



## Tax Year Ending JUNE 2017

### Individual income tax return checklist

<b>Full Name</b>	Mr / Mrs / Miss / Ms		
<b>Name changed since last return?</b>	YES/NO	If YES, previous name:	
<b>Tax File Number</b>		ABN	
<b>Date of birth</b>			
<b>Are you an Australian Resident?</b>	<b>YES / NO / UNSURE</b>		
<b>Address</b>	SUBURB:	STATE:	POSTCODE:
<b>Address (postal)</b> <small>(Put 'as above' if the same)</small>	SUBURB:	STATE:	POSTCODE:
<b>Telephone</b>	M:	Home: ( )	
	Business Hours (work) :		
<b>Email</b>	Main:		
	Secondary:		

**↓ ATO REQUIRE THIS FOR ALL REFUNDS ↓**  
**Bank account details**

<b>Name of account owners:</b>			
<b>BSB:</b>		<b>Account Number:</b>	

## INCOME – Please provide evidence

Please circle **YES** or **NO** for each of the items listed below and provide relevant details (if known) were prompted.

1. **Salary or wages (PAYG Summary(s))** ..... YES/NO
2. Allowances, earnings, tips, director's fees etc ..... YES/NO
3. Employer lump sum payments ..... YES/NO
4. Employment termination payments ..... YES/NO
5. Australian Government allowances and payments like Newstart, youth allowance and austudy payment ..... YES/NO
6. Australian Government pensions and allowances ..... YES/NO
7. Australian annuities and superannuation income streams ..... YES/NO
8. Australian superannuation lump sum payments ..... YES/NO
9. Attributed personal services income ..... YES/NO
10. **Gross Interest Earned** (use net banking and look for interest YTD or your June 30 stmt) ..... YES/NO
11. **Dividends** (attach statements or log into your share register + provide copies) ..... YES/NO
12. **Employee share schemes** (PAYG Summary issued by employer) ..... YES/NO
13. Distributions from partnerships and/or trusts ..... YES/NO
14. Personal services income (PSI) ..... YES/NO
15. Net income or loss from business (as a sole trader) ..... YES/NO
16. Deferred non-commercial business losses ..... YES/NO
17. Net farm management deposits or repayments ..... YES/NO
18. **Capital gains** (from sale of shares or property – We need BUY and SELL info) ..... YES/NO
19. Foreign entities: ..... YES/NO
20. **Foreign source income** you are taxable on your worldwide income (including foreign pensions) and foreign assets or property ..... YES/NO
21. **Rental Property Income** (see last page for property income and exp. summary) ..... YES/NO
22. Bonuses from life insurance companies or friendly societies ..... YES/NO
23. Forestry managed investment scheme income ..... YES/NO
24. Other income (please specify below) ..... YES/NO



# DEDUCTIONS – Please provide evidence

## D1. Work related car expenses

ONLY 2 METHODS AVAILABLE THIS YEAR ONWARDS

- 1. cents per kilometre method (up to a max of 5,000 kms) WORK Kms.....
- 2. log book method – business use .....% *total spend \$.....*  
*(fuel, lease payments, repairs, rego & insurance, depreciation etc)*

## D2. Work related travel expenses

- Employee domestic travel with reasonable allowance ..... YES/NO
  - If the claim is more than the reasonable allowance rate, do you have receipts for your expenses? ..... YES/NO
- Overseas travel with reasonable allowance ..... YES/NO
  - Do you have receipts for accommodation expenses? ..... YES/NO
  - If travel is for 6 or more nights in a row, do you have travel records? (e.g. a travel diary)... YES/NO
- Employee without a reasonable travel allowance ..... YES/NO
  - Did you incur and have receipts for airfares? ..... YES/NO
  - Did you incur and have receipts for accommodation? ..... YES/NO
  - Do you have receipts for hire cars (if applicable)? ..... YES/NO
  - Did you incur and have receipts for meals and incidental expenses? ..... YES/NO
  - Do you have any other travel expenses? ..... YES/NO
- Other work-related travel expenses (e.g., a borrowed car) ..... YES/NO  
*(Please specify)*  
 .....  
 .....

## D3. Work related uniform and other clothing expenses

- Protective clothing ..... YES/NO
- Occupation specific clothing ..... YES/NO
- Non-compulsory uniform ..... YES/NO
- Compulsory uniform ..... YES/NO
- Laundry expenses (up to \$150 without receipts) ..... YES/NO
- Dry cleaning expenses – labelled uniform only ..... YES/NO
- Other claims such as mending/repairs, etc (please specify) ..... YES/NO



**D4. Work related self-education expenses**

Course taken at educational institution AND related to your CURRENT INCOME:

- union fees ..... YES/NO
- course fees related to your income ..... YES/NO
- books, stationery ..... YES/NO
- depreciation ..... YES/NO
- travel ..... YES/NO
- other (please specify) ..... YES/NO

**D5. Other work related expenses - You need receipts for audit**

- Home office expenses – based on hours worked at home (.....hrs) ..... YES/NO
- Computer and software ..... YES/NO
- Telephone/mobile phone – work use %..... YES/NO
- Tools and equipment ..... YES/NO
- Subscriptions and union fees ..... YES/NO
- Depreciation ..... YES/NO
- Sun protection products (i.e., sunscreen and sunglasses) ..... YES/NO
- Seminars and courses not at an educational institution and not reimbursed by work:
  - course fees ..... YES/NO
  - travel ..... YES/NO
  - other (please specify) ..... YES/NO
- Any other work related deductions (please specify) ..... YES/NO

**Other types of deductions**

- D7. Interest deductions ..... YES/NO
- D8. Dividend deductions ..... YES/NO
- D9. Gifts or donations – need receipts or credit card statement. (\$\_\_\_\_\_ total)..... YES/NO
- D10. Cost of managing tax affairs - last yr fee + travel to and from office \$\_\_\_\_\_ ..... YES/NO



**Income tax return checklist continued**

**Other types of deductions (continued)**

- D12. Personal superannuation contributions (**MUST PASS 10% RULE**) ..... YES/NO  
Full name of fund: ..... Account no: .....  
Fund ABN: ..... Fund TFN: .....  
Do you pass the 10% test? ..... YES/NO  
Have you provided the fund a notice of intention to deduct the contribution? ..... YES/NO  
Has this notice been acknowledged by the fund? ..... YES/NO
- D15. Other deductions (please specify) ..... YES/NO  
.....
- L1. Tax losses of earlier income years ..... YES/NO

**Tax offsets/rebates – Please provide evidence**

- T1. Do you have a dependent spouse born on or before 30 June 1952?.....YES/NO
- T2. Did you receive an Australian superannuation income stream? ..... YES/NO
- T3. Did you make superannuation contributions on behalf of your spouse? ..... YES/NO
- T4. **ZONE REBATE**: Did you live in a remote area of Australia or serve overseas with the .....  
Australian defence force or the UN armed forces in 2016? NO FIFO ..... YES/NO
- T5. **OUT OF POCKET MEDICAL EXPENES NO LONGER CLAIMABLE** .....  
To claim this year you must have claimed this offset in last 2 tax years (2014 & 2015)....YES/NO
- T6. Did you maintain an invalid or carer dependant including your spouse, parent,  
Parent-in-law, your or your spouse’s child, brother or sister aged over 16 years old? ..... YES/NO
- T11. Other non-refundable tax offsets (please specify)..... YES/NO



# Other relevant information

## Medicare levy and Medicare levy surcharge

M1. Are you entitled to the Medicare levy exemption or reduction in FY 2017? ..... YES/NO  
 (If yes, please specify):

.....  
 .....

M2. For the entire 2017 income year, were you **and all of you dependants** (including your spouse and children) covered by the appropriate private health insurance hospital cover? ..... YES/NO

### Private health insurance policy details

Please fill in details below – which can be obtained from your private health insurance statement

Health Insurer ID	Member No.	Premiums Eligible for Gov Rebate	Rebate Received	Benefit Code	Other Adult beneficiaries
B	C	J	K	L	
B	C	J	K	L	
B	C	J	K	L	
B	C	J	K	L	

## Adjustments

A1: Were you under the age of 18 on 30 June 2017? ..... YES/NO

A2: Did you become an Australian tax resident at any time during the 2017 income year? ..... YES/NO

A2: Did you cease to be an Australian tax resident at any time during the 2017 income year? .... YES/NO

A3: Did you make a non-deductible (non-concessional) personal super contribution in 2017? .... YES/NO

A4: Did a trust or company distribute income to you in respect of which family trust Distribution tax was paid by the trust or company? ..... YES/NO

C1: Did you pay any tax within 14 days before the due date (e.g., HECS/HELP)? ..... YES/NO

## Income tests information

IT1: Do you have any total reportable fringe benefits amounts in 2017? ..... YES/NO

IT2: Do you have any reportable employer superannuation contributions in 2017? ..... YES/NO

IT3: Did you receive any tax-free government pensions in 2017? ..... YES/NO

IT4: Did you receive any target foreign income in 2017? ..... YES/NO

IT5: Did you have a net financial investment loss in 2017? ..... YES/NO

IT6: Did you have a net rental property loss in 2017? ..... YES/NO

IT7: Did you pay child support in 2017? ..... YES/NO

IT8: HOW MANY dependent children did you have in 2017? 1 - 2 - 3 - 4 - 5 - 6 - 7 ..... <-CIRCLE



**Income tax return checklist continued**

**Spouse details – married or *de facto* (including same sex)**

1. Did you have a spouse for the full year from 1 July 2016 to 30 June 2017? .....YES/NO
  - If you had a spouse for only part of the income year, please specify the dates between 1 July 2014 to 30 June 2017 when you had a spouse:  
From \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_
2. Did your spouse die during the 2017 income tax year? .....YES/NO
3. What is your spouse's name and date of birth? (If you had more than one spouse during 2017, provide the name of your spouse on 30 June 2017 or your last spouse)  
**Name:** .....  
**DOB:** .....
4. Did your spouse (named above) have taxable income for the 2017 income year? .....YES/NO  
If yes, what was the amount? \$.....
5. Did your spouse have a share of trust income on which the trustee is assessed under S.98 of the ITAA36 not included in your spouse's taxable income for 2017.....YES/NO  
If yes, what was the amount? \$.....
6. Did a trust/company distribute income to your spouse in 2017 in respect of which family trust distribution tax was paid by the trust/company? .....YES/NO  
If yes, what was the amount? \$.....
7. Did your spouse have reportable fringe benefits amounts for the 2017 income year? .....YES/NO  
If yes, what was the amount? \$.....
8. Did your spouse receive any Australian Government pensions or allowances (not including exempt pension income) in the 2017 income year?.....YES/NO  
If yes, what was the amount? \$.....
9. Did your spouse receive any exempt pension income in the 2017 income year? .....YES/NO  
If yes, what was the amount? \$.....
10. Does your spouse have any reportable super contributions for the 2017 income year?.....YES/NO  
If yes, what was the amount? \$.....
11. Did your spouse receive any tax-free government pensions paid under the *Military Rehabilitation and Compensation Act 2004*?.....YES/NO  
If yes, what was the amount? \$.....
12. Did your spouse receive any 'target foreign income' in the 2017 income year? .....YES/NO  
If yes, what was the amount? \$.....
13. Did your spouse have a total net investment loss (i.e., the financial investment loss/rental property loss) for 2017.....YES/NO  
If yes, what was the amount? \$.....





**Income tax return checklist continued**

14. Did your spouse pay child support during 2017 ..... YES/NO  
If yes, what was the amount? \$.....
15. If your spouse is 55 to 59 years old, did they receive a superannuation lump sum (other than a death benefit) during the 2017 income year which included a taxed element that does not exceed their low rate cap? ..... YES/NO  
If yes, what was the amount? \$.....

Dated the ..... day of .....20.....

.....  
**Signature of taxpayer**

.....  
**Name (Print)**

**You are done! Now you need to get this checklist and supporting documents to us. We use Dropbox to share files with clients over the web. [Sign up by clicking https://db.tt/5bQxKtq](https://db.tt/5bQxKtq) and following the prompts. Share your tax folder to Ben's email address.**

**It is awesome and FREE! [Watch the video here](#)**

**PLEASE NAME YOUR FOLDER –  
YEAR –LAST NAME – 1<sup>ST</sup> NAME(s)**

**Dropbox too hard? You can email ben at [woodaccounting.com.au](mailto:woodaccounting.com.au) or**

**Mail to Wood Accounting, PO Box 522, SUTHERLAND NSW 1499**





## Investment Property Annual Tax Summary

Please complete a separate summary for each investment property you own

### Property Address

Street		
Suburb	State	Postcode

**Weeks rented this financial year (see Real Estate Statement)**

Date property first earned rental income

/ /
<b>Yes      No</b>

wks

### Have you sold this property?

PLEASE PROVIDE THE BUY CONTRACT AND SELL CONTRACT FOR Capital Gain calculation

NOTE: ATO track all land sales so they are waiting for you to self assess.

### Ownership

	Name	Percentage owned
Person 1		%
Person 2		%
Person 3		%
Person 4		%

### Income

Rent per week	\$	
		/week
Gross Annual rent received before fees	\$	

### Rental Deductions

Property management fees	\$	
Council Rates	\$	
<b>Interest on Investment Loan 1</b>	\$	
<b>Interest on Investment Loan 2</b>	\$	
Bank charges on loans	\$	
Strata Levies / Body Corporate	\$	
Depreciation - Fixtures & Fittings	\$	
Depreciation - Building	\$	
Repairs & Maintenance	\$	
<b>Travel (flights and accom. must be apportioned if combined with holiday)</b>		
Date(s): _____	Accom & Meals \$	
How: _____ Drive (kms) _____	Flights \$	
Insurance - Building and Landlord	\$	
Postage & Stationary	\$	
Other	\$	

**Please ensure you have included all expenses for the full period the property was/is available for rent 1 July - 30 June of the relevant financial year**

Attach all source docs to this summary or email scans of source docs to support this summary



## Further Notes:

Please note anything else you feel may be relevant to us while we prepare your tax returns.

