

INCOME TAX RETURN 2017-2018

CLIENT INFORMATION CHECKLIST

To ensure you declare income from all sources and claim the deductions you are entitled, it is to **YOUR ADVANTAGE** to take time in completing this checklist. Your tax return will be prepared in accordance to the information provided below.

<u>Clients must answer all questions</u> by circling either the **YES** or **NO** response. Where replies are in the affirmative, <u>details must be supplied in the space provided or on an attached sheet.</u>

PERSONAL DETAILS Name: Mr., Mrs., Ms., Miss _____ Tax File No _____ Address: Tel No _____ Fax No ____ _____ E-mail Address____ Change of address? No/Yes _____ Date of Birth: Resident Full Year? Yes/No_____ Occupation (Brief description): ___ No/Yes Change in marital status? Spouse: (if applicable) - please fill details under item 'O' Spouse's Tax File No_____ Spouse Date of Birth____ No. of Dependants: Dependant's Name Date of Birth Bank Account Details:-Please ensure that your bank details including BSB and Account number are correct for ATO to EFT refund. Name of Account: BSB:



Account No:

INCOME

Did	you receive income	from the following	ng?						
1.	Salary or wage income				No / Yes				
2.	Allowances, earnings, tips, directors' fees				No/ Yes				
3.	Employer lump sum payments				No/ Yes				
4.	Employer eligible te	rmination Payme	ents (ETP)		No/ Yes				
5.	Australian government newstart, youth allow				No/Yes				
6.	Australian Governm	ent pension and	allowances		No/ Yes	i			
7.	Australian annuities	and superannuat	ion income stream	ıs	No/Yes				
8.	Australian superann	uation lump sum	payments		No/Yes				
9.	Attributed Personal Services Income Does 80% of income come from one source?				No Yes				
10.	Gross Interest								
	Name of Bank		Bank A/C No.		Interest				
									
				 -					
				 -					
11.	Dividends								
	Payers Name	Date <u>Received</u>	Franked <u>Dividend</u>	Unfranke <u>Dividend</u>		Imp. <u>Credit</u>		Withholding <u>Tax</u>	

12.	Employee share schemes	No/Yes
13.	Distributions from partnerships and/or trusts	No/Yes
14.	Personal services income (PSI)	No/Yes
15.	Net income or loss from business	No/Yes
16.	Deferred non-commercial business losses	No/Yes
17.	Net farm management deposits or withdrawals	No/Yes
18.	Capital gains (from all sources including shares, Real estate & other property)	No/Yes
19.	Foreign entities	No/Yes
20.	Foreign source income and foreign assets or property including foreign source pension or annuity.	No/Yes
21.	Rental Income	No Yes
	Date property was purchased	
	Date the property first earned rental income	
	No. of weeks the property was rented out this year.	
	***Please provide income and expenses for the rental property	y .
22.	Bonuses from life insurance companies or friendly societies	No/Yes
23.	Forestry managed investment scheme income	No/Yes
24.	Other income (please specify)	No/Yes

DEDUCTIONS – Please provide evidence

D1. Work related car expenses

Cents per kilometer method (66 cents per kilometre)Log book method	No/YesNo/Yes
- Log book method	NO/ 1 cs
D2. Work related travel expenses	
Employee domestic travel with reasonable allowance	No/Yes
- If the claim is more than the reasonable allowance rate,	
do you have receipts for your expenses?	No/Yes
Overseas travel with reasonable allowance	No/Yes
- Do you have receipts for accommodation expenses?	No/Yes
- Of travel is for 6 or more nights in a row, do you have travel	
records? (eg. a travel diary)	No/Yes
Employee without a reasonable travel allowance	No/Yes
- Did you incur and have receipts for airfares?	No/Yes
- Did you incur and have receipts for accommodation?	No/Yes
- Do you have receipts for hire cars (if applicable)?	No/Yes
- Did you incur and have receipts for meals and	
incidental expenses	No/Yes
- Do you have any other travel expenses?	No/Yes
Other work-related travel expenses (eg. A borrowed car), specify	No/Yes
D3. Work related uniform, occupation specific or Protective clothing, laundry & dry cleaning expense	
Provide clothing	No/Yes
Occupation specific clothing	No/Yes
Non-compulsory uniform	No/Yes
Compulsory uniform	No/Yes
Conventional clothing	No/Yes
Laundry expenses (up to \$150 without receipts)	No/Yes
Dry cleaning expenses	No/Yes
Other claims such as mending/repairs, etc (please specify)	No/Yes
D4. Work related self-education expenses	
Course taken at educational institution:	
- Interest on borrowing used for course fees	No/Yes
- Course fees	No/Yes
- Books, stationery	No/Yes
- Depreciation	No/Yes
- Travel	No/Yes
- Other (please specify)	No/Yes

D5. Other work related expenses

Home	office expenses	No/Yes	
Comp	uter and software	No/Yes	
Teleph	ione/mobile phone	No/Yes	
Tools	and equipment	No/Yes	
Subsci	ription and union fees	No/Yes	
Journa	ls/periodicals	No/Yes	
Depre	ciation of asset for work related purpose	No/Yes	
Sun pr	otection products (ie. sunscreen and sunglasses)	No/Yes	
Semin	ars and Conference not at an educational institution:		
-	Travel	No/Yes	
-	Other (please specify)	No/Yes	
Any of	her work related deduction	No/Yes	
Other	types of deductions		
D6.	Low value pool deduction	No/Yes	
D7.	Interest deductions	No/Yes	
D8.	Dividend deductions	No/Yes	
D9.	Gifts or donations	No/Yes	
D10.	Cost of managing tax affairs	No/Yes	
D11.	Deductible amount of undeducted purchase price of a		
	foreign pension or annuity	No/Yes	
D12.	Personal superannuation contributions	No/Yes	
	Full name of Fund		
	Account No:		
	Fund ABN:	Fund TFN:	
	Have you provided the fund a notice of intention to		
	deduct the contribution?	No/Yes	
	Has this notice been acknowledged by the fund?	No/Yes	
D13.	Deduction for project pool	No/Yes	
D14.	Forestry managed investment scheme deduction	No/Yes	
D15.	Other deductions (Not claimable at item D1 to D14,		
	Please specify, eg Income Protection Insurance)	No/Yes	
L1. Tax losses of earlier income years		No/Yes	

Tax offsets/rebates

TI.	Are you a senior Australian or pensioner/ Self -funded retired	es?No/Yes
T2.	Did you receive an Australian superannuation income stream	? No/Yes
T3.	Did you make superannuation contributions on behalf	
	Your spouse?	No/Yes
T4.	Did you live in a remote area of Australia or serve overseas	
	With Australian defence force or the UN armed forces in	
	2018 (Not applicable for FIFO)	No/Yes
T5.	Did you have net medical expenses in 2018?	
	If so, do these medical expenses include expenses relating	
	to disability aids, attendant care or aged care expenses?	No/Yes
T6.	Did you maintain a dependant who is unable to work due	
	to invalidity or care obligations?	No/Yes
T7.	Are you entitled to claim the landcare and water facility	
	tax offset?	No/Yes
T8.	Did you contribute to an early stage venture capital limited	
	partnership which become unconditionally registered on or	
	after 7/12/2015?	No/Yes
T9.	Did you invest in early stage innovation company.	No/Yes
T10.	Other non-refundable tax offsets (please specify)	No/Yes
T11.	Other refundable tax offsets (please specify)	No/Yes

Private Health Insurance Did you have private health insurance for the full 2018 income year? No/Yes_____ If yes, please provide details: Membership no: Health Insurer: If not insured for full year, please specify start date:/..... And/or end date:/....... Kindly provide a copy of the private health statement 2018 from your health provider. Other relevant information A. Were you on a 417 or 462 working holiday visa at any No/Yes time during 01/7/2017 to 30/6/2018? B. Are you entitled to the Medicare levy exemption or No/Yes____ reduction in 2018? C. Were you under the age of 18 on 30^{th} June 2018? No/Yes____ D. Did you become an Australian tax resident at any time during the 2018 income year? No/Yes E. Did you cease to be an Australian resident at any time during the 2018 income year? No/Yes F. Did you make a non-deductible (non-concessional) No/Yes___ personal super contribution? G. Did you have a spouse at any time during the 2018 income tax year? No/Yes H. Do you have a HECS/HELP liability or a student financial Supplement loan debt? No/Yes_____ I. Did you pay any tax within 14 days before the due date of the liability (e.g. HECS/HELP)? No/Yes J. Did a trust or company distribute income to you in respect of which family trust distribution tax was paid by the trust company? No/Yes K. Do you have a loan with a private company or have such a loan amount forgiven? No/Yes L. Did you receive any benefit from an employee share a acquisition scheme? No/Yes M. Family Tax Benefit (FBT) Did you have care of a dependent child in 2018? No/Yes Did you or your spouse receive FTB through the Department of Human Services in 2018? No/Yes N. Did you make a gain or loss from financial arrangements and wish to elect to apply the new changes to bring them into No/Yes_ account for tax purposes in the 2018 income tax year? O. Income tests information Do you have any Total reportable fringe benefits amounts in No/Yes Do you have any Reportable employer superannuation contributions in 2018? No/Yes Did you receive any tax-free government pensions in 2018? No/Yes Did you receive any target foreign income in 2018? No/Yes____ Did you have a net financial investment loss in 2018? No/Yes_____

No/Yes_____

No/Yes

Did you have a net rental property loss in 2018?

Did you pay child support in 2018?

O. Spouse Details (if applicable)

Did you have a spouse for the full year from 1 st July 2017 to	
	No/Yes
From/to//	
What was your spouse's taxable income for the 2018 income year?	No/Yes
Does your spouse have as share of trust income on which the trustee	
is assessed under section 98 that has not been included in your	
spouse's taxable income for the 2018 income year?	No/Yes
Did a trust or company distribute income to your spouse in respect of	
which family trust distribution tax was paid by the trust or company	
for the 2018 income year?	No/Yes
Did your spouse have any reportable fringe benefits amounts for the	
2018 income year?	No/Yes
	No/Yes
• 1	
•	No/Yes
· ·	No/Yes
	No/Yes
•	No/Yes
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•	No/Yes
• • • • • • • • • • • • • • • • • • • •	No/Yes
cap?	No/Yes
r information relevant to the completion of my 2017/2018	
	No/ Yes
TED this day of 20	
	If you had a spouse for only part of the Income year, please specify the dates between 1st July 2017 to 30th June 2018 when you had a spouse: From/

2017 -2018 INCOME TAX RETURN CLIENT INFORMATION CHECKLIST

CLIENT SUBSTANTIATION DECLARATION

Work, car and business travel expenses.

In addition, I have been informed by you of the need to OBTAIN ORIGINAL RECEIPTS which must be kept for a minimum of five (5) years from the date of lodgement of my return carrying details of:

- 1. Name of supplier
- 2. Amount of expense
- 3. Nature of goods and services, (noting the specific type of items purchased or expenditure incurred which I am able to personally record up to the date of lodgement of my return where not adequately noted by the supplier).
- 4. Date of expense, (which I am able to personally record where not noted by the supplier); and
- 5. The date of the documents.

Penalties to apply with incorrect returns

I have also been advised by you of the additional tax, penalty charge, interest component liability and possible prosecution action which could be initiated by the ATO if I lodge an incorrect tax return.

Income from all sources in and out of Australia for the year of income

You have advised me that I cannot make a claim for an amount which is not allowable for income tax purposes and that I must declare income from all sources, in and out of Australia, including net capital gains received for the year of income in my tax return.

Apportionment

Where items are used for both business and private purposes, e.g. car, mobile telephone, home telephone, computer etc., I advise I have kept appropriate apportionment documents to verify my business usage claim and that my employer will verify that it was necessary to incur such expenditure in earning my income. Further, I have instructed you to prepare the return based on my specific instructions on the understanding I will be able to produce such information to the satisfaction of the ATO in an audit situation.

Audit matters

I further confirm that I am also aware:

1. of the procedures to follow if a document is lost or destroyed.

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- 2. that I may be required to verify any income or expense item noted in my return in an audit situation; and
- that I understand the Substantiation schedule I should complete for all work, car and travel expense claims under self assessment.

I declare that:

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- If in any case, I did not have the receipts to substantiate the above claims which I confirm to be in existence prior to lodgement of this return, I will make them available if required by the Tax Office, and
- You have clarified what written evidence including car/travel records will be required during an audit and penalties (including prosecution) that may be applied if incorrect claims are identified in an audit situation.

Dateu tile	uay 01 20
Signature of taxpaye	r
Name (Print)	•••••