

This checklist has been designed to enable us to complete your work as quickly and efficiently as we can, by ensuring we have all the information we need right in front of us. This also avoids delays with having to follow up on missing or incomplete information, as well as additional costs if we need to sift through receipts.

For this reason, we kindly ask that you gather **everything** together **before** you send or bring in your information to us (including ALL entities you may have, such as businesses, companies, trusts or superannuation funds). If we do not have everything we need, unfortunately we will be unable to start your work and you may incur additional fees.

We appreciate and thank you in advance for the valuable time taken to complete our checklist, in order for us to get you the best possible result for your tax return(s). We would also like to take this opportunity to thank you for choosing the team here at Paris Financial. We are certain you will find our staff very keen and helpful, and always willing to ensure your needs are looked after to the best of our abilities.

If this is your first time with Paris Financial we would like to thank you for choosing us we are sure you will not be disappointed! It would help us greatly to have a copy of your last lodged tax return to enable us to check for any items that should be carried forward.

Please remember that this checklist and its contents relate only to your **personal** tax and not that of your trust, company or SMSF. We have separate checklists describing the information required for any other entities you may have.

Please note that it is an ATO requirement that we have Photo ID for all *new* clients.

If you do have any questions, please feel free to contact our office, will be more than happy to assist you.

Kind regards

The Team at

Personal Information

YOUR DETAILS

Your Full Name: _____

Your Partner's Full Name: _____

If you've changed your name: _____

Your TFN: _____ We will contact you for your TFN, never send your TFN via email

Your ABN: (if applicable) _____ DOB: ____ / ____ / ____

Your Job Title: _____

CONTACT DETAILS

Home address: _____

Postal Address: _____

Email address: _____

Mobile: _____

Work ph: _____

Home ph: _____

KIDS/DEPENDENTS (IF APPLICABLE)

Name: _____	DOB: ____ / ____ / ____
Name: _____	DOB: ____ / ____ / ____
Name: _____	DOB: ____ / ____ / ____
Name: _____	DOB: ____ / ____ / ____

BANK DETAILS

Bank Name: _____

BSB: _____

ACC no: _____

Are you an existing Paris Financial Client?	Yes/No
If yes, who did your last return?	_____
Are you an Australian resident for tax purposes?	Yes/No
Did your residency change during 2024/2025?	Yes/No
Did you make a super contribution to a complying fund?	Yes/No
Do you have a HECS/HELP debt or SFSS loan?	Yes/No \$ _____ -
Did you pay child support during the year?	Yes/No \$ _____ -

Would you like your returns: _____ Emailed

Please note that our default will be emailed unless requested otherwise.

Income

Click on the drop down box to answer Yes or No to each question.

1.	Salary or Wages				Yes/No
	Employer Name:	_____	Gross Wage:	\$ -	
	ABN:	_____	Tax withheld:	\$ -	
	Fringe Benefits:	\$ -	Salary Sacrifice (RESC):	\$ -	
2.	Allowances, Earnings, Tips etc			\$ -	Yes/No
3.	Employer Lump Sum Payments				Yes/No
	Lump sum A:	\$ -	Lump sum B:	\$ -	
4.	Employment Termination Payments				Yes/No
	ABN:	_____	Gross payment:	\$ -	
	Payment date:	_____	Tax withheld:	\$ -	
5.	Australian Government Allowances (JobSeeker/Youth allowance/Austudy)				Yes/No
	Details:	_____	Gross payment:	\$ -	
			Tax withheld:	\$ -	
6.	Australian Government Pensions				Yes/No
	Details:	_____	Gross payment:	\$ -	
			Tax withheld:	\$ -	
7.	Australian Annuities & Superannuation Income Streams				Yes/No
	Details:	_____	Taxed:	\$ -	
	Payment date:	_____	Untaxed:	\$ -	
			Tax withheld:	\$ -	
			Offset:	\$ -	
	Assessable amount from capped defined benefit income stream:			\$ -	
	Lump Sum in arrears - Taxable component		Taxed:	\$ -	
			Untaxed:	\$ -	
8.	Australian Superannuation Lump Sum Payments				Yes/No
	Details:	_____	Taxed:	\$ -	
	Payment date:	_____	Untaxed:	\$ -	
			Tax withheld:	\$ -	
9.	Attributed Personal Services Income (Please provide details in "Business" worksheet)			\$ -	Yes/No
10.	Gross Interest				Yes/No
	Bank:	_____	Amount:	\$ -	
	Account No.:	_____	No. of Account Holders:		
	Bank:	_____	Amount:	\$ -	
	Account No.:	_____	No. of Account Holders:		
11.	Dividends				Yes/No
	Company:	_____	Franked amount:	\$ -	
	Unfranked:	\$ -	Franking credit:	\$ -	
	Company:	_____	Franked amount:	\$ -	
	Unfranked:	\$ -	Franking credit:	\$ -	
	(you may need to attach a separate sheet)				
12.	Employee Share Schemes (we will need a copy of the statement you receive)			\$ -	Yes/No

Income cont'd

Click on the drop down box to answer Yes or No to each question.

- | | | |
|-----|--|----------------------|
| 13. | Partnerships/trusts/managed funds:
Please include a copy of the Tax Statement, unless we prepare the trust return. | Yes/No |
| 14. | Personal Services Income:
Please provide a summary of PSI income earned contracting to the one company | Yes/No |
| 15. | Net income or loss from business:
Please complete the "Business" page of this worksheet | Yes/No |
| 16. | Deferred non-commercial business losses from previous year: | Yes/No |
| 17. | Net farm management deposits or repayments: \$ - | Yes/No |
| 18. | Capital gains:
Please complete the "Capital Gains" page of this worksheet | Yes/No |
| 19. | Direct or indirect interests in controlled foreign entities:
Have you ever caused the transfer of property (including money or services) to a non-resident trust estate? | Yes/No

Yes/No |
| 20. | Foreign source income:
Foreign employment income \$ -
Net foreign rent \$ -
Other net foreign income \$ -
Foreign income tax offset \$ - | Yes/No |
| 21. | Rental income:
Please complete the "Rental Summary" page of this worksheet | Yes/No |
| 22. | Bonuses from life insurance company or friendly society policy: \$ - | Yes/No |
| 23. | Forestry managed investment scheme income: \$ - | Yes/No |
| 24. | Other Income not included anywhere above:
Description: \$ -
Description: \$ - | Yes/No |

Deductions

Please note: This section is for expenses relating to your **employment** only. Expenses to do with your investments are shown later. If you run a business then your income and expenses should be recorded in the business tab.

Note: ATO target 100% business use. Please have a log book confirming business %

D1. Car Expenses: Yes/No

There are two methods we can use to claim your work-related car expenses:

1. Cents per kilometre method (max 5,000 km's at 88 cents per kilometre)
2. Log book method

Work related car use may include:

- Visiting customers - existing & new
- Attending meetings & training seminars
- Running errands on behalf of your employer
- Travelling between worksites

What is the Make/model of your car? _____

Date of purchase:	_____	Purchase price:	_____
Size of the engine:	_____ cc	Finance type:	_____
Odometer 1/7/2024:	_____	Odometer 30/6/2025:	_____
Km's travelled:	_____	Business km's:	_____
		Business use: %	_____ %

How much did you spend on:

Fuel/oil	\$ -	Insurance	\$ -
Services	\$ -	Tyres/Batteries	\$ -
Rego	\$ -	Miscellaneous	\$ -
Lease/Interest	\$ -	Other	\$ -

D2. Work related travel expenses: Yes/No

Did you get an allowance?	Yes/No	Do you have receipts?	Yes/No
Accommodation	\$ -	Parking	\$ -
Travel	\$ -	Citylink/tolls	\$ -
Other: please specify	_____		\$ -

D3. Work related uniform & other clothing: Yes/No

Occupation-specific clothing	\$ -	Protective clothing	\$ -
Compulsory uniform	\$ -	Non-compulsory uniform	\$ -
Laundry	\$ -	Dry cleaning	\$ -
Other: mending/repairs etc (please specify)	_____		\$ -

(Max of \$150 for laundry, drycleaning and mending without receipts)

D4. Work related self-education: Yes/No

Name of course:	_____		
Student union fees	\$ -	Text books	\$ -
Course fees	\$ -	Stationery	\$ -
Travel	\$ -	Other	\$ -

Does this course relate to your existing employment? Yes/No

Does your employer encourage/support your study? Yes/No

How many hours per week (on average) do you study? _____

Deductions con't

D5. Other work related expenses: Yes/No

How many hours per week did you spend working at home _____

Changes to home office: From 1 March 2024 you must keep a record of actual hours worked from home, no estimates will be accepted.

This can be detailed diary entries, timesheets, rosters, time-tracking apps etc

The fixed rate of 67 cents per hours now includes energy expenses, internet, mobile & home phone, stationery and computer consumables.

Do not include any expenses reimbursed by your employer.

	Total Cost	Work related %	Deduction
Home Internet	\$ -	%	\$ -
Mobile phone	\$ -	%	\$ -
Electricity & gas **	\$ -	%	\$ -
Computer & software	\$ -	%	\$ -
Tools & equipment	\$ -	%	\$ -
Subscriptions & union fees	\$ -	%	\$ -
Journals/periodicals	\$ -	%	\$ -
Briefcase/calculators etc	\$ -	%	\$ -
Depreciation	\$ -	%	\$ -
Sun protection	\$ -	%	\$ -
Furniture/assets purchased	\$ -	%	\$ -

Seminars or courses not at an educational institution (so not shown above at D4)

Description		Travel	
Course fees	\$ -		\$ -
Other			\$ -
Other			\$ -

** If the bills are not in your name you need to be able to show that you shared the cost

D6. Low value pool deductions: Yes/No

D7. Interest deductions: Yes/No

Deductions relating to your interest income \$ -

D8. Dividend deductions: Yes/No

Deductions relating to dividend interest income \$ -

D9. Gifts or donations: Yes/No

Details:

\$ -	\$ -
\$ -	\$ -

D10. Cost of managing tax affairs: Yes/No

Did you travel to meet with your tax agent last year? kms Yes/No

Did you take out audit insurance? \$ - Yes/No

Deductions con't

D11. Deductible amount of UPP of foreign pension or annuity:	\$	-	Yes/No
D12. Personal Superannuation Contributions (not via your employment):	\$	-	Yes/No
Full name of Fund: _____			
Account Number:	_____	Fund ABN:	_____
** Have you completed a "Notice of Intent to Claim" and lodged it with your fund?			Yes/No
** Have you received an acknowledgment letter back from your fund?			Yes/No
D13. Deduction for project pool:	\$	-	Yes/No
D14. Forestry managed investment scheme deduction:			Yes/No
Code:	_____	Year:	_____
Number:	_____	Deduction:	\$ -
D15. Other deductions not included elsewhere:			Yes/No
Do you have income protection insurance?	\$	-	Yes/No
(do not include insurance that is paid via your superannuation)			
Other	\$	-	
How many hours per week (on average) do you spend in your home office in relation to your investments?			
Type of Expense:	Cost	Work related %	Deduction
Home Internet	\$ -	%	\$ -
Mobile phone	\$ -	%	\$ -
Computer & software	\$ -	%	\$ -
Tools & equipment	\$ -	%	\$ -
Subscriptions & union fees	\$ -	%	\$ -
Journals/periodicals	\$ -	%	\$ -
Briefcase/calculators etc	\$ -	%	\$ -
Depreciation	\$ -	%	\$ -
Sun protection	\$ -	%	\$ -
Furniture/assets purchased	\$ -	%	\$ -
Seminars or courses relating directly to your investment income			
Description			
Course fees	\$ -	Travel	\$ -
Other			\$ -
Other			\$ -

Losses

If you are a current client we will have this on file.

L1. Losses:			
Tax losses from earlier income years?	\$	-	Yes/No
Capital losses from earlier income years?	\$	-	Yes/No

Tax Offsets & Rebates

T2.	Did you receive an Australian superannuation income stream?		Yes/No
T3.	Did you make a super contribution on behalf of your spouse?		Yes/No
	Fund: _____ Amount: _____	\$ -	
T4.	Did you live in a remote location, or serve overseas with ADF?		Yes/No
	Location: _____ Number of days: _____	Days	
T5.	Did you have an invalid dependent parent or relative?		Yes/No
	How are you related? _____ Their taxable income: _____	\$ -	
T6.	Landcare and water facility tax offset brought forward?	\$ -	Yes/No
T7.	Early stage venture capital limited partnership?	\$ -	Yes/No
T8.	Early stage investor?	\$ -	Yes/No
T9.	Other refundable tax offsets?	\$ -	Yes/No

Medicare Levy Related Items

M1.	Are you entitled to a Medicare levy reduction or exemption? (ie. Work for ADF)		Yes/No
	You will have received notification from your employer if this applies		
M2.	Do you have Private Health Insurance?		Yes/No
	Fund Name: _____ Fund Code: _____	Code	
	Membership Number: _____ Type: _____	Type	
	Benefit Code: _____ No. of days covered: _____	Days	
	Your share of Premium: \$ -	Your share of Rebate: \$ -	
	Fund Name: _____ Fund Code: _____	Code	Yes/No
	Membership Number: _____ Type: _____	Type	
	Benefit Code: _____ No. of days covered: _____	Days	
	Your share of Premium: \$ -	Your share of Rebate: \$ -	

(this information is in the statement your insurer will send you)

**** You, your spouse, and your dependent children ALL have to have Private Hospital Cover to avoid the Medicare Surcharge if your family income is above the threshold.**

Adjustments

- A1. Were you under 18 years old on 30 June 2025? Yes/No
- A2. In 2024/2025 did you:
- | | | |
|--|-------------|--------|
| Become an Australian resident for tax purposes? | Date: _____ | Yes/No |
| Stop being an Australian resident for tax purposes | Date: _____ | Yes/No |
- If you answered YES, did you receive any Australian Government pension or allowance?
- | | | |
|--|------------|--------|
| Youth allowance: | \$ _____ - | Yes/No |
| Newstart allowance: | \$ _____ - | Yes/No |
| A sickness allowance: | \$ _____ - | Yes/No |
| A special benefit: | \$ _____ - | Yes/No |
| A payment under the Community Development Employment Projects (CDEP) Scheme: | | Yes/No |
- A3. Government Super Contributions
- Did **all** of the following apply to you?
- | | |
|--|--------|
| You made an eligible personal super contribution (including amounts which you are claiming as a deduction) to a complying super fund or retirement savings account | Yes/No |
| You did not exceed your non-concessional contributions cap | Yes/No |
| Your total super balance was below \$1.9million | Yes/No |
| You were under 71 years old on 30 June 2025 | Yes/No |
| Your taxable income for 2024-24 was less than \$58,445 | Yes/No |
| 10% or more of your income was from employment or business (incl partnerships) | Yes/No |
| You did not hold a temporary visa at any time during 2024/2025 | Yes/No |
- A4. Were you on a 417 or 462 working holiday visa at any time from 1 July 2024 to 30 June 2025? Yes/No
- ** If YES, please provide all payment summaries so we can calculate your working holiday maker net income.**
- A5. Amount on which family trust distribution tax has been paid: \$ _____ - Yes/No

Spouse Details

Did you have a spouse during the 2024-2025 financial year ? Yes/No

Spouse Gender _____ Male/Female

Your Spouse's Date of Birth _____ / _____ / _____ Yes/No

Did you have a spouse for the full year 1 July 2024 - 30 June 2025 Yes/No

If you did not have a spouse for the full year, please show the dates you had a spouse between 1 July 2024 and 30 June 2025

From _____ / _____ / _____ To _____ / _____ / _____

Your Spouse's 2024-2025 taxable income \$ _____ -
(if we are not preparing their return with yours)

Business and Professional Items

PERSONAL SERVICES INCOME (PSI)

Did you receive PSI? Yes/No

Details:

Tax withheld: \$ - Gross payments: \$ -

Did you incur any expenses in relation to your PSI? Yes/No

BUSINESS DETAILS

Yes/No

You can either complete the summary below, or provide a copy of your electronic records, whichever suits you best.

Business name:

Business address:

Industry/business type:

ABN: GST registered? Yes/No

	Gross	GST	Net	Description/information
Business Income	\$ -	\$ -	\$ -	
Other Income	\$ -	\$ -	\$ -	
Total	\$ -	\$ -	\$ -	
Accounting fees	\$ -	\$ -	\$ -	
Advertising	\$ -	\$ -	\$ -	
Bank fees	\$ -	\$ -	\$ -	
Computer supplies	\$ -	\$ -	\$ -	
Insurance	\$ -	\$ -	\$ -	
Interest	\$ -	\$ -	\$ -	
Internet	\$ -	\$ -	\$ -	
Marketing	\$ -	\$ -	\$ -	
Mobile phone	\$ -	\$ -	\$ -	
Motor vehicle:	\$ -	\$ -	\$ -	
- fuel	\$ -	\$ -	\$ -	
- insurance	\$ -	\$ -	\$ -	
- lease/interest	\$ -	\$ -	\$ -	
- other	\$ -	\$ -	\$ -	
- registration	\$ -	\$ -	\$ -	
- services	\$ -	\$ -	\$ -	
Postage	\$ -	\$ -	\$ -	
Rent	\$ -	\$ -	\$ -	
Stationery	\$ -	\$ -	\$ -	
Subscriptions	\$ -	\$ -	\$ -	
Superannuation	\$ -	\$ -	\$ -	
Training	\$ -	\$ -	\$ -	
Travel	\$ -	\$ -	\$ -	
Wages (gross)	\$ -	\$ -	\$ -	
Other	\$ -	\$ -	\$ -	
Other	\$ -	\$ -	\$ -	
Total	\$ -	\$ -	\$ -	
PROFIT	\$ -	\$ -	\$ -	

Capital Gains

PROPERTY

Did you sell a property during the year?

Yes/No

Property address: _____

When answering this question keep in mind that CGT is calculated from contract date to contract date, not settlement date.

If you did not earn any income from this property there may be additional deductions you can claim.

Date the purchase contract was signed:

____ / ____ / ____

Date the sale contract was signed:

____ / ____ / ____

Did you live in this property at any time?

Yes/No

Date moved in:

____ / ____ / ____

Date moved out:

____ / ____ / ____

Other details: _____

Purchase price per contract

\$ _____ -

Costs of purchase:

Legal Fees/conveyancer

\$ _____ -

Stamp duty

\$ _____ -

Buyers Agent fees

\$ _____ -

Building & pest inspections

\$ _____ -

Renovations

\$ _____ -

Other:

\$ _____ -

Sale price per contract

\$ _____ -

Costs of sale:

Legal Fees

\$ _____ -

Real Estate Agent costs

\$ _____ -

Capital works add back

\$ _____ -

Other:

\$ _____ -

Gross Capital Gain

\$ _____ -

SHARES/MANAGED FUNDS

Did you sell shares or units in a managed fund during the year?

Yes/No

Name of Shares sold: _____

HRN/SRN No: _____

Purchase date

Sale date

Total paid

\$ _____ -

Total received

\$ _____ -

(Inc brokerage)

(less brokerage)

Gross Capital Gain

\$ _____ -

Name of Shares sold: _____

HRN/SRN No: _____

Purchase date

Sale date

Total paid

\$ _____ -

Total received

\$ _____ -

(Inc brokerage)

(less brokerage)

Gross Capital Gain

\$ _____ -

Rental Property Worksheet

****only include property in your personal name(s)**

Address of property: _____

Taxpayers Name: _____ Ownership % _____

Taxpayers Name: _____ Ownership % _____

Date first available for rent: _____ No. of weeks rented: _____

Date purchased: _____ No. of weeks Available: _____

Was the property rented through Airbnb or similar? Yes/No

Was only part of the property rented at any time throughout the year? Yes/No

**** Please provide a copy of your loan statement showing the balance at 30 June 2025**

	Amount	Description & workings
Income:		
Rental Income	\$ -	
Other Income	\$ -	
Total	\$ -	
Expenses:		
Advertising	\$ -	
Body Corporate	\$ -	
Borrowing Costs	\$ -	
Cleaning	\$ -	
Council Rates	\$ -	
Depreciation	\$ -	
Gardening	\$ -	
Insurance	\$ -	
Interest	\$ -	
Land Tax	\$ -	
Legal Costs	\$ -	
Pest Control	\$ -	
Property Agent Fees (incl GST)	\$ -	
Letting Fees	\$ -	
Repairs & Maintenance	\$ -	
Special Building Write-off	\$ -	
Stationery, Telephone, Postage	\$ -	
Water Charges	\$ -	
Other:	\$ -	
Other:	\$ -	
Total	\$ -	
GAIN OR LOSS	\$ -	

Please include a breakdown of repairs & maintenance so we can determine deduction or asset (depreciation)

\$ -	
\$ -	
\$ -	
\$ -	
\$ -	Total (should match Repairs amount above)

Note that interest and repairs and maintenance are areas that are consistently under review by the ATO so ensure you have your documentation & receipts available should they be requested.

APPENDIX A

If there is an Investment Property involved...

It is all too common that investors spend money in their activity as an investor that is not claimed as a tax deduction simply because they are not aware of the possibilities.

Therefore, to help us get you the best possible tax result, please provide us with the following information:

Property Details

Full Address of the property

Details of the legal ownership as per the title records

Date of settlement

Purchase price

Please provide a Quantity Surveyors report for each property if you have not done so previously

Loan Details

Date loan taken out

Amount of loan

Over how many years is the loan contract?

Can we please have copies of any paperwork regarding the loan and the costs that the bank charged to create the loan? That is, we need to know about things like:

- Establishment fees
- Application Fees
- Mortgage Stamp Duty
- Lenders Mortgage Insurance
- Lenders Legal Costs
- Other costs and charges paid to the bank

Income

We will need to know the gross rental income for the year (before the agent deducts their fees & charges), plus

Any other income paid to you in relation to the property by the agent, the tenant, the insurance company...etc.

Costs

This is where things get really interesting and we have separated this section into obvious tax deductions and less obvious tax deductions...

APPENDIX B

Additional Information for you...

1. Obvious Tax Deductions

- > Advertising for a tenant
- > Agent's fees in relation to managing the property
- > Bank Fees on loan accounts
- > Body Corporate Fees
- > Cleaning of the investment property and its chattels
- > Council Rates
- > Gardening & Mowing Costs
- > Insurance
- > Interest Paid on the loans taken out to buy the investment property
- > Land Tax
- > Legal Fees re ongoing income matters
- > Pest Control
- > Quantity Surveyors Report for the depreciation available
- > Repairs to the investment property and its chattels
- > Telephone, Postage & stationery costs regarding your investment
- > Water Rates

2. Less Obvious Costs regarding your investment

- > Bank Fees on non-investment loans where the account was used to receive rent or pay the bills relating to the investment property.
- > Do you use the internet to keep in touch with your accountant, insurance broker and property manager? Do you use it to monitor the investment related bank and loan accounts? Or for other investment related activities? If so, we may be able to claim part of the costs. How much did you spend and what proportion of the time do you think that the internet was used in relation to your investments?