

2023 Tax Return Questionnaire

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

Name:		Email:			
Addres	SS:				
Phone	- Home:	Work: Mobile:			
1.	What was you	ur main occupation this financial year			
2.	Do you have a	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 y	our tax.	. These ir	nclude:
	-	y of your children turned 16 since your New children			
	☐ Sin	ngle/separation date New partner or married			
Dotoilo		y of your children have left home			
	INCOME:				
4.		information on your Payment Summary, Centrelink and Pension income			
<i>A</i>			VEC	NO	
>	-	ned any interest from your bank accounts?	YES	NO	
>		eived any dividends or payments from other investments?	- YES	NO	
	-	erved any dividende of payments from other investments.	120	110	
>		our own business?	- YES	NO	
		our own business:	TLO	110	
_			- VEC	NO	
>		d any shares, or other investments eg Crypto?	YES	NO	
<i>A</i>		ments relating to their original purchase and their sale)	VEC	NO	
>	-	ight or sold any investment properties this year Land, House etc?	YES	NO	
	Do you own a	a property which is rented, including Air B&B (Attach a rental property checklist)	YES	NO	
5.	WORK EXPE	:NSES:			
>		use your own car for work - training and seminars, deliveries, client visits, pment weighing 20 kg's or more, etc?	YES	NO	
	If yes, where	did you go?			
	How many kil	lometres have you travelled during the year for work purpose?			
>	Did you stay o	overnight anywhere for work purposes or travel by public transport?		YES	NO
	Details:		_		
>	Do you have t	to wear a uniform with a logo 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, books, magazines, journals, stationary, tools, computer equipment or any other expenses related to your work?	YES	NO
	Details & amount spent:		
>	Do you use your mobile or internet for work? Do you work from home?	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		
>	Do you have private hospital 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 which is paid outside of your superannuation fund?	YES	NO
	Details and amount spent:		
>	Did you make any personal Superannuation contributions? Please attach your confirmation letter.	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 u	pon requ	est.
	SignatureDate		
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