

2022-2023

Chan & Naylor

Please note that most individual 2022-23 tax returns are due for lodgment by 15 May 2024 (unless you have been informed otherwise).

During peak tax periods our turnaround is 8-10 weeks from when we receive your documentation.

If your return is required urgently (Express fees may apply), please indicate which period that would be suitable for you:

| 6-8 weeks | 8-10 weeks | 10-15 weeks | Preference (subject for approval): |
|-------------------------------------|----------------|--------------------|--|
| GIVEN NAME: | | | MIDDLE NAME: |
| SURNAME: | | | DATE OF BIRTH: |
| TAX FILE NUMBE | ۹: | | OCCUPATION: |
| ADDRESS: | | | |
| HOME PHONE: | | | MOBILE: |
| BANK ACCOUNT I | NAME*: | | |
| BANK BSB NUMB | ER*: | | BANK ACC* NUMBER: |
| EMAIL ADDRESS: | | | |
| NAMES OF DEPEI | | N & D.O.B | NAME OF SPOUSE OR PARTNER & D.O.B (Includes same sex couples) * |
| | | | |
| INCOME | | | |
| ARE YOU AN EMP (Including pensio | | Y | |
| If yes, your PAYG i | ncome summarie | es from your emplo | oyers will be available via the ATO portal or MY GOV |

OTHER INCOME (Includes any business income, director's fee, commissions etc)

INTEREST RECEIVED

| NAME OF BANK | ACCOUNT NUMBER | TOTAL INTEREST RECEIVED \$ | TFN WITHHOLDING \$ | JOINT ACCOUNT? |
|--------------|----------------|-------------------------------|-----------------------|----------------|
| | | | | |
| | | | | |
| | | | | |

DIVIDENDS

Please provide copies of dividend statements of Income received, including Dividend Reinvestment Plans (DRP)

| NAME OF SHARES | NUMBER OF SHARES HELD | AMOUNT RECEIVED \$ |
|----------------|-----------------------|--------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

TRUST AND PARTNERSHIPS

(Eg: BT funds, Merrill Lynch, AXA etc) Name of trust or partnership -

Please provide Annual Tax Statements

CAPITAL GAIN

Did you sell any assets such as shares or property which were acquired after 20 September 1985?

Applicable

| YES | NO | |
|-----|----|--|
|-----|----|--|

If yes, please provide documentation of when it was purchased/cost and also documents on sale/funds received, etc.

RENTAL INCOME (including AIRBNB)

Please complete attached rental property statement checklist.

EMPLOYEE SHARE/OPTION SCHEME

Did you receive bonus shares/options from your current employer during 2022/2023?

| YES 🗌 🛛 🛛 | 10 🗌 |
|-----------|------|
|-----------|------|

If yes, please provide the related correspondences/documents received from the employer.

ANY OTHER INCOME

(Any Income you have received in the financial year that does not fit into any of the above categories. Please provide details.) *Eg. Interest on any overseas bank accounts or any other foreign income received.*

Do you have any assets over \$50,000AUD outside of Australia?

| YES | NO | |
|-----|----|--|

DEDUCTIONS

Please ensure you are able to substantiate all claims, even if less than \$300.

MOTOR VEHICLE

Did you use your own car for business/work purposes through the year?

YES NO

If yes, then please provide one of the following:

Log Book Method- Business % use (Please ensure you keep a log book for a continuous period of 12 weeks)

Please provide details of all expenses you incurred over the financial year including **fuel, repairs/maintenance**, **registration/Insurance** etc. In a spread sheet or itemised form and attach it to this checklist.

If you have a loan for the vehicle, please provide figures of your lease payments.

YES NO

OR

Kilometres Method

You haven't kept a log book but use your car for work. Let us know how many kilometres you would have travelled for work. The maximum the tax office allows you to claim is 5000 Kilometres.

| Car Registration Number: | |
|--------------------------|--|
|--------------------------|--|

Kilometres:

WORK UNIFORM

Do you wear:

- Protective clothing
- Uniform with a company logo
- Occupation specific clothing

If yes, were you out of pocket through the year for purchasing any new items. (If so please provide details) Laundering and dry cleaning of clothing listed above are claimable.

SELF EDUCATION

| Name of Course | Institution | |
|---|------------------|--------------------------|
| How does it relate to your current empl | oyment/employer? | |
| | | |
| Fees (Excluding HECS/HELP debt) | | |
| · · · · · · · · · · · · · · · · · · · | | |
| | | |
| Books/Stationery/Consumables | | |
| Travel | | |
| Internet | Amount per month | Percentage used for work |
| Home Office Hour | Hours per week | How many weeks |

OTHER WORK RELATION DEDUCTIONS

| Union fees/Professional bodies (List names and amounts) | | |
|--|----------------------|---|
| Diary/Printing/Postage/Stationery | | |
| Books and Journals | | |
| Seminar costs | | |
| Sickness & Accident Insurance/ Income protection (Please supply a copy of the policy | | |
| Internet | Amount per month | Percentage used for work |
| Home Office Hours from 01/07/2022 to 30/06/2023 | Hours per week | How many weeks |
| Mobile Phone | Amount per month | Percentage used for work |
| Outdoor workers (Sunglasses/Sunscreen/Hats) | Amount | Percentage used for work |
| Tools & Equipment-Over \$300 (List dates & percentage used or work purpose) | | |
| OTHER (Costs you incurred that was directly r Please provide details: | elated to your job.) | |
| Income Protection Insurance | YES NO If yes, he | ow much did you pay \$ |
| GIFTS OR DONATIONS | | |
| Voluntary gifts of \$2 of more made to the organistaion and the amount don | | GR) Status Organization, please list the name of Iding Fund donations) |
| | | |
| <u>TAX OFFSETS</u> PRIVATE HEALTH INSURANCE | | |

| TAX OFFSETS | | | | |
|---|-------------|------------------|------------|---------------|
| PRIVATE HEALTH INSURANCE | | | | |
| Do you have private health Insurance? | YES | | | |
| Please confirm all your family members (includi | ng your spo | use and children | were cover | ed by private |
| health insurance hospital cover | YES | | | |
| SPOUSE OR PARTNERS TAXABLE INCOME <u>*CO</u> Reportable Fringe Benefits, Reportable Supera | | | | |
| (Includes same sex couples) | | | | |
| Did you have a spouse/partner for the full financ | cial year? | | YES | NO |

Does your spouse/partner receive any benefits from Centrelink? YES NO reportable fringe benefits \$______, reportable superannuation \$______

SUPERANNUATION

a) Are you self employed? If yes, please provide details of contributions you made to your superannuation for the financial year.

b) Have you made superannuation contributions on behalf of your spouse?

OTHER

Any other information that we should be aware of: i.e. you are not entitled to Medicare Benefit, you are a student etc.

Please ensure that the information you have supplied is correct. The onus is on you the taxpayer to be able to / substantiate the information that you have supplied.

| SIGNED: | DATE: | : |
|---------|----------------------------|---|
| | Chan Naylor | |
| | OUR PEOPLE, YOUR ADVANTAGE | |



Individual Information Checklist

2022-2023

Chan & Naylor

Only rents received and expenses **paid** between 1 July 2022 and 30 June 2023

| Owner Names & Ownership %: | | | |
|--|--|--|--|
| Address of Rental Property: | | | |
| Number of weeks property was rented this year: | | | |

INCOME Gross rental income

| Other rental related income | |
|---|--|
| Gross Rent | |
| | |
| EXPENSES | |
| D Advertising for tenants | |
| E Body corporate fees (Strata Levies) | |
| F Borrowing expenses | |
| G Cleaning | |
| H Council Rates | |
| I Capital allowances (depreciation) | |
| J Gardening/lawn mowing | |
| K Insurance | |
| L Interest on loans | |
| M Land Tax | |
| N Legal fees | |
| O Pest control | |
| P Property agent fees/commission | |
| Q Repairs and maintenance (R & M) | |
| (for R & M purchases greater than \$300 need details) | |
| R Capital Work's Deduction (Building) | |
| S Stationery, telephone and postage | |
| T Travel expenses (Not allowed after 30/6/2017) | |
| U Water charges | |
| V Sundry rental expenses | |
| TOTAL EXPENSES | |
| | |

NET RENT

For property purchased this financial year please provide the following: Settlement Sheet Bank Loan Offer First Bank Statement Transfer Title Documents First Page Of The Contract For Sale Depreciation Schedule (if any)