

Tax Planning Review - Questionnaire

Client Name:

Date:

Please take the time to complete this checklist as it is a very important part of the tax planning process. It helps you:

- Identify and provide the information we need to review your tax position
- Minimise the queries from us during the preparation of your Tax Planning Review
- Ensure we can complete your Tax planning review as quickly as possible

1. Your Results to Date	Yes	No	N/A
Please provide a copy of you latest financial results from your accounting system including a profit and loss statement and balance sheet (a copy of your data file would be great)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Remuneration of Owners from business	Yes	No	N/A
Please provide details of any amounts that have been paid to owners or their family members to date and also an estimate of expected amounts payable for the full year.			
Information required for each family member is:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<ul style="list-style-type: none"> • Gross Wages • PAYG Tax Withheld • Superannuation 			
3. Cash Availability	Yes	No	N/A
Do you expect to have funds available prior to 30 June that can be used to assist in reducing your tax liabilities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If so, how much will you have available?			
4. Capital Investment – This Year	Yes	No	N/A
Have you purchased any new vehicles, plant or equipment since 1 July 2009?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If so, what is the cost of these items?			
Were any of these items purchased before 31 December 2009?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If so, cost of these items.			
5. Capital Investment – Future	Yes	No	N/A
Do you have any planned capital investment in the next 18 months?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If so, please provide details.			
6. Owners income (not from the business)	Yes	No	N/A
Do any family members have any salary or wages from external sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If so, please provide details (copy of last payslip would assist).			

