

**P11D Expenses and Benefits Questionnaire - 2018-19**

**Company name**

**Employee/Director name**

**NI Number**

**Date of Birth**    **Please Indicate**

To be completed for (1) all Directors and (2) employees earning over £8,500 per annum (including expenses and benefits) where there are expenses reimbursed which are not covered by the HMRC exemptions and/or Benefits in Kind provided, including Benefits in Kind provided to others by reason of the employment of the Director/employee (e.g. spouses, children etc.).

Please note that all amounts entered should be inclusive of VAT

Please answer all of the questions even if you believe the information has already been supplied, this will enable us to submit the correct information to HM Revenue and Customs on time.

Does the business only reimburse expenses that are exempt from disclosure? (e.g. business travel, entertainment, uniform and tools for work)

Benefits can be reported in several different sections of the P11D, depending on whom the contract is between.

The 3 situations are:

- 1 The contract is with the employee and provider, and the employer makes a payment on behalf of the employee direct to the provider.
- 2 The contract is with the employee and provider, and the employer reimburses the employee.
- 3 The contract is with the employer and provider, and the employer makes a payment direct to the provider.

**1 Company Car**

Does the company provide a company car for the director/employee?

If YES, and we do not already have this information, please complete the form attached to this questionnaire.

**Please provide a copy of the purchase invoice/lease agreement and vehicle registration document if available.**

**2 Company Car Mileage Allowances & Fuel**

Has the company paid mileage allowances or actual fuel costs to the director/employee using a company car?

If YES, please confirm the following:

**Business mileage** \_\_\_\_\_  
**Mileage rate used** \_\_\_\_\_  
**Amount paid** £ \_\_\_\_\_

How does the company reimburse the director/employee?

Has a company fuel card been provided to purchase fuel?

If YES, please confirm total cost of fuel purchased using the fuel card £ \_\_\_\_\_

Has the director/employee reimbursed the company for the private mileage?

**3 Company Van**

Does the company provide a van for private use?

Is the van shared with other employees?

If YES to either, please complete the form attached to this questionnaire

**4 Private Car Mileage Allowances & Fuel**

Has the company paid mileage allowances or actual fuel costs to the director/employee using a privately owned car?

If YES, please confirm the following:

**Business mileage** \_\_\_\_\_  
**Mileage rate used** \_\_\_\_\_  
**Amount paid** £ \_\_\_\_\_

How does the company reimburse the director/employee?

Has a company fuel card been provided to purchase fuel?

If YES, please confirm total cost of fuel purchased using the fuel card £ \_\_\_\_\_

Has the director/employee reimbursed the company for the private mileage?

**5 Motorcycles**

Does the company own a motorcycle?

Yes/No

If YES, is the motorcycle available for private use?

Yes/No

**6 Payments for Use of Home Telephone**

Does the company meet, or reimburse any part of the director/employees home telephone bills?

Yes/No

If YES, who is the contract between? (please refer to front page)

1/2/3

Is there a separate business line?

Yes/No

How much was paid by the company or reimbursed to the director/employee?

£

Does the above include line rental, private calls & internet connections?

Yes/No

If YES, please provide a breakdown

**Business Calls**

£

**Private Calls**

£

**Line Rental**

£

**Internet Connection Charges**

£

**7 Mobile Telephones**

Does the company pay, or reimburse any part of the director/employees personal mobile telephone bills?

Yes/No

If YES, who is the contract between? (please refer to front page)

1/2/3

How much was paid by the company or reimbursed to the director/employee?

£

Does the above include private calls & rental?

Yes/No

If YES, please provide a breakdown

**Business Calls**

£

**Private Calls**

£

**Line Rental**

£

**8 Private Medical Insurance**

Does the company pay premiums for private medical insurance, permanent health insurance or life assurance?

Yes/No

If YES, who is the contract between? (please refer to front page)

1/2/3

Please confirm who the named beneficiary of the policy is:

\_\_\_\_\_

Premium paid during the year

£

Amount contributed by the employee

£

**9 Subscriptions & Professional Fees**

Does the company pay subscriptions or professional fees e.g. Subscriptions to leisure, sports or health clubs, magazines or periodicals, or professional subscriptions and accountancy fees?

Yes/No

If YES, who is the contract between? (please refer to front page)

1/2/3

**Type of Subscription**

**Provider of benefit**

**Premium paid in the year**

**Amount contributed by the employee/director**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**10 Reimbursed expenses**

Have any expenses payments been made to the director or employee which are not a HMRC approved rate or are not the reimbursement of actual business costs incurred on behalf of the business?

Yes/No

If YES, please provide the details of the payments.

Has the business made any payments on behalf of the director or employee?

Yes/No

If YES, please provide the details of the payments.

**11 Credit Card Expenses Payments**

Has the business paid the personal credit card bills of the director or employee?

Yes/No

If YES, please complete the form attached to this questionnaire with the nature of the expenses paid.

Has the director/employee made any purchases using a company credit card for personal items?

Yes/No

If YES, has the director/employee repaid the company for the personal items purchased?

Yes/No

If No, please provide the amount of the personal items purchased.

£ \_\_\_\_\_

**12 Living Accommodation - ALL employees (£8,500 threshold not applicable)**

Does the company provide living accommodation for the director/employee?

Yes/No

If YES, what was the cost of the accommodation provided?

£ \_\_\_\_\_

*Please provide the details of the accommodation provided (address etc.) and the dates that it was available to the employee.*

**13 Interest Free & Low Interest Loans**

Has the company provided a beneficial loan to the director/employee, including directors overdrawn account?

Yes/No

**If the total amount outstanding on all non-qualifying loans does not exceed £10,000 at any time in the year, there is no benefit)**

If YES, the maximum balance outstanding at any time in the year was

£ \_\_\_\_\_

The amount outstanding at 6 April 2018 or at the date the loan was made if later

£ \_\_\_\_\_

The amount outstanding at 5 April 2019 or at the date the loan was discharged if earlier

£ \_\_\_\_\_

Date loan was made in 2018-19 if applicable \_\_\_\_\_ Date loan discharged in 2018/2019 if applicable \_\_\_\_\_

Amount of interest paid for 2018-19 if any

£ \_\_\_\_\_

**14 Assets Transferred**

Have any of the company's assets been transferred (cars, computers, etc.) to the director/employee?

Yes/No

If YES, what is the cost/market value of the asset?

£ \_\_\_\_\_

The amount paid by the director/employee

£ \_\_\_\_\_

**15 Assets Placed at the Employee's Disposal**

Has the company provided assets to the director/employee for private use?

Yes/No

If YES, please provide details \_\_\_\_\_

**16 Working From Home**

Has the company reimbursed the director/employee expenses for use of home as office?

Yes/No

If Yes, please provide the following

Electricity and Gas charges

£ \_\_\_\_\_

Contents Insurance

£ \_\_\_\_\_

Council Tax charges

£ \_\_\_\_\_

Rent paid (if any)

£ \_\_\_\_\_

**17 Other**

If you have been provided with any other benefits or expenses, please give details below (e.g. Childcare costs, spouse/partner expenses on business trips, late night taxis, excessive staff entertaining.)

**18 Relocation expenses payments and benefits**

Have you received or has the company paid any relocation expenses on your behalf? If yes, please provide details of the relocation expenses paid together with the amounts.

**19 Declaration**

I certify that this P11D questionnaire has been completed to the best of my knowledge and I understand that the information provided will be used for the completion of forms P11D

Signed \_\_\_\_\_

Position \_\_\_\_\_

Date \_\_\_\_\_

# P11D Car Questionnaire - 2018-19

Cars provided for private use to an employee or director

Company Name	
Employee/Director's Name	
Employee or Director's National Insurance Number	
Exact Details of Make or Model	
Registration Number	
Transmission	Manual/Automatic
Engine Size	cc
Date First Registered	
Fuel Type	Petrol/Diesel
Carbon Dioxide (CO2) Emissions	grams of CO2 per kilometre
List price of the car at date of first registration	£
Price of accessories not included in the price of the car	£
Date the car was made available to the employee	From To
Capital contribution made by the employee towards the cost of the car and accessories	
Amount paid by employee for private use of the car	
Is fuel for private use provided with this car?	YES/NO
If YES, does the employee reimburse all private fuel used?	YES/NO

# P11D Van Questionnaire - 2018-19

Vans provided to an employee/director for private use in addition to business use and ordinary commuting.

To be completed if the following apply: -

- 1 - The van is used to do supermarket shopping every week.
- 2 - The van is taken away and used on holiday.
- 3 - The van is used outside of work for non-business activities.

Company Name	
Employee/Director's Name	
Employee or Director's National Insurance Number	
Registration Number	
Date First Registered	
Date the car was made available to the employee	From To
Name of employee who the van is shared with	
Date the van was shared	From To
Percentage of sharing between the employees	
Is fuel for private use provided with this van?	YES/NO
If YES, does the employee reimburse all private fuel used?	YES/NO

# P11D Credit Card Expenses Questionnaire - 2018-19

Expenses provided to an employee or director

<b>Company Name</b>
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<b>Employee/Director's Name</b>	
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<b>Employee or Director's National Insurance Number</b>	
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**Expenses Type:** **Value**

Accommodation	£
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Advertising	£
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Car Maintenance	£
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Computer Equipment	£
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Entertainment - Client	£
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Entertainment - Staff	£
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Other (please specify)	£
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Office equipment	£
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Petrol	£
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Postage	£
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Relocation Expenses (exceeding £8,000)	£
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Travel & Subsistence	£
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**I confirm that all expenses detailed above were incurred wholly, exclusively and necessarily in the performance of the duties of my employment.**