

Individual Tax Checklist

Financial	Year*

Please note that most Individual Tax Returns are due for lodgment by 15 May of the following financial year (unless you have been informed otherwise). In order for us to complete your return by the due date, we will require your documentation no later than 1 March of the following financial year.

Personal Information

	Details
Given Name	
Date of Birth	
Tax File Number	
Occupation	
Address	
Home Phone	
Mobile	
Email Address	
Bank Account Name	
Bank BSB Number	
Bank ACC Number	

Dependents

Dependent Children Given Names D.O.B C1 C2 **C3** C4 **Spouse Details** married or de facto Did you have a spouse/partner for the full financial year? YES NO **Spouse or Partner Name** First Name Last Name Do we complete your Spouse's Income Tax Return YES NO If No, please complete the below Does your spouse/partner receive any benefits from Centrelink? YES NO Spouse or Date of Birth

Spouse Taxable Income for the year

Year

Day

Month

Please provide spouse taxable income, including Reportable Fringe Benefits, Reportable Superannuation if the spouse is not a DJ Grigg Financial client.

Income

funds received.

Are you an er	mployee? (Inclu	ding Pensi	ons)		
YES		NO			
If yes, your PAY(G income summarie	es will be avail	lable via the ATO por	rtal & MyGov.	
Other Income	e (Including any	business i	ncome, Director's	s fee, Comi	mission, etc)
Interest Rece					
	Name of Ba	nnk	Account Nu	mber	Joint Account?
Account 1					
Account 2					
Account 3					
	Total In	terest Recei	ved \$	TFN With	nholdings \$
Account 1					
Account 2					
Account 3					
<u>DIVIDENDS</u>					
	de copies of div nt Plans (DRP)	idend state	ements of Incom	e received,	including Dividend
RENTAL INC	OME AND EXPE	NDITURE			
					perty Schedule provided at nt Statements and copies
CAPITAL GA	<u>INS</u>				
Did you sell a 20 Septembe		as shares	or property that v	were acquir	ed after
YE	S	NO			

If yes, please provide documentation of when it was purchased, purchase price and documents on sale and any

3

Details of Other Income

SHARES

Name of Shares	Number of Shares Held	Amount Received \$
1		
2		
3		
4		
5		
3		
TRUST AND PARTNERSHIPS (Eg: BT Name of trust or partnership:	funds, Colonial First State, AXA	, etc)
EMPLOYEE SHARE/OPTION SCHEME		
Did you receive bonus shares and/or o financial year?	ptions from your current emplo	yer during the year the
YES NO		
If yes, please provide the related correspondence	e and/or documents received from the	employer.
CRYPTOCURRENCY		
Did you have trade in Crypto during the	e financial year?	
YES NO		
If Yes, we will forward a separate email requesti	ing additional information.	
FOREIGN INCOME		
Did you have any Foreign Income duri	ng the financial year?	
YES NO		
If yes, please upload any relevant documents		
Do you have any assets over \$50,000	AUD outside of Australia?	
YES NO		

ANY OTHER INCOME

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

Deductions

Motor Vehicle Did you use your own car for business/work purposes throughout the year? YES NO If yes, then please provide one of the following: Log Book Method-Business % use: (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 and maintenance, registration and Insurance: Record in a spreadsheet or itemised form and attach it to this checklist. If you have a loan for the vehicle, please provide figures of your lease payments. OR Kilometres Method: If you have not kept a log book but you use your car for work. Provide details of how many kilometres you would have travelled for work. The maximum the tax office allows you to claim is 5000 kilometres. **Car Details Car Registration** Car Make **Kilometres for Business Use Work Uniform** Complete this section if you incurred work-related clothing expenses such as: > protective clothing > uniforms > occupation-specific clothing > laundering and dry-cleaning of this clothing

Details of work-related clothing expenses

Self-Education

Complete this section if you incurred self-education and study expenses. You can claim a deduction if the education relates to your **current employment** activities.

Name of Course	
Institution	
Work-Related Self-Education Expenses Please note working from home related expenses	s are to be completed on Page 5 of the Checklist
riease note working nom nome related expenses	Amount
Fees (excluding HECS/HELP debt)	Autount
Books / Stationary / Consumables	
•	
Travel	
Other Work-Related Deductions	
Complete this section if you incurred other work-related expense:	-related expenses. To claim a deduction for a work-
 you must have spent the money and your empl the expense must directly relate to earning you you must have a record of purchase 	
	Record of Purchase Provided? (only record Yes next to those expenses incurred below, and documents/receipts are provided)
Books, journals and digital information	
Seminars, conferences and training courses	
Union fees, subscriptions to associations	
Work-related Travel Expenses including:	
Public Transport/National/InternationalTravel	

Income Protection Insurance				
Do you have Income Protection Insurance?	YES		NO	
If yes, how much did you pay?				
Working from Home	Total Ho	urs for Year	How Many We	eeks
Home Office Hours From 01/07 to 30/06				
Working from Home - Financial Year 2023 on	wards			
Actual logged working hours required for the esimtates. > Supporting documentation is re Record of Timesheets Record of Rosters Diary for full financial year				
 Two methods available: 67 cents - please note this method included computer consumables. There is no need work area. Actual Method - Please complete the table we will consider the most appropriate method. 	d to have a separ le above and who	ate home offic	ce or dedicated	
	Amount /mth	% us	sed for work	
Internet				
Mobile/Phone				
Diary /Printing /Postage /Stationary				
Electricity & Gas				
Working from Home - Financial Year 2022 and	d prior			
> There are 3 options available:				
80 cent Method52 cent MethodActual Method				
> Please complete the table below and when most appropriate method to claim.	completing your	Tax Return w	e will consider the	е
	Hours per week	K How I	nany weeks	

Home Office Hours

Deductions

Please ensure you retain copies of receipts and tax invoices to substantiate all claims, even if less than \$300.00.

Outdoor Workers	<u> </u>	Amount	% used for work	c
Sunglasses /Suns	screen/ Hats			
Tools & Equipme	ent - Over \$300			
	Description	Purchase Date	Amount	% used for work
Tools/Equipment				
Tools/Equipment				
Tools Equipment				
Other - Any costs your Income Protection	ou have incurred that Insurance)?	t was directly related to	your job (eg. COVID) Tests,
Gifts & Donations	<u>s</u>			
You can claim for (This includes Sch	gifts or donations of ool Building Fund do	\$2 or more you make to nations)	o a deductible gift re	ecipient.
	Or	ganisations Name	Amount Do	onated
Donation/ Gift				
Donation/ Gift				
Donation/ Gift				

Tax Offsets

Private Health Insurance

The Private Health Insurance rebate is an amount the government contributes towards the cost of your private health insurance premiums. You may be eligible for the rebate which can be claimed when you lodge your tax return as a refundable tax offset.

Do you have Private Health Insurance?	
YES NO	
Please select the below that bests describes you	r Private Health Insurance policy.
Please confirm all your family members (Includin private health insurance hospital cover.	g your spouse and children were covered by
YES NO	
Superannuation	
Have you made contributions to your superar you would like to claim a tax deduction for?	nuation for the financial year of which
Have you made superannuation contributions	on behalf of your spouse?
Other	
Other	
Any other information that we should be awa Benefit, you are a student, etc?	re of: eg. you are not entitled to Medicare

Rental Properties

Gross Rent

Was there a lo	an for the rental	property that	t was ren	egotiated	l during th	ne financial	year?
YES		NO					
If Yes, please upload	d documents for new	loan below.					
New Property P	<u>urchase</u>						
year? Please pro > Settlement Sh > Bank Loan Off > First Bank Sta > Transfer Title	er tement Documents of The Contract fo	g documentation	ncial on:				
Owners Details							
	Owner	s Name	C)wners Pei	rcentage		
Owner 1							
Owner 2							
Owner 3							
Owner 4							
Rental Income: These include: > Short-term rer > Renting your p > Renting part o	an investment pro cur. Only rent rec	eived and experience all income you home) sharing platfo (for example r	receive f rm (eg. Ai enting ou Schedules	or your ren rBnB) t a room)	the related	financial yea	
Onese Banka	l Income e		Amo	ount			
Gross Renta							
Other Rental	Related Income						

Rental Expenses

Rental Expenses

You can claim deductions for the expenses that relate to the income-producing use of the investment property. You are not able to claim a deduction for expenses for your personal use of the investment property. Please detail the expenses below and provide supporting documentation/receipts.

	Amount
Advertising for tenants	
Body Corporate Fees	
Borrowing expenses	
Cleaning	
Council Rates	
Capital allowances (depreciation)	
Gardening/lawn mowing	
Insurance	
Interest on loans	
Land Tax	
Legal fees	
Pest control	
Property agent fees/commission	
Repairs and maintenance	
For repairs & maintenance greater than \$300 please	
provide further details Capital Work's Deduction (Building)	
Stationery, telephone and postage	
Water charges	
Sundry rental expenses	
TOTAL EXPENSES	

Please ensure that the information you have supplied is true and correct.

We will complete your Income Tax Return from the information and records you supply to us.

You will be responsible for providing copies of and retaining sufficient receipts and source documents to substantiate claims made for income tax deductions and tax offsets.