

Visions Synergy Associates

(Certified Practising Accountant & Registered Tax Agent)

2009 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 Electronic Funds Transfer? YES/NO

If YES, provide bank details BSB: Account Number:

Account name:

Visions Synergy Associates ABN 24 081 189 424

Mailing address: P.O. Box 179, Darlinghurst, NSW 2010

p (02) 9261 8980 f (02) 9267 8382

Liability limited by a scheme approved under the Professional Standards Legislation



Visions Synergy Associates

(Certified Practising Accountant & Registered Tax Agent)

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. Employer lump sum payments YES/NO
4. Employment termination payments YES/NO
5. Australian Government allowances and payments like newstart, youth allowance and Austudy payment YES/NO
6. Australian Government pensions and allowances YES/NO
7. Australian annuities and superannuation income streams YES/NO
8. Australian superannuation lump sum payments YES/NO
9. Attributed personal services income YES/NO
10. Reportable fringe benefits amounts YES/NO
11. Interest YES/NO
12. Dividends YES/NO
13. Distributions from partnerships and/or trusts YES/NO
14. Personal services income (PSI) YES/NO
15. Net income or loss from business YES/NO
16. Deferred non-commercial business losses YES/NO
17. Net farm management deposits or withdrawals YES/NO
18. Net capital gains YES/NO
19. Direct or indirect interests in controlled foreign entities YES/NO
19. Transfer of property or services to a foreign resident trust YES/NO
19. Interests in a foreign investment fund (FIF) or a foreign life assurance policy (FLP) YES/NO
20. Foreign source income (including foreign pensions) and foreign assets or property YES/NO
21. Rent YES/NO
22. Bonuses from a life insurance company or friendly society policy YES/NO
23. Forestry managed investment scheme income YES/NO
24. Other income (please specify) YES/NO

.....
.....

Visions Synergy Associates ABN 24 081 189 424

Mailing address: P.O. Box 179, Darlinghurst, NSW 2010

p (02) 9261 8980 f (02) 9267 8382

Liability limited by a scheme approved under the Professional Standards Legislation



Visions Synergy Associates

(Certified Practising Accountant & Registered Tax Agent)

DEDUCTIONS – Please provide evidence

D1. Work related car expenses

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

D2. 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., a borrowed car) YES/NO
(please specify)

.....

3. 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 expenses (up to \$150 without receipts) YES/NO

Dry cleaning expenses YES/NO

Visions Synergy Associates ABN 24 081 189 424

Mailing address: P.O. Box 179, Darlinghurst, NSW 2010

p (02) 9261 8980 f (02) 9267 8382

Liability limited by a scheme approved under the Professional Standards Legislation



Visions Synergy Associates

(Certified Practising Accountant & Registered Tax Agent)

Other claims such as mending/repairs, etc (please specify) YES/NO

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

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 related deductions (please specify) YES/NO

Other types of deductions

D6. Low value pool deduction YES/NO

Visions Synergy Associates ABN 24 081 189 424

Mailing address: P.O. Box 179, Darlinghurst, NSW 2010

p (02) 9261 8980 f (02) 9267 8382

Liability limited by a scheme approved under the Professional Standards Legislation



Visions Synergy Associates

(Certified Practising Accountant & Registered Tax Agent)

- D7. Interest and dividend deductions YES/NO
D8. Gifts or donations YES/NO
D9. Cost of managing tax affairs YES/NO
D10. Australian film industry incentives YES/NO
D11. Deductible amount of undeducted purchase price of a foreign pension or annuity YES/NO

Other types of deductions (continued)

- D12. Personal superannuation contributions YES/NO
Full name of fund: Account no:
Fund ABN: Fund TFN:
D13. Deduction for project pool YES/NO
D14. Forestry managed investment scheme deduction YES/NO
D15. Other deductions (please specify) YES/NO
.....
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 housekeeper or a child-housekeeper? YES/NO ¹
T2. Are you a senior Australian? YES/NO
T3. Are you a pensioner? YES/NO
T4. Did you receive a superannuation income stream? YES/NO
T5. Did you have private health insurance in 2009? YES/NO
T6. Have you incurred expenses for your child's education? YES/NO
T7. Do you have a child that was born or adopted between 1 July 2001 and 30 June 2004? YES/NO
T8. Did you make superannuation contributions on behalf of your spouse? YES/NO
T9. Did you live in a remote area of Australia or serve overseas with the Australian defence force or the UN armed forces in 2009? YES/NO
T10. Did you have net medical expenses over \$1,500? YES/NO
T11. Did you maintain a parent, spouse's parent or invalid relative? YES/NO
T12. Are you entitled to claim the landcare and water facility tax offset? YES/NO

Visions Synergy Associates ABN 24 081 189 424

Mailing address: P.O. Box 179, Darlinghurst, NSW 2010

p (02) 9261 8980 f (02) 9267 8382

Liability limited by a scheme approved under the Professional Standards Legislation



Visions Synergy Associates

(Certified Practising Accountant & Registered Tax Agent)

- T13. Are you a mature age worker with 'net income from working' of less than \$63,000? YES/NO
- T14. Are you a 'small business entity' with an annual turnover of \$75,000 or less? YES/NO
- T15. Other tax offsets (please specify) YES/NO
-

ⓘ These tax offsets may not be available where the taxpayer is eligible to claim FTB Part B.

Other relevant information

A. Are you entitled to the Medicare levy exemption or reduction in 2009? YES/NO
(If yes, please specify):

.....
.....

B. Were you under the age of 18 on 30 June 2009..... YES/NO

C. Did you become an Australian tax resident at any time during the 2009 income year? YES/NO

D. Did you cease to be an Australian tax resident at any time during the 2009 income year? ... YES/NO

E. Did you have a spouse at any time during the 2009 income tax year..... YES/NO

F. Do you have a HECS/HELP liability or a student supplement loan debt? YES/NO

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

H. Did a trust or company distribute income to you in respect of which family trust distribution tax was paid by the trust or company? YES/NO

I. 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 under Division 7A):

.....

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

.....

K. Family Tax Benefit ('FTB'):

– Did you have care of a dependent child in 2009?..... YES/NO

– Did you or your spouse receive FTB through the Family Assistance Office in 2009? YES/NO

Dated the day of20.....

.....
Signature of taxpayer

.....
Name (print)

Visions Synergy Associates ABN 24 081 189 424

Mailing address: P.O. Box 179, Darlinghurst, NSW 2010

p (02) 9261 8980 f (02) 9267 8382

Liability limited by a scheme approved under the Professional Standards Legislation

