

# 2018 Tax Return Questionnaire

Please complete both sides of this form to assist us in completing your income tax return.

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ Work: \_\_\_\_\_ Mobile: \_\_\_\_\_

**Bank details; BSB..... Account Number .....**

1. What was your main occupation this financial year \_\_\_\_\_
2. Do you have any dependents? If so, how many, and what ages are they \_\_\_\_\_
3. Please let us know if there have been any changes in your family situation which may affect your tax. These include:
  - Any of your children turned 16 since your last tax return
  - Single/separation date \_\_\_\_\_
  - Any of your children have left home
  - New children
  - New partner or married

Details: \_\_\_\_\_

## 4. INCOME:

- Have you attached all your Payment Summaries (Group Certificates) including those for? salary/wages, Centrelink and Pension income YES NO
- Have you earned any interest from your bank accounts YES NO  
Details: \_\_\_\_\_
- Have you received any dividends or payments from other investments YES NO  
Details: \_\_\_\_\_
- Did you run your own business YES NO  
Details: \_\_\_\_\_
- Have you sold any shares or other investments YES NO  
(Attach documents relating to their original purchase and their sale)
- Have you bought or sold any investment properties this year Land, House etc. YES NO  
Details: \_\_\_\_\_
- Do you have a rental property (Attach a rental property checklist) YES NO
- Do you Have holiday maker income? \_\_\_\_\_ YES NO

## 5. WORK EXPENSES:

- Do you ever use your own car for work - training and seminars, deliveries, client visits, carrying equipment weighing 20 kg's or more, etc YES NO  
If yes, where did you go \_\_\_\_\_  
How many kilometres have you travelled during the year for work purpose \_\_\_\_\_

- Did you stay overnight anywhere for work purposes or travel by public transport YES NO  
 Details: \_\_\_\_\_
- Do you have to wear a **uniform** or protective clothing for work YES NO
- How much have you spent on uniforms or protective clothing (overalls, boots, aprons) this year  
 Details & amount spent: \_\_\_\_\_
- If you work **outdoors**, have you purchased sunscreen, hats, or sunglasses YES NO  
 Details & amount spent: \_\_\_\_\_
- Have you undertaken any **training** (TAFE, University, Online) during the year  
 Details: \_\_\_\_\_ YES NO  
 If so did you pay for course fees, books, stationary, photocopying, accommodation, tools, internet,  
 computer equipment or travelling costs relating to the course YES NO  
 Details & amount spent: \_\_\_\_\_
- Have you paid for any - membership fees, union fees, telephone calls, internet, books, magazines,  
 journals, stationary, tools, computer equipment or any **other expenses** related to your work YES NO  
 Details & amount spent: \_\_\_\_\_
- 6. OTHER**
- Did you have any expenses relating to your investment income YES NO  
 Details: \_\_\_\_\_
- Have you made any **donations** to charity YES NO  
 If yes, which ones and how much \_\_\_\_\_
- How much did you pay for **preparing your tax** return last year \_\_\_\_\_
- What is your spouse's taxable income for the year \_\_\_\_\_  
 Spouse's name and date of birth \_\_\_\_\_
- Did you have disability aids, attendant care, or aged care expenses? YES NO
- Do you have **private health** insurance (Please attach letter from fund) YES NO  
 Name of Fund \_\_\_\_\_ Membership number \_\_\_\_\_  
 Benefit Code \_\_\_\_\_ Tax Claim Code \_\_\_\_\_
- Do you have **sickness and accident** insurance outside superannuation YES NO  
 Details and amount spent: \_\_\_\_\_
- Did you make any personal Superannuation contributions? \_\_\_\_\_ YES NO
- Have you or your spouse made **child support** payments YES NO  
 Details and amount: \_\_\_\_\_

**The signing of this form indicates your agreement to the terms and conditions, available upon request.**  
 Signature.....Date.....