

Individual Tax Checklist

Full Name:	
Date of Birth:	
Tax File Number (TFN):	
Occupation:	
Address:	
Phone Number:	
Email Address:	
Tax Year:	

Dependent Details

Full Name	Date of Birth

Bank Details

Bank Name:	
Account Name:	
BSB:	
Account Number:	

Income Checklist

Please tick (✓) or provide details for any income received:

- ☐ PAYG Payment Summaries / STP details
- ☐ Interest Received
- ☐ Dividends
- ☐ Employee Share Schemes
- ☐ Trust Distributions
- ☐ Rental Property Income & Expenses
- ☐ Superannuation Lump Sum / Annuities
- ☐ Foreign Income
- ☐ Sale of Assets (e.g. shares, property)
- ☐ Other Income: _____

Deductions Checklist

Tick if applicable and provide documentation:

- ☐ Car Expenses (Logbook required)
- ☐ Travel Expenses
- ☐ Uniform, Laundry & PPE
- ☐ Self-Education Expenses
- ☐ Income Protection Insurance
- ☐ Sickness & Accident Insurance
- ☐ Donations
- ☐ Personal Super Contributions (include Notice of Intent to Claim)
- ☐ Home Office Expenses

Home Office Use:

- Number of hours worked from home: _____

- Private Use %:

- Phone: _____%

- Computer: _____%

- iPad: _____%

Tax Offsets

- ☐ Private Health Insurance Statement
- ☐ Spouse Super Contributions
- ☐ Other Offsets: _____

Declaration

I declare that the information I have provided is true and correct.

Signature: _____

Date: _____