

	2024 PERS	ONAL INC	OME TAX WO	RKSHEE	T	
		TAXPA	YER DETAILS			
Title			TFN	PLEASE CALL	OUR OFFICE TO PR	OVIDE YOUR TFN
Surname			Date of Birth			
First Name			Best Contact Number			
Other Name/s			Or Mobile Telephone			
Occupation (not Title)			Same as Residential address	Y	es	No
Residential Address			Postal Address			
Suburb			Suburb			
State	Postcode		State		Postcode	
E-mail Address						
(Please call o	Spouse (Full Name) ur office to provide your Spouse	e's TFN)	Was an Australian Resident for full year?	Date of B	irth	Taxable Income
(1.1000.00.10	ar office to provide your opous.	,	Yes No			\$ -
(Note: If we	do not prepare your spouse's tax r	eturn we may require	additional information and wi	ll contact you if re	quired.)	Ψ
Dependent Children (Full Name) - under 21 years old; - 21 to 24 and a full-time student				Date of B	irth	Taxable Income
						\$ -
						\$ -
						\$ -
	TAX REFUND BY ELECTR	ONIC FUNDS TRANS	FER (EFT) – THE ATO DOES	NOT ISSUE CHE	<u>QUES</u>	7
BSB Number (6 digits)			Account Number	er		
Account Name						
AUTHORITY / PRIVACY DECLARATION  Please note: We are unable to prepare income tax returns for clients who have not completed this authority.  I hereby authorise KMS Financial Solutions to prepare my income tax return for the year ended 30 June 2024 from the information that I have supplied and in accordance with my instructions. For this engagement I agree to the basis of your fees as set out below. I have read the 2024 Personal Income Worksheet that applies to my 2024 Income Tax Return. I also authorise the obtaining or verification of tax-related details from my financial advisor and/or my financial institutions should this be required for the purpose of preparing my 2024 income tax return.  Signature  Date						
TERMS OF ENGAGEMEN	NT					
I confirm that I agree w	ent are detailed on our website ith the Terms of Engagement as	outlined in the KMS		-	ad this before sign	ing.
Signature		Date				
PREFERRED METHOD O	F RECEIVING TAX RETURN & D  Annature - (password / two-fa		iNING (please tick):			
	(We have recently moved fro	om DocuSign to Anna	ature, if you have any quest	ions please cont	act our office)	
We aim to provide a cost- \$430/hr (excl GST) depend Worksheets can help redu Deadline for tax return For Tax Agents, the ATO al possibility of late lodgmen	(We have recently moved from DocuSign to Annature, if you have any questions please contact our office)  KMS Financial Solutions Policy on Fees & Charges  We aim to provide a cost-effective tax preparation service, and to enable clients to consider our billing policies in advance. Our professional fees range from \$160/hr to \$430/hr (excl GST) depending on the level of expertise required. There is a minimum preparation fee for your Income Tax Return of \$250 (excl GST). Completing our Worksheets can help reduce your costs.  Deadline for tax returns  For Tax Agents, the ATO allows generous automatic extensions beyond the normal lodgment deadline of 31 October for individual tax returns. However, to avoid the possibility of late lodgment penalties, you need to submit your information to us by 28 February 2025. Please contact us if you need an extension beyond this time.					
•	Storage of Tax Records It is your responsibility to maintain your own taxation records for a period of five years <i>after</i> the assessment of a tax return.					

# Income & Investment Information – See below points to consider and provide details on if not included in your 'Pre-fill Report'

We can now get detailed information from the Taxation Office in relation to income items that are required to be included in your income tax return and where businesses are required to report such information. If we have not provided you with your ATO Pre- fill report with this worksheet, please contact our office and we email your 2024 'Pre-fill Report'. You will then only have to provide us with details of any income missing and your eligible deductions.

IF YOU AE A SOLE TRADER/CONTRACTOR	(USING OWN ABN	) – pleas	e complete	the Busines	s income &	expenses sch	edule
DIRECTORS FEES / CAS	UAL EARNINGS (o	nly inclu	de here if no	ot reported	on payroll)		
Received from				Ту	pe of Allowa	nce	Amount
						\$	-
						\$	-
INTER	EST INCOME NOT A	ALREADY	ON YOUR F	PREFILL			
				Your Share of Interest (only include			our Share of TFN Tax
Name of Financial Institution	Acco	unt Num	ber		terest (only ir % if joint acco		Deducted
				\$	,	- \$	-
				\$		- \$	-
				\$		- \$	-
DIV	IDENDS (or send us	s vour su	mmary ren			<u> </u>	
Company Name	Unfranked	your su	Franke	-	Imputation	n Credits	TFN Credits
Pr. /	\$		\$		\$	-	\$ -
	\$		\$	_	\$	-	\$ -
	\$		Ś		Ś	-	\$ -
	1						
OTHER INVESTMENT & FOREIGN INCOM	ИЕ - Trusts, Staple	d Securit	ies, Manage	ed Funds (e.g	a. BT, Colonial	l, 100F, MLC, et	tc.)
1. Provide copies of your <u>Annual Tax Statements</u> (for ye	ar ending 30 June	2024) or	complete th	ne Investmer	nt info sched	lule.	
2. If you are a beneficiary of a private trust, provide a cop	•				eturn.		
3. If you have any foreign assets or earn any foreign incom	me please provide	all detail	s regarding	this			
TRUSTS/MANAGED FO	UNDS - Please	bring o	r send us	your Trust	t Tax State	ement	
	Trust	Name					
CAPITAL GAI	INS TAX EVENTS –	This que	stion must l	be answered	I		
Did you dispose of any assets during the 2023/24 tax year?	E.g. property, shar	es, inves	tments				YES NO
(If you answer "yes" to this question, please complete our 2	2024 Investment So	chedule a	and/or renta	l property s	chedule belo	ow)	
Did you sell your home? (Not taxable but we need to disclo	se it)						YES NO
						I	
IN	VESTMENTS S	SOLD /	DISPOS	ED			
Investment name Date Sold	Number Sold	An	nount	Date Pur		Number	Amount Paid on
		Re \$	ceived		ı	Purchased	purchase
			-				\$ -
		\$	-				\$ -
		\$	-				\$ -
INVESTMENT DEDUCTIONS					Y	'ES	NO
Did you incur any costs relating to your share portfolio, mai		er investr	ments (e.g. o	lid you pay			
interest on any loans taken out to purchase shares or other	investments)?						_

Related Investment (eg shares)

Expense

Description

#### **WORK RELATED TAX DEDUCTIONS**

Generally no tax deduction is allowed in respect of work related expenses unless the claim can be substantiated by documentary evidence such as receipts and invoices. If your total work related expense claims are under \$300, receipts are not required, however you still need to be able to substantiate your claims.

It is necessary to make an apportionment between work and private use for expenses. You should only claim the work-related component.

MOTOR VEHICLE EXPENSES	Please u are avai		worksheet – note	e only the cents per km method (for <5,000 kms) and the logbook method
TRAVEL EXPENSES	Work Use %	Total cost (not apportioned)	Total (Apportioned)	Description
Road Tolls		\$ -	\$ -	
Airfares & Accommodation		\$ -	\$ -	
Taxis/Ubers/Public Transport		\$ -	\$ -	
Parking		\$ -	\$ -	
Other Travel Expenses (eg meals)		\$ -	\$ -	
CLOTHING & UNIFORMS		you can only claim co ic (i.e. nurse scrubs)	sts if you wear a u	uniform (i.e. with logo), if it is protective (i.e. high visibility), or occupation
Uniform Purchases	\$	ic (i.e. Harse serabs)	_	
Dry Cleaning	\$		_	
Home Laundry (\$1 per load or \$0.50 per mixed load)	\$		_	
SELF-EDUCATION EXPENSES	Ť	Amount		Description
Course Fees (but not claimable if on HELP)	\$		-	
Textbooks & Course Notes	\$		-	
Travel expenses	\$			
Seminars & Conferences	\$		-	
OTHER WORK RELATED EXPENSES	Work Use %	Total cost (not apportioned)	Total (Apportioned)	Description
Union Fees, Subscriptions, Professional Memberships		\$ -	\$ -	
Books & Journals		\$ -	\$ -	
Postage		\$ -	\$ -	
Income Protection Insurance		\$ -	\$ -	
Sun Protection Expenses (Hats, Sunscreen, Sunglasses)		\$ -	\$ -	
Tools & Equipment		\$ -	\$ -	
Equipment purchases costing over \$300 (see next page)		\$ -	\$ -	
Other Expenses		\$ -	\$ -	
HOME OFFICE EXPENSES*	Do y	ou have a dedicated h	nome Office:	Size of your home office as a portion of your house (%):
Total hours you worked from home in 2024FY				
HOME OFFICE EXPENSES*	Work Use %	Total cost (not apportioned)	Total (Apportioned)	Description
Mobile Phone	030 70	\$ -	\$ -	
Internet Service Provider Charges		\$ -	\$ -	
Stationery & Materials		\$ -	\$ -	
Gas & Electricity		\$ -	\$ -	
Cleaning		\$ -	\$ -	
Home office equipment/furniture		\$ -	\$ -	
Home office repairs		\$ -	\$ -	

<sup>\*</sup>Note: record-keeping requirements have changed for the 2024 income year. If you are claiming home office expenses, you are required to keep a log of hours worked from home and all receipts. We will calculate the best claim for you based off of the information provided

# WORK RELATED TAX DEDUCTIONS (Continued)

Date Purchased	Description	Total Price	Business Usage %	Total	Self Education	Work Related
						П
		\$ -	<u> </u>	\$ -		
		\$ -		\$ -	<u> </u>	
		\$ -		\$ -		
NATIONS (Joint donations mu	ust be apportioned. Receipts must be m	narked "tax deductible" & i	nclude your name/s)	– Please provide	receipts.	
	Name of Charity, Aid or Cultura	al Fund		Date Paid	Dona	tion Amoun
					Ś	
			-		l.	
					\$	_
					\$	-
K AGENT FEES (EXCEPT KIVIS	(for tax agent fees actually paid during		ı can include postage	& travel costs)		
	Name o	of Tax Agent			Am	ount
					\$	
PERANNUATION CONTRIBL	TIONS PAID PERSONALLY					
Payment Date		Superannuation Fund			Contribution	Amount
					\$	
					Ļ	
ase provide the notice fron	n your super fund acknowledging th	he notice you gave then	n of your intent to	claim the supe	r contribution as a	deduction
ILD SUPPORT PAID						
ILD JOFF OILT FAIL	Child's name	Amo	ount paid for the year	r		
				_ 1		
		\$				
		\$		-		
	inancial Solutions relies			-		
	lity of the taxpayer to en	nsure that all ded	uctions can b	-		
	lity of the taxpayer to en the Au	nsure that all ded ustralian Taxation	uctions can b n Office.	e substant		
	ility of the taxpayer to en the Au FINANCIAL HI	nsure that all ded ustralian Taxation EALTH CONSI	uctions can b n Office.	e substant	iated if reque	sted by
It is the responsibi	ility of the taxpayer to en the Au FINANCIAL HI Questions all individuals could co	nsure that all ded ustralian Taxation EALTH CONSI consider annualy	uctions can b office. DERATION	e substant	reque	
It is the responsibilities the responsibilities the responsibilities are responsible to the responsibilities are responsibilities are responsible to the responsibilities are responsible to the responsibilities are responsible to the responsibilities are re	ility of the taxpayer to en the Au FINANCIAL HI Questions all individuals could co s in place? E.g. income protection in	nsure that all dedustralian Taxation  EALTH CONSIDERATE CONSIDERAT	uctions can b n Office. DERATION	e substant	Yes	No
It is the responsibilities the responsibilities the responsibilities are responsible to the responsibilities are responsibilities are responsible to the responsibilities are responsible to the responsibilities are responsible to the responsibilities are re	ility of the taxpayer to en the Au FINANCIAL HI Questions all individuals could co s in place? E.g. income protection in xpenses if you are unable to work for	nsure that all dedustralian Taxation  EALTH CONSIDERATE CONSIDERAT	uctions can b n Office. DERATION	e substant	reque	sted b

Are you comfortable you have (or will have) sufficient funds for retirement	
f you have debt - do you have a plan in place to reduce your debt?	
Do you have a valid up-to-date will?	
Do you have an enduring power of attorney?	
Do you have a medical power of attorney?	
Do you know who the beneficiaries are of your superannuation on your death? Or - should your beneficiaries be hanged?	
Mould you like us to assist you with any of the above? Yes / No	

Vould v	you like us to assist	ou with any of t	the above? Yes	/ No	, [
VVOulu	you like us to assist	you with any or i	tile above: Tes	/ INC	, _

## **Motor Vehicle Information**

Please complete 1 schedule for each motor vehicle you had during the year.

There are now only two methods for calculating motor vehicle expenses - the cents per kilometre method and the logbook method.

Note: Travel from Home to usual place of work and vice versa does not constitute work travel. Work travel relates to travel to work related meetings/seminars/training, travel between two workplaces, visiting job sites, etc.

Cents per Kilometre Method (Max 5,000	kms);		
Work kms travelled:			
Make & model of Car:			
	se include details of all motor vehicles expens of 12 weeks). If this is applicable to you, pleas	nses incurred and your business usage percentage (determined via tase fill out work sheet below.	:he
Do you have a Logbook?	☐ No		
Time Period Covered by Logbook:			
Vehicle Make & Model:			
Registration No:			
Date Vehicle Purchased:			
Owner of Vehicle:			
Driver of Vehicle:			
Total Km Travelled in Financial Year:			
Business Km in Logbook Period:			
Total Km in Logbook Period:			
Your Calculation of Business Use %:			
Leased	Hire Purchase	Paid Cash	
RUNNING COSTS	TOTAL FOR YEAR	MONTHLY PAYMENTS	
		WONTHLY PATWENTS	
Fuel:	\$	<u> </u>	
Registration:	\$	-	
Insurance:	\$	- Diagon a mail a pagu of your live Durchass ar	
Repairs & Maintenance:	\$	Please e-mail a copy of your Hire Purchase or Lease Agreement	
Lease Payments:	\$	- \$	-
HP Payments:	\$	- \$	-
Interest Paid:	\$	-	
Roadside Assistance Fees:	\$	-	
Parking:	\$	-	
Tolls:	\$	-	
Did you buy or sell a motor vehicle durin	g the year? Yes / No	)	

If Yes, please provide all supporting documents regarding the sale/purchase.

### **Rental Property Information**

Please complete 1 schedule per rental property

Address of Rental Property:						
Address of Rental Property.						
Date Property Purchased:		Date Property I	Date Property First Earned Rental Income:			
Number of Weeks Available For Re	nt:	Date Property I	Built:			
	Ownership	percentage and details:		<u> </u>		
	100% In Your Name	e In Joint Name	s (Please specify	%):		
		INCOME				
Gross Rent:		\$				-
(Please provide year end agent stat	ements)					
Other Rental Income:		\$				-
		EXPENSES				
Advertising for Tenants:	\$	- Body Corporate	e Fees:	\$		-
Borrowing Expenses:	\$	- Cleaning:	Cleaning:			-
Council Rates:	\$	- Gardening / Lav	Gardening / Lawn mowing:			-
Insurance:	\$	l' '	Interest: (Please provide loan Statements if you have refinanced)			-
Land Tax:	\$	- Legal Fees:				-
Pest Control:	\$	- Property Mana Fees	Property Management			-
Repairs & Maintenance: (Please provide invoices)	\$	- Stationery, Tele & Postage:	ephone	\$		=
Depreciation (fittings) *:	\$	- Capital works d	eductions *:	\$		-
Water Rates:	\$	- Other: please s	pecify	\$		-
	DEPRECIABLE ITEMS OVE	ER \$300 (e.g. new dishwash	er, dryer)			
	ITEM		DATE PURCHA	SED	COST	
					\$	-
					\$	-
	PROPERTY PU	RCHASE/IMPROVEMENTS			*	
	ITEM		DATE		COST	
	112111		DATE	•	\$	_
					\$	_
	DATES PROPERTY WAS USED I	RV VOLUDURING THE VEAR	(DRIVATE LISE)		<del>y</del>	
	DATESTROPERTY WAS USED I	DI 100 DOKING THE TEAK	(I-KIVAIL USE)			
* Do you have a property depreciat		No				
n no, we recommend you get one i	f your property was built after 17 Jul	y 1365. See the link on ou	website to orde	i a report.		

If you sold a rental property – the capital gains tax event is triggered in the financial year in which the contract is signed (not when the property settles). If you contracted to sell a rental property in the 2024 financial year, please provide the following information:

- Purchase Date (being date you signed the contract to buy the property)
- Purchase price, stamp duty & legal fees paid (copy of the settlement statement for the purchase will have all this info)
- Cost of any improvements or ownership costs not claimed as a tax deduction (e.g., Land tax, council rates, etc.)
- Sale date per Contract of Sale
- Sale price, commission paid to agent, legal fees on sale (copy of the settlement statement will often have this information)

Business income and Expenses – Sole Traders					
Please complete 1 Schedule per Business Activity - You may wish to call our office to discuss with an accountant the best method for reporting your business income and expenses					
BUSINESS DET					
Description of main business activity					
Business Name					
Business Address					
Did you sell goods and services using the internet?	Yes	□ No			
Are you registered for GST?	Yes	□ No			
Income (disclose pre-GST amounts only)	Primary Production	Non-primary production			
Sales	\$ -	\$ -			
Other/Miscellaneous income	\$ -	\$ -			
Total Income	\$ -	\$ -			
Expenses (disclose pre-GST amounts only)					
Total Expenses	\$ -	\$ -			
Purchases of stock & materials, tools, etc.	\$ -	\$ -			
Closing stock	\$ -	\$ -			
Cost of sales	\$ -	\$ -			
Contractor, subcontractor and commission expenses	\$ -	\$ -			
Superannuation expenses	\$ -	\$ -			
Bad debts	\$ -	\$ -			
Lease & hiring expenses	\$ -	\$ -			
Rent expenses	\$ -	\$ -			
Interest expenses	\$ -	\$ -			
Asset purchases – Please provide a copy of the invoice	\$ -	\$ -			
Motor vehicle expenses	\$ -	\$ -			
Repairs and maintenance	\$ -	\$ -			
Salary and wages expenses (including amounts paid to family members)	\$ -	\$ -			
- Payments to family members (salary, wages, super, etc.)	\$ -	\$ -			
All other expenses	\$ -	\$ -			
	\$ -	\$ -			
NET PROFIT/LOSS	\$ -	\$ -			

DEPRECIABLE ITEMS							
ITEM	DATE PURCHASED	COST					
		\$	-				
		\$	-				
		\$	-				
If you operate in any of the following industries, have you lodged your Taxable Payments Report	? Yes / No						

Building & construction services

- IT services

Cleaning services

Road Freight & Courier services

- Security, investigation or surveillance services