

## Individual income tax return checklist

Please note that the individual income tax return interview checklist has been prepared based on the draft form provided by the Australian Taxation Office at the time of writing.

<b>Full Name</b>	
<b>Tax File Number</b>	
<b>Date of birth</b>	
<b>ABN (if applicable)</b>	
<b>Address (postal)</b>	
<b>Telephone contacts</b>	<b>Mobile:</b>
	<b>Business Hours (work) :</b>
	<b>After Hours (home):</b>
<b>Email</b>	
<b>Electronic banking Details</b> (for refund if applicable)	<b>BSB:</b>
	<b>Account Number:</b>
	<b>Account Name:</b>
<b>Main occupation</b>	
<b>Spouse name and TFN</b>	

**INCOME – Please provide evidence (Please circle YES or NO for each of the items listed)**

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 News tart, youth allowance and Austudy payments ..... 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

## Individual income tax return checklist

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 ..... YES/NO
19. Foreign entities:
- Direct or indirect interests in 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
- DEDUCTIONS – Please provide evidence**
- D1. Work related car expenses**
- cents per kilometre method (up to a maximum of 5,000 kms) ..... YES/NO
  - log book method ..... YES/NO
- D2. Work related travel expenses**
- Employee domestic travel with reasonable allowance ..... YES/NO
- If the claim is more than the reasonable allowance rate, do you have receipts for your expenses? ..... YES/NO
- Overseas travel with reasonable allowance ..... YES/NO
- Do you have receipts for accommodation expenses? ..... 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
- Employee without a reasonable travel allowance ..... YES/NO
- Did you incur and have receipts for airfares?..... YES/NO
  - Did you incur and have receipts for accommodation?..... YES/NO
  - Do you have receipts for hire cars (if applicable)? ..... YES/NO
  - 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) ..... YES/NO
- D3. Work related uniform and other clothing expenses**
- Protective clothing ..... YES/NO
- Occupation specific clothing ..... YES/NO
- Non-compulsory uniform ..... YES/NO

## Individual income tax return checklist

- Compulsory uniform ..... YES/NO
- Conventional clothing ..... YES/NO
- Laundry expenses (up to \$150 without receipts) ..... YES/NO
- Dry cleaning expenses ..... YES/NO
- Other claims such as mending/repairs, etc (please specify) ..... YES/NO

### **D4. Work related self-education expenses**

- Course taken at educational institution: ..... YES/NO
- union fees ..... YES/NO
  - course fees ..... YES/NO
  - books, stationery ..... YES/NO
  - depreciation ..... YES/NO
  - travel ..... YES/NO

### **D5. Other work related expenses**

- Home office expenses ..... YES/NO
- Computer and software ..... YES/NO
- Telephone/mobile phone ..... YES/NO
- Tools and equipment ..... YES/NO
- Subscriptions and union fees ..... YES/NO
- Journals/periodicals ..... YES/NO
- Depreciation ..... YES/NO
- Sun protection products (i.e., sunscreen and sunglasses) ..... YES/NO
- Seminars and courses not at an educational institution:
- course fees ..... YES/NO
  - travel ..... YES/NO
  - other (please specify) ..... YES/NO

**D6. Low value pool deduction** ..... YES/NO

**D7. Interest deductions** ..... YES/NO

**D8. Dividend deductions** ..... YES/NO

**D9. Gifts or donations** ..... YES/NO

**D10. Cost of managing tax affairs** ..... YES/NO

**D11. Deductible amount of undeducted purchase price of a foreign pension or annuity** ..... YES/NO

**D12. Personal superannuation contributions** ..... YES/NO

Full name of fund: ..... Account no: .....

Fund ABN: ..... Fund TFN: .....

**D13. Deduction for project pool** ..... YES/NO

**D14. Forestry managed investment scheme deduction** ..... YES/NO

## Individual income tax return checklist

**D15. Other deductions (please specify)** ..... YES/NO

**Tax offsets/rebates – Please provide evidence**

T1. Are you a senior Australian or a 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 2016? ..... YES/NO

T5. Did you have net medical expenses in 2016? ..... YES/NO

If so, do these medical expenses include expenses relating to disability aids, attendant care or aged care expenses? ..... YES/NO

T6. Did you maintain a dependant who is unable to work due to invalidity or carer obligations? ..... YES/NO

**Other relevant information**

A. Are you entitled to the Medicare levy exemption or reduction in 2016? ..... YES/NO  
*(If yes, please specify):*

B. Did you have private health insurance in 2016? ..... YES/NO  
*(If yes, please provide the annual statement received from your health fund)*

K. Did you receive any benefit from an employee share acquisition scheme? ..... YES/NO

L. Family Tax Benefit ('FTB'):

– Did you have care of a dependent child in 2016? ..... YES/NO

– Did you or your spouse receive FTB through the Department of Human Services in 2016? ..... YES/NO

– Did you pay child support in 2016? ..... YES/NO

– Number of dependent children? \_\_\_\_\_

**I hereby request that you may prepare my tax return from the information that has been provided on this form. I believe the information that I have given to be correct, to the best of my knowledge.**

Dated the ..... day of .....20.....

.....  
**Signature of taxpayer**

.....  
**Name (print)**