

## Rental Property or Schedule of Income and Expenses Checklist 2017

Use this checklist if you have a rental property or require a schedule of income and expenses only (such as a contractor able to claim expenses against income which has had tax deducted at source).



<b>Name:</b>	<b>Email:</b>	<b>Phone:</b>
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### RENTAL / CONTRACTING CHECKLIST

<b>Address of rental property:</b>	<b>Type of contracting:</b>

#### Income

1. Rental	\$
2. Contracting	\$
3. Sale of Assets – please provide full documentation	\$
4. Other	\$

#### Deductions

1. ACC Levies	\$
2. Advertising	\$
3. Heat, Light & Power	\$
4. Fixed Assets – have you purchased assets during the year? Please provide full documentation	\$
5. Insurance	\$
6. Interest Paid	\$
7. Legal Expenses – please provide full documentation	\$
8. Printing & Stationery	\$
9. Protective Clothing	\$
10. Rates	\$
11. Repairs & Maintenance	\$
12. Telephone & Tolls	\$
13. Trade Subscriptions	\$
14. Travel Expenses	\$
15. Vehicle Expenses	\$
16. Other _____	\$

#### Records Required

Bank Statements, Receipts and Cheque Butts	<input type="checkbox"/>	Has the nature of your business changed in any significant way during the year, or were there any special circumstances affecting your results?
Computer Cashbook, either a backup copy or printed reports	<input type="checkbox"/>	
Loan Statements / Hire Purchase Statements	<input type="checkbox"/>	
Receipts and Invoices Issued by You	<input type="checkbox"/>	
Invoices Paid by You	<input type="checkbox"/>	
	<input type="checkbox"/>	

# 2017 Individual Income Details Checklist

Use this checklist to help you put together all of the information required to complete your individual income tax return.

Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Information Required		Comment
<b>Income</b>		
<b>Provide copies or details of the following</b>		
Wages/Salary (Detail Employer(s) and Dates Employed)	<input type="checkbox"/>	
Interest Received (Provide copies of Resident Withholding Tax Summaries for all sources of interest received)	<input type="checkbox"/>	
Dividends Received (Provide copies of Dividend Payment Notices for all dividends received during the year)	<input type="checkbox"/>	
National Superannuation (Confirm dates in receipt of Super)	<input type="checkbox"/>	
PIE Income (Attach any Certificates of investments in PIEs or Kiwisaver Funds or Super Schemes)	<input type="checkbox"/>	
Rental Property (Attach full details & complete attached Schedule at page 3)	<input type="checkbox"/>	
Contracting (Attach full details & complete attached Schedule at page 3)	<input type="checkbox"/>	
Share in an Estate/Trust, Company or Partnership we do not act for (Include full details as well as a copy of the entity income tax return)	<input type="checkbox"/>	
Other Income (Attach full details. Include any overseas income)	<input type="checkbox"/>	
Share Trading (Advise full details of share transactions if you have been dealing in shares)	<input type="checkbox"/>	
Income Replacement Insurance Policy Receipts (Advise if you have received any payouts from your insurance company)	<input type="checkbox"/>	
<b>Deductions</b>		
If you have a rental property or claim deductions against income, refer to the attached schedule at Page 3	<input type="checkbox"/>	
Loss from Look Through Company or other business – if you have been attributed a share of loss other than from an undertaking we are aware of, attach details including the income tax return.	<input type="checkbox"/>	
Income Replacement Insurance Policies – please tell us if you have claimed the premiums as part your business expenses, otherwise provide details of the insurance costs paid	<input type="checkbox"/>	
<b>Tax Credits and Rebates</b>		
<b>Donations made to Charities can be claimed:</b>		
Attach receipts in excess of \$5	<input type="checkbox"/>	

FAMILY ASSISTANCE / WORKING FOR FAMILIES CHECKLIST			
List details of all children under the age of 18 who were still living at home for all or part of the year. (Note that children aged 18 or under who attend a tertiary institute may be eligible for family assistance).			
Name of Child	Date of Birth	Date Left School	IRD Number

	Yes	No	Attached
Have you married, separated or otherwise changed your family circumstances during the year to 31 March 2017? (If yes please supply brief details and dates)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have you paid or received maintenance or Child Support to/from any person during the year?(If yes please supply amounts and brief details)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Would your family normally work 20 hours a week (single parent family) or 30 hours a week (two parent family). (If yes please supply normal hours and number of weeks worked during the year)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*Property of...*

**Your total family income for Family Assistance / Working for Families purposes includes income from the following sources (which may not be included in your income tax return). Please advise if you have any income from the following:**

	\$	Yes	No	Attached
Attributable Trustee Income <i>(Advise us of Trusts we do not act for)</i>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attributable Fringe Benefits <i>(eg Low interest loan from company)</i>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PIE Income <i>(Excludes KiwiSaver and Super Schemes)</i>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Passive Income of Children <i>(Amounts over \$500 must be included)</i>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Income of Non Resident Spouse <i>(Their worldwide income)</i>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tax Exempt Salary or Wages <i>(Only from specific international agreements)</i>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pensions & Annuities <i>(eg Private Super Funds)</i>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Payments <i>(eg Insurance policy payment for loss of Earnings, total exceeding \$5,000)</i>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For explanation of the above please refer to <http://www.ird.govt.nz/wff-tax-credits/entitlement/work-out/wfftc-entitlement-adjustments.html> or call the office if you think you may need to disclose additional income.