



MRL Group Pty Ltd  
Chartered Accountants.  
Business Solutions.

## PERSONAL INCOME TAX RETURN CHECKLIST

**30 JUNE 2017**

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This checklist is designed as a guide for the preparation of your personal income tax return. While not every item listed may apply to your situation, completing this checklist will ensure we have all the relevant information required to prepare your personal income tax return quickly and efficiently.

Please print this document and complete the items which are relevant to your needs, then send the completed checklist to us together with your taxation documents.

When preparing the material below, please provide summaries of information where appropriate, and particularly where you have multiples of similar items or deduction claims. We will return all original documentation in due course.

After receiving your documentation we will allocate your work to one of our professional team, and you will hear from them either during or upon completion of your work.

**If we have acted for you previously, and your circumstances have changed, please complete Questions 1 – 3 in full, otherwise brief details will suffice and continue at Question 4 onwards.**

**If we have not acted for you previously – did a tax agent act for you in the prior year?      Yes       No**

**If yes, please provide details of the tax agent.**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Telephone No:** \_\_\_\_\_

# PERSONAL INFORMATION

## 1. Your Details

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone (Mobile) \_\_\_\_\_ (Hm) \_\_\_\_\_

E-Mail \_\_\_\_\_

Tax File Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Job Description/Title \_\_\_\_\_

## 2. Your Partner

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone (Mobile) \_\_\_\_\_ (Hm) \_\_\_\_\_

E-Mail \_\_\_\_\_

Tax File Number \_\_\_\_\_

Date of Birth \_\_\_\_\_

Job Description/Title \_\_\_\_\_

## 3. Dependent Children

Name of dependent child 1 \_\_\_\_\_

Date of Birth \_\_\_\_\_

Name of dependent child 2 \_\_\_\_\_

Date of Birth \_\_\_\_\_

Name of dependent child 3 \_\_\_\_\_

Date of Birth \_\_\_\_\_

## 4. Electronic Funds Transfer – The ATO will not process any refund without these details – Please complete the following:

Account Name \_\_\_\_\_

BSB Number \_\_\_\_\_ Account Number \_\_\_\_\_

## 5. Mandatory - Do you have private health insurance? Yes No

If yes, please provide us with your annual private health insurance statement for each Adult listed on the policy.

Individuals or families on incomes above the Medicare levy surcharge thresholds, who do not have an appropriate level of private patient hospital cover, may be required to pay the Medicare Levy surcharge.

**For the following items, please tick those that are relevant to your situation and provide relevant supporting documentation and/or summaries**

**Please indicate if any documents have not been included.**

## **INCOME**

**6. PAYG Payment Summaries:**

- Salaries and wages
- Employment termination payment(s)
- Australian Government allowances, benefits or pensions
- Superannuation Income Stream

**7. Interest Income:**

A **summary** of information from your bank statement(s) at 30 June 2017 showing interest paid into your account.

**8. Dividend Income:**

Please provide your dividend statements. These include your dividend income and franking credits.

**9. Disposal of Shares and/or Investments:**

A **summary** of information of any shares or investments sold during the year. Details should include the date of the investment purchase, the number of units purchased, purchase price per unit, date of disposal, number of units sold, sale price per unit and any brokerage expenses incurred and any dividend reinvestment plan statements.

**10. Partnership, Trust and Investment distributions:**

Please provide supporting documentation, such as distribution statements and/or an Annual Tax Statement if available.

**11. Rental Properties:**

Please provide the following **summary**, with supporting documentation where relevant:

- Purchase date and price of the property. Your settlement statement may be helpful for this
- Rental income received for the year, date rent first received and availability
- All expenses incurred during the year: For example - rates and taxes, body corporate fees, interest expenses on loans, repairs and maintenance and details of any capital purchases or improvements to the property
- A Real Estate Annual Statement may be provided to show rental income & expenses
- If the property was sold during the year, please provide relevant details including sale documents for capital gains tax calculations

**12. Business Activity or Other Income: ABN** \_\_\_\_\_

Please provide the relevant details, including a summary of income, expenses and Business Activity Statements (BAS) if any lodged during the year. Also including details of any asset purchases made for the purposes of carrying on your business.

**For the following items, please tick those that are relevant to your situation and provide relevant supporting documentation and/or summaries.**

**Please indicate if any documents have not been included.**

## **DEDUCTIONS**

**13. Work Related Motor Vehicle Expenses:**

Provide information listed below and a detailed **summary** of additional expenses: eg fuel, repairs & maintenance, registration, insurance, finance (interest only amounts - if applicable).

Registration/Plate Number \_\_\_\_\_

Make and Model of vehicle \_\_\_\_\_

Total km's travelled \_\_\_\_\_ and total business km's \_\_\_\_\_

Date Purchased \_\_\_\_\_ Purchase Price: \_\_\_\_\_

**14. Work Related Travel Expenses:**

Provide details of nature and purpose of travel.

**15. Work Related Uniform, Protective Clothing, and Laundry Expenses:**

**16. Work Related Self-Education Expenses:**

Please provide relevant details in relation to study directly connected to current employment.

**17. Other Work Related Expenses:**

These may include union fees and professional membership fees, subscription fees, home office expenses, or details of significant purchases for work related purposes for the calculation of deductible depreciation expenses.

**18. Interest and Dividend Expenses:**

Provide information relating to investment income.

**19. Tax deductible donations made:**

Provide a **summary** along with receipts.

**20. Cost of Managing Tax Matters:**

Fees paid within the relevant year for the preparation and lodgement of your tax return.

**21. Employer and Non-employer super contributions details:**

Please notify us if you have made any personal superannuation contributions for the year ended 30 June 2017.

*Contributions made as a Sole Trader:* You must have notified your fund of the amount you intend to claim as a deduction and your fund has acknowledged your 'Notice of Intent to Claim a Deduction'.

**22. Income Protection Insurance details:**

Please provide Annual Tax Summary

**NOTE:** Items that **are not** deductible include:

Life insurance premiums, Trauma and Critical Care insurance premiums.

**23. Details of any other deductions:**

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## TAX OFFSETS

**24. Superannuation Contributions made on behalf of a partner:** \$ \_\_\_\_\_

## OTHER INFORMATION

**25. Did you have a Higher Education Loan Program account (HELP, formerly called HECS) or a Financial Supplement Loan account?** Yes  No

The ATO is no longer supplying individuals with an Annual Statement, however we will access this information on your behalf to complete your tax return.

**26. Spouse information:**

If we do not create a return for your spouse, you **MUST** provide their taxable income by providing a copy of their Notice of Assessment.

If you have a new spouse please also provide their full name and date of birth.

**27. Please provide any other details which may be helpful in the completion of your personal income tax return or any queries you may have:**

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