

## 2017 Income Tax Return Checklist - Individuals

Client Name: _	Email:	
Phone no:		

## **INCOME**

	Category	Y/N	Document	Notes
1	Salary or wages		PAYG group	
			certificates	
2	Allowances, earnings, tips,		Bank records,	
	director's fees		other corro	
3	Employment termination		ETP statements	
	payments			
4	Pensions, annuities, Centrelink		PAYG group	
	payments		certificates, tax	
			statements	
5	Superannuation lumpsums		Stmt from Payee	
6	Interest received		Bank statements	
			showing any tax	
			withheld if	
			applicable	
7	Dividends received		Dividend notices	
8	Trust/partnership distributions		Tax statements	
9	Employee share schemes		Employee share	
			scheme	
			statement	
10	Rental income		Details of	
			income and	
4.4	D. Charles Control		expenditure	
11	Business income		Details of	
			income and	
40	Conital main alid year marks a		expenditure	
12	Capital gain – did you make a			
40	capital gain or loss this year?		Deteile	
13	Other income		Details	
14	Foreign income		Details	

## **DEDUCTIONS**

	Category	Y/N	Document	Notes
1	Work related car		Mileage only applicable if using for vehicle for work purposes (not	
			home to work and back)	
1.1	Did you maintain a logbook for 12 consecutive weeks?		Details	
2	Work related travel		Travel related to employment (flights etc)	
2.1	Did you maintain a travel diary?		Details	
3	Uniform and laundry		Provide details (uniform is limited to occupation specific clothing eg. Nurses uniform. Normal attire does not qualify.	
4	Self-education		Details of course studied, education provider and costs incurred	
5	Other work related		Licenses, union dues, subscriptions, computer expenses, mobile, internet and stationery.	
6	Interest expenses		Interest on investment loans	
7	Gifts and donations		Donation receipts	
8	Cost of managing tax affairs		Invoice from tax agent	
9	Personal superannuation contributions		Date paid and fund name	
10	Other deductions		Income protection premiums	
11	Tax losses from prior years		Details	

## **OTHER DETAILS**

Category	Y/N	Document	Notes
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1	Spouse	Details – name, date of birth, tax file number, taxable income
2	Dependent children	Number and ages
3	Private health insurance	Details of policy
4	Medical expenses rebate	Limited to care for disabled dependants. No claim for normal out-of-pocket costs.
5	Zone – did you live and work in remote zone?	Location and dates
6	Did you become a tax resident during the year?	
7	Did you cease to be a tax resident during the year?	
8	Did you have a Medicare exemption?	Details
9	Do you have a HELP or SFSS student loan?	Details
10	PAYG income tax instalments	Details of PAYG payments made during the year

Please add any other information which you think may be relevant to your current year tax situation: