(Certified Practising Accountant & Registered Tax Agent)

### 2010 individual income tax return interview 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:	
Postal address changed from last tax return? YES/NO	
Address:	
Date of birth: //	
Telephone: (H) (W)	(M)
Email:	
Occupation:	
Spouse details (if applicable):	
Do you want to use Electronic Funds Transfer? YES/NO	
If YES, provide bank details BSB: Accord	unt Number:
Account name:	

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

### **INCOME – Please provide evidence**

1. Salary or wages	YES/NC
2. Allowances, earnings, tips, director's fees etc	YES/NC
3. Employer lump sum payments	YES/NO
4. Employment termination payments	YES/NO
Australian Government allowances and payments like newstart, youth allowance and austudy payment	YES/NC
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. Interest	YES/NO
11. Dividends	YES/NO
12. Employee share schemes	YES/NC
13. Distributions from partnerships and/or trusts	YES/NO
14. Personal services income (PSI)	YES/NO
15. Net income or loss from business	YES/NO
16. Deferred non-commercial business losses	YES/NO
17. Net farm management deposits or withdrawals	YES/NO
18. Capital gains	YES/NO
19. Foreign entities	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)	YES/NC

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### **DEDUCTIONS – Please provide evidence**

DEDUCTIONS - Please provide evidence	
D1. Work related car expenses	
<ul> <li>cents per kilometre method (up to a maximum of 5,000 kms)</li> </ul>	YES/NO
<ul><li>log book method</li></ul>	YES/NO
one-third of actual expenses method	YES/NO
<ul> <li>12% of actual cost method</li> </ul>	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
<ul> <li>If travel is for 6 or more nights in a row, do you have travel records? (e.g. a travel diary)</li> </ul>	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)	
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

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Dry cleaning expenses	YES/NO			
Other claims such as mending/repairs, etc (please specify)	YES/NO			
D4 Wards related celf advection average				
D4. Work related self-education expenses				
Course taken at educational institution:				
– union fees				
- course fees				
<ul><li>books, stationery</li></ul>	YES/NO			
<ul><li>depreciation</li></ul>	YES/NO			
- seminars	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)				

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Oth	er types of deductions	
D6. l	_ow value pool deduction	YES/NO
D7. I	nterest deductions	YES/NO
D8. [	Dividend deductions	YES/NO
D9. (	Gifts or donations	YES/NO
D10.	Cost of managing tax affairs	YES/NO
D11.	Australian film industry incentives	YES/NO
D12.	Deductible amount of undeducted purchase price of a foreign pension or annuity	YES/NO
D13.	Personal superannuation contributions	YES/NO
	Full name of fund: Account no:	
	Fund ABN: Fund TFN:	
	Do you pass the 10% test?YES/NO	
D14.	Deduction for project pool	YES/NO
D15.	Forestry managed investment scheme deduction	YES/NO
D16.	Other deductions (please specify)	YES/NO
L1. T	ax losses of earlier income years	YES/NO
Tax	offsets/rebates	
T1.	Do you have a dependent spouse (without dependent child or student), a housekeeper or a child-housekeeper?	VES/NO 0
T2.	Are you a senior Australian?	
	·	
T3.	Are you a pensioner?	
T4.	Did you receive an Australian superannuation income stream?	YES/NO
T5.	Did you have private health insurance in 2010?	YES/NO
T6.	Have you incurred expenses for your child's education?	YES/NO
T7.	Did you make superannuation contributions on behalf of your spouse?	YES/NO
T8.	Did you live in a remote area of Australia or serve overseas with the Australian defence force or the UN armed forces in 2010?	
T9.	Did you have net medical expenses over \$1,500?	YES/NO

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T11. Are you entitled to claim the landcare and water facility tax offset?	T10. Did you maintain a parent, spouse's parent or invalid relative?	YES/NO
T13. Are you a 'small business entity' with an annual turnover of less than \$75,000?	T11. Are you entitled to claim the landcare and water facility tax offset?	YES/NO
T14. Other tax offsets (please specify)	T12. Are you a mature age worker with 'net income from working' of less than \$63,000?	YES/NO
Other relevant information  A. Are you entitled to the Medicare levy exemption or reduction in 2010?	T13. Are you a 'small business entity' with an annual turnover of less than \$75,000?	YES/NO
Other relevant information  A. Are you entitled to the Medicare levy exemption or reduction in 2010?	T14. Other tax offsets (please specify)	YES/NC
Other relevant information  A. Are you entitled to the Medicare levy exemption or reduction in 2010?		
A. Are you entitled to the Medicare levy exemption or reduction in 2010?	These tax offsets may not be available where the taxpayer is eligible to claim FTB Part B.	
B. Were you under the age of 18 on 30 June 2010?	Other relevant information	
B. Were you under the age of 18 on 30 June 2010?	(If yes, please specify):	
C. Did you become an Australian tax resident at any time during the 2010 income year?		
D. Did you cease to be an Australian tax resident at any time during the 2010 income year? Y E. Did you make a non-deductible (non-concessional) personal super contribution?	B. Were you under the age of 18 on 30 June 2010?	YES/NO
E. Did you make a non-deductible (non-concessional) personal super contribution?	C. Did you become an Australian tax resident at any time during the 2010 income year?	YES/NC
F. Did you have a spouse at any time during the 2010 income tax year	D. Did you cease to be an Australian tax resident at any time during the 2010 income year?.	YES/NC
G. Do you have a HELP liability or a student financial supplement loan debt?	E. Did you make a non-deductible (non-concessional) personal super contribution?	YES/NC
H. Did you pay any tax within 14 days before the due date of the liability (e.g., HELP)?	F. Did you have a spouse at any time during the 2010 income tax year	YES/NC
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?	G. Do you have a HELP liability or a student financial supplement loan debt?	YES/NC
tax was paid by the trust or company?	H. Did you pay any tax within 14 days before the due date of the liability (e.g., HELP)?	YES/NO
(If yes, please specify) – (reviewer consider if deemed dividend in year under Division 7A):  K. Did you receive any benefit from an employee share acquisition scheme? Y (If yes, please specify) – (reviewer consider if assessable in year):  L. Family Tax Benefit ('FTB'):  – Did you have care of a dependent child in 2010? Y		YES/NO
K. Did you receive any benefit from an employee share acquisition scheme?	(If yes, please specify) – (reviewer consider if deemed dividend in year under Division 7A):	
L. Family Tax Benefit ('FTB'):  – Did you have care of a dependent child in 2010?Y	K. Did you receive any benefit from an employee share acquisition scheme?	
- Did you have care of a dependent child in 2010? Y		
	L. Family Tax Benefit ('FTB'):	
- Did you or your spouse receive FTB through the Family Assistance Office in 2010? Y	- Did you have care of a dependent child in 2010?	YES/NC
	- Did you or your spouse receive FTB through the Family Assistance Office in 2010?	YES/NC

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	id you make a gain nanges to bring the						
N. In	come tests informa	tion					
_	Do you amounts in 2010?				reportable		
_	Do you have any l	Reportable e	mployer sup	perannuation	contributions in 2	010?	YES/NO
_	Did you receive ar	ny tax-free go	vernment p	pensions in 2	010?		YES/NO
_	Did you receive ar	ny target fore	ign income	in 2010?			YES/NC
-	Did you have a ne	t financial inv	estment lo	ss in 2010?			YES/NO
-	Did you have a ne	t rental prope	erty loss in 2	2010?			YES/NO
_	Did you pay child	support in 20	10?				YES/NO
o. s	pouse details (if a	pplicable)					
-	Did you have a sp	ouse for the	full year fro	m 1 July 200	9 to 30 June 2010	)?	YES/NO
	<ul> <li>If you had a sp 2009 to 30 Jun</li> </ul>				ır, please specify	the dates bet	ween 1 July
	From/ _	/	to	/	/		
-	What was your sp	ouse's taxab	le income fo	or the 2010 ir	ncome year?		
_	Does your spouse section 98 that ha 2010 income year	s not been in	cluded in y	our spouse's	taxable income for	or the	
-	Did a trust or com distribution tax wa						
_	Did your spouse h	ave any repo	ortable fring	e benefits an	nounts for the 201	0 income yea	r? YES/NO
-	Did your spouse re (not including exe						YES/NO
_	Did your spouse re	eceive any ex	xempt pens	ion income ir	the 2010 income	e year?	YES/NC
-	Does your spouse	have any re	portable su	per contributi	ons for the 2010 i	ncome year?	YES/NO
-	Did your spouse re Rehabilitation and						YES/NC
_	Did your spouse re	eceive any 'ta	arget foreigi	n income' in t	he 2010 income	/ear?	YES/NC

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	Name (print)				
	Signature of taxpayer				
Date	Dated the day of				
	does not exceed their low rate cap?	.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 2010 income year which included a taxed element that				
_	Did your spouse pay child support during the 2010 income year?	.YES/NO			
_	loss and a rental property loss) for the 2010 income year?				

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