

# 2014 Individual income tax return checklist

Tax File Number: ..... ABN: .....

Are you an Australian resident? YES/NO/UNSURE.....

Name: Mr/Mrs/Ms/Miss: .....

Name changed since last return? YES/NO

If YES, previous name:.....

Postal Address: .....

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Postal address changed from last tax return? YES/NO

Physical Address (if different from postal address above): .....

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Date of birth: ...../...../.....

Telephone: (H)..... (W)..... (M).....

Email: .....

Occupation: .....

Spouse details (if applicable): .....

The ATO now require your financial institution details to pay any refund owing to you. Please provide details below.

Bank/Financial Institution: .....

BSB Number: .....

Account Number: .....

Account name: .....

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

**INCOME – Please provide documentation**

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 payment	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. Net farm management deposits or repayments	YES	NO
18. Capital gains	YES	NO
19. Foreign entities	YES	NO
♦ Direct or indirect interests in controlled foreign company	YES	NO
♦ Transfer of property or services to a non-resident trust	YES	NO
20. Foreign source income (including foreign pensions) and foreign assets or property	YES	NO
21. Rent	YES	NO
22. Bonuses from life insurance companies or friendly societies	YES	NO
23. Forestry managed investment scheme income	YES	NO
24. Other income (please specify below)	YES	NO

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**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
- one-third of actual expenses method	YES	NO
- 12% of actual cost 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

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**D3. Work related uniform and other clothing 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

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**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
Journals/periodicals	YES	NO
Depreciation	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. Low value pool deduction	YES	NO
D7. Interest deductions	YES	NO
D8. Dividend deductions	YES	NO
D9. Gifts or donations	YES	NO
D10. Cost of managing tax affairs	YES	NO
D11. Deductible amount of undeducted purchase price of a foreign pension or annuity	YES	NO
D12. Personal superannuation contributions	YES	NO
Full name of fund: ..... Account no: .....		
Fund ABN: ..... Fund TFN: .....		
Amount of contribution .....		
Do you pass the 10% test?	YES	NO
Has another entity made any super contributions on your behalf?	YES	NO
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

### Other types of deductions (continued)

D13. Deduction for project pool	YES	NO
D14. Forestry managed investment scheme deduction	YES	NO
D15. Other deductions (please specify)	YES	NO

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L1. Tax losses of earlier income years	YES	NO
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### Tax offsets/rebates

T1. Do you have a dependant spouse (without dependant child or student)?	YES	NO
Answer the following question if you had more than one dependant spouse during the 2014 income year.		
Did you have a dependant spouse born before 30 June 1952?	YES	NO
T2. Are you a senior Australian or pensioner?	YES	NO
T3. Did you receive an Australian superannuation income stream?	YES	NO
T4. Did you make superannuation contributions on behalf of your spouse?	YES	NO
T5. Did you live in a remote area of Australia or serve overseas with the Australian defence force or the UN armed forces in 2014?	YES	NO
T6. Did you have net medical expenses over \$2,162 in 2014?	YES	NO
Did you claim the net medical tax offset in 2013?	YES	NO
T7. Did you maintain a dependant who is unable to work due to invalidity or carer obligations?	YES	NO
T8. Are you entitled to claim the landcare and water facility tax offset?	YES	NO
T9. Are you a mature age worker born (before 1 July 1957) with 'net income from working' of less than \$63,000?	YES	NO
T10. Other non-refundable tax offsets (please specify)	YES	NO
T11. Other refundable tax offsets (please specify)	YES	NO

### Other relevant information

A. Are you entitled to the Medicare levy exemption or reduction in 2014? (If yes, please specify):	YES	NO
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B. Did you have private health insurance in 2014?? (If yes, please provide the annual statement received from your health fund).	YES	NO
C. Were you under the age of 18 on 30 June 2014?	YES	NO
D. Did you become an Australian tax resident at any time during the 2014 income year?	YES	NO
E. Did you cease to be an Australian tax resident at any time during the 2014 income year?	YES	NO
F. Did you make a non-deductible (non-concessional) personal super contribution?	YES	NO
G. Do you have a HECS/HELP liability or a student financial supplement loan debt?	YES	NO
H. Did you pay any tax within 14 days before the due date of the liability (e.g., HECS/HELP)?	YES	NO

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|----|---|-----|----|
| I. | Did a trust or company distribute income to you in respect of which family trust distribution tax was paid by the trust or company?   | YES | NO |
| J. | Do you have a loan with a private company or have such a loan amount forgiven? (If yes, please specify)   | YES | NO |
| K. | Income tests information  |     |    |
| -  | Do you have any total reportable fringe benefits amounts in 2014?   | YES | NO |
| -  | Do you have any reportable employer superannuation contributions in 2014?   | YES | NO |
| -  | Did you receive any tax-free government pensions in 2014?   | YES | NO |
| -  | Did you receive any target foreign income in 2014?  | YES | NO |
| -  | Did you have a net financial investment loss in 2014?   | YES | NO |
| -  | Did you have a net rental property loss in 2014?  | YES | NO |
| -  | Did you pay child support in 2014?  | YES | NO |
| -  | Number of dependent children? _____   |     |    |
| L. | Spouse details (if applicable)  |     |    |
| -  | Did you have a spouse for the full year from 1 July 2013 to 30 June 2014?   | YES | NO |
| •  | If you had a spouse for only part of the income year, please specify the dates between 1 July 2013 to 30 June 2014 when you had a spouse:<br>From ____ / ____ / _____ to ____ / ____ / _____                      |     |    |
| -  | What was your spouse's taxable income for the 2014 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 |
| -  | Did a trust or company distribute income to your spouse in respect of which family trust distribution tax was paid by the trust or company for the 2014 income year?  | YES | NO |
| -  | Did your spouse have any reportable fringe benefits amounts for the 2014 income year?   | YES | NO |
| -  | Did your spouse receive any Australian Government pensions or allowances (not including exempt pension income) in the 2014 income year?   | YES | NO |
| -  | Did your spouse receive any exempt pension income in the 2014 income year?  | YES | NO |
| -  | Does your spouse have any reportable super contributions for the 2014 income year?  | YES | NO |
| -  | Did your spouse receive any tax-free government pensions paid under the Military Rehabilitation and Compensation Act 2004?  | YES | NO |
| -  | Did your spouse receive any 'target foreign income' in the 2014 income year?  | YES | NO |
| -  | Did your spouse have a total net investment loss (i.e., the total of any financial investment loss and a rental property loss) for the 2014 income year?  | YES | NO |
| -  | Did your spouse pay child support during the 2014 income year?  | 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 2014 income year which included a taxed element that does not exceed their low rate cap? | YES | NO |

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

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**Signature of taxpayer**

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**Name (print)**