210 Lower Heidelberg Road, East Ivanhoe Vic 3079 **Ph:** (03) 9497 2222 **Fax:** (03) 9497 4477



Email: contact@aspirewealthgroup.com.au Web:

www.aspirewealthgroup.com.au

Client Details Form 2020 Individual Income Tax Return

Full Name					
Tax File Number					
Date of birth		//			
ABN (if applicable)					
Address					
Address (postal) (Put 'as above' if the same)					
	Mobile:				
Telephone contacts	Business Hours (work) :				
	After Hours (home):				
Email		@			
Electronic banking	BSB:				
(for refund if applicable)	Account Number:				
Occupation					
	Do you run your own bu	usiness as a sole trader?	YES/NO		
Do you run your own business in a company, trust or partnership? YES/I					
Spouse's full name					
(Please include married/de	facto/same-sex)				
Spouse's date of birth					
Spouse's TFN					
Approximate Income (if known	own)				

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T II	псо	ome – Please provide eviden	<u></u>		Yes	No	Unsur
	-	r wages					
	•	rovide all PAYG Payment Summari	•	• •		-	
		ayroll) from 31/7) applicable to the		•	d with eith	er an em _l	oloymen
coi	me s	statement or PAYG Payment Sumn			Tax Wi	اماما ماما	
		Payer's ABN	Gross Payment		ı ax wı	tnneia	
	1.	Allowances, earnings, tips, directo	or's fees etc				
			5 1005 000.				
	2.	Employer lump sum payments					
	3.	Employment termination paymen	ts				
	4.	Australian Government allowance	es and payments like Newstart, Yo	uth Allowance and			
		Austudy payments					
	5.	Australian Government pensions	and allowances				
	6.	Australian annuities and superanr	nuation income streams				
		•					
	7.	Australian superannuation lump s	ин раушентѕ				
	8.	Attributed personal services incor	ne				
	9.	Gross Interest					•
			Account #	Amount		Joint?	
		a)					
		b)			•••••	••••••	•••••
	10	Dividends				••••••	<u> </u>
	11.	Employee share schemes					
	12.	Distributions from partnerships a	nd/or trusts				
	13.	Personal services income (PSI)					
	14	Net income or loss from business	(as a sole trader)				
	15.	Deferred non-commercial busines	ss losses				
	16.	Net farm management deposits o	r repayments				
	17.	Capital gains					
	10	Foreign entities:					
_		Direct or indirect interests in a co	ntrolled foreign company				
-		Transfer of property or services to					
	19.	Foreign source income (including	foreign pensions) and foreign asse	ets or property			
	20.	Rent (provide documentation)					
		- Do you have one or more rental	properties?				
		- Did you buy or sell any property	during the income year?				
	21.	Bonuses from life insurance comp	anies or friendly societies				
	22.	Forestry managed investment sch	eme income				
	23.	Other income (please specify belo	ow)				
		u	•				

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Deductions – Please provide evidence	Yes	No	Unsu
D1. Work related car expenses			
 Cents per kilometre method (up to a maximum of 5,000 kms) 			
Log book method			
D2. Work related travel expenses			
Employee domestic travel with a reasonable travel allowance			
If the claim is more than the reasonable travel allowance rate, do you have receipts for			
your expenses?			
Overseas travel with a reasonable travel allowance			
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)?			
Employee travel without a reasonable travel allowance			
Did you incur and have receipts for airfares?			
Did you incur and have receipts for accommodation?			
Did you incur and have receipts for hire cars (if applicable)?			
Did you incur and have receipts for airfares?			
Did you incur and have receipts for meals and incidental expenses?			
Do you have any other travel expenses?			
Other work-related travel expenses (e.g. a borrowed car, public transport)			
(Please Specify)			
D3. Work-related uniform and other clothing expenses	•		
Protective Clothing			
Occupation Specific Clothing			
Non-compulsory uniform			
Compulsory uniform			
Conventional clothing			1
Laundry expenses (up to \$150 without receipts)			1
			1
Dry cleaning expenses			i

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Deductions (Continued) – Please provide evidence	Yes	No	Unsure
D4. Work related self-education expenses	_		
Course taken at educational institution:			
Union fees			
Course fees			
Books, stationery			
Travel			
Other (Please specify)			
D5. Other Work-related expenses			
Home Office Expenses			
Computer and software			
Telephone/mobile phone			
Tools and equipment			
Subscriptions and union fees			
Journals or periodicals			
Depreciation			
Sun protection products (i.e. sunscreen and sunglasses)			
Seminars and courses not at an educational institution			
Any other work-related deductions (please specify)			
Other Types of Deductions			
D6. Low value pool deduction	T		
D7. Interest deductions			
D8. Dividend deductions			
D9. Gifts or donations			
D10 Cost of managing tax affairs			
 Interest charged by the ATO (e.g. including SIC and GIC) Tax Agent/accounting fees 			
Tax Agent/accounting feesLitigation costs			
 Other expenses incurred in managing tax affairs 			
D11. Deductible amount of undeducted purchase price of a foreign pension or annuity			

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Deductions (Continued) – Please provide evidence	e	Yes	No	Unsure
D12. Personal superannuation contributions				
Full name of fund	Account Number:			<u> </u>
Fund ABN:	Fund TFN:			
Have you provided the fund a notice of intention to	deduct the contribution?			
Has this notice been acknowledged by the fund?				
Other types of deductions (continued)				
D13. Deduction for project pool				
D14. Forestry managed investment scheme deduction				
D15. Other deductions (please specify)				
L1. Tax losses of earlier income years				

Tax offsets/rebates – Please provide evidence	Yes	No	Unsure
T1. Are you a senior Australian or pensioner?			
T2. Did you receive an Australian superannuation income stream?			
T3. Did you make superannuation contributions on behalf of your spouse?			
T4 Did you live in a remote area of Australia or serve overseas with the Australian Defence			
Force or the UN armed forces in the 2020 income year?			
T5. Did you have net medical expenses for disability aids, attendant care or aged care in the			
2020 income year?			
T6. Did you maintain a dependant who is unable to work due to invalidity or carer			
obligations in the 2020 income year?			
T7. Are you entitled to claim the landcare and water facility tax offset?			
T8. Are you involved in an early stage venture capital limited partnership?			
T9. Are you an early stage investor in an early stage innovation company?			
T10. Are you entitled to any other non-refundable tax offsets? (Please specify below)			
T11. Are you entitled to any other refundable tax offsets? (Please specify below)			
		l	

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Other relevant information – Please provide evidence			No	Unsure
A.	Are you entitled to the Medicare levy exemption or reduction in the 2020 income year?			
I	f yes, please specify:			
В.	Did you and your spouse/dependants have private health insurance in the 2020 income year?			
	(If yes, please provide the annual statement received from your health fund)			
C.	Were you under 18 years old on 30 June 2020?			
D.	Did you become an Australian tax resident at any time during the income year?			
E.	Did you cease to be an Australian tax resident at any time during the income year?			
F.	Did you make a non-deductible (non-concessional) personal super contribution?			
G.	Do you have a HELP liability, Student Financial Supplement Loan debt, Student Start-Up Load debt or Trade Support Loan debt?			
Н.	Are you a working holiday maker in Australia on a 417 (working holiday) visa or 462 working holiday) visa?			
I.	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? (Please specify below)			
J.	Do you have a loan with a private company at 30 June 2020 or has such a loan amount been forgiven in the 2020 income year? Has a private company made a payment to you in the 2020 income year (other than a dividend)? (Please specify below)			
K.	Did you receive any benefit from an employee share acquisition scheme?			
L.	Family Tax Benefit ('FTB'):			
•	Did you have care of a dependent child in the 2020 income year?			
•	Did you or your spouse receive FTB through the Department of Human Services in the			
•	- · · · · · · · · · · · · · · · · · · ·			
	2020 income year?			
In	come Tests information			
•	Do you have any reportable fringe benefits amounts in the 2020 income year?			
•	Do you have any reportable employer superannuation contributions in the 2020 income			
	year?			
•	Did you receive any tax-free government pensions in the 2020 income year?			
•	Did you receive any target foreign income in the 2020 income year?			
•	Did you have a net financial investment loss in the 2020 income year?			
•	Did you have a net rental property loss in the 2020 income year?			
•	Did you pay child support in the 2020 income year?			
•	Number of dependent children?			

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0	ther relevant inforn	nation – Please provide evidence	Yes	No	Unsure
Sp	oouse Details (if applicab	le)			
•	spouse for only part of June 2020 when you h	for the full year from 1 July 2019 to 30 June 2020? If you had a the income year, please specify the dates between 1 July 2019 to 30 ad a spouse? to / /			
•	What was your spouse	's taxable income for the 2020 income year?	\$		
•		e a share of trust income on which the trustee is assessed under t been included in your spouse's taxable income?			
•	Did a trust or company	distribute income to your spouse in respect of which family trust			
	distribution tax was pa	id by the trust or company for the 2020 income year?			
•	Did your spouse have a	any reportable fringe benefits amounts for the 2020 income year?			
•		re any Australian Government pensions or allowances (not including ne) in the 2020 income year?			
•	Did your spouse receiv	e any exempt pension income in the 2020 income year?			
•	Did your spouse receiv	re any tax-free government pensions paid under the Military inpensation Act 2004?			
•	Does your spouse have	e any reportable employer superannuation contributions or			
	deductible personal su	perannuation contributions for the 2020 income year?			
•	Did your spouse receiv	e any 'target foreign income' in the 2020 income year?			
•		a total net investment loss (i.e., the total of any financial investment erty loss) for the 2020 income year?			
•	Did your spouse pay ch	nild support during the 2020 income year?			
•	superannuation lump	between their preservation age and 59 years old, did they receive a sum (other than a death benefit) during the 2020 income year that ent that does not exceed their low rate cap?			
A	dditional notes/concerns	5:			
D	ated:	//			
Si	gnature of taxpayer:				
N	ame (Print)				