

# 2021 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**

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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, magazi 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.....