#### STEPHEN LE COUILLIARD & ASSOCIATES

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PUBLIC ACCOUNTANTS

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30<sup>th</sup> June 2015

Dear Valued Client,

Re: 2015 TAX YEAR

Tax time is upon us once again, it seems to come around quicker and quicker each year.

As always we like to help our valued clients out where possible, therefore we have attached your '2015 Tax Return Guide' to assist you in organising and gathering the required information to allow our friendly staff to complete your income tax return. Please make sure that you remember to include all PAYG Payment Summaries received throughout the financial year. Please detail all income & deductions either on the attached guide or alternatively attach a hand written or word processed summary.

We can attend to your income tax obligations through these options:-

- You can forward your information to this office via **Tax by Email/Tax By Mail/ Tax by Fax**, we endeavour to process these returns as soon as possible.
- You are welcome to make an appointment **Tax by Interview** to see a client manager.

#### **Options:-**

- Tax By E-Mail -E-mail your details through to this office on stephen@bestaccountants.com.au
- Tax By Mail Please forward all your documents including the attached checklist to the below address: -

#### Stephen Le Couilliard & Associates PO Box 43 Narre Warren VIC 3805

- Tax By Fax: Fax your documents including the attached check list to fax (03) 9796 6711
- **Tax By Interview** For an interview with one of our client managers to complete your income tax return phone on (03) 9704 7661

We will thoroughly check the information you have provided and if required your assigned Client Manager will contact you.

#### Payment of Fees:

Payment is required at time of consultation by cash/credit card/fees paid out of refund

Please remember to refer to our **WEBSITE** located at <u>www.bestaccountants.com.au</u> for valuable tax information & tips. We have also posted the attached '2015 Tax Return Guide' onto our website, for you to pass on to your family and friends.

We would like to take this opportunity to thank you for your loyalty and support over the years and look forward to continuing our professional relationship well into the future.

Yours faithfully,

#### STEPHEN LE COUILLIARD & ASSOCIATES





# 2015 individual income tax return interview checklist

Tax File Number:		ABN:
·		
Mr/Mrs/Ms/Miss:		
Name changed since	e last return? YES/NO	
If YES, previous nan	ne:	
Postal Address:		
Postal address chan	ged from last tax return? YES/NO	
Address:		
Date of birth:		
Telephone: (H)	(W)	(M)
Email:		
Occupation:		
Spouse details (if ap	plicable):	
Do you want to use i	Electronic Funds Transfer? YES/NC	)
If YES, provide bank	details BSB: Ad	count Number:
Account name:		

Notes:

#### Please circle YES or NO for each of the items listed below:

## **INCOME** – Please provide evidence

1.	Salary or wages	YES/NO
2.	Allowances, earnings, tips, director's fees etc	YES/NO
3.	Employer lump sum payments	YES/NO
<b>4</b> .	Employment termination payments	YES/NO
5.	Australian Government allowances and payments like Newstart, youth allowance and Austudy payments	YES/NO
6.	Australian Government pensions and allowances	YES/NO
7.	Australian annuities and superannuation income streams	YES/NO
8.	Australian superannuation lump sum payments	YES/NO
9.	Attributed personal services income	YES/NO
10.	Gross Interest	YES/NO
11.	Dividends	YES/NO
12.	Employee share schemes	YES/NO
13.	Distributions from partnerships and/or trusts	YES/NO
14.	Personal services income (PSI)	YES/NO
15.	Net income or loss from business (as a sole trader)	YES/NO
16.	Deferred non-commercial business losses	YES/NO
17.	Net farm management deposits or repayments	YES/NO
18.	Capital gains	YES/NO
19.	Foreign entities:	
	Direct or indirect interests in controlled foreign company	YES/NO
	Transfer of property or services to a non-resident trust	YES/NO
20.	Foreign source income (including foreign pensions) and foreign assets or property	YES/NO
21.	Rent	YES/NO
22.	Bonuses from life insurance companies or friendly societies	YES/NO
23.	Forestry managed investment scheme income	YES/NO
24.	Other income (please specify below)	YES/NO

# **DEDUCTIONS – Please provide evidence**

## D1. Work related car expenses

<ul> <li>cents per kilometer method (up to a maximum of 5,000 kms)</li> </ul>	YES/NO
- log book method	YES/NO
- one-third of actual expenses method	YES/NO
12% of actual cost method	YES/NO
D2. Work related travel expenses	
Employee domestic travel with reasonable allowance	YES/NO
If the claim is more than the reasonable allowance rate, do you have receipts for your expenses?	YES/NO
Overseas travel with reasonable allowance	YES/NO
- Do you have receipts for accommodation expenses?	YES/NO
<ul> <li>If travel is for 6 or more nights in a row, do you have travel records? (e.g. a travel diary)</li> </ul>	YES/NO
Employee without a reasonable travel allowance	YES/NO
Did you incur and have receipts for airfares?	YES/NO
Did you incur and have receipts for accommodation?	YES/NO
Do you have receipts for hire cars (if applicable)?	YES/NO
Did you incur and have receipts for meals and incidental expenses?	YES/NO
Do you have any other travel expenses?	YES/NO
Other work-related travel expenses (e.g., a borrowed car)(please specify)	YES/NO
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)	YES/NO

## D4. Work related self-education expenses

Course taken at educational institution:

- union fees	YES/NO
- course fees	YES/NO
- books, stationery	YES/NO
- depreciation	YES/NO
- travel	YES/NO
- other (please specify)	YES/NO
D5. Other work related expenses	•
Home office expenses	YES/NO
Computer and software	YES/NO
Telephone/mobile phone	YES/NO
Tools and equipment	YES/NO
Subscriptions and union fees	YES/NO
Journals/periodicals	YES/NO
Depreciation	YES/NO
Sun protection products (i.e., sunscreen and sunglasses)	YES/NO
Seminars and courses not at an educational institution:	
- course fees	YES/NO
- travel	YES/NO
- other (please specify)	YES/NO
Any other work related deductions (please specify)	YES/NO
· · · · · · · · · · · · · · · · · · ·	
Other types of deductions	
D6. Low value pool deductions	YES/NO
D7. Interest deductions	YES/NO
D8. Dividend deductions	YES/NO
D9. Gifts or donations	YES/NO
D10. Cost of managing tax affairs	YES/NO
D11. Deductible amount of undeducted purchase price of a foreign pension or annuity	
•	

## Other types of deductions (continued)

	, ,	
D12.	Personal superannuation contributions	YES/NO
	Full name of fund:	
	Account no:	
	Fund ABN: Fund TFN:	
	Do you pass the 10% test? Income from employment is 10% or less of total income	YES/NO
	Have you provided the fund a notice of intention to deduct the contribution?	YES/NO
	Has this notice been acknowledged by the fund?	YES/NO
D13.	Deduction for project pool	YES/NO
D14.	Forestry managed investment scheme deduction	YES/NO
D15.	Other deductions (please specify)	YES/NO
L1. T	ax losses of earlier income years	YES/NO
Tax	x offsets/rebates — Please provide evidence	
T1.	Are you a senior Australian or a pensioner	YES/NO
T2.	Did you receive an Australian superannuation income stream?	YES/NO
T3.	Did you make superannuation contributions on behalf of your spouse?	YES/NO
T4.	Did you live in a remote area of Australia or serve overseas with the Australian defence force or the UN armed forces in 2015?	YES/NO
T5.	Did you have net medical expenses in 2015?	
10.		120/110
	If so, do these medical expenses include expenses relating to disability aids, attendant care or aged care expenses?	YES/NÖ
	Did you claim for NMETO in 2013 and 2014	YES/NO
T6.	Did you maintain a dependant who is unable to work due to invalidity or carer	
	obligations?	YES/NO
T7.	Are you entitled to claim the landcare and water facility tax offset?	YES/NO
T8.	Other non-refundable tax offsets (please specify)	YES/NO
T9.	Other refundable tax offsets (please specify)	YES/NO

## **Other relevant information**

Α.	Are you entitled to the Medicare levy exemption or reduction in 2015?	YES/NO
	(If yes, please specify):	************
В.	Did you have private health insurance in 2015?(If yes, please provide the annual statement received from your health fund)	YES/NO
C.	Were you under the age of 18 on 30 June 2015?	YES/NO
D.	Did you become an Australian tax resident at any time during the 2015 income year?	.YES/NO
E.	Did you cease to be an Australian tax resident at any time during the 2015 income year?	.YES/NO
F.	Did you make a non-deductible (non-concessional) personal super contribution?	.YES/NO
G.	Do you have a HECS/HELP liability or a student financial supplement loan debt?	.YES/NO
l.	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?	
J.	Do you have a loan with a private company or have such a loan amount forgiven? (If yes, please specify) – (reviewer consider if deemed dividend in year under Division 7A)	YES/NO
K.	Did you receive any benefit from an employee share acquisition scheme?	.YES/NO
L.	Family Tax Benefit ('FTB'):	
	Did you have care of a dependent child in 2015?	.YES/NO
	- Did you or your spouse receive FTB through the DHS in 2015?	.YES/NO
M.	Income tests information:	
	Do you have any Total reportable fringe benefits amounts in 2015?	.YES/NO
	Do you have any Reportable employer superannuation contributions in 2015?	.YES/NO
	Did you receive any tax-free government pensions in 2015?	.YES/NO
	Did you receive any target foreign income in 2015?	.YES/NO
	Did you have a net financial investment loss in 2015?	.YES/NO
	Did you have a net rental property loss in 2015?	.YES/NO
	Did you pay child support in 2015?	.YES/NO
	Number of dependent children:	

N.	S	pouse details (if applicable)
	-	Did you have a spouse for the full year from 1 July 2014 to 30 June 2015?YES/NO
		If you had a spouse for only part of the income year, please specify the dates between 1 July 2014 to 30 June 2015 when you had a spouse:
		From / to / to / /
	_	What was your spouse's taxable income for the 2015 income year?\$
	-	Does your spouse have a share of trust income on which the trustee is assessed under section 98 that has not been included in your spouse's taxable income?YES/NO
	-	Did a trust or company distribute income to your spouse in respect of which family trust distribution tax was paid by the trust or company for the 2015 income year?YES/NO
	-	Did your spouse have any reportable fringe benefits amounts for the 2015 income year?YES/NO
		Did your spouse receive any Australian Government pensions or allowances (not including exempt pension income) in the 2015 income year?YES/NO
	_	Did your spouse receive any exempt pension income in the 2015 income year?YES/NO
	_	Does your spouse have any reportable super contributions for the 2015 income year?YES/NO
	-	Did your spouse receive any tax-free government pensions paid under the <i>Military</i> Rehabilitation and Compensation Act 2004?YES/NO
	_	Did your spouse receive any 'target foreign income' in the 2015 income year?YES/NO
	_	Did your spouse have a total net investment loss (i.e., the total of any financial investment loss and a rental property loss) for the 2015 income year?YES/NO
	_	Did your spouse pay child support during the 2015 income year?YES/NO
	_	If your spouse is 55 to 59 years old, did they receive a superannuation lump sum (other than a death benefit) during the 2015 income year which included a taxed element that does not exceed their low rate cap?  YES/NO
Dat	ed	the2020
Sig	nat	ure of taxpayer:
Nar	ne	(print):

Gross	inter	oet W	orke	hoof
GIUSS		25L T		

	Gross int	erest Worksheet		
Taxpayer's name				<del></del>
Tax file number				·
Year ended	- 100			
Address	··p-			
			-	
<ol> <li>Did you receive</li> </ol>	any interest during 201	5 income year?		YES/NO
questionnaire a	ot have to complete the rand <b>no</b> amount gets shown ome tax return form.			
Please provide accounts in you	details of any interest re ur name only:	ceived for bank		
Bank/Finance Institution	Account number	Interest	TFN withholding	
and the second s				
	Total			
you should declare the in is processed, a tax liabilit have been withheld, will r		hen your tax return tax that should	dada ya	VEORIO
3. Did you receive	e any interest in joint nam	nes? If yes, then provide	e details:	YES/NO
Bank/Finance Institution	Account number	Share of interest	TFN withholding	

Total

#### **Dividend Worksheet**

Taxpayer's name	
Tax file number	
Year ended	
Address	

Unfranked Dividends	Franked amount of dividend <sup>0</sup>	Franking Credits <sup>®</sup>	TFN withholding amount
i			
			\$
	Dividends	Dividends amount of dividend	Dividends amount of dividend Credits e

### **Rental Property Worksheet**

Taxpayer's name		
Tax file number		
Year ended		
Address of property		
Date that first income producing://	/	
Number of weeks property rented:	weeks	
Was there any private use of the property?		YES/N
If <b>yes</b> , what percentage was the private use throug	ghout the year of income:	%
Note: The ATO will generally calculate the percentage	Days available for pr	ivate use
Note. The ATO will generally calculate the percentage	as follows. 365	
Income		
Gross rental income	•	\$
Other rental-related income		\$
Total income		\$
Less: rental property expenses		
Interest on property loan	\$	
Building write off	\$	
(2.5% x \$ )		
Advertising	\$	
Agent inspection fees	\$	
Bank charges	\$	
Borrowing expenses	\$	
Cleaning	\$	
Council Rates	\$	
Depreciation	\$	
Insurance	\$	
Land Tax	\$	
Pest control	<b>\$</b>	
Postage & sundries	\$	
Travel expenses	\$	
Water Rates	\$	
Gardening/mowing	\$	
Repair & Maintenance	\$	
Purchase of assets	\$	
Rental property expenses	\$	\$
Less: private use (Total rental expenses x private use percentage)		- \$
Net rental income/loss		\$

#### STEPHEN LE COUILLIARD & ASSOCIATES

Presently or in the near future?

## 2015 FINANCIAL HEALTH CHECK Clients Name: Telephone: Email: As part of our commitment to ensuring your financial wellbeing we can give you assistance if you complete the checklist below: Please tick "yes" or "no" and write answers in Notes where relevant Yes No **Notes** Do you have tax deductible Income Protection Insurance? Income Protection Insurance covers you 24 hours in a day, at work or home, even on your holidays. Pay you a wage if you become ill or unable to work, and unlike worker compensation it only covers you at work. Do you have life insurance or Trauma Insurance? Do you have a home mortgage? IF YES - how many years to go? And what's current interest rate? AND If NO - Do you plan on purchasing a new home in the near future? Do you have a car loan/lease/Hire Purchase? IF YES - how many years to go? And what's current interest rate. AND If NO Do you plan on purchasing a new car in the near future? Are you interested in minimising your tax via negative gearing or salary sacrifice? When do you plan on retiring? Within 6 months 6 months to 2 years 2 years to 5 years 5 years and over Do you have superannuation? If YES, are you happy with its performance? Have you roll-over all of your super into one? Do you have a Will (both private and business)? Are you a Business Owner? Turning over or potential to turn over more than \$20,000 pa Taxable Income for 2015 of \$180,000 and over? Max tax rate for 2015 Are you a Rental Property Investor?