

Individual Tax Return Checklist

 08 6144 3370 
www.ultimate-tax.com.au 
office@ultimate-tax.com.au 

 1/2 Walcott St, Mount Lawley 6050 

 PO Box 554, Mount Lawley WA 6929 


Below is a checklist of items that may assist you in collating your documents in order for us to process your income tax return.

Please tick all relevant items and attach these documents.

Once completed, you may email the completed copy and accompanying documents to us at office@ultimate-tax.com.au or print out and mail the documents to us.

Existing clients - within the Personal Details section you only need to complete your name and then any information which has changed since last year. New clients - please fill in all the required information.

| Personal Details | | |
|---|--|--------------------------------------|
| Name: | | |
| Address: | | |
| Phone/Mobile: | | |
| Email: | | |
| Date of Birth: | | |
| Tax file Number: | | |
| Occupation: | | |
| Bank Details For Any Tax Refunds: | BSB: | Account number: |
| | Acc. Name: | Financial Institution: |
| Private Health Cover | Please provide annual statement | |
| Spouse Details to Include in Your Tax Return: | Full Name: | Date of Birth: |
| | Taxable Income: | Spouse for full year: |
| Number of Dependent Children: | | |
| Child Support Amounts Paid for the year: | | |
| Income | | |
| | PAYG Payment Summary from employer/s | PAYG Payment Summary from Centrelink |
| | Dividend statements | Managed Fund distribution statements |
| | Interest income from banks. List each account separately | |

| | | |
|--|---------------------------------------|----------------------------------|
| Capital gains information (share or property buy & sell contracts) | | |
| Cryptocurrency | | Foreign income |
| Rental income. Refer to our | | Business income. Refer to our |
| Distribution from partnership or trust | | |
| Expenses | Total Amount (\$) | Work Use % |
| Accounting fees | | |
| Donations to charities (Charities must be registered Deductible Gift Recipients (DGR) in order for donations to be tax deductible. Please provide a copy of invoices for any large donations). | | |
| Work related car expenses (other than to and from work) | | |
| - How many KM travelled for work activities | | |
| - Work related % if logbook kept | Will need to contact for more details | |
| - Fuel | | |
| - Registration | | |
| - Insurance | | |
| - Repairs & maintenance | | |
| - Interest on vehicle loan | | |
| - Other - provide details | | |
| Protective clothing or uniforms | | |
| Laundry for uniforms | | |
| - How many times per week do you wash your uniform | | |
| - Do you wash your uniform on its own (not mixed with conventional clothing) | | |
| Work related self education expenses (Please provide copy of invoices) | | |
| Union fees | | |
| Subscriptions/membership | | |
| Stationery | | |
| Telephone/Mobile | | |
| Internet | | |
| Home office - hours per week  HOME OFFICE DIARY | | |
| Electricity | | |
| Gas | | |
| Personal super contributions statement | | |
| Income protection insurance statement | | |
| Other expenses - please list | | |
| | | |
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