

2023 Tax Return Checklist



Name(s)

Occupation and Employer

Government employees please include level

Current Residential Address

Current Postal Address

Email Addresses

(Please provide an email address for each individual)

Phone Number(s)

How would you like to receive your tax return for signing

☐

Electronically via Halletts' secure portal to email addresses above – NB *we need one per individual*

☐

Face to face – preferred Halletts contact?

Bank Account Information for Refunds

Account Name

BSB

Account Number

Please tick off and complete each item below that is applicable to you.

INCOME

PAYG Payment Summary & Allowances

Please note – the majority of employers no longer provide these as they are reported directly to the ATO and available via Mygov.

Employer Lump Sum & Eligible Termination Payments

Please include for all employers

☐

Pensions, Super Lump Sums & Government Allowances

These include CSS, PSS, allocated pensions and government payments

☐

Interest Received

This includes amounts from bank accounts and investments. Please provide summary and include accounts held on behalf of children.

☐

Dividends Received

Please provide summary and statements.

Please note, dividends are considered as income on the date of payment, not the record date.

☐

Employee Share Schemes

Please provide annual tax statements

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Partnership & Trust Distributions

Please provide annual tax statements

☐

Business Income

Please provide your MYOB file or details of any business income and expenses for the 2023 financial year

☐

Capital Gain or Loss

Sales of shares or real estate are some common examples of events resulting in a capital gain or loss. Please provide both purchase and sale details.

☐

Note: Please ensure you provide *ALL* details in relation to *Crypto Trading* or transactions for the year.

Foreign Source Income

Please provide statements and details.

☐

Rental Income

Please see page 6

☐

Other Income

☐

Please ensure you provide details of any other income including Farm Management Deposit withdrawals (FMDs) and those secondary forms of income derived via the gig economy, online content creation and social media online avenues.

DEDUCTIONS

Work Related Car Expenses

| | | |
|----------------------------------|--------------------------|-------|
| Car Model and Year | <input type="checkbox"/> | _____ |
| Registration Number | <input type="checkbox"/> | _____ |
| Total Number of Kms Travelled | <input type="checkbox"/> | _____ |
| Total Work-related Kms Travelled | <input type="checkbox"/> | _____ |
| Year of Log Book | <input type="checkbox"/> | _____ |

Expenses

| | | | |
|---|-------|---------------------------------------|-------|
| <input type="checkbox"/> Fuel | _____ | <input type="checkbox"/> Registration | _____ |
| <input type="checkbox"/> Insurance | _____ | <input type="checkbox"/> Repairs | _____ |
| <input type="checkbox"/> Lease Payments | _____ | <input type="checkbox"/> Other | _____ |

The only motor vehicle deductions available use the log book method or the cents per Km method. If your work related Kms are >5,000 Kms we recommend taxpayers keep a log book for a consecutive 12 week period.

Other Work-related Travel

Please provide details and receipts (e.g. airfares and accommodation)

Work-related Clothing & Laundry

Please provide details

Work-related Self-education

Expenses

Include any education expenses relating to your work

Other Work-related Expenses

For expenses that are not solely work-related, please include work-related percentage.

| | | |
|--|--------------------------|--|
| Associations & Memberships | <input type="checkbox"/> | _____ |
| Conferences & Seminars | <input type="checkbox"/> | _____ |
| Union Fees | <input type="checkbox"/> | _____ |
| Books & Journals | <input type="checkbox"/> | _____ |
| Stationery | <input type="checkbox"/> | _____ |
| Computer Consumables | <input type="checkbox"/> | _____ |
| Protective Items | <input type="checkbox"/> | _____ |
| Home Office: Did you work from home? | <input type="checkbox"/> | _____ |
| (Note: change in substantiation requirements for the year) | <input type="checkbox"/> | Please provide a record of the hours worked from home during the year _____ |
| Internet | <input type="checkbox"/> | _____ |
| Telephone | <input type="checkbox"/> | _____ |
| Other | <input type="checkbox"/> | _____ |

Interest & Dividend Deductions

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These include any expenses against interest and dividend income. Please provide details of interest paid on any investment borrowing.

Donations

☐

Include amounts donated to local or overseas charities, or school building funds, please include receipts.

Tax Agent Fees

☐

Please include details of Kms travelled, other costs (e.g. parking) incurred in seeing us and any taxation litigation costs.

Personal Super Contributions

☐

Please provide details, amount and date of contribution. Please provide a copy of the confirmation letter from your super fund and your notice of intent to claim a deduction form.

Forestry Managed Investment Scheme Deduction

☐

Please provide details of expenses incurred as part of this investment.

Other Deductions

☐

This may include cost of income protection insurance or expenses in relation to earning other secondary income. Please also include details of Farm Management Deposits made during the 2023 financial year, please provide details.

DETAILS OF SPOUSE AND DEPENDANTS

Spouse

☐

Name

Date of Birth

If Halletts not preparing spouse's return we require the following:

Taxable Income

Reportable Fringe Benefits

Net Investment Loss

Net Rental Loss

Tax Free Government Pension

Dependant 1 - Name

☐

Date of Birth

Dependant 2 - Name

☐

Date of Birth

Dependant 3 - Name

☐

Date of Birth

Please provide full names and dates of birth for all dependants

OFFSETS

Superannuation Contributions Made on Behalf of Your Spouse

☐

Please provide details

Medicare Levy Surcharge

Name of Health Insurer _____

Have you held private health insurance for the whole period 1 July 2022 – 30 June 2023? Yes ☐ No ☐

If no, what date did you join? _____

Type of Private Hospital Policy Held Single Couple Family

Individuals and families with private health cover are exempt from Medicare Levy Surcharge.

Please ensure that new born family members are covered by the fund.

Families with full-time students under 31 years of age need to ensure that these family members remain covered by a Private Health Insurance cover, as the ATO deems them to be dependents.

HELP, HECS and SFSS Debt ☐

Please provide a copy of the ATO statement, if you have any debts. _____

Any other relevant information or notes for completion of your return

RENTAL PROPERTY DETAILS

Property 1 ☐

Name on Title Deed _____

Percentage Held _____

Address of Property _____

Date Purchased _____

Date First Rented _____

Property 2 ☐

Name on Title Deed _____

Percentage Held _____

Address of Property _____

Date Purchased _____

Date First Rented _____

Please provide a copy of the settlement statement for new properties purchased during the year. Also, contact Halletts for any additional information that may be required (e.g. Quantity Surveyor's Report) in relation to the new properties.

RENTAL PROPERTIES *continued*

| Income | | Property 1 | Property 2 |
|--|--------------------------|------------|------------|
| Gross Rental Income | <input type="checkbox"/> | <hr/> | <hr/> |
| Other | <input type="checkbox"/> | <hr/> | <hr/> |
| Expenses | | | |
| Advertising | <input type="checkbox"/> | <hr/> | <hr/> |
| Agent's Fees & Commission | <input type="checkbox"/> | <hr/> | <hr/> |
| Bank Charges | <input type="checkbox"/> | <hr/> | <hr/> |
| Body Corporate Fees | <input type="checkbox"/> | <hr/> | <hr/> |
| Cleaning | <input type="checkbox"/> | <hr/> | <hr/> |
| Council Rates | <input type="checkbox"/> | <hr/> | <hr/> |
| Gardening | <input type="checkbox"/> | <hr/> | <hr/> |
| Insurance | <input type="checkbox"/> | <hr/> | <hr/> |
| Interest on Loans | <input type="checkbox"/> | <hr/> | <hr/> |
| Land Tax | <input type="checkbox"/> | <hr/> | <hr/> |
| Legal Fees | <input type="checkbox"/> | <hr/> | <hr/> |
| Pest Control | <input type="checkbox"/> | <hr/> | <hr/> |
| Repairs & Maintenance | <input type="checkbox"/> | <hr/> | <hr/> |
| Stationery, Phone & Postage | <input type="checkbox"/> | <hr/> | <hr/> |
| Stamp Duty (ACT Properties only) | <input type="checkbox"/> | <hr/> | <hr/> |
| Water Rates | <input type="checkbox"/> | <hr/> | <hr/> |
| Other (incl any additions to property) | <input type="checkbox"/> | <hr/> | <hr/> |

Please attach a copy of the agent's summary, if applicable.

Please note: Halletts handles your personal information in a responsible manner in accordance with the Privacy Act 1988 (Cth) and the Australian Privacy Principles (APPs). We store information electronically on a secure server provided by a third party which is protected by the use of firewalls, password access, anti-virus software and is regularly backed up.