



# TAX RETURN CHECKLIST

## GENERAL DETAILS

Client Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Tax File Number: \_\_\_\_\_ DOB \_\_\_\_\_ PH No: \_\_\_\_\_  
 Spouse/DeFacto: \_\_\_\_\_ DOB \_\_\_\_\_ Tax File No: \_\_\_\_\_  
 Main Occupation: \_\_\_\_\_  
 EMAIL ADDRESS: \_\_\_\_\_

Please circle **YES** or **NO** for each of the items listed below, and **sign and date** the back page:  
 If you have circled **YES**, please provide **relevant documentation and/or information**:

INCOME DETAILS	
Salary or Wages (Payment Summary).....	NO/YES
Paid Parental Leave (PPL).....	NO/YES
Allowances, earnings, tips, director fees .....	NO/YES
Lump Sum or Eligible Termination P'mts .....	NO/YES
Centrelink Allowances ie Newstart, Youth Allow .....	NO/YES
Centrelink Pensions ie aged pension .....	NO/YES
Other Aust Pensions .....	NO/YES
Personal Services Income .....	NO/YES
Interest Income .....	NO/YES
Dividends (if yes, pls provide statements) .....	NO/YES
Income from Partnership or Trust .....	NO/YES
Net Income or Loss from Business .....	NO/YES
Capital Gains Income .....	NO/YES
Rental Property Income (pls see worksheet over page) ...	NO/YES
Other Income (please specify) .....	NO/YES
.....	

OTHER WORK RELATED DEDUCTIONS	
Other Expenses	
- Home Office Expenses (inc hrs worked from home)	YES/NO
- Computer and Software Expenses .....	YES/NO
- Telephone/Mobile Expenses .....	YES/NO
- Tools and equipment .....	YES/NO
- Subscriptions and Union Fees .....	YES/NO
- Journals/Periodicals .....	YES/NO
- Depreciation .....	YES/NO
- Expenses in relation to Allowances .....	YES/NO
- Other work deductions .....	YES/NO

OTHER DEDUCTIONS	
Interest & Dividend Deductions .....	YES/NO
Gifts or Donations .....	YES/NO
Undeducted Purchase Price of Annuity (UPP) .....	YES/NO
Cost of Managing Tax Affairs .....	YES/NO
Superannuation Contributions .....	YES/NO

WORK RELATED DEDUCTIONS	
<b>Work-Related Car Expenses</b>	
- Cents per Kilometre Method (Max 5,000km) .....	NO/YES
- Log Book Method .....	NO/YES
- Other Method (1/3 or 12 % Method) .....	NO/YES
<b>Other work-related travel Expenses</b>	
- Employee domestic travel – reasonable allow .....	NO/YES
- Employee claiming actual exp's (receipts required) ....	NO/YES
<b>Work-Related Uniform and Clothing Expenses</b>	
- Protective/Replacement Clothing .....	NO/YES
- Non Compulsory/Compulsory Uniform .....	NO/YES
- Laundry (up to \$150 without receipts) .....	NO/YES
- Other Claims – Mending etc .....	NO/YES
- Sunscreen/glasses & Hats .....	NO/YES
<b>Self Education Expenses</b>	
- Course or Seminar Fees .....	NO/YES
- Student Union Fees .....	NO/YES
- Travel Costs .....	NO/YES
- Other (please specify) .....	NO/YES

OTHER DETAILS	
Private Health Insurance .....	YES/NO
If, yes name of fund: .....	policy no.....
Dependant Children:	
Name .....	DOB..... Student YES/NO
Name .....	DOB..... Student YES/NO
Name .....	DOB..... Student YES/NO
Name .....	DOB..... Student YES/NO

REBATES/TAX OFFSETS	
Are you a Senior Australian (over 65)?.....	YES/NO
Are you a Pensioner? .....	YES/NO
Did you live in a remote zone in .....	YES/NO
Superannuation pension/ETP annuity .....	YES/NO
Did you make Super Contributions for Spouse .....	YES/NO



**RENTAL PROPERTY DETAILS**

Address of Property : .....

Ownership of Property: .....

Purchase Date of Property: \_\_\_\_/\_\_\_\_/\_\_\_\_

Purchase Price of Property (including Legal Fees/Stamp Duty etc): \$.....

Date started being used for Rental Income: \_\_\_\_/\_\_\_\_/\_\_\_\_

Number of weeks this year rented? ..... weeks

Was there any private use of the property? .....

**If you have summary rental statements from a Real Estate Agent, please provide statements, and use the spaces below for any ADDITIONAL income or expenses.**

**INCOME**

(Please provide evidence of rents received eg rental commission statements or bank statements)

Rents Received .....

Other Income .....

**EXPENSES**

(Not all expenses listed below will be applicable. Please provide details on applicable expenses only. Receipts and/or documentation must be kept)

Bank Charges .....	Interest on Loans .....
Advertising .....	Cleaning .....
Garden .....	Insurance .....
Agent Fees .....	Pest Control .....
Postage .....	Printing/Stationery .....
Rates & Water .....	Repairs & Maint .....
Furniture & Fittings .....	Travel Exps .....
Body Corp Fees .....	Other Rental Expenses .....
Additional Information .....	

**OTHER INFORMATION**

If you **SOLD** the property throughout the financial year please provide **sale of property documents**.

**DATE SOLD** \_\_\_\_/\_\_\_\_/\_\_\_\_ **PRICE SOLD \$** \_\_\_\_\_

If you purchased the property throughout the financial year please provide a list & cost of all internal fixtures and fittings as below:

Oven	Stove	Microwave	Clothes Dryer
Fans	Light Fittings	Hot Water System	Air Conditioning
Carpet	Curtains/Blinds	Washing Machine	Lounge/Tables/Beds etc

**I confirm that the details that I have provided to McGrath & Associates – Quality Accountants are true and correct.**

Date ...../...../.....

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**Signature of taxpayer**

.....

**Name (PRINT)**

