

2026 FINANCIAL YEAR INDIVIDUAL ANNUAL TAX CHECKLIST

Name:

BANK ACCOUNT DETAILS

The Australian Taxation Office no longer issue cheques for income tax refunds. If you are entitled to a refund it will need to be credited direct to your bank account.

BSB & Acc Number:

Account Name:

PRIVATE HEALTH INSURANCE

Are you covered by Private Health Insurance? YES NO (Please circle)

Level of Cover: HOSPITAL EXTRAS BOTH

Notes:

INCOME

	Yes	No
1. Salary / Wage Income <i>(Brentnalls can access your income information via the ATO)</i>	<input type="checkbox"/>	<input type="checkbox"/>
2. Business Income If yes, please provide a summary of business income/expenses. This can be an excel document, accounting software reports (e.g MYOB, XERO) or enable us access to software if not already provided	<input type="checkbox"/>	<input type="checkbox"/>
3. Distributions from Trusts / Partnerships For managed funds please provide annual tax statements for the financial year. For Family Trust or Partnership distributions where not prepared by Brentnalls, please attach financial statements and tax return	<input type="checkbox"/>	<input type="checkbox"/>
4. Investment Rental Property(s) If yes, please provide the rental summary statement from the agent (if available) and fill in the rental schedule attached for additional income or expenditure not included on agent summary eg loan interest, rates etc. Was the property(s) sold during the financial year? If yes, please provide the settlement statement	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. Farm Management Deposits If yes, please provide copies of all statements for the financial year	<input type="checkbox"/>	<input type="checkbox"/>

INCOME CONTINUED

				Yes	No
6. Dividends Received If yes, please attach dividend statements and complete the below table or alternatively provide reports from your trading platform or broker (if available).					
Company Name	Unfranked Amount	Franked Amount	Franking/ Imputation Credit	TFN Withheld	
\$	\$	\$	\$	\$	
\$	\$	\$	\$	\$	
\$	\$	\$	\$	\$	
\$	\$	\$	\$	\$	
\$	\$	\$	\$	\$	
7. Any investments held or purchased / sold during the financial year (including cryptocurrency)? If yes, please provide a portfolio report from your trading platform or broker showing all investments held at 30 June and a transaction report detailing all purchases and sales for the financial year. Alternatively, please provide all buy / sell confirmation documents. If applicable, provide details of any cryptocurrency sold during the year and holdings at 30 June.					
8. Interest Income If yes, please provide a summary report from internet banking detailing interest amounts for the financial year, or alternatively please fill out the table below from bank statements.					
Bank	BSB	Account No.	Interest Earned		
			\$		
			\$		
			\$		
			\$		
9. Other Income (please read and specify below) If yes, please attach relevant documentation. For example, foreign investments or income, bonuses or any other income not detailed above.					
Description					
1.				\$	
2.				\$	
3.				\$	
4.				\$	
5.				\$	

Please continue onto the next page for deductions

Deductions

1. Work related Car Expenses

Option 1 (cents per kilometre method)		
Estimated number of work-related kilometres travelled (note maximum 5000kms):		
Option 2 (logbook method)		
Vehicle business / work usage % (per 12 week logbook completed within last 5 years)		
Fuel Cost (total for year)	\$	
Repairs & Maintenance	\$	
Registration	\$	
Insurance	\$	
Interest	\$	
Other (please specify below)		
1.		\$
2.		\$
3.		\$
4.		\$
5.		\$

2. Work Related Travel Expenses (where not reimbursed by your employer / business)

Airfares	\$	
Accommodation	\$	
Taxi/Ubers	\$	
Meals	\$	
Other (please specify below)		
1.		\$
2.		\$
3.		\$
4.		\$
5.		\$

Deductions Continued

3. Work Related Uniform/ Laundry Expenses (not reimbursed by your employer)

Work uniform with logo (compulsory and non-compulsory), protective clothing, occupation specific clothing	\$
Laundry – estimated number of loads per week for work uniform	_____ no of loads per week
Laundromat & Dry Cleaning expenses	\$

4. Work Related Self Education Expenses (not reimbursed by your employer)

Training courses (both online and in person)	\$
Seminars & textbooks	\$

5. Home Office & Other Work Related Expenses

Total hours worked from home during the financial year (a logbook of home office hours to be recorded)			
Telephone	\$	Business Use %	
Internet	\$	Business Use %	
Equipment eg computer	\$	Business Use %	
Tools	\$		
Stationery	\$		
Memberships	\$		
Other (please specify below)			
1.			\$
2.			\$

7. Gifts or Donations (please specify below)

1.		\$
2.		\$
3.		\$

8. Personal Super Contributions

Provide a notice of intent to claim confirmation letter from your superfund & advise amount of contribution \$_____ (please disregard if Brentnalls manages your SMSF)

9. Income Protection Insurance Premiums Paid (outside of superannuation fund)

Please provide a copy of your income protection letter confirming premiums for the year

10. Any Other Relevant Expenses (please specify below)

1.		\$
2.		\$
3.		\$

RENTAL PROPERTY SCHEDULE

For any additional amounts separate to those included on the agent's statement, please use a copy of this schedule for each property.

Address:	
Income:	
Rental Income	\$
Outgoings Reimbursements	\$
Rates Adjustments	\$
Other	\$
Less Outgoings:	
Advertising for tenants	\$
Bank charges	\$
Body corporate fees / strata fees	\$
Borrowing Expenses	\$
Cleaning	\$
Council Rates	\$
Gardening / lawn mowing	\$
Insurance	\$
Interest	\$
Land Tax	\$
Legal expenses	\$
Pest Control	\$
Phone expenses	\$
Property agent fees and commissions	\$
Repairs and Maintenance	\$
Stationery and postage	\$
Water charges	\$
Emergency Services Levy	\$
Electricity & Gas	\$
Sundry Expenses (please specify below)	
	\$
	\$
	\$
	\$
Equipment / Capital Purchases (please specify below)	
	\$
	\$
	\$
	\$
	\$
	\$