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## **CHECKLIST FOR 2025 TAX RETURN PREPARATION**

PLEASE PRINT AND COMPLETE THE ATTACHED INFORMATION PAGES AND FORWARD TO OXFORD ACCOUNTING GROUP TOGETHER WITH OTHER DOCUMENTS REQUIRED TO HAVE YOUR TAXATION RETURN PREPARED OR BRING WITH YOU TO YOUR APPOINTMENT.

<u>2025 TAX RETUR</u>	<u>N WOR</u>	KSHEET/CHECKL				
Name:			TFN:			
Address:			•	-		
Occupation:						
Email:						
Contact	Mobile:		Nork:		Home:	
<b>Income Deta</b>						
Ordinary Income	Supply gro	oup certificates and other pay	vment advices.		Yes	No
Wage & Salary Income						
Allowance, Benefits, Tip	s					
Reportable Fringe Benef	its	Type: Super, Motor Ve				
Lump Sum Payments		Type: Super, Workcov	ver, Insurance e	tc		
Eligible Termination Pay	ments	Type: Redundancy, Lo	ong Service Lea	ive etc.		
Superanuuation Income	Stream or H	Pension Annuity Payments				
Other Income						
Centrelink - Youth Allow	vance, New	start, Sickness, Training o	r Other Allowa	nce		
Centrelink - Parenting Pa	ayment ( Pa	rtnered or Single )				
					• • • • •	<u> </u>
Investment Income		n be provided below. If you i tails on the additional works.		-	Yes	No
Bank Interest Received	Summarise	e interest below, or provide ba	ank statements.			
Dividends	Summarise	e dividends below, or provide	dividend statem	ents.		
P'ship & Trust Income	Provide di	stribution statement(s) from p	artnership or trus	st.		
Rental Income	Refer Rent	al Summary Schedule				
<b>Bank Interest Recei</b>	ved - Savi	ngs & Term Deposit Acco	ounts			
Bank Name		Interest Received Amnt		lding Tax Amnt		
		\$	\$	<u> </u>		
		\$	\$		1	
		\$	\$		1	
			*		1	
Dividends Received			_			
Company Name	Unfranke			tion Credit	T	
	\$	\$	\$			
	\$	\$	\$			
	\$	\$	\$			
	\$	\$	\$			
	\$	\$	\$			
PROVIDE DIVIDE	ND STATI	EMENTS WHERE POSSI	BLE		l _	
Other Income	Provide de rear of cho	tails below or, if necessary, o ecklist.	on the additional	worksheet at the	Yes	No
Business Income	Provide fu	ll details of income & expens	es.			
Capital Gains/(Loss)		rchase and sale details of Ass		SHARES		
Provide purchase and sale details of Assets Sold - PROPERTY						
Foreign Income	Provide any documentation for evidence of Foreign Source Income.					
Other Income	-	y documentation for evidence	-			
	•				1	<b>I</b>

otor Vehicle & Trave	<b>Expenses</b> /	/Deduc	tions Worl	<u>ksheet</u>	
or Vehicle Expenses : ou use your own vehicle for work purpe laim the costs of running that vehicle.					Yes No
aim the costs of running that vehicle.					
Cents Per Kilometre Method	Maximum of up	o to 5,000 km	n's.		
Make & Model :					
Reg No :		No. Weeks	Total Annual Klms	Rate per K	m
Estimated Weekly Km's	X No of Weeks			<u> </u>	88 \$
Reason/Purpose of use MV and Estin	ated Weekly kms b	usiness use	travel x No of Week		I
[ Provide a brief description	v				
of work related MV travel ]					
<u>د</u>					
ECKLIST FOR 2025 TAX RETURN	PREPARATION				
Log Books valid for 5 Years					
Log book - Trips are required to be recorde Start & End of trip Odometer Readings, Da					
You must Show Both "Business Use Kilomet					
We need to sight the original or provide us				* *	
Odometer Reading at Start of log Period	1	Α			
Odometer Reading at End of log Period		В			
Total Kilometers Travelled		C = A-B			
Total Business Use Kilometers		D			
Calculated Business Use %	%	D Divide b	y C		
PURCHASE DETAILS IF PURCHASE NEW	VEHICLE IN CURREN	T VF 4R			
Make & Model :					
Registration No :		_			
Date of Purchase :		_			
Purchase Amount \$		_			
Expense Item - Amount of Spend	Amount Spent \$	5			
Fuel ( Actual Spend Amount )	\$		If you have kept Fuel I	Reciepts - provide	e actual cost per your records
Fuel (Estimated Spend Amount)	\$				Ve will Calculate fuel Costs
Insurance	\$		Supply Copy of Regist		-
Registration	\$		Supply Copy of Tax In		
Repairs & Maintenance / Services	\$		Supply Copies of Rece		
Tyres	\$		Supply Copies of Recie	·	
Other Related Car Costs	\$		Supply copies of Tax I	<u>^</u>	
·	<u> </u>		TEN STREET OF LOOP I		
Was the Vehicle Financed? Ye		(T T			No
	[ Provide finance/	Lease docun	nents for Interest Claim	s J	
NOTE: If you have not maintained a prop	er log book as required	d, you will No	OT be able to use this n	nethod. MUST U	SE Cents per KM
or Traval Expanses	ntia au ananazza tazza 1	in ale die - ·	favos and account 1	tion	Vos
er Travel Expenses : Dome Description & Purpose of Travel:	suc or overseas travel	including all	fares and accommoda	uon.	Yes No
Citylink Tolls:		Percentage	Work Related:		%

<mark>ther Work Relat</mark>	ed & Investm	ient E	2 xpen	ses/Deduct	tions Work		
	-					Yes	N
form Expenses:	Protective Clothing, C	orporate W	ardrobe, O	ccupation Specific Clo			
Description of Clothing:					Amount \$	Yes	N
> Home/Laundry [ \$150 Maxir					\$		
> Dry Cleaning - Reciept Amo	unt Only				\$		
Education Expenses:	Must relate to Employ	ment Incon	1e Activity.			Yes	N
Course Name & Details:					Amount \$		
> Course Fees					\$		<u> </u>
> Books & Stationery					\$		
> Aids, Tools and Equipment r	aquired for learning				\$	_	
					\$ ¢	_	TICL
> Travel Costs - Public transport [ If use MV to travel to school di ]		otails - Ca	nte nor km	method may Kms 5	0001   2	Eng Cyl	TICK BOX
Make & Model:	rect from work, provide u	ictails - Ce		methou max Kins 5,	Total Kms	EngCyr	BOA
			Reg No: X	No of Weeks :			
Actual or Est Kms per week:			Λ	INO OF WEEKS :	_		
er Work Related Deductions:					Amount \$	Yes	N
> Union Fees					\$		
> Memberships & Associations					\$		
> Memberships & Associations	s Name(s):				\$		
> Memberships & Associations	s Name(s):		1	1	\$		
> Mobile Phone Bus Use: Aver	rage Monthly Cost		Х	% Work Us	e \$		
> Diary & Misc Stationery					\$		
> Computer Consumables : Co	sts Incurred	\$	Х	% Work Us	e \$		
> Capital Item for Depreciation	n Over \$300 ( <u>Supply Co</u>	py of Invoi	ice)	% Work Us	e \$		
> Home/Office Use: Hrs per w	eek Hrs	Х	No of W	eeks: @ .70cph	\$		
(must be supported by timesh	eets/diary/log)				\$		
(Note: Home office hours mu	st be supported by diary	or time sh	eets)		\$		
> Other Item 3 ( Supply Details	s )				\$		
> Other Item 4 ( Supply Detail	•				\$		
stment Deductions ( Non-We	ork Related ):				Amount \$	Yes	N
> Investment Deductions - Inte	rest Paid on Bank or Oth	er Loans to	o Purchase	Shares			
			Bank	Loan Acc No:		- <u>,</u>	·
Loan - Bank or Other Fin	ancial Institution				\$		
Loan - Margin Lending					\$		
> Tax & Accounting Fees	Tax Fee				\$		
U	Other Tax& Accountin	g Fees - WI	TV S1515		\$		
> Gift or Donations	Charity Names:				\$		<b> </b>
					φ ¢		
	Charity Names:				Ð	-	
	Charity Names:				¢	-	
Charity Names:				\$	-		
	Charity Names:				\$		<b></b>
> Income Protection Insurance				1		Yes	N
Insurer Name:		Policy 1			\$		

<b>Spouse Details</b>	Spouse Details						
SPOUSE Name:				Taxable Income 202	25 Year	_	
Spouse D.O.B	/	/		\$			
Spouse Taxable Income (				ed and a second s			
where Oxford is not prepa						I .	<b></b>
Number of Dependant	Children Aged und	ler 21 in full time eo	lucation				
<b>Private Health Cover</b>	f you paid PHC F	premium and NOT clai	med the Rebate as a			Yes	No
> Tax Offset	premium reductio	n during the year, you	may be eligible to a				
	Tax offset at tax ti	ime dependant on your	taxable income. You MU	\ST			
	provide a copy of	the year end Statemen	t.				
> 1%-1.5% Surcharge	If you are not cov	ered hv anv Private He	ealth Cover Insurer, and				
			olds listed below, a surch	arge			
	-		e Income will be payable	-			
	5	Income Threshold	1 2 1				
Single Person ( No Depend	lants)	\$99,000 or Less	\$97,001 - 113,000	\$113,001 - 151,000	\$151,001 or more	1	
Single with dependant & F	amilies	\$194,000 or Less	\$194,001 - 226,000	\$226,001 - 302,000	\$302,001 or more		
Surcharge Rate		0%	1%	1.25%	1.50%		
Spouse Super (T3)	Provide Proof of Max Rebate is \$5	Contribution document 40 if the sum of spouse				Yes	No
ATO HECS / H							
Do you have a		-	to ATO as at 30th June.			Yes	No
HECS/HELP	or HECS/HELP	Debt from ATO					
DEBT?			HECS/HELP Amoun		¢		1
			<b>HECS/HELP</b> Amoun	u	\$		1

Additional Information Worksheet			
[Please provide brief details of any information you may feel is important to bring to our attention that may			
affect the preparation of your Income Tax Return ]			

Inv	<b>Investment Property - Income and Expenses.</b>						
	Note: If more than one property please copy this schedule and provide details separately.						
		ta i contra de la co					
riope	Property Address						
Date o	Date of Acquisition / /						
	<ul> <li>Copy of Contract of Sale</li> <li>Settlement Statement and Statement</li> <li>Disbursements Statement - K</li> <li>These items will provide information</li> </ul>	opery or haven't previously done so, please provide; atement of Adjustments - Received from solicitor at settlement. Received from Bank at settlement. ation relevant for calculation of Borrowing Cost Deductions [ 5 Year claim ] calculation of Capital Gains or Losses on sale/transfer of property.					
<u>Incom</u> CHECK	<u>e</u> 1 Rental Income	Please provide monthly statements or annual rental summary from managing agents.					
<u>Deduc</u>	tions	<b>Provide the Following Documentation &amp; Information</b>					
1	Advertising for Tenants	Per annual rental summary					
2	Agents Fees/Commission	Per annual rental summary					
3	Body Corporate	Invoice/Receipts and/or Per annual rental summary					
4	Cleaning	Invoice/Receipts and/or Per annual rental summary					
5	Council Rates	Rates Notices or Per annual rental summary					
6a	Special Building Write Off	{ To be calculated by our office from historical schedules- or if new property					
6b	Depreciation fittings/furn.	{ please provide an approved quantity surveyors prepared schedule.					
7	Gardening & Pest Control	Invoice/Receipts and/or Per annual rental summary					
8	Insurance Landlord Building	Invoice/Receipts and/or Per annual rental summary					
9	Investment Loan(s) Interest Bank Fees	Loan Statements					
	Borrowing Costs	To be calculated by our office - Please provide Contract of Sale/Finance Doc.					
10	Land Tax	Land Tax Invoice					
10	Repairs & Maintenance	Invoice/Receipts and/or Per annual rental summary					
12	Water Rates	Quarterly Notices and/or Per annual rental summary					
13	Other	Please specify - Provide Invoice/Receipts					

Inv	<b>Investment Property - Income and Expenses.</b>					
Note: If more than one property please copy this schedule and provide details separately.						
Prone	rty Address					
riope	ity muncos					
Date o	Date of Acquisition / /					
Nota	Know have purchased a new pro-	ann ar hmart maniquely dans as plags manida				
noie:	> Copy of Contract of Sale	pery or haven't previously done so, please provide;				
		tement of Adjustments - Received from solicitor at settlement.				
	> Disbursements Statement - Re					
		ion relevant for calculation of Borrowing Cost Deductions [ 5 Year claim ]				
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6b		please provide an approved quantity surveyors prepared schedule.				
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8	Insurance	Invoice/Receipts and/or Per annual rental summary Invoice/Receipts and/or Per annual rental summary				
0	Landlord	Involce/Receipts and/or 1 er annual rental summary				
	Building					
9	Investment Loan(s)	Loan Statements				
)	Interest	Loun Statements				
	Bank Fees					
	Borrowing Costs	<i>To be calculated by our office - Please provide Contract of Sale/Finance Doc.</i>				
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15	other	Tieuse specify - Trovide Involce/Receipis				
15	ouer	Tieuse specify - Troviae Invoice/Receipis				

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noie:	> Copy of Contract of Sale	pery or haven't previously done so, please provide;				
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Incom	ie					
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		J				
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