

Tax Return Preparation Checklist

New Client? Yes No

GENERAL RETURN PREPARATION & SUBSTANTIATION DECLARATION

Client Name: _____
Address: _____
Suburb: _____ Post Code: _____
Tax File No (only required for new clients): _____ ABN: _____
Date of Birth: _____ Contact No: _____
Email address: _____
Occupation: _____ Recommended by: _____
Name of spouse: _____ Spouse TFN (only required for new clients): _____
Spouse DOB: _____ Spouse Taxable Income: _____

Was last year's return prepared by a registered tax agent? YES NO
(If so, please advise name) _____

BANK DETAILS FOR ELECTRONIC TRANSFER OF REFUND

For any possible refund to be transferred by the ATO into your bank account, please include account details below:

A/C Name: _____
BSB: _____ Account No: _____

Signed: _____
Date: _____

INCOME

if YES, please enter \$ amount

Salary and wages in Australia	NO	YES _____
Foreign Income	NO	YES _____
Income from partnerships and/or trusts	NO	YES _____
Income from sole trader business	NO	YES _____
Capital gains from shares	NO	YES _____
Dividends	NO	YES _____
Other income	NO	YES _____
Additional Notes		

RENTAL PROPERTY INVESTMENT

Full address of rental property: _____
Date property first earned rental income: _____
Number of weeks rented for the year: _____
Name of owners: _____

Income from Rental Property: _____

Expenses (provide Income & Expenditure Summary if applicable) (if any please enter \$ amount):

- advertising for tenants _____
- body corporate fees _____
- council rates _____
- water charges _____
- land tax _____
- cleaning _____
- gardening and lawn mowing _____
- pest control _____
- insurance (building, contents, public liability) _____
- interest on loan (no principal repayments) _____
- property agent's fees and commission _____
- repairs and maintenance (general) _____
- repairs and maintenance (electrical) _____
- repairs and maintenance (plumbing) _____
- depreciation (provide depreciation report if app.) _____

Additional notes

OTHER INVESTMENTS

if you disposed cryptocurrency/shares during the financial year, please provide supporting transaction summary/statements/reports.

DEDUCTIONS

You must provide receipts for claims. All deductions must not be refunded or reimbursed by the employer

Work-related car expense claims (only one method allowed):

- Cents per km method (provide diary for claim)
 - o car make/model _____
 - o km travelled _____
- Logbook method (provide logbook for claim)
 - o fuel _____
 - o registration fee _____
 - o insurance _____
 - o repairs _____

Other work-related travel expenses:

- Air fares
- Taxi fares/Rideshare fares
- Parking fees
- Short-term car hire for work purposes
- Expenses incurred while away overnight for work

Meals _____
Accommodation _____
Other incidental expenses _____

Work uniform/protective clothing expenses:

- Protective clothing (steel-capped boots, gloves, etc)
- Occupation specific clothing (chef pants)
- Compulsory uniform
- Laundry
- Other costs (renting, repairing and dry cleaning)

Self-education expenses

- Textbooks
- Student union fees
- Student services and amenities fees
- Training/course fees (excluding HECS)

Other expenses

- Union fees
- Home office expenses (provide total WFH)
- Do you want to claim fixed rate for home office based on hrs spent working from home? YES NO
- Hours per week worked from home
- Computer and software
- Telephone/mobile phone
- Tools and equipment
- Subscriptions fees
- Stationery
- Other (please specify)

Other deductions

- Donations
- Tax agent fees for previous year
- Income protection insurance
- Brokerage fees

Additional notes

DEPENDENT CHILDREN

- Child Support you paid (if applicable) _____
- No of dependent children _____

Name	Date of Birth	Student		Living with you?	
		YES	NO	YES	NO
		YES	NO	YES	NO
		YES	NO	YES	NO
		YES	NO	YES	NO
		YES	NO	YES	NO
		YES	NO	YES	NO

CLIENT SUBSTANTIATION DECLARATION

I, hereby confirm that, I have been advised by you as to the requirement to demonstrate that an expense has been incurred for deductible purposes, together with satisfying the SUBSTANTIATION legislation in relation to:

- Work, car and business travel expenses

In addition, I have been informed by you of the need to OBTAIN ORIGINAL RECEIPTS carrying details of:

- Name of supplier;
- Type of goods/services purchased;
- Date expense incurred;
- Amount expressed in the currency it was incurred;
- Day it was made out

I have been advised by you of the need to keep the written evidence for at least five years.

Also, I have been advised of the consequences and penalties which will arise if the information I have provided is Incomplete or incorrect and does not strictly comply with the SUBSTANTIATION or nexus requirements.

I have all income tax and SUBSTANTIATION DOCUMENTS necessary to support all the claims made in my income tax return.

Where items are used for both business and private purposes, eg car, telephone/mobile, computer, library, etc., I advise that I have kept appropriate apportionment documents to verify my business usage claim. Further, I have instructed you to prepare the return based on my specific instructions.

I have read and understood the return prepared for me.

By Signing, I declare:

- That I have disclosed to you all the income which I have earned
- That all income has been declared in the return
- That all the claims for deductions and rebates which have been included in the return are based on my specific instructions
- That any documents I did not have at the time, receipts to substantiate the above claims at the meeting, will be made available if required by the Tax Office.
- That you have clarified what written evidence will be required during an audit and penalties that may be applicable if incorrect claims are identified.

Signed: _____
Full Name: _____
Date: _____