR IRC OFFIC	E USE ONLY:	595
Notional tax on total net taxable income		K
LESS Notional tax on salary and wages income		600 K
REMAINING TAX PAYABLE ON OTHER INCOME		K
s213D Rebate on Other Income	Schedule 7	K
LESS Salary & Wages Tax Excess / (Shortfall) (from box 190).	Item 6	K
LESS Tax Credit from BPT Deductions	Item 9	K
LESS Other tax credits (including Interest Withholding Tax & Dividend Withholding Tax, etc.)	Item 11, 12, etc.	623 K
Foreign tax credits (note that foreign tax credits may only offset foreign-sourced income)	#REF!	K
LESS Salary and Wages Tax Rebates	Items 7	K

LESS	s214(4) Rebate for (where tax has been paid on Sa	K			
	INCOME TAX I	PAYABLE / (REFUNDABLE) ON	TOTAL INCOME	K	
		NOTE: If any of the income or deduction items in the you must complete the associated section or schedule in			
	DOCUMEN	TS AND INFORMATION REQUIRED T	O BE FURNISHED WIT	H THIS RET	TURN
		ents, schedules and information below and where appli box with an X. This section must be completed by all to		sure to write y	our TIN on each
Have	you completed and attached	Schedule 1 - the Summary Balance Sheet? (to be comp	leted by all taxpayers)		☐ Yes
Was	BPT or Prescribed Royalty	<u>Fax</u> deducted from your income? If YES, complete Item	8 and attach your P8 form(s)		☐ Yes ☐ No
Did y	ou receive any interest during	ng the year of income? If YES, complete Item 10			Yes No
Did y	ou receive any dividends du	ring the year of income? If YES, complete Item 11			Yes No
Did y	ou have any partnership tha	t distrbuted profits to partners? If YES, complete Sched	ule 2		Yes No
Did y	ou receive any income from	primary production involving livestock? If YES, comp	lete Schedule 3		Yes No
Did y	ou pay rent on any real estat	e used for business purposes? If YES, complete Schedu	le 4		☐ Yes ☐ No
Did y	ou have business income from	om a Sole Trader business? If YES, complete Schedule S	5		☐ Yes ☐ No
]	Oid you have any transaction	D PARTY DEALINGS / TRANSFER PRICING as or dealings with international related parties (irrespection the year? If YES, complete Schedule 6	tive of whether they were revenue	or capital) that	☐ Yes ☐ No
	•	from international related parties that in aggregate exceing the year? If YES, complete Schedule 6	eded		Yes No
FOR	EIGN SOURCE INCOME	INFORMATION			
]	Did you have a branch overse	eas or a direct or indirect interest in a foreign trust or for	reign company? If YES, complete	Schedule 6	Yes No
Did y	ou have any dependents? If	YES, complete Schedule 7			☐ Yes ☐ No
Did y	ou have any assets used to g	enerate business income? If YES, complete Schedule 8			Yes No
Did y	ou have any bad debts writte	en off? If YES, complete Schedule 9			Yes No
Did y	ou make payments of any ki	nd to relatives or associated persons working with your	business? If YES, complete Sched	ule 10	Yes No
Did y	our employee payroll exceed	1 K200,000? If YES, then you must complete a Training	g Levy Return (TL1).		Yes No

HOURS FOR PAYMENT: 8:30 A.M. TO 3:30 P.M. MONDAY TO FRIDAY.

CHEQUES SHOULD BE MADE PAYABLE TO 'COMMISSIONER GENERAL INTERNAL REVENUE' AND MARKED 'NOT NEGOTIABLE'.

PAYMENTS MAY BE MADE ELECTRONICALLY THROUGH YOUR BANK WITHOUT NEEDING TO VISIT AN IRC OFFICE. FOR DETAILS SEE www.irc.gov.pg

PAYMENTS MAY ALSO BE MADE VIA EFTPOS. TAX FORMS AND GUIDES ARE AVAILABLE FOR DOWNLOAD FROM THE IRC WEB SITE www.irc.gov.pg

SCHEDULE 1 SUMMARY BALANCE SHEET			Taxpayer Identification Number (TIN):					
SCHEDULE I SUIVIIVIARY BALAN	ICE SHEET							
CURRENT ASSETS								
Cash & Investments	640 K							
Inventory (closing stock)	641 K							
Accounts receivable (trade debtors)	642 K							
Pre-paid Expenses	643 K							
Other	644 K							
TOTAL CURRENT ASSETS	· ·	650 K						
FIXED ASSETS - At Book Value		•						
Property & Equipment	660 K							
Leasehold Improvements	661 K							
Equity & Other Investments	662 K	00000000000						
Other	663 K							
Less: accumulated depreciation	664 K							
TOTAL FIXED ASSETS	,== ,	670 K						
TOTAL ASSETS								
CURRENT LIABILITIES		•						
Accounts payable	680 K							
Accrued salary & wages	681 K							
Taxes and fees payable	682 K							
Unearned revenue	683 K	000000000						
Other	684 K							
TOTAL CURRENT LIABILITIES		690 K						
LONG-TERM LIABILITIES		•	<u> </u>					
Mortgage	691 K							
Loans from directors	692 K	0000000000						
Other loans	693 K							
Other long-term liabilities	694 K							
TOTAL LONG-TERM LIABILITIES	<u> </u>	700 K						
TOTAL LIABILITIES								

SCHEDULE 2 OTHER INCOME						Taxpayer Identification Number (TIN):					
							Ш				
Did you purchase land, shares, lease	es or other property with the	he intention of resa	le at a prof	it?			<u> </u>	Yes	Ш	No	
If "YES", complete the rest of this section. If not	, move on to the next section of the	form.									
DESCRIPTION OF ITEM SOLD	DATE PURCHASED	DATE SOLD	PRO	FIT							
								T	OT	AL	
						720 K					
Tips or Commissions receiv	red for services rended			721 K							
Share of partnership income	e / (loss)			722 K							
Name of Partnership: TIN of Partnership:											
Distributions from Trusts				723 K							
Name of Trust:		TI	N of Trust:								
Any other income not decla	red elsewhere (show de	etails here):									
		724 K									
		725 K						T	OT	AL	
		726 K		730 K							
	ТО	TAL OTHER II	NCOME		SS	S)					
LESS Other expenses incurred in earning	ng the income declared above	re (not claimed elsew	here) - sho	w de	tail	s here):				
		731 K									
		732 K				Ι	ESS	S: T	OT	`AL	
		733 K		740 K							
		NET OTHER II	NCOME		SS	S)					

SCHEDULE 3 LIVESTOCK ACCOUN	Identification Number (TIN):		
LIVESTOCK INCREASES	TYPE (e.g. cattle, pigs, etc.)	NUMBER	VALUE
STOCK ON HAND 1 JANUARY 2014	1101		750 K
STOCK VALUED AT: COST MARKET VALUE			751
			K 752
PURCHASES			K 753
PURCHASES			K 754
			K
			K
NATURAL INCREASE			
	TOTAL 1		765 K
LIVESTOCK DECREASES	TYPE (e.g. cattle, pigs, etc.)	NUMBER	VALUE
GROSS SALES			770 K
			771 K
			772
KILLED FOR RATIONS			K
KILLED I OK KATIONS			K
			K
			K
LOSS BY DEATH, ETC.			
STOCK ON HAND - 31 DECEMBER 2014			⁷⁷⁶ K
STOCK VALUED AT: COST MARKET VALUE			777
			778
	TOTAL 2		K 785
	TOTAL 2	DOCTO 11 CC	K
	Transfer to Item 5) I	'KOFIT / LOS	S

CCHEDITIE 4 DE	CHEDULE 4 RENTAL EXPENSE PAYMENTS						on Numbe	r (TI	N):
SCHEDULE 4 KE	INTAL EXPENSE PA								
LANDLORD /	RECIPIENT	TIN OF RECIPIENT	TOTAL RI	ENT PA	AID		AMP DU		No.
		_	_						
NOTE: Include the total of all rents pain number for the payment of stamp duty or	d for any properties rented or leased by y	you. All rental leases must l	be submitted f	or stam	p duty	. Provide	the rece	ript	

S.C	SCHEDULE 5 BUSINESS INCOME					Taxpayer Identification Number (TI						
				$\underline{\perp}$	\perp	\perp			\Box	\underline{I}		
	- BUSINESS / PROFESSIONAL INCOME											
IK	ADING ACCOUNT (For Non-Primary Producers Only) Gross sales (cash and credit))		790								
	0	791		K								
. DD		K		-								
ADD	Purchases	K		=								
	TOTAL	K		=								
LESS	Closing stock	K		797								
	Cost of goods sold			K								
	GROSS PROFIT (LOSS)			K								
CL	OSING STOCK VALUED AT: COST MARK	ET	VALUE REPLACEM	EN7	Г СС	OST						
LIV	ESTOCK ACCOUNT			805								
	Profit or Loss Transferred From Schedule 3			K								
PR	ODUCE ACCOUNT (Primary Producers Only)			810								
	Gross sales (cash and credit)	011		K								
	Opening stock	811 K										
ADD	Purchases	812 K										
	TOTAL	822 K										
LESS	Closing stock	832 K										
	Cost of goods sold			842 K								
	GROSS PROFIT			850 K								
5B	- OTHER BUSINESS INCOME											
	Gross income from the <i>Profession</i> of:			855 K	<u> </u>							
	Gross income from the <i>Business</i> of:			856 K								
	Value of goods taken from stock for personal / famil	ly p	ourposes	857 K								
	Insurance payments received			858 K								
	Subsidy, grant, or bounty payments			859 K								
	Bad debts recovered			860 K								
	Royalties or franchise fees			861 K								
	Commissions, discounts or rebates, etc.			862 K								
	Other business income			863 K								
	TOTAL OTHER BUSINESS INCOME			870 K								
	TOTA	LI	BUSINESS INCOME	875 K								

5C - BUSINESS DEDUCTIONS	
NOTES: Do not claim expenses here that are also claimed at Item 10 (rental expenses) or Schedule 2 (expenses against other incom If Depreciation is claimed below, the depreciation schedule (Schedule 8) must be completed. If bad debts written off are claimed below, the Bad Debts schedule (Schedule 9) must be completed. Where salary and wages listed includes payments to a relative or for domestic servants, Schedule 10 must be completed.	ne).
Accounting or Tax Agent fees	880 K
Advertising and promotion	881 K
Bad debts written off - complete Schedule 9	882 K
Depreciation on plant or buildings owned by you and used in the business (complete Schedule 8)	K
Insurance	884 K
Interest paid on money used to purchase business, plant, or for working capital	885 K
Lease payments	886 K
Legal expenses (attach list stating amounts, to whom and for what services)	887 K
Motor vehicle expenses (business use only)	K
Printing, stationery, and postage (business only)	K
Rates and taxes on business premises - exclude private usage portion	890 K
Repairs and maintenance - Business premises and plant	891 K
Rental expenses (business premises only)	892 K
Salaries & wages, bonuses, commissions, allowances K	
Other employee expenses not claimed elsewhere $\frac{894}{K}$	_
TOTAL payments made to employees (must equal total reported on SOEs)	895 K
Subscriptions to trade, business, or professional associations (exclude clubs)	896 K
Telephone and electricity expenses	897 K
Travel and accommodation (business travel only)	898 K
Other business expenses not claimed elswhere - attach a list with details	899 K
TOTAL OPERATING EXPENSES	905 K

NET BUSINESS INCOME (LOSS)

			ITERNATION											
	A - INTERNATION	1A	L RELATED PARTY	TR	ANSACTIONS									
Q1 a.	•	eve	actions or dealings with enue or capital in natur ns) in the year.		•		•				NO			
b.	Did you have any loa K2,000,000 at any tir		to or from internation during the year?	al r	related parties that in a	agg	regate exceed	lec	YES		□ NO			
NOTE: • If you answered yes to question 1a you must complete questions 2 and 3. • If you answered yes to question 1b you must complete question 4 • All taxpayers must complete Part B • If you answered NO to both questions, skip questions 2-4 Q2 Provide the following details for each of the following categories of international related party dealings.														
	a. Tangible Property													
a.	Taligible Property		PURCHASES /											
			EXPENDITURE		SALES / REVENUE		METHOD		COUNTRY	DO	OCUMENTATION			
	Trading stock	A		В		c 		D		Ε.				
	Rent	F		G		Н				J				
	Other	K		L		М		N		0				
	If "Other" provide description:													
b.	b. Intangible Property													
	PURCHASES / SALES / REVENUE METHOD EXPENDITURE							COUNTRY	DO	OCUMENTATION				
	Royalties	Α	-	В		С		D		Ε				
	Transfer of intangibles	F		G		н		ı		J				
	Other	к		L		М		N		o				
	If "Other" provide description:													
c.	Financial Transactio	ns												
	T 1'		PURCHASES / EXPENDITURE		SALES / REVENUE		METHOD		COUNTRY	DO	DOCUMENTATION			
	Interest, discounts, guarantees	Α		В		С		D		E				
	Insurance	F		G		н		ı		J				
	Other	к		L		М		N		o				
	If "Other" provide description:													
d.	Services	I												
			PURCHASES / EXPENDITURE		SALES / REVENUE		METHOD		COUNTRY	DO	OCUMENTATION			
	Management Fees	Α	EAI ENDITORE	В		С		D		E				
	Marketing	F		G		Н		ı		J				
	ICT, Communication	к		L		м		N		o				
	Technical,	Р		Q		R		s		т				
	construction Research &			.,		۱۸/		v		v				
	Development	U		٧		W		Х		Υ				
	Other	z		ΑА		ΑВ		AC		ΑC				
	If "Other" provide description:							•			•			

	Other										
е.	Other		DUD CHA SES /								
			PURCHASES / EXPENDITURE		SALES / REVENUE		METHOD		COUNTRY	DC	CUMENTATION
	Revenue	Α		В		С		D		Ε	
	Description:										
	Capital	F		G		н		ı		J	
	Description:										
			ries in Q2, state the pe			va	lue for each o	f tl	nose categorie	es t	hat are
rep	resented by internation	on	al Related Party Dealin	gs	(IRPD). IRPD %						
			Purchases / Expenditure		Sales / Revenue						
	Tangible Property	Α		В							
	Intangible Property	С		D							
	Financial Transactions	Ε		F							
	Services	G		н							
	Other	ı		J							
Q4 Wh	nere you have provide	d l	oans to an Internation	al I	Related Party, provide	the	e following de	tai	s in regard to	the	ose loans
a.	Interest-Bearing										
			AVERAGE BALANCE		INTEREST PAID / RECEIVED		METHOD		COUNTRY	DC	CUMENTATION
	Borrowed	Α		В		с		D		Ε	
		F		G		Н		ı		J	
		к		L		М		N		0	
		Р		Q		R		s		т	
		U		v		w		х		Υ	
	Loaned	z		АА		АВ		AC		AD	
		ΑE		AF		AG		АН		AI	
		AJ		ΑK		AL		AM		AN	
		АО		ΑР		AQ		AR		AS	
В.	Non-Interest-Bearing	3		1 1							
			AVERAGE BALANCE		INTEREST PAID / RECEIVED		METHOD		COUNTRY	DC	OCUMENTATION
	Borrowed	Α			THE GET / ED	В		с		D	
		Е				F		G		н	
		1				J		К		L	
		м				N		0		Р	
	Loaned	Q				R		s		т	
		U				v		w		х	
		Υ				z		ΑА		АВ	
		AC				AD		AE		AF	

PAR	FB - FOREIGN-SOURCED INCOME INFORMATION	
Q5	Did you have an international branch or a direct or indirect interest in a foreign company trust?	or YES NO
	NOTE: If you answered yes to question 5 you must complete questions 6, 7, and 8 belo	w.
Q6	Show the number of associated international foreign entities in which you have an interest.	
Q7	Show the number of overseas branches held during the year	
Q8	Did you derive any amount of foreign-sourced income during the year?	☐ YES ☐ NO
	If "YES", what was the amount of foreign-sourced income during the year?	915 K
	If "YES", what conversion rate was used to convert the foreign income to PNG Kina?	920 K
	Specify which foreign currency:	
	NOTE: If the information requested is not relevant or the answer is NIL leave the fields b	lank.

SCHEDULE 7 DEPENDENTS Taxpayer Identification Number (TI													
TYPE OF DEPENDENT	FULL NAME	DATE OF BIRTH		SEPARATE NET COME FOR YEAR	_	olly maintain the dependent write "Wholly". or other persons helped, give full details.							
Spouse													
Children under 16 years of age													
Student children 16- 25 years of age													
Parents of taxpayer or of spouse													
Invalid relatives over 16 years													
Number of de	ependents claimed for tax p	purposes (Note: if you have	more	than 3 dependents, write	3 here)	925							
If claiming pa	arents/parents-in-law, wher	e do they live:											
If in the villa	ge, how much did you give	them this year?:				K							
NOTES: 1. A maximum of three dependents can be claimed. 2. If your salary or wage income is more than K17,428, then additional dependent rebates are not allowable. 3. Only parents/parents-in-law residing in Papua New Guinea can be claimed. 4. A medical certificate signed by a Government Medical Officer stating the Invalid Relative is permanently incapacitated for work must be attached before a claim can be allowed.													
FOR OFFICE USE ONLY													
CALCULA	TION OF S213D DEPEND	DENT REBATE											
Tax payal	ble on other income - fro	om box 610.				K							
Rebate Ca	alculation			Notional Reb	ate		Actu	al Reb	ate				
Rebate or	1st Dependent - 15% up to	a maximum of K450	K			K							

K

TOTAL REBATE (Note: maximum rebate allowed is K1050) K

K

K

Rebate on 2nd Dependent - 10% up to a maximum of K300

Rebate on 3rd Dependent - 10% up to a maximum of K300

SCHEDULE 8 DEP	Taxpayer Id	entification	Number	(TIN):			
DETAILS OF ASSET - TYPE, LOCAT ETC.	TION, DEPRECIATION METHOD	OPENING VALUE	CLOSING	VALUE	DEPRI CL	<u> </u>	
Bro	METHOD				CL	111/1151	
	<u></u>		<u> </u>	ГОТАL	935		

SCHEDULE 9 BAD I	DEBTS WRITTEN OFF		тахраует ти	entification Number (11N):
DEBTOR	REASON FOR WRITE OFF	DATE OF V	RITE OFF	AMOUNT WRITTEN OFF
			TOTAL	940 K

SCHEDULE 10 PAYMENTS TO RELATIVES										er Ideni	incatio	on N	umbe	r (11	N):
SCHEDULE 10 PATIVIENTS TO RELATIVES															
STATEMENT OF SA	LARY OR O	THER PAYMEN	ITS TO RELATIV	/ES O	F THE	T/	AXPAYER O	R A	SS	OCIA	TED	PE	ERSC	ON:	5
FULL NAME OF EACH EMPLOYEE	DATE OF BIRTH (IF UNDER 18)	NATURE OF DUTIES	RELATIONSHIP TO TAXPAYER	No. OF WEEKS EMPLO YED	No. OF HRS PER WEEK		OTAL PAID	TAX DEDUCTED				AMOUNT CLAIMED AT SCHEDULE 5 (BUSINESS DEDUCTIONS)			T 5
						945 K		946 K			ľ	47 K			
						948 K		949 K			9.	50 K			
						951 K		952 K			1	153 K			
						954 K		955 K			1	56 K			
						95 / K		958 K]	K			
						K		K]	K 165			
						K		K]	K			
						K		K				K			
						K		K				K			
						K		K				K			
NOTE: Include all salaries,	, commissions an	d allowances paid to	relatives of the taxpo	ayer or j	people d	issoc	ciated with the to	ахра	yer (or relat	ives of	f the	? taxpe	ayer.	,