2025 Taxation Checklist

	Yes	No	Details
1. Have there been changes to your personal details?			Please advise over
2. Did you have a spouse for the whole year?			Please provide details
INCOME			
1. Have you received Payment Summaries (formerly group certificates)?			
a. What is your main occupation?			
2. Have you received any termination or superannuation payments?			
3. Have you received any bank interest?			Please complete interest income worksheet
4. Have you received dividends or distributions?			Please complete dividend income worksheet
5. Are you part of an employee share scheme?			
6. Have you received income from a business?			Please attach business income & expenses checklist
7. Have you sold any property, e.g., real estate, shares			Please complete the capital gains worksheet and attach details
8. Have you received rental income?			Please complete rental property worksheet and attach details
DEDUCTIONS			
1. Motor vehicle expenses			Please complete motor vehicle worksheet
2. Travel expenses			
3. Uniforms or protective clothing			
4. Self-education expenses			Including professional development courses
5. Work related expenses			
a. Conferences or Seminars			
b. Home office expenses**			Please provide details
c. Outdoor workers – hats, sunscreen, etc			
d. Professional journals or textbooks			
e. Tools of trade			
f. Union fees or professional associations			
6. Depreciation of equipment – purchase date and cost of new plant/s			
7. Investment expenses			
8. Have you made donations?			
9. Tax agents fee			
10. Personal super contributions for yourself or spouse			Please provide a confirmation from your superannuation fund to claim the deduction.
11. Income protection / disability insurance			
PERSONAL REBATES			
1. Health Insurance / Medicare Surcharge			Hospital, hospital and extras, extras only
2. Do you have a HECS / HELP debt or student loan?			Provide details
3. Zone rebate- Did you work in a remote area?			Your usual place of residence must be in the zone
4. Any other information?			Please provide details

NOTES AND WORKSHEET

NAME…… **EMAIL ADDRESS**……..

DAYTIME CONTACT NUMBER…… **DATE**……

BANK ACCOUNT DETAILS

As from 01 July 2013 the ATO will only pay refunds via EFT

BSB	Account Number	Account Name

PERSONAL DETAILS

Spouse Name	Tax File Number	Date of Birth	Income

DEPENDENT CHILDREN

Name of Child/ren	Date of Birth	Income

INTEREST INCOME

Bank	Branch	Account	TFN tax	Income	% Ownership

DIVIDEND INCOME

Company	Unfranked	Franked	IMP credit	Date	% Ownership

Signature_____**Date**_____

CAPITAL GAINS

Investment Name	Units	Purchase date	Purchase cost	Units	Disposal date	Proceeds

**HOME OFFICE – LIST AMOUNTS

DEDUCTIONS	DATE	AMOUNT	% OF BUSINESS USE	Other
Gas and electricity* Number of hours worked from home*				
Internet				
Mobile phone/ telephone				
Stationery				

**Please note that claiming gas and electricity may result to a capital gains tax when the property is disposed.*
**Please also note that from 01 March 2023, ATO requires a record of all the hours worked from home for the fixed rate method, and no other running expenses can be claimed separately e.g., phone, internet, stationery, etc.*

ANY OTHER DEDUCTIONS

DEDUCTIONS	DATE	AMOUNT	% OF BUSINESS USE	Other

Do you need assistance with any of the below? Please contact one of our staff if you would like any assistance or a referral to one of our referral partners.

- ☐ Bookkeeping Services
- ☐ Business Activity Statement (BAS) Preparation
- ☐ Business Advisory
- ☐ Business Structures
- ☐ Financial Planning
- ☐ Self-Managed Super Fund
- ☐ Tax Audit Insurance
- ☐ Tax Planning
- ☐ Wills, Enduring power of attorney, Advance care directives

2025 Motor Vehicle Checklist

NAME: _____

Please complete this schedule for all vehicles used for business or work-related travel.

	NO	YES
Q. Have you kept a logbook of business or work-related travel? If YES, complete Part A. If NO, go to the next question.	❑	❑
Q. Does your business use exceed 5000km's? If YES, complete Part A. If NO, complete Part B.	❑	❑

PART A

Details of car	Vehicle 1	Vehicle 2
Make of Car		
Registration		
Engine Capacity		
Original Cost		
Date of Purchase (if known)		

Odometer readings	Vehicle 1	Vehicle 2
as at 01 July 2024		
as at 30 June 2025*		
Running costs	**Vehicle 1**	**Vehicle 2**
Petrol Actual / Estimated		
Oil		
Repairs		
Registration		
Insurance		
Tyres		
Depreciation		
Interest on Loan (not repayments)		
RAA / Licence		
Business Parking Fees (not fines)		
Lease Instalments		

**Please include your logbook (if applicable), and any lease or finance agreement.*

PART B

Details of car	Vehicle 1	Vehicle 2
Purpose of Journey		
Make of Car		
Registration		
Engine Capacity		
Odometer Reading at 30 June 2025		
Estimate of Business Km's Travelled		

Signature_____**Date**_____

2025 Taxation Return

MasterTax
Accountants & Tax Advisers

BUSINESS INCOME CHECKLIST

	Yes	No
BUSINESS RECORDS		
Please include the following documentation		
a. Computer back-ups, reports, cash books, ledgers etc	❑	❑
b. Details of income (e.g., invoice books / deposit books)	❑	❑
c. Bank statements and cheque butts	❑	❑
d. Listing of debtors (money owed to you) as at 30 June 2025	❑	❑
e. Listing of creditors (money owed by you) as at 30 June 2025	❑	❑
f. Details of trading stock on hand	❑	❑
g. Petty cash details, and expenses paid from private accounts	❑	❑
h. Loan and lease agreements	❑	❑
i. Details of plant sold, destroyed or purchased	❑	❑
j. Motor vehicle expenses including logbooks	❑	❑
k. Schedule of major plant repairs	❑	❑
l. Details of travelling expenses and entertainment	❑	❑
m. Payroll details including reconciliation	❑	❑
n. Payments to contractors	❑	❑
o. Details of income not paid into your normal bank account	❑	❑
p. Payments to superannuation funds	❑	❑
q. Copies of your Business Activity Statements	❑	❑
OTHER INFORMATION		
Please detail below any other information you believe is relevant to the compilation of your financial statements and income tax returns.		

Signature_____**Date**_____

2025 Rental Property Worksheet

MasterTax
Accountants & Tax Advisers

NAME: _____

Property Address	
Date of Purchase	
Purchase Price	
Date First Rented	
Number of Weeks Rented	
Number of Weeks Available for Rented	

Gross Rent Received $_____

Other rental related income (*Please specify*) $_____

LESS EXPENSES

Interest on Loans	
Special Building Write Off	
Advertising	
Bank Charges	
Borrowing Expenses	
Cleaning	
Council Rates	
Depreciation*	
Gardening / Lawn Mowing	
Insurance	
Land Tax	
Legal Expenses	
Pest Control	
Property Agent Fees/Commissions	
Repairs & Maintenance	
Stationery, Telephone, Postage	
Water Rates	
SUNDRY RENTAL EXPENSES	
Accounting Fees	
Maintenance Levies	
Stamp Duty on Leased Property	
Letting Fees	
Strata Fees	
Emergency Service Levy	

TOTAL EXPENSES $_____

NET RENTAL INCOME $_____

Note – Travel expenses for inspection of the property can no longer be claimed

****If you have acquired a depreciation schedule from the quantity surveyor, please provide us a copy.***