

returns@abacustaxation.com.au www.abacustaxation.com.au

P: 07 3208 9889 F: 07 3208 9442

Our Abacus Angels have made tax season even easier for you this time around with their new and improved EasyPack transforming in to a **FIVE Step** process! This form contains questions that will assist us prepare your income tax return more accurately and efficiently. This EasyPack is ideal for individuals who are on wages and receive interest and investment income (including investment properties).

Step 1

N/	Select	Your	Service

Service		Credit Card Upfront payment Price	Fee From Refund Price	
	Individual Income Tax Return		□\$160	□\$195
	Individual Income Tax Return + 1 Investment Property		□\$235	□\$270
	Additional Rental Property # additional Investment properties		□\$75 pe	r property
	Individual Income Tax Return + Sole Trader (Income earned under personal ABN)		□From \$230	□\$265
	Crypto Currency			☐From 110 Software plus \$175.00 per hour

Step 2 Personal Details

Title	□Mr	□Mrs	□Ms	□Miss	3	□Dr
Full Name						
Date of Birth						
Tax File Number						
Physical Address						
Postal Address						
Occupation						
Phone Number	M:		H:	SMS:	☐ Yes	□ No
Email Address						
Preferred Method of Contact	□Mobile		□Home	□Em	nail	
Marital Status	□Married	□Single	□De fa	cto	□Married	d
Spouse Full Name			Spouse DOB			
Reportable Fringe Benefits			Reportable Super			
Spouse Taxable Income						







	,			
Dependent Children?	□YES	□NO		
	Name:			DOB:
How did you hear about us?	□Google	☐Social Media	□Referral	□Other
If you are exped	cting a tax ref	und please prov	ide your ba	nk account details below
BSB				
Account Number				
Account Name				
				_
Step 3				Income & Deduction
	Ple	ase attach vou	r PAYG Pa	ayment Summaries to
Income and Other	VOL	•		y of the following income
information applicable to you:				
☐ Employment term	• •	•		
☐ Australian Govern		• •		•
□ Australian Annulπ streams	es/Superannua	ation lump sum	payments / S	Superannuation income
☐ Interest earned or	n bank account	·S.		
☐ Dividends receive				
☐Business income a		formation		
☐ Trust/Partnership distribution income				
☐ Capital Gains on s			property, sha	ares etc.
(Please provide pu				
☐ Foreign income (ii		•	vestments)	
☐ Investment prope	•	·		
Other income not already mentioned.				
Private health insurance end of financial year statement				
\square Crypto / Crypto trading?				





If yes select type.

□Electric

Deductions	Work	Work Related Travel		
Δ	Did you use your own vehicle for any of the following:			
		Work related travel other than home to work travel including travel to training directly related to your current position at work, client meetings, work-related errands and site to site travel OR		
Motor Vehicle		Work related travel between home and alternate workplaces OR		
	Work related travel between home and work, carrying bulky work-related tools or equipment due to there being no safe lockup at work.			
ls your Vehicle, an Electric Vehicle / Hybrid	□YES	□ NO		

 $\square \mathsf{Hybrid}$

		YES
	NO	Logbook percentage% Please complete the motor vehicle questions below.
Did you use a vehicle with either: • A carrying capacity over 1 tonne or;	Did you keep a logbook	NO We are able to claim up to 5000 kms.
* The capacity to carry 9 or more passengers	YES	Number of kilometres travelled for the Financial year. ———————————————————————————————————
	Please complete the motor vehicle questions below	



□Plug-in Hybrid

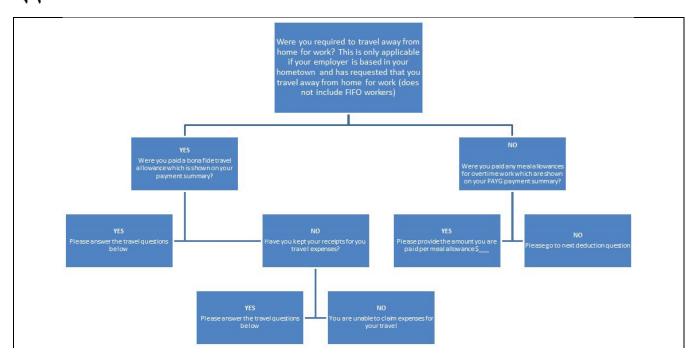


Motor Vehicle Expense Questions

Please only answer these questions if you have kept a logbook or if you use a vehicle with over one tonne carrying capacity or can carry 9 or more passengers.

Logbook Percentage	
Logbook reiceillage	
Vehicle make & model	
Vehicle registration number	
Vehicle purchase date	
Vehicle purchase price	\$ (if purchased in current financial year, please provide purchase invoice)
Vehicle financed? □YES □NO	If yes, please provide initial finance paperwork showing amount borrowed, interest and borrowing expenses
Fuel per week	\$
Vehicle Registration	\$
Vehicle Insurance	\$
Minor Services & repairs	\$
Major repairs or improvements (please list each separately)	\$ \$
Tolls per week	\$
Parking per week	\$
Other (please include description of each expense)	\$

Travelling away from home for work







Travel Expense Questions

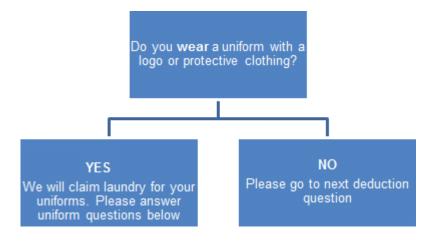
Flight details, dates and costs	
Taxi or public transport fares	
Meals (If you were paid a meal allowance provide the amount you were paid per meal allowance)	
Accommodation	
Other	

Deductions

Work related Uniforms



Protective Clothing and Branded uniforms



Did you purchase any branded uniforms or protective clothing?	□YES Please continue with the below questions	□NO Go to next deduction question section please
Steel cap Boots/Protective footwear i.e., non-slip shoes		·
Hi vis clothing		
Branded Uniforms		
Sunglasses/Protective Eyewear		
Hats:		
Other (Please list each item separately with a description:		





Deductions

Tools and Materials

Materials (please list each type of Expense, and a total)	
Tools (please list any tools costing over \$300 separately with a	
description of tool and purchase date)	

Deductions



Union and Membership Fees

If you paid union fees or renewed any memberships directly related to your current position at work, please list it their costs		
Description Cost		

Deductions



Professional Development or Training Expenses

If you paid for any seminars, courses, training or study materials directly related to your current position at work please list below		
Description Cost		





Deductions



If you are required to do work from home or you study work related of following questions	courses at home please answer the	
Were you are required to work from home, if yes how many hours per week would you spend doing work or work-related study from home?	☐Yes ☐ No hours per week	
	· ·	
Do you have a log or diary entries to record these hours?	☐Yes ☐ No	
How many weeks did you work from home during the Financial year?	Weeks worked this year	
If you're using the internet at home for work or work related study how much is your internet per month and what % is work related?	\$per month % work related use	
If you're using your phone for work or work related study how much is your phone per month and what % is work related?	\$per month % work related use	
Any office expenses such as printing or stationery?		
Any larger expenses (over \$300) such as computers, mobiles or hardware? If so, please list each item with the cost and work related %	Items \$ %	

	 •	
Ded		-



Donations

Did you make any donations during the financial year. Was it made to a registered gift recipient?	
Charity	Amount Donated

Deductions



Cost of managing Tax Affairs

If you paid a third party to prepare and lodge your tax return or assist with taxation matters other than		
Abacus Taxation Services during the financial year, please provide details below		
Firm Amount paid		





Deductions



Income Protection Insurance

If you paid income protection insurance details below	premiums outside of your superannuation fund please provide
Insurer	Amount paid
Deductions	Personal Super Contributions
Did you make additional, personal super	contributions to your super over the financial year.
If yes, have you lodge a notice of intent t	o claim, with you super?
Superannuation Fund	Amount to Claim
Deductions	Notes and Other Deductions





Step 4



Payment Options

Step 4	rayment options
	Cardholder Name:
Credit Card Processed prior to Lodgement	Card Number:
	Expiry Date:
	Confirm Amount:
	Cardholder Signature:
2) Fee from refund	I request to pay accounting fees from my tax refund. I understand I will receive the balance of my tax refund deposited electronically to the bank stated account below. I accept that I am responsible for providing correct information and that incorrect information may cause delays in receiving my refund money. I authorise you to direct the ATO to deposit my tax refund into the HPE Investment trust bank account and for the HPE Investment trust to deduct fees as per the table above. The balance remaining after deduction of the listed fees is to be repaid to my nominated bank account provided below. I acknowledge that: Should any variation arise with the Australian Tax Office (ATO) or my refund is forwarded to me in error, I allow Abacus Taxation Services to process payment of the outstanding fee as per the above table from my credit card which I have supplied the details for below. Abacus Taxation Services will inform me via SMS 1 business day prior to processing this payment from the credit card below. I further understand that in the event of me not repaying any outstanding amount, I am liable for collection costs and charges. I authorise all or part of the difference to be repaid from my nominated credit card supplied below. I authorise Abacus Taxation Service (76 159 626 396) to process this payment. I am the authorised signatory of the stated card. I agree not to cancel this authority until any amount outstanding is repaid. I also confirm that I have no amounts outstanding to the ATO or in relation to child support and/or Centrelink in my name. Privacy: I understand and authorise that my Tax File Number (TFN) may be used for the purposes of reconciliation in paying my fees from my refund. It is under no circumstances to be made public.
	Signature: Date:
3) Bank Deposit	Account name: Abacus Taxation Services
	BSB: 484 799 Account #:041 627 325
	Please use your full name as a reference or alternatively if you have been issued an invoice, please use the invoice number as a reference.





Step 5	Authorise & await our call or email
Part A Important Details on self-assessment	Australia's income tax system is based on <i>self-assessment</i> . This means that information you provide to the ATO is initially accepted as being true and correct when you lodge your tax return and other forms on which you disclose your tax liability. These forms may include activity statements and pay as you go (PAYG) instalment statements. The self-assessment system places the onus on you to ensure your tax return complies with taxation laws. You must show all your assessable income and that you claim only the deductions and offsets (formerly called rebates) to which you are entitled. Please sign below to acknowledge that you understand the self-assessment laws, as described above.
7	Signature: Date:
Part B Electronic Lodgement Declaration	This declaration is to be completed where a taxpayer elects to use the Electronic Lodgment Service. It is the responsibility of the taxpayer to retain this declaration for a period of five years after the declaration is made, penalties may apply for failure to do so. Privacy The ATO is authorised by the Taxation Administration Act 1953 to request your tax file number (TFN). We will use your TFN to identify you in our records. It is not an offence not to provide your TFN. However, you cannot lodge your income tax form electronically if you do not quote your TFN. Taxation law authorises the ATO to collect information and to disclose it to other government agencies. For information about your privacy go to ato.gov.au/privacy. Electronic funds transfer - direct debit Where you have requested an EFT direct debit some of your details will be provided to your financial institution and the Tax Office's sponsor bank to facilitate the payment of your taxation liability from your nominated account. Declaration I declare that: *the information provided to my registered tax agent for the preparation of this tax return, including any applicable schedules is true and correct, and;
	*the agent is authorised to lodge this tax return. Important: The tax law imposes heavy penalties for giving false or misleading information.
A	Signature: Date:
Part C Electronic Funds transfer consent	This declaration is to be completed when an electronic funds transfer (EFT) of a refund is requested and the tax return is being lodged through the electronic lodgement service (ELS). The declaration must be signed by the taxpayer prior to the EFT details being transmitted to the Tax Office. If you elect for an EFT, all details below must be completed.
	Important: Care should be taken when completing EFT details as the payment of any refund, including any family tax benefit, will be made to the account specified. Agent's reference number: 69464006 Account name: Abacus Taxation I authorise the refund to be deposited directly to the specified account In which I have provided in this document.
	Signature: Date:





Step 5	Authorise & await our call or email (Cont.)	
Part D Client Substantiation Declaration	purposes, toget Work, car and b OBTAIN ORIGI I have been adv I have also been provided is incorrequirements. I have all incommade in my incorrectelephone/mobil I advise that I have further, I have instructed	confirm that I have been advised requirement to demonstrate that an expense has been incurred for deductible her with satisfying the SUBSTANTIATION legislation in relation to: susiness travel expenses in addition, I have been informed by you of the need to NAL RECEIPTS carrying details of: (1) name of supplier, (2) type of goods/services purchased. (3) date expense incurred. (4) amount expressed in the currency it was incurred. (5) day it was made out. vised by you of the need to keep the written evidence for at least five years. In advised of the consequences and penalties which will arise if the information I have may be a tax and SUBSTANTIATION DOCUMENTS necessary to support all the claims one tax return. Where items are used for both business and private purposes, eg car, le, computer, library, etc, ave kept appropriate apportionment documents to verify my business usage claim. If you to prepare the return based on my specific instructions. I have read and return prepared for me. That I have disclosed to you all the income which I have earned. That all my income has been declared in the return That all the claims for deductions and rebates which have been included in the return are based on my specific instructions That while I did not have the receipts to substantiate the above claims at the meeting, I will make them available if required by the Tax Office. That you have clarified what written evidence will be required during an audit and penalties that may be applicable if incorrect claims are identified. (Cross out any of the above which are inapplicable)
A	Signature:	Date:

PLEASE EMAIL YOUR COMPLETED EASYPACK TO:

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