

Client Details Form

2020 Individual Income Tax Return

| | | |
|--|--|---------------|
| Full Name | | |
| Tax File Number | _ _ _ _ _ | |
| Date of birth | _ _ / _ _ / _ _ | |
| ABN (if applicable) | | |
| Address | | |
| Address (postal) <small>(Put 'as above' if the same)</small> | | |
| Telephone contacts | Mobile: | |
| | Business Hours (work) : | |
| | After Hours (home): | |
| Email |@..... | |
| Electronic banking <small>(for refund if applicable)</small> | BSB: | _ _ _ - _ _ _ |
| | Account Number: | |
| Occupation | | |
| | Do you run your own business as a sole trader? YES/NO | |
| | Do you run your own business in a company, trust or partnership? YES/NO | |
| Spouse's full name <small>(Please include married/de facto/same-sex)</small> | | |
| Spouse's date of birth | | |
| Spouse's TFN | | |
| Approximate Income (if known) | | |

| Income – Please provide evidence | | | Yes | No | Unsure |
|--|-----------|---------------|--------------|----|--------|
| 1. Salary or wages Please provide all PAYG Payment Summaries or Income Statements (available via MyGov (where employers are using Single Touch Payroll) from 31/7) applicable to the 2020 income year. Where you have not been provided with either an employment income statement or PAYG Payment Summary, please provide details below: | | | | | |
| Payer's ABN | | Gross Payment | Tax Withheld | | |
| A | | | | | |
| B | | | | | |
| 2. Allowances, earnings, tips, director's fees etc. | | | | | |
| 3. Employer lump sum payments | | | | | |
| 4. Employment termination payments | | | | | |
| 5. Australian Government allowances and payments like Newstart, Youth Allowance and Austudy payments | | | | | |
| 6. Australian Government pensions and allowances | | | | | |
| 7. Australian annuities and superannuation income streams | | | | | |
| 8. Australian superannuation lump sum payments | | | | | |
| 9. Attributed personal services income | | | | | |
| 10. Gross Interest | | | | | |
| Bank | Account # | Amount | Joint? | | |
| a) | | | | | |
| b) | | | | | |
| c) | | | | | |
| 11. Dividends | | | | | |
| 12. Employee share schemes | | | | | |
| 13. Distributions from partnerships and/or trusts (provide distribution statement) | | | | | |
| 14. Personal services income (PSI) | | | | | |
| 15. Net income or loss from business (as a sole trader) | | | | | |
| 16. Deferred non-commercial business losses | | | | | |
| 17. Net farm management deposits or repayments | | | | | |
| 18. Capital gains | | | | | |
| 19. Foreign entities: | | | | | |
| – Direct or indirect interests in a controlled foreign company | | | | | |
| – Transfer of property or services to a non-resident trust | | | | | |
| 20. Foreign source income (including foreign pensions) and foreign assets or property | | | | | |
| 21. Rent (provide documentation) | | | | | |
| – Do you have one or more rental properties? | | | | | |
| – Did you buy or sell any property during the income year? | | | | | |
| 22. Bonuses from life insurance companies or friendly societies | | | | | |
| 23. Forestry managed investment scheme income | | | | | |
| 24. Other income (please specify below) | | | | | |
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| Deductions – Please provide evidence | Yes | No | Unsure |
|---|-----|----|--------|
| D1. Work related car expenses | | | |
| • Cents per kilometre method (up to a maximum of 5,000 kms) | | | |
| • Log book method | | | |
| D2. Work related travel expenses | | | |
| Employee domestic travel with a reasonable travel allowance | | | |
| • If the claim is more than the reasonable travel allowance rate, do you have receipts for your expenses? | | | |
| Overseas travel with a reasonable travel allowance | | | |
| • Do you have receipts for accommodation expenses? | | | |
| • If travel is for 6 or more nights in a row, do you have travel records (e.g. a travel diary)? | | | |
| Employee travel without a reasonable travel allowance | | | |
| • Did you incur and have receipts for airfares? | | | |
| • Did you incur and have receipts for accommodation? | | | |
| • Did you incur and have receipts for hire cars (if applicable)? | | | |
| • Did you incur and have receipts for airfares? | | | |
| • Did you incur and have receipts for meals and incidental expenses? | | | |
| • Do you have any other travel expenses? | | | |
| Other work-related travel expenses (e.g. a borrowed car, public transport) | | | |
| <i>(Please Specify)</i> | | | |
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| D3. Work-related uniform and other clothing expenses | | | |
| • Protective Clothing | | | |
| • Occupation Specific Clothing | | | |
| • Non-compulsory uniform | | | |
| • Compulsory uniform | | | |
| • Conventional clothing | | | |
| • Laundry expenses (up to \$150 without receipts) | | | |
| • Dry cleaning expenses | | | |
| • Other claims such as mending/repairs, etc. (please specify) | | | |
| | | | |
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| Deductions (Continued) – Please provide evidence | Yes | No | Unsure |
|---|-----|----|--------|
| D4. Work related self-education expenses | | | |
| Course taken at educational institution: | | | |
| • Union fees | | | |
| • Course fees | | | |
| • Books, stationery | | | |
| • Travel | | | |
| • Other (Please specify) | | | |
| D5. Other Work-related expenses | | | |
| • Home Office Expenses | | | |
| • Computer and software | | | |
| • Telephone/mobile phone | | | |
| • Tools and equipment | | | |
| • Subscriptions and union fees | | | |
| • Journals or periodicals | | | |
| • Depreciation | | | |
| • Sun protection products (i.e. sunscreen and sunglasses) | | | |
| • Seminars and courses not at an educational institution | | | |
| • Any other work-related deductions (please specify) | | | |
| Other Types of Deductions | | | |
| D6. Low value pool deduction | | | |
| D7. Interest deductions | | | |
| D8. Dividend deductions | | | |
| D9. Gifts or donations | | | |
| D10 Cost of managing tax affairs | | | |
| • Interest charged by the ATO (e.g. including SIC and GIC) | | | |
| • Tax Agent/accounting fees | | | |
| • Litigation costs | | | |
| • Other expenses incurred in managing tax affairs | | | |
| D11. Deductible amount of undeducted purchase price of a foreign pension or annuity | | | |

| Deductions (Continued) – Please provide evidence | | Yes | No | Unsure |
|--|-----------------------|-----|----|--------|
| D12. Personal superannuation contributions | | | | |
| Full name of fund _____ | Account Number: _____ | | | |
| Fund ABN: _____ | Fund TFN: _____ | | | |
| <ul style="list-style-type: none"> Have you provided the fund a notice of intention to deduct the contribution? | | | | |
| <ul style="list-style-type: none"> Has this notice been acknowledged by the fund? | | | | |
| Other types of deductions (continued) | | | | |
| D13. Deduction for project pool | | | | |
| D14. Forestry managed investment scheme deduction | | | | |
| D15. Other deductions (please specify) | | | | |
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| L1. Tax losses of earlier income years | | | | |
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| Tax offsets/rebates – Please provide evidence | | Yes | No | Unsure |
|--|--|-----|----|--------|
| T1. Are you a senior Australian or pensioner? | | | | |
| T2. Did you receive an Australian superannuation income stream? | | | | |
| T3. Did you make superannuation contributions on behalf of your spouse? | | | | |
| T4. Did you live in a remote area of Australia or serve overseas with the Australian Defence Force or the UN armed forces in the 2020 income year? | | | | |
| T5. Did you have net medical expenses for disability aids, attendant care or aged care in the 2020 income year? | | | | |
| T6. Did you maintain a dependant who is unable to work due to invalidity or carer obligations in the 2020 income year? | | | | |
| T7. Are you entitled to claim the landcare and water facility tax offset? | | | | |
| T8. Are you involved in an early stage venture capital limited partnership? | | | | |
| T9. Are you an early stage investor in an early stage innovation company? | | | | |
| T10. Are you entitled to any other non-refundable tax offsets? (Please specify below) | | | | |
| T11. Are you entitled to any other refundable tax offsets? (Please specify below) | | | | |
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| Other relevant information – Please provide evidence | Yes | No | Unsure |
|---|-----|----|--------|
| A. Are you entitled to the Medicare levy exemption or reduction in the 2020 income year? If yes, please specify: _____ | | | |
| B. Did you and your spouse/dependants have private health insurance in the 2020 income year? <i>(If yes, please provide the annual statement received from your health fund)</i> | | | |
| C. Were you under 18 years old on 30 June 2020? | | | |
| D. Did you become an Australian tax resident at any time during the income year? | | | |
| E. Did you cease to be an Australian tax resident at any time during the income year? | | | |
| F. Did you make a non-deductible (non-concessional) personal super contribution? | | | |
| G. Do you have a HELP liability, Student Financial Supplement Loan debt, Student Start-Up Load debt or Trade Support Loan debt? | | | |
| H. Are you a working holiday maker in Australia on a 417 (working holiday) visa or 462 working holiday) visa? | | | |
| I. Did a trust or company distribute income to you in respect of which Family Trust Distribution Tax (FTDT) was paid by the trust or company? <i>(Please specify below)</i> | | | |
| J. Do you have a loan with a private company at 30 June 2020 or has such a loan amount been forgiven in the 2020 income year? Has a private company made a payment to you in the 2020 income year (other than a dividend)? <i>(Please specify below)</i> | | | |
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| K. Did you receive any benefit from an employee share acquisition scheme? | | | |
| L. Family Tax Benefit ('FTB'): | | | |
| <ul style="list-style-type: none"> Did you have care of a dependent child in the 2020 income year? – Names & DOBs required Name:- Date of Birth:- Name:- Date of Birth:- Name:- Date of Birth:- | | | |
| <ul style="list-style-type: none"> Did you or your spouse receive FTB through the Department of Human Services in the 2020 income year? | | | |
| Income Tests information | | | |
| <ul style="list-style-type: none"> Do you have any reportable fringe benefits amounts in the 2020 income year? | | | |
| <ul style="list-style-type: none"> Do you have any reportable employer superannuation contributions in the 2020 income year? | | | |
| <ul style="list-style-type: none"> Did you receive any tax-free government pensions in the 2020 income year? | | | |
| <ul style="list-style-type: none"> Did you receive any target foreign income in the 2020 income year? | | | |
| <ul style="list-style-type: none"> Did you have a net financial investment loss in the 2020 income year? | | | |
| <ul style="list-style-type: none"> Did you have a net rental property loss in the 2020 income year? | | | |
| <ul style="list-style-type: none"> Did you pay child support in the 2020 income year? | | | |
| <ul style="list-style-type: none"> Number of dependent children? | | | |

