Individual Tax Return Checklist - Comprehensive

etax local

This symbol means receipts or supporting records are required for that item.

Tax File Number:

Title:	First Name(s):	Surname:

Have you changed your name since your last tax return?

Phone Numbers:	M:	H:

Date of birth: / /

Year of tax return: / /		
Did you live in Australia for the whole tax year?		Yes ☐ No ☐
If not, advise date of arrival: / /		
Are you an Australian citizen?		Yes ☐ No ☐
Are you an Australian Resident for tax purposes?		Yes ☐ No ☐
Bank Details:	BSB:	Account No:
Name of account holder:		
Home Address:	Unit/Level Number:	
	Street Address:	
	Suburb:	
	City:	
	State:	
	Postcode:	
Postal Address: As above ☐	Unit/Level Number:	
	Street Address:	
	Suburb:	
	City:	
	State:	
	Postcode:	
Would you like to pay by 'Fee From Refund'?		Yes ☐ No ☐
Copy of last year's tax return:		Yes ☐ No ☐
Spouse Details Not Applicable ☐	First name(s)	
	Surname	
	Date of birth	
	Taxable income (If known)	
	Dependent children Yes ☐ No ☐	
	Number of dependent children	
Private Health Insurance Yes ☐ No ☐	Fund Name:	
Member Number:		
Proof of Identity (New clients)		Yes ☐ No ☐
Have you accrued bank interest		Yes ☐ No ☐
Details of bank interest earned:		
Do you have debts with government departments?		Yes ☐ No ☐
Details of debts:		
Do you have medical expenses to claim?		Yes ☐ No ☐

Details of medical expenses:		
Wages and Income		
Occupation:		
PAYG Summaries:	How many?	Yes ☐ No ☐

Work related expenses:	
1.	6.
2.	7.
3.	8.
4.	Gifts/Donations:
5.	Last year's tax agent fees:

Copies of dividend statements or employee share scheme statements	Yes ☐ No ☐
Income protection premiums	Yes ☐ No ☐

Rental Properties (Not Applicable ☐)	
Property 1	Unit/Level Number:
	Street Address:
	Suburb:
	City:
	State:
	Postcode:

Name(s) of additional owner(s):	Ownership percentage:

Rental Property 1 Expenses:	
Date property 1st earned rental income or was available for rent: / /	
Rental Income:	$
Body Corporate Fees:	$
Cleaning:	$
Capital Allowance (depreciation on plant):	$
Interest on loans:	$
Legal Fees:	$
Property Agent Fees/Commission:	$
Stationery, Telephone, Postage:	$
Sundry rental costs:	$
Other rental income:	$
Advertising for tenants:	$
Borrowing expenses:	$
Council rates:	$
Gardening/lawn mowing:	$
Insurance:	$
Land tax:	$
Pest control:	$
Repairs and Maintenance:	$
Capital Works deductions (Building write off):	$
Travel expenses:	$
Water Charges:	$
Obtain Quantity Surveyors depreciation report if available:	Yes ☐ No ☐
Confirm tenant is at arm's length to the owner:	Yes ☐ No ☐

Property 2	Unit/Level Number:
	Street Address:
	Suburb:

	City:
	State:
	Postcode:

Name(s) of additional owner(s):	Ownership percentage:

Rental Property 2 Expenses:	
Date property 1st earned rental income or was available for rent: / /	
Rental Income:	$
Body Corporate Fees:	$
Cleaning:	$
Capital Allowance (depreciation on plant):	$
Interest on loans:	$
Legal Fees:	$
Property Agent Fees/Commission:	$
Stationery, Telephone, Postage:	$
Sundry rental costs:	$
Other rental income:	$
Advertising for tenants:	$
Borrowing expenses:	$
Council rates:	$
Gardening/lawn mowing:	$
Insurance:	$
Land tax:	$
Pest control:	$
Repairs and Maintenance:	$
Capital Works deductions (Building write off):	$
Travel expenses:	$
Water Charges:	$
Obtain Quantity Surveyors depreciation report if available:	Yes ☐ No ☐
Confirm tenant is at arm's length to the owner:	Yes ☐ No ☐

Business and Investments (Not Applicable ☐)	
Australian Business Number (ABN):	
Business address	Unit/Level Number:
	Street Address:
	Suburb:
	City:
	State:
	Postcode:
Type of business:	
Date the business started: / /	
Profit and Loss statement:	Yes ☐ No ☐
Balance Sheet:	Yes ☐ No ☐
Super contributions:	$
If distributions received from a Partnership or Trust, a copy of that tax return:	Yes ☐ No ☐
Managed Funds Statement:	Yes ☐ No ☐
Foreign Income:	$
If GST registered, a copy of each quarter's or annual GST reconciliation:	Yes ☐ No ☐
Prior year losses to be brought forward:	$
Asset depreciation schedule:	Yes ☐ No ☐
Stock Valuation method:	

Can you provide a copy of your software or access to software file:	Yes ☐ No ☐
Capital Gains Tax (Not Applicable ☐)	
For property – Copy of purchase and sale contracts:	Yes ☐ No ☐
Shares – provide share statements showing purchases and sales:	Yes ☐ No ☐
Other – provide details of expenses or receipts related to the capital gain or loss:	Yes ☐ No ☐
a.) Do you have a capital loss brought forward?	Yes ☐ No ☐
b.) If so, what is the capital loss?	$
Other Information	
Are you a sole parent?	Yes ☐ No ☐
Centrelink Statements:	Yes ☐ No ☐
Dependants – Names and birth dates:	
1.	3.
2.	4.
Medical receipts	Yes ☐ No ☐
Statements for any other Income:	Yes ☐ No ☐
Super contributions on behalf of spouse:	$
Zone rebate:	$
Imputation credit information from dividends:	Yes ☐ No ☐

Additional Information or questions: