

2010 Income Tax Return Checklist

Name: _____

Address: _____

Contact No: _____

Email: _____

INCOME

- 1 Number of PAYG Payment Summaries Attached:
- 2 Number of Eligible Termination Payments Attached:
- 3 Did you receive any Interest Income during the year? Yes No
(If yes, please complete below - ONLY INCLUDE YOUR SHARE)

Bank	Branch	Account Number	Amount \$

- 4 Did you receive any Dividend Income during the year? Yes No
(If yes, please complete below - ONLY INCLUDE YOUR SHARE. If unsure, please attach dividend advices)

Company	Unfranked \$	Franked \$	Imp Credit \$

- 5 Did you dispose of any shares during the 09/10 Financial Year? Yes No
*(If yes, please attach Purchase **and** Sale Contracts)*
- 6 Did you receive a Distribution from a Partnership or Trust? Yes No
(If yes, please attach Annual Tax Statements)
- 7 Did you receive any Rental Income? Yes No
*(If yes, please also complete the **Rental Property Checklist**)*
- 8 Did you receive any Government Pensions? Yes No
(If yes, please attach payment summaries)
- 9 Did you receive any Foreign Income? Yes No
(If yes, please provide details E.g. Pensions)

Details	Amount \$	Foreign Tax Paid

(Income continued on the following page)

INCOME - continued

10 Did you receive any other Income? Yes No

(If yes, please provide details. E.g. Royalties, Employee Share Schemes)

Details	Amount \$

DEDUCTIONS

11 Did you use your vehicle for work related travel during the year? Yes No

(If yes, complete below)

Cents per Kilometre Method (Max 5,000 kms) _____ Work kms travelled

Where travel has exceeded 5,000kms please include details of all motor vehicles expenses incurred and your business usage percentage (determined via the use of a log book over a continuous period of 12 weeks)

12 Did you incur an expense for any other Work Related Travel? Yes No

To/From Dates	Cost \$	# Nights	# Meals	Receipts	
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No
				<input type="checkbox"/> Yes	<input type="checkbox"/> No

Where costs exceed the reasonable allowance and a receipt is held, the actual cost will be claimed. Where receipts are not held, a claim will be made based on the ATO Reasonable Allowance.

13 Did you incur any work related uniform*, clothing, laundry and/or dry cleaning expenses? Yes No

Details	Cost \$	Receipts	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No

** Note: This is a uniform, either compulsory or non-compulsory that is unique and distinctive to the organisation for whom you work.*

14 Did you have any self education expenses relating to your job? Yes No

Expense (Travel, fees, books, journals, stationery etc)	Cost \$	Receipts	
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
		<input type="checkbox"/> Yes	<input type="checkbox"/> No

What was the connection between your employment and your study?

(Deductions continued on the following page)

DEDUCTIONS - continued

15 Did you incur any other work related expenses? Yes No

Date	Description	Cost \$

Note: Receipts must be held

16 Did you incur any interest or bank charges in relation to an investment, or did a financial institution deduct any TFN Withholding tax from Interest Income? Yes No

Details	Amount \$

17 Did you make any donations of \$2 or more? Yes No

Recipient	Amount \$

18 Do you have an outstanding HELP/SFSS Debt? Yes No
(If yes, please attach your Schedules from ATO)

Loan Type	Year Student Loan Taken:	Amount \$
HELP / SFSS		
HELP / SFSS		

TAX OFFSETS

19 Did you have a dependent spouse - married or defacto? Yes No

Number of days spouse was a dependant during the year:

Adjusted Taxable Income of spouse: \$

20 Did you have a dependent child/student for any part of the year? Yes No

Number of days child/student was a dependent during the year:

Name of dependent	Date of Birth	Education			Income
		Primary	Secondary	N/A	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

(Tax Offsets continued on the following page)

TAX OFFSETS - continued

- 21** Did you pay any Child Support? Yes No
Total Amount Paid
- 22** For the whole of 2009-10, did you and all of your dependants have private patient hospital cover? Yes No
(If yes, attach Private Health Fund Statement)
- 23** Did you have net medical expenses greater than \$1,500 for your family during the year? Yes No
(If yes, please attach all medical receipts and private health insurance benefit statements as support)
- 24** Did you receive Family Tax Benefit Part A during the period 1 July 2009 to 30 June 2010? Yes* No

* If you answered "Yes" to the above, please provide us with details of **only the following expenses** (where applicable) if you incurred them between 1 July 2009 to 30 June 2010;

- Laptops, home computers, and their associated costs (inc. repairs)
- Computer related equipment such as printers, USB flash drives, etc.
- Home Internet connections
- Computer software for educational use (inc. Microsoft Word, Excel, Powerpoint etc).
- School textbooks and other printed school learning materials

BUSINESS INCOME

- 25** Did you earn any income during the year from a personal business operation? Yes No
*(If yes, please also complete the **2010 Financial Statements / Business Checklist**)*

IMPORTANT

Please note, Bonsella Business Solutions relies on the information you provide us to prepare your tax return. It is the responsibility of the taxpayer to ensure that all deductions can be substantiated if requested by the Australian Taxation Office.

This Income Tax Return Checklist has only covered the more common items of an income tax return. Should you wish to discuss any of the content of the checklist or any other tax or accounting related matter, please do not hesitate to contact Bonsella Business Solutions or provide details below:

