

# 2019 Individual Income Tax Return Checklist

Full Name	
Tax File Number (TFN)	
Has name changed since last return?	Yes / No If Yes, previous name:
Date of birth	
Are you an Australian resident?	Yes / No / Unsure
ABN (if applicable)	
Address	
Address (postal) <i>(Put 'as above' if the same)</i>	
Telephone contacts	Mobile:
	Business Hours (work):
	After Hours (home):
Email	
Electronic banking details <i>(for refund if applicable)</i>	BSB:
	Account Number:
	Account Name:
Main occupation	
Spouse name and TFN	

Please circle **YES** or **NO** for each of the items listed below:

## INCOME – Please provide evidence

1. Salary or wages: \$ \_\_\_\_\_ ..... 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 payments: \$ \_\_\_\_\_ ..... 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 ..... YES/NO
11. Dividends: \$ \_\_\_\_\_ ..... YES/NO
12. Employee share schemes ..... 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. Capital gains ..... YES/NO
- 18. Foreign source income (including foreign pensions) and foreign assets or property ..... YES/NO
- 19. Rent ..... YES/NO
- 20. Other income (please specify below) ..... YES/NO
- .....
- .....

**DEDUCTIONS-Please provide evidence**

**D1. Work-related car expenses**

- Cents per kilometre method (up to a maximum of 5,000 kms) ..... YES/NO
- Log book method ..... YES/NO

**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) (please specify) ..... YES/NO
- .....
- Do you have any other travel expenses? ..... YES/NO

**D3. Work-related clothing, laundry and dry cleaning expenses**

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

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

Course taken at educational institution:

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

**D5. Other work related expenses**

- Home office expenses ..... YES/NO
- Computer and software ..... YES/NO
- Telephone/mobile phone ..... YES/NO
- Tools and equipment ..... YES/NO
- Subscriptions and union fees ..... YES/NO
- Sun protection products (i.e., sunscreen and sunglasses) ..... YES/NO
- Seminars and courses not at an educational institution:

  - 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**

- D6. Gifts or donations ..... YES/NO
- D7. Cost of managing tax affairs \$ \_\_\_\_\_ ..... YES/NO
- D8. Personal superannuation contributions ..... YES/NO

  - Full name of fund: .....
  - Account no: .....
  - Fund ABN: .....
  - Fund TFN: .....

- 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
- D9. Other deductions (please specify) ..... YES/NO
- L1. Tax losses of earlier income years ..... YES/NO

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

- T1. Are you a senior Australian or a pensioner? ..... 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. Did you have net medical expenses in 2019? ..... YES/NO  
 If so, do these medical expenses include expenses relating to disability aids, attendant care or aged care expenses? ..... YES/NO
- T5. Other non-refundable tax offsets (please specify) ..... YES/NO
- T6. Other refundable tax offsets (please specify) ..... YES/NO

**Other relevant information**

- A. Are you entitled to the Medicare levy exemption or reduction in 2019? ..... YES/NO  
 (If yes, please specify): .....
- B. Did you have private health insurance in 2019? ..... YES/NO
- C. Did you become an Australian tax resident at any time during the 2019 income year? .. YES/NO
- D. Did you cease to be an Australian tax resident at any time during the 2019 income year? . YES/NO
- E. Did you make a non-deductible (non-concessional) personal super contribution? ..... YES/NO
- F. Do you have a HELP liability, Student Financial Supplement Loan debt, Student Start-up Loan debt or Trade Support Loan debt? ..... YES/NO
- G. Are you a working holiday maker in Australia on a 417 (working holiday) visa or 462 (working holiday) visa? ..... YES/NO
- H. Did you receive any benefit from an employee share acquisition scheme?..... YES/NO
- I. Family Tax Benefit ('FTB'):  
 – Did you have care of a dependent child in 2019? ..... YES/NO
- J. Income tests information  
 – Do you have any total reportable fringe benefits amounts in 2019? ..... YES/NO  
 – Do you have any reportable employer superannuation contributions in 2019? ..... YES/NO  
 – Did you receive any tax-free government pensions in 2019?..... YES/NO  
 – Did you have a net financial investment loss in 2019? ..... YES/NO  
 – Did you have a net rental property loss in 2019? ..... YES/NO  
 – Did you pay child support in 2019? ..... YES/NO  
 – Number of dependent children? \_\_\_\_\_
- K. Spouse details (if applicable)  
 – Did you have a spouse for the full year from 1 July 2018 to 30 June 2019? ..... YES/NO  
 If you had a spouse for only part of the income year, please specify the dates between 1 July 2018 to 30 June 2019 when you had a spouse:  
 From \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_  
 – What was your spouse's taxable income for the 2019 income year? \$ \_\_\_\_\_  
 – Does your spouse have a share of trust income on which the trustee is assessed under Section 98 that has not been included in your spouse's taxable income ..... YES/NO  
 – If your spouse is 55 to 59 years old, did they receive a superannuation lump sum (other than a death benefit) during the 2019 income year that included a taxed element that does not exceed their low rate cap? ..... YES/NO

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

Signature of taxpayer .....

Name (print) .....

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