

## 2018 Personal Tax Return Questionnaire



Thank you for choosing Brilliance for Business to complete your 2018 Income Tax Returns. To ensure we can process your returns as efficiently as possible, we have set out below a questionnaire to assist you in collating all of the relevant documentation we will need.

Not all parts of this questionnaire may be relevant to you and where this is the case, simply indicate N/A or cross a line over the section of the checklist that does not apply.

We have designed this questionnaire to be comprehensive to ensure you are aware of all information we will need to process your returns. By investing time and effort now, you will save time and money in the long run as we will be able to prepare your returns efficiently.

Of course, our questionnaire may not cover every situation and if there is a transaction or arrangement that we need to be aware of, please use the notes section at the end of the questionnaire to advise us of this information e.g. capital gains tax, overseas investments etc.

The ATO now have data matching technology which allows part of your return to be pre-filled. This includes information such as wages, interest income, dividend income and private health details. We will collate this pre-filled information from the ATO, but request that you still provide us with all of this documentation to ensure we can cross-match this to the information the ATO holds.

With regards to tax deductions, we strongly recommend you retain all relevant receipts in the event of an ATO audit to ensure you can substantiate your deductions. We will advise you of any other deductions we believe you are entitled too that will legally minimise your taxable income.

**Once you have completed the questionnaire, please sign and return the form to our office along with the supporting documentation so we can begin to prepare your tax return.** In the meantime, should you have any queries regarding your tax, please do not hesitate to contact the Brilliance for Business team.

We/I , instruct Brilliance for Business to prepare my Income Tax Return for the year ended 30<sup>th</sup> June 2018 based on the information provided by me, including this questionnaire.

I understand that I am responsible for the accuracy and completeness of the information I provide for the completion of my return.

I authorise Brilliance for Business to communicate with any relevant third parties on my behalf to collate any information required to complete my return including banks, solicitors and government agencies such as the ATO.

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## 2018 Personal Tax Return Questionnaire



To ensure our records are up to date, please complete the following:

Full Name/s:	_____		TFN:	_____		
Home Address:	_____ _____					
Contact Details	Home:	_____				
	Business:	_____				
	Fax:	_____	Mobile:	_____		
	Email:	_____				
Your Occupation/s:	_____					
Your Date of Birth/s:	_____					
Spouse Details: (if we don't complete his/her tax return):						
	Name:	_____		Tax File No:	_____	
	Date of Birth:	_____		2018 Taxable Income:	_____	
Children Details:	Names	_____			Date of Birth	_____
	_____	_____			_____	_____
	_____	_____			_____	_____
Do you wish to use electronic funds transfer for any tax refund? (if yes, complete bank details)						
	Bank/Branch:	_____		A/c Name:	_____	
	BSB:	_____	A/c No:	_____		

If we are preparing your tax returns for the first time, please provide the following:

	Enclosed
A copy of your last tax return, taxation assessment and if applicable, any PAYG Instalment Notices.	<input type="checkbox"/>
Copies of any other correspondence from the Australian Taxation Office relevant to your return (e.g. Statement of Account, Debt Notices, Payment Arrangement Information, Final Notice to Lodge)	<input type="checkbox"/>

### Top 5 Forgotten Items

	N/A	Enclosed
Income Protection Insurance	<input type="checkbox"/>	<input type="checkbox"/>
Depreciation on Investment Properties	<input type="checkbox"/>	<input type="checkbox"/>
Interest Income on Bank Accounts	<input type="checkbox"/>	<input type="checkbox"/>
Private Health Insurance Details	<input type="checkbox"/>	<input type="checkbox"/>
Dividend Reinvestment Statements	<input type="checkbox"/>	<input type="checkbox"/>

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INCOME			
<b>1. Salary, Wages and Allowances</b>		<b>N/A</b>	<b>Enclosed</b>
1.1	Do you have PAYG Payment Summaries (Group Certificates) from employment?	<input type="checkbox"/>	<input type="checkbox"/>
1.2	Have you received any allowances/bonuses that are not on your PAYG Payment Summary?	<input type="checkbox"/>	<input type="checkbox"/>
1.3	Have you received any lump sum payments not on your PAYG Payment Summary <i>e.g. pro rata annual or long service leave?</i>	<input type="checkbox"/>	<input type="checkbox"/>
1.4	Have you received any reportable Fringe Benefits not on your PAYG Payment Summary?	<input type="checkbox"/>	<input type="checkbox"/>
1.5	Have you received any ETP Payment Summary Statements?	<input type="checkbox"/>	<input type="checkbox"/>
1.6	Do you have a PAYG Payment Summary for an Australian Annuity or Superannuation Pension/Superannuation Lump Sum Payment (please also include details of your undeducted purchase price if applicable)?	<input type="checkbox"/>	<input type="checkbox"/>
<b>2. Interest and Dividend Income</b>		<b>N/A</b>	<b>Enclosed</b>
2.1	Have you received interest on any bank accounts in Australia? If so, please include details of bank account, total interest for the year, details of any joint bank accounts and any TFN tax deducted from your interest	<input type="checkbox"/>	<input type="checkbox"/>
2.2	Have you received dividend income, including dividends reinvested? If so, please provide dividend advice slips.	<input type="checkbox"/>	<input type="checkbox"/>
<b>3. Income from a Trust or Partnership</b>		<b>N/A</b>	<b>Enclosed</b>
3.1	Have you received or are you entitled to receive a distribution of income or loss from a partnership? If yes, please provide a copy of the partnership 2018 Financial Statements and Tax Return.	<input type="checkbox"/>	<input type="checkbox"/>
3.2	Have you received or are you entitled to receive a distribution of income from a trust? If yes, please provide a copy of the trust 2018 Financial Statements and Tax Return. Alternatively, please provide the 2018 tax statements issued by your managed fund.	<input type="checkbox"/>	<input type="checkbox"/>
<b>4. Capital Gains or Losses</b>		<b>N/A</b>	<b>Enclosed</b>
4.1	<p>Have you sold or disposed of any assets? Assets include, but are not limited to the following:</p> <ul style="list-style-type: none"> <li>• Shares, options, futures, units;</li> <li>• Property</li> <li>• Artwork, collectables</li> <li>• Goodwill on the sale of a business</li> <li>• Vacant Land</li> </ul> <p>If so, please provide the following details:</p>	<input type="checkbox"/>	<input type="checkbox"/>
4.2	Copy of the signed and dated purchase contract.	<input type="checkbox"/>	<input type="checkbox"/>
4.3	Details of any other purchase costs e.g. legal fees, stamp duty, brokerage.	<input type="checkbox"/>	<input type="checkbox"/>
4.4	Copy of the signed and dated sale contract.	<input type="checkbox"/>	<input type="checkbox"/>
4.5	Details of any other sale costs e.g. legal fees, commission, advertising	<input type="checkbox"/>	<input type="checkbox"/>

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5. Foreign Income		N/A	Enclosed
5.1	Have you received any foreign income e.g. interest on overseas bank accounts, foreign trust distributions, foreign dividend or royalties? If so please provide the following:	<input type="checkbox"/>	<input type="checkbox"/>
5.2	Details of the income e.g. tax statements	<input type="checkbox"/>	<input type="checkbox"/>
5.3	Details of foreign tax credits paid	<input type="checkbox"/>	<input type="checkbox"/>
5.4	Have you received any income resulting from foreign employment? If so, please provide details including any foreign tax paid, country of employment and dates employed overseas.	<input type="checkbox"/>	<input type="checkbox"/>
6. Rental Income		N/A	Enclosed
6.1	Have you received rental income or made your property available for rent? If so, please provide the following:	<input type="checkbox"/>	<input type="checkbox"/>
6.2	Property address, ownership, and date first available for rent (if this is the first year, please provide copy of purchase contract)	<input type="checkbox"/>	<input type="checkbox"/>
6.3	Rent received during the year and where applicable, property manager annual statement.	<input type="checkbox"/>	<input type="checkbox"/>
6.4	Details of all other expenses paid in relation to the rental property and where applicable, property manager annual statement (e.g. advertising for tenants, agent's commission, rates, repairs & maintenance, insurance, body corporate fees).	<input type="checkbox"/>	<input type="checkbox"/>
6.5	Please provide a copy of all loan statements relating to each property showing any borrowing costs and interest paid for the year.	<input type="checkbox"/>	<input type="checkbox"/>
6.6	Quantity surveyor report detailing property depreciation and building write off available.	<input type="checkbox"/>	<input type="checkbox"/>
7. Other Income		N/A	Enclosed
7.1	Have you received any other income? Please provide details below.	<input type="checkbox"/>	<input type="checkbox"/>
WORK RELATED DEDUCTIONS			
8. Motor Vehicle Expenses		N/A	Enclosed
8.1	Do you use your motor vehicle for business or work purposes (excluding travel between home and work even if the trip is made more than once per day)? If so, please provide the following details:	<input type="checkbox"/>	<input type="checkbox"/>
8.2	Copy of current logbook (kept for 12 continuous weeks during the past four years) including current work related percentage.	<input type="checkbox"/>	<input type="checkbox"/>
8.3	Total number of work related kilometres travelled (even if no logbook kept).	<input type="checkbox"/>	<input type="checkbox"/>
8.4	Motor Vehicle expenses (e.g. fuel, repairs, registration, insurance, leasing, loan documentation).	<input type="checkbox"/>	<input type="checkbox"/>

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<b>9. Travel Expenses (excluding motor vehicle)</b>		<b>N/A</b>	<b>Enclosed</b>
<b>9.1</b>	Do you travel in relation to your employment? If so, please provide your travel diary and all travel expenses.	<input type="checkbox"/>	<input type="checkbox"/>
<b>9.2</b>	If no travel diary is kept, please provide details of dates travelled, purposes of trip and any private use (e.g. any days spent on holidays at work related travel destinations)	<input type="checkbox"/>	<input type="checkbox"/>
<b>10. Work Related Uniforms/Clothing</b>		<b>N/A</b>	<b>Enclosed</b>
<b>10.1</b>	Do you wear a work uniform (ie compulsory uniform with business embroidery)? Please provide details of purchases.	<input type="checkbox"/>	<input type="checkbox"/>
<b>10.2</b>	Are you required to wear protective clothing (e.g. chef jacket, safety glasses, safety vests, steel capped boots)? Please provide details of purchases.	<input type="checkbox"/>	<input type="checkbox"/>
<b>10.3</b>	If you answered yes to questions above, you may be entitled to a deduction for laundry. Please advise number of loads of washing per week to launder uniforms.	<input type="checkbox"/>	<input type="checkbox"/>
<b>11. Self Education Expenses</b>		<b>N/A</b>	<b>Enclosed</b>
<b>11.1</b>	Did you complete any self-education courses related directly to your current employment? If yes, provide details.	<input type="checkbox"/>	<input type="checkbox"/>
<b>11.2</b>	Did you incur any other expenses in relation to self-education courses? If yes, provide details (e.g. text books, travel, stationery, home computer costs).	<input type="checkbox"/>	<input type="checkbox"/>
<b>12. Other Work Related Expenses</b>		<b>N/A</b>	<b>Enclosed</b>
<b>12.1</b>	Have you paid any union fees that are not included on your PAYG Payment Summary?	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.2</b>	Have you purchased, insured or leased any equipment used for work purposes?	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.3</b>	Have you paid for meals when working overtime (you need to be paid a meal allowance to claim this expenses)?	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.4</b>	Have you paid income protection insurance (outside your superannuation fund)?	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.5</b>	Do you use your home telephone for work related calls? If so, please provide phone bills and work related percentage.	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.6</b>	Have you purchased books, journals or professional libraries for work related purposes?	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.7</b>	Have you attended any seminars or conferences for work?	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.8</b>	If you work outdoors, details of sun protection items (e.g. sunglasses, sunscreen, hats).	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.9</b>	Do you use your home office for work? If so, please provide average number of hours per week utilised.	<input type="checkbox"/>	<input type="checkbox"/>
<b>12.10</b>	Do you pay any subscriptions to professional bodies?	<input type="checkbox"/>	<input type="checkbox"/>
<b>13. Other Deductions</b>		<b>N/A</b>	<b>Enclosed</b>
<b>13.1</b>	Have you incurred any bank fees on interest earning bank accounts?	<input type="checkbox"/>	<input type="checkbox"/>

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13.2	Have you incurred any management fees on investments e.g. brokerage, investment advice?	<input type="checkbox"/>	<input type="checkbox"/>
13.4	Have you incurred any interest expense or borrowing costs on loans used to purchase investments e.g. shares, managed funds?	<input type="checkbox"/>	<input type="checkbox"/>
13.5	Have you made any gifts or donations?	<input type="checkbox"/>	<input type="checkbox"/>
13.6	Have you incurred any costs for the preparation of your tax return last year?	<input type="checkbox"/>	<input type="checkbox"/>
13.7	Have you paid any interest to the ATO for late payment of income tax?	<input type="checkbox"/>	<input type="checkbox"/>
<b>14. Personal Superannuation Contributions</b>		<b>N/A</b>	<b>Enclosed</b>
14.1	Have you made any personal contributions to a complying superannuation fund? If so, please provide details.	<input type="checkbox"/>	<input type="checkbox"/>
14.2	Please provide a copy of the section 290-170 notice from your superannuation fund detailing your intention to claim a tax deduction for your contributions.	<input type="checkbox"/>	<input type="checkbox"/>
14.3	Did you incur any other expenses during the year? Provide details.	<input type="checkbox"/>	<input type="checkbox"/>
<b>TAX OFFSETS</b>			
<b>15. Spouse &amp; Private Health</b>		<b>N/A</b>	<b>Enclosed</b>
15.1	Has your spouse received the basic parenting allowance from Centrelink? If so, provide Centrelink PAYG Payment Summary (Group Certificate).	<input type="checkbox"/>	<input type="checkbox"/>
15.2	Did you contribute any superannuation on behalf of your spouse? If yes, was your spouse's gross income less than \$40,000 for the year? If yes, please provide details of contributions.	<input type="checkbox"/>	<input type="checkbox"/>
15.2	Were you a member of a private health fund? If so, please provide 2018 health fund statement and details of person/s covered under the policy.	<input type="checkbox"/>	<input type="checkbox"/>
<b>16. Other</b>		<b>N/A</b>	<b>Enclosed</b>
16.1	If you have a HECS/HELP debt.	<input type="checkbox"/>	<input type="checkbox"/>
16.2	Have you become or ceased to be a resident of Australia this year? If so, please advise relevant dates.	<input type="checkbox"/>	<input type="checkbox"/>
16.3	Please note below any other items or queries you have that may be relevant to the correct preparation of your 2018 Income Tax Return:	<input type="checkbox"/>	<input type="checkbox"/>

## 2018 Personal Tax Return Questionnaire



### END OF QUESTIONNAIRE – THANK YOU FOR TAKING THE TIME TO COMPLETE YOUR 2018 PERSONAL INCOME TAX RETURN QUESTIONNAIRE.

At Brilliance for Business, we take a big picture view of your financial and wealth position and accordingly, we have preferred partners in various industries to assist our clients. If you would like more information, we encourage you to complete the table below so we can help service you better. *(Completion of information below is not compulsory)*

Service	Your Current Manager/Contact	Are you happy with your current relationship?		Would you like information on our preferred partners?
		Yes/Neutral	No	Y/N
General Banking		<input type="checkbox"/>	<input type="checkbox"/>	
Financing		<input type="checkbox"/>	<input type="checkbox"/>	
Solicitor		<input type="checkbox"/>	<input type="checkbox"/>	
Financial Planner		<input type="checkbox"/>	<input type="checkbox"/>	
General Insurance		<input type="checkbox"/>	<input type="checkbox"/>	

