

TRJAN ACCOUNTING

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SURNAME

GIVEN NAMES.....

TAX FILE NO

ABN

YEAR

DATE OF BIRTH

OCCUPATION

CURRENT ADDRESS

.....

POSTAL ADDRESS

(If Different to above)

EMAIL ADDRESS

PH

MOBILE

BANK DETAILS: BSB: A/C:.....

RESIDENT OF AUSTRALIA FOR TAX PURPOSES Y/ N

DATE OF ARRIVAL IN AUST.

SPOUSE/PARTNER Y/N

IF YES: FULL NAME OF SPOUSE

DATE OF BIRTH OF SPOUSE

CHILDREN/S DETAILS:

NAME

DATE OF BIRTH

NAME

DATE OF BIRTH

NAME

DATE OF BIRTH

YEAR OF LAST TAX RETURN LODGED

DATE OF INTERVIEW

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INCOME INFORMATION

For all of the below it will be assumed as nil if left blank

PAYG PAYMENT SUMMARIES NUMBER EMAILED?
ALLOWANCES, CASUAL JOBS, JURY, CASH INCOME
EMPLOYER LUMP SUM PAYMENTS
EMPLOYMENT TERMINATION PAYMENTS
GOVERNMENT BENEFITS/PENSIONS
ANNUITIES OR SUPERANNUATION INCOME
SUPERANNUATION LUMP SUM PAYMENTS
PERSONAL SERVICES INCOME
INTEREST - IF YES AN INTEREST SCHEDULE TO BE COMPLETED
DIVIDENDS - IF YES A DIVIDEND SCHEDULE TO BE COMPLETED
EMPLOYEE SHARE SCHEMES
INCOME FROM PARTNERSHIP, TRUST OR AN ESTATE
- IF YES A DISTRIBUTION SCHEDULE TO BE COMPLETED
BUSINESS INCOME IF YES A BUSINESS SCHEDULE TO BE COMPLETED
GST REGISTERED
DEFERRED BUSINESS LOSS AMOUNT IF ANY \$
SALE OF ANY ASSETS – CAPITAL GAIN OR LOSS
-IF YES A CAPITAL GAIN SCHEDULE TO BE COMPLETED
FOREIGN INCOME
RENTAL INCOME -IF YES A RENTAL PROPERTY SCHEDULE TO BE COMPLETED

OTHER INCOME:
 INSURANCE PAYOUT
 INCOME FROM SICKNESS/INCOME PROTECTION
 LUMP SUM PAYMENTS RECEIVED
 OTHER

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DEDUCTIONS

With regard to all deductions please note that it is your responsibility to have all receipts for these deductions for substantiation purposes. You will need to keep all documents for a five-year period from preparation and lodgment date. To make a claim on M.V. work km's travelled the ATO requires a log book is to have been kept to justify those km's. A log book is also a requirement of the ATO's for any expense that you are claiming a work % on. I will discuss this with you in detail at the time of interview.

DO YOU HAVE A MOTOR VEHICLE THAT IS USED FOR WORK PURPOSES

Reason for use

Number of Km's travelled

DO YOU HAVE ANY ADDITIONAL WORK RELATED TRAVEL EXPENSES

Accommodation/Meals/Taxis etc

WORK CLOTHING

Laundry/Uniforms/Alterations/Protective Clothing/ Sunglasses/Sun Protection etc

WORK RELATED SELF EDUCATION

OTHER WORK RELATED EXPENSES

Union/Professional associations/ Tools/ Telephone/ Stationery/ Depreciation/ Home Office/ Seminars/ Meals/ Field Equipment/Other/Defence deductions to go over during interview

LOW VALUE POOL DEDUCTIONS

INTEREST DEDUCTIONS

INVESTMENT DEDUCTIONS

DONATIONS/SCHOOL BUILDING FUNDS/POLITICAL PARTIES

PRIOR YEAR TAX AGENT FEES

UPP OF FOREIGN ANNUITY/PENSION

PERSONAL SUPERANNUATION CONTRIBUTIONS

FUND NAME

ABN

MEMBER NO

Have you lodged your notice of intention to claim with you fund

INCOME PROTECTION INSURANCE

OTHER DEDUCTIONS

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REBATES/OFFSETS

SENIOR AUSTRALIAN TAX OFFSET
PENSIONER OFFSET
AUSTRALIAN SUPERANNUATION INCOME STREAM
PRIVATE HEALTH INSURANCE COVER REBATE TO BE CLAIMED
SPOUSE SUPERANNUATION CONTRIBUTION
ZONE REBATE
PARENT/ PARENT-IN-LAW AND INVALID RELATIVE
MATURE AGE WORKERS OFFSET

PRIVATE HOSPITAL INSURANCE

Do you have private health insurance

Fund

Membership No: ...

Spouse Income

PAYG INSTALMENTS

Have any prepayments of tax been made on your behalf

DO YOU HAVE A HELP/HECS DEBT Amount \$

ELECTRONIC LODGEMENT DECLARATION (INDIVIDUAL)

This declaration is to be completed where a taxpayer elects to use the Electronic Lodgment Service. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made; penalties may apply for failure to do so.

TAX FILE NUMBER

YEAR

NAME

SIGNED

I declare that all the information in the return, including the supplement to the income tax return and schedules if applicable are true and correct, and I have shown all my income for tax purposes, including net capital gains, from sources in and out of Australia for the year of income. I have all the necessary receipts and/or other records, or expect to obtain the necessary written evidence within a reasonable time of lodgment of this tax return to support my claims for deductions, a tax rebates and Family Tax Benefit. I authorize my tax agent to electronically transmit my income tax return and/or Family Tax Benefit tax claim or application for amendment.

IMPORTANT – The tax law imposes heavy penalties for giving false or misleading information