

PALMER & ASSOCIATES

Suite 8 / 241 Blackburn Road
Mount Waverley VIC 3149

Phone: 03 9830 8999
Fax: 03 9830 8777
Email: reception@pacpa.com.au
Web: www.pacpa.com.au

2015 INDIVIDUAL INCOME TAX RETURN CHECKLIST

YOUR NAME: _____
CONTACT PH. NO.: (B): _____ (H): _____ (M): _____
HOME ADDRESS: _____
POSTAL ADDRESS: _____
(if different from above) _____
TAX FILE NUMBER: _____
D.O.B: _____ EMAIL ADDRESS: _____
OCCUPATION: _____

*If you tick **YES** to any questions please either attach the required receipts OR include a summary of the details.

Family Details

1 Did you have a spouse (married/defacto) at 30th June 2015? Y / N
If yes, please include the following information.
· Full name: _____
· Date of birth: _____
· Tax File Number: _____
· Spouse's taxable income: _____ \$

2 Do you have any dependant children? Y / N
If yes, please include all the following details: full name, date of birth, number of nights under your care and any income received by the children.

Bank Details

3 From 1 July 2014 all individual tax returns with an estimated refund must have Australian bank account information in order for the refund to be paid. Please provide the following bank information for yourself and your spouse:

Yourself:	Spouse:
BSB _____	BSB _____
Account No. _____	Account No. _____
Account Name _____	Account Name _____

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Your Income

4 Have you received any/all of the below (if so please forward to our office): Y / N

- PAYG Payment Summaries?
- Eligible Termination Payment Statements?
- Unemployment or AUSTRUDY Statements?
- Pension or annuity Statements? together with the letter from the pension provider showing the taxed and untaxed elements and rebate claimable, if any.

5 If you received interest on any Bank Accounts/Other Investments please provide details of all accounts on which interest was received, the amount(s) received and if account(s) are jointly or individually held. Y / N

6 Did you receive any distributions from Trusts or Partnerships? If so, please send in the appropriate information, including the Annual Tax Summaries and Annual Capital Gains Tax Summary. Y / N

7 Do you have a rental property? If so, we need details including the full address of the property, number of weeks rented for the year, rent received, interest paid and other rent deductions for all properties. Y / N

If the property was purchased during the year we need the following information:-

- The contract date and settlement date
- A list of chattels bought, cost of each and purchase date (e.g. stove, hot water service, carpets, curtains, blinds, oven, heater, ducted heating, etc.)
- Details of the loan to purchase the property including borrowing costs incurred
- Details of stamp duty and legal fees paid
- The date the property was first constructed (year and month are sufficient)
- The date the property was rented out, if applicable

8 Do you own any shares? If yes, we need the dividend statements for the year. Y / N

If you have no dividend statements, we need a list of the total dividends received from each company as follows:-

- Unfranked Dividends
- Franked Dividends
- Imputation Credits

9 Did you sell any assets during the year that may give rise to Capital Gains Tax i.e. Shares, Rental property, other investments, etc.? Y / N

If so we need the following information:-

- A description of the asset
- The purchase and sale dates of the asset
- The cost price of the asset (including purchase price, stamp duty, legal expenses, broker's fees etc.). Attach details and documents.
- The sale price of the asset (including sales commission, legal expenses, broker's commission etc.) Attach details and documents.

If shares were sold, we need the sale documents, the original purchase documents and all dividend reinvestment documents, if any. (These must show the purchase/sale prices and dates).

10 Did you receive any other income? If so we need full details of the source and amount of income received. Y / N

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Your Deductions

11 Do you **use your car for work**? If yes, please advise the following: Y / N

A. If you **travelled 5,000 business kilometres or less**, we need details of the **business kilometres travelled**, your **car type** and its **engine size and registration**.

OR

B. If you **travelled more than 5,000 business kilometres** for work **or** would like to use the log book method, then we need to know the **actual running costs** of the car such as: -

- Log Book Business Percentage (note that you will be required to produce a log book in the case of a Tax Office Audit)
- Vehicle make
- Registration
- Insurance
- Petrol - If you do not have receipts, please provide an estimate (e.g. \$50 per week)
- Repairs & Maintenance
- Lease or Hire Purchase (HP) payments (including copy of finance contract)

C. Did you buy or sell a motor vehicle during this financial year, which was used for work? Y / N
If so please provide the following details:

If a car was sold, we need:-

- Date of sale
- Sale price
- Dealer sale document (incl. trade-in)
- Finance payout information (if any)

If a car was purchased, we need:-

- Date of purchase
- Purchase price
- Dealer purchase document (incl. trade-in)
- Finance information (lease/HP, if any)

12 Did you incur any **work related travel expenses**? *If so, we need a list of expenses incurred.* Y / N

Please note that a diary should be kept if away from home for 6 nights or more and receipts should be supplied where possible.

13 Did you incur any expenses in relation to **uniforms or protective clothing** including the **laundry / dry cleaning of these uniforms**? Y / N
If yes please provide a list of these expenses.

14 Did you complete any **self education courses** which were related to your work? If yes, we need to know what type of course, the name of the Institution and what expenses were incurred. Y / N

15 Did you complete any **work at home**? If yes, could you please estimate how many hours a week you worked at home and provide a list of expenses related to this (e.g. stationery, books, furniture, etc.). Y / N

16 Did you have any **other work related expenses**? **If so, we require details of these expenses in summary form, or the actual receipts along with the percentage of use that was related to your work.** Y / N

Such as:

- | | |
|---|-------------------------------|
| · Union Dues | · Computer or Laptop expenses |
| · Seminars & Conferences | · Mobile/Phone Bills |
| · Stationery | · Tools |
| · Briefcase or Calculator | · Internet access or expenses |
| · Subscriptions | · Income Protection Insurance |
| · Depreciation (professional library, tools, equipment including dates of purchase of any new equipment, amount paid, description, etc.). | |

17 Did you take out any **new loans / borrow for business or investment purposes**? If yes, we need details of the purpose of the loan, the loan statement(s), the term of the loan, application costs and other expenses paid to the financier on the loan. Y / N

18 Did you make any **donations** over \$2.00? *If yes, please provide a list of these donations.* Y / N

19 Did you incur **Tax Agent Fees** for preparing last years Tax Return? If yes, we need to know the amount and who it was paid to. Y / N
(If Palmer & Associates, we will have these on record)

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Any Other Information

20 Do you have **H.E.C.S./H.E.L.P or Student Supplementary Loan (SSL) debts?** Y / N
If yes, please provide us with a copy of the statement or amount of debt outstanding and details of amounts paid off the loan.

21 Did you become a **resident of Australia** or **cease being a resident of Australia** during this financial year? *If so we need to know the date residency status changed and details of any income earned overseas.* Y / N

Rebates

22 Did you make any **contributions to your spouse's superannuation fund?** *If yes, please include details of the amount of contributions and the taxable income of your spouse .* Y / N

23 **Do you have any dependents other than your children e.g. Parents?** Y / N
If yes, please include details such as; full name, date of birth and relationship of dependent.

24 **Medical Expenses Rebate:** Were you entitled to the out of pocket **Medical Expenses rebate in the 2013-2014 financial year?** Y / N

If so, were your family's total out of pocket **Medical Expenses over \$2,120** (for 2014-15 financial year) i.e. after Medicare and private health insurance reimbursements? If your income is over \$90,000 or \$180,000 for couples or families, you are only eligible if your family's total out of pocket Medical Expenses were over \$5,233. *If so please provide the following expense details:*

- Payments to doctors, hospitals, chemists (if you go to the same Chemist you can request an annual summary)
- Any payment for dental, optical or therapeutic treatment (referred to by a doctor).
- Copies of Annual **Medicare Rebate Statements** and Annual **Private Insurance Statements** received
- Should you wish for our office to print an Annual Medicare Summary for you and your family, please provide our office with your Medicare number/s

For those that did not claim the **Medical Expenses rebate in the 2014 financial year**, the offset is only available for out of pocket medical expenses relating to disability aids, attendant care and aged care expenses.

25 **Health Insurance:** Are you and all your dependants (including your spouse) covered by **private hospital insurance?** Y / N

If yes, you should receive a statement from your health fund confirming the number of days covered, including the rebate you may be entitled to. Please advise us who is covered under your Health Insurance and please include this with the statement from your health fund.

Please remember to enclose all of your PAYG Payment Summaries and either a summary of all other income and expenditure or receipts showing full details.

Completed by _____

Signature _____

Date _____ / _____ / 2015