

Personal Income Tax Return

Engagement Authorisation

- I/we instruct BHR Papalia to prepare my/our income tax return for the financial year ending _____
- I/we undertake to supply all information necessary to carry out such services, and will be responsible for the accuracy and completeness of such information.
- I/we understand that work will not be commenced until ALL information is received in order to complete the return.
- To notify us of any issues, discrepancies or grievances you may have as soon as they arise so that we have the chance to rectify them immediately.
- I/we understand that the Australian Taxation Office has the ability to check income declared against independent sources, this includes PAYG Payment Summary income, capital gains, interest received and dividends.
- I/we understand that deductions are self assessed and in the event of a Tax Office audit I/we will be able to substantiate the deductions claimed.
- BHR Papalia is authorized to communicate with my bankers, solicitors, finance companies and all government agencies such as the ATO to obtain such information as you require enabling you to carry out the above assignment.
- In accordance with CPA professional standards, we have received a copy of the Standard Terms of Engagement for BHR Papalia.

Fees & Payment Terms

- I/we understand that payment is required prior to lodgement of the tax return. Accepted payment methods include cash, cheque, money order, direct deposit or credit card (including over the phone authority).
- If I/we are unable to meet these payment conditions, alternative arrangements will be sought prior to our work being commenced.

Name:

Address:

Phone Number:

Email:

Signature:

Personal Income Tax Return Questionnaire

Please work through these questions and using the additional notes section attached, please provide additional details as necessary.

Introduction

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1. Have we done a Tax Return for you before? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you read and understood our Terms of Engagement? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Do you accept our Terms of Engagement? | <input type="checkbox"/> | <input type="checkbox"/> |

Income:

- | | Yes | No |
|---|--------------------------|--------------------------|
| 4. Did you receive income from employment or self-employment? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Did you receive any government benefit or pension? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Did you receive any interest or dividend income? | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Did you receive money from a Trust, Partnership or Managed Fund? | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Do you own any rental properties? | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Did you receive any income from overseas? | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Did you sell or dispose of any assets (e.g.: shares or property)? | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Did you receive income from any other source? | <input type="checkbox"/> | <input type="checkbox"/> |

Expenses

- | | Yes | No |
|--|--------------------------|--------------------------|
| 12. Do you have written evidence for all expense claims over \$300? | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Did you use your own car for work or business? | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Did you have any work related expenses? | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Did you pay interest on a loan used to buy an investment? | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Did you have a HECS/HELP debt? | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Did you make any gifts or donations? | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. Did you pay an income protection insurance premium? | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Did you buy any assets that might be subject to Capital Gains Tax? | <input type="checkbox"/> | <input type="checkbox"/> |

Tax Rebates

- | | Yes | No |
|---|--------------------------|--------------------------|
| 20. Do you have a Private Health Insurance Fund? | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. Were you married or in a de facto relationship at any time during the year? | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Do you have dependents? | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. Did you make any super contributions for yourself or your spouse? | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. Did you spend any time in a remote location? | <input type="checkbox"/> | <input type="checkbox"/> |
| 25. Did you spend more than \$2,120 (net of refunds) on medical bills? | <input type="checkbox"/> | <input type="checkbox"/> |

Other

- | | Yes | No |
|--|--------------------------|--------------------------|
| 26. Is there any other information we should be aware of? | <input type="checkbox"/> | <input type="checkbox"/> |
| 27. Can we use our secure email system to send your completed Income Tax Return to you for your signature? | <input type="checkbox"/> | <input type="checkbox"/> |

Please use the following section for further information regarding these questions and to provide more information where necessary.

Personal Income Tax Return Questionnaire

Additional Notes

Introduction

1. If we have not prepared a tax return for you before, or if your details have changed since last year, please provide the following?
 - a) **Name & Date of Birth**- Please give us your Full Name and Date of Birth:
 - b) **Contact Details**- Please give us your Telephone Number(s):
 - c) **Address**- Please give us your Email Address, Street Address and Postal Address (if different)
 - d) **Tax File Number**- Please give us your Tax File Number
 - e) **Bank Details** - The ATO will only pay refunds by EFT, please provide your Bank Account Name, BSB and Account Number:
 - f) Please write here any additional information you think we may need.

Income:

4. Did you receive income from employment or self-employment?
 - a) Describe your occupation and/or business:
 - b) **Employment**- Please supply a copy of all your PAYG Payment Summaries, other Salary Income and Termination Payment documents:
 - c) **Self-Employment**- If we are not preparing you financial statements for your business, please supply details of your business including all income earned and expense paid.
 - d) **Other**- supply details of any other income received from employment for which you don't have a PAYG summary. EG: Payments received for casual contract work.
 - e) Please write here any additional information you think we may need.
5. Did you receive any government benefit or pension?
 - a) Supply copies of all relevant documents.
 - b) Please write here any additional information you think we may need.

6. Did you receive any interest of dividend income?
 - a) Provide a copy of the Bank Interest Summary for each bank account or term deposit account or other source from which you earned interest.
 - b) Provide a copy of dividend statements showing the income you received for each share you owned during the year.
 - c) Please write here any additional information you think we may need.

7. Did you receive money from a Trust, Partnership or Managed Fund?
 - a) Unless we are preparing the financial accounts, please provide documents (e.g.: annual tax statements) showing details of the income you received from the Trust, Partnership or Managed Fund.
 - b) Provide details of any expenses you may have incurred in earning that income, e.g.: travel to accountant.
 - c) Please write here any additional information you think we may need.

8. Do you own any rental properties?
 - a) Provide details of income and expenses for each rental property you own.
 - b) Please write here any additional information you think we may need.

9. Did you receive any income from overseas?
 - a) Provide any documents or schedules giving details of any income you might have earned overseas, including any foreign tax you may have paid on it.
 - b) Or- write an explanation of the income you received and give amounts and dates.

 - c) Please write here any additional information you think we may need.

10. Did you sell or dispose of any assets (e.g.: shares or property)?
 - a) Provide documents giving details of the sale or disposal and its original cost and date or purchase:
 - b) Please write here any additional information you think we may need.

11. Did you receive income from any other source?

- a) Provide any documents or schedules that give details of any other income you might have received.
- b) Or, - provide an explanation of the income you received and give amounts and dates.

- c) Please write here any additional information you think we may need.

Expenses:

12. Do you have written evidence for all expense claims over \$300?

- a) The maximum you can claim each year without written evidence is \$300. Ensure you have written evidence for all expenses claimed in the following question

13. Did you use your own car for work or business?

- a) **Purchased-** If you purchased the car during the year provide a copy of all the purchase document including finance documents.
- b) **Kilometers Method-** If you have not kept a log book, estimate how many business kilometers you traveled and tell us the car make/model and size of engine.
- c) **Log Book Method-** If you kept a log book, provide a copy of the log book and a schedule of expenses you incurred on running the car.
- d) Please write here any additional information you think we may need.

14. Did you have any work related expenses?

- a) **Self-education expenses:** Write the nature and amount of the expenses here.
- b) **Work-related Clothing:** Write the nature and amount of the expenses here.
- c) **Home Office Expenses:** Write the nature and amount of the expenses here.
- d) If you work outside, describe the amount and nature of any expenses for sun protection equipment you have to incur.
- e) Describe the nature and amount of any work related expenses.
- f) Please attach copies of any documents you think we may need.

15. Did you pay interest on a loan used to buy an investment?
- a) Please attach copies of any documents you think we may need
16. Did you have a HECS/HELP debt?
- a) Provide a copy of your HECS/HELP debt statement if you think the amount differs from the ATO Prefill Report.
 - b) Please type here any additional information you think we may need.
17. Did you may any gifts or donations?
- a) Provide a copy of the receipts for all gifts or donations you made to a recognized charity.
 - b) Please write here any additional information you think we may need.
18. Did you pay an income protection insurance premium?
- a) Provide a copy of the insurance premium advice.
 - b) Please write here any additional information you think we may need.
19. Did you buy any assets that might be subject to Capital Gains Tax?
- a) If you purchased an asset expected to increase in value (property, shares, etc) provide the purchase documents and contract and invoices for any costs (e.g: legal)
 - b) Please write here any additional information you think we may need.

Tax Rebates:

20. Do you have a Private Health Insurance Fund?
- a) Provide a copy of the statement that your health fund(s) sent you after the end of the financial year.
 - b) Please write here any additional information you think we may need.

21. Were you married or in a de facto relationship at any time during the year?
- Enter your spouse's full name. If they were not your spouse for the full financial year give the dates they became and/or ceased to be your spouse.
 - If we are not preparing their tax return, please tell us their **Taxable Income** for the year.
22. Do you have dependents?
- What are the names, ages and occupations of each dependent.
23. Did you make any super contributions for yourself or your spouse?
- Provide details of all contributions you made to a super fund on behalf of yourself or your spouse. **Don't include contributions made by your employer.**
 - Please type here any additional information you think we may need.
24. Did you spend any time in a remote location?
- Explain where you were and the period(s) you were there.
25. Did you spend more than \$2,120 (net of refunds) on medical bills?
- Contact your Medical Fund and request an annual statement of claims by emailed to you. When you receive it mail a copy.
 - Log on Medicare website and download a tax statement of all claims you made for the past two years for each of your dependents and mail a copy.
 - Mail a detailed list of all other medical expenses you paid during the year for yourself and your family showing the total amount paid and any refunds you received.

Other:

26. Is there any other information we should be aware of?
- a) Tell us if there is anything you are not sure of or if there is anything else you think we should be aware of in preparing your tax return.

 - b) Mail any associated documents you think might be helpful to us in preparing your tax return.
27. Can we use our secure email system to send your completed Income Tax Return to you for your signature?
- a) How would you prefer us to send it to you?
 - By mail
 - I will collect
 - At an appointment to discuss

Thank you for taking the time to complete this questionnaire. Attaching all of the necessary documentation ensures we will be able to complete your tax return efficiently.
If you have any queries or concerns, please do not hesitate to contact us.