

2014 Tax Questionnaire

Individual Income Tax Return Checklist

Please complete the following checklist and return along with your PAYG Payment Summary (ies) and any other requested information in electronic format (.pdf preferred). We will not return to you original documents unless previously agreed. Please [click here](#) for our Fees & Charges. As previously advised, returns will not be lodged until payment for services is made or arranged for.

Personal Details

Name: Address:
Phone Business Hours (or mobile): Email:

Spouse details

Name: Date of Birth:

/

/

Taxable income: \$

Income

Please indicate by circling, yes or no if you have received any of the following sources of income.

Salary & Wages

If yes, include PAYG Payment Summary(ies).

Yes

No

Occupation:

Age Pension / Other Centrelink Payments

If yes, include documentation

Yes

No

Termination Payments (including Superannuation Lump Sums)

If yes, include PAYG Payment Summary and statement of termination.

Yes

No

Annuities / Superannuation Pension

If yes, include PAYG Payment Summary and other relevant documentation.

Yes

No

Interest

Institution: Amount:

Yes

No

Institution: Amount:

Where you have multiple accounts please provide a summary, including joint accounts.

Investments / Managed Funds

If yes, include tax summary

Yes

No

Dividends

If yes, provide dividend statements

Yes

No

Rental Property

If yes, provide all relevant documents

Yes

No

Other Income / Capital Gains

If yes, provide brief description and documentation.

Please note: Shares held in a company that has been take over or merged may be subject to capital gains tax

Yes

No

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Deductions

Travel / Motor Vehicle Expenses

Yes No

If you travel more 5,000 Kms for work purposes throughout the year, you should use a logbook to maximise your claim

If yes, please advise

1: Work related Kms: **2:** Engine capacity:

Protective Clothing / Uniform

Yes No Amount: \$

Self Education Expenses

Yes No Amount: \$

Work Related Subscriptions / Journals

Yes No Amount: \$

Gifts / Donations

Yes No Amount: \$

Tax Agent fees

Yes No Amount: \$

New Equipment

Yes No

Date Purchased: / / Cost: \$ Description:

Other expenses not listed above (Attach separate sheet if necessary)

Yes No

Description: Amount: \$

Tax Offsets

Please indicate if you believe you are entitled to any of the following rebates. We will then contact you and determine your entitlement.

Medical Expenses Offset (where expenses exceed \$2162 and you have previously claimed this offset)

Yes No

Health Insurance Offset (Please send us your premium statement and refer to <https://www.ato.gov.au/Individuals/Medicare-levy/In-detail/Medicare-levy-surcharge/Private-health-insurance-rebate-and-Medicare-levy-surcharge/> for eligibility)

Yes No

Substantiation

Please note - In accordance with the Tax Office's substantiation guidelines if your work related deductions exceed \$300 receipts must be retained to validate those claims.

Superannuation & Personal Insurances

Please remember to bring an up-to-date superannuation statement from your current super fund as well as details of any insurance cover you hold (life insurance, tpd insurance, income protection insurance)

Mortgage Details

Please remember to bring an up-to-date loan statement so that we can assess you current mortgage for interest rate, repayment levels and loan provider.

Accounting & Financial Services

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