

Individual Tax Return Checklist



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Client Information		
If you have provided the information previously, skip this section, unless the information has changed.		
Surname		
First Name		
Contact Email		
Contact Mobile		
Tax File Number		
Date of Birth	/ /	
Job Occupation		
Spouse Name		
Spouse Date of Birth	/ /	
Home Address		
No. Dependent		How many kids do you have?
Your Personal Bank Account		If you are in a refundable position, an account for the tax refund.
Account Name:		
BSB		
Bank Account number		
Work Related Expenses for 1 July 2019 to 30 June 2020		
Items	Details	Comment
Donation	\$	Please provide the invoice.
Mobile Phone	\$	% Work related x Monthly Bill x 12
Internet	\$	% Work related x Monthly Bill x 12
Training & Course	\$	Education you had to pay for work to up skill
Working from home hours? (if applicable)	Hours/Week	On average, how many hours do you work per week?
Working from home, because of COVID19	Hours	From 01/03/20 to 30 June 2020, the total hours working from home?
Membership	\$	Any work related membership or unions you have joined.
Purchase any work equipment	\$	Please provide the invoice.
Work Related Travel	\$	Flight, Uber, Train Tickets ect. Please provide a total amount. Keep your receipts for 5 years
Private Motor Vehicle for work- If you travel for work, eg Work place to work place, please complete the follow:		
Private Car Model		
Private Car Rego		
KM Travel for Work	KM	Do NOT include any travel from home to office, visa versa
Other work related expenses	\$	transaction history to prove your claim
Investment Property		
If you have more than one investment property, please copy this section on to a separate excel		
Items	Details	Comment
Address of the investment property		
Percentage of ownership	%	
Real estate management yearly summary		Please provide a copy of it.
Rental income	\$	
Loan Interest- annual Amount	\$	Interest relating to the property
Council Rates	\$	

Body Corporate	\$	
Depreciation Report	Yes/ No	A Depreciation Report prepared by certified Quantity Surveyor
Repairs and maintenance	\$	
Capital Improvement	\$	Please note, these are not tax deductible until the property is sold.
Water	\$	
Insurance- Home/Land lord	\$	
Land Tax	\$	
Any other expenses	\$	eg. cleaning, gardening, pest control etc.
Have you sold the property?	Yes/ No	If yes, please provide Contract of sales and Adjustment Statement
ABN - Business Income - Sole Trader		
If you operate a business as a Sole Trader		
Items	Details	Comment
Business Address		Actual business operating address, or your home address
Business Activities		Describe Business Activities
ABN		
Business Sales	\$	Total sales for the financial year
Business Expenses	\$	Please provide a break down of the expenses
GST		If you ABN is register GST, you must record all GST amounts from each transactions according to ATO rules, and you are required to keep invoices for 5 years. You may provide copy of the invoices to us, we can summarise them for you
Trading Shares		
You don't need to provide following information if you don't trade Shares		
Items	Details	Comment
Share Account transaction history		Between 01/07 to 30/06 , format in Excel
Share account annual statement		Annual Statement as of 30/06, format in PDF
Other Income From Trust or Partnerships		
You don't need to provide following information if you don't receive income distribution from other resources		
Income From trust	ABN of Trust	Trust Distribution statement from accountant
Income from Partnership	ABN of Partnership	Partnership distribution statement from accountant
Dividend from Private company	ABN of Company	Dividend statement from accountant
Interest income from private company	ABN of Company	Interest Statement from accountant

**Once you've filled out the form, send it back to info@Ax3.com.au
and we'll get back to you within 2 business days**

