

Income Tax Return Checklist

Income	Question	Yes/No	Paperwork To Be Included	Tick if paperwork is included
Work	Have you been paid for working during the year?	<input type="checkbox"/> Yes <input type="checkbox"/> No	PAYG Payment Summary(ies)	<input type="checkbox"/>
Centrelink	Have you received an Age Pension or any other Centrelink Benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	PAYG Payment Summary(ies)	<input type="checkbox"/>
Allocated Pension/Annuity	Did you receive payments from your superannuation fund or annuity provider?	<input type="checkbox"/> Yes <input type="checkbox"/> No	PAYG Payment Summary(ies)	<input type="checkbox"/>
Managed Trusts/Funds	Did you receive distributions from Managed Trusts?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Managed fund or unit trust Annual Tax Statements with guides	<input type="checkbox"/>
Share Dividends	Did you receive dividends from Shares? (required even if re-invested)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Dividend Statement/s (by payment date)	<input type="checkbox"/>
Interest	Interest paid by Banks, Credit Unions, Building Societies?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Enclose summary (if more than one account)	<input type="checkbox"/>
Withdrawals from Supannuation	Have you made any lump sum withdrawals from superannuation?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Superannuation Lump Sum Payment Summary(ies)	<input type="checkbox"/>
Sale of Assets	Have you sold or redeemed direct Shares, Unit Trusts or Rental Properties?	<input type="checkbox"/> Yes <input type="checkbox"/> No	(i) Purchase details and costs. (ii) Sale details (buy contract date). (iii) Details of reinvestment (if applicable)?	<input type="checkbox"/>
Rental Property	Do you own a rental property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	(i) Real Estate Agent Annual Statement (ii) Other out of pocket costs (iii) New asset purchase - details and dates	<input type="checkbox"/>
Business	Are you a sole trader or do you have an agribusiness investment (with an ABN)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Summary of income and expenses (net of GST if you complete BAS) New Assets (include date of purchase) Private use (%) of expenses	<input type="checkbox"/>

Other Income	Please describe briefly	Tick if paperwork is included
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

Deductions	Details & Amount		
Motor vehicle	Model:	Engine capacity:	Total km's(work related):
Professional subscriptions and memberships			
Home office use: average number of hours per week and weeks per year or floorpace percentage and running costs			
Internet claim (excluding private %)			
Union fees			
Interest on borrowings used to purchase investments (please state if any proportion relates to private purposes)			
Conferences and parking etc			
Airfares and accommodation			
Tax agent fees and associated travel costs			
Costs of purchase for protective clothing and/or uniforms etc			
Work related study - Course fees, books, travel, etc			
Gifts and donations: Must be registered as deductible gift recipient			
Income protection insurance			
Other (please specify)			

Medical Expenses	Paperwork To Be Included	Tick if paperwork is included
Net medical expenses (if total exceeds \$2,060). Exclude nonreferred services and 'everyday' pharmacy items	Medicare Statement of Benefits Paid:	<input type="checkbox"/>
	Private Health Insurance Statement of Benefits Paid:	<input type="checkbox"/>
	Pharmacist's Statement of Scripts Filled:	<input type="checkbox"/>

Other Issues

Spouse Details

Taxable Income	Spouse Name	D.O.B.	Extra items that need to be provided if applicable to spouse
\$			Total Reportable Fringe Benefits: \$ Reportable employer super contributions: \$ Tax-free government pensions: \$ Taxable Foreign Income: \$ Net financial investment loss: \$ Net rental property loss: \$ Child support paid: \$ Taxed element of a super lump sum: \$

Dependent Details

Dependent Name	D.O.B.

This list is merely a guide as to what to collate in order to complete your income tax return(s). We highly recommended that you also refer to your last income tax return in conjunction with this checklist as a basis for collating your current tax information. New items and changes in your circumstances should always be brought to the attention of your accountant.

Please provide new details or a suitable contact number should we have queries:

Name:	Email:	
Address:		
Contact: (H)	(W)	(M)