

MGAA 2024 individual income tax return questionnaire

Please circle **YES** or **NO** for each of the items listed below and provide relevant details (if known) where prompted.

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
4. Employment termination payments	YES/NO
5. Australian Government allowances and payments like Newstart, youth allowance and austudy payment	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 (sale of shares, property, managed investments or Crypto currency)	YES/NO
19. Foreign entities:	





Direct or indirect interests in a 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
Note: if you have received payments from <u>Centrelink or from Services Australia (Please specify)</u>	
DEDUCTIONS — Please provide evidence	
D1. Work related car expenses	
Home to work travel is personal and not claimable. Car expenses can be claimed for travel between work location, travel to and from client locations, if you are required to carry heavy goods or as itinerant worker.	
 cents per kilometre method (up to a maximum of 5,000 kms) with diary evidence 	YES/NO
logbook method with logbook evidence + all expense receipts	YES/NO
 Car depreciation value limited at \$68,108 	
D2. Work related travel expenses	
Employee domestic travel with reasonable allowance	YES/NO
 Need diary evidence of travel and expenses. If the claim is more than the reasonable allowance rat you have receipts for your expenses? 	
Overseas travel with reasonable allowance	YES/NO
 Do you have receipts for accommodation expenses? 	YES/NO
 Do you have receipts for accommodation expenses? If travel is for 6 or more nights in a row, do you have travel records? (e.g. a travel diary) 	
	YES/NO
— If travel is for 6 or more nights in a row, do you have travel records? (e.g. a travel diary)	YES/NO YES/NO
If travel is for 6 or more nights in a row, do you have travel records? (e.g. a travel diary) Employee without a reasonable travel allowance	YES/NO YES/NO YES/NO



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 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/bike)(please specify)	
D3. Work related uniform and other clothing expenses	
Protective clothing (boots, hats)	YES/NO
Occupation specific clothing	YES/NO
Non-compulsory uniform	YES/NO
Compulsory uniform (logo or otherwise distinct uniform)	YES/NO
Conventional clothing	YES/NO
Laundry expenses (\$1 per wash if you wash separately & others \$0.50 per wash)	YES/NO
Dry cleaning expenses	YES/NO
Other claims such as mending/repairs, etc (please specify)	
D4. Work related self-education expenses	
You may be required to prove direct co-relation between course and work. Do you have employer or other notes to support co-relation?	• •
Course taken at educational institution:	
– union fees	
– course fees	YES/NO
books, stationery	YES/NO
– depreciation	YES/NO
– travel	YES/NO
other (please specify)	YES/NO



D5. Other work related expenses

L1. Tax losses of earlier income years	
D15. Other deductions: Including Income Protection Insurance (please specify)	
D14. Forestry managed investment scheme deduction	YES/NO
D13. Deduction for project pool	YES/NO
If yes, please provide an acknowledgement of your Notice of Intent to Claim from the so	uperfund
D12. Personal superannuation contributions	YES/NO
D11. Deductible amount of undeducted purchase price of a foreign pension or annuity	YES/NO
D10. Cost of managing tax affairs (including audit insurance fee)	YES/NO
D9. Gifts or donations	YES/NO
D8. Dividend deductions	YES/NO
D7. Interest deductions	YES/NO
D6. Low value pool deduction.	YES/NO
Other types of deductions	
Any other work-related deductions (please specify)	YES/NC
Sun protection products (i.e., sunscreen and sunglasses)	
Depreciation (need diary evidence to support %age use for work)	
Overtime meal costs (if allowance received, limited to \$33.25 per meal without receipts)	
Journals/periodicals	·
Subscriptions and union fees	•
Tools and equipment	
Telephone/mobile phone (need diary evidence to support %age use for work)	
Computer and software (need diary evidence to support %age use for work)	YES/NC
Home office expenses (need diary evidence to support hours per day/week. Rate 67c/hr)	YES/NC
D5. Other work related expenses	





Tax offsets/rebates -	Please provide evidence
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Tu	A OTISCES/TCDates Please provide evidence	
T1.	Are you a senior Australian or 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 2024?	YES/NO
T5.	Did you maintain an invalid or carer dependant including your spouse, parent, Parent-in-law, your or your spouse's child, brother or sister aged over 16 years old?	YES/NO
T6.	Are you entitled to claim the landcare and water facility tax offset?	YES/NO
T7.	Other non-refundable tax offsets (please specify)	YES/NO
T8.	Other refundable tax offsets (please specify)	YES/NO
Other relevant information		
ivied	dicare levy and Medicare levy surcharge	
	Are you entitled to the Medicare levy exemption or reduction in 2024?vant if you are on student or other temporary visa and do not have Medicare Card):	YES/NO
	For the entire 2024 income year, were you and all of your dependants uding your spouse) covered by the appropriate private health insurance hospital cover?	YES/NO
Priva	ate health insurance policy details	
Do y	ou have the details of your private health insurance policy details	YES/NO
If YES	5 – please provide tax statements from private health insurer.	
Adju	ustments	
A1: V	Were you under the age of 18 on 30 June 2024?	YES/NO
A2: [Did you become an Australian tax resident at any time during the 2024 income year?	YES/NO
A2: [Did you cease to be an Australian tax resident at any time during the 2024 income year?	YES/NO
A3: E	Did you make a non-deductible (non-concessional) personal super contribution in 2024?	YES/NO
A4: [Did a trust or company distribute income to you in respect of which family trust	VEC/NO





Income tests information

IT1: Do you have any total reportable fringe benefits amounts in 2024?	YES/NO
IT2: Do you have any reportable employer superannuation contributions in 2024?	YES/NO
IT3: Did you receive any tax-free government pensions in 2024?	YES/NO
IT4: Did you receive any target foreign income in 2024?	YES/NO
IT5: Did you have a net financial investment loss in 2024?	YES/NO
IT6: Did you have a net rental property loss in 2024?	YES/NO
IT7: Did you pay child support in 2024?	YES/NO
IT8: Do you have dependent children in 2024?	YES/NO
If yes, how many?	
Spouse details – married or <i>de facto</i> (including same sex)	
1. Did you have a spouse for the full year from 1 July 2023 to 30 June 2024?	YES/NO
 If you had a spouse for only part of the income year, please specify the dates betwe 30 June 2024 when you had a spouse: 	en 1 July 2023 to
From/ to/	
2. Did your spouse die during the 2024 income tax year?	YES/NO
3. What is your spouse's name and date of birth? (If you had more than one spouse during 2 name of your spouse on 30 June 2024 or your last spouse)	:024, provide the
Name:	
DOB:	
4. Did your spouse (named above) have taxable income for the 2024 income year?	YES/NO
If yes, what was the amount? \$	
5. Did your spouse have a share of trust income on which the trustee is assessed under? S.98 of the ITAA36 not included in your spouse's taxable income for 2024	YES/NO
If yes, what was the amount? \$	
6. Did a trust/company distribute income to your spouse in 2024 in respect of which family trust was paid by the trust/company?	
If yes, what was the amount? \$	
7. Did your spouse have reportable fringe benefits amounts for the 2024 income year?	YES/NO



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	If yes, what was the amount? \$
	Did your spouse receive any Australian Government pensions or allowances (not including exempt pension income) in the 2024 income year?YES/NO?
	If yes, what was the amount? \$
9. [Did your spouse receive any exempt pension income in the 2024 income year?YES/NO
	If yes, what was the amount? \$
10.	Does your spouse have any reportable super contributions for the 2024 income year?YES/NO
	If yes, what was the amount? \$
11.	Did your spouse receive any tax-free government pensions paid under the <i>Military Rehabilitation and Compensation Act 2004</i> ?YES/NO
	If yes, what was the amount? \$
12.	Did your spouse receive any 'target foreign income' in the 2024 income year? YES/NO
	If yes, what was the amount? \$
13.	Did your spouse have a total net investment loss (i.e., the financial investment loss/rental property loss) for 2024YES/NO
	If yes, what was the amount? \$
	Income tax return checklist continued
14.	Did your spouse pay child support during 2024YES/NO
	If yes, what was the amount? \$
15.	If your spouse is 55 to 59 years old, did they receive a superannuation lump sum (other than a death benefit) during the 2024 income year which included a taxed element that does not exceed their low-rate cap?
	If yes, what was the amount? \$

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Other

1. Do you have a HECS/HELP liability or a student financial supplement loan debt?	YES/NO
2. Do you have a loan with a private company or have such a loan amount forgiven?	.YES/NO
(If yes, please specify) – (reviewer consider if deemed dividend in year under Division 7A):	
3. Did you make a gain or loss from financial arrangements and wish to apply the TOFA rules to bring them into account for tax purposes in the 2024 income tax year	
4. Did you receive any benefit from an employee share acquisition scheme?	. YES/NO
5. Family Tax Benefit ('FTB'):	
– Did you have care of a dependent child in 2024?	. YES/NO
– Did you or your spouse receive FTB through the Department of Human Services in 2024?	. YES/NO
Dated the day of20	
Signature of taxpayer	
Name (print)	

