

2021 Individual Income Tax Return Checklist

NAME					
HOME ADDRESS					
POSTAL ADDRESS					
EMAIL					
YOUR TFN			DATE OF BIRTH		
MOBILE		HOME		WORK	
Bank Details For Tax Refund					
Account Name				Bank Name	
BSB				Account Number	
Employment Income – Please provide evidence					
Please note: Your Income Summaries from employers will be available via the ATO portal. Please provide evidence of any other income received through the year.					\$
Deductions – Please provide evidence					
Work-related car expenses					
<input type="checkbox"/> <i>Km's travelled</i> - Please complete attached <i>Cents per kilometre worksheet</i>					
<input type="checkbox"/> <i>Log book</i> - Please complete attached <i>Log Book method worksheet</i>					
Work-related travel expenses					
Domestic/International travel		\$	Conference/Seminars		\$
Train/Bus/Ferry Fares		\$	Taxi/Uber Fares		\$
Work-related clothing, laundry and dry cleaning expenses					
Protective clothing		\$	Occupation specific clothing		\$
Non-compulsory uniform		\$	Compulsory uniform		\$
Conventional clothing		\$	Laundry expenses (up to \$150 without receipts)		\$
Dry cleaning expenses		\$	Mending/repairs		\$
Work-related self-education expenses					
Course Fees	\$	Stationery	\$	Travel	\$
				Books	\$
Other work-related expenses					
Home office expenses		\$	Computer & Software		\$
Telephone/Mobile Phone		\$	Tools & Equipment		\$
Journals & Periodicals & Subscriptions		\$	Union Fees		\$
Other types of deductions					
Tax Agent Fee		\$	Gifts		\$
Donations – provide receipts		\$	Financing lease statements		\$
Superannuation	\$	Litigation costs	\$	Income Protection Insurance	\$
Tax offsets/rebates – Please provide evidence					
<input type="checkbox"/> Zone details – if you live in a remote area you may be eligible for an offset <input type="checkbox"/> Superannuation pension rebates <input type="checkbox"/> Sole parent/spouse/housekeeper/low income <input type="checkbox"/> Imputation credit information from dividend statement					
Spouse details (name, income, DOB etc.)					
Dependants details (name, DOB, and legal responsibilities)					
Investment Property					
<input type="checkbox"/> Real Estate Agent's Summary - Please complete attached <i>Residential Rental Property checklist</i>					
Signed:		Print Name:		Date:	

2021 Residential Rental Property Checklist

RENTAL DETAILS	
period (i.e. the financial year in which the information relates to)	
tax file number of the taxpayer	
full name of the taxpayer	
address of the rental property	
date the property first earned rental income	
start and finish dates during the year when the property was rented	
number of weeks the property was rented out in the current financial year	
date of acquisition of the rental property	
date of sale of the rental property (if sold in the current year).	
private use %	
INCOME (EXCLUDE CENTS ON ALL AMOUNTS)	
rental income	\$
other rental related income	\$
gross rent	\$
EXPENSES (EXCLUDE CENTS ON ALL AMOUNTS)	
advertising expenses	\$
owner's corporation (body corporate) fees	\$
borrowing expenses	\$
cleaning expenses	\$
council rates	\$
the decline in value of a depreciating asset used in a rental property	\$
gardening and lawn mowing expenses	\$
insurance expenses	\$
interest expenses on loans	\$
land tax expenditure	\$
legal expenses	\$
pest control expenses	\$
property agent fees or commission expenses	\$
repairs and maintenance expenses	\$
capital works deductions	\$
stationery, telephone and postage expenses	\$
water charges	\$
sundry rental expenses	\$
Total expenses	\$
Net rent	\$

Log book method worksheet

Taxpayer's name _____
Tax file number _____
Year ended _____
Type of motor vehicle _____
Registration number _____

Car details

1. Over what period was the car held during the year of income?

_____ To _____

2. If you owned one or more car(s) during the year of income, please provide the following details for each car:

Make/model	Registration number
Car 1: _____	_____
Car 2: _____	_____
Car 3: _____	_____

Log book expenses

A. Total operating cost of the car:

Petrol and oil		\$ _____
Depreciation/lease charge		\$ _____
Registration		\$ _____
Insurance		\$ _____
Automobile club membership		\$ _____
Repairs and maintenance		\$ _____
Interest charges		\$ _____
Other	_____	\$ _____
	_____	\$ _____

B. Total operating cost of the car \$ _____

C. Less: Car parking and bridge/road tolls \$ _____

Sub-total \$ _____

D. Less: input tax credits on car expenses that taxpayer can claim (if any) \$ _____

E. Total car operating expenses \$ _____

F. Business use % x _____ %

F. Total claim under Log Book method \$ _____

Cents per kilometre worksheet

Taxpayer's name _____

Tax file number _____

Year ended _____

Type of motor vehicle _____

Registration number _____

Car details

1. Over what period was the car held during the year of income?

_____ To _____

2. If you owned one or more car(s) during the year of income, please provide the following details for each car:

	Make/model	Registration number
Car 1:	_____	_____
Car 2:	_____	_____
Car 3:	_____	_____

3. How many business kilometres did the car travel during the year of income?

_____ Kilometres