## **TAX RETURN QUESTIONNAIRE**

# Tax year 6th April 2018 to 5th April 2019

Please ensure you answer ALL questions (click appropriate Y/N box) and provide supporting documentation

#### 1. PERSONAL DETAILS

| Client Name:-<br>Address UK:-<br>(If changed from last year – date of change): -<br>Address Overseas:-<br>(If providing an overseas address, please ensure you complete Accommodation Oversea<br>Home Tel:-<br>Email:-<br>National Insurance Number:-<br>Date of Birth:-<br>Marital Status (single, living with partner, married, separated, divorced):-<br>Date of Event:- | as Questi | onnaire) |
|---|-----------|----------|
| Spouse/partner name:-<br>Is spouse/partner living in the UK?<br>Spouse/Partner National Insurance Number:-  | Υ□        | N 🗆      |
| 2. EMPLOYMENT   |           |          |
| Were you employed in the year 6.4.18 to 5.4.19?<br>If yes, please provide the form P60/ Payslips for each month – April – March<br>as provided by your employer. (UK Employers & Overseas employers)  | Υ□        | N 🗆      |
| Did you receive benefits in kind<br>(e.g. Company Car, Medical Benefits etc.) during the year 6.4.18 to 5.4.19?<br>If yes, please provide the form P11D or P9D from your employer. (UK Employers Only)  | Υ□        | N 🗆      |
| Did you incur any expenses (e.g. Professional Subscriptions etc) in doing your job during 6.4.18 to 5.4.19?:-   | Υ□        | N 🗆      |
| PLEASE NOTE: Travel between home and work is not included)  |           |          |
| Did you commence or cease employment during 6.4.18 to 5.4.19?<br>If yes, provide commencement and/or cessation dates:-  | Υ□        | N 🗆      |
|   |           |          |
| Also, provide P45 or your last payslip from your employer   |           |          |
| Do you have a Student Loan repayable?   | Y□        | N 🗆      |
| If so how much did you pay during the period 6/4/18 – 5/4/19:-  |           |          |
| Did you pay via salary?   | Υ□        | N 🗆      |
| Did you pay directly to Student Loan Company?<br>If yes, please provide copy of receipt or statement  | Υ□        | N 🗆      |
| Is the loan is due to be fully repaid in the next two years? (If so, Please confirm date):-   |           |          |
| Did you receive foreign earnings in the year 6.4.18 to 5.4.19?<br>If yes, details of gross amounts earned and from whom:-<br>(Please provide copies of payslips)  | Υ□        | N 🗆      |

# If Overseas tax paid, please provide supporting documentation.

Please provide copies of all new contracts of employment under which you worked during the tax year to 05/04/19, including any appendices outlining your T&Cs.

| Company Name   | Gross                      |            | Ta               | ax            |          | Net                     | Joi           | nt/self   |
|--|----------------------------|------------|------------------|---------------|----------|-------------------------|---------------|-----------|
| Did you receive any<br>If yes, please provid                                 |                            |            |                  |               | , or use | e a separate she        | Y⊡<br>et      | N 🗆       |
|  |                            |            |                  |               |          |                         |               |           |
|  |                            |            |                  |               |          |                         |               |           |
| Sort Code  | Account No                 | G          | iross            | Tax           |          | Net                     | J             | oint/self |
| If yes, please provid  |                            |            |                  |               |          |                         |               |           |
| Did you receive any from your savings in                                     |                            |            | interest         |               |          |                         | Υ□            | N 🗆       |
| 7. INCOME FROM   | SAVINGS AND                | INVES      | TMENTS           |               |          |                         |               |           |
| annuities or capital<br>If yes, please provid                                | redemption polic           | cies, or   | AVC's?           |               | eable E  | vent Certificate        |               |           |
| Have you made any  | v gains on LIK life        | oincur     | ance nolici      | 95            |          |                         | Υ□            | N 🗆       |
| Date of purchase<br>Date of sale   |                            |            |                  |               |          |                         |               |           |
| Sale proceeds £  |                            |            |                  |               |          |                         |               | _         |
| Purchase price £   |                            |            |                  |               |          |                         |               |           |
| If yes;<br>Type of asset   |                            |            |                  |               |          |                         |               |           |
| Have you sold any  | -                          | during     | g the year 6     | 6.4.18 to 5.4 | 4.19?    |                         | Υ□            | N 🗆       |
| 6. CAPITAL GAINS   | -                          |            |                  |               |          |                         |               |           |
| Was each property<br>(If so, provide deta                                    |                            | rd)        |                  |               |          |                         | Υ□            | N 🗆       |
| Please supply deta<br>(including Mortgage Interes<br>See changes to mortgage | st Certificates(s) for the | e tax year | r ended 5 April) | ).            |          | tax-relief-for-resident | ial-landlord  | <u>s</u>  |
| If yes, please state t   |                            |            |                  |               |          |                         | •             | IN L.     |
| Have you received from the UK or Ove   | •                          |            | 1 102            |               |          |                         | Υ□            | N 🗆       |
| 5. LAND & PROPE  | RTY                        |            |                  |               |          |                         |               |           |
| Did you receive any<br>If so, please provide                                 |                            |            |                  | oss pension   | payme    | nts and any tax         | Y⊡<br>deducte | N □<br>d. |
| 4. PENSION INCO  | ME                         |            |                  |               |          |                         |               |           |
| Were you self-empl<br>during the year 6.4.<br>If yes, please provid          | 18 to 5.4.19?              |            | ·                |               |          |                         | Υ□            | N 🗆       |
| 3. SELF-EMPLOY   | MENT                       |            |                  |               |          |                         |               |           |
| Do you qualify for S<br>(If yes, please complete                             |                            |            |                  |               |          |                         | Υ□            | N 🗆       |
|  |                            |            |                  |               |          |                         |               |           |

# 8. BENEFITS RECEIVED

| Did you receive any of the following benefits during the year 6.4.18 to 5.4.19? |  |  | N 🗆 |  |
|---|--|--|-----|--|
| If yes, please provide amounts received in the year                             |  |  |     |  |
| State Retirement Pension  |  |  |     |  |
| Job Seekers Allowance   |  |  |     |  |
| Invalid Care Allowance  |  |  |     |  |
| Statutory Sick pay/Maternity/Pay from DSS                                       |  |  |     |  |
| Taxable Incapacity Benefit  |  |  |     |  |

**PLEASE NOTE:** it is **IMPORTANT** to provide the amounts, if you have answered "**YES**" to any of the above benefits.

### 9. PENSION CONTRIBUTIONS

| Did you contribute to a personal/stakeholder pension in the year 6.4.18 to 5.4.19 If yes, how much was paid during the year?   | Υ□ | N 🗆 |
|--|----|-----|
| Gross:- £ Net:- £  |    |     |
| To whom:-  |    |     |
| Pension/contract number:-  |    |     |
| 10. High Income Child Benefit Charge   |    |     |
| Did you or your partner make a claim for child benefit during the year?<br>If yes please provide the following details;<br>Date(s) of birth of Child(ren) for whom the claim was made:-                | Υ□ | N 🗆 |
| Amount of Child benefit received per week:-  |    |     |
| Date Child Benefit ceased (or is expected to cease):-  |    |     |
| 11. ANY OTHER INCOME OR ALLOWABLE PAYMENTS   |    |     |
| Did you receive <b>any other income or make any allowable payments</b><br>apart from those already mentioned in this questionnaire?<br>e.g. Trusts, overseas sources<br>If 'yes' please give details:- | Υ□ | N 🗆 |
| Did you make any Charitable Contributions under Gift Aid?<br>If yes please provide details:-   | Υ□ | N 🗆 |

#### 12. TAX REPAYMENT (if Applicable)

Please provide bank account details into which you require the repayment to be issued

| Bank/Building Society  |  |
|------------------------|--|
| Account holder(s) name |  |
| Sort code              |  |
| Account number         |  |

#### DECLARATION

I hereby certify that the above information provided is accurate and authorise **Tax Safe Ltd** to complete my Income Tax Return. I acknowledge that I am fully responsible for all of the information entered on the Income Tax Return.

Print Name Date

Feb 2019