



Illingworth David
Accountants & Consultants

www.illingworthdavid.com.au

Individual Income Tax Return Checklist (detailed)

IMPORTANT NOTE – WORKFLOW MANAGEMENT

(During peak period of July/December a turnaround time of 6-8 weeks is expected)

Please advise the following:

- a. Return required urgently? Yes No (refer b)
- b. Time required (please choose) 9-15 weeks 16 -24 weeks anytime prior to due date

Name:

Address:

Ph: Wk: M:

Email:

INCOME

Did you receive income relating to any of the following categories? (please attach details if you answer “yes” to any of the following)

- | | | |
|--|-----------------------------|------------------------------|
| Salary and wages/PAYG payment summaries | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| Centrelink PAYG payment summary | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| Aust. government pensions and other allowances | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| Other Australian pensions or annuities | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| Investment income including interest, dividends and/or distributions | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| Income from partnerships and/or trusts | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| Did you have a Capital Gain from a sale of assets? | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| Foreign source income (incl foreign pensions) | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| Rental income & expenses | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| Bonuses from life assurance or friendly society policy | No <input type="checkbox"/> | Yes <input type="checkbox"/> |
| Other income (please specify) | No <input type="checkbox"/> | Yes <input type="checkbox"/> |

..... \$

..... \$

Geelong - Head Office

441 Moorabool St
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Lorne

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TAX OFFSETS / REBATES / OTHER

(please attach details if you answer "yes" to any of the following)

- Did you claim the Baby Bonus in the 2008 year? No Yes
- Do you wish to claim a Spouse rebate (without dependent child) No Yes
- Did you have Private Health Insurance? No Yes
- Superannuation contributions on behalf of spouse No Yes Amount: _____
- Were you out of pocket more than \$1,500 for medical expenses? No Yes
- Do you have an amount to claim related to the new Education Tax Refund? (see "Tax Facts" on our web site for more information) No Yes
- Do you have an accumulated HELP debt? No Yes
- Do you have an accumulated SFSS loan? No Yes

DEDUCTIONS

| Work related car expense claims | | | |
|---|------------|---------------------------------|----|
| Vehicle Type | | | |
| Kilometre claim - if less than 5000kms | kms | | |
| OR Percentage claim for work use (log book) | % work use | | |
| Interest on Loan | \$ | Loan payments | \$ |
| Fuel | \$ | Repairs & services | \$ |
| Car washes | \$ | Registration, insurance & RACV | \$ |
| Other work related travel expenses, air fare/ train / accommodation / meals etc | | | |
| Work related uniform & other clothing expenses | | Other expenses | |
| Protective clothing | \$ | Power & Gas for working at home | \$ |
| Uniforms | \$ | Computer, internet and software | \$ |
| Laundry (up to \$150 without receipts) | \$ | Home telephone | \$ |
| Dry cleaning | \$ | Mobile telephone | \$ |
| | | Stationery | \$ |
| Work related self education expenses | | Tools and equipment | \$ |
| Course Fees (HELP is not deductible) | \$ | Subscriptions | \$ |
| Books | \$ | Seminars, short courses | \$ |
| Travel | \$ | Journals / periodicals | \$ |
| Stationery | \$ | Sunscreen / sunglasses | \$ |
| Computer / internet | \$ | Union fees | \$ |
| Other (please specify) | \$ | Other (please specify) | \$ |
| | | | |

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| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

Deductions against investment income:

| | | | |
|-----------------------|----|-------------------|----|
| Loan interest | \$ | Travel expenses | \$ |
| Bank fees | \$ | Computer expenses | \$ |
| Books & subscriptions | \$ | Other | \$ |

Gifts or donations

| | |
|--|----|
| | \$ |
| | \$ |
| | \$ |
| | \$ |

Other Information

| | |
|--|----|
| | \$ |
| | \$ |

INVESTMENT INCOME

Bank Account Interest

| Name of financial institution | Account No. | Your share | Please circle |
|-------------------------------|-------------|------------|--------------------|
| | | \$ | Individual / Joint |
| | | \$ | Individual / Joint |
| | | \$ | Individual / Joint |
| | | \$ | Individual / Joint |
| | | \$ | Individual / Joint |
| | | \$ | Individual / Joint |

Dividends: (Please provide details and/or complete)

| Name of company | Unfranked | Franked | Imputation Cr | TFN amount |
|-----------------|-----------|---------|---------------|------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Did you receive a distribution from a Managed Fund? No Yes (if yes attach annual tax statement)

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CAPITAL GAINS

Property – please provide documentation

| | | | |
|------------------------|----|---------------------------|----|
| Purchase cost | \$ | Sale Price | \$ |
| Date on contract / / | | Date on contract / / | |
| Settlement date / / | | Settlement date / / | |
| Stamp duty | \$ | Legal fees to sell | \$ |
| Title registration | \$ | Agents commission to sell | \$ |
| Legal fees to purchase | \$ | Selling costs | \$ |

Shares / Investments – please provide documentation

| | |
|-----------------------------------|-----------------------------------|
| Name of shares | Name of shares |
| Number of shares | Number of shares |
| Purchase date: / / Date sold: / / | Purchase date: / / Date sold: / / |
| Purchase Cost incl. Brokerage \$ | Purchase Cost incl. Brokerage \$ |
| Selling Cost incl. Brokerage \$ | Selling Cost incl. Brokerage \$ |
| Name of shares | Name of shares |
| Number of shares | Number of shares |
| Purchase date: / / Date sold: / / | Purchase date: / / Date sold: / / |
| Purchase Cost incl. Brokerage \$ | Purchase Cost incl. Brokerage \$ |
| Selling Cost incl. Brokerage \$ | Selling Cost incl. Brokerage \$ |
| Name of shares | Name of shares |
| Number of shares | Number of shares |
| Purchase date: / / Date sold: / / | Purchase date: / / Date sold: / / |
| Purchase Cost incl. Brokerage \$ | Purchase Cost incl. Brokerage \$ |
| Selling Cost incl. Brokerage \$ | Selling Cost incl. Brokerage \$ |

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RENTAL INCOME & EXPENSES

Please provide details or complete

| | Property 1 | Property 2 | Property 3 | Property 4 | Property 5 |
|---|------------|------------|------------|------------|------------|
| Address | | | | | |
| Date property first earned income | | | | | |
| No. weeks property rented this year | | | | | |
| Rent received | | | | | |
| Other income | | | | | |
| | | | | | |
| Expenses | | | | | |
| Advertising | | | | | |
| Agent's commission | | | | | |
| Bank charges | | | | | |
| Body Corporate fees | | | | | |
| Council Rates | | | | | |
| Gardening/lawn mowing | | | | | |
| Insurance | | | | | |
| Interest | | | | | |
| Land tax | | | | | |
| Letting fee | | | | | |
| Repairs & maintenance | | | | | |
| Stationery, telephone, postage | | | | | |
| Travel | | | | | |
| Water rates | | | | | |
| Other (please list) | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Capital expenses over \$300 – please list all items including date of purchase | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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If you have purchased a new property, we require the following:-

Statement of Adjustments on purchase

Stamp Duty cost

Loan Establishment and other costs

Registration of Title costs

Loan Statements

Legal Fees on Purchase

Quantity Surveyors Report or

List of Depreciable Assets

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