

Please note that most individual 2023-24 tax returns are due for lodgment by 15 May 2025 (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 NUMBER: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

BANK ACCOUNT NAME\*: \_\_\_\_\_

BANK BSB NUMBER\*: \_\_\_\_\_ BANK ACC\* NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

NAMES OF DEPENDENT CHILDREN & D.O.B  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NAME OF SPOUSE OR PARTNER & D.O.B  
 (Includes same sex couples) \*  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**INCOME**

**ARE YOU AN EMPLOYEE?** (Including pensions)     YES      NO

If yes, your PAYG income summaries from your employers 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**

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**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 2023/2024?

YES  NO

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.*

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**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.

**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-RELATED TRAVEL EXPENSE**

Parking \_\_\_\_\_

Tolls \_\_\_\_\_

Travelling such as hotels, flight tickets and hire of car \_\_\_\_\_

**WORK UNIFORM**

Do you wear: YES  NO

- 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 employment/employer? \_\_\_\_\_

\_\_\_\_\_

Fees (Excluding **HECS/HELP** debt) \_\_\_\_\_

\_\_\_\_\_

Travel \_\_\_\_\_

**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)

**INTEREST AND DIVIDEND DEDUCTIONS**

(i.e. interests on share investments margin loan)

**OTHER**

(Costs you incurred that was directly related to your job.)

Please provide details:

Income Protection Insurance YES  NO  If yes, how much did you pay \$ \_\_\_\_\_

**GIFTS OR DONATIONS**

Voluntary gifts of \$2 or more made to a Deductible Gift Recipient (DGR) Status Organization, please list the name of the organization and the amount donated. (This includes School Building Fund donations)

**TAX OFFSETS**

**PRIVATE HEALTH INSURANCE**

Do you have private health Insurance? YES  NO

Please confirm all your family members (including your spouse and children were covered by private

health insurance hospital cover YES  NO

**SPOUSE OR PARTNERS TAXABLE INCOME \*COMPULSORY: Please supply spouse taxable income, include Reportable Fringe Benefits, Reportable Superannuation if the spouse is not a Chan and Naylor Client.**

(Includes same sex couples)

Did you have a spouse/partner for the full financial year?

YES  NO

Does your spouse/partner receive any benefits from Centrelink?

YES  NO

What was your spouse or partner's taxable income: \$ \_\_\_\_\_  
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.

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

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**OTHER**

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

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**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: \_\_\_\_\_



OUR PEOPLE. YOUR ADVANTAGE

Only rents received and expenses **paid** between 1 July 2023 and 30 June 2024

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	
<b>TOTAL EXPENSES</b>	

**NET RENT**

<b>NET RENT</b>	
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**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)