

Visions Synergy Associates

ABN 24 081 189 424

2005 Individual Income Tax Return Kit

2005 Individual income tax return checklist

Tax File Number: / / ABN:

Are you an Australian resident? YES/NO/UNSURE.....

Name: Mr/Mrs/Ms/Miss:.....

Name changed since last return? YES/NO

If YES, previous name:.....

Postal Address:

Postal address changed from last tax return? YES/NO

Address:.....

Date of birth: / /

Telephone: (H) (W) (M)

Email:

Occupation:

Spouse details (if applicable):

Do you want to use EFT? YES/NO

If YES, provide bank details BSB: Account Number:

Account name:

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Please circle YES or NO for each of the items listed below:

INCOME – Please provide evidence

1. Salary or wages..... YES/NO
2. Allowances, earnings, tips, director's fees etc..... YES/NO
3. Lump sum payments..... YES/NO
4. Eligible termination payments..... YES/NO
5. Commonwealth of Australia government allowances like Newstart, youth allowance and Austudy payment..... YES/NO
6. Commonwealth of Australia Government pensions and allowances..... YES/NO
7. Other Australian pensions or annuities (including superannuation pensions)..... YES/NO
8. Attributed personal services income..... YES/NO
9. Reportable fringe benefits..... YES/NO
10. Interest..... YES/NO
11. Dividends..... YES/NO
12. Income from partnerships and/or trusts..... YES/NO
13. Personal services income..... YES/NO
14. Net income or loss from business..... YES/NO
15. Deferred non-commercial business losses..... YES/NO
16. Amounts withdrawn from farm management deposits..... YES/NO
17. Net capital gains..... YES/NO
18. Direct or indirect interest in a controlled foreign entity..... YES/NO
18. Transfer of property or services to a non-resident trust..... YES/NO
18. Interest in a foreign investment fund (FIF) or a foreign life assurance policy (FLP)..... YES/NO
19. Foreign source income (including foreign pensions) and foreign assets or property..... YES/NO
20. Rent..... YES/NO
21. Bonuses from a life assurance or friendly society policy..... YES/NO
22. Other income (please specify)..... YES/NO

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DEDUCTIONS – Please provide evidence

D1. Work-related car expenses

- cents per kilometre method (max 5,000kms)..... YES/NO
- log book method YES/NO
- one-third of actual expenses method YES/NO
- 12% of actual cost method YES/NO

D2. Other work-related travel expenses

- Employee domestic travel with reasonable allowance..... YES/NO
 - If the claim is more than the reasonable allowance rate, do you have receipts for your expenses? YES/NO
- Overseas travel with reasonable allowance..... YES/NO
 - Do you have receipts for accommodation expenses?..... YES/NO
 - If travel is for 6 or more nights in a row, do you have travel records? (e.g. a travel diary) .. YES/NO
- Employee without a reasonable travel allowance..... YES/NO
 - Did you incur and have receipts for airfares? YES/NO
 - Did you incur and have receipts for accommodation? YES/NO
 - Do you have receipts for hire cars (if applicable)? YES/NO
 - Did you incur and have receipts for meals and incidental expenses?..... YES/NO
 - Do you have any other travel expenses? YES/NO
- Other work-related travel expenses, e.g., borrowed car..... YES/NO
(please specify)
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D3. Work-related uniform and other clothing expenses

- Protective clothing YES/NO
- Occupation-specific clothing YES/NO
- Non-compulsory uniform YES/NO
- Compulsory uniform YES/NO
- Conventional clothing YES/NO
- Laundry (up to \$150 without receipts)..... YES/NO
- Dry cleaning..... YES/NO
- Other claims – mending/repairs, etc (please specify)..... YES/NO
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D4. Work-related self-education expenses

Course taken at educational institution

- union fees YES/NO
- course fees YES/NO
- books, stationery YES/NO
- depreciation YES/NO
- seminars YES/NO
- travel..... YES/NO
- other (please specify) YES/NO

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D5. Other work-related expenses

- Home office expenses YES/NO
- Computer and software YES/NO
- Telephone/mobile phone YES/NO
- Tools and equipment..... YES/NO
- Subscriptions and union fees..... YES/NO
- Journals/periodicals YES/NO
- Depreciation YES/NO
- Sun protection products (i.e., sunscreen and sunglasses) YES/NO
- Seminars and courses not at an educational institution
- course fees YES/NO
- travel..... YES/NO
- other (please specify) YES/NO
- Any other work deductions (please specify) YES/NO

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Other types of deductions

- D6. Low value pool deduction..... YES/NO
- D7. Interest and dividend deductions..... YES/NO
- D8. Gifts or donations..... YES/NO
- D9. Deductible amount of undeducted purchase price (UPP) of an **Australian** pension or annuity YES/NO
- D10. Cost of managing tax affairs..... YES/NO
- D11. Australian film industry incentives YES/NO
- D12. Deductible amount of undeducted purchase price (UPP) of a **foreign** pension or annuity YES/NO
- D13. Non-employer sponsored superannuation contributions..... YES/NO
- Details of Superannuation Fund, if non-employer sponsored superannuation contributions:
- Full name of fund..... Account number.....
- Fund ABN Fund TFN
- D14. Deduction for project pool YES/NO
- D15. Other deductions (please specify)..... YES/NO
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- L1. Tax losses of earlier income years..... YES/NO

Tax offsets/rebates

- T1. Do you have a dependent spouse (without dependent child or student), a child-housekeeper or a housekeeper?..... YES/NO ^o
- Family Tax Benefit (FTB)
- ? Did you have care of a dependent child in 2005? YES/NO
- ? Did you or your spouse receive FTB through the Family Assistance Office in 2005? ... YES/NO
- T2. Are you a senior Australian?..... YES/NO
- T3. Are you a pensioner? YES/NO
- T4. Superannuation pension/ETP annuity YES/NO
- T5. Did you have private health insurance in 2005? YES/NO
- T6. Do you have a child that was born between 1 July 2001 and 30 June 2004? YES/NO
- T7. Did you make superannuation contributions on behalf of a spouse? YES/NO
- T8. Did you live in a remote zone or serve overseas with the defence force in 2005? YES/NO
- T9. Did you have net medical expenses over \$1,500?..... YES/NO

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- T10. Did you maintain a parent, spouse's parent or invalid relative?..... YES/NO
T11. Landcare and water facility tax offset YES/NO
T12. Are you a mature age worker with net income from working of less than \$58,000?..... YES/NO
T13. Other tax offsets (please specify) YES/NO
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Other relevant information

- A. Are you entitled to the Medicare levy exemption or reduction in 2005? YES/NO
(If yes, please specify):
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- B. Did you stop full time education at any time during the 2005 tax year?..... YES/NO

- C. Did you become a tax resident or stop being one at any time during the 2005 tax year? YES/NO

- D. Do you have a HECS liability or a student supplement loan (e.g., SFSS) debt? YES/NO

- E. Did you pay any tax within 14 days before the due date of the liability (e.g., HECS)? YES/NO

- F. Did a trust or company distribute anything to you for which family trust distribution tax has been paid
..... YES/NO

- G. Do you have a loan with a private company or have such a loan amount forgiven? YES/NO

(If yes, please specify) - (reviewer consider if deemed dividend in year):
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- H. Did you receive any benefit from an employee share acquisition scheme? YES/NO

(If yes, please specify) – (reviewer consider if assessable in year):
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• These tax offsets may not be available where the taxpayer is eligible to claim FTB Part B.

Dated the day of..... 20.....

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Signature of taxpayer

.....
Name (print)