



PROFIT FIRST ACCOUNTING

Learn To Pay Yourself and Make Profit From Day 1!

TAX QUESTIONNAIRE FORM

DO YOU HAVE A SPOUSE? *

If yes, please answer the ffg:

SPOUSE FULL NAME:

SPOUSE DATE OF BIRTH:

SPOUSE TAXABLE INCOME:

(based on the above financial year)

DID YOU JUST HAVE 1 JOB THIS FINANCIAL YEAR? *

WHAT WAS YOUR MAIN OCCUPATION? *

(based on the above financial year)

DID YOU USE YOUR MOBILE PHONE FOR WORK? *

(based on the above financial year) If yes, please answer the ffg:

WHAT WAS THE COST PER MONTH?:

(until the last week of March based on the above financial year)

WHAT'S THE PERCENTAGE OF USAGE?:

FROM 25 MARCH HOW MANY HOURS OF WORK DID YOU DO FROM HOME? *

(based on the above financial year)

DID YOU USE YOUR INTERNET FOR WORK? *

(based on the above financial year) If yes, please answer the ffg:

WHAT WAS THE COST PER MONTH?:

(until the last week of March based on the above financial year)

WHAT'S THE PERCENTAGE OF USAGE?:

FROM 25 MARCH HOW MANY HOURS OF WORK DID YOU DO FROM HOME? *

(based on the above financial year)

DID YOU USE A PERSONAL VEHICLE FOR WORK PURPOSES? *

(NB: work purposes EXCLUDE any travel to and from your primary place of employment / include travel for meetings, visiting clients, attending training, picking up mail.)

IF YES, HOW MANY KM FOR THE YEAR? *

DID YOU RUN A LOGBOOK? *

If yes, please upload the logbook on the task checklist and provide details of car expenses (e.g. car insurance/registration / fuel/repairs & servicing costs)

EXCLUDING TRAVEL TO AND FROM WORK, DID YOU INCUR ANY PARKING / PUBLIC TRANSPORT OR TOLLS COSTS? IF YES, WHAT'S THE DESCRIPTION AND COST? *

DID YOU HAVE TO BUY ANYTHING FOR YOUR HOME OFFICE OR WORK OFFICE?

IF YES, WHAT'S THE DESCRIPTION AND COST?*

(stationery, pens, diary, printer ink, subscriptions, software for work purposes are common examples)

DID YOU PAY FOR ANY TRAINING OR EDUCATION COSTS THAT WERE NOT COVERED BY YOUR EMPLOYER? IF YES, WHAT'S THE DESCRIPTION AND COST?*

(Courses must be specifically related to your current employment and cannot be generic in nature and the course cannot be claimed to obtain new employment)

DID YOU BUY ANY UNIFORM, PROTECTIVE, OR HIGH VISIBILITY CLOTHING? IF YES, WHAT'S THE DESCRIPTION AND COST? *

(NB: Uniforms must have a visible work logo, work clothing must be specific to your work duties and not generic in nature (i.e., business shoes, shirts, generic clothing that can be worn in other places i.e., non-protective work pants. If required to work outside, you can claim sunscreen and protective hats)

DID YOU PURCHASE ANY EQUIPMENT OVER THE VALUE OF \$300 ESPECIALLY ANY OFFICE SET-UP REQUIREMENTS FOR COVID WORK FROM HOME? IF YES, WHAT'S THE DESCRIPTION AND COST?*

DID YOU PAY FOR ANY UNION FEES FOR YOUR EMPLOYMENT? IF SO, PLEASE PROVIDE THE AMOUNT*

DID YOU MAKE ANY DONATIONS? IF YES, WHAT'S THE DESCRIPTION AND COST? *

OUTSIDE OF YOUR SUPERANNUATION FUND, HAVE YOU PAID ANY INCOME PROTECTION PREMIUMS FOR THE YEAR? IF YES, PLEASE PROVIDE AMOUNTS*

OTHER THAN ANY ITEMS LISTED ABOVE, ARE THERE ANY OTHER EXPENSES YOU WOULD LIKE TO CLAIM? IF SO, PLEASE PROVIDE DETAILS BELOW*

PFA Disclaimer:

The attached checklist is to assist you in maximising the potential deductions available to you in your tax return and it's not designed to be an exhaustive list of all possible deductions in which you could claim.

Date: