

Individual Tax Return Information Checklist

For the year ended 30 June 2018



- | | Income | Tick |
|-----|--|--------------------------|
| 1. | Please provide all PAYG Summaries from employer(s), Centrelink, pensions or superannuation funds. | <input type="checkbox"/> |
| 2. | Please provide details of Interest Received from bank accounts. | <input type="checkbox"/> |
| 3. | Please provide a copy of Annual Tax Statement for any Managed Fund Investments. | <input type="checkbox"/> |
| 4. | Please provide details of any dividends received on shares held during the year. | <input type="checkbox"/> |
| 5. | Please provide details of any assets sold during the year that may be subject to Capital Gains Tax.
<i>For shares, please provide buy and sell contracts.
For property, please provide a copy of the original purchase contract and settlement statement together with the sale contract and settlement statement.</i> | <input type="checkbox"/> |
| 6. | Please provide details of income and expenses of any rental properties. Where possible, please provide agent annual summaries. | <input type="checkbox"/> |
| 7. | Please provide details of any tax-free Government pensions you or your spouse received from Centrelink or the Department of Veterans' Affairs. | <input type="checkbox"/> |
| 8. | Please provide details of any income earned, derived or received from outside Australia (including gifts from relatives, foreign business investments and exempt foreign employment income) for you and your spouse. | <input type="checkbox"/> |
| 9. | Please provide details of any other income received which you may believe may be assessable for tax purposes.
Please provide description: | <input type="checkbox"/> |
| 10. | <hr/> Please provide details of discounts received on Employee Share Schemes. | <input type="checkbox"/> |

Individual Tax Return Information Checklist



Continued...

- | | Deductions | Tick |
|-----|--|--------------------------|
| 1. | Please give details of any work-related motor vehicle expenses in relation to vehicles owned in your personal names.
<i>If log book completed, please provide business percentage and expenses incurred.</i>
<i>If no log book, please provide business kilometers travelled during the year and the model/make and engine capacity of the vehicle.</i> | <input type="checkbox"/> |
| 2. | Please supply details of any work-related travel incurred by you personally i.e. train, bus, taxi, air fares, accommodation, meals, etc. | <input type="checkbox"/> |
| 3. | Please provide details of any uniform, laundry or protective clothing expenses connected with your work. | <input type="checkbox"/> |
| 4. | Please provide details of any self-education expenses incurred which have a connection to your current employment i.e. university fees, text books, etc. | <input type="checkbox"/> |
| 5. | Please give details of any work-related expenses i.e. Union fees, home office (electricity and phone), seminars, subscriptions, etc. | <input type="checkbox"/> |
| 6. | Please provide details of any donations made during the year. | <input type="checkbox"/> |
| 7. | Please provide details of any sickness, accident, or income protection insurance policy premiums made. | <input type="checkbox"/> |
| 8. | Please provide details of any personal superannuation contributions or spouse contributions made. From this financial year ALL tax payers who contributed funds into superannuation are entitled to claim a tax deduction. Please also provide a copy of the completed notice of intent to claim a tax deduction form, and the acknowledgement from the fund (or discuss this with us).
<i>Please provide the Funds Name, ABN, TFN and your Member Number.</i> | <input type="checkbox"/> |
| 9. | Please provide details of any eligible personal super contributions made (for which you are not claiming a deduction) and wish to claim the super co-contribution from the Australian Tax Office. | <input type="checkbox"/> |
| 10. | Please provide details of any child support paid or benefits provided for the maintenance of your child paid by you or your spouse. | <input type="checkbox"/> |

Tax Offsets

Tick

1. Please give full details of partner/dependents (full name & date of birth):
 - a _____
 - b _____
 - c _____
 - d _____

2. Did you receive family payments fortnightly from Family Assistance Office?
3. Did you have private health insurance? If yes, please provide an annual Health Fund Statement.
4. Have you invested in an Early Stage Innovation Company or become a partner of an Early Stage Venture Capital Limited Partnership? If you are unsure, please contact our team to discuss.
5. Did you incur net medical expenses for you or your dependents greater than \$2,333 for the year on **disability aids, attendant care, or aged care?**

If yes, please provide details including a copy of your Medicare Card as we require this to confirm out of pocket expenses through Medicare. Also, if you have Private Health Insurance please request an Annual Benefit Statement which shows your out of pocket expenses through the fund.

The net medical expenses tax offset is being phased out.

From 2015-16 until 2018-19, claims for this offset are restricted to net eligible expenses for disability aids, attendant care or aged care.

Net expenses are your total eligible medical expenses minus refunds from Medicare, National Disability Insurance Scheme (NDIS) and private health insurers which you or someone else, received or are entitled to receive.

This offset is income tested. If you are eligible for the offset, the percentage of net medical expenses you can claim is determined by your adjusted taxable income (ATI) and family status.

Bank account details required

The ATO have advised that they will only issue refunds via direct Bank Deposit. In order to ensure that your refund is processed as quickly as possible, please provide us the details of the bank Account into which your refund is to go, if applicable.

Account name: _____
 BSB: _____
 Account number: _____

Additional information (if necessary):