

INFORMATION FOR 2019 TAX RETURN CHECKLIST INDIVIDUAL

IMPORTANT NOTE – WORKFLOW MANAGEMENT

We shall endeavour to ensure that your Individual tax return is lodged with the ATO by the due date, provided ALL relevant information and documentation is received by 31st of March 2020. If the relevant information and documentation is not received by the due date, we may not be able to guarantee that your 2019 tax return is lodged in time.

NAME (First, Middle and Last Name):

OCCUPATION:

D.O.B

TFN

PHONE NO. DAYTIME:

AFTER HOURS:

EMAIL ADDRESS:

POSTAL ADDRESS

NAMES OF DEPENDANT CHILDREN AND SPOUSE

DATE OF BIRTH

IMPORTANT NOTE - ATO Electronic Fund Transfer for Refunds

From 1 July 2014 the ATO will be issuing all Individual Income Tax Refunds via Electronic Funds Transfer (EFT) only.

In order for us as tax agents to comply with this change, we will require details of a nominated bank account for each individual (including children) to have your refunds deposited into. This account does not have to be solely held in your name, if you prefer to use a joint account then you are able to do so.

BSB:

ACCOUNT NUMBER:

ACCOUNT NAME:

INCOME:

1. **Income Statements** (formerly PAYG Summaries or Group Certificates) (including pensions)

YES NO

Number of certificates attached _____

2. **Other Salary income:** (includes any directors' fees, commissions etc.)

3. **Termination Payments** (if you received a lump sum termination please provide Eligible Termination Statement – ETP Statement)

Applicable YES NO

4. **Interest** (money received on your bank accounts)

NAME OF BANK	ACCOUNT NO.	TOTAL INTEREST RECEIVED \$	TFN WITHHOLDING \$	JOINT ACCOUNT?

5. **Dividends**

Please provide copies of dividend statements of income received. Also note that if you are on the **dividend reinvestment plan (DRP)** which means you don't physically get the money to bank [the company uses that money to buy you more shares] that this is still income and must go in your return.

ASX CODE	NO. OF SHARES	UNFRANKED DIVIDEND	FRANKED DIVIDEND	FRANKING CREDIT

Please provide your own list if more convenient.

6. **Employee Shares/Options:** Have you received any Shares and/or Options under the Employee Share Scheme?

YES NO

If YES, please attach the Employee Share Scheme Statement issued by the employer.

7. **Trusts and Partnerships:** (i.e. example of trusts is BT, Perpetual, Colonial First State, etc.). Name of trust or partnership – Please provide documents (including year-end Tax Statements) to show income from the funds you list.

8. **National Rental Affordability Scheme:** Did you provide any rental under the National Rental Affordability Scheme? If so, please supply details.

9. **Capital Gain:** Did you sell any assets such as shares or property which were acquired after 20 September 1985.

YES NO

If Yes, then please provide documentation of when it was **purchased / cost** and also documents on **sale / funds received etc.**

Shares – Sales

Please provide buy & sale contracts

PROPERTY

PURCHASE DOCUMENTS	SALE DOCUMENTS
• Contract of sale	• Contract of sale
• Settlement Statement	• Settlement Statement
• Statement of Adjustments	• Statement of Adjustments
• Stamp duty	• Conveyancing fees
• Transfer of land registration	• Agent commission
• Conveyancing fees	
• Buyers advocate fee	

If you had a lease for your vehicle please provide figures of your lease payments.

Kilometres Method: You haven't kept a log book but use your car for work. Let us know how many kilometres you would have travelled for work. The maximum the tax office allows you to claim is 5000 kilometres.

Kilometres: _____

Car Engine Size: (in litres i.e. 1.6 litres): _____

2. **Work Uniform:** Do you have to wear a monogrammed uniform or protective clothing?

YES NO

If yes were you out of pocket through the year for purchasing any new items (If so, please provide details). Please provide details of uniform maintenance (laundry/dry cleaning, etc.)

3. **Other Work-Related Deductions:** (please provide receipts where possible)

Work related travel expenses _____

Union fees / professional bodies _____

Home office expenses

(Number of hours spent working from home per/week) _____

Total electricity & gas bills for financial year _____

Home office size in relation to total home floor space (e.g. 15%) _____

Telephone (incl. mobile) and Internet expenses. (*Please Note:* The ATO is now requiring a four-week diary record be maintained for these forms of usage for verification purposes. Should you require more information in regard to this matter please contact your client manager for more details.)

Diary / Stationery / Printing _____

- Tools and equipment _____
- Seminar costs or self-education _____

4. **Other:** (Any costs you incurred that were directly related to your job). Please provide details.

5. Income Protection Insurance Deductions

- Do you have tax deductible Income Protection Insurance? YES NO

Please provide details of your insurance policies:

POLICY TYPE	SUM INSURED	INSURER	PREMIUMS \$	PREMIUM FREQUENCY

6. **Gifts & Donations:** Did you make any gifts or donations during the financial year?

- YES NO

If YES, please provide details of your donations:

ENTITY	AMOUNT DONATED

7. **Cost of Managing Tax Affairs:** The cost of handling tax returns and other accountancy that were incurred this financial year. Please provide details:

8. **Personal Superannuation Contributions:** If you have made personal superannuation contributions did you provide your fund with a notice of intent to claim a deduction and received acknowledgement? (If yes please provide details)

b) Have you made any personal non concessional contributions to your superannuation fund? If so, you may be entitled to super co-contributions (conditions apply). We do not require any information for your tax return as the process to claim this is automatic between the Australian Taxation Office and your superfund upon lodgement of your tax return. If yes, please provide details of contributions you made to your superannuation for the financials year.

c) Have you made superannuation contributions on behalf of your spouse?

YES

NO

4) **Medical Expenses:**

The medical rebate has now been removed except for medical expenses in relation to disability aids, attendant care or aged care. Please provide a schedule of these expenses where applicable.

OTHER: Any other information which you are unsure of, or which you would like us to be aware of:

Please note FIFO and DIDO workers no longer eligible for zone rebates from 1 July 2015.

RENTAL PROPERTY ANNUAL INCOME & EXPENSES

(Please provide copies of statements & receipts)

Taxpayer Name:	Financial Year:
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PROPERTY DETAILS	
Address	
Post Code	
Ownership	
Purchase (Contract) Date	
Date Deposit was Paid	
Settlement Date	
Date First Rented	
Weeks Rented this Year	
PURCHASE COSTS	
Purchase Price	
Conveyancing	
Stamp Duty	
Other	
Renovations	
Total	
BORROWING EXPENSES	
Loan Fees	
S/D on Mortgage	
Mortgage Insurance	
Other	
Total	
INCOME FOR YEAR	
Rent	
Other Income	
Total	

EXPENSES					
Item	Date	Account Reference	Paid to	Amount	Total
Advertising for Tenants					
Body Corporate Fees					
Cleaning					
Council Rates					
Gardening/Lawn Mowing					
Insurance					
Land Tax					
Legal Fees					
Pest Control					
Agent Fees					
Repairs & Maintenance					
Office Supplies					
Travel Expenses					
Water Charges					
Sundry Rental Expenses					

Plant and Furniture additions, changes, scrapping during the year?

(Please provide receipts for items over \$300)

YES

NO

Renovations during the year?

(Please provide itemised list)

YES

NO

Loan refinancing during year?

(Please provide both the refinanced & new loan statements)

YES

NO

TAXPAYER'S DECLARATION

I declare that all the information I have given is true and correct.

Taxpayer's signature: _____ Date: _____