

# 2018 Taxation Checklist

	Yes	No	Details
1. Have there been changes to personal details?			Please advise over
<b>INCOME</b>			
2. Have you received Payment Summaries (formerly group certificates)?			
2a What is your main occupation?			
3. Have you received dividends or distributions?			Please complete investment income worksheet
4. Have you received any bank interest?			Please complete investment income worksheet
5. Have you received any termination or superannuation payments?			
6. Have you received income from a business?			Please attach business income checklist
7. Do you have a spouse?			Please complete schedule
8. Have you received rental income?			Please complete rental property worksheet and attach details
9. Have you sold any property, e.g. real estate, shares			
10. Are you part of an employee share scheme?			
<b>EMPLOYMENT RELATED DEDUCTIONS</b>			
1. Motor Vehicle expenses			Please complete motor vehicle worksheet
2. Uniforms or protective clothing			
3. Telephone rental / calls			
4. Home office expenses			
5. Depreciation of equipment – date and cost of new plant			
6. Union fees / professional associations			
7. Tools of trade			
8. Outdoor workers – sunscreen, hats etc			Please complete schedule
9. Professional journals or text books			
10. Conferences or training seminars			
11. Self education expenses			
12. Travelling expenses			
13. Other work related expenses			
<b>PERSONAL REBATES AND DEDUCTIONS</b>			
1. Tax agents fee			
2. Have you made donations?			Please complete schedule
3. Health Insurance / Medicare Surcharge			Please provide Fund Statement
4. Income protection / disability insurance			
5. Investment expenses			Provide details over
6. Do net medical expenses relate to disability aids, attendant care or aged care expenses and exceed \$2,299			Out-of-pocket medical expenses that only relate to disability aids, attendant care or aged care expenses in 2018 financial year
7. Personal super contributions for yourself or spouse			A notice of Intent to claim the deduction for each individual. Please provide Name of fund amount and member number.
8. Zone rebate- Did you work in a remote area?			Your usual place of residence must be in the zone
9. Do you have a HECS / HELP debt or student loan?			Provide details over
10. Other			Provide details over

## NOTES AND WORKSHEET

NAME..... EMAIL ADDRESS.....

DAYTIME CONTACT NUMBER..... DATE.....

## BANK ACCOUNT DETAILS

As from the 1<sup>st</sup> July 2013 the ATO will only pay refunds via EFT

BSB	Account Number	Account Name

## PERSONAL DETAILS

Spouse Name	Tax File Number	Date of Birth	Income

## INCOME WORKSHEET

Interest Received from	\$	Dividends from	Unfranked \$	Franked	Imputation Credit	Trust	\$

## DEDUCTIONS – LIST AMOUNTS

Donations	Uniform	Tools	Other	Other

## PRIVATE HEALTH COVER (please attach Fund Statement received)

As from 1<sup>st</sup> July 2012 the Private Health Cover Government Rebate is Income Tested

Fund	Membership Number	Type	Rebate to claim

Other notes

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# 2018 Motor Vehicle Checklist

NAME: \_\_\_\_\_

Please complete this schedule for all vehicles used for business or work-related travel.

- |                                                                                                                                       | NO                       | YES                      |
|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| <b>Q.</b> Have you kept a logbook of business or work-related travel ?<br>If YES, complete Part A.<br>If NO, go to the next question. | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>Q.</b> Does your business use exceed 5000km's ?<br>If YES, complete Part A.<br>If NO, complete Part B.                             | <input type="checkbox"/> | <input type="checkbox"/> |

## PART A

Details of car	Vehicle 1	Vehicle 2
Make of Car		
Registration		
Engine Capacity		
Original Cost		
Date of Purchase (if known)		

Odometer readings	Vehicle 1	Vehicle 2
as at 1st July 2017		
as at 30 <sup>th</sup> June 2018*		
Running costs	Vehicle 1	Vehicle 2
Petrol Actual / Estimated		
Oil		
Repairs		
Registration		
Insurance		
Tyres		
Depreciation		
Interest on Loan (not repayments)		
RAA / Licence		
Business Parking Fees (not fines)		
Lease Instalments		

Please include your log book (if applicable), and any lease or finance agreement.

## PART B

Details of car	Vehicle 1	Vehicle 2
Purpose of Journey		
Make of Car		
Registration		
Engine Capacity		
Odometer Reading at 30 <sup>th</sup> June 2018*		
Estimate of Business Km's Travelled		

Signature \_\_\_\_\_ Date \_\_\_\_\_

# 2018 Taxation Return

## BUSINESS INCOME CHECKLIST

	Yes	N/A
<b>Business Records</b>		
Please include the following documentation		
a. Computer back-ups, reports, cash books, ledgers etc	<input type="checkbox"/>	<input type="checkbox"/>
b. Details of income (e.g. invoice books / deposit books)	<input type="checkbox"/>	<input type="checkbox"/>
c. Bank statements and cheque butts	<input type="checkbox"/>	<input type="checkbox"/>
d. Listing of debtors (money owed to you) as at 30 June 2018	<input type="checkbox"/>	<input type="checkbox"/>
e. Listing of creditors (money owed by you) as at 30 June 2018	<input type="checkbox"/>	<input type="checkbox"/>
f. Details of trading stock on hand	<input type="checkbox"/>	<input type="checkbox"/>
g. Petty cash details, and expenses paid from private accounts	<input type="checkbox"/>	<input type="checkbox"/>
h. Loan and lease agreements	<input type="checkbox"/>	<input type="checkbox"/>
i. Details of plant sold, destroyed or purchased	<input type="checkbox"/>	<input type="checkbox"/>
j. Motor vehicle expenses including log books	<input type="checkbox"/>	<input type="checkbox"/>
k. Schedule of major plant repairs	<input type="checkbox"/>	<input type="checkbox"/>
l. Details of travelling expenses and entertainment	<input type="checkbox"/>	<input type="checkbox"/>
m. Payroll details including reconciliation	<input type="checkbox"/>	<input type="checkbox"/>
n. Payments to contractors	<input type="checkbox"/>	<input type="checkbox"/>
o. Details of income not paid into your normal bank account	<input type="checkbox"/>	<input type="checkbox"/>
p. Payments to superannuation funds	<input type="checkbox"/>	<input type="checkbox"/>
q. Copies of your Business Activity Statements	<input type="checkbox"/>	<input type="checkbox"/>
<b>Other Information</b>		
Please detail below any other information you believe is relevant to the compilation of your financial statements and income tax returns.		

Signature \_\_\_\_\_ Date \_\_\_\_\_

# 2018 Rental Property Worksheet



**MasterTax**  
Accountants and Tax Agents

NAME: \_\_\_\_\_

Property Address	
Date of Purchase	
Purchase Price	
Date First Rented	
Number of Weeks Rented	

**Gross Rent Received** \$ \_\_\_\_\_

**Other rental related income** (*Please specify*) \$ \_\_\_\_\_

## LESS EXPENSES

Interest on Loans	
Special Building Write Off	
Advertising	
Bank Charges	
Borrowing Expenses	
Cleaning	
Council Rates	
Depreciation	
Gardening / Lawn Mowing	
Insurance	
Land Tax	
Legal Expenses	
Pest Control	
Property Agent Fees/Commissions	
Repairs & Maintenance	
Stationery, Telephone, Postage	
Water Rates	
<b>Sundry Rental Expenses</b>	
Accounting Fees	
Maintenance Levies	
Stamp Duty on Leased Property	
Letting Fees	
Strata Fees	
Emergency Service Levy	

**TOTAL EXPENSES** \$ \_\_\_\_\_

**NET RENTAL INCOME** \$ \_\_\_\_\_

**Note – Travel expenses for inspection of the property can no longer be claimed**

*\* If you have acquired a depreciation schedule from the quantity surveyor, please provide us a copy.*