# Investment Income Information

## Individual Tax Return 20__ (Enter year)

Please e-mail, fax or post this form back to our office **PRIOR** to your appointment:

**TO:** Freedom Accounting Group **FAX:** (02) 6041 6724

**ATTENTION:** **E-MAIL:** admin@freedomaccountinggroup.com.au

| CLIENT NAME: | | CLIENT SIGNATURE: | X |
|---|---|---|---|

## DIVIDENDS

| Company Name | Date Paid | Unfranked | Franked | Imputation Credits | TFN Credits |
|---|---|---|---|---|---|
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |
| | | $ | $ | $ | $ |

## UNIT TRUSTS

(Please bring or send to our office your Trust Tax Year Summary)

| Trust Name | Trust Income | TFN Credits | Imputation Credits | Capital Gains | Foreign Income | Foreign Tax |
|---|---|---|---|---|---|---|
| | $ | $ | $ | $ | $ | $ |
| | $ | $ | $ | $ | $ | $ |
| | $ | $ | $ | $ | $ | $ |
| | $ | $ | $ | $ | $ | $ |
| | $ | $ | $ | $ | $ | $ |

## INVESTMENTS SOLD / DISPOSED

| Company/Trust Name | Date Sold | Number Sold | Amount Received | Date Purchased | Number Purchased | Amount Paid |
|---|---|---|---|---|---|---|
| | | | $ | | | $ |
| | | | $ | | | $ |
| | | | $ | | | $ |
| | | | $ | | | $ |
| | | | $ | | | $ |
| | | | $ | | | $ |
| | | | $ | | | $ |
| | | | $ | | | $ |
| | | | $ | | | $ |
| | | | $ | | | $ |