

2025 Individual Tax Return Checklist

Client Name: _____

If any of the following has changed since last year, please provide:

Contact Information:

Address: _____

Phone: _____

Email: _____

Bank Account details for IRD refunds:

Account Name: _____

Account Number: _____

Information Required (if applicable) for period 01/04/2024 – 31/03/2025

	Enclosed	N/A
• Dividends Received (attach dividend statements)	<input type="checkbox"/>	<input type="checkbox"/>
• Interest Received (attach RWT Certificates)	<input type="checkbox"/>	<input type="checkbox"/>
• Income Protection Insurance Premiums paid (please include statements)	<input type="checkbox"/>	<input type="checkbox"/>
• Receipts for Donations Paid	<input type="checkbox"/>	<input type="checkbox"/>
• Superannuation (if overseas)	<input type="checkbox"/>	<input type="checkbox"/>
• Any other income you received that was not lodged with IRD	<input type="checkbox"/>	<input type="checkbox"/>
• Working for Families (if applicable please fill in page 2. If this section is not completed, we are unable to calculate your Working for Families)	<input type="checkbox"/>	<input type="checkbox"/>
• Provide details of any Crypto or Digital Assets you may own	<input type="checkbox"/>	<input type="checkbox"/>
• Provide details of any offshore bank accounts, borrowings, property, investment income or interests in overseas trusts, overseas superannuation and insurance policies	<input type="checkbox"/>	<input type="checkbox"/>



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Working for Families

Yes

No

Spouse's Name: _____ Spouse's IRD Number: _____

Child's Name	DOB	IRD Number	Shared Custody Y / N and if so, how many days?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other Payments Y / N Total \$

Please provide details of any other income received that is used to calculate working for families. This includes other payments in excess of \$5,000 per annum used for the family's living expenses.

I confirm that the information provided is true and correct and I authorise Doyle Accountants Limited to use this information in the preparation of my/our Financial Accounts and Tax returns.

Signed: _____

Name: _____

Date: _____