## **B - 2025 INVESTMENT PROPERTY INCOME CHECKLIST**

Taxpayer's Name:	TFN:	Ownership:	%
Taxpayer's Name:	TFN:	Ownership:	%
Address of Property:			
Date of acquisition:			
Date income first produced:			
Number of Weeks Property was re	nted from 01/07/24 to 30/06/25:		
Personal Use %:	GROSS INCOME: \$		

EXPENSES	AMOUNT	NOTES
Advertising		
Borrowing Expenses		
Cleaning		
Bank Charges		
Management Fees		
Depreciation*		
Electricity		
Garden – Yard work		
Insurance		Specify Company
Interest		Specify Lender
Land Tax		
Lease Expenses		
Legal and Accounting		
Office Supplies		
Pest Control		
Repairs • Carpentry		
<ul><li>Decorating</li></ul>		
Electrical		
<ul><li>Painting</li></ul>		
<ul><li>Roofing</li></ul>		
• Other		
Replacements		
Strata Title Fees		
Telephone		
Capital Allowances *		(4% or 2.5%) or \$
Rates (Council)		
Rates (Water)		
TOTAL		
Less % PERSONAL		
TOTAL EXPENSES		

- 1. \* (Please furnish your property's depreciation schedule as provided by your managing agent or property vendor or Quantity Surveyor)
- 2. Note-travel expenses can no longer be claimed (Unless the property is commercial use)

