****

**2015 Individual Tax Return Checklist**

**Name:**

**Date of Birth:**

**Tax File Number:**

**ABN:**

**Postal Address:**

**Residential Address:**

**Mobile:**

**Email:**

**Occupation:**

All tax returns lodged through a tax agent must be directly banked into your bank account. Please provide the details of the account you want the refund banked into.

**BSB:**

**A/C Number:**

**A/C Name:**

**Income**:

1. **Salary or Wages**

Provide copies of all PAYG Summaries or write name of Employer, ABN of Employer, Gross Payments and tax withheld.

1. **Allowances, Earnings, Tips, Directors Fees.**

Provide details

1. **Employer Lump Sum & Termination Payment**

Provide ETP Statement or write details

1. **Australian Government Allowances & Payments**

Provide Details

1. **Australian Government Pensions**

Provide Details

1. **Australian Annuities & Super Income Streams**

Provide Details

1. **Australian Superannuation Lump Sum Payments**

Provide Details

1. **Interest Income**

Provide details of the financial institution, amounts received and any amounts withheld.

1. **Dividend Income**

Provide copies of the dividend statements or a summary of dividends received including unfranked, fully franked and imputed credit amounts.

1. **Employee Share schemes**

Provide statement issued by your employer & ATO for shares/rights received as part of your employment.

1. **Distributions from Trusts and / or Partnerships**

Provide annual taxation summaries provided by the fund manager, or distribution statements/ share of profit statements from trusts and partnerships.

1. **Net Income/loss from business**

If you operated a business as a sole trader during the year provide all details of income & expenses, address, business name, address, ABN and type of business.

1. **Capital Gains**

Did you sell any assets such as shares or property which were acquired after 20 September 1985? If you did please provide documents or information relating to the purchase cost and date and sale proceeds and date.

1. **Foreign Income**

Provide details

1. **Rental Properties**

Please provide details of all income and expenditure, including interest on loans.

Please provide details of the address of the property. If the property was purchased during the year provide the purchase contract and settlement statement.

1. **Any other income**

Provide details

**Deductions:**

1. **Motor Vehicle Expenses**

If you used you own car for business please provide the make, model and engine capacity of the

Vehicle as well as;

**Log Book Method**

Percentage business/work use per log book calculation

Details of all vehicle expenses during the year

Details of vehicles purchased or sold during the year.

**Cents per Kilometer Method**

Work / business related kilometers travelled:

Engine Size of Car (Litres)

1. **Work Related Travel Expenses**

Domestic Travel if you receive a travel allowance please provide details of nights and locations you are away. If you don’t receive an allowance all claims must be substantiated.

Overseas Travel – Ensure travel records are kept for six nights or more.

1. **Work Uniform**

Please provide details of work uniforms and if they are compulsory or not, Occupation specific clothing, Protective Clothing and Laundry expenses.

1. **Self Education Expenses**

Provide Details of expenses related to courses taken at educational institutions and how it relates to your employment. Expenses include course fees, books, stationery travel ect

1. **Other work related deductions**

Including Stationery, Journals, Subscriptions, Seminars, Computer, Software, Internet, Union Fees, Memberships, Home Office, Telephone, Tools & Equipment, Materials, Depreciation Assets, Any other costs relating to your employment.

1. **Other Expenses**

Including Donations, Interest & Dividend Deductions, Tax Agent Fees, Income Protection Insurance, Any other expenses not listed above.

1. **Personal Superannuation Contributions**

If you made personal superannuation contributions that you intend to claim as a tax deduction, you need to advise your superfund and provide a copy of the notice. You can only claim your contributions if less than 10% of your total income comes from employment.

**Name of Fund:**

**Fund ABN:**

**Member Account Number:**

**Amount ($) Contributed:**

**Tax Offsets/Rebates**

1. **Dependent Spouse born on or before 30 June 1952?**

If yes provide date of birth and taxable income.

1. **Did you live in a remote area or serve overseas with the Defence Forces?**

If yes provide details of the location and period you were there.

1. **Have paid more than $2,120 in out of pocket medical expenses?**

If yes provide the total amounts and details below. Includes payments you have made for your spouse and dependent children.

**Other Information**

1. **Are you entitled to Medicare Levy exemption or reduction in 2013?**

If yes provide details.

1. **Private Health Insurance**

Were you and all your dependents covered by the appropriate level of private health Insurance cover?

If yes please provide the private health insurance statement.

1. **Did you become or cease to become an Australian resident during the year?**

If yes provide the date this happened.

1. **Did you have a spouse for the full financial year? If I am not doing your Spouse’s return please provide the following;**

Did you have a spouse for the full financial year? If not a full year for what period?

**Spouse name:**

**Spouse Date of Birth:**

**Number of Dependent Children:**

**Spouse Taxable Income for 2015 Year:**

**Spouse reportable fringe benefit for the 2015 year:**

**Spouse Centrelink benefits received if any:**

**Spouse net investment losses for 2015 year:**

**Spouse reportable super contributions for 2015 year:**

1. **Hecs/Help debt.**

If you have a debt, provide the balance owing.

1. **Child Support**

Have you paid or received child support during the year? If so provide the amount paid and or received.

1. **Family Tax Benefit (FTB)**

Did you or your spouse receive FTB in the 2015 year?

1. **Any other information you would like to provide:**