About this form
You must complete an Income Statement every financial quarter during the period of NEIS Assistance. The purpose of the Income Statement is to allow you as the business owner, and the Department of Education, Employment and Workplace Relations (DEEWR) to monitor the progress of your NEIS business. DEEWR will also determine continuing eligibility for NEIS Allowance (if applicable). This is done by your NEIS provider applying external income and viability tests based on the information that you provide (note: external income does not include income from your NEIS business). Giving false or misleading information is a serious offence.

When to complete this form
You will need to complete an Income Statement after each financial quarter during which you are operating your NEIS business. Statements must be lodged with your NEIS provider within 10 days after the end of each financial quarter. Failure to do so may result in the suspension of your NEIS Assistance.
A financial quarter is a period from:
- 1 July to 30 September;
- 1 October to 31 December;
- 1 January to 31 March; and
- 1 April to 30 June.

If you commenced NEIS Assistance less than four weeks before the end of a financial quarter, you are not required to submit an Income Statement to your NEIS provider for that quarter. If this is the case, you should include the information from this period in your Income Statement for the next full financial quarter, which will be deemed to be your first financial quarter.

Who completes this form?
The NEIS participant named in the NEIS Participant Agreement should complete this form. You should only include your personal details on this form. Any partners in the NEIS business who are also receiving NEIS Assistance, including partners*, must complete a separate Income Statement.

Your information and privacy
The information on this Income Statement may be subject to the Information Privacy principles set out in the Privacy Act 1988.
Your attention is drawn to the provisions contained in your NEIS Participant Agreement previously signed by you.
You must return this form within 10 days of the end of the financial quarter to your NEIS provider. Failure to do so may result in the suspension of your NEIS Allowance.

Your details
1. Your job seeker ID
2. Your NEIS Participant Agreement ID
3. Your full name
4. Your daytime contact phone number
   (STD )

Your external income
5. Did you receive any income external to your NEIS business (excluding NEIS business income, NEIS Allowance, Centrelink or DVA Allowances/Pensions, and your partner’s income) for this period? Do not include income you may have received before commencing NEIS Assistance.
   ( appropriate box)  No  Yes
   If YES, give amount of gross income
   $  
6. Source of income

Business income summary
Financial period being assessed
7. Quarter from
   / / to / /
8. Quarter number ( appropriate box)
   First  Second  Third  Fourth
Cashflow summary

<table>
<thead>
<tr>
<th></th>
<th>BUDGET (as per NEIS Business Plan)</th>
<th>ACTUAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>A RECEIPTS</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>B PAYMENTS</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>C BALANCE</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>D DEBTORS ($)</td>
<td>OWED TO YOU)</td>
<td>$</td>
</tr>
<tr>
<td>E CREDITORS ($)</td>
<td>YOU OWE)</td>
<td>$</td>
</tr>
</tbody>
</table>

NEIS business mentoring visit

10 Have you had a visit from your NEIS business mentor this financial quarter?
   □ Yes  □ No

11 Number of people working in your NEIS business (including yourself)?
   [ ] Full-time  [ ] Part-time

Declaration

I certify that the information supplied on this form is complete and correct to the best of my knowledge. I acknowledge that false information will lead to termination of NEIS Assistance and action to recover any allowance falsely obtained will be instigated.

Signature

Date  /  /  

Send this form to your NEIS provider and make a copy for your records.