

2009 INDIVIDUAL TAX RETURN CHECKLIST

If you require more copies of this checklist please contact our office or head to our website
www.byfordaccountants.com.au

INCOME:

1. **Job Description** You: _____ Partner: _____

2. **Group Certificates** (including pensions) Yes No

Please attach all copies of your certificates. Number of certificates attached: _____

3. **Other Salary Income: Please provide details of all salaries received:** (eg. director's fees, partner's salaries & commissions etc) _____

4. **Termination Payments** (If you received a lump sum termination, please provide the Employment Termination Statement – ETP Statement) **Please attach all copies of your certificates.**

Applicable Yes No

5. **Interest** (money received on your bank accounts or accounts held in trust for children)

Name of Bank	Account No.	Branch	Total Interest Received \$	TFN Withholding \$	Is this a Joint Account?

6. **Dividends**

Please provide copies of dividend statements of income received. Please note: If you have chosen a **dividend reinvestment plan (DRP)** which means you don't physically receive any money, instead the fund uses that money to buy you more shares, it is still income and must go in your return

7. **Trusts and Partnerships:** (i.e. example of trusts is BT funds, Merrill Lynch, AXA etc.). **Please provide documents to show income from the funds.**

8. **Capital Gain:** Did you sell any assets such as **shares or property** that were acquired after 20 September 1985?

Applicable Yes No

If yes, then please provide documentation of when it was purchased / cost and documents on sale / funds received. (See Rental property checklist for more details).

9. **Rental Income:** Please refer to the rental property checklist attached for further details.

10. **Any Other Income:** (Please provide details of any income you received in the financial year that does not fit into any of the above categories. For example, Income Protection Payments, Jury Duty, other Contract Income.)

11. **Meal Allowance:** What was the amount received per meal? _____

DEDUCTIONS: Please ensure you are able to substantiate all claims, even if less than \$300.

1. **Motor Vehicle:** Did you use your personal car for work purposes through the year?

(This can include travel incurred whilst attending work related seminars or training courses and travel between a first and second job. Travel to and from work is **not** claimable unless you are required to carry heavy equipment)

Yes No (If yes, please complete one of the following options)

Log Book Method – Business % use (please ensure you keep a log book for a continuous period of 12 weeks)

a. Please provide details of all expenses you incurred over the financial year including fuel, repairs / maintenance, registration / insurance etc.

b. If you have a loan/lease for the vehicle, please provide details of the interest you paid over the year and the cost of the car. If you have a hire purchase, please provide a copy of the purchase contract.

Kilometres Method: You use your car for work, but have not kept a logbook. Let us know how many kilometres you would have travelled for work. The maximum the tax office allows you to claim is 5000 kilometres per car.

Kilometres: _____ Vehicle owned by: _____

Car Engine Size & Model: (in litres i.e. 1.6 litres): _____

2. **Work Uniform:** Do you have to wear a logo uniform or protective clothing?

Yes No

If yes, were you out of pocket through the year for purchasing any new items? (If so, please provide details).

3. **Other Work Related Deductions:** (Please provide the amounts that you would like to claim) -

Diary \$ _____ Stationery \$ _____ Work materials \$ _____ Tools \$ _____

Home Office Expenses: Internet \$ _____ Phone \$ _____ Power \$ _____

Union fees \$ _____ Professional memberships \$ _____ description _____

Sickness & accident insurance \$ _____ Income protection insurance \$ _____

Donations (Raffle tickets and lucky numbers are not deductible)

\$ _____ description _____ \$ _____ description _____

\$ _____ description _____ \$ _____ description _____

Voluntary School building fund payments _____

Seminar costs or self education \$ _____ description _____

\$ _____ description _____

4. **Other:** (Any costs you incurred that were directly related to your job). Please provide details.

Note: If you have attended University, now or in the past and are paying off your fees through HECS, please provide us with your HECS statement to include in your return. Do not be too alarmed if you do not receive this statement, as most will come to our office.

REBATES:-

1. **Private Health Insurance:**

Do you have private health insurance? Yes No

Please provide us with copy of the health fund statement your health fund sent you after the end of the financial year. This will tell us if you are entitled to a rebate.

Does your health insurance cover hospital admissions? Yes No

2. **Education Rebate:**

Did you or your partner receive Family Tax Benefit **part A**? Yes No

Please state the name of the individual receiving this payment: _____

Please complete the table below for each eligible child and provide receipts to support your claims.

(For more details of what expenses qualify for the education rebate please refer to the article in our newsletter)

Dependant's Name					
Primary or Secondary (Please circle)	P / S	P / S	P / S	P / S	P / S
Total expenditure on:	\$	\$	\$	\$	\$
Computer related expenses					
Computer related equipment					
Home internet connection					
Computer software					
Stationery, textbooks and other learning materials					
Total eligible expenses					

3. **Medical Expenses:** You may be entitled to a rebate if your out of pocket expenses on medical exceeds \$1500. (This means, if you are in a private health fund, the portion of expenses that you do not get back.) Please provide a summarised total of your expenses from Medicare & your private health fund, for prescriptions contact your chemist.

4. **Spouse**

- Did you have a spouse for the full financial year? Yes No
- Did your spouse earn less than \$6000? Yes No
- Does your spouse receive any benefits from Centrelink? Yes No
- If we will not be preparing your spouse's return,
Please record their taxable income: \$ _____

Details of Centrelink benefits:

5. **Superannuation:**

- a. Have you made a contribution to your spouse's superannuation fund on their behalf? If yes, please provide details of this event.
 - b. Are you self-employed? If yes, please provide details of contributions you made to your superannuation fund for the financial year.
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6. **Zone Rebate:** If you worked away from home within this year, you may be eligible for a zone rebate. Please provide us with the details of where you were situated & the dates for which you were positioned here:

Location	Start date of posting	Finish date of posting

7. **Other:** Please include details of any other information you would like us to be aware of if you are unsure of the category it belongs:
