

2015 PERSONAL INCOME TAX WORKSHEET

TAXPAYER DETAILS

Title		Tax File Number	
Surname		Date of Birth	
First Name		Best Contact Number ()	
Other Name/s		Or Mobile Telephone	
Occupation (not Title)			
Residential Address		Postal Address	
Suburb		Suburb	
State		Postcode	
E-mail Address			
Spouse (Full Name)	Date of Birth	Tax File Number	Taxable Income

(Note: If you remarried during the year, then please provide as much specific relevant information as possible.)

Dependent Children (Full Name) under 25 years during 2014/15	Date of Birth	Tax File Number	Taxable Income

TAX REFUND BY ELECTRONIC FUNDS TRANSFER (EFT) – MUST BE COMPLETED!!! (NO CHEQUES WILL BE ISSUED)

BSB Number (6 digits)	-	Account Number
Account Name		

AUTHORITY / PRIVACY DECLARATION

Please note: We are unable to prepare income tax returns for clients who have not completed this authority.

I hereby authorise KMS Financial Solutions to prepare my income tax return for the year ended 30 June 2015 from the information that I have supplied and in accordance with my instructions. For this engagement I agree to the basis of your fees as set out below. I have read the 2015 Personal Income Worksheet that applies to my 2015 Income Tax Return. I also authorise the obtaining or verification of tax-related details from my financial advisor and/or my financial institutions should this be required for the purpose of preparing my 2015 income tax return.

Signature

TERMS OF ENGAGEMENT

Our Terms of Engagement are detailed on our website at <http://www.kmsfinancial.com.au/about-kms/terms-of-engagement.html>. You are encouraged to read this before signing.

I confirm that I agree with the Terms of Engagement as outlined in the KMS Terms of Engagement Brochure.

Signature

Date

SALARIES & WAGES (including ETP payments)

Received from	Gross Earnings	Tax Deducted

We need a copy of your PAYG payment summary or statement of income including ETP statements.

ALLOWANCES / GIFTS / HONORARIUMS / DIRECTORS FEES / CASUAL EARNINGS

Received from	Gross Earnings	Tax Deducted

We need a copy of your payment summary or statement of allowances.

GOVERNMENT PENSIONS & ALLOWANCES (e.g. Age Pension, Newstart, Austudy, Youth Allowance, etc.)

Received from	Gross Earnings	Tax Deducted

We need a copy of your Payment Summary or statement of allowances.

OTHER AUSTRALIAN PENSIONS & ANNUITIES (incl. Superannuation Pensions)

Received from	Gross Earnings	Tax Deducted

We need a copy of your Payment Summary or statement of allowances, including details of tax offset / UPP amounts.

INTEREST INCOME

Name of Financial Institution	Account Number	Your Share of Interest	Your Share of TFN Tax Deducted

Please ensure you include all interest credited to your account for the 2014/15 year.

DIVIDENDS

Name of Company	Date Received	Your Share of Unfranked Dividends	Your Share of Franked Dividends	Your Share of Imputation Credits	Your Share of TFN Tax Deducted

Please ensure you include all dividends including dividend re-investment. Most companies pay two dividends each year.

Did you own or have an interest in assets located outside Australia that had a total value of AUD\$50,000 or more at any time during 2014/15?

YES NO

OTHER INVESTMENT INCOME - Trusts, Stapled Securities, Managed Funds (e.g. BT, Colonial, IOOF, MLC, Skandia, etc)

1. Provide copies of your **Annual Tax Statements** (for year ending 30 June 2015) from public fund investments.
2. If you are a beneficiary of a private trust, provide a copy of the distribution statement from the trust tax return.

CAPITAL GAINS TAX EVENTS – This question must be answered

Did you dispose of any assets during the 2014/15 tax year?

YES NO

(If you answer "yes" to this question, please complete our 2015 Investment Worksheet.)

WORK RELATED TAX DEDUCTIONS

Generally no tax deduction is allowed in respect of work related expenses unless the claim can be substantiated by documentary evidence such as receipts and invoices. If your total work related expense claims are under \$300, receipts are not required.

It is necessary to make an apportionment between work and private use for expenses. You should only claim the work-related component. This is the amount that you should show below.

MOTOR VEHICLE EXPENSES		Please use our motor vehicle worksheet	
TRAVEL EXPENSES	Amount	Description	
Road Tolls			
Car Hire			
Airfares			
Taxis			
Accommodation			
Parking			
Public Transport			
Meals			
Other Travel Expenses			
CLOTHING & UNIFORMS			
Purchases			
Dry Cleaning			
Home Laundry			
Repairs & Alterations			
Other Expenses			
SELF-EDUCATION EXPENSES	Amount	Description	
Course Fees (but not HECS)			
Textbooks & Course Notes			
Travel expenses			
OTHER WORK RELATED EXPENSES			
Union Fees			
Seminars & Conferences			
Books & Journals			
Postage & Stationery			
Income Protection Insurance			
Sun Protection Expenses			
Tools & Materials			
Telephone			
Internet Service Provider Charges			
Computer items over \$300			
Software items over \$300			
Other equipment items over \$300			
Other Expenses			
<u>Home Office Expenses</u>			
Gas & Electricity			
Contents Insurance			
Cleaning			

EQUIPMENT PURCHASES (i.e. Items costing more than \$300 e.g. Computer Hardware & Computer Software)

Date Purchased	Description	Total Price	Business Usage %	Self Education	Work Related
			%	<input type="checkbox"/>	<input type="checkbox"/>
			%	<input type="checkbox"/>	<input type="checkbox"/>
			%	<input type="checkbox"/>	<input type="checkbox"/>

GIFTS TO CHARITIES, etc. (Joint donations must be apportioned. Receipts must be marked "tax deductible" & include your name/s)

Name of Charity, Aid or Cultural Fund	Date Paid	Donation Amount	Your Claim

TAX AGENT FEES (for tax agent fees actually paid during 2014/15 – you can include postage & travel costs)

Name of Tax Agent	Amount

PRIVATE HEALTH INSURANCE DETAILS

Provide us with a copy of your annual statement from your private health insurance fund.

Health Fund ID	Membership Number	Period Covered	Premium You Have Paid	Government Rebate Received	Benefit Code

MEDICAL EXPENSES TAX OFFSET (ELIGIBLE IF CLAIMED IN BOTH 2013 & 2014 INCOME YEARS)

A medical expense rebate is allowed on certain medical, dental, optical and pharmaceutical expenditure.

Gross Medical Expenses	Refunds from Medicare etc.	Net Medical Expenses

CHILD SUPPORT PAID

Description and date	Amount

Please note, KMS Financial Solutions relies on the information you provide us to prepare your tax return. It is the responsibility of the taxpayer to ensure that all deductions can be substantiated if requested by the Australian Taxation Office.

KMS Financial Solutions Policy on Fees & Charges

We aim to provide a cost-effective tax preparation service and to enable clients to consider in advance our billing policies. Our professional fees range from \$100/hr to \$360/hr (excl GST) depending on the level of expertise required. There is a minimum preparation fee for you Income Tax Return of \$200 (excl GST). **Completing our Worksheets can help reduce your costs.**

Deadline for tax returns

For Tax Agents, the ATO allows generous automatic extensions beyond the normal lodgment deadline of **31 October** for individual tax returns. However, to avoid the possibility late lodgment penalties, you need to submit your information to us by **28 February 2016**. Please contact us if you need an extension beyond this time.

Storage of Tax Records

It is your responsibility to maintain your own taxation records for a period of five years **after** the assessment of a tax return.

Rental Property Information

PROPERTY DETAILS

Address of Rental Property:			
Date Property Purchased:		Date Property First Earned Rental Income:	
Number of Weeks Available For Rent:		Date Property Built:	
Ownership Details:	<input type="checkbox"/> In Your Name <input type="checkbox"/> In Joint Names (please supply details)		

INCOME

Gross Rent:	\$
Other Rental Income:	\$

EXPENSES

Advertising for Tenants:	\$	Body Corporate Fees:	\$
Borrowing Expenses:	\$	Cleaning:	\$
Council Rates:	\$	Gardening / Lawn mowing:	\$
Insurance:	\$	Interest:	\$
Land Tax:	\$	Legal Fees:	\$
Pest Control:	\$	Property Management Fees/Commission:	\$
Repairs & Maintenance:	\$	Stationery, Telephone & Postage:	\$
Travel:	\$	Water Charges:	\$
Other: _____	\$	Other: _____	\$

DEPRECIABLE ITEMS

ITEM	DATE PURCHASED	COST
		\$
		\$
		\$
		\$

PROPERTY PURCHASE/IMPROVEMENTS

ITEM	DATE	COST
		\$
		\$
		\$

Motor Vehicle Information

Cents per Kilometre Method (Max 5,000kms) _____ Work kms travelled

Where travel has exceeded 5,000kms please include details of all motor vehicles expenses incurred and your business usage percentage (determined via the use of a log book over a continuous period of 12 weeks). If this is applicable to you please fill out work sheet below.

Period Covered:	
Registration No:	
Vehicle Make & Model:	
Owner of Vehicle:	
Driver of Vehicle:	
Total Km Travelled in Financial Year:	
Business Km in Log Book Period:	
Total Km in Log Book Period:	
Your Calculation of Business Use %:	
Date Purchased:	
<input type="checkbox"/> Leased	<input type="checkbox"/> Hire Purchase
<input type="checkbox"/> Paid Cash	

RUNNING COSTS	TOTAL FOR YEAR	MONTHLY PAYMENTS
Fuel:	\$	Please e-mail, fax or post to our office a copy of your Hire Purchase / Lease Agreement (if you haven't already).
Registration:	\$	
Insurance:	\$	
Repairs & Maintenance:	\$	
Lease Payments:	\$	\$
HP Payments:	\$	\$
Interest Paid:	\$	
RACV Fees:	\$	
Parking:	\$	
Tolls:	\$	