

# **2024 Personal Tax Return Information Sheet**

## **Personal Information**

Your surname	
Your given names	
Your date of birth	/ /
Postal address	
Residential address	
(If different to postal address)	
Your occupation	
Mobile number	
Home phone number	
e-mail address	
Bank account details (NOTE: If you are expecting a refund, the ATO no longer	Account name:
issue refund cheques)	BSB: Account number:
Did you have a spouse for the full financial year? (Married, de facto, same sex)	Yes No No
If no, period you had a spouse	From / / to / /
Spouse's surname	
Spouse's given names	
Spouse's date of birth	
Is this the first time we are doing your tax return?  If yes, please provide copies of the prior year tax returns	Yes  No
done for yourself and your spouse.	
If we are not doing your spouse's tax return, please advise the spouse's taxable income, in the current year.	\$
Please fill-out details about your dependent children (Depe years old, and a full-time student)	endent child is a child who is under 21 years old, or 21 to 24
Date of Birth	Full name

#### **Income**

1. Did you receive PAYG payment Summaries from your employer?	Yes □ No □	
If no, your employer would have lodged your pay details via STP to the ATO. We can access this information on your behalf. Please go to question 2.		
If yes, we need copies of all payment summaries for wages, allowances, earnings, tips of payments (both employer & superannuation), employment termination payment, Austiallowances (Newstart, Austudyetc.), annuities and superannuation income streams. any letter(s) and schedule(s) sent to you by the provider with your payment summary.	tralian Government pensions & For income streams, we also need	
2. Did you receive or reinvest any Interest?	Yes □ No □	
If no, go to question 3.		
If yes, please provide the end-of-year interest summary statement, obtained from you	r bank /financial institution.	
3. Did you receive or reinvest any dividends from shares held?	Yes 🗌 No 🗌	
If no, go to question 4.		
If yes, please provide all dividend/distribution/tax statements received during the final	ncial year.	
Dividends reinvested must be declared as income, even though you didn't receive any n Dividends are assessable in the year of payment.	noney.	
4. Did you receive distributions from partnerships, trusts or managed funds?	Yes 🗌 No 🗌	
If no, go to question 5.		
If yes, please provide the annual tax statement of distributions from each entity.		
Managed funds are investments in unit trusts such as BT, Colonial, and MLC etc.		
5. Did you sell any assets? (Property, shares, cryptocurrency, etc)	Yes 🗌 No 🗌	
If no, go to question 6.		
<ul> <li>If yes, please provide the following documents.</li> <li>Documents showing the date and value of the asset purchased</li> <li>Documents showing the date and value of the asset sold</li> <li>Documents relating to any incidental costs</li> <li>For managed funds/cryptocurrency, we need the tax statement from the fund manager/exchange or documents showing cost and sale amounts for all units sold/swops.</li> </ul>		
If you sold assets such as shares, <b>cryptocurrency</b> , units in trusts or property which were acquired after 20 September 1985, you may have to pay capital gains tax (CGT). Your main residence is exempt from CGT, provided it was not used to produce income.		
6. Did/Do you own a rental property/properties?	Yes 🗌 No 🗌	
If no, go to question 7.		
If yes, we need the following documents please.  Rental Agent annual summary statement  Property bank loan statements/transaction history covering full financial year  Council, water rates notices and repairs or maintenance invoices  Property/landlord insurance details  Depreciation schedule (If not provided before)  Solicitor's letter including settlement documents if the property was purchased/se.  Any other information if you think that may be relevant	old during the year	

7. Did you receive income/loss from a business as a sole trader?	Yes	□ No	o 🗆
If no, go to question 8.			
If yes, please provide us with either your cashbook/MYOB file or a summary of income and expenses, receipts, workpapers etc. including GST calculations if you are a GST-registered business and business bank statements.			
8. Did you receive any other income not referred to above?	Yes		o 🗆
If no, go to question 1 under Deductions.			
If yes, please provide details.			
Other income refers to <b>foreign income, pensions</b> , bonuses from <b>life insurance companies</b> or <b>friendly societies</b> , income from <b>forestry managed investment schemes</b> , jury services, amounts for <b>lost salary or wages</b> paid under an income protection or sickness and accident policy or workers compensation scheme and discounts on shares or rights acquired under an <b>employee share scheme</b> . For the latter, we will need your <b>employee share scheme statement</b> obtained by your employer.			
9. Did you receive allowances and payments from the Australian Government?	Yes	□ N	o 🗆
If no, go to question 8.			
If yes, please provide details.			
Government payments includes but not limited to government grants, Jobseeker payment, Youth allowance, Austudy payment, parenting payment, partner allowance, sickness allowance, special benefit, widow allowanceetc Please provide your PAYG payment summary or a letter from the agency that paid your allowance or payment stating the amount you received			

## **Deductions**

NOTE: Please have invoices/documents to substantiate your expenses.

1. Did you use your car for work and k	Yes 🗆 No 🗆		
**Please refer to the attachment regarding car expenses, at the end of this form.			
If no, go to question 2.	Vehicle Make and Model:		
If yes, you are entitled to claim the	Business Use %		
cost of using your car for work based on a log book kept for a continuous	Purchase date		
period of 12 weeks within the last	Purchase cost Incl. GST		
five years, provided that the usage remains the same. Insert details of	Registration		
your car here and go to question 3.	Insurance		
**Please send loan or lease agreement if this is the first year of	Tyres & Batteries		
your claim or you are a new client	Lease Interest Paid		
	Fuel & Oil		
	Servicing & Repairs		
2. Did you use your car for work, but NOT keep a log book?		Yes 🗌 No 🗌	
If no, go to question 4.	Vehicle Make and Model:	Business kms travelled:	
If yes, insert the details of your car	Vehicle Make and Model:	Business kms travelled:	
here and go to question 3.	Note: Please exclude trips between home and your normal place of work. You are entitled to claim the cost of using your car for work based on a reasonable estimate of the kilometers travelled up to a maximum of 5,000kms per car. You must have records of trips and distance traveled to substantiate.		

3. Please explain how you used your car for work:				
** Important				
4. Did you incur work-related travel e	xpenses?		Yes 🗌	No 🗆
**Please refer to the attachment regar	dina travel expenses, at	the end of this form.		
If no, go to question 5	-	the end of this john.		
ii iio, go to question 5	Taxis		Parking	
If yes, please record details.	Buses		Meals	
	Trains		Airfares	
	Accommodation		Other	
5. Did you incur work-related clothing	g expenses?		Yes 🗆	No 🗆
If no, go to question 6	Compulsory Uniform	\$	Dry Cleaning (Uniforms)	\$
If yes, please record details.	Non-Compulsory Uniform	\$	Home Laundry	washes/week
Please note that you cannot generally claim a deduction for	Occupation Specific	\$	Home laundry of u	
conventional everyday work	Protective Clothing	\$	Sun glasses	\$
<u>clothing</u> .	Work Boots	\$	Other	\$
6. Did you incur work related self-edu	cation expenses?		Yes 🗌	No 🗆
If no, go to question 8.		Course description		
If yes, you can claim a deduction	Name of school, institute or university			
where the course of study is to maintain/increase skills in current	Date commenced		/ /	
employment.		Date finished	/	/
**Please refer to the attachment regarding self-education expenses, at	Fees (not HELP)	\$	Kilometers Travelled	\$
the end of this form.	Text Books	\$	Make/Model	\$
	Chatia a a a a	<u></u>	of Car	ć
	Stationery	\$	Other	\$
7. Please explain how your course relates to your employment:				
** Important				
8. Did you incur any other work-relate	Sagnanya ba		Vac 🗆	No 🗆
If no, go to question 9	cu expenses:		Yes 🗆	No □
	Union Fees	\$	Safety Equipment	\$
If yes, please enter details	Professional Subscriptions	\$	Stationery	\$
	Conferences/Seminars	\$	Other	\$

Please list all work-relate	ed equipment/sof	tware purchases:		
Cost		Description	Date of Purchase	Work use%
\$				%
\$				%
\$				%
\$				%
\$				%
Please complete below (.67c/hour) to calculate	•	d any of the following expenses, for work & Norking from home.	OT using the shortc	ut method
		Details of usage	Amount	Work use%
Mobile Phone				%
Internet				%
Other				%
Please complete below	v if you worked	from home, in the last financial year:		
		Period	Number of ho	ours per week
Did you have a dedicat home?	ed work area su	uch as a home office, when working from	Yes 🗆	No $\square$
	ttachment rega	rding Home-office expenses, at the end of this	form.	
9. Did you pay interest	t on investment	loans (Excl. rental properties)?	Yes 🗌	No 🗆
If no, go to question 10	)			
If yes, please provide the end-of-year interest summary statements and bank statements covering the full year, obtained				
from your bank /financ	-	interest summary statements and bank statem	ients covering the i	an year, obtained
10. Did you make day	akiawa ka abawiki	as an ask and building funds?		$\Box$
If no, go to question 11		es or school building funds?	Yes 🗆	No U
<b></b> , 80 to question 11	•			\$
If yes, please complete or attach a list. Receipt				\$
whether the donation i				\$
11. Did you have any o	other deduction	s not referred to above?	Yes 🗌	No 🗆
If no, go to next question	on	Income protection insurance		\$
<b>If yes,</b> please provide d	etails.	Last year's tax return fee (If not prepared by u	ıs)	\$
				\$
12. Did you make pers	onal superannu	ation contributions?	Yes 🗌	No 🗆
If no, go to the next sec	ction.			
-	r personal supe	r contributions, you must notify the fund and your intention to claim the deduction.	Amount Contribu	ted \$
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<b>Medicare Lev</b>	y Related	<b>Items</b>
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1. Did you have private patient hospital cover?	Yes 🗌 No 🗌
If no, go to question 3.	
If yes, please state what type of cover did you have? Single, familyetc.	
2. If you have private patient hospital cover, were all of your dependents (including your spouse if applicable) covered for the whole of the year?	Yes 🗆 No 🗆
Comments:	

# **Tax Offsets**

1. Did you make superannuation contributions for your spouse?		Yes 🗌	No 🗆
If no, go to question 4.  If yes, please provide details.		Amount Contributed \$	
2. Did you live in a remote area of Australia or serve	e overseas forces?	Yes 🗌 No 🗌	
If no, go to question 5.	Location	Period From	Period To
If yes, please provide details. If you lived in a remote or isolated area of, served overseas as a member of Australia's Defense Forces or as a civilian with UN armed forces.			
1. Did you receive foreign income and pay foreign tax on that income?		Yes 🗌	No 🗆
If no, go to question 4.  If yes, please provide payment summary details.  You may be able to claim a foreign income tax offset, if you have included the foreign income as assessable income and actually paid an amount of foreign income tax.			

## Other

1. Do you have a HELP or SFSS Debt?	Yes 🗌 No 🗌
If no, go to question 2.	HELP balance at 30 June \$
If yes, please provide details here.	SFSS balance at 30 June \$
2. Other amounts required for income test purposes	Yes 🗌 No 🗌
Tax free government pensions received by you	\$
Child support payments made by you	\$
3. Are you a new client to our practice?	Yes 🗌 No 🗌
If no, go to question 4.	
If yes, please send us a copy of your last lodged tax return.	

4. Please write here any other information about	out your return	
I declare that the information I provided in this date below.	form is true and correct, for the best	t of my knowledge. Please sign and
 Name	Signature	_// 