

INFORMATION FOR 2018 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 2019. If the relevant information and documentation is not received by the due date, we may not be able to guarantee that your 2018 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 EFT Refunds from 1 July	2014
From 1 July 2014 the ATO will be issuing all Individual Intransfer (EFT) only.	ncome Tax Refunds via Electronic Funds
In order for us as tax agents to comply with this change, we account for each individual (including children) to have you not have to be solely held in your name, if you prefer to us	our refunds deposited into. This account does
BSB:	
ACCOUNT NUMBER:	
ACCOUNT NAME:	

INCOME:

1.	-		ates (including picates attached	oensi —	ons) Yes	s 🗌 I	No 🗌	
2.	Other Sala	ary ii	ncome : (include	s any	directors' fees, com	missions etc	c.)	
3.	Statement -		ayments (if you ^o Statement)	rece	· 		se provide	Eligible Termination
4	Applicable	nonev	received on you	ır haı	_	No 🗌		
T.	Name of Ba		Account No		Total Interest Received \$	TFN Withh	oldina \$	Joint Account?
	Hame of Bal	iik	Account No	•	Nederved \$	1110	olullig ψ	Come Account:
5.	dividend re	vide (einve	stment plan (D	RP)		n't physical	ly get the	that if you are on the money to bank [the ust go in your return.
	ASX Code	N	lo. of shares	U	nfranked Dividend	Franked D	ividend	Franking Credit

Please provide your own list if more convenient.

6.	Employee Shares/Options: Have you Share Scheme?	received	any Shares and/or Options under the Er	nployee
	Yes No If yes, please attach the Em	ployee Sh	are Scheme Statement issued by the er	mployer.
7.	Trusts and Partnerships : (i.e. example of trust or partnership – Please provide income from the funds you list.			
8.	National Rental Affordability Scheme Affordability Scheme? If so, please supply	•	ı provide any rental under the Natonal F	Rental
9.	Capital Gain: Did you sell any assets su 20 September 1985.	ch as sha	res or property which were acquired after	er
	State	Yes	No 🗌	
	If yes then please provide documentation sale / funds received etc.	of when it	was purchased / cost and also docum	ents on
	Shares - Sales			
	Please provide buy & sale contracts			
	ricaso provido daj a care cominacio			
	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	
	Transfer of land registrationConveyancing fees		Agent commission	

10.	Rental Income : Please attach details of the rent received and all expenses in their separate categories. Please supply Lawyers settlement sheets, contract exchanged and agent's invoice, if any, for property acquired. Should you require the services of a Quantity Surveyor for a depreciation report please contact your client manager.
	Refer to the attached schedule for details required for each property.
11.	Foreign Sourced Income : Did you have any foreign income, including rental properties that are positive and negatively geared? Have you paid any foreign tax? If so please provide details.(This may also include managed funds statements ie. Platinum International, etc)
12	. Business Sourced Income : Did you have any business income? If so please provide details including any capital purchases over \$20,000.
13.	Any other income : Did you receive any government allowances, pensions & payments (eg. Newstart, Youth Allowance, Austudy, Australian Government Disaster Recovery Payment & Natural Disaster Relief Recovery Arrangements).
D	A. Loans Are your loans looked after via a broker or directly through a bank manager? EDUCTIONS: Please ensure you are able to substantiate all claims, even if less than \$300.
Re	fer to tax tips for more information.
1.	Motor Vehicle: Did you use your own car for business / work purposes through the year: Yes □ No □
	If yes then please provide one of the following:- Log Book Method – Business % use (please ensure you keep a log book for a continuous period of 12 weeks. If the logbook is over 5 years old or there is significant change in work related usage of vehicle please provide a new logbook.) Please provide details of all expenses you incurred over the financial year including fuel, repairs / maintenance, registration / insurance etc.
	If you have a loan for the vehicle please provide details of the interest you paid over the year and the cost of the car, if you have a hire purchase please provide a copy of the purchase contract.

	KIIO	metres.		
	Kilo	ometres:		
2.	Wo	ork Unifo	rm:	Do you have to wear a monogrammed uniform or protective clothing?
	Yes	s 🗌		No 🗌
				ut of pocket through the year for purchasing any new items (if so please provide rovide details of uniform maintenance (laundry/dry cleaning, etc.)
3.	Oti	her Work	Re	lated Deductions:- (please provide receipts where possible)
		Work rela	ted t	travel expenses
		Union fee	s/p	rofessional bodies
		Home offi	се е	xpenses
				(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 (eg 15%)
				cl. mobile) and Internet expenses. (The ATO is now requiring a four week diary ntained for these forms of usage for verification purposes)
		Diary / Sta	atior	nery / Printing

<u>Kilometres Method</u>: 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

	☐ Tools and	equipment				
	☐ Seminar c	osts or self-educa	tion			
4.	Other: (Any o	costs you incurred	that were directly relate	d to your job).	Please pro	vide details.
5.		ection Insurance	Deductions Income Protection Insur	anca	Yes	No
	ы bo you na	ive tax deddelible	medine i rotection madi	ance	103	NO
	Please pro	ovide details of yo	ur insurance policies.			
Р	olicy Type	Sum Insured	Insurer	Premiums \$	Premium	Frequency
D	EBATES:					
Κ	EDATES.					
1)	Private Hea	Ith Insurance:				
		orivate health insu		Yes [No 🗌
			y of the health fund state are entitled to a rebate.	ement they ser	nd you after	the end of the
	,	,				
٥١	Chaves					
2)	•					
	-		or the full financial year lent (earn less than \$600	Yes 00)		No 🗌
	and wa	as born before 1/7	/1952?	Yes		No 🗌
	-	-	e any benefits from Cer come of the year?			No 📙
	Details of ben	-				
3)	Superannua					
		elf employed, if ye uation for the finan	s, please provide details cial year.	s of contributior	ns you mad	e to your

	D)	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 \(\square \) No \(\square \)
4)	Me	edical Expenses:
	Th	e medical rebate has now been removed except for medical expenses in relation to disability aids,
	atte	endant care or aged care. Please provide a schedule of these expenses where applicable.
		ER: Any other information which you are unsure of, or which you would like us to be aware of : e 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					Year	
PROPERTY DETAILS:						
Address						
Ownership						
Purchase (Contract) D Date deposit was paid	ate I					
Settlement Date		Date first	t rented	Weeks rented	this year	
PURCHASE COSTS:			BORROV	VING EXPENSES		
Purchase Price Conveyancing			Loan fees			
Stamp Duty			S/D on morto	nago		
Other			Mortgage Ins			
Renovations			Other			
Total			Total			
Income for year Rent						
Other Income						
Total						
Total						
Expenses						
Item	Date	Account Ref	Paid to	Amount	Total	
Advertising for						
tenants						
Body Corporate fees						
Body Corporate rees						
Cleaning						
O a serve il Data a						
Council Rates						
Gardening/lawn						
mowing						
Insurance (L/Lord &						
prop)						
Interest on loans						
Land Tax						

tions, chang	ges, scrapping d	uring year	YES	NO
	ges, scrapping do	uring year	YES	NO
	ges, scrapping do ns over \$300)	uring year	YES	NO
eipts for item			YES YES	NO NO
eipts for item	ns over \$300)			_
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Taxpayer's signature...... Date: