**2020/2021 Individual Tax Return Checklist**

Full Name of Taxpayer:

Address:

Date of Birth:

Tax File Number:

Phone number:

Email:

If any of the items below are applicable to you, please answer “Y’ and fill out the form as best as you can. If the details do not fit within this form, please summarise the relevant information and forward through to mail@rucker.com.au. We may request further information if we believe it to be necessary.

|  |  |  |
| --- | --- | --- |
|  | Y/N |  |
| Were you a resident for tax purposes during the financial year?  |  |  |
| Please provide a copy of your latest tax return. |  |  |
| What is your current occupation? |  |  |
| How many dependents do you have? |  |  |
| **Income** | **Please provide documents/details** |
| PAYG payment summaries (group certificates) |  |  |
| Lump sum payments |  |  |
| Partnership/Trust distributions |  |  |
| Foreign sourced income |  |  |
| Interest income statements (to include term deposits) |  |  |
| Dividend statements |  |  |
| Managed fund annual tax statements  |  |  |
| Buy/Sell contracts of any sold shares |  |  |
| Crypto Currency running balance of purchases and sales.  |  |  |
| **Work-related Deductions** | **Please provide details/ amounts** |
| Home office **-** provide hours worked on average per week |  |  |
| Mobile * Provide monthly fee $
* Provide work related %
 |  |  |
| Internet* Provide monthly fee $
* Provide work related %
 |  |  |
| What were the total electricity/lighting costs for the year? |  |  |
| What were the total cleaning costs for the year? |  |  |
| What area as a % is your home office relative to your home?  |  |  |
| Work related items costing more than $300 For each item provide: * Description
* Cost
* Date of purchase
* Work related use %
 |  |  |
| Professional memberships/subscriptions |  |  |
| Professional development courses & seminars |  |  |
| Self-education expenses |  |  |
| Tools, protective clothing, uniforms |  |  |
| Travel expenses |  |  |
| Motor vehicle (with valid logbook) – Provide all expenses and Work related % |  |  |
| Motor vehicle (without logbook) – Provide **reasonable estimate** of work kilometres travelled  |  |  |
| **Other Deductions** |  | **Please provide details/ amounts** |
| Donations For each foundation/charity provide:* Name of foundation/charity
* Total amount
 |  |  |
| Prior year Tax agent fees (provide details if last year was not with us)  |  |  |
| Income protection(under personal name) |  |  |
| Voluntary super contributions (Please provide deduction acknowledgement from your superfund)  |  |  |
| Other |  |  |
| **Spouse Details** |  | **Only Provide details if I do not prepare the tax return for them.**  |
| Full Name |  |  |
| Date of Birth |  |  |
| Did you have your spouse for the full year? |  |  |
| Taxable income |  |  |
| Reportable Super Contributions (Per PAYG summary) |  |  |
| Total Net Investment Losses |  |  |
| Total reportable fringe benefits (Per PAYG summary)  |  |  |
| Total Tax Free - Government Pensions |  |  |
| **Rental Properties** |  | **Please provide documents/details** |
| Address |  |  |
| Is property jointly owned? How many owners |  |  |
| If the ownership is not split evenly, please provide ownership %.  |  |  |
| When was property first available for rent? |  |  |
| Was property available to rent for the full year?If not how many weeks was the property available for rent |  |  |
| Provide Rental Property Agent Statement for the financial year |  |  |
| Details of water rates, council rates, insurance, repairs/maintenance, landtax and any other expenses paid out of pocket relating to the property not covered by the property agent.  |  |  |
| Newly purchased property assets over $300 For each item provide:* Description
* Cost
* Date of purchase

  |  |  |
| Quantity surveyors report or Depreciation schedule |  |  |
| Bank loan interest for the year |  |  |
| **Sole Trader** |  | **Please answer questions** |
| What is your Australian Business Number  |  |  |
| What is the business activity? (if multiple please provide details of each) |  |  |
| Was the income earned from achieving a particular result or completing a contract?  |  |  |
| Was the income earned on an hourly basis? |  |  |
| Did you have to supply your own tools/equipment to complete the work? |  |  |
| Did 80% of your income come from one client? |  |  |
| Did you employ any staff? |  |  |
| Do you have a separate business premises? |  |  |
| Employee group certificates, or employee payments |  |  |
|  |  |  |
| **Please provide all summaries of all business income and expenses We can discuss this further if need be.**  |  |  |
|  |  |  |