INCOME TAX RETURN Individuals Checklist



1. Please advise if your address and/or contact details including email address have changed.

2. New Clients

- Full name(s)
- Residential Address
- Postal Address
- Telephone

• Email

· Date of Birth

- Tax File Number
- Have you included a copy of your previous year's Income Tax Return?

3. Electronic Refund

• Please provide full bank account details for ATO electronic payment.

Account Name

BSB

Account Number

4. Amount of child support paid by you

5. Details of any tax free government pensions

6. Did you make personal after tax superannuation contributions for yourself?

This is the type of contribution that would count for government co-contribution

7. Spouse Details (if Hoffman Kelly does not complete your spouse tax return):

- Full Name of Spouse
- Date of Birth of Spouse
- Date Married or De Facto (if this occurred during the financial year)
- Date Separated (if this occurred during the financial year)
- Taxable Income of Spouse
- Reportable Fringe Benefits of Spouse
- Reportable Superannuation Contributions of Spouse
- Net Investment Losses of Spouse
- Name, Date of Birth of any Dependents (e.g. children)





INCOME

1. Wages, Pensions and Government Benefits

- PAYG Payment Summary (Previously known as "Group Certificate") Note: You may not receive one if your employer is lodging through STP.
- · Your main occupation title

2. Allowances, Earning, Tips, Directors Fees

• Please advise of any income <u>not</u> disclosed on the PAYG Payment Summary Statement

3. Employment Termination

• ETP Payment Summary

4. Superannuation Income

- Income Stream Payment Summary (Previously known as "Pensions")
- · Lump Sum Payment Summary

5. Interest received

• Bank Accounts and Total Interest (show Withholding tax if applicable)

6. Dividends, Trust (Managed Funds) and partnership distributions

- Dividend Advice Slips, or provide summary of share names and HIN/SRN
- Trust/Managed Fund Annual Tax Summaries (taxable on record date)
- Details of Partnership or private Trust Distributions

7. Rental income

- Itemised Rental Property details are required by the ATO
- Refer to Rental Property Checklist available on our website

8. Capital gains tax

- Relates to the sale of assets acquired after 19/09/85 and includes rental properties, land, shares, units in unit trusts, art, coin collections, etc. Please provide the following details:
 - Original purchase price and date of purchase
 - Selling price and date of sale
 - Costs of acquisition (e.g. legals, stamp duty, etc.)
 - Costs of sale (e.g. commission, legals advertising, etc.)

9. Foreign source income (including foreign pensions)

10. Bonus from life insurance or friendly society policy

11. Did you receive any benefit from an Employee Shares Acquisition Scheme?

12. Other income (please specify)





DEDUCTIONS

D1. Work related car expense claims (motor vehicle claims)

- · If claim is less than 5000 kms
- Total No. Kms traveled
- · If using log book
- Business use % (from log book)
- Registration
- Insurance and RACQ
- Fuel and oil (or estimate of total kms traveled if unknown)
- Repairs and maintenance
- Details of vehicle Loan, HP or Lease
- Invoice and Finance contract from purchase (if new)

Note: Log Books are valid for 5 years and you must keep odometer readings at 30 June each year.

D2. Other work related travel expenses (tolls, parking, accommodation etc)

D3. Work related uniform and other clothing expenses

- Protective Clothing, including sun protection
- · Occupation Specific Clothing
- Non-compulsory uniform
- Laundry (up to \$150 without receipts)

D4. Work related self education expenses (formal courses)

- Student Union fees
- Course fees (excluding HECS payments)
- Travel
- Text books
- Other (please specify)

D5. Other work related expenses

Seminars and courses not at an educational institution but related to your work

- · Seminar or course fees
- Travel
- Other

Home office expenses (electricity, internet, stationery, office furniture)

- Hours per week working from home

Computer / software or other Depreciable Equipment Purchased

Mobile / Home Phone (including percentage of business/work use)

Tools and equipment

Subscriptions, union fees or professional body fees

Expenses in relation to allowances

Other work deductions (please specify)





- D6. Interest and dividend deductions (e.g. loans for shares etc)
- D7. Gifts and donations, including to political parties
- D8. Cost of managing tax affairs (e.g. tax agent fees, travel to agent kms)
- D9. Non-employer sponsored (personal) superannuation contributions

Full name of Fund

Policy Number

(Please enclose Section 290-170 Notice if you intend to claim a deduction)

D10. Other (e.g. Income Protection Insurance)

TAX OFFSETS AND REBATES

M2. Do you and all your dependents have Private Health Insurance?

- · Please provide the annual "Private Health Insurance Annual Statement" issued by your fund.
- If not, please ensure you have completed the spouse details section on page 1
- T3. Superannuation contributions on behalf of spouse

Please ensure you have completed the spouse details section on page 1

- T4. Is your normal place of residence in a 'remote zone', or did you serve overseas with the Defence Force this year?
- T5. Did you maintain a parent, parent-in-law or invalid relative?

Other For years relating to 2018-2019 or previous - Do you have family (net out of pocket) medical expenses over \$2,377 relating to disability aids, attendant or aged care? (Not available from 1 July 2019)

OTHER

- 1. Do you have a HECS / HELP debt?
- 2. Are you entitled to the Medicare exemption / reduction (exemption certificate obtained?
- 3. Did you become or did you cease to be a tax resident of Australia during the year?
- 4. Do you have any capital losses from sale of assets in previous years to carry forward (new clients only)?

