



MORE THAN TAX

Individual Tax Return Checklist - **Basic**

Your Details

Spouse Details

Full Name:

Phone/Mobile:

Email:

Address:

Occupation:

Do you have any dependent children? If so, how many?

Please provide bank details to receive tax refund via EFT

Name:

BSB:

Account Number:

More Than Tax - Individual Tax Return Checklist

		Your Details	Spouse Details	Supporting Documents
Income	<i>Tick if relevant</i>	<i>Amount \$</i>	<i>Amount \$</i>	
Income Statements <i>(previously known as PAYG Summaries)</i>	<input type="checkbox"/>	_____	_____	_____
Pensions or government payments	<input type="checkbox"/>	_____	_____	_____
Employer Lump Sum & Termination Payment Summaries	<input type="checkbox"/>	_____	_____	_____
Bank interest earned	<input type="checkbox"/>	_____	_____	_____
Rental Properties <i>(click here to our Rental Property Checklist)</i>	<input type="checkbox"/>	_____	_____	_____
Business Income <i>(Profit & Loss or access to software)</i>	<input type="checkbox"/>	_____	_____	_____
Foreign Income	<input type="checkbox"/>	_____	_____	_____
Capital Gain/Loss <i>(inc. crypto currency trades, gifts, swaps, fiat currency conversion and bills paid via crypto)</i>	<input type="checkbox"/>	_____	_____	_____
Employee Share Schemes	<input type="checkbox"/>	_____	_____	_____
Dividend, Distribution & Managed Fund Income	<input type="checkbox"/>	_____	_____	_____
Australia Superannuation Lump Sum Payment or Income Stream	<input type="checkbox"/>	_____	_____	_____
COVID-19 Related Government Assistance Payments	<input type="checkbox"/>	_____	_____	_____
Deductions/Expenses	<i>Tick if relevant</i>	<i>Amount \$</i>	<i>Amount \$</i>	Supporting Documents
Work related expenses:				
Motor Vehicle <i>(work to work travel only, please provide car model, rego and kms travelled; otherwise 12 consecutive weeks logbook must be kept)</i>	<input type="checkbox"/>	_____	_____	_____
Travel <i>(fares & accomodation)</i>	<input type="checkbox"/>	_____	_____	_____
Compulsory Uniform with logo/Protective clothing	<input type="checkbox"/>	_____	_____	_____

Deductions/Expenses	Tick if relevant	Your Details Amount \$	Spouse Details Amount \$	Supporting Documents
Work related expenses:				
Self-education & professional development <i>(directly related to your occupation)</i>		_____	_____	_____
Union Fees and Professional Registration Fees		_____	_____	_____
Subscription and Memberships		_____	_____	_____
Seminars, webinars and conferences		_____	_____	_____
Work Tools		_____	_____	_____
Home Office Hours <i>(timesheet, roster or diary must be kept)</i>		_____	_____	_____
<i>No. of hours per week from 1 Jul 2021 - 30 Jun 2022</i>				
Home Office Furniture <i>(office desk, chair, study lamp etc. Purchase date and amount required)</i>		_____	_____	_____
Electricity & Gas, Cleaning, Home furnishings		_____	_____	_____
<i>(if you have a <u>dedicated work area</u> only. Actual work-from-home hours and 4-week diary must be kept)</i>				
Mobile Phone & Home Internet		_____	_____	_____
<i>(monthly bills, work related % only. If claim is > \$50, 4-week diary or itemised bill must be kept)</i>				
Computer consumables, office equipment		_____	_____	_____
<i>(work related % only. For purchases > \$300 please provide purchase date)</i>				
COVID-19 related expenses <i>(e.g. hand sanitizers, face masks, gloves, RAT kits etc.)</i>		_____	_____	_____
<i>(for taxpayers working in jobs that require close proximity with customers only)</i>				
Any other costs incurred in earning income		_____	_____	_____
Donations to charities or building funds		_____	_____	_____
Income protection insurance <i>(under personal name only)</i>		_____	_____	_____
Personal Superannuation Contribution <i>(notice of intent to claim form required)</i>		_____	_____	_____
Prior year accounting fees <i>(for new clients only)</i>		_____	_____	_____
Do you have Private Health Insurance? <i>(Hospital or combined)</i>				
				<i>(If yes, please provide your private health insurance tax statement showing names of all persons covered in policy)</i>